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Reply



Work is currently under way to adapt VLFDC processes and documentation to the VASCC.³ A primary objective

of the VLFDC structure is to make participation as straightforward as possible. A template protocol for Institutional Review Board submission that will serve as the umbrella approval for all VLFDC-related projects is distributed to participants along with detailed data dictionaries and every effort is made to limit data entry for each project to 20 minutes. Participants can choose to submit data for as many or as few projects as they are interested in. Projects that are currently being developed by VASCC address the issue of the impact of rescheduling of elective vascular operations and procedures and the vascular complications of COVID-19. Like the VLFDC, VASCC participants will be encouraged to submit additional project proposals.

The vascular surgery community has already expressed an outpouring of desire to collaborate to examine the impact of COVID-19 on vascular disease, to document the vascular surgeon's response to the pandemic, and to create valuable resources that can be used now and in future public health emergencies. We are confident that by modeling the VASCC after the VLFDC, the VASCC will serve as a mechanism for vascular surgeons worldwide to come together to accomplish these goals.

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The impact of COVID-19 on vascular training



The global impact of COVID-19 has affected everyone, including healthcare providers caring for the surge in critically ill patients.^{1,2} Vascular interventionists have always been involved with direct patient care. The effect has been compounded for teaching physicians and vascular trainees.^{3,4} The rotations for many third- and fourth-year medical students have been suspended, often because of a shortage of medical supplies. New quarantine policies have limited surgeries to urgent and emergent cases.⁵ However, students could perform