

University of California, San Francisco
CURRICULUM VITAE

Name: Shant M Vartanian, MD

Position: Assistant Professor In Residence, Step 4
Surgery
School of Medicine

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EDUCATION

1994 - 1998	Stanford University	B.S.	Biology	
1999 - 2003	Saint Louis University	M.D.		
2003 - 2004	University of California, San Francisco	Intern	General Surgery	
2004 - 2005	University of California, San Francisco	Junior Resident	General Surgery	
2005 - 2007	University of California, San Francisco	Research Fellowship	Vascular Surgery	Rong Wang, PhD
2007 - 2009	University of California, San Francisco	Senior Resident	General Surgery	
2009 - 2010	University of California, San Francisco	Chief Resident	General Surgery	
2010 - 2012	University of California, San Francisco	Fellow	Vascular Surgery	

LICENSES, CERTIFICATION

2003	Advanced Cardiovascular Life Support, Certified
2005	Medical Licensure, California # A91607
2010	Drug Enforcement Administration (DEA) registration # FV1807479
2010	Fundamentals of Laparoscopic Surgery, Certified
2010	Advanced Trauma Life Support, Certified
2011	American Board of Surgery, Certificate # 055807

2012	Fluoroscopy Supervisor and Operator Permit # RHC 00171180
2013	American Board of Surgery - Vascular Surgery, Certificate #102381
2015	Registered Physician in Vascular Interpretation, ARDMS #192355

PRINCIPAL POSITIONS HELD

2012 -	University of California, San Francisco	Assistant Professor of Surgery	Division of Vascular and Endovascular Surgery
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OTHER POSITIONS HELD CONCURRENTLY

2016 -	San Francisco General Hospital	Service Chief	Surgery
2014 - 2016	San Francisco General Hospital Vascular Lab	Medical Director	
2016 -	Radial Medical	Scientific Advisor	

HONORS AND AWARDS

1994	Departmental Honors (Biology)	Stanford University
2007	Outstanding Presentation, J. Engelbert Dunphy Annual Resident Research Symposium	University of California, San Francisco
2010	Fred H. and Esther E. Nusz Achievement Award	University of California, San Francisco

CLINICAL ACTIVITIES SUMMARY

Responsible for re-establishing a Vascular Surgery service at SFGH after a 10 year absence. Accomplishments include restructuring and expanding the outpatient clinic, optimizing scheduling templates and establishing point of care vascular testing in clinic to eliminate barriers to diagnosis and treatment of vascular disease. Started an active surveillance program to track patients with aneurysmal diseases, dissections and post-operative patients. Hired a Physicians Assistant to help coordinate services and assist with clinic. On average, we service 200 clinic visits and 75 new patient referrals monthly. Our outpatient wait times have decreased from over a year in 2010 to our current wait time of less than 2 weeks.

Medical Director, Vascular Laboratory at San Francisco General Hospital. Started a non-invasive vascular lab including hiring a registered vascular technologist, implementing standardized scanning and reporting protocols, installing a reporting system that transmits results directly into the EMR and streamlining the billing process. Purchased and implemented specialized wound healing assays including skin perfusion pressure testing and TcpO₂, a necessary component of the services provided by the Functional Limb Service. Started an eScheduling service to allow for automated referrals from any provider within the CHN network, including satellite clinics. The Vascular Lab is performing over 1200 studies annually and we anticipate 20% increase in volume over the next year as we assume responsibility of

certain vascular diagnostic studies from the Department of Radiology. We anticipate applying for IAC accreditation in carotid, peripheral arterial and venous modules in the spring of 2017.

Established an endovascular surgery program, designed for the treatment of traumatic aortic injuries and ruptured aneurysms, as well as elective peripheral arterial interventions. Requiring purchase of capital equipment, managing implant and disposable inventory, and training of surgical staff on how to performing these sub-specialty procedures. Open surgical interventions have also required instrument optimization, surgical set reorganization, purchase of implants and training of surgical staff. Since 2010, surgical volume has increased year over year by 20% with nearly 400 cases for FY 2015-2016.

Initiated a quality improvement project for dialysis access with the Department of Nephrology. Established a database with all dialysis access procedures over the last year, evaluating complication rates, maturation date, patency rate and number of re-interventions. Goals of the QI project are to optimize catheter free time and limit line infections. Leader in monthly multi-disciplinary meeting with IR and Nephrology to review challenging dialysis access cases.

MEMBERSHIPS

2003 - present American College of Surgeons
2005 - 2010 North American Vascular Biology Organization
2010 - present Naffziger Surgical Society
2014 - present Society of Vascular Surgery
2013 - present American Heart Association, Professional Member
2013 - present Northern California Vascular Society
2014 - present Western Vascular Society
2014 - present Vascular and Endovascular Surgery Society

SERVICE TO PROFESSIONAL PUBLICATIONS

2014 - Vascular Medicine, ad hoc reviewer
2014 - Journal of the American College of Cardiology , ad hoc reviewer
2015 - Vascular and Endovascular Surgery, ad hoc reviewer
2016 - Journal of Vascular Surgery, reviewer
2017 - Journal of Vascular and Interventional Radiology, ad hoc reviewer

INVITED PRESENTATIONS - INTERNATIONAL

2012	Is it still possible to perform bypass surgery for lower extremity ischemic lesions? 2012 East China Sea Vascular Disease Forum. Shanghai, China	Speaker
2012	Limb Preservation Center: The UCSF Experience. 2012 East China Sea Vascular Disease Forum. Shanghai, China	Speaker

2012	Risk factors for clinical failure after stent graft treatment for femoropopliteal occlusive disease. 2012 East China Sea Vascular Disease Forum. Shanghai, China	Speaker
2015	Limb Salvage and Complex Wound Management Symposium, IGOT International Summit, San Francisco, CA	Course Co-Chair

INVITED PRESENTATIONS - NATIONAL

2008	Challenges in the surgical management of neutropenic enterocolitis. Maa J, Vartanian SM, Gosnell JE, Campos G, Garcia-Aguilar J, Harris HW. American College of Surgeons Clinical Congress. San Francisco, CA.	Poster
2014	Lower Extremity Weakness after Endovascular Aneurysm Repair using Multi-Branched Thoracoabdominal Stent Grafts. Sobel JD, Vartanian SM, Gasper WJ, Grenon M, Rapp JH, Hiramoto JS, Chuter TA, Reilly LM. Society for Vascular Surgery Annual Meeting. Boston, MA	Presentation
2014	Society for Vascular Surgery (SVS) Lower Extremity Threatened Limb Classification Discriminates Early Outcomes in Hospitalized Patients. Causey MW, Wu B, Dini M, Eichler C, Gasper WJ, Hiramoto JS, Reilly LM, Reyzelman A, Vartanian SM, Conte MS. Society for Vascular Surgery Annual Meeting. Boston, MA	Presentation

INVITED PRESENTATIONS - REGIONAL AND OTHER INVITED PRESENTATIONS

1998	Oxidative stress in organotypic cerebral cortex slice cultures. Vartanian SM, Lee Y, Eng LF. Veterans Affairs International Neuroregeneration Symposium. Pacific Grove, CA.	Poster
2006	Notch4 is necessary and sufficient for collateral artery development in murine hindlimb ischemia. Vartanian SM, Lin YK, Wang RA. J. Englebert Dunphy Annual Resident Research Symposium. UCSF.	Oral Presentation
2006	The Clinical Significance and Management of Incomplete Ablation or Saphenous Recanalization Following Endovenous Obliteration. Vartanian SM, Bush JS, Sarkar R. Western Vascular Society, Residents Forum. La Jolla, CA.	Oral Presentation
2007	Endothelial Notch4 promotes vessel enlargement in a mouse model of critical limb ischemia. Vartanian SM, Lin YK, Kim YH, Carlson TC, Wang RA. J. Englebert Dunphy Annual Resident Research Symposium, UCSF.	Oral Presentation

2007	Constitutively active endothelial Notch4 promotes vessel enlargement in a mouse model of critical limb ischemia. Vartanian SM, Lin YK, Kim YH, Carlson TC, Wang RA. Western Vascular Society. Residents Forum. Kona, HI.	Oral Presentation
2011	Vascular complications of anterior spine exposure. Vartanian SM. UCSF Vascular Symposium. San Francisco, CA.	Oral Presentation
2011	Risk factors for clinical failure following stent-graft treatment for femoropopliteal occlusive disease. Johnston PC, Vartanian SM, Runge SJ, Reilly LM, Hiramoto JS, Eichler CM, Owens CO, Schneider DB, Conte MS. Western Vascular Society Annual Meeting. Kauai, HI.	Oral Presentation
2011	Effective treatment of femoropopliteal in-stent restenosis with stent grafts. Monahan TS, Vartanian SM, Schneider DB. Eastern Vascular Society Annual Meeting. Washington, DC.	Oral Presentation
2012	Determinates of aortic false lumen growth post dissection. Vartanian SM. UCSF Vascular Symposium. San Francisco, CA.	Oral Presentation
2012	Clinical consequences of bare metal stent and stent graft failure in femoropopliteal occlusive disease. Western Vascular Society. Park City, Utah.	Oral Presentation
2012	St. Marys Wound Symposium. Case Presentations and Amputation Prevention Panelist. San Francisco, CA	Oral Presentation
2012	Indications, Treatment and Fundamentals of Lower Extremity Injury: the Vascular Perspective. 3rd Annual IGOT Trauma Wound Management Summit & International Flap Course: Soft Tissue and Local Wound Management Symposium. San Francisco, CA.	Oral Presentation
2013	Lending a Cautionary Note on Covered Stents in the SFA. UCSF Vascular Symposium. San Francisco, CA	Oral Presentation
2013	Why TEVAR for Uncomplicated Thoracic Dissections is Rarely Indicated. UCSF Vascular Symposium. San Francisco, CA.	Oral Presentation
2013	Options for Vascular Assessment of the Diabetic Foot: What is the Best Predictor Wound Healing? UCSF Vascular Symposium. San Francisco, CA.	Oral Presentation
2013	Indications, Treatment and Fundamentals of Lower Extremity Injury: the Vascular Perspective. 4th Annual IGOT Trauma Wound Management Summit & International Flap Course: Soft Tissue and Local Wound Management Symposium. San Francisco, CA.	Oral Presentation

2013	St. Marys Wound Symposium. Case Presentations and Amputation Prevention Panelist. San Francisco, CA	Oral Presentation
2013	Mid-term Outcomes of Neuroischemic and Ischemic Wounds Treated by a Multidisciplinary Limb Salvage Service. Western Vascular Society. Jasper, Canada.	Oral Presentation
2014	Pedal Access: How to do it and how it fares. UCSF Vascular Symposium. San Francisco, CA	Oral Presentation
2014	Options for the No-Option Patient. UCSF Vascular Symposium. San Francisco, CA.	Oral Presentation
2014	Anterior Approach to the Thoracolumbar Spine. DePuy Synthes Spine Future Leaders Workshop: Surgical Management of Thoracolumbar Spine Trauma. San Francisco, CA.	Oral Presentation
2014	Surgical Interventions in Amputation Prevention. St Marys Wound Care Sympoium. San Francisco, CA	Oral Presentation
2014	Indications, Fundamentals and Treatment of Lower Extremity Vascular Injuries. IGOT International Summit, Limb Salvage Pre-Course. San Francisco, CA.	Oral Presentation
2014	Presentation of Symptomatic PAD in Patients with Chronic HIV Infection. Western Vascular Society. San Diego, CA.	Oral Presentation
2015	Vascular Trauma at San Francisco General Hospital: Practical Lessons Learned. UCSF Vascular Symposium. San Francisco, CA.	Oral Presentation
2015	St Marys Amputation Prevention Symposium. San Francisco, CA.	Panelist
2015	Wound Management: The Vascular Perspective. IGOT Complex Wound Management Symposium. San Francisco, CA.	Oral Presentation
2016	Traumatic disease of the Aorta: Timing is everything. UCSF Vascular Symposium San Francisco, CA.	Oral Presentation
2016	The valve or the vein: Which to treat first and why? UCSF Vascular Symposium, San Francisco, CA	Oral Presentation
2016	Vessel preparation is the key step for successful DCB revascularization, UCSF Vascular Symposium, San Francisco, CA	Oral Presentation
2016	Peripheral Arterial Disease: Management in 2016. 33rd Annual Advances in Heart Disease. San Francisco, CA	Oral Presentation

CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT ACTIVITIES

2012	Western Vascular Society. Park City, UT.
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2013	UCSF Vascular Symposium. San Francisco, CA.
2013	Society for Vascular Surgery, Annual Meeting. San Francisco, CA.
2013	WL Gore Aortic Summit. Flagstaff, AZ.
2013	Western Vascular Society. Jasper, Canada.
2013	St Marys Amputation Prevention Conference. San Francisco, CA.
2014	UCSF Vascular Symposium. San Francisco, CA.
2014	Society for Vascular Surgery, Annual Meeting. Boston, MA.
2014	Western Vascular Society. San Diego, CA.
2014	St Marys Amputation Prevention and Wound Care Conference. San Francisco, CA.
2015	UCSF Vascular Symposium. San Francisco, CA.
2015	St Marys Amputation Prevention and Wound Care Conference. San Francisco, CA.
2015	Medtronic Advanced Endovascular Type B Aortic Dissection Course. San Diego, CA.
2016	UCSF Vascular Symposium. San Francisco, CA.
2016	Cook Advanced Chronic Total Occlusion Course. Grand Rapids, MI.
2017	Cook Vista Pedal Access Course, Los Angeles, CA. Instructor

SERVICE ACTIVITIES SUMMARY

My service to the University is building the Vascular Surgery service at SFGH. As detailed in the clinical summary, the scope of the project involves a variety of administrative and organizational responsibilities. Delivering high quality vascular surgery care to the patients of SFGH is also a public service. SFGH is a safety-net hospital that serves the poor, the homeless, uninsured working families, and immigrants. About 80 percent of its patient population either receives publicly funded health insurance (Medicare or Medi-Cal) or is uninsured.

UNIVERSITY SERVICE

UC SYSTEM AND MULTI-CAMPUS SERVICE

2016 -	Perioperative Leadership Team - San Francisco General Hospital	Representative
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SCHOOL OF MEDICINE

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DEPARTMENTAL SERVICE

2005 - 2010	UCSF Department of Surgery	Recruitment Committee
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CONTRIBUTIONS TO DIVERSITY

The type of vascular access used for incident hemodialysis correlates strongly with patient outcomes and resource utilization. Studies repeatedly favor arteriovenous fistulas as both safer and more cost effective than AV grafts and HD catheters. Reasons for low AVF use at time of HD initiation include patient specific factors as well as systematic barriers to care. National data also suggests that while we are not meeting consensus recommendations in any demographic category, there are significant disparities in incident AVF use by race, gender, and insurance status. Because blacks, Hispanics, women, and the uninsured are significantly less likely to have a functioning AVF at the time of HD initiation, these vulnerable populations disproportionately bear the burden of complications due to catheter use. Additionally, very little is known about the local factors that account for variation in incident AVF rates, which vary from 11.1 to 22.2% among regional ESRD networks. We are performing a study was to identify factors associated with incident catheter use among a diverse, low-income, multi-lingual HD population at Zuckerberg San Francisco General Hospital. We hypothesized that limited English proficiency posed a barrier to efficient care coordination, increasing the risk for incident catheter use. Our findings are to be used to develop initiatives to increase timely AVF placement locally and in safety net populations more generally.

TEACHING SUMMARY

In surgical training, most teaching occurs on the wards and in the operating room. Though I have not catalogued all informal teaching interactions, a large part of daily practice involves level appropriate teaching of residents and medical students about a variety of topics, ranging from natural history and pathophysiology of disease processes, indications, outcomes, complications and technical aspects of surgery. This is where I've made my most consistent teaching contributions over the last 3 years. I've also proctored a number of sessions in the skills lab for medical students and residents and I've spent a fair amount of time teaching at service conferences, technical conduct sessions, and journal clubs.

FORMAL TEACHING

	Academic Yr	Course No. & Title	Teaching Contribution	School	Class Size
	2009 - 2011	CODA - School of Medicine	Panelist	Medicine	50
	2012 - present	Vascular trauma to extremities, compartment syndrome, neck trauma. Fundamentals of Clinical Surgery: Scheeters Conference.	Moderator	Medicine	
	2013 - present	Mock oral board exam for senior and chief general surgery residents	Examiner	Medicine	

	Academic Yr	Course No. & Title	Teaching Contribution	School	Class Size
	2014 - present	Technical conduct session: Infrainguinal Exposures	Moderator	Medicine	
	2015 - 2016	Pices - Introduction to Vascular Surgery	Lecturer	Medicine	20
	2015 - present	Resident Pre Course on Limb Salvage, IGOT International Summit	Co-Chair	Medicine	

PREDOCTORAL STUDENTS SUPERVISED OR MENTORED

Dates	Name	Program or School	Mentor Type	Role	Current Position
2015 - 2016	Michael Khanjyan	School of Medicine	Project Mentor, Career Mentor	RAPtr Research Committee	Medical Student

POSTDOCTORAL FELLOWS AND RESIDENTS MENTORED

Dates	Name	Fellow	Mentor Role	Faculty Role	Current Position
2015 - 2016	Nicole Rich	Resident, General Surgery	Project Mentor	Research Mentor	Resident

RESEARCH AND CREATIVE ACTIVITIES SUMMARY

The enhanced longevity of patients living with chronic HIV infection has resulted in an increasing burden of chronic diseases, and while there is growing evidence that HIV infected patients at risk for coronary artery disease at rates of up to two fold higher than the uninfected, the significance of chronic HIV infection in the peripheral vasculature is largely unknown. My principle clinical appointment has been at San Francisco General Hospital, which was at the center of the HIV epidemic in the 1980's. This research program grew in response to the burden of disease witnessed in clinic on a weekly basis. A cursory review of the literature will show how little we understand about the link between HIV infection and peripheral arterial disease (PAD). My research focus is to bridge the gap in our understanding of the contribution of HIV infection to the development of PAD using a combination of clinical, epidemiological and translational research methodologies.

In the last year, I presented a case-control series of chronically infected HIV patients matched for traditional Framingham risk factors. Results suggest patients with HIV infection present with PAD over a decade earlier in life. Our manuscript is in the process of being submitted to Vascular Medicine. I have proposed using the pre-existing research infrastructure at SFGH including the SCOPE cohort for prospective study of prevalence and predictors of PAD in HIV

infection using a variety of funding mechanisms. I have started a tissue bank of atherosclerotic lesions explanted from HIV patients for future translational research efforts. Finally, I have contributed to the HIV research community at SFGH by being the principle surgeon for lymph node biopsies required by multiple research protocols.

Ive also initiated a number of outcomes research projects with general surgery residents and vascular surgery fellows, serving as both investigator and mentor.

RESEARCH AWARDS - CURRENT

1. 3-SRA-2015-37-Q-R	Consultant	5 % effort	Roy, S. (PI)
JDRF		6/1/2015	5/30/2018
Intervascular Capsule for Islet Transplantation in Type I Diabetic Patients		\$ 350,000 direct/yr 1	\$ 1,050,000 total
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2.	PI		
Department of Surgery		07/01/2017	06/30/2018
Accelerator Award			\$ 25,000 total
Percutaneous arteriovenous fistula for dialysis access			

PEER REVIEWED PUBLICATIONS

1. Scharff JR, Longo WE, Vartanian SM, Jacobs DL, Bahadursingh AN, Kaminski DL. Ischemic colitis: spectrum of disease and outcome. Surgery. 2003 Oct; 134(4):624-9; discussion 629-30. PMID: 14605623
2. Vartanian SM, Colaco S, Orloff LE, Theodore PR. Oklahoma prosthesis: resection of tumor of clavicle and chest wall reconstructed with a custom composite graft. Ann Thorac Surg. 2006 Jul; 82(1):332-4. PMID: 16798248
3. Vartanian SM, Sarkar R. Therapeutic angiogenesis. Vasc Endovascular Surg. 2007 Jun-Jul; 41(3):173-85. PMID: 17595382
4. Murphy PA, Lam MT, Wu X, Kim TN, Vartanian SM, Bollen AW, Carlson TR, Wang RA. Endothelial Notch4 signaling induces hallmarks of brain arteriovenous malformations in mice. Proc Natl Acad Sci U S A. 2008 Aug 5; 105(31):10901-6. PMID: 18667694.
5. Johnston PC, Vartanian SM, Runge SJ, Hiramoto JS, Eichler CM, Owens CD, Schneider DB, Conte MS. Risk factors for clinical failure after stent graft treatment for femoropopliteal occlusive disease. J Vasc Surg. 2012 Oct; 56(4):998-1006, 1007.e1; discussion 1006-7. PMID: 22633429
6. Vartanian SM, Johnston PC, Walker JP, Runge SJ, Eichler CM, Reilly LM, Hiramoto JS, Conte MS. Clinical consequence of bare metal stent and stent graft failure in femoropopliteal occlusive disease. J Vasc Surg. 2013 Dec; 58(6):1525-31. PMID: 23911250.
7. Vartanian SM, Robinson KD, Ofili K, Eichler CM, Hiramoto JS, Reyzelman AM, Conte MS. Outcomes of neuroischemic wounds treated by a multidisciplinary amputation prevention service. Ann Vasc Surg. 2015 Apr; 29(3):534-42. PMID: 25596408

8. Han SM, Wu B, Eichler CM, Reilly LM, Vartanian SM, Conte MS, Hiramoto J. Risk Factors for 30-Day Hospital Readmission in Patients Undergoing Treatment for Peripheral Artery Disease. *Vasc Endovascular Surg.* 2015 Apr; 49(3-4):69-74. PMID: 26145753
9. Sobel JD, Vartanian SM, Gasper WJ, Hiramoto JS, Chuter TA, Reilly LM. Lower extremity weakness after endovascular aneurysm repair with multibranched thoracoabdominal stent grafts. *J Vasc Surg.* 2015 Mar; 61(3):623-9. PMID: 25457458.
10. Han SM, Wu B, Eichler CM, Reilly LM, Vartanian SM, Conte MS, Hiramoto J. Risk Factors for 30-Day Hospital Readmission in Patients Undergoing Treatment for Peripheral Artery Disease. *Vasc Endovascular Surg.* 2015 Jul 5. PMID: 26145753
11. Vartanian SM, Conte MS. Surgical intervention for peripheral arterial disease. *Circ Res.* 2015 Apr 24; 116(9):1614-28. PMID: 25908732.
12. Fernandez CC, Sobel JD, Gasper WJ, Vartanian SM, Reilly LM, Chuter TA, Hiramoto JS. Standard off-the-shelf versus custom-made multibranched thoracoabdominal aortic stent grafts. *J Vasc Surg.* 2016 May; 63(5):1208-15. PMID: 26817612
13. Ramanan B, Ahmed A, Wu B, Causey MW, Gasper WJ, Vartanian SM, Hiramoto JS, Conte MS. Determinants of Midterm Functional Outcomes and Wound Healing in a Hospital-Based Limb Preservation Program. *J Vasc Surg.* 2016 Aug; 64(2):546-547. PMID: 27763301
14. Ramanan B, Fernandez CC, Sobel JD, Gasper WJ, Vartanian SM, Reilly LM, Chuter TA, Hiramoto JS. Low-profile versus standard-profile multibranched thoracoabdominal aortic stent grafts. *J Vasc Surg.* 2016 Jul; 64(1):39-45. PMID: 26994953
15. Hiramoto JS, Fernandez C, Gasper W, Vartanian S, Reilly L, Chuter T. Lower extremity weakness is associated with elevated blood and cerebrospinal fluid glucose levels following multibranched endovascular aortic aneurysm repair. *J Vasc Surg.* 2016 Nov 19. PMID: 27876524
16. Causey MW, Ahmed A, Wu B, Gasper WJ, Reyzelman A, Vartanian SM, Hiramoto JS, Conte MS. Society for Vascular Surgery limb stage and patient risk correlate with outcomes in an amputation prevention program. *J Vasc Surg.* 2016 Jun; 63(6):1563-1573.e2. PMID: 27036309
17. Wacliche VS, Goulet JP, Gosselin A, Monteiro P, Soudeyns H, Fromentin R, Jenabian MA, Vartanian S, Deeks SG, Chomont N, Routy JP, Ancuta P. New insights into the heterogeneity of Th17 subsets contributing to HIV-1 persistence during antiretroviral therapy. *Retrovirology.* 2016 Aug 24;13(1):59 PMID: 27553844

REVIEW ARTICLES

1. Vartanian SM, Sarkar R. Therapeutic Angiogenesis. *Vasc Endovascular Surg.* 2007 Jun-Jul;41(3):173-85.
2. Vartanian SM, Conte MS. Therapeutic strategy for severe ischemia of the leg. *International Journal of Thrombosis.* 2012

BOOKS AND CHAPTERS

1. Vartanian SM, Owens CO. "Peripheral Artery Aneurysm Repair." Ed. Nelson, P. Vascular Surgery: Atlas of Operative Techniques. McGraw-Hill. (In press)
2. Vartanian SM, Conte MS. "Reversed and non-reversed transposed autogenous vein grafting for atherosclerotic lower extremity occlusive disease." Current Therapy in Vascular and Endovascular Surgery, 5th edition. Ed. Stanley JC, Veith F, Wakefield TW. Elsevier, 2014
3. Vartanian SM, Conte MS. "Surgical treatment of lower extremity occlusive disease in diabetes." Peripheral Vascular Disease: Diagnosis and Management. Ed. Shrikhande GV, McKinsey JF. Springer, 2013
4. Vartanian SM, Conte MS. "Aortoiliac occlusive disease." Current Surgical Therapy 11th Edition. Ed Cameron JL, Cameron AM. Elsevier, 2013
5. Vartanian SM, Conte MS. "Exposure of Tibial Vessels: Anterior Tibial, Posterior Tibial, Peroneal, from both Medial and Lateral Approaches." Master Techniques in Surgery: Vascular Surgery. Ed. Darling C, Ozaki K. Lippincott Williams & Wilkins.

SIGNIFICANT PUBLICATIONS

1. Sobel JD, Vartanian SM, Gasper WJ, Hiramoto JS, Chuter TA, Reilly LM. Lower extremity weakness after endovascular aneurysm repair with multibranched thoracoabdominal stent grafts. J Vasc Surg. 2015 Mar; 61(3):623-9. PMID: 25457458.

I was responsible for conception, design, statistical analysis, interpretation, and much of the writing of the manuscript.

2. Vartanian SM, Johnston PC, Walker JP, Runge SJ, Eichler CM, Reilly LM, Hiramoto JS, Conte MS. Clinical consequence of bare metal stent and stent graft failure in femoropopliteal occlusive disease. J Vasc Surg. 2013 Dec; 58(6):1525-31. PMID: 23911250.

3.

CONFERENCE ABSTRACTS

1. Vartanian SM, Abstract - Western Vascular Society Annual Meeting, Wailea, Maui, Hawaii