



“I’m at the point in my career where no-touch is the only way to go. Specimen quality is paramount.”

Chris Baez, CFA at AdventHealth Tampa

A seasoned harvester discusses the importance of conduit quality in vascular surgery

Chris Baez is a CFA at AdventHealth Tampa with 25 years of experience in cardiac surgery. He was part of the team lead by Bettina Thomas, director of the cardiovascular operating room, who recently migrated her entire team of harvesters to the Venapax system. We sat down with Chris to discuss the Venapax system and the role it plays in vascular surgery.

Saphena: Chris, what was the career path that led you to become a CFA here in Tampa?

Chris: I’ve been in cardiac surgery for about 25 years. I started as a surgical tech and then moved up to first assist. I’ve done transplants, I’ve done open harvest and then I progressed to endo. I got into vein harvesting about 12 years ago.

During that time, I have used 5 different devices for EVH before settling on Venapax.

Saphena: Your entire team at AdventHealth Tampa switched over to Venapax en masse. Had you heard about Venapax prior to that?

Chris: I had heard about Venapax and its ability to streamline the harvest process by eliminating the need to switch out devices. I was very interested being able to reduce the number of steps in EVH as well as minimizing the disruption to the conduit.

When I started harvesting it was literally a four-step process. It was complicated and required a lot of manipulation of the vein.

I am always in search of doing something better. I am dedicated to the craft and improving the process whenever I can. The fact that Venapax is a single device allows the process to be cut in half and requires no manipulation of the vein.

I feel very strongly that the less manipulation of the vein the better the outcome. I was looking for a minimal touch approach and I found it with Venapax. All of the other devices followed the same basic process that hasn’t changed in years. This is the only device that disrupts the way EVH is done, it’s truly cutting edge.

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Saphena: What is it about the design of Venapax that appealed to you?

Chris: What makes it unique is that you can perform all three processes as you go. You’re dissecting, you’re taking branches and creating hemostasis in the leg all at the same time, it’s the most efficient device you can use. It doesn’t require multiple steps to complete the harvest. With every other device you do your dissection, but you can’t address the issue until you come back and take the branches with another piece of equipment. Venapax is an all-in-one device. This is the Swiss army knife of harvesting tools.

I also found training on Venapax to be a breeze. It removes the stumbling blocks that many new harvesters face where they tend to spend six to eight months just learning how to stay centered in the tunnel.

Venapax takes that out of their mindset. You’re concentrating on the vein quality. You’re concentrating on dissecting and taking branches as you go.

Saphena: You work in vascular surgery where the quality of the conduit is so important. What are the attributes of that conduit?

Chris: So, the quality of natural vein conduit used for a bypass, fem tibial or fem pop, along the whole length of the leg is critical. Adventitia is extremely delicate. The more you manipulate or press against that outer wall, the greater the risk of damage to the adventitia as well as the intima of the vein. That creates areas where clot can form.

With a vascular patient that’s compromised and is one step away from amputation, the quality of the conduit is imperative. Any damage to that vein, whether it’s a hole or whether it’s rubbed too much or if the walls are weakened due to over manipulation, can create an environment where a clot can form in that bypass vein and can cause it to fail. That patient goes from having a successful revascularization of their legs to become an amputation patient.

Even in the case of the more traditional bridge incisions all along the leg, there is a greater risk of damage. Vascular surgeons grab the vessel with forceps and then take another instrument and wrap it around each branch. I’ve been able to win over the docs I work with because they’ve watched me harvest with Venapax and they can see that I’m so far away from any branch damage. When it comes out, it’s just pristine. It wasn’t ever touched with an instrument. That translates to better outcomes for the patient.

Saphena: That must resonate well with the surgeons.

Chris: Their reaction is so positive because they know that this is the way of the future. You have all these new docs coming out of school and they’re all learning minimally invasive. That’s the way to go to. No one wants to do the open nightmare. There’s a huge risk of infection. With Venapax it’s less incisions and I’m in and out in less than 30 minutes. It has alleviated the time required for open harvesting and allows the surgeon to focus on doing the bypass.

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