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Paper: Spring 2022 CPD Questions

Personal Reflection:

Really interesting studies as our centre are very vigilant in maintaining surveillance intervals. We do have some elderly, frail patients who travel >1 hour for their surveillance scans and we often query should we be following them up if they are not fit for re-intervention or emergency surgery. These studies suggest those patients would benefit from being discontinued at no significant risk to their outcomes. Great resources for reference when reviewing EVAR surveillance protocols.