



SVS Application for International Scholar Host Institutions

Please send completed forms to emilkes@vascularsociety.org

Contact Information

Name of Institution:

Street Address 1:

Street Address 2:

City, State, Zip:

Physician Contact:

Email:

Phone:

Administrative Contact:

Email:

Phone:

Organization Information

Please fill out the following to the best of your ability to provide scholars with more information on your institution.

Description of organization:

Size of institution (Number of Beds):

Number of Vascular Surgery Faculty:

Presence of Vascular Fellowship or Residency:

Approximate number of Academic Lectures held weekly:

Clinical Trial Participation:

Basic Science Research Projects (Current):

Cases (per year)

Volume and types of Aortic Procedures including;

Thoracic:

Abdominal:

Open and Endovascular:

Other:

Volume and types of Carotid Procedures including;

Open:

Endovascular:

Volume and breadth of;

Percutaneous Lower extremity revascularizations:

- Dialysis access procedures:
- Venous intervention:
- Deep venous intervention:
- Chronic occlusions:
- Retrieval of complex IVC filters:
- Thrombolysis and management of venous stenosis/ compression:
- Superficial venous procedures (saphenous, varices, sclerotherapy):

- Miscellaneous procedures (please comment)

Specific requirements for an international scholar to visit the institution

- Tuberculosis test
 - PPD
 - Quantiferon
 - Other:
 - Vaccine documentation:
 - Letter of good standing from the scholar's institution from his/her chairperson
- Please list any other requirements: