



## Anatomy of a Branding Campaign: Making Vascular Surgery More Visible

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By Beth Bales

Members asked; SVS listened. The Society for Vascular Surgery (SVS) has launched a Branding Toolkit to help its members brand the specialty in order to elevate and differentiate their practices.

This first set of branding tools tells referring physicians what vascular surgeons do and why they are critical partners when it comes to treating their patients with circulatory disease.

With the toolkit, vascular surgeons also can emphasize to other healthcare professionals that surgery is only part of the repertoire of treatment they offer.

The tools, to help members communicate about the comprehensive care they provide, have been in development for more than two years, said Joseph Mills, MD. He led the branding effort as chair of the Public and Professional Outreach Committee.

SVS members identified branding as their No. 1 initiative in 2018, he said. Subsequent research identified confusion among patients as well as other physicians with respect to which medical specialty best treats vascular issues and highlighted the misconception that surgery is the only treatment modality vascular surgeons offer.

To address these issues, the branding effort emphasizes two main concepts, said Mills: “We provide comprehensive care, and surgery is only part of our story. No one else providing components of vascular care is trained and capable of offering all of the available options and long-term follow-up care that we can do.

“No one wants to get rid of the essential fact that we’re surgeons—but we’re not only that. We don’t just solve patients’ acute problems. We provide care for their vascular disease for the rest of their lives.”

In many instances, he noted, “we are viewed as highly technical surgeons who are relied upon for episodic interventions.

“So to brand ourselves properly, the key message going forward is that we must do what we say we do, which is to provide comprehensive and longitudinal care.”

“We’ve worked hard to figure out how to create a practical toolkit with easily downloadable branding materials that can

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Published on Society for Vascular Surgery (<https://vascular.org>)

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be customized so that each member can use them,” said Kenneth M. Slaw, PhD, SVS executive director. “And we’ve created the toolkit in such a way that members, as they use it, will continue to build it and improve it going forward.”

Members can personalize elements of the toolkit by adding their practice name, logo, contact information and even photos to the materials. They can download the materials immediately and/or order professionally printed materials through an online system. Branding videos—including a two-minute state-of-the-specialty video offering a broad overview of vascular surgery and five shorter snippets—can be used on member websites and on their social media feeds.

### **Vascular conditions**

Condition-specific fliers have also been created to help members educate referral sources about the most appropriate care and referral for key vascular conditions, currently including abdominal aortic aneurysms, chronic limb-threatening ischemia and diabetic foot ulcers. “We picked conditions that were common and for which we have recently updated guidelines,” said Mills.

Additional condition-specific fliers are being planned, to include carotid and venous disease, thoracic outlet syndrome, and dialysis access, said Mills. Members are encouraged to suggest other topics.

The initiative is of such importance that Ronald L. Dalman, MD, SVS president, included it in the E. Stanley Crawford Critical Issues Forum in June, part of SVS ONLINE. It was part of an overall discussion of vascular surgery and its future within the U.S. healthcare system.

During the session, Mills discussed how vascular surgeons fit into the American healthcare system, what the role of the vascular specialist should be, and how vascular surgeons can differentiate themselves from other specialties with occasionally overlapping interests, said Dalman. The branding tools, he said, “are going to help us understand and position vascular surgery in such a way that our colleagues in the health system, and leaders in American healthcare who might not be physicians themselves, can understand what we do.”

The branding tools that are part of the initial release of the toolkit consist of the SVS member logo; the “Surgery is only part of our story” brand video; copy that can be featured on a member’s practice website; a referral brochure, to date geared to both podiatrists and primary care physicians; and referral source flyers. Additional tools to help SVS members engage with other referral audiences, hospital leadership, patients and consumers will be added over time.

### **Member input**

Project leaders consulted with many members at multiple steps along the way, including at the 2019 Vascular Annual Meeting (VAM), where members were urged to look at possible ads, fliers and other materials as they were being envisioned, developed and finalized.

“Surgery is only part of our story” resonated and became the key theme and meme for this branding initiative. Branding consultant Springboard Brand & Creative Strategy and SVS staff held a number of photo shoots, capturing members in action. The results are true-to-life images that reflect the full spectrum of care provided by vascular surgeons.

Members can obtain initial log-in instructions to help set up their toolkit account at [vsweb.org/1stBrandingLogin](https://vsweb.org/1stBrandingLogin). After resetting their password, they will receive an email from the system with a temporary password and a link for login. Members should treat their access credentials with the same security measures they use with any other SVS accounts. For additional help see the Quick Reference Guide and the How-to Video, at [vsweb.org/Branding](https://vsweb.org/Branding).

### **In your hands**

Both Mills and Slaw emphasized that members need to take the next steps to use the toolkit in order for branding to be effective. “This is really where it all begins,” said Slaw.

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"We're giving our members the tools they need to have effective conversations in their own local markets with referral sources," said Mills. "Use them! Make a difference for yourselves and our profession by getting this message out in different ways and as often as you can."

Mike Chapman, an account director at Springboard, called the SVS Branding Toolkit new ground. "To my knowledge there is no medical society in the country that has developed what SVS has just developed here," he said. SVS will post branding messages at the national level. But the lasting impact will come from the grassroots, said Slaw. "There is nothing the SVS can do that will be more powerful than individual members going out locally using the tools to get our message out."

### Putting the toolkit into action

William Shutze, MD, a member in community practice in Dallas, has lost no time in putting the new SVS member Branding Toolkit to use.

In fact, he was experimenting with it during the SVS Town Hall in mid-September at which it was introduced.

"One of the first things I did was download the member branding banner," he said. "I have actually embedded that into my work templates on electronic health records at the hospital." The red banner is larger than his signature and stands out, he said. "I'm hoping the idea will catch on and others will be inspired to do the same thing. It's a powerful statement."

He also has taken the audio file from the longer branding video and is now using it for the practice's "hold" music. "It's the right length and it gets the message out that we need to send." He has customized the "leaderboard digital banner" for primary care physicians with pictures of himself and two of the 14 surgeons in the practice. This has become the footer for all correspondence with a referring physician. "It's in my computer; I just drag it onto the correspondence; I don't have to create it every time."

Additionally, Shutze has customized the fliers and begun doing some selected targeting. "For this to be as impactful as it can be, there's going to have to be widespread adoption by the members," he said. "We need to flood the workplace with these branding messages. That's how branding works."

He's also interested to see how other SVS members use the tools. "I'm eager to see the creative ideas they come up with," he said.

Fliers covering more vascular conditions will be added. SVS and Springboard will begin targeting consumers, "raising awareness of what we really do," said Joseph Mills, MD, who leads the SVS effort. Following that initiative will be a campaign aimed at medical students and residents.

Another effort will target CEOs and hospital administrators. "Most of the public fails to realize how much we do," said Mills of how vascular surgeons add expertise in OBGYN, urology and trauma cases, among other specialties. "They don't realize how much support we provide."

For more information, visit [vsweb.org/Branding](http://vsweb.org/Branding). For login help email [membership@vascularsociety.org](mailto:membership@vascularsociety.org).

**Article Date:** Monday, November 9, 2020

**Author:** Re-posted from the November 2020 issue of Vascular Specialist

**Tags:** Vascular Specialist

**Article Type:** Article