



## FEBVS LOGBOOK

### INTRODUCTION

In the Logbook open vascular and endovascular procedures for which the applicant is the principle operator are recorded individually. Although for privacy reasons patient identification should be removed, all procedures should be traceable with the possibility to be verified (e.g. date of procedure and patient gender and initials).

### Definitions

- A. An open vascular surgical procedure is a procedure that requires surgical exposure of one or more arteries or veins for:
1. The correction of arterial or venous diseases, deformities or defects
  2. The repair of arterial or venous injury
  3. The treatment of other diseases requiring arterial or venous reconstruction

#### Notes:

- *Not all open vascular procedures that meet the terms of this definition can be included in the Logbook (refer to further specifications below).*
- *A single vascular operation can consist of more than one procedure and these can be counted separately if this is considered appropriate. In this case, the individual procedures must be entered in the Logbook consecutively and they must be clearly marked to entail a single vascular operation.*
- *Thoracic outlet decompression including excision of cervical and/or first ribs, sympathectomy, amputation (parts) of limbs, excision and skin grafting of leg ulcers are acknowledged as an integral part of vascular surgery but should **NOT** to be recorded in the Logbook since these are not “open surgery” as defined above.*

- B. An endovascular surgical procedure is a procedure that requires the use of guide wires and/or catheters in one or more arteries or veins and fluoroscopy guidance for:
1. The correction of arterial or venous diseases, deformities or defects
  2. The repair of arterial or venous injury
  3. The treatment of other diseases requiring guide wire/catheter manipulations in arteries or veins

#### Notes:

- *Not all endovascular procedures that meet the terms of this definition can be included in the Logbook (refer to further specifications below).*
- *A single endovascular intervention can consist of more than one procedure and these can be counted separately if this is considered appropriate. In this case, the individual procedures must be entered in the Logbook consecutively and they must be clearly marked to entail a single endovascular intervention.*



- C. The essential steps of an open or endovascular vascular procedure are
1. Exposure or acquisition of access
  2. Control or maintenance of access
  3. Final diagnosis
  4. Vascular intervention (removal, implantation, deformation, repair, replacement or reconstruction)
  5. Confirmation of intended result
  6. Closure
- D. The principle operator for both open and endovascular procedures is the person who performs the majority of the essential steps of the procedure.
- E. Open vascular and endovascular surgical procedures are both classified into three levels, based on how much specific training or experience would be required for a typical procedure of its kind:
- I. Basic: procedures requiring little or no specific training or experience
  - II. Intermediate: procedures requiring specific training or experience
  - III. Advanced: procedures requiring advanced training or experience

This results in 6 separate sheaths listing basic, intermediate and advanced open vascular procedures and basic, intermediate and advanced endovascular procedures. The most advanced level of the procedure performed is counted (i.e. if carotid endarterectomy is performed the vascular exposure cannot be counted separately as a basic procedure: only the class III procedure is scored).



## **OPEN VASCULAR PROCEDURES**

### **I. BASIC**

- Embolectomy/thrombectomy with or without patch closure (excl. mesenteric and renal)
- Elements of arterial procedures: i.e. one anastomosis or arterial exposure without further reconstruction
- Miscellaneous:
  - Ligation (e.g. of traumatic bleed)
  - Suture closure (e.g. false aneurysm)

### **II. INTERMEDIATE**

- All arterial procedures not specified as class I or III, including:
  - Bypass (anatomic or extra-anatomic), endarterectomy (open or remote), patching, interposition, or other reconstruction of stenotic, occlusive, or aneurysmal disease at the following levels: iliac, femoral, or popliteal and any sequential combination of these levels
  - Access surgery (e.g. cimino, gracz, or loop arterio-venous fistula) (excl. catheters)

### **III. ADVANCED**

- Bypass (anatomic or extra-anatomic), endarterectomy, patching, interposition, or other reconstruction of stenotic, occlusive, or aneurysmal disease of supra-aortic, arm, hand, thoracic aortic, juxta/suprarenal abdominal aortic, infrarenal aortic, tibial, or pedal arteries and any sequential combination of these levels
- Carotid endarterectomy or other carotid artery surgery (glomus tumors)
- Mesenteric or renal artery procedures (incl. embolectomy/thrombectomy)
- Venous reconstructions (except all superficial venous and perforator incompetence procedures)
- Vascular reconstructions for graft infection
- Microvascular repair of small blood vessels
- Porta-systemic shunts
- Renal, liver, or pancreas transplantation



## **ENDOVASCULAR PROCEDURES**

### **I. BASIC**

- Diagnostic (percutaneous) arteriography (excl. intraoperative bypass flush angiograms)
- PTA with or without stent placement of stenotic (not occlusive) lesions at the following levels:  
infrarenal aortic, iliac, femoral, popliteal, tibial, or pedal (or transition zones)
- Miscellaneous:
  - Vena cava filter placement

### **II. INTERMEDIATE**

- PTA with or without stent placement of stenotic lesions at all other levels as specified in Class I (excl. carotid artery stent placement)
- PTA with or without stent placement of any occlusive lesion except tibial or pedal arteries
- PTA with or without stent placement of access surgery
- Fluoro-assisted thrombectomy (open or percutaneous)
- Thrombolysis
- Miscellaneous:
  - Coil-embolisation / detachable balloons, etc
  - Vena cava filter retrieval

### **III. ADVANCED**

- PTA with or without stent placement of occlusive lesions of tibial or pedal arteries
- Carotid artery stent placement
- Any kind of stentgraft anywhere (EVAR, fEVAR, TEVAR, covered stent for SFA occlusion, etc)
- Miscellaneous:
  - TIPPS
  - Neurointerventions



<b>OPEN</b>	<b>NUMBERS</b>	<b>REQUIRED</b>
I		20
II		40
III		20
<b>Total</b>		<b>80</b>
<b>ENDO</b>	<b>NUMBERS</b>	<b>REQUIRED</b>
I		20
II		20
III		10
<b>Total</b>		<b>50</b>



**OPEN / ENDOVASCULAR PROCEDURE I / II / III**  
**(all 6 forms separate for every training location)**

**NAME OF THE CANDIDATE (print):**  
**SIGNATURE (compulsory)**

**HOSPITAL:**  
**TOWN:**

**COUNTRY:**

**DIRECTOR TRAINER PROGRAMME (print):**  
**SIGNATURE (compulsory)**

**MEDICAL ADMINISTRATOR (such as Medical director) (print):**  
**SIGNATURE (compulsory)**



**PLEASE COPY THIS PAGE SIX TIMES, ONE COPY FOR EVERY PROCEDURE**

	DATE	PATIENT		PROCEDURE
		INITIALS	GENDER	
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European Union of Medical Specialists

**SECTION AND BOARD OF VASCULAR SURGERY**



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