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QOD Tumor Registry Now Accepting New Centers

The QOD Tumor Registry is now open to new centers. The registry follows patients receiving surgery for intracranial metastases, primary meningeal, high-grade/malignant, low-grade/benign, pituitary and other intracranial tumors. Patient demographics, ICD-10 and CPT codes, comorbidities, hospital stay, 30-day readmission rates, post-operative complications and recurrent surgery are collected in the registry along with patient-reported outcomes (PROs) measuring cognition impairment, physical function, QALY and cognitive function after surgery.

The registry launched following an 18-month pilot phase that concluded in September 2020, and a six-month pilot closeout period that concluded in February 2021. The pilot closeout saw refinements made to the tumor registry based on recommendations and feedback from pilot centers and approved by the QOD Tumor Working Group. The registry will take direction from the newly appointed NPA Tumor Steering Committee and in the next several months, efforts will be aimed at developing registry metrics and center reports.

The QOD Tumor Registry is housed on the REDCap® (Research Electronic Data Capture) platform. Mayo Clinic serves as the Coordinating Center for the QOD Tumor Registry (www.mayoclinic.org/neurosurgery).

To learn more about the QOD Tumor Registry and to participate, please contact the NPA at info@neuropoint.org or visit the NPA website (www.neuropoint.org/registries/qod-tumor-registry).

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Reflection on the First Year of the American Spine Registry (ASR)

The last year has been one of drastic changes for everyone, both in health care and out, as we have faced a pandemic and social upheaval none of us could have predicted. However, it was also a landmark year for the American Association of Neurological Surgeons (AANS) and the NeuroPoint Alliance (NPA), because of bold new initiatives taken to advance outcomes science in neurosurgery.

In January of 2020, the American Spine Registry (ASR) broke new ground in registry initiatives. The registry, an equal collaboration between the AANS and the American Association of Orthopaedic Surgeons (AAOS), laid the groundwork for this essential cross-specialty initiative.

The ASR's partnership with the Joint Commission demonstrates

the real power of this collaboration across specialties. The Joint Commission has recognized the ASR as the only qualifying registry to achieve an Advanced Certification in Spine Surgery. As an equal partner of the ASR, neurosurgery is in position to inform the quality measures central to the Advanced Certification in Spine Surgery the Joint Commission is creating. Case reporting requirements in ASR for the advanced certification make it a vital tool for the ongoing

certification of advanced spine care.

The new certification program, available July 1, 2021, will help health care organizations develop consistent communication and collaboration among all health care providers involved in the care of the patient – from the pre-surgical consultation with a spine surgeon to the procedure, the rehabilitation and the follow-up

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“The growth and impact that ASR promises is already being felt across the care continuum.”

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visit with the surgeon. The announcement has already demonstrated an increased interest in ASR participation.

The certificate will offer a relevant, prescriptive approach, standard performance measures and will encompass the entire continuum of care.

“The AANS has a long history of successfully working with partners to magnify its message. The Washington Committee has found its greatest success for neurosurgery through successful coalitions. While neurosurgery is a small specialty, its voice – amplified by the right alliances – gets the message across and gets the results that best serve the specialty and its patients,” added Vice Chair of the Neurosurgery Quality Council and Chair of the AANS/CNS Section on Disorders of the Spine and Peripheral Nerves Michael Steinmetz, MD, FAANS.

“Working with the right partners allows neurosurgery to advocate for our patients on a larger platform. This makes sure our perspective is heard and our goals are realized,” added Chair of the Washington Committee John Kevin Ratliff, MD, FAANS. “A recent initiative, the Surgical Care Coalition, was a collaboration by 12 surgical professional associations and represented more than 150,000 surgeons working across the country. The coalition had a common goal of improving the quality of care and quality of life for all patients. Working in concert, an outside organization was hired to do interviews, create messaging, develop a media plan and bring the message that Medicare changes should not be allowed to limit access to necessary surgical procedures and high-quality care for all patients.”

“AANS’ partnership in the ASR similarly magnifies the voice of neurosurgery across all spine care. The growth and impact that ASR promises is already being felt across the care continuum.

“AANS’ partnership in the ASR similarly magnifies the voice of neurosurgery across all spine care.



Neurosurgery is working with regulatory agencies to further the advance of spine care in a way that no single specialty would have been able to do alone. The ASR is an example of the promising future our growing registry portfolio presents for the opportunity for neurosurgeons and the patients we serve,” added NPA Chair John J. Knightly, MD, FAANS.

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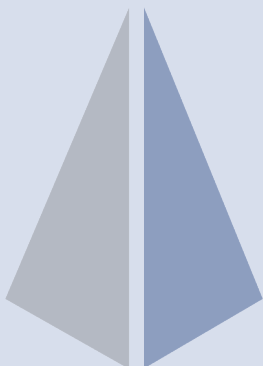
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NVQI-QOD Welcomes the Society of Vascular and Interventional Neurology (SVIN)

The Society of NeuroInterventional Surgery (SNIS) and the NeuroPoint Alliance (NPA) are excited to welcome the Society of Vascular and Interventional Neurology (SVIN) to the NeuroVascular Quality Initiative-Quality Outcomes Database (NVQI-QOD). SVIN joins the SNIS and the NPA to expand the breadth and depth of the NVQI-QOD, the premier neurovascular registry focused on improving clinical care and outcomes for patients with stroke and intracranial cerebrovascular diseases.

NVQI-QOD is an externally hosted, web-based registry supported on the M2S® PATHWAYS® platform. The NVQI-QOD is governed by the SNIS Patient Safety Organization (SNIS PSO), which takes direction from a governing council comprised of representatives from the NPA, SNIS and SVIN. NVQI-QOD is designed to easily integrate into a variety of workflows, allowing multiple users to access and enter data on a single form and spread the responsibilities of data entry to more than one individual.

"We are very excited to collaborate with SNIS and NPA," says SVIN President David Liebeskind, MD, FAHA, FAAN, FSVIN, FWSO. "Bringing together all three organizations is an incredible opportunity to impact patient care and work to solidify NVQI-QOD as the global neurovascular registry."

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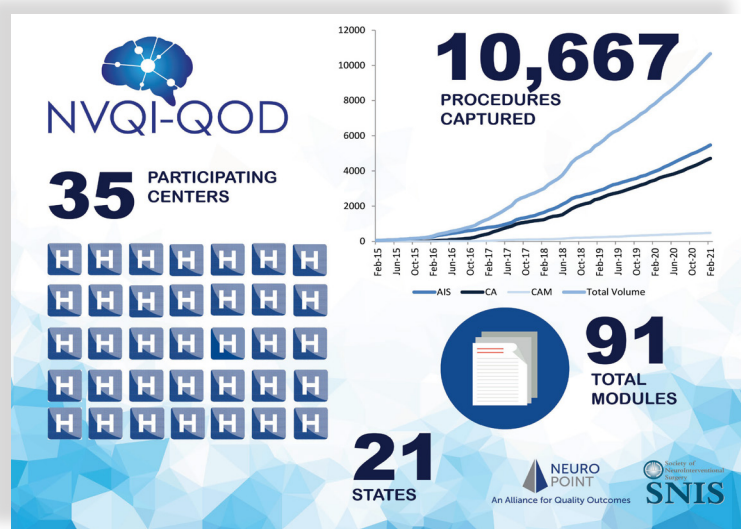
NVQI-QOD Milestones

- In February 2021, NVQI-QOD surpassed over 10,000 procedures entered in the registry.
- The registry is growing, with over 35 medical centers across North America currently participating in NVQI-QOD.

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According to SNIS PSO Medical Director Sameer A. Ansari, MD, PhD, “This addition of SVIN will facilitate the support and participation of nearly all neurointerventional providers for the NVQI-QOD registry, which harbors the most advanced quality metrics and electronic databases in our field, providing the sample size and statistical power of potentially hundreds of institutions.”

“This collaboration continues the expansion of our mission to harness the power of data to improve the quality of neurosurgical care. We welcome SVIN and look forward to working together,” says Kevin M. Cockroft, MD, vice chair of NPA’s Board of Directors.



The NVQI-QOD also reached an exciting milestone in February, as it surpassed over 10,000 procedures entered in the registry. With over 35 medical centers across North America currently participating in NVQI-QOD, the registry continues to gain momentum. Participation in the NVQI-QOD provides physicians and hospitals the ability to assess their incidence of complications, length of stay and other critical metrics in comparison with national benchmarks for quality assurance and highlighting areas for quality improvement.

“This is an extremely exciting time for NVQI-QOD,” asserts Dr. Ansari, “Reaching this milestone means we can deliver additional value in terms of benchmarking and quality improvement opportunities to our participants, while providing more occasions for research/clinical trials and monitoring procedural techniques and devices.”

Developed by physicians for physicians, NVQI-QOD captures 100% of procedures, including important demographic, procedural and post-operative data to provide comprehensive outcome analysis and inform performance improvement. A significant advantage of the NVQI-QOD database is the inclusion of long-term outcomes, to one year or longer.

**To learn more about the NVQI-QOD
and to participate, contact:**
info@neuropoint.org
or visit www.nvqi-qod.org

NPA Published Research

The following highlights published articles that utilize data from NeuroPoint Alliance registries.

Stereotactic Radiosurgery Registry (SRS)

Journal of Neuro-Oncology

CLINICAL STUDY

[Local failure after stereotactic radiosurgery \(SRS\) for intracranial metastasis: analysis from a cooperative, prospective national registry](#)

Anthony L. Asher, MD, FAANS; Mohammed Ali Alvi, MD; Mohamad Bydon, MD, FAANS; Nader Pouratian, MD, PhD, FAANS; Ronald E. Warnick, MD, FAANS; James McInerney, MD, FAANS; Inga S. Grills, MD; Jason Sheehan, MD, PhD, FAANS

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Spine Collaboration for Outcomes Research (Spine CORE) Publications

Chan, A. K., Patel, A., Bisson, E. F., Bydon, M., Glassman, S. D., Foley, K. T., Shaffrey, C. I., Potts, E. A., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Wang, M. Y., Fu, K. M., Slotkin, J. R., Asher, A. L., Virk, M. S., Kerezoudis, P., Alvi, M. A., . . . Mummaneni, P. V. (2020). ["July Effect" Revisited: July Surgeries at Residency Training Programs are Associated with Equivalent Long-term Clinical Outcomes Following Lumbar Spendylolisthesis Surgery Revisited](#). *Spine*, Publish Ahead of Print.

Chan, A. K., Bisson, E. F., Bydon, M., & Mummaneni, P. V. (2020). [A Comparison of Minimally Invasive and Open Transforaminal Lumbar Interbody Fusion for Grade 1](#)

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[Degenerative Lumbar Spondylolisthesis: An Analysis of the Prospective Quality Outcomes Database.](#)

Neurosurgery, 87(5), E609–E610.

Kashlan, O., Swong, K., Alvi, M. A., Bisson, E. F., Mummaneni, P. V., Knightly, J., Chan, A., Yolcu, Y. U., Glassman, S., Foley, K., Slotkin, J. R., Potts, E., Shaffrey, M., Shaffrey, C. I., Haid, R. W., Fu, K. M., Wang, M. Y., Asher, A. L., Bydon, M., & Park, P. (2020). [Patients with a depressive and/or anxiety disorder can achieve optimum Long term outcomes after surgery for grade 1 spondylolisthesis: Analysis from the quality outcomes database \(QOD\).](#) *Clinical Neurology and Neurosurgery*, 197, 106098.

Chan, A. K., Bisson, E. F., Bydon, M., Glassman, S. D., Foley, K. T., Shaffrey, C. I., Potts, E. A., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Wang, M. Y., Fu, K. M., Slotkin, J. R., Asher, A. L., Virk, M. S., Kerezoudis, P., Alvi, M. A., Guan, J., . . . Mummaneni, P. V. (2020). [Predictors of the Best Outcomes Following Minimally Invasive Surgery for Grade 1 Degenerative Lumbar Spondylolisthesis.](#) *Neurosurgery*.

Chan, A. K., Bisson, E. F., Bydon, M., & Mummaneni, P. V. (2020a). [A Comparison of Minimally Invasive and Open Transforaminal Lumbar Interbody Fusion for Grade 1 Degenerative Lumbar Spondylolisthesis: An Analysis of the Prospective Quality Outcomes Database.](#) *Neurosurgery*, 87(5), E609–E610.

Bisson, E. F., Mummaneni, P. V., Virk, M. S., Knightly, J., Alvi, M. A., Goyal, A., Chan, A. K., Guan, J., Glassman, S., Foley, K., Slotkin, J. R., Potts, E. A., Shaffrey, M. E., Shaffrey, C. I., Haid, R. W., Fu, K. M., Wang, M. Y., Park, P., Asher, A. L., & Bydon, M. (2020). [Open versus minimally invasive decompression for low-grade spondylolisthesis: analysis from the Quality Outcomes Database.](#) *Journal of Neurosurgery: Spine*, 33(3), 349–359.



DiGiorgio, A. M., Mummaneni, P. V., Park, P., Chan, A. K., Bisson, E. F., Bydon, M., Foley, K. T., Glassman, S. D., Shaffrey, C. I., Potts, E. A., Shaffrey, M. E., Coric, D., Knightly, J. J., Wang, M. Y., Fu, K. M., Asher, A. L., Virk, M. S., Kerezoudis, P., Alvi, M. A., . . . Slotkin, J. R. (2020). [Correlation of return to work with patient satisfaction after surgery for lumbar spondylolisthesis: an analysis of the Quality Outcomes Database.](#) *Neurosurgical Focus*, 48(5), E5.

Sherrod, B. A., Mummaneni, P. V., Alvi, M. A., Chan, A. K., Bydon, M., Glassman, S. D., Foley, K. T., Potts, E. A., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Wang, M. Y., Fu, K. M., Slotkin, J. R., Asher, A. L., Virk, M. S., & Bisson, E. F. (2020). [Regional Variance in Disability and Quality-of-Life Outcomes After Surgery for Grade I Degenerative Lumbar Spondylolisthesis: A Quality Outcomes Database Analysis.](#) *World Neurosurgery*, 138, e336–e344.

Bisson, E. F., Mummaneni, P. V., Knightly, J., Alvi, M. A., Goyal, A., Chan, A. K., Guan, J., Biase, M., Strauss, A., Glassman, S., Foley, K., Slotkin, J. R., Potts, E., Shaffrey, M., Shaffrey, C. I., Haid, R. W., Fu, K. M., Wang, M. Y., Park, P., . . . Bydon, M. (2020). [Assessing the differences in characteristics of](#)

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[patients lost to follow-up at 2 years: results from the Quality Outcomes Database study on outcomes of surgery for grade I spondylolisthesis](#). *Journal of Neurosurgery: Spine*, 33(5), 643–651.

Karsy, M., Chan, A. K., Mummaneni, P. V., Virk, M. S., Bydon, M., Glassman, S. D., Foley, K. T., Potts, E. A., Shaffrey, C. I., Shaffrey, M. E., Coric, D., Asher, A. L., Knightly, J. J., Park, P., Fu, K. M., Slotkin, J. R., Haid, R. W., Wang, M., & Bisson, E. F. (2020). [Outcomes and Complications With Age in Spondylolisthesis](#). *Spine*, 45(14), 1000–1008.

Mummaneni, P. V., Bydon, M., Knightly, J., Alvi, M. A., Goyal, A., Chan, A. K., Guan, J., Biase, M., Strauss, A., Glassman, S., Foley, K., Slotkin, J. R., Potts, E., Shaffrey, M., Shaffrey, C. I., Haid, R. W., Fu, K. M., Wang, M. Y., Park, P., . . . Bisson, E. F. (2019). [Predictors of Nonroutine Discharge Among Patients Undergoing Surgery for Grade I Spondylolisthesis: Insights From the Quality Outcomes Database \(QOD\)](#). *Neurosurgery*, 66(Supplement_1), 1–10.

Chan, A. K. H., Bisson, E. F., Fu, K. M. G., Park, P., Robinson, L., Bydon, M., Glassman, S. D., Foley, K. T., Shaffrey, C. I., Potts, E. A., Shaffrey, M. E., Coric, D., Knightly, J. J., Wang, M. Y., Slotkin, J., Asher, A. L., Virk, M. S., Kerezoudis, P., Alvi, M. A., . . . Mummaneni, P. V. (2019). [Sexual Dysfunction: Prevalence and](#)

[Prognosis in Patients Operated for Degenerative Lumbar Spondylolisthesis](#). *Neurosurgery*, 66(Supplement_1), 200–210.

Chan, A. K., Bisson, E. F., Bydon, M., Glassman, S. D., Foley, K. T., Potts, E. A., Shaffrey, C. I., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Wang, M. Y., Fu, K. M., Slotkin, J. R., Asher, A. L., Virk, M. S., Kerezoudis, P., Alvi, M. A., Guan, J., . . . Mummaneni, P. V. (2019). [A comparison of minimally invasive transforaminal lumbar interbody fusion and decompression alone for degenerative lumbar spondylolisthesis](#). *Neurosurgical Focus*, 46(5), E13.

Mummaneni, P. V., Bydon, M., Alvi, M. A., Chan, A. K., Glassman, S. D., Foley, K. T., Potts, E. A., Shaffrey, C. I., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Wang, M. Y., Fu, K. M., Slotkin, J. R., Asher, A. L., Virk, M. S., Kerezoudis, P., Guan, J., . . . Bisson, E. F. (2019). [Predictive model for long-term patient satisfaction after surgery for grade I degenerative lumbar spondylolisthesis: insights from the Quality Outcomes Database](#). *Neurosurgical Focus*, 46(5), E12.

Chan, A. K., Bisson, E. F., Bydon, M., Glassman, S. D., Foley, K. T., Potts, E. A., Shaffrey, C. I., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Wang, M. Y., Fu, K.

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M., Slotkin, J. R., Asher, A. L., Virk, M. S., Kerezoudis, P., Chotai, S., DiGiorgio, A. M., . . . Mummaneni, P. V. (2019). [Laminectomy alone versus fusion for grade 1 lumbar spondylolisthesis in 426 patients from the prospective Quality Outcomes Database](#). *Journal of Neurosurgery: Spine*, 30(2), 234–241.

Chan, A. K., Bisson, E. F., Bydon, M., Glassman, S. D., Foley, K. T., Potts, E. A., Shaffrey, C. I., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Wang, M. Y., Fu, K. M., Slotkin, J. R., Asher, A. L., Virk, M. S., Kerezoudis, P., DiGiorgio, A. M., Haid, R. W., & Mummaneni, P. V. (2020). [Obese Patients Benefit, but do not Fare as Well as Nonobese Patients, Following Lumbar Spondylolisthesis Surgery: An Analysis of the Quality Outcomes Database](#). *Neurosurgery*, 86(1), 80–87.

Asher, A. L., Kerezoudis, P., Mummaneni, P. V., Bisson, E. F., Glassman, S. D., Foley, K. T., Slotkin, J. R., Potts, E. A., Shaffrey, M. E., Shaffrey, C. I., Coric, D., Knightly, J. J., Park, P., Fu, K. M., Devin, C. J., Archer, K. R., Chotai, S., Chan, A. K., Virk, M. S., &

Bydon, M. (2018). [Defining the minimum clinically important difference for grade I degenerative lumbar spondylolisthesis: insights from the Quality Outcomes Database](#). *Neurosurgical Focus*, 44(1), E2.

Chan, A. K., Bisson, E. F., Bydon, M., Glassman, S. D., Foley, K. T., Potts, E. A., Shaffrey, C. I., Shaffrey, M. E., Coric, D., Knightly, J. J., Park, P., Fu, K. M., Slotkin, J. R., Asher, A. L., Virk, M. S., Kerezoudis, P., Chotai, S., DiGiorgio, A. M., Chan, A. Y., Haid, R. W., . . . Mummaneni, P. V. (2018). [Women fare best following surgery for degenerative lumbar spondylolisthesis: a comparison of the most and least satisfied patients utilizing data from the Quality Outcomes Database](#). *Neurosurgical Focus*, 44(1), E3.

Mummaneni, P. V., Bisson, E. F., Kerezoudis, P., Glassman, S., Foley, K., Slotkin, J. R., Potts, E., Shaffrey, M., Shaffrey, C. I., Coric, D., Knightly, J., Park, P., Fu, K. M., Devin, C. J., Chotai, S., Chan, A. K., Virk, M., Asher, A. L., & Bydon, M. (2017). [Minimally invasive versus open fusion for Grade I degenerative lumbar spondylolisthesis: analysis of the Quality Outcomes Database](#). *Neurosurgical Focus*, 43(2), E11.



Awards

Top Abstract Presentation Award at the 34th Annual Meeting of the Section on Disorders of the Spine and Peripheral Nerves for "Women fare best following surgery for degenerative lumbar spondylolisthesis: A comparison of the most and least satisfied patients utilizing data from the Quality Outcomes Database." Andrew Chan, Erica Bisson, Mohamad Bydon, Steven Glassman, Kevin Foley, Eric Potts, Christopher Shaffrey, Mark Shaffrey, Domagoj Coric, John Knightly, Paul Park, Kai-Ming Fu, Jonathan Slotkin, Anthony Asher, Michael Virk, Panagiotis Kerezoudis, Silky Chotai, Anthony DiGiorgio, Alvin Chan, Regis Haid, and Praveen Mummaneni.

Journalistic and Academic Neurosurgical Excellence (J.A.N.E.) Award at the 35th Annual Meeting of the Section on Disorders of the Spine and Peripheral Nerves for "Predictors of the Best Outcomes Following Minimally Invasive Surgery for Grade 1 Lumbar Spondylolisthesis." Andrew Kai-Hong Chan, Erica F. Bisson, Mohamad Bydon, Steven D. Glassman, Kevin T. Foley, Eric A. Potts, Christopher I. Shaffrey, Mark E. Shaffrey, Domagoj Coric, John J. Knightly, Paul Park, Michael Y. Wang, Kai-Ming G. Fu, Jonathan Slotkin, Anthony L. Asher, Micheal S. Virk, Panagiotis Kerezoudis, Mohammed Ali Alvi, Jian Guan, Regis W. Haid, Praveen V. Mummaneni.

Kuntz Scholar Award for Top Abstracts at the 35th Annual Meeting of the Section on Disorders of the Spine and Peripheral Nerves for "Assessing the Differences in Characteristics of Patients Lost to Follow Up at 2 Years: Results from the Multi-site Quality Outcomes Database (QOD) Study of Impact of Fusion on Outcomes of Grade 1 Spondylolisthesis." Praveen V. Mummaneni, Mohamad Bydon, John J. Knightly, Mohammed Ali Alvi, Andrew Kai-Hong Chan, Panagiotis Kerezoudis, Jian Guan, Michael V. Biase, Andrea Strauss, Steven D. Glassman, Kevin T. Foley, Jonathan Slotkin, Eric A. Potts, Christopher I. Shaffrey, Mark E. Shaffrey, Regis W. Haid Jr., Kai-Ming G. Fu, Michael Y. Wang, Paul Park, Anthony L. Asher, Erica F. Bisson.



Harold Rosegay, PhD, MD Award at the 2019 San Francisco Neurological Society Annual Meeting for "Sexual dysfunction: prevalence and prognosis in patients operated for degenerative lumbar spondylolisthesis." Andrew K. Chan MD, Erica F. Bisson MD, MPH, Kai-Ming Fu MD, PhD, Paul Park MD, Leslie C. Robinson MD, PharmD, MBA, Mohamad Bydon MD, Steven D. Glassman MD, Kevin T. Foley MD, Christopher I. Shaffrey MD, Eric A. Potts MD, Mark E. Shaffrey MD, Domagoj Coric MD, John J. Knightly MD, Michael Y. Wang MD, Jonathan R. Slotkin MD, Anthony L. Asher MD, Michael S. Virk MD, PhD, Panagiotis Kerezoudis MD, MS, Mohammed A. Alvi MBBS, Jian Guan MD, Regis W. Haid MD, and Praveen V. Mummaneni MD.

Kuntz Scholar Award for Top Abstracts at the 36th Annual Meeting of the Section on Disorders of the Spine and Peripheral Nerves for "Decompression and Fusion Versus Decompression Alone for Grade 1 Degenerative Lumbar Spondylolisthesis." Erica Bisson, Jian Guan, Mohamad Bydon, Steven Glassman, Kevin Foley, Eric Potts, Christopher Shaffrey, Mark Shaffrey, Domagoj Coric, Michael Wang, John Knightly, Paul Park, Kai-Ming Fu, Jonathan Slotkin, Anthony Asher, Michael Virk, Panagiotis Kerezoudis, Mohammed Alvi, Regis Haid, Andrew Chan, and Praveen Mummaneni.