



PICS-AICS

Pediatric and Adult Interventional Cardiac Symposium

Las Vegas 2018

POCKET GUIDE SYLLABUS



SEPT. 5-8, 2018
MGM GRAND LAS VEGAS



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WELCOME TO PICS~AICS

PICS-AICS 2018

September 5-8, Las Vegas

OPTIMIZING DECISION MAKING IN CONGENITAL INTERVENTIONS

Dear Colleagues,

Welcome to the 21st *Pediatric and Adult Interventional Cardiac Symposium – PICS-AICS* meeting! The meeting is returning to Las Vegas at the MGM Grand, home to so many great events over the decades. This year's meeting will focus on how our decisions affect our outcomes. The live cases remain the focal point of the meeting. Live cases will be beamed from nine national and international venues with experienced operators that will demonstrate the latest in medical device technology using approved and investigational devices, stents and valves. The live cases this year will be transmitted via satellite from: Doha, Sao Paulo, London, New York, Columbus, San Diego, Seattle, Cincinnati and Memphis.

This year we have collaborated with 3D/3 to provide a full day on Wednesday, September 5th, focused on Advanced Imaging Modalities for Congenital and Structural Interventions. The imaging symposium will include live and taped cases focused on how integral advances in imaging are to driving the accuracy and success of our interventions. This will be followed by the oral abstract presentations that allow those who continue to push the boundaries of our field with their scientific endeavors to present their work on the international stage. Each day we will maintain the clinical focus of the meeting with lunchtime taped cases from 11 national and international centers. The afternoon of the second day will include a symposium dedicated to the right ventricular outflow tract with truly world-class speakers contributing from the surgical and imaging specialties. There are further sessions dedicated to cutting edge advances in stenting and also the renaissance of transcatheter PFO closure with breakout sessions for younger interventionalists and our nursing and technologist colleagues.

Friday, September 7th, begins with live cases from New York, Cincinnati and San Diego, with taped cases from Philadelphia, Cairo and Sydney. In the afternoon there will be a special Global Summit focusing on device development and determining whether there are pathways to simplify international device approval. Representatives from regulatory bodies in North America, Europe and Asia will be present. This will be followed by a session on Registries, Decision-making, Quality and Outcomes. Ultimately, it is our outcomes that will define us and this session will look at how we can understand and utilize these variables to allow us, as interventionalists, to continue to evolve with riskier cases, while protecting ourselves and our patients. The immensely popular breakout for our Spanish-speaking attendees will also take place later in the afternoon.

Saturday, September 8th's cases will be interposed by a session on Developments in Structural Heart Disease, including a taped case from the NIH. Other popular sessions, including "My Nightmare Case in the Cath Lab," ensure opportunity for discussion and learning from each other's experiences. The final afternoon will provide a competitive feel as "Battle of the Continents," a quiz-based session on all aspects of catheterization, will return for its third year with other continents vying to knock North America off its winning run over the last two years.

Poster abstracts will be displayed throughout the meeting. We will continue to support younger interventionalists through the PICS Young Leadership Program, with the winner receiving faculty status and involvement in the meeting. We also wish to recognize those committed to research with The Charles S. Kleinman, MD Scientific

PICS~AICS

Scholarship Award, given in memory of our dear friend Dr. Charlie Kleinman, who was so close to the PICS family. The winner will receive a \$5,000 grant towards his/her research endeavor. We also plan to continue The Terry King Traveling Fellowship Award to sponsor a colleague in a developing country to ensure the meeting continues its philosophy of developing congenital and structural catheterization throughout the world.

We look forward to welcoming you to back to Las Vegas. Please don't forget to get in shape for the 5K Run. It supports a great cause: providing funds for equipment for mission trips to the developing world. Your participation is what makes the meeting the success that it is, and we look forward to learning with you and from you.

Yours truly,

Course Directors and Co-Directors

Registration - Convention Center 3rd Level		
Tuesday	September 4th	3:00 pm-5:00 pm
Wednesday	September 5th	6:30 am-6:00 pm
Thursday	September 6th	6:30 am-6:00 pm
Friday	September 7th	6:30 am-6:00 pm
Saturday	September 8th	7:00 am-5:00 pm



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PICS-AICS Booth #217

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PICS-AICS Eventpilot App

on your smart phone or tablet
More information on p. 7



PICS-AICS 5K RUN
SEPT. 7, 2018: 6AM

HOW TO INSTALL THE EVENTPILOT APP

iOS

1. Go to the **Apple App Store**
2. Search for **"Eventpilot Conference App."**
3. Download the app from the store (no charge)
4. Open the app; you will be prompted for a code.
5. Enter in **"PICS 2018"** (not case-sensitive)
6. Follow the instructions that appear to finish installing.

Android

1. Go to the **Google Play Store**
2. Search for **"Eventpilot Conference App."**
3. Download the app from the store (no charge)
4. Open the app; you will be prompted for a code.
5. Enter in **"PICS 2018"** (not case-sensitive)
6. Follow the instructions that appear to finish installing.

Kindle Fire

1. Go to the **Amazon App Store**
2. Search for **"Eventpilot Conference App."**
3. Download the app from the store (no charge)
4. Open the app; you will be prompted for a code.
5. Enter in **"PICS 2018"** (not case-sensitive)
6. Follow the instructions that appear to finish installing.

BlackBerry or Windows Phone

1. Open the browser on the device.
2. The native app will not install on these devices. Instead, please use this code to access the web app: **<http://ativ.me/kk6>**

MacBook Pro and Other Laptop Devices

1. Open the browser on the device.
2. The native app will not install on these devices. Instead, please use this code to access the web app: **<http://ativ.me/kk6>**

PICS App Icon

The Event Pilot conference app will appear as the icon shown to the right.

(this is the icon that will appear on your device once the app has been loaded):



When you open the EventPilot app and you are prompted for the code (PICS 2018)

then you will see the PICS-AICS icon (right) appear briefly in the download screen.



Once the app has been loaded to your devices you will open the app using the Eventpilot Express icon. Each time you open the Eventpilot icon, it will lead you to the PICS18 app. Each time you reopen the Eventpilot app it will provide you with any updates. It will ask you to "accept" the updates. Click "ok."

FAQ and App Troubleshooting

For other Frequently Asked Questions and Troubleshooting with the EventPilot app visit: **<https://ativ.freshdesk.com/solution/categories/6000015328/folders/6000023302>**

NOTE: A rep for the EventPilot App will be on-site to help or answer questions.

ACKNOWLEDGEMENTS

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PICS~AICS Also Thanks

- **Congenital Cardiology Today**
- The Journal of Structural Heart Disease
- The Society for Cardiovascular Angiography and Interventions (SCAI)
- Wolters Kluwer

2018 Live Case Centers

- Cincinnati Children's Hospital, Cincinnati, OH USA
- Dante Pazzanese Instituto de Cardiology, São Paul, Brazil
- Hammersmith Hospital, Imperial College - Healthcare NHS Trust, London, UK
- Le Bonheur Children's Hospital, Memphis, TN USA
- Nationwide Children's Hospital, Columbus, OH USA
- New York-Presbyterian Morgan Stanley Children's Hospital, New York, NY USA
- Rady Children's Hospital, San Diego, CA USA
- Seattle Children's Hospital, Seattle, WA USA
- Sidra Medicine, Doha, Qatar

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3D13 Guest Faculty: Jeremy Collins, MD; Pei-Ni Jone, MD; Paul Lawrence, RCIS; Doff McElhinney, MD; Mirella Molenschot, MD; Shubhika Srivastava, MD; Anne Marie Valente, MD



PICS-AICS

Pediatric and Adult Interventional Cardiac Symposium

Exhibitor Passport

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Validate your passport at each Exhibitor Booth to be eligible for our Grand Prize drawing on Saturday at 4:45pm in the Main Session Room.

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Winner must be present Saturday at 4:45pm in the Main Session for the drawing to claim their new Apple HomePod!

PICS Foundation

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PICS-AICS

Pediatric and Adult Interventional Cardiac Symposium

SEPTEMBER 5th - WEDNESDAY

***The International Symposium on 3D Imaging for
Interventional Catheterization in CHD***

**6:30 am-6:00 pm - Registration - Convention Center
3rd Level**

7:00-8:15 am - Breakfast Available - 3rd Level Foyer

**7:00 am-5:00 pm - Poster Abstracts - Convention
Center 3rd Level Foyer**

8:00-10:00 am - 3DRA Boot Camp:

Moderators: *Gregor Krings; Aimee Armstrong*

- **Welcome & Introduction** – *Gregor Krings; Aimee Armstrong*
- **Why Do 3DRA?** – *Evan Zahn*
- **Cookbook: How to Do 3DRA** – *Aimee Armstrong*
- **The Great Debate: 3 Vendors' Versions of 3DRA**
(3 separate computers at once; 3 debaters show us how
post-processing is done with the vendors' 3DRA
System) – *Jeremy Asnes; Gregor Krings; Evan Zahn*
- **Q&A**
- **3DRA of the Airway and Esophagus: Why It Matters**
– *Mirella Molenschot*
- **The Role of the Cath Lab Technologist** – *Paul Lawrence*
- **How to Measure Using 3DRA** – *Thomas Fagan*
- **Q&A**

10:00-10:15 am - Coffee Available - 3rd Level Foyer

**10:15-11:45 am - Collaborating with the Non-
Invasive Imaging Team**

Moderators: *Craig Fleishman; Joshua Murphy*

- **Tips and Tricks for Multi-Modality Image Fusion**
– *Shyam Sathanandam*
- **Taped Case: Echo Fusion with Fluoroscopy**
– *Pei-Ni Jone*
- **3D ICE: Is It Worth the Cost?** – *John P. Cheatham*
- **Intraventricular Blood Flow Dynamics: Will It Impact
Outcomes?** – *Shubhika Srivastava*
- **Creating a Culture of Collaboration** – *Aimee Armstrong*
- **Q&A**

11:45 am-12:00 pm - Lunch Available - 3rd Level Foyer



SEPTEMBER 5th - WEDNESDAY

The International Symposium on 3D Imaging for Interventional Catheterization in CHD

12:00-12:45 pm - Lunch and Live Case from Nationwide Children's Hospital – Darren Berman

Moderators: *Evan Zahn; Bryan Goldstein; Lee Benson; Shakeel Qureshi*

12:45-2:15 pm - TOF Imaging and Intervention:

Moderators: *Jeremy Collins; Daniel Levi; Emile Bacha*

- **When Should We Replace the Pulmonary Valve in TOF?** – *Anne Marie Valente*
- **Predicting Coronary Compression in TPVR: Is Finite Element Analysis the Answer?** – *Doff McElhinney*
- **What Does the Surgeon Need to Know Before a TOF/PA/MAPCA Case?** – *Frank Hanley*
- **3D Printing for Surgical and Interventional Planning** – *Lee Benson*
- **Will We Need 3D Printing When We Have...**
 - **Holography** – *Lee Benson*
 - **Photorealistic Visualization** – *Gregor Krings and Aimee Armstrong*
- **Q&A**

2:30-3:30 pm - Biomedical Engineering Meets Coarctation:

Moderators: *Jeffrey Zampi; Thomas Fagan*

- **Computational Fluid Dynamics for Aortic Interventions** – *Aimee Armstrong*
- **From 3DRA to 4DRA** – *Gregor Krings*
- **4D Cardiac MR** – *Jeremy Collins*
- **Q&A**

3:25-3:30 pm - Closing Remarks – *Gregor Krings; Aimee Armstrong*

3:30-4:00 pm - Coffee Available - 3rd Level Foyer

4:00-6:00 pm - Hands-On Vendor Rooms for 3DRA Post-Processing (Breakout)

- Canon: Rm. 304
- GE Healthcare: Rm. 305
- Philips: Rm. 302
- Siemens Healthineers: Rm. 301

4:00-6:00 pm - Oral Abstract Presentations - Main Session 3rd Level

Moderators: *Larry Latson; Terry King; Felix Berger*

6:00-8:00 pm - WELCOME RECEPTION - EXHIBIT HALL - 3rd Level

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AMPLATZER™ PFO OCCLUDER

The AMPLATZER™ PFO Occluder is indicated for percutaneous transcatheter closure of a patent foramen ovale (PFO) to reduce the risk of recurrent ischemic stroke in patients, predominantly between the ages of 18 and 60 years, who have had a cryptogenic stroke due to a presumed paradoxical embolism, as determined by a neurologist and cardiologist following an evaluation to exclude known causes of ischemic stroke. **Contraindications:** Patients with intra-cardiac mass, vegetation, tumor or thrombus at the intended site of implant, or documented evidence of venous thrombus in the vessels through which access to the PFO is gained, patients whose vasculature, through which access to the PFO is gained, is inadequate to accommodate the appropriate sheath size, patients with anatomy in which the AMPLATZER™ PFO device size required would interfere with other intracardiac or intravascular structures, such as valves or pulmonary veins, patients with other source of right-to-left shunts, including an atrial septal defect and/or fenestrated septum, patients with active endocarditis or other untreated infections.

AMPLATZER™ SEPTAL OCCLUDERS

The AMPLATZER™ Septal Occluder is a percutaneous, transcatheter, atrial septal defect closure device intended for the occlusion of atrial septal defects (ASD) in secundum position or patients who have undergone a fenestrated Fontan procedure and who now require closure of the fenestration. Patients indicated for ASD closure have echocardiographic evidence of ostium

secundum atrial septal defect and clinical evidence of right ventricular volume overload (such as, 1.5:1 degree of left-to-right shunt or RV enlargement). **Contraindications:** The AMPLATZER™ Septal Occluder is contraindicated for the following: Any patient known to have extensive congenital cardiac anomaly which can only be adequately repaired by way of cardiac surgery, any patient known to have sepsis within 1 month prior to implantation, or any systemic infection that cannot be successfully treated prior to device placement, any patient known to have a bleeding disorder, untreated ulcer, or any other contraindications to aspirin therapy, unless another antiplatelet agent can be administered for 6 months, any patient known to have a demonstrated intracardiac thrombi on echocardiography (especially left atrial or left atrial appendage thrombi), any patient whose size (such as, too small for transesophageal echocardiography probe, catheter size) or condition (active infection, etc.) would cause the patient to be a poor candidate for cardiac catheterization, any patient where the margins of the defect are less than 5 mm to the coronary sinus, inferior vena cava rim, AV valves, or right upper lobe pulmonary vein.

The AMPLATZER™ Cribriform Occluder is a percutaneous, transcatheter, atrial septal defect closure device intended for the closure of multifenestrated (cribriform) atrial septal defects (ASD). Patients indicated for ASD closure have echocardiographic evidence of fenestrated ostium secundum atrial septal defect and clinical evidence of right ventricular overload (such as, 1.5:1 degree of left-to-right shunt or right ventricular enlargement). **Contraindications:** Treatment of patients with PFO defects, this device has not been studied in patients with PFO defects; patients known to have extensive congenital cardiac anomaly, which can only be adequately repaired by way of cardiac surgery, patients known to have sepsis within 1 month prior to implantation, or any systemic infection that cannot be successfully treated prior to device placement, patients known to have a bleeding disorder, untreated ulcer, or any other contraindications to aspirin therapy unless another antiplatelet agent can be administered for 8 months, patients known to have demonstrated intracardiac thrombi on echocardiography (especially left atrial or left atrial appendage thrombi), patients whose size would cause the patient to be a poor candidate for cardiac catheterization, any patient where the radius of the device is greater than the distance from the central defect to the aortic root or superior vena cava

AMPLATZER™ VSD OCCLUDERS

The AMPLATZER™ Muscular VSD Occluder is indicated for use in patients with a complex ventricular septal defect (VSD) of significant size to warrant closure (large volume left-to-right shunt, pulmonary hypertension, and/or clinical symptoms of congestive heart failure) who are considered to be at high risk for standard transatrial or transarterial surgical closure based on anatomical conditions and/or based on overall medical condition. High-risk anatomical factors for transatrial or transarterial surgical closure include patients requiring left ventriculotomy or an extensive right ventriculotomy, with a failed previous VSD closure, with multiple apical and/or anterior muscular VSDs ("Swiss cheese septum"), with posterior apical VSDs covered by trabeculae. **Contraindications:** The AMPLATZER™ Muscular VSD Occluder is contraindicated for the following: Patients with defects less than 4 mm distance from the semilunar (aortic and pulmonary) and atrioventricular valves (mitral and tricuspid), patients with severely increased pulmonary vascular resistance above 7 Wood units and a right-to-left shunt and documented irreversible pulmonary vascular disease, patients with perimembranous (close to the aortic valve) VSD, patients with post-infarction VSD, patients who weigh less than 5.2 kg. (Patients smaller than 5.2 kg were studied in the clinical trial, but due to poor outcome, these patients have been contraindicated for device placement. Data from these patients has not been included in the overall analysis.), patients with sepsis (local/generalized), patients with active bacterial infections, patients with contraindications to antiplatelet therapy or agents.

The AMPLATZER™ Post-infarct Muscular VSD Occluder is a percutaneous transcatheter occlusion device intended for closure of post-myocardial infarct muscular VSDs in patients who are not satisfactory surgical candidates. **Contraindications:** The AMPLATZER™ Post-infarct Muscular VSD Occluder is contraindicated for the following: patients with perimembranous VSDs or a VSDs close to the aortic or mitral valve, patients with congenital muscular VSDs, patients with the presence of thrombus at the intended site of implant, or documented evidence of venous thrombus in the vessels through which access to the defect is gained, patients with active endocarditis or other infections producing bacteremia, patients whose vasculature, through which access to the defect is gained, is inadequate to accommodate the appropriate sheath size, patients known to have active sepsis or any systemic infection that cannot be successfully treated prior to device placement, any patient known to have a bleeding disorder, untreated ulcer, or any other contraindications to aspirin therapy, unless another antiplatelet agent can be administered for 6 months.

AMPLATZER™ DUCT OCCLUDERS

The AMPLATZER™ Duct Occluder is a percutaneous, transcatheter occlusion device intended for the nonsurgical closure of a patent ductus arteriosus (PDA). **Contraindications:** patients weighing less than 6 kg, patients less than 6 months of age, presence of thrombus at the intended site of implant, or documented evidence of venous thrombus in the vessels through which access to the defect is gained, active endocarditis or other infections producing bacteremia, patients whose vasculature, through which access to the defect is gained, is inadequate to accommodate the appropriate sheath size, patients with pulmonary hypertension with pulmonary vascular resistance of greater than 8 Wood units or Rp/Rs of greater than 0.4

The AMPLATZER™ Duct Occluder II is a percutaneous transcatheter occlusion device intended for the nonsurgical closure of patent ductus arteriosus. **Contraindications:** The AMPLATZER™ Duct Occluder II is contraindicated for the following: patients weighing less than 6 kg, patients less than 6 months of age, patients with a window-type patent ductus arteriosus (ie, length less than 3mm), patients with an active infection, patients with thrombus at the intended site of implant, patients with pulmonary hypertension with pulmonary vascular resistance of greater than 3 Wood units or Rp/Rs of greater than 0.4, patients with patent ductus arteriosus greater than 12 mm in length by angiography, patients with patent ductus arteriosus greater than 5.5 mm in diameter by angiography.

CAUTION: These products are intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use inside the product carton (when available) or at manuals. sjm.com for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events.

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SEPTEMBER 6th - THURSDAY
PICS-AICS 2018

Optimizing Decision-Making in Congenital Interventions

6:30 am-6:00 pm - Registration - Convention Center 3rd Level

7:00-8:15 am - Breakfast Available - Exhibit Hall 3rd Level

7:00 am-5:00 pm - Poster Abstracts - Convention Center 3rd Level Foyer

7:00-8:00 am - Moderated Posters - Convention Center 3rd Level Foyer

Moderators: *Zahid Amin; Thomas Forbes*

8:00-8:15 am - Welcome – Ziyad M. Hijazi

8:15-10:30 am - LIVE CASES – Doha, São Paulo, London

Moderators: *Damien Kenny, Ziyad M. Hijazi*

Panelists: *Carlos Zabal; Jou Kou Wang; Makram Ebeid; Alvaro Galindo; Francois Godart*

10:30-10:45 am - Coffee Available - Exhibit Hall 3rd Level

- TAPED CASES - German Henestroza (guest speaker)

- Main Session

10:45 am-1:00 pm - LIVE CASES – Doha, São Paulo - Main Session - 3rd Level

Moderators: *Thomas Jones; Mario Carminati*

Panelists: *Petru Liuba; John Breinholt; Hide Hara; Ozge Pamukcu*

12:45-1:00 pm - Lecture from Doha via Satellite - Transcatheter Reverse Potts Shunt Update – Younes Boudjemlin

12:45-1:15 pm - Lunch Available – Exhibit Hall 3rd Level

1:10-2:00 pm - TAPED CASES - Houston – Henri Justino; Athar Qureshi - Penn State – Howard Weber - Chicago – Cliff Kavinsky; Joshua Murphy - Main Session - 3rd Level

Moderators: *Nathan Taggart; Damien Kenny*

2:00-5:30 pm - The Native RVOT Symposium | Assessment and Treatment of the "Native" Right-Ventricular Outflow Tract: "Times They Are A Changing" - Main Session - 3rd Level

Moderators: *Evan Zahn; Allison Cabalka; Emile Bacha*

2:00-3:15 pm - Imaging, Assessment and Indications

- **Taped Case – John P. Cheathan**
- **Echocardiographic Assessment of the RVOT: Gold Standard or Outdated? – Craig Fleishman**
- **Cardiac MRI: Beyond Volumes and Regurgitant Fraction – Ruchira Garg**
- **What Does CT Imaging and 3D Modeling Bring to the Table? – Shelby Kutty**
- **Who Needs a Pulmonary Valve? Evolving Indications for PVR – Zahid Amin**

2:00-3:45 pm - NOVEL APPROACHES TO STENTING (Breakout: Rm. 301 / 302)

Moderators: Felix Berger; Julie Vincent

- **Covered Stenting for Sinus Venosus ASD's**
– *Shakeel Qureshi*
- **Optimal Approaches to Unzipping Small Diameter Stents** – *Howaida El-Said*
- **New Options for Large Diameter Balloon Expandable Stents** – *Marc Gewillig*
- **Newer Covered-Stent Design and Application in CHD**
– *Gregor Krings*
- **Techniques to Reposition or Retrieve Malposed or Embolized PA Stents** – *Frank Ing*
- **Stenting and MRI Guided Interventions – Will They Ever Be Compatible?** – *Kanishka Ratnayaka*
- **What is Needed in the Future** – *Felix Berger*
- **Discussion/Questions**

2:00-3:45 pm - NURSING AND ASSOCIATED PROFESSIONALS (Breakout: Rm. 304 / 305)

Moderators: Sharon Cheatham; Karen Iacono

- **Navigating Social Media in Health Care** – *Gina Langlois*
- **How to Design & Test Bioresorbable Stents for CHD in the Animal Lab** – *Emily Kish*
- **Endocarditis of Bioprosthetic Valves: Surgical and Transcatheter** – *Doff McElhinney*
- **Assessing the Surgically-Repaired RVOT for Transcatheter Pulmonary Valve** – *Matthew Gillespie*
- **3-D Printing for Education & Interventional Planning**
– *Joseph Graziano*
- **Using 3-D Overlay for Intervention** – *Darren Berman*
- **Accreditation for the Cath Lab** – *Joanne Chisholm*
- **Discussion / Questions**

3:15-5:00 pm - Treatment Options for the Native RVOT: Past, Present and Future

- **Newer Surgical Approaches to Primary Repair of TOF** – *Frank Hanley*
- **What's the Best Surgical Approach for Dysfunctional RVOT After TOF Repair?** – *Emile Bacha*

3:45-4:00 pm - Coffee Available - Exhibit Hall 3rd Level

- **The Growing Experience with Currently Approved Valves in the "Native" RVOT** – *Allison Cabalka*
- **Creativity in Treating the Native RVOT: Russian Dolls, Hybrid and Beyond** – *Marc Gewillig*
- **The Next Generation: Update on the Native RVOT Valve Trials** – *Evan Zahn*
- **Where Catheter-Based Treatment for RVOT Is Going Next: Tissue Engineering and Beyond** – *Daniel Levi*

5:00-5:30 pm - Debate – Surgical PVR is Time-Tested and Superior to tPVR in this Population... Stop Wasting our Time

- Pro: *Michel Ilbawi*; Con: *Matthew Gillespie*
- **Discussion**

SEPTEMBER 6th - THURSDAY

PICS-AICS 2018

Optimizing Decision-Making in Congenital Interventions

4:00-5:45 pm - ATRIAL-SEPTAL and LEFT-ATRIAL

APPENDAGE INTERVENTIONS (Breakout: Rm: 301 / 302)

Moderators: *John Carroll; YY Lam; Anthony Nobles*

- **Present Status of PFO Closure: Indications, Guidelines, and Unanswered Questions** – *John Carroll*
- **Present Status of LAA Occlusion: Indications, Guidelines & Unanswered Questions** – *Clifford Kavinsky*
- **Preparing for PFO Closure: What Imaging and Other Testing is Needed?** – *Eric Horlick*
- **Preparing for LAA Occlusion: What Imaging and Other Testing is Needed?** – *Mark Reisman*
- **Performing PFO Closure: Routine and Challenging Cases** – *Horst Sievert*
- **Performing LAA Closure: Routine and Challenging Cases** – *Kevin Walsh*
- **Interventions on the Atrial Septum in Heart Failure** – *Joseph Vettukattil*

4:00-5:30 pm - PICES SESSION: “Innovation on the Fly” (Breakout: Rm 304 / 305)

Moderators: *Jeffrey Zampi; Sara Trucco; Shawn Batlivala; Michael Seckeler; Nathan Taggart*

- **PICES Business Meeting**
- **SVC Syndrome: Venous Recanalization & “Train-Track” Technique for Venous Bifurcation** – *Varun Aggarwal*
- **Attempted Antegrade Stent Implantation for Coarctation Post-Norwood Operation** – *Neil Patel*
- **Real-Time Innovation in the Lab: Tips from a “Master Interventionalist”** – *Ziyad M. Hijazi*
- **Questions / Discussion / Concluding Remarks**

5:45 pm - PICS-AICS Achievement Award, Main Session 3rd Level

6:00-7:30 pm - PediaVascular Supporting Device Development – The Shark Tank - Main Session 3rd Level

Moderators: *Tim Moran; Martin Bocks; Matthew Gillespie; William Hellenbrand; Daniel Levi; Lynn Peng*

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Contraindications: Clinical or biological signs of infection. Active endocarditis. Pregnancy. **Contraindications (CoA only):** Patients too small to allow safe delivery of the stent without compromise to the systemic artery used for delivery. Unfavorable aortic anatomy that does not dilate with high pressure balloon angioplasty. Curved vasculature. Occlusion or obstruction of systemic artery precluding delivery or the stent. Known allergy to aspirin, other antiplatelet agents, or heparin. **Contraindications (RVOT only):** Patients too small to allow safe delivery of the stent without injury to a systemic vein or to the right side of the heart. **Warnings / Precautions:** Radiofrequency heating during MRI scans on overlapped, 10 zig CP Stents has not been evaluated. Excessive force while crimping may weaken welds of the stent. Crimping the 8 zig stent on a balloon catheter smaller than 12mm, and the 10 zig on a balloon catheter smaller than 26mm, may cause damage to the stent. The stent is rigid and may make negotiation through vessels difficult. **Warnings / Precautions (CoA only):** Coarctation of the aorta involving the aortic isthmus or first segment of the descending aorta should be confirmed by diagnostic imaging. The NuMED CP Stent has not been evaluated in patients weighing less than 20kg. As with any type of implant, infection secondary to contamination of the stent may lead to aortitis, or abscess. Over-stretching of the artery may result in rupture or aneurysm formation. **Warnings / Precautions (Covered CP Stent only):** Excessive handling and manipulation of the covering while crimping the stent may cause the covering to tear off of the stent. Crimping the device in the opposite direction of the folds in the covering may cause the covering to catch while inserting into the hemostasis tool and introducer. This could cause the covering to catch and tear off of the stent. **Warnings / Precautions (RVOT only):** During the Premarket Approval study the Medtronic Melody valve was used for valve restoration. The safety and effectiveness of the Covered CP Stent for pre-stenting of the right ventricular outflow tract (RVOT) landing zone (i.e. prophylaxis or prevention of either RVOT conduit rupture or TPVR fracture; use as a primary RVOT conduit) in preparation of a transcatheter pulmonary valve replacement (TPVR) has not been evaluated. As with any type of implant, infection secondary to contamination of the stent might lead to endocarditis, or abscess formation. The Covered Stent can migrate from the site of implant potentially causing obstruction to pulmonary artery flow. Over-stretching of the RVOT may result in rupture or aneurysm of the RV-PA conduit or the native pulmonary artery. The inflated diameter of the stent should at least equal the diameter of the intended implant site. Reference the IFU for a complete listing of indications, contraindications, warnings and precautions.

BIB® (Balloon in Balloon) Catheter Indications for Use:

The BIB Catheter is indicated for CP Stent / Covered CP Stent placement in vessels over 8mm in diameter.

Nit-Occlud® Indications for Use:

The Nit-Occlud PDA coil is a permanently implanted prosthesis indicated for percutaneous, transcatheter closure of small to moderate size patent ductus arteriosus with a minimum angiographic diameter less than 4mm.

Nit-Occlud® Brief Statement:

Do not implant the Nit-Occlud PDA into patients who have endocarditis, endarteritis, active infection, pulmonary hypertension (calculated PVR greater than 5 Wood Units), thrombus in a blood vessel through which access to the PDA must be obtained, thrombus in the vicinity of the implantation site at the time of the implantation or patients with a body weight < 11 lbs. (5kg). An angiogram must be performed prior to implantation for measuring length and diameter of the PDA. Only the pfm medical implantation delivery catheter should be used to implant the device. Administration of 50 units of heparin per kg bodyweight should be injected after femoral sheaths are placed. Antibiotics should be given before (1 dose) and after implantation (2 doses) to prevent infection during the implant procedure. Do not implant the Nit-Occlud PDA in an MR environment. Do not pull the Nit-Occlud coil through heart valves or ventricular chambers. Contrast media should not be injected through the implantation catheter. The catheter must not be connected to high pressure injectors. Patients may have an allergic response to this device due to small amounts of nickel that has been shown to be released from the device in very small amounts. If the patient experiences allergic symptoms, such as difficulty in breathing or swelling of the face or throat, he/she should be instructed to seek medical assistance immediately. Antibiotic prophylaxis should be performed to prevent infective endocarditis during first 6 months after coil implantation. Potential Adverse Events: Air embolism, Allergic reaction to drug/contrast, Apnea, Arrhythmia requiring medical treatment or pacing, Arteriovenous fistula, Bacterial endocarditis, Blood loss requiring transfusion, Chest pain, Damage to the tricuspid or pulmonary valves, Death, Embolization of the occluder, requiring percutaneous or surgical intervention, Endarteritis, False aneurysm of the femoral artery, Fever, Headache/ Migraine, Heart failure, Hemolysis after implantation of the occluder, Hypertension, Hypotension or shock, Infection, Myocardial infarction, Occluder fracture or damage, Perforation of the heart or blood vessels, Stenosis of the left pulmonary artery or descending thoracic aorta, Stroke/TIA, Thromboembolism (cerebral or pulmonary), Valvular Regurgitation, Vessel damage at the site of groin puncture (loss of pulse, hematoma etc.).

Refer to the Instructions for Use for complete indications, relevant warnings, precautions, complications, and contraindications. CP Stent and BIB are registered trademarks of NuMED, Inc. Nit-Occlud is a registered trademark of pfm medical, inc. Rx only CV-9063 Rev. 7/18 ©2018 B. Braun Interventional Systems Inc. Part of the B. Braun Group of Companies



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6:00 am-7:00 am - PICS-AICS 5K Run

6:30 am-6:00 pm - Registration - Convention Center 3rd Level

7:00-8:15 am - Breakfast Available - Exhibit Hall 3rd Level

7:00 am-5:00 pm - Poster Abstracts - Convention Center 3rd Level Foyer

7:00-8:00 am - Moderated Posters - Convention Center 3rd Level Foyer

Moderators: *Mario Carminati; Alex Javois*

8:00-8:15 am - Update on Live Cases 2017 – Kiran Mallula

8:15-10:30 am - LIVE CASES – New York, Cincinnati, San Diego

Moderators: *William Hellenbrand; Ralf Holzer; Panelists: Jeremy Asnes; Abraham Rothman; Martin Bocks; Joshua Murphy; Gejun Zhang*

10:30-10:45 am - Coffee Available - Exhibit Hall 3rd Level

10:45 am-1:00 pm - LIVE CASES – New York, Cincinnati, San Diego

Moderators: *John P. Cheatham; Alan Nugent*
Panelists: *Marco Papa; Charles Mullins; Nguyen Lan Hieu; Wail Alkashkari; Sahar El-Shedoudy*

12:45-1:15 pm - Lunch Available - Exhibit Hall 3rd Level

1:10-2:00 pm - TAPED CASES – Philadelphia – Yoav Dori; Cairo – Sonia El Saiedi; Sydney – Philip Roberts - Main Session - 3rd Level

Moderators: *Richard Ringel; Brent Gordon*

2:00-3:45 pm - WORKING WITH REGULATORS – GLOBAL SUMMIT ON DEVICE DEVELOPMENT – Main Session - 3rd Level

Moderators: *Ziyad M. Hijazi; Thomas Forbes; John P. Cheatham; Panelists: Nicole Ibrahim; Zahid Amin; Shakeel Qureshi; Hideshi Tomita; Sertac Cicek; Mami Ho; Sara Takahashi; Satashi Yasukochi*

- **Challenges to Bringing a Device to Market – Where Do I Start?** – *Matthew Gillespie*
- **Strategies Introduced by the FDA to Streamline Device Approval** – *Nicole Ibrahim*
- **Use of Registries to Support Device Approval** – *Thomas Forbes*
- **HBD-Children: Japanese Regulatory Perspective** – *Mami Ho*
- **US-Japanese Initiatives to Harmonize Device Approval – HBD – Children** – *Hideshi Tomita*
- **Where Is Europe in All of This?** – *Thomas Melvin (via Skype)*
- **Panel Discussion**



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SEPTEMBER 7th - FRIDAY

PICS-AICS 2018

Optimizing Decision-Making in Congenital Interventions

2:00-4:00 pm - SPANISH SESSION (Breakout: Rm. 301 / 302)

Moderators: *Horacio Faella; Carlos Zabal; Alejandro Peirone*

- **My Experience with Lepu Devices – An Overview**
– *Raul Arrieta*
- **New Imaging Technologies for CoA Stenting**
– *Juan Pablo Sandoval*
- **Tips and Tricks for LAA Closure** – *Daniel Aguirre*
- **Collaboration between Adult and Pediatric Interventionalists: Argentinian Experience**
– *Oscar Mendiz*
- **Experience with the Venus Valve in LATAM**
– *Alejandro Peirone*
- **Abernathy Syndrome: What the Hell Is It, and How Do I Treat It?** – *Henri Justino*
- **Acute and Follow-up Outcomes of Melody in the Mitral Position** – *Gianfranco Butera*
- **Lymphatic Interventions In Patients with Congenital Heart Disease** – *Daniel Springmuller*
- **Debate: Transcatheter Closure of PDA's in Premature Infants Is Worthwhile:**
 - Pro: *Joaquim Miro*; Con: *Jacqueline Kreutzer*
- **Questions / Discussion**

3:30-4:00 pm - Coffee Available Exhibit Hall 3rd Level

4:00-5:30 pm - DUCTAL INTERVENTIONS – Main Session 3rd Level

Moderators: *Brian Morray; Henri Justino*

- **Vascular Approach – Which Vessel for Which Morphology?** – *Chris Petit*
- **Techniques for Dealing with Branch Pulmonary Artery Stenosis** – *Mazeni Alwi*
- **Comparative Outcomes with BTTS** – *Alex Javois*
- **Putting It All Together: A Standardized Approach to PDA Stenting** – *Athar Qureshi*
- **Morphology and Imaging of the Premature PDA**
– *Evan Zahn*
- **PDA Closure in Premature Infants:**
 - **Montreal Approach** – *Joaquim Miro*
 - **Turkish Approach** – *Nazmi Narin*

***Check at the Reception Desk for
last-minute changes to the schedule***

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COLUMBIA

SEPTEMBER 7th - FRIDAY

PICS-AICS 2018

Optimizing Decision-Making in Congenital Interventions

4:00-5:30pm - REGISTRIES, DECISION-MAKING, QUALITY AND OUTCOMES (Breakout: Rm. 304 / 305)

Moderators: Ralf Holzer; Lisa Bergersen

- **15 Years of C3PO and 10 Years of IMPACT – We Have Come a Long Way, But What Have We Learned?** – *Lisa Bergersen*
- **From Data to Decisions: Decision-Making in Pediatric Cardiology** – *Colin McMahon*
- **Can We Adequately Risk-Adjust for Extremely High-Risk Cases?** – *David Nykanen*
- **The Use and Impact of Registry Data: A Surgeon's Perspective** – *Mark Galantowicz*
- **The Use and Impact of Registry Data: An Interventionalist's Perspective** – *Ralf Holzer*
- **What Have Registries Recently Told Us** – *John W. Moore*
- **Roundtable Discussion on the Use and Impact of Registry Data** – *All presenters*

4:00-5:30 pm - CCISC CASE PRESENTATIONS AND CONTROVERSIES (Breakout: Rm. 301 / 302)

Moderators: Thomas Forbes; Olivier Ghez

- **Abnormal Venous Anatomy Pre-Fontan** – *Kiran Mallula*
- **Vocal Cord Paralysis Following PA Stenting** – *David Balzer*
- **Intimal Flap in a RV-PA Conduit** – *Gianfranco Butera*
- **Pre-Stenting is Necessary for tPVR in the Native RVOT** – *Ahmet Celebi*
- **ECMO Cannulation – Is This the Realm of the Interventionalist?** – *Gareth Morgan*
- **Still "Compliance Testing" Pre-CoA Stenting – Really?!** – *Mario Carminati*
- **Discussion/Questions**

7:00-10:00 pm - PICS-AICS Dinner Event at the MGM Splash Pool

Join us for a cocktail reception, dinner, dancing and great Las Vegas entertainment.

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SEPTEMBER 8th - SATURDAY

PICS-AICS 2018

Optimizing Decision-Making in Congenital Interventions

7:00 am-5:00 pm - Registration - Convention Center 3rd Level

7:00-8:15 am - Breakfast Available - Exhibit Hall 3rd Level

7:00 am-5:00 pm - Poster Abstracts - Convention Center 3rd Level Foyer

7:00-8:00 am - Moderated Posters - 3rd Level Foyer
Moderators: *JV DeGiovanni; Gareth Morgan*

8:00-9:20 am - LIVE CASES – Memphis, Seattle - Main Session 3rd Level

Moderators: *Carlos Pedra; Lee Benson*

Panelists: *Hasri Samion; Sertac Cicek; Horacio Faella; Satoshi Yasukochi; Hesham Al-Saloos*

9:30-11:00 am - DEVELOPMENTS IN STRUCTURAL HEART DISEASE WITH RELEVANCE TO CONGENITAL HEART DISEASE – Main Session 3rd Level

Moderators: *Clifford Kavinsky; John Carroll*

- **Management of Large-Bore Arterial Access and Its Complications – Issam Moussa**
- **MitraClip in Congenital Heart Patients – Scott Lim**
- **Percutaneous Therapies for Tricuspid Valve Disease – Reda Ibrahim**
- **Collaborating in Management of Coronary Arterial Fistula – Mark Osten**
- **TAVR in a Patient with Bicuspid Aortic Valve Disease – Case Presentation – Hussam Suradi**
- **Atrial Septal Interventions for Heart Failure – Saibal Kar**
- **Taped Case – Robert Lederman**

11:00-11:30 am - Coffee Available - Exhibit Hall 3rd Level

11:30 am-1:00 pm - LIVE CASES – Memphis, Seattle - Main Session 3rd Level

Moderators: *JV DeGiovanni; Ziyad M. Hijazi*

Panelists: *Daniel Aguirre; Jose Zunzunegui-Martinez; Oscar Mendiz; Alejandro Peirone; Pan Xin*

1:00-1:30 pm - Lunch Available - Exhibit Hall 3rd Level

1:10-2:30 pm - MY NIGHTMARE CASE IN THE CATH LAB
Moderators: *Shakeel Qureshi; Damien Kenny*

Check at the Reception Desk for last-minute changes to the schedule

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SEPTEMBER 8th - SATURDAY

PICS-AICS 2018

Optimizing Decision-Making in Congenital Interventions

2:30-4:00 pm - HYBRID CASE PRESENTATIONS

Moderators: *Mark Galantowicz; Lynn Peng*

- **My Best Hybrid Case** – *Julie Vincent*
- **Hybrid Stenting of Aortic Coarctation** – *Carlos Pedra*
- **Hybrid Interventions in Small Infants** – *Damien Kenny*
- **Hybrid PA Stenting** – *Dietmar Schranz*
- **Hybrid Pulmonary Valve Replacement** – *Zahid Amin*
- **My Best Hybrid Case** – *Jamil Aboulhosen*
- **Discussion / Questions**

3:00-3:30 pm - Coffee Available - Exhibit Hall 3rd Level

2:30-4:00 pm - PUSHING THE BOUNDARY IN ASIA
(Breakout: Rm. 304 / 305)

Moderators: *Levent Saltik; Jae Young Choi*

- **Transcatheter Closure of VSD's in Smaller Infants**
– *Levent Saltik; Jae Young Choi*
- **Experience With Closure of Very Large ASD's**
– *K. Sivakumar*
- **Echo Guidance for Transcatheter Interventions**
– **Update on the Pan Approach** – *Xiang Bin Pan*
- **Self-Expanding Transcatheter Pulmonary Valve Replacement - Experience from Asia**
– *Worakan Promphan*
- **PDA Closure with Severe PAH – The Pakistan Experience** – *Masood Sadiq*
- **Thinking Outside the Box in a Limited Resource Environment – Tips and Tricks to Deal with Complications** – *Bharat Dalvi*
- **Discussion / Questions**

4:00-4:45 pm - BATTLE OF THE CONTINENTS

Moderator: *Damien Kenny*

4:45 pm - FINAL COMMENTS – Ziyad M. Hijazi

- **Best Poster Abstract Awarded**
- **Exhibit Passport Winner (Must Be Present)**

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PICS-AICS YOUNG LEADERSHIP 2018 AWARD WINNER

This award was developed to recognize excellence in early career interventionalists. We are proud to announce this year's winner: **Ozge Pamukcu, MD**



Ozge Pamukcu is an Assistant Professor of Pediatric Cardiology in Erciyes University School of Medicine. She had primary, high school, and medical faculty education in Ankara. She graduated with her first degree from primary and high school. During her internship in 2003 she had been in Mayo Clinic for a Physical Medicine and Rehabilitation Clerkship in Rochester, Minnesota. She completed her

pediatric residency in Marmara University, Istanbul. In 2011, she started a pediatric cardiology fellowship in Erciyes University in Kayseri. During her fellowship she concentrated on mostly interventional procedures and postoperative cardiac intensive care. For further experience she visited Kinderherzzentrum Universitätsklinikum Giessen und Marburg, Germany. She had a chance to work in a cardiac intensive care unit and a cardiac catheterization laboratory with Professor Dietmar Schranz for two months. After finishing her pediatric cardiology fellowship, she stayed in Erciyes University and became a faculty member in 2015. She is still working as an Assistant Professor of Pediatric Cardiology in Erciyes University.

Dr. Pamukcu's clinical and academic interests mostly focus on interventional procedures, especially defect closure in children with low body weight. These include transcatheter closure of PDA in preterm infants and VSD closure under 1 year of age. In addition, she had studied experimental colitis treatment as a pediatric thesis project during her pediatric residency and the treatment of experimental myocarditis in rats during a pediatric cardiology fellowship. She is currently leading the project examining the effect of endocrine disruptors on the incidence of congenital heart defects, and a multi center project concerning the results of ASD closure under 10kg. Dr. Pamukcu is a member of Turkish Pediatric Cardiology Association and The Cardiac Intensivists' Group.

Personal interests of Dr. Pamukcu outside of the hospital include cooking, especially baking. Nowadays, she mostly spends time experimenting with gluten-free, no-sugar recipes. She also likes traveling abroad with friends and doing Pilates.

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Lubega Sulaiman, MD

Senior Consultant Paediatric Cardiologist
Head, Division of Paediatric Cardiology
Uganda Heart Institute, Mulago Hospital, Kampala - Uganda

Dr. Sulaiman Lubega is a Senior Consultant Paediatric Cardiologist currently heading the Division of Paediatric Cardiology of Uganda Heart Institute. He is also the head of the Paediatric Cardiac Interventional program of the Institute. He has been working with Uganda Heart Institute since 2003, and he has had various courses and fellowship trainings in the field of cardiology in India, South Africa, Italy, Germany, and the United States of America. He supervised the procurement and installation of the state-of-the-art Siemen Bi-Plane Cardiac Catheterization Laboratory that was concluded in 2012. He received intensive training in interventional cardiology in India and led a wholly Ugandan team to perform the first balloon pulmonary valvuloplasty on 26th July, 2013. He has since done over 500 pediatric catheterization procedures. He is a key member of the Uganda Heart Institute team involved in collaborations with Samaritan's Purse (USA), Children's National Medical Center (Washington, DC), World Children's Initiative (USA), Chain of Hope (UK), Gift of Life International, Keith Heart Foundation (UK), Emergency (Italy) / Salam Centre-Khartoum.

Dr. Lubega has pioneered the commencement of a paediatric cardiology fellowship programme at the Uganda Heart Institute which will go a long way in reducing the scarce human resource in this field. He has had strong interest in clinical work, but he has now developed a passion for research activities.

FINALISTS FOR THE CHARLES S. KLEINMAN SCIENTIFIC SCHOLARSHIP AWARD

Brian Quinn, MD

Boston Children's Hospital, Boston, MA USA

Jaffar Khan, MD

National Heart Lung and Blood Institute, Bethesda, MD USA

The winner of the scholarship will be announced at the *PICS-AICS* Dinner Event on Friday, September 7th with presentation of a \$5,000 grant to further their research endeavors.

Charles S. Kleinman Scientific Scholarship Award 2019

Applicants can apply through the standard abstract submission process and request they be considered for this. Applicants will also need to submit a paragraph outlining how the \$5,000 USD award will be used to further their research.

CME, CNE and ASRT EVALUATION/CERTIFICATE

PICS-AICS 2018 continuing education evaluations will be done online this year. After the conclusion of the meeting you will receive an email from the RUSH University Office of Interprofessional Continuing Education. To qualify for credit, you must complete a program evaluation. Once you complete this survey, you will receive your certificate of participation within one week .



After successful completion of the online evaluation, you will receive a certificate of participation for a maximum of **32.00 CME or CNE credits, or 33.25 ASRT Category A credits**. A certificate will be provided via email. **If you have any questions please contact The Rush Office of Interprofessional Continuing Education at 312-942-7119.**



CME Accreditation

Sponsored for CME credit by Rush University Medical Center. In support of improving patient care, Rush University Medical Center is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing education for the healthcare team.

Rush University Medical Center designates this live activity for a maximum of **32.00 AMA PRA Category 1 Credit(s)**™. Physicians should claim only credit commensurate with the extent of their participation in the activity.



CNE Accreditation

This CNE program is being presented without bias and with commercial support.

The maximum hours awarded for this CE Activity is 32.0 Contact hours.

The American Society of Radiologic Technologists has approved this activity for a maximum of 33.25 Category A credits. This activity is approved for credit by the ASRT.

A complete list of faculty conflict of interest statements can be found in your registration packet. They are also available for viewing at the Registration Desk.

Sponsored for CME credit by Rush University Medical Center

EDUCATIONAL OBJECTIVES



PICS-AICS

Pediatric and Adult Interventional Cardiac Symposium

PICS~AICS 2018 will provide physicians, nurses & technologists the opportunity to learn about many aspects of Pediatric and Adult Congenital and Structural Interventional Cardiology.

Learning Objectives:

Upon completion of your participation in this educational activity you intend to incorporate the following into your practice of medicine:

- Utilize new interventional technologies and current strategies developed for the management of children and adults with congenital and structural heart disease.
- Incorporate into your practice the techniques for the proper placement of percutaneous valves, stents and devices for occlusion of septal defects.
- Initiate advances in diagnosis, evaluation and therapies for children and adults with congenital and heart disease.
- Identify the important factors which affect the long-term outcomes and quality of life in children and adults with congenital heart disease.
- Incorporate alternative management strategies for transcatheter management for patients with congenital and structural heart defects.
- Utilize new clinical research advances in the care of children and adults with congenital heart disease.
- Incorporate demonstrated practical techniques related to interventional cardiac therapies in patients with structural and congenital heart disease.
- Access the results of new research, and assess their potential applications to clinical practice.
- Improve basic knowledge and skills relevant to clinical practice.
- Assess the potential of technological innovations and advances to enhance clinical practice and problem solving.

**Looking for a change? Check out
CONGENITAL CARDIOLOGY TODAY's
Job Board Poster**

***Check at the Reception Desk for
last-minute changes to the schedule***



PICS FOUNDATION

The PICS Foundation has been organized exclusively for charitable, educational and scientific purposes.

The focus of the Foundation is to educate physicians and healthcare professionals involved in the care of children and adults with Congenital and Structural Heart Disease in the latest advances in the field of interventional therapies for congenital and structural cardiac defects. The PICS Foundation will provide educational meetings and materials to pediatric and adult cardiologists from all over the world. The PICS Foundation will also sponsor research in the area of Congenital and Structural Heart Disease.

The PICS Foundation may receive funding via individual contributions and grants from hospitals and other members of the medical community, registration fees from attendees of the annual symposium, exhibit fees from vendors attending the annual symposium and funds from individual contributors.

The primary activity of the PICS Foundation will be conducting an annual meeting for healthcare professionals. The Pediatric & Adult Interventional Cardiac Symposium is an annual meeting that is attended by approximately 1,000 healthcare professionals from all around the world. The symposium consists of 4 days of lectures and live case operations.

To support the PICS Foundation, please contact:

Ziyad M. Hijazi, MD, MPH, FACC, MSCAI: zhijazi@me.com
or Kimberly Ray: kimberly_ray@pics-aics.com

Board of Directors: Ziyad M. Hijazi, MD, President, Director, Secretary; Carlos AC Pedra, MD, Director; Kimberly Ray, RN, Director; Michaelleen Wallig, Director & Treasurer

The PICS Foundation is a 501(c)(3) organization.

5th ANNUAL PICS~AICS 5K RUN

6:00 am - Friday, September 7th

**You'll be Making a Difference and
Supporting CHIMS
(Congenital Heart Intervention Mission Support)**

A \$30 Donation Includes:

Technical T-Shirt (Men's & Women's), Digital chip timing,
Race Registration, Finish line and post-race refreshments

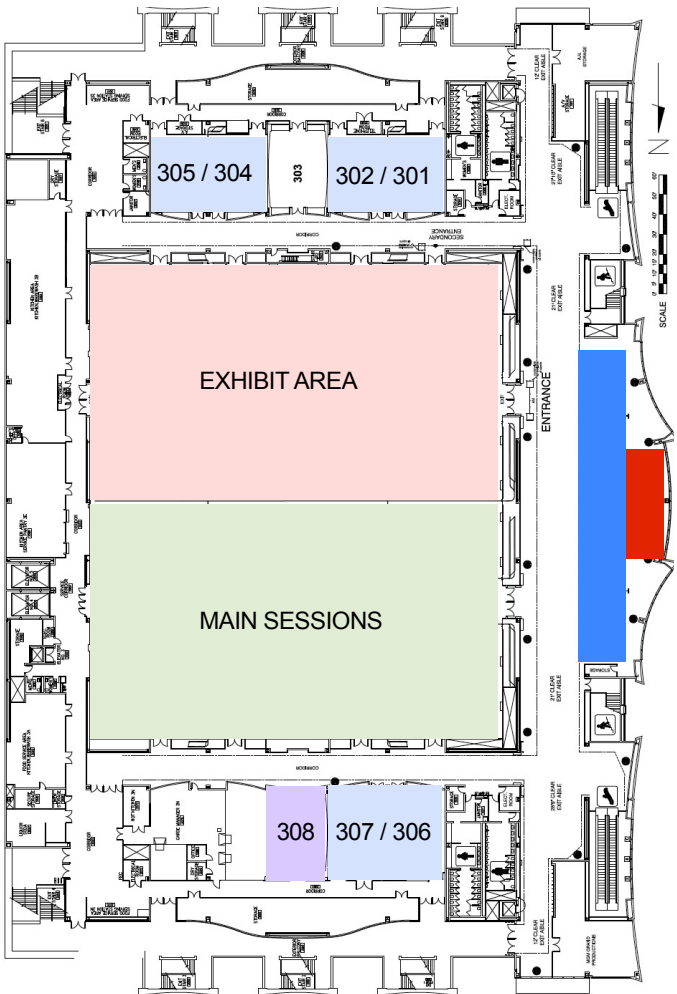
**Pick Up Information and Race Packets at the
PICS-AICS Registration Desk**

*The race will take place rain or shine.
All fitness levels are welcome!*

There will be no race-day registration

Come have some fun in the sun while doing something
healthy during the *PICS~AICS Symposium*.

FLOOR PLAN



Color Key

REGISTRATION

FOYER

MAIN SESSIONS

EXHIBIT AREA

BREAKOUT ROOMS

SPEAKER READY ROOM



PICS-AICS

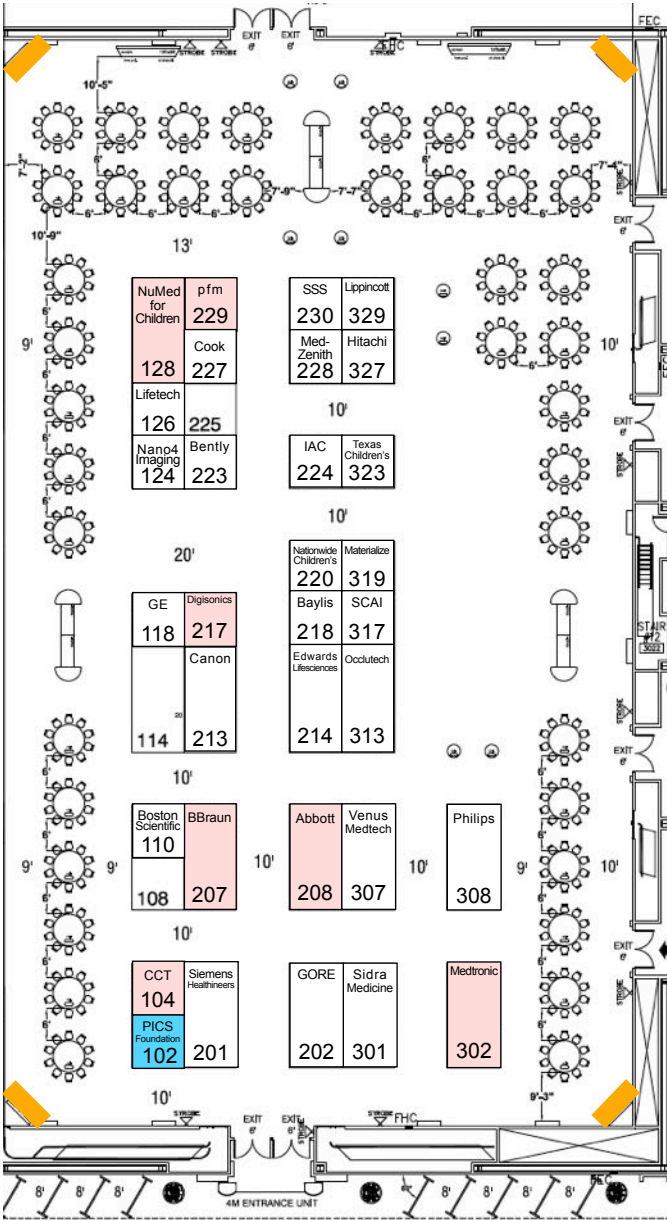
Pediatric and Adult Interventional Cardiac Symposium






PICS-AICS 5K RUN

SEPT. 7, 2018: 6AM

EXHIBIT FLOOR PLAN



Color Key

-  PICS Foundation
 Exhibitors who have supported this Pocket Guide
 Plasma Screens

EXHIBITOR LISTING

Abbott*

Booth: 208

B.Braun Interventional Systems*

Booth: 207

Baylis Medical

Booth: 218

Bently

Booth: 223

Boston Scientific

Booth: 110

Canon Medical Systems USA, Inc.

Booth: 213

Congenital Cardiology Today (CCT)*

Booth: 104

Cook Medical

Booth: 227

Digisonics, Inc.*

Booth: 217

Edwards Lifesciences

Booth: 214

GE Healthcare

Booth: 118

GORE

Booth: 202

Hitachi Healthcare Americas

Booth: 327

Intersocietal Accreditation Commission (IAC)

Booth: 224

Lifetech Scientific Corporation

Booth: 126

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Booth: 329

Materialise

Booth: 319

Med-Zenith

Booth: 228

Medtronic*

Booth: 302

Nano4Imaging

Booth: 124

Nationwide Children's Hospital

Booth: 220

NuMed for Children*

Booth: 128

Occlutech

Booth: 313

pfm medical*

Booth: 229

Philips

Booth: 308

PICS Foundation

Booth: 102

SCAI

Booth: 317

Scientific Software Solutions (SSS)

Booth: 230

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Siemens Healthineers*

Booth: 201

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** PICS-AICS Exhibitors who supported this Pocket Guide*

Check at the Reception Desk for last-minute changes to the schedule

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Oral Presentation by Dr. Daniel Levi

- ▶ **Wednesday, Sept. 05, 4:08pm**
Main Session Room, 3rd level
- ▶ **Please visit pfm medical**
Booth #229