## Pre-op/Post-op

- What are the different indications or uses of IVUS that you have personally experienced in your practice?
  - What are some limitations that you have encountered to the use of IVUS
  - What are some possible functions and improvements you would like to see in IVUS
  - What are some ways you prevent an acute thrombotic event or dislodging while performing an IVUS or any other Cather related procedure?
- In preoperative assessment what are the cardiac risk factors the surgeon must take into account before clearance?
- Does the choice of post-op antibiotic vary depending on the site of surgery?
  - What are some examples, if this variation does exist (such as ortho vs vascular vs GI)
- How are post-op abscesses treated?
  - Is there a general guideline you use in treating abscesses with therapeutic drainage vs antibiotics?
- What are some plane film imaging keys or tips to analyzing small bowl obstruction/colonic perforation or other gut pathologies?

## Intra-operative

- What are some general guidelines/rules for suture pattern and type based on location of skin?
- In gallbladder procedures, are anomalies of vasculature something you prepare for ahead of time? What are some techniques used to prepare for this?
  - What are some routes you can use in removal of stones/the gallbladder (esophagus, percutaneous, etc..)
- What are some stents/mesh/artificial devices with unique and useful characteristics that you have seen (anticoagulation for instance)
  - o Have you seen or hope to see future devices with other characteristics imbibed in them?
- Perioperative morbidity and mortality are often weighed against the benefit of performing revascularization (CEA and stenting): what guidelines or practices to vascular surgeons keep in mind while attempting to determine perioperative morbidity/mortality rate?