Welcome to the third edition of the Society for Vascular Surgery’s Vascular Education and Self-Assessment Program (VESAP3). Specifically designed to meet the Maintenance of Certification requirements of the Vascular Surgery Board of the American Board of Surgery, VESAP3 is an invaluable aid in preparing for the Qualifying, Certification, or MOC examinations in Vascular Surgery, or simply to remain current in the specialty of vascular surgery. Residents and fellows will find it a useful study aid for their ABSITE and VSITE examinations, and interventional cardiologists, radiologists, vascular medicine specialists and allied healthcare professionals focusing on vascular diseases can use the program to keep abreast of the current practice of vascular surgery and endovascular therapy.

We have significantly expanded the scope of VESAP3. The ten modules cover the broad range of vascular care including vascular medicine, vascular lab, and radiation safety. In total, VESAP3 consists of more than 500 multiple-choice questions, many with associated images, on the evaluation and management of patients with a variety of vascular disorders. Each question is followed by a review of the topic in question, including key references. The VESAP’s content domain mirrors the Vascular Surgery Board’s Qualifying and MOC examinations.

The questions, answers, and discussions in this self-assessment program were authored by more than 70 volunteers, and are based on current published medical literature. The editorial board members have attempted to provide an educational experience relevant to the practice of vascular surgery. VESAP®3 would not have been possible without the spirit of volunteerism present in the ten associate editors and dozens of question item writers who contributed their time and expertise to the project.

The sole purpose of the Vascular Education Self-Assessment Program (VESAP) is educational. It is not intended to be used for hospital credentialing, residency program advancement, certification to practice, or point of care, other than its role in fulfilling the self-assessment requirement for Part 2 of the American Board of Surgery's Maintenance of Certification.

VESAP3 is designed to be largely clinical in focus and supported by conclusive literature whenever possible. The editorial board adjudicated all questions and discussions, though not always with unanimity of opinion. Such is the nature of a program like VESAP3, which is designed to reflect current clinical practice and judgment, not just recitation of fact. Some information may be controversial and new advances may invalidate certain statements and answers.

Further, while every effort was made to insure that suggested drug selections and dosages are in accord with current recommendations and practice at the time of publication, the clinician is encouraged to read the package insert for
each drug prior to administration to verify indications, dosage, and added warnings and precautions.

It turns out that “current clinical practice” is not as uniform as one might like to think, largely because of variations in the rate of adoption of new technology and lack of level 1 scientific evidence for all possible options. Whenever therapeutic approaches are evolving, there will always be debate as to how and when to apply new technology and today’s correct answer will perpetually be at risk of being tomorrow’s popular, but incorrect selection.

Therein lies the beauty of a program such as VESAP3, for which credit is awarded for completing the exercise, learning from that process, and demonstrating that knowledge acquisition by attaining a requisite minimum score on the exam, even if not on its initial taking. The value is in the process of consideration of the clinical scenarios and debate, internal or external, the appropriate treatment.

In that regard, you are encouraged to enjoin your colleagues in discussion about VESAP questions, as VESAP3 is above all else a program designed to stimulate thinking and discussion about traditional and evolving approaches to the management of vascular disease. Debate over the merits of the possible choices is an invaluable part of that process. With that in mind, VESAP is a dynamic program, with new editions to be produced every three years, both to stay current with a rapidly changing field, and to be in harmony with the American Board of Surgery Maintenance of Certification program requirements. Data from VESAP may be used for research purposes to assess the psychometric performances of this self-assessment program.

We hope you enjoy the third edition of VESAP and look forward to serving your ongoing educational and MOC needs with future editions to come.

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