

## Quality measures in Atrial Fibrillation therapy – AF ablation and Get with the Guidelines AFIB registries

### Dear Colleagues

Welcome to the summer issue of JAFIB. Hope everyone had a chance to enjoy the season and related travels. As MACRA and Pay for Performance continue to evolve to be the guiding force on physician reimbursement, quality becomes an important piece we need to focus on. It doesn't mean that we are not providing quality care to our patients now, but we need a special effort to document our quality work through various registries and quality bench marks. AF ablation has become an important area of focus for all the professional societies including HRS, ACC and AHA. One such effort is the recently released NCDR's AFib registry. It's relatively comprehensive dataset that attempts to track outcomes and quality in a systematic way. Eventhough, it may not be very extensive and lead to long term follow up, it is a good start.

The Heart Rhythm Society recently announced their collaboration with the American Heart Association on the Get with the Guidelines®- AFIB Registry. Get With The Guidelines®-AFIB is apparently designed to assist hospital care teams for providing the latest evidence-based treatment for their AFib patients. At the same time, it is supposed to offer a means of monitoring the quality of AFib care in U.S. hospitals and building a database for continued research and further quality improvement. There is not much debate that these efforts help improve patient care and are a proven platform for improving outcomes but at what cost to the hospitals and physicians.

In a practicing environment that places a significant burden of documentation on physicians this once again adds a great deal of work. It doesn't mean we should not embrace this important initiative, what it means is we should figure out a smart and efficient way of gathering this data. This is where effective physician-hospital partnerships are critical to the success of these programs. Typically depending on the volume of AF patients each institution cares for, it may require one or two FTEs to handle the work load and the hospitals should get ready in bringing additional resources to implement these programs. On the other hand the professional societies should make a continued effort to make these registries as

less cumbersome and more meaningful for patient care as possible. There should be continued opportunities in improving the education and awareness in AF.

We continue to encourage you to submit your original research, literature reviews, state-of-the-art papers, case reports, meta analyses to the journal for consideration of publication. We assure you a faster turn around and reasonable time line for publication.

Have a great summer.

Best wishes



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