



THE AMERICAN BOARD OF VENOUS & LYMPHATIC MEDICINE

VLM FELLOWSHIP DEVELOPMENT UPDATE

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The Need for and Approach to Improving VLM Education

In the article [ABVLM: Vision and Value](#) (August 2016) we reviewed evidence, including real world registry data, that suggests that current training opportunities in VLM are generally inadequate, regardless of primary specialty.

With this challenge in mind, the ABVLM embarked several years ago upon a three-step collaborative, multi-specialty consensus process to establish educational standards for venous and lymphatic medicine, so that patients receive care from clinicians who are well trained.

The first step involved development of a consensus-driven multi-specialty based Core Content. The “Core Content for Training in Venous and Lymphatic Medicine,” endorsed by the ACP and the AVF, was published in *Phlebology* in October 2014. It is freely available at <http://CoreContent.ABVLM.org>.¹

The second step involved developing program requirements which identified the knowledge and skills that must be mastered during training and serve as a guide for a one-year fellowship training program. These “[Program Requirements for fellowship education in venous and lymphatic medicine](#)”² reflected the work of experts from specialties including cardiology/interventional cardiology, dermatology, family medicine, interventional radiology, vascular medicine and vascular surgery.

Step three involves implementation of the Core Content and Program Requirements into educational programs in the area of VLM. The ABVLM, to promote and support the development of these one-year fellowship programs, created a Fellowship Accreditation and Oversight (A&O) Committee and a Fellowship Development Committee.



Fellowship Accreditation and Oversight (A&O) Committee

The ABVLM A&O Committee, chaired by Dr. Mark Meissner, has:

- Developed an application process and materials
- Created and implemented an application review process, and
- Designed oversight processes and procedures.

To date the A&O Committee has reviewed and approved an application for a VLM fellowship to be offer by Center for Vein Restoration (CVR) with Dr. Peter Pappas as the fellowship director. A second fellow position has also been approved for 2017 at the Stony Brook program, under the direction of Dr. Tony Gasparis. In addition to these three fellow slots, Dr. John Fish at the University of Toledo Medical School has an application under review by the A&O Committee and Board.

So, while there had been only 1 VLM fellowship in place for years, we anticipate having 4 fellowship positions in the United States starting July 2017. We hope to see an additional 2-3 programs/fellowship positions in 2018, with growth continuing in the following years.

Fellowship Development Committee

The goal of the ABVLM Fellowship Development Committee (FDC) is to foster interest in offering fellowships and providing information and resources to potential program directors (PDs) and programs. The committee has developed a [toolkit](#) to assist PDs, with topics including:

- a. How to delineate the value of VLM fellowships?
- b. Why start a program?
- c. Overview of the Program Requirements
- d. Understanding the required steps
- e. Enlisting departmental and institutional support
- f. Information and resources regarding funding options
- g. Fellow appointments: attracting high quality candidates

The FDC developed and sent out a survey to gather information about interest and suggestions regarding potential fellowships. The response rate was 38%. The data obtained is being reviewed, and will help focus our efforts in fostering the development of VLM fellowships. Thank you to those who participated.



Benefits of Venous and Lymphatic Fellowships

The ABVLM believes there are vitally important educational and health care system benefits that would occur if one-year fellowship programs in venous and lymphatic medicine were developed.

Fellowships would:

1. Standardize training
2. Graduate better educated physicians
3. Foster Academic development
 - a. Young physicians can be a stimulus for scientific inquiry
 - b. Development of future faculty
 - c. Development of future leaders
4. Improve the healthcare system
5. Improve patient care

Fellowships and Specialty Recognition

It is important to recognize no specialty or board was ABMS-recognized at its inception, and the path to such recognition is typically long and very political. It is instructive to look at recent examples of free-standing non-ABMS boards that became ABMS-recognized. Table 1 compares looks at three specialties who have recently become ABMS-recognized (Addiction Medicine, Hospice & Palliative Medicine, and Sleep Medicine), and two which are free-standing (Vascular Medicine, VLM). The table lists:

- The number of years between AMA recognition of the field and ABMS recognition for those specialties now ABMS-recognized, or simply the number of years since AMA recognition for those not currently recognized
- Membership at the time of ABMS recognition or currently
- Years since the first certification exam was delivered at the time of ABMS recognition or currently
- Fellowships in place at the time of ABMS recognition or currently



Table 1: Comparison of selected subspecialties at the time of ABMS recognition (Yellow) vs. not currently recognized (Green)

Specialty	AMA Recognition	# Society Members	Yrs Since 1 st Exam	# Fellowships
Sleep Medicine	12	4000	29	40
Hospice/Palliative	?	3000	10 (22 after accred)	57
Addiction Medicine	25	3400	33	25
Vascular Medicine	18	400	7	16
Venous/Lymphatic	10	2000	7	1

A review of this data suggests VLM is early in the process, with the most obvious “deficit” being the number of fellowships.

Conclusions

It is the mission of the American Board of Venous & Lymphatic Medicine “to improve the quality of medical practitioners and the care of patients related to venous disorders through rigorous testing, reliable certification, and improved educational standards.” To that end, the ABVLM has created what we believe is the most comprehensive and properly constructed and scored VLM examination in the world. The ABVLM has used a collaborative consensus process to develop the most thorough and up to date Core Content and Program Requirements documents in existence, to serve as the foundation from which one-year fellowships can be created. These initiatives will naturally lead to more knowledgeable practitioners, and pave the way towards the VLM specialist of the future, a physician with a level of training that simply does not exist today. This is the best way to ensure patients receive quality care from physicians well trained in the field.

The fate of a specialty ultimately depends on its acceptance by the medical community. VLM has many of the attributes associated with a true subspecialty. There have been major advancements in the diagnosis and treatment of venous disease. Venous medical societies exist around the world. A growing number of conferences are devoted to venous and lymphatic disease and there are multiple journals dedicated to venous and lymphatic medicine. To advance knowledge, skills, and outcomes in a meaningful way, we must think long-term, with the objective to strengthen and standardize venous and lymphatic curricula and training to develop qualified comprehensive specialists. We believe one-year VLM fellowships will help address this gap, which is critical to achieving true subspecialty status, and to ensuring patients receive care from clinicians who are well trained.



References

1. Zimmet SE, Min RJ, Comerota AJ et al. Core content for training in venous and lymphatic medicine. *Phlebology*. 2014 Oct;29(9):587-93.
2. Comerota, AJ, Min RJ, Rathbun SW, et al. Program requirements for fellowship education in venous and lymphatic medicine. *Phlebology*. First published August 17, 2016.