

# In the Office

Office-based practices have become increasingly attractive in recent years thanks to many benefits unique to this setting, including the potential to provide efficient, cost-effective care while building more direct relationships with patients. Unfortunately, the uptick in office-based labs (OBLs) has also been plagued with controversy surrounding reimbursement for procedures. In this issue of *Endovascular Today*, we aim to shed light on the best practices for providing safe, quality care to patients while still enjoying the benefits of private practice.

To start, my colleague, John Munn, MD, and I discuss the need for ethical collaboration between industry and physicians to deliver appropriate treatment.

Our resident coding expert, Katharine Krol, MD, and Gerald Niedzwiecki, MD, then give a status update on the economic viability of freestanding centers, a continuing concern for practice owners as CMS's Proposed Rule has previously suggested deep cuts to reimbursements for procedures performed in these centers.

Two years ago, the Outpatient Endovascular and Interventional Society was started by a multispecialty group of physicians dedicated to establishing practice standards in the OBL space. Sam Ahn, MD, shares the group's latest initiatives, including accreditation recommendations to encourage quality care in all freestanding centers. John Blebea, MD, dives more specifically into accreditation for venous centers, detailing why physician certification alone is not enough.

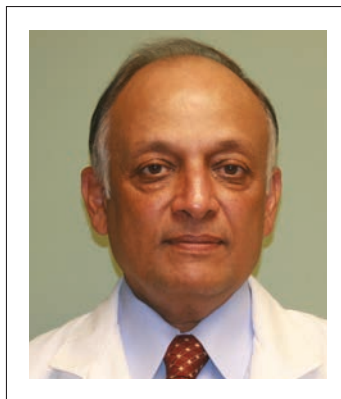
Jose I. Almeida, MD, provides an overview of the available treatment technologies for office-based care of both

deep and superficial venous disease. Next, Dr. Almeida, Thomas W. Wakefield, MD, and Lowell S. Kabnick, MD, explain the new Vascular Quality Initiative Varicose Vein Registry that was established this year by the American Venous Forum and Society for Vascular Surgery to improve care in this arena.

The increasing refinement of access techniques has vastly improved the treatment offerings we can provide in an OBL setting. Daniel Johnston, MD; Mark Rummel, MD; Syed Alam, MD; Dr. Munn; and I share clinical insights on retrograde tibial/pedal and radial access with the currently available tools.

Finally, two practice owners, Raju Gandhi, MD, and Mohammed Margni, MD, walk us through their decision-making process when they selected imaging systems for their OBLs—the hallmark of providing quality vascular interventions.

We hope that this issue provides insights on a range of topics that are beneficial to you, whether you are a seasoned practice owner or are just in the early stages of considering branching out on your own. We are optimistic that office-based vascular medicine continues to become more sophisticated and standardized, and stand as an efficient way to care for our patients. If you have other office-based subjects you would like us to cover in future issues of *Endovascular Today*, email us at [evteditorial@bmctoday.com](mailto:evteditorial@bmctoday.com). ■



Krishna M. Jain, MD  
Guest Chief Medical Editor