

Entry and Exit Strategies

It all starts with access! With the increasing complexity of endovascular and hybrid procedures over the past several years, physicians have resorted to increasingly creative arterial puncture sites to initiate or facilitate procedures. Routes such as transpedal, peroneal, popliteal, radial, and collaterals have been such a routine part of interventional scenarios that special devices are emerging to facilitate these approaches. There has been a similar explosion in the availability and use of access closure devices, allowing quicker hemostasis and earlier return to normal activities. As this issue of *Endovascular Today* will demonstrate, the year in access has not been static.

To start, Amish Patel, MD; Kevin “Chaim” Herman, MD; Vivek V. Patil, MD; and Aaron M. Fischman, MD, provide a tutorial on optimizing transradial access. As has already been demonstrated in the coronary space, the technique has the potential to reduce complications and increase patient comfort, although there are challenges to overcome to ensure the access route is effective.

William Wu, MD; Kelly Moore, BSN; Albert Wu, MD; and Michael Wholey, MD, next present their take on the current question of transpedal access: Is this an innovative technique to be used regularly or only as an alternative method to be employed when necessary?

The use of hand-held transcutaneous ultrasound to guide vascular access is growing as a popular technique, thanks to its potential to reduce patient and operator exposure to radiation and allow optimal vessel puncture. James D. Joye, DO, shares his revelation about upgrading to ultrasound and offers a brief how-to for incorporating this technology into your practice.

As in the past, the Editor’s Challenge is a unique format in which I have presented four complex cases to an esteemed group of colleagues to gain their perspectives on access

and case management. Mark Fleming, MD; Mark Fleming, MD; and J. Michael Bacharach, MD, have risen to the challenge and provided their expert insights. We hope our readers will be engaged with this feature and think about how they, too, would approach these clinical scenarios.

Innovation in the access and closure field continues on, particularly as lower-profile devices and alternative access sites grow in popularity. Thomas J. Ward, MD, and Joshua L. Weintraub, MD, outline the latest develop-

ments in vascular closure devices—both the most prevalent devices in current use and those that are still in the pipeline.

Finally, Robert M. Bersin, MD, outlines some of the potential patient and device-related risk factors that can lead to access site complications.

Outside of our access and closure features, Alik Farber, MD; Matthew T. Menard, MD; and Kenneth Rosenfield, MD, describe the goals of BEST-CLI, an innovative trial involving multiple societies and agencies to gain a better grip on the most effective treat-

ment for critical limb ischemia.

In our monthly Physician Counsel installment, Sunshine Act experts Steven J. Cagnetta, Esq, and Steven K. Ladd reveal the staggering amount of duplicative entry errors that occur in the Open Payments reporting and explain how to make sure that your reports are accurate.

Katharine L. Krol, MD, provides further updates to 2015 coding changes, focusing on the nuances of codes for stent placement in the lower extremities for nonocclusive disease and in the innominate artery.

Finally, we wrap up the issue with an interview with esteemed interventional radiologist Claudio Schönholz, MD, who discusses carotid stenting, treating vascular trauma cases, and his work with Juan Parodi, MD, on the first stent graft and how it went on to shape his career.

I hope you will enjoy this issue! ■



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