

1. Name of Institution

Bristol Bath Weston Vascular Network

2. Names of the Vascular Surgeon and Interventional Radiologist jointly applying for training centre

Professor Robert Hinchliffe and Dr Neil Collin

3. Statement of collaboration between interventional radiology and vascular departments (max 200 words)

Vascular surgery and interventional radiology (IR) work as a team. We have joint meetings and have a track record of training both vascular and IR trainees. We perform EVAR together, have joint MDTs and clinical governance. There is a combined clinical research program and away days for team building. The development of a vascular network across Bristol, Bath and Weston has focussed expertise and led to the development of a 24 hour, 7 day a week modern vascular and endovascular service. The network provides comprehensive care to patients with a wide range of vascular disease incorporating specialist services for the South-West of England including vascular malformations and complex aortic disease. Indeed, in some areas of the endovascular service such as thoracic aortic and thoraco-abdominal aortic disease the surgical team provide the lead whereas in others such as endovascular PAD management the IR team take the lead. The team in Bristol have broken down traditional boundaries between the specialties. IR consultants are involved in the hybrid management of vascular disease and in direct clinical care (eg joint vascular malformation clinics). The latest consultant vascular surgery appointment has a dedicated list in peripheral artery endovascular intervention.

4. Record of training in endovascular surgery (max 200 words)

The unit has a strong record in endovascular training. Our current vascular trainee (endovascularly naive) has been immersed in a full time endovascular training programme delivered by the IR team. He is involved in all aspects of endovascular management. This includes training in imaging, ionising radiation safety, planning endovascular procedures and basic endovascular techniques (safe arterial access and intervention). The trainee continues to be involved in hybrid surgery / emergency surgery work but is an integrated IR team member.

The unit is the main teaching hospital for the training of IR and vascular surgery trainees within the Seven Deanery and South-West England. There is a powerful legacy of endovascular training with 5 of the currently appointed vascular surgery consultants (including the complex endovascular aortic lead) having received endovascular training from within the IR team.

There are a large number of training opportunities within the network. There is a dedicated vascular surgery theatre (10 sessions/week), one hybrid suite (10 sessions/week) and 2 angiographic endovascular suites. There are additional day case endovascular lists at the RUH and BRI and an endovenous list at NBT. There is currently only one specialist vascular trainee for 10WTE vascular consultants.

5. Number of index endovascular procedures undertaken in the preceding 12 months (iliac PTA, infra-inguinal PTA, endovascular repair of infra-renal aneurysms, endovascular repair of aortic lesions requiring fenestrated or branched grafts, endovascular repair of thoracic aorta)

1200 angio procedures

50 infrarenal EVAR

20 TEVAR

40 f-EVAR or branched EVAR

400 dialysis fistuloplasties

6. Statement of endovascular training to be offered at the institution (max 400 words)

The Bristol, Bath, Weston Vascular Network has a lot to offer those wishing to train in endovascular techniques. We currently provide trainees with a basic introduction to achieve the necessary competencies to become a consultant vascular surgeon. However, our team working offers a lot more, especially to those seeking to develop focussed areas of endovascular practice. Principally, we can offer a comprehensive package of training in the endovascular management of (complex) aortic disease and peripheral artery disease.

The unit is able to provide a training package in all aspects of endovascular aortic disease management (imaging, procedural, post-operative care). The endovascular aortic service is delivered by all members of the vascular surgery and IR teams, who provide a 24/7 endovascular service for EVAR of ruptured AAA. More complex endovascular management of thoracic and thoracoabdominal aortic pathologies are also undertaken. The network has joint MDTs and hybrid/endovascular cases with the cardiac surgery team led by Mr Rajakaruna. Combined cases with cardiac surgery are provided in a dedicated hybrid OR at the Bristol Heart Institute. Bristol receives complex aortic pathology including aneurysms and dissections from the whole of the SW of England (3,500,000 population).

The trainee has an opportunity to be exposed to a variety of (complex) endovascular techniques used in lower limb salvage. PAD and the diabetic foot is a significant clinical and research focus of the vascular network. The trainee will have exposure to the assessment of the diabetic foot and non-invasive vascular investigations (TcPO₂, laser Doppler, toe pressure). Specifically the trainee will develop experience in the interpretation of cross-sectional imaging in patients with distal and calcified peripheral artery disease. The network provides both day case procedures for more straightforward endovascular interventions (provided by the non-arterial vascular centres at Bristol Royal Infirmary and RUH, Bath). It is an important learning opportunity to be involved in the delivery of day case endovascular surgery outside of the major arterial centre. In the major arterial centre the trainee will be exposed to and have the opportunity to learn a variety of complex endovascular interventions for limb salvage. These include both hybrid and purely endovascular techniques in a dedicated vascular hybrid theatre and two endovascular suites.

The trainee will be clinically supervised by Professor Robert Hinchliffe / Dr Neil Collin. They will become part of the collaborative team and in addition to clinical activity will be expected to contribute to MDT meetings, audit and research.

7. Schematic timetable for Fellowship

Separate 1:6 vascular surgery on-call

If IR trainee – could be accommodated on to the middle grade IR rota

	Monday	Tuesday	Wednesday	Thursday	Friday
am	Endovascular list - PAD focus (VS led)	Endovascular list (IR led)	MDT (+governance / research)	Day case angioplasty (RUH / BRI alt)	Endovascular list (IR led)
lunchtime	X-ray meeting (vascular)			X-ray meeting RUH / BRI) + complex aortic MDT	
pm	Audit / research	Preparation for MDT / planning complex aortic stent-grafts	Hybrid endo list (2 sessions) or specialist vascular diabetic foot clinic	Endovascular list (IR led) or Endovenous intervention	Free (or endovascular emergency list)