

Vascular Surgery News

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An Easy Screening Test Could Save Your Life

By Matthew Alef, MD, Director of the David Pilcher Vascular Lab

Most people have heard of heart disease and are aware of the importance of prevention, detection, and treatment and the huge impact it has on people's health. But they know very little about vascular disease outside the heart.

An estimated 20 to 30 million Americans are at risk for various vascular diseases, including carotid artery disease (a cause of stroke), peripheral arterial disease (PAD), and abdominal aortic aneurysms (AAA).

Carotid artery disease can cause strokes that are the leading cause of disability and the third leading cause of death in the United States. AAA is the 13th leading cause of death. In fact, vascular disease outside the heart causes almost as much death and disability as heart disease, and more than any cancer.

Early Detection is Crucial. In most cases, with early detection, vascular disease can be treated effectively. Carotid disease, PAD, and AAA can all be diagnosed with a simple Ultrasound that is both non-invasive and painless.

With early detection it is possible that lifestyle changes and simple medical therapy alone can prevent the progression of disease. Thus, allowing the patient to avoid ever requiring surgery.

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Dr. Georg Steinthorsson named Division Chief

We are pleased to announce that Dr. Georg Steinthorsson will serve as the new Chief of Vascular Surgery.

Dr. Steinthorsson is a graduate of the University of Iceland Medical School and completed his general surgery residency at Dartmouth Hitchcock Medical Center. He then went on to complete his vascular fellowship at Yale-New Haven Medical Center. After spending three years in practice as a faculty member at the University of Iceland Medical Center, Dr. Steinthorsson joined our faculty in 2002. We have all benefited from his clinical expertise where he is one of the only surgeons in the area to specialize in the treatment of Thoracic Outlet Syndrome.

Until recently, Dr. Steinthorsson also held a leadership position in the David Pilcher Vascular Lab.



Dr. Daniel Bertges to Head Fellowship Program

The Division of Vascular Surgery is pleased to announce the ACGME accreditation of the first surgical fellowship program at the University of Vermont Medical Center.

The Vascular Surgery Fellowship will consist of 2 years of advanced training for residents who have completed 5 years of general surgery residency. Training will include the complete range of clinical experience from the outpatient clinic to inpatient service and provide a wide variety of open and endovascular surgery as well as a comprehensive noninvasive vascular laboratory experience. The addition of a fellow to the vascular team will enhance our patient care, teaching and research. As post-graduate 6-7 year trainees fellows will add a level of clinical experience that will further enhance patient evaluation and management. Fellows will participate in teaching of medical students and more junior residents and engage in clinical research projects within the division.

We are currently accepting applications for a position to start in July of 2016. Dr. Daniel Bertges will serve as Program Director.

Vascular Surgery Hybrid OR

By Matthew Alef, MD

A paradigm shift has occurred in recent decades in the treatment of vascular disease. Diseases once treated exclusively by traditional open surgery are now increasingly being approached via percutaneous and hybrid techniques. Neither the classic operating room nor the conventional angiography suite is equipped to provide these capabilities to the modern vascular surgeon. Completed in 2013, Vermont's first and only hybrid operating suite was completed at The University of Vermont Medical Center. Fewer than two hundred of these suites exist nationwide.



Dedicated hybrid vascular operating suites allow the vascular surgeon to provide comprehensive care to their patients. These suites provide the benefit of a sterile environment, and the possibility of performing hybrid procedures and conversions when necessary. Moreover, angiography immediately before treatment gives real-time anatomical information, and after treatment provides quality control. State-of-the-art imaging equipment provides the necessary visualization and information to perform complex minimally invasive procedures on the arteries and veins of the body. Additionally, having the ability to perform imaging studies in the same room eliminates the need to move patients during a procedure and reduces the risk of infection. Patients also benefit from having shorter procedure times, reduced need for ICU care, shorter hospital stays, and faster recovery times.

An Easy Screening Test Could Save Your Life

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WHO SHOULD BE SCREENED?

- Anyone that is asymptomatic and over the age of 40 is a candidate for the Vascular Wellness Screen. Other well recognized risk factors include:
- Diabetes
- High blood pressure
- Smoking
- High blood cholesterol
- Family history of atherosclerotic problems and circulatory problems

WHAT DOES IT COST?

Insurance does not cover routine screening for many patients. The self-pay cost to the patient is \$250, which includes an assessment of the carotid arteries, abdominal aorta, and the lower extremities.

Call the University of Vermont Medical Center, David Pilcher Vascular Lab to schedule an appointment
(802) 847-4548

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Meet the Vascular Surgery Staff

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Hannah Raftery

Front Desk: Cathy Collins, Pat Ruhl

Nurse Practitioners: Janet McSorley, Amy Sitterly

Nurses: Beth Nutter-Gamache, Kim Barber, Jessica Beebe

Medical Assistant: Ryan Leithead

Surgery Patient Coordinator: Kathy Howard