



PICS Society

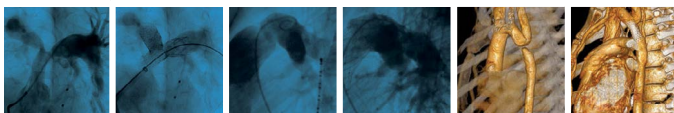


Pediatric *and* Congenital Interventional Cardiovascular Society

POCKET GUIDE

SEPT 1-4, 2021

ARIA
CONVENTION
CENTER



Focusing on the latest
interventional catheter strategies
for congenital and structural heart
disease in children and adults.

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CONGENITAL CARDIOLOGY TODAY

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PROVEN PDA CLOSURE FOR PATIENTS 700G AND UP.

As the only PDA closure solution indicated for premature infants ($\geq 700\text{g} + \geq 3$ days old) and proven to deliver safe and effective closure, Amplatzer Piccolo™ Occluder offers new opportunities to care for a wider range of patients than ever before.



1. Sathanandam SK, Gutfinger D, O'Brien L, et al. Amplatzer Piccolo Occluder clinical trial for percutaneous closure of the patent ductus arteriosus in patients ≥ 700 grams. Catheter Cardiovasc Interv. 2020;1-11.

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CCT Appreciates the Support of the Pocket Guide Sponsors



PICS Society

On behalf of our Board, our volunteer committees and our growing global membership, we are honored to introduce the PICS Society, the professional society devoted solely to specialists in minimally invasive treatment of Congenital Heart Disease (CHD). We represent the collective voice of physicians, nurses and technologists in our growing field. We foster the highest quality of care by connecting our community and learning from one another. Join us and strengthen our voice!

Our Vision

A world where anyone who can benefit from minimally invasive techniques to treat CHD can access safe, effective care.

Our Mission

We promote the highest quality care globally for infants, children and adults with CHD through minimally invasive techniques. We partner to further knowledge and skills of all involved, fostering research, education and advocacy on behalf of you and the patients we are privileged to treat.

Background and History

We are new AND we are also celebrating our 25th Silver Anniversary! We have a new name (and a new logo!), but our history runs deep. Since 1997, the PICS Foundation has held the annual Pediatric & Adult Interventional Cardiac Symposium. The Symposium has a proud history of excellence in education for physicians, nurses and technologists in our field. Each year the Symposium focuses on the newest technologies, teaching via live cases, dealing with (and avoiding) challenges, tried-and-true refreshers and much more. The Symposium will continue as best-in-class for many years to come. However...

2020 – Transformation and Growth

In recent years, many reached out to Symposium organizers recommending that our profession needs its own medical professional society devoted solely to our maturing discipline. Common threads emerged, threads which quickly became the core values of our—your—new professional organization. Here are those values:

- Our perspective is truly international
- Our leadership comes from many nations
- Our commitment is to the highest quality care
- Rigorous, high standards for membership are key
- Education is year-round, available anytime
- We must lead in developing guidelines
- We are pursuing universal advocacy principles
- Respectful partnership with national societies is vital
- We take pride in working with our industry partners

PICS Society

- We commit to mentoring the “next generation”
- We will ensure the Symposium continues best in the field
- We are VERY affordable to all who wish to join us

As a result, in our 25th anniversary year, the PICS Foundation has formally transformed into the PICS Society, the professional global “home” for those dedicated to our field. We are equally dedicated to partnering with national societies to ensure their continued growth. This signifies transformation of our global profession into a recognized, unified community of dedicated medical providers.

PICS Society Leadership



ZIYAD M. HIJAZI, MD, MPH, FPICS

President
Doha, Qatar



DAMIEN KENNY, MD, FPICS

Vice President
Dublin, Ireland



LEE BENSON, MD, FPICS

Board Member
Toronto, Canada



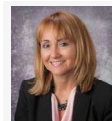
MARIO CARMINATI, MD, FPICS

Board Member
Milan, Italy



BHARAT DALVI, MD, DM, FPICS

Board Member
Mumbai, India



JACQUELINE KREUTZER, MD, FPICS

Board Member
Pittsburgh, Pennsylvania USA



CARLOS PEDRA, MD, PHD, FPICS

Board Member
Sao Paulo, Brazil

Educational Objectives

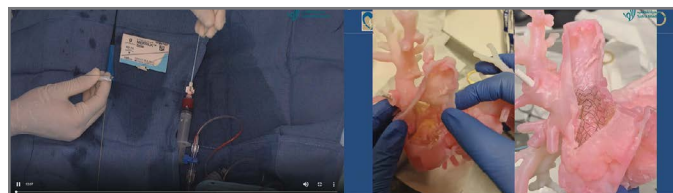
PICS will provide physicians, nurses and technologists the opportunity to learn about many aspects of Pediatric and Adult Congenital and Structural Interventional Cardiology. Upon completion of your participation in this educational activity, you will be able to incorporate the following into your practice of medicine:

Learning Objectives

- 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 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 to 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.

Accreditation

Please refer to the Meeting App and the PICS website for more information about CME/CNE/ASRT credits.



Acknowledgements

The PICS Society & PICS 2021 wish to gratefully thank the following exhibitors for their support of this year's program:

Platinum

Abbott
Canon Medical Systems USA, Inc.
Edwards Lifesciences
GORE
Medtronic Inc.
NuMED For Children
Occlutech
Philips
Sidra Medicine
Siemens Healthineers

Gold

B. Braun Interventional Systems, Inc.
Venus Medtech

Bronze

Baylis Medical
Bentley
Cook Medical
GE Healthcare
PECA Labs
Penumbra, Inc.
pfm Medical
Renata Medical
Scientific Software Solutions

PICS Also Thanks

Congenital Cardiology Today

Acknowledgements

The PICS Society & PICS 2021 wish to gratefully thank the following for their support of this year's program via unrestricted educational grants:

Educational Grants

Canon Medical Systems USA, Inc.
Edwards Lifesciences
GORE
Medtronic Inc.

2021 Live Case Centers

Boston Children's Hospital
Boston, Massachusetts, USA

Children's Hospital of Philadelphia
Philadelphia, Pennsylvania, USA

Cincinnati Children's Hospital
Cincinnati, Ohio, USA

Dante Pazzanese Instituto De Cardiologia
Sao Paulo, Brazil

King Faisal Cardiac Center for National Guard
Jeddah, Saudia Arabia

Nationwide Children's Hospital
Columbus, Ohio, USA

New Orleans Children's Hospital
New Orleans, Louisiana, USA

Toronto General Hospital
Toronto, Canada

RUSH University Medical Center
Chicago, Illinois, USA

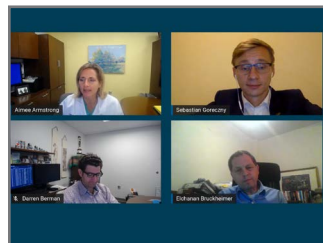
Guest Faculty

Jamil Aboulhosn, MD
Daniel Aguirre, MD
Teiji Akagi, MD
Ali Al-Halabi, MD
Wail Alkashkari, MD
Hesham Al-Saloos, MD
Laith Alshawabkeh, MD
Mazeni Alwi, MD
Zahid Amin, MD
Emile Bacha, MD
David Balzer, MD
Lee Benson, MD
Darren Berman, MD
Martin Bocks, MD
Brian Boe, MD
Elchanan Bruckheimer, MD

Alain Fraise, MD
Mark Galantowicz, MD
Yun Chin Fu, MD



Francisco Garay, MD
Marc Gewillig, MD
Olivier Ghez, MD
Francois Godart, MD
Bryan Goldstein, MD
Brent Gordon, MD
Sebastian Goreczny, MD
Dan Gruenstein, MD
Gurumurthy Hiremath, MD
Eric Horlick, MD
Haytham Ibrahim, MD
Nicole Ibrahim, MD
Reda Ibrahim, MD
Michel Ilbawi, MD
Cronin Ileen, RN
Alexander Javois, MD
Henri Justino, MD
Seong Ho Kim, MD
Terry King, MD
Emily Kish, RN
Jacqueline Kreutzer, MD
Shelby Kutty, MD
Anna Lillis, MD
Scott Lim, MD
Petru Liuba, MD
Kiran Mallula, MD
Audrey Marshall, MD
Doff McElhinney, MD
Joaquim Miro, MD
John Moore, MD
Phillip Moore, MD
Tim Moran, MD
Gareth Morgan, MD
Brian Morray, MD



Gianfranco Butera, MD
Ryan Callahan, MD
Mario Carminati, MD
Ahmet Celebi, MD
Sharon Cheatham, PhD, APN
Jae Young Choi, MD
Matthew Crystal, MD
Bharat Dalvi, MD
Carrington Dehart, RN
Karim Diab, MD
Vivian Dimas, MD
Yoav Dori, MD
Russell D'Sa, MD
Makram Ebeid, MD
Howaida El-Said, MD
Maiy El-Sayed, MD
Horacio Faella, MD
Thomas Fagan, MD
Craig Fleishman, MD
Gregory Fleming, MD
Thomas Forbes, MD

Guest Faculty

Joshua Murphy, MD
Rachel Neubrandner, MD
Alan Nugent, MD
David Nykanen, MD
Mark Osten, MD
Robert Pass, MD
Simone Pedra, MD
Alejandro Peirone, MD
Lynn Peng, MD
Christopher Petit, MD
Diego Porras, MD
Worakan Promphan, MD
Brian Quinn, MD
Athar Qureshi, MD
Shakeel Qureshi, MD
Suran Reddy, MD
Masood Sadiq, MD
Levent Saltik, MD
Hasri Samion, MD
Shyam Sathanandam, MD
Dietmar Schranz, MD
Shabana Shahanavaz, MD
Horst Sievert, MD
K Sivakumar, MD
Christopher Smith, MD



Hussam Suradi, MD
Nathan Taggart, MD
Demkin Taylor, RN
Tin Do, MD
Alejandro Torres, MD
Robert Vincent, MD
Kevin Walsh, MD
Howard Weber, MD
Carlos Zabal, MD
Jenny Zablah, MD
Jeff Zampi, MD

Course Directors



Directors

Ziyad Hijazi, MD
John Cheatham, MD
Carlos Pedra, MD
Thomas Jones, MD
Damien Kenny, MD
Evan Zahn, MD

Co-Directors

Cliff Kavisnky, MD
Ralf Holzer, MD
Allison Cabalka, MD
Felix Berger, MD
John Carroll, MD
Aimee Armstrong, MD
Dan Levi, MD
Matt Gillespie, MD
Frank Ing, MD
Gregor Krings, MD
Gejun Zhang, MD

Director Emeritus

William Hellenbrand, MD



Live Case Schedule

Wednesday, September 1st

8:15am-10:30am
10:45am-12:45pm

Session 1 – 40 minutes each site
Session 2 – 40 minutes each site

King Faisal Cardiac Center

King Abdulaziz Medical City for National Guard
Jeddah, Saudi Arabia

Wail Alkashkari, Saad Albugami, Rasha Al-Bawardy,
Abdullah Alsaiedi

Dante Pazzanese Instituto de Cardiology

Sao Paulo, Brazil

Carlos AC Pedra, Marcelo S. Ribeiro, Rodrigo N. Costa,
Talita Ribeiro, Simone F. Pedra, Daniela Kreuzig

Toronto General Hospital

Toronto, Canada

Eric Horlick, Mark Osten, Lee Benson, Wendy Tsang,
Melitta Mezody



Thursday, September 2nd

8:15am-10:30am
10:45am-12:45pm

Session 1 – 40 minutes each site
Session 2 – 40 minutes each site

New Orleans Children's Hospital

New Orleans, Louisiana, USA

Kiran Mallula & Sergio Bartakian

Rush University Medical Center

Chicago, Illinois, USA

Cliff Kavinsky, Joshua Murphy, Hussam Suradi, Fareed
Collado, Antoine Tatoes, Nidhi Madan, Brian Birmingham,
Mary Rhee, Abhimanyu Saini

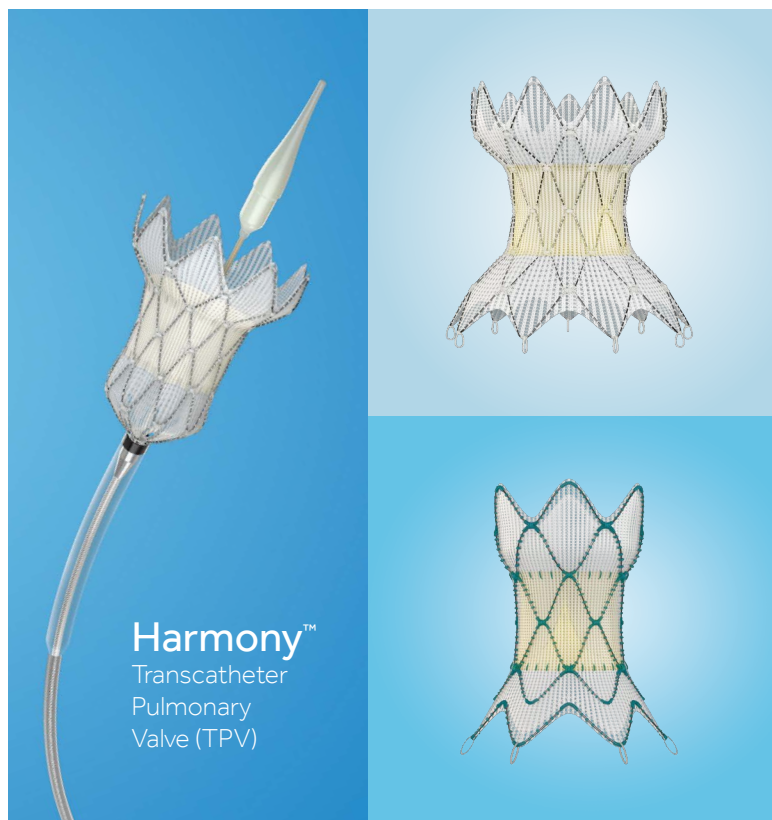
Children's Hospital of Philadelphia (CHOP)

Philadelphia, Pennsylvania, USA

Matthew J. Gillespie, Christopher L. Smith, Jonathan J. Rome,
Mudit Gupta, Ari J. Gartenberg

ONE. PARTNER.

Every step of the way



Harmony™
Transcatheter
Pulmonary
Valve (TPV)

While you're supporting your patients, we support you. Backed by our commitment to providing solutions and support to you and your CHD patients, our dedicated clinical experts can guide you through all stages of the therapy.

Medtronic

Indications

The Harmony™ transcatheter pulmonary valve (TPV) system is indicated for use in the management of pediatric and adult patients with severe pulmonary regurgitation (i.e., severe pulmonary regurgitation as determined by echocardiography and/or pulmonary regurgitant fraction $\geq 30\%$ as determined by cardiac magnetic resonance imaging) who have a native or surgically-repaired right ventricular outflow tract and are clinically indicated for surgical pulmonary valve replacement.

Contraindications

The following are contraindications for the use of this device: active bacterial endocarditis or other active infections, known intolerance to Nitinol (titanium or nickel), or an anticoagulation/antiplatelet regimen.

Warnings

General: Implantation of the Harmony TPV system should be performed only by physicians who have received Harmony TPV system training. The transcatheter pulmonary valve (TPV) is to be used only in conjunction with the Harmony delivery catheter system (DCS). This procedure should only be performed where emergency pulmonary valve surgery can be performed promptly. Do not use any of the Harmony TPV system components if any of the following has occurred: it has been dropped, damaged, or mishandled in any way, or if the use-by date has elapsed.

Transcatheter pulmonary valve (TPV): This device was designed for single use only.

Do not reuse, reprocess, or resterilize the TPV. Reuse, reprocessing, or resterilization may compromise the structural integrity of the device and/or create a risk of contamination of the device, which could result in patient injury, illness, or death. Do not resterilize the TPV by any method. Exposure of the device and container to irradiation, steam, ethylene oxide, or other chemical sterilants renders the device unfit for use. The device is packaged with a temperature sensor. Do not freeze the device. Do not expose the device to extreme temperatures. Do not use the device if the arrow on the sensor points to the symbol that indicates that the temperature limit has been exceeded. Do not use the device if any of the following have occurred: the tamper-evident seal is broken, the serial number tag does not match the container label, the arrow on the sensor points to the symbol that indicates that the temperature limit has been exceeded, or the device is not completely covered by the storage solution. Do not contact any of the Harmony TPV system components with cotton or cotton swabs. Do not expose any of the Harmony TPV system components to organic solvents, such as alcohol. Do not introduce air into the catheter. Do not expose the device to solutions other than the storage and rinse solutions. Do not add or apply antibiotics to the device, the storage solution, or the rinse solution. Do not allow the device to dry. Maintain tissue moisture with irrigation or immersion. Do not attempt to repair a damaged device. Do not handle the valve leaflet tissue or use forceps to manipulate the valve leaflet tissue. Do not attempt to recapture the device once deployment has begun. Do not attempt to retrieve the TPV if any one of the outflow TPV struts is protruding from the capsule. If any one of the outflow TPV struts has deployed from the capsule, the TPV must be released from the catheter before the catheter can be withdrawn. Do not attempt post-implant balloon dilatation (PID) of the TPV during the procedure, which may cause damage to or failure of the TPV leading to injury to the patient resulting in reintervention.

Delivery catheter system (DCS): This device was designed for single use only.

Do not reuse, reprocess, or resterilize the DCS. Reuse, reprocessing, or resterilization may compromise the structural integrity of the device and/or create a risk of contamination of the device, which could result in patient injury, illness, or death. Do not reuse or resterilize the DCS. If resistance is met, do not advance the guidewire, DCS, or any other component without first determining the cause and taking remedial action. Do not remove the guidewire from the DCS at any time during the procedure.

Precautions

General: Clinical long-term durability has not been established for the Harmony TPV. Evaluate the TPV performance as needed during patient follow-up. The safety and effectiveness of Harmony TPV implantation in patients with pre-existing prosthetic heart valve or prosthetic ring in any position has not been demonstrated. The Harmony TPV system has not been studied in female patients of child-bearing potential with positive pregnancy.

Before use: Exposure to glutaraldehyde may cause irritation of the skin, eyes, nose, and throat. Avoid prolonged or repeated exposure to the chemical vapor. Use only with adequate ventilation. If skin contact occurs, immediately flush the affected area with water (for a minimum of 15 minutes) and seek medical attention immediately. The TPV and the glutaraldehyde storage solution are sterile. The outside of the TPV container is nonsterile and must not be placed in the sterile field. The TPV and DCS should be used only in a sterile catheterization laboratory (cath lab) environment. Ensure that sterile technique is used at all times. Strictly follow the TPV rinsing procedure. For TPV 25: Ensure that all green sutures have been removed from the attachment suture loops on the TPV before loading onto the DCS. Prevent contamination of the TPV, its storage solution, and the DCS with glove powder. Verify the orientation

of the TPV before loading it onto the DCS. The inflow end of the TPV with attachment suture loops must be loaded first. Do not place excessive pressure on the TPV during loading. Inspect the sealed DCS packaging before opening. If the seal is broken or the packaging has been damaged, sterility cannot be assured. Proper function of the DCS depends on its integrity. Use caution when handling the DCS. Damage may result from kinking, stretching, or forceful wiping of the DCS. This DCS is not recommended to be used for pressure measurement or delivery of fluids. Carefully flush the DCS and maintain tight DCS connections to avoid the introduction of air bubbles.

During use: The TPV segment is rigid and may make navigation through vessels difficult. Do not advance any portion of the DCS under resistance. Identify the cause of resistance using fluoroscopy and take appropriate action to remedy the problem before continuing to advance the DCS. Careful management of the guidewire is recommended to avoid dislodgement of the TPV during DCS removal. Once deployment is initiated, retrieval of the TPV from the patient is not recommended. Retrieval of a partially deployed valve may cause mechanical failure of the delivery catheter system or may cause injury to the patient. Refer to the section below for a list of potential adverse events associated with Harmony TPV implantation. During deployment, the DCS can be advanced or withdrawn prior to the outflow struts protruding from the capsule. Once the TPV struts contact the anatomy during deployment, it is not recommended to reposition the device. Advancing the catheter forward once the TPV struts make contact with the anatomy may lead to an undesired deployment or may cause damage to or failure of the TPV and injury to the patient. Refer to the section below for a list of potential adverse events associated with the Harmony TPV implantation. Physicians should use judgment when considering repositioning of the TPV (for example, using a snare or forceps) once deployment is complete. Repositioning the bioprosthesis is not recommended, except in cases where imminent serious harm or death is possible (for example, occlusion of the main, left, or right pulmonary artery). Repositioning of a deployed valve may cause damage to or failure of the TPV and injury to the patient. Refer to the section below for a list of potential adverse events associated with the Harmony TPV implantation. Ensure the capsule is closed before DCS removal. If increased resistance is encountered when removing the DCS through the introducer sheath, do not force passage. Increased resistance may indicate a problem and forced passage may result in damage to the device and harm to the patient. If the cause of resistance cannot be determined or corrected, remove the DCS and introducer sheath as a single unit over the guidewire, and inspect the DCS and confirm that it is complete. If there is a risk of coronary artery compression, assess the risk and take the necessary precautions. Endocarditis is a potential adverse event associated with all bioprosthetic valves. Patients should make their healthcare providers aware that they have a bioprosthetic valve before any procedure. Post-procedure, administer appropriate antibiotic prophylaxis as needed for patients at risk for prosthetic valve infection and endocarditis. Prophylactic antibiotic therapy is recommended for patients receiving a TPV before undergoing dental procedures. Post-procedure, administer anticoagulation and/or antiplatelet therapy per physician/clinical judgment and/or institutional protocol. Excessive contrast media may cause renal failure. Preprocedure, measure the patient's creatinine level. During the procedure, monitor contrast media usage. Conduct the procedure under fluoroscopy. Fluoroscopic procedures are associated with the risk of radiation damage to the skin, which may be painful, disfiguring, and long term.

Potential Adverse Events
Potential risks associated with the implantation of the Harmony TPV may include, but are not limited to, the following:

- death
- valve dysfunction
- tissue deterioration
- hematoma
- heart failure
- cerebrovascular incident
- perforation
- rupture of the right ventricular outflow tract (RVOT)
- compression of the aortic root
- compression of the coronary arteries
- sepsis
- pseudoaneurysm
- erosion
- stent fracture
- arrhythmias
- device embolization or migration
- pulmonary embolism
- occlusion of a pulmonary artery
- laceration or rupture of blood vessels
- device mispositioning or misplacement
- valve deterioration
- regurgitation through an incompetent valve
- physical or chemical implant deterioration
- paravalvular leak
- valve dysfunction leading to hemodynamic compromise
- residual or increasing transvalvular gradients
- progressive stenosis or obstruction of the implant
- hemorrhage
- endocarditis
- thromboembolism
- thrombosis
- thrombus
- intrinsic and extrinsic calcification
- bleeding
- bleeding diathesis due to anticoagulant use
- fever
- pain at the catheterization site
- allergic reaction to contact agents
- infection
- progressive pulmonary hypertension
- progressive neointimal thickening and peeling
- leaflet thickening
- hemolysis
- General surgical risks applicable to transcatheter pulmonary valve implantation
- abnormal lab values (including electrolyte imbalance and elevated creatinine)
- allergic reaction to antiplatelet agents, contrast medium, or anesthesia
- exposure to radiation through fluoroscopy and angiography
- permanent disability.

Please reference the Harmony TPV system instructions for use for more information regarding indications, warnings, precautions, and potential adverse events.

Caution: Federal law (USA) restricts these devices to the sale by or on the order of a physician.

Live Case Schedule

Friday, September 3rd

8:15am-10:30am

10:45am-12:45pm

Session 1 – 40 minutes each site

Session 2 – 40 minutes each site

Nationwide Children's Hospital

Columbus, Ohio, USA

Brian Boe, Arash Salavitarbar, Jacqueline Kreutzer

Cincinnati Children's Hospital

Cincinnati, Ohio, USA

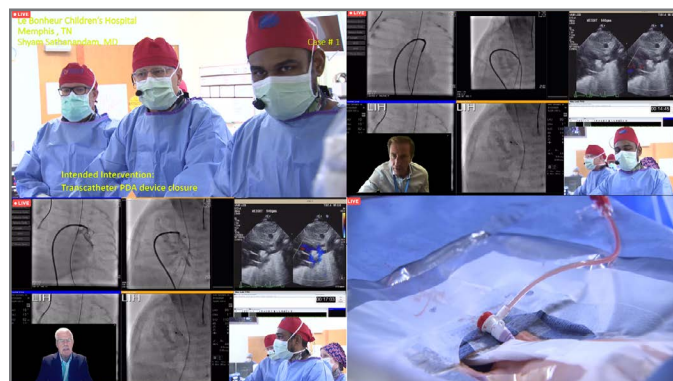
Shabana Shahanavaz, Russel Hirsch, Eimear McGovern,

Jonathan Hagel, Shawn Batlivala

Boston Children's Hospital

Boston, Massachusetts, USA

Diego Porras, Nicola Maschietto, Ryan Callahan, Jesse Esch



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06/2021

Medtronic

www.CongenitalCardiologyToday.com ♥ 15

Hotel Floor Plan

Aria
3730 S Las Vegas Blvd
Las Vegas, NV 89158

Hotel Floor Plan

Level Three
Convention Center West

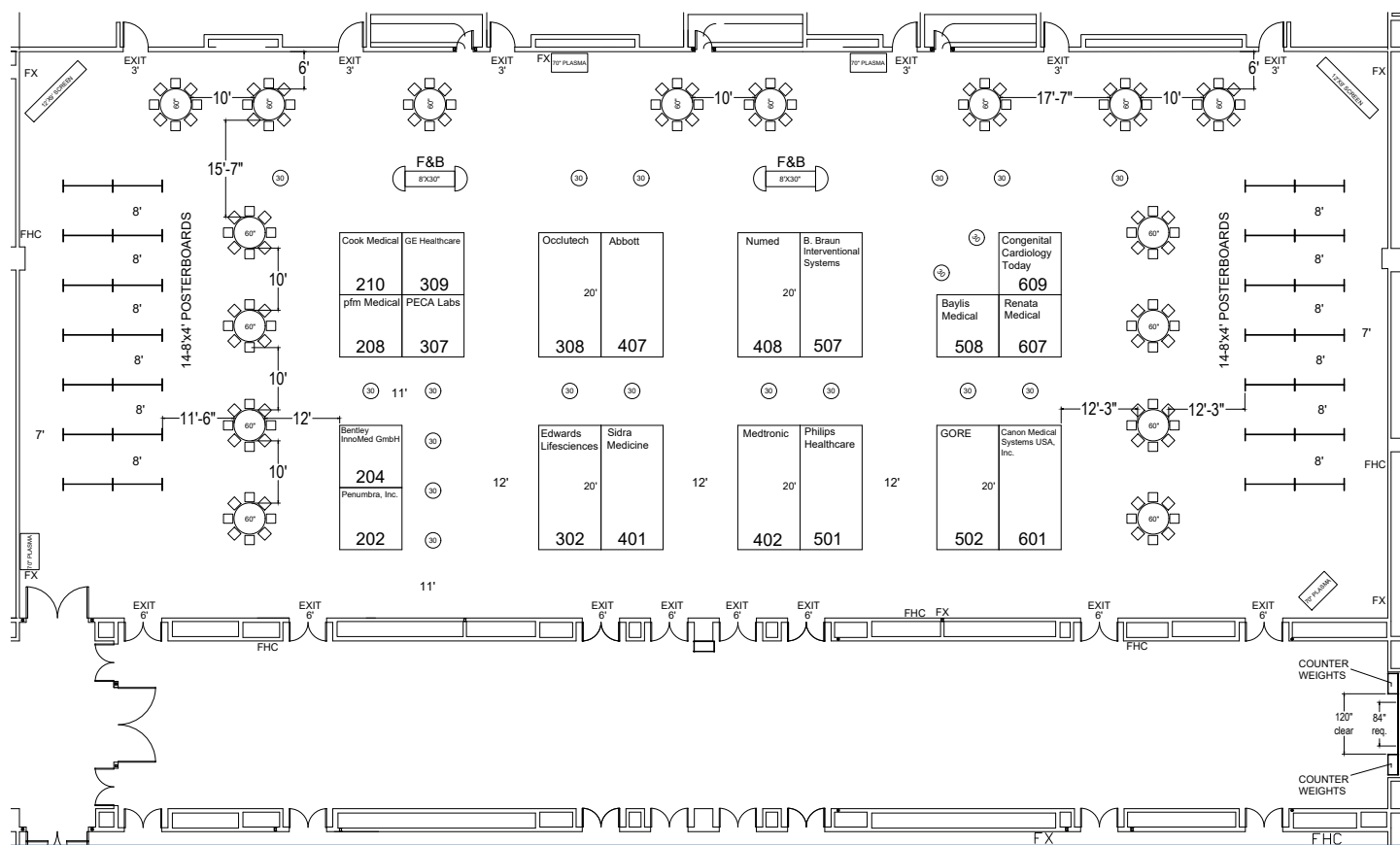


Exhibitor Information

Abbott	407	Canon Medical Systems USA, Inc.	601
Baylis Medical	508	Cook Medical	210
B. Braun Interventional Systems	507	Edwards Lifesciences	302
Bentley InnoMed GmbH	204	GE Healthcare	309
Congenital Cardiology Today	609	GORE	502
		Medtronic	402

Exhibitor Floor Plan

NuMED	408	Renata Medical	607
Occlutech	308	Scientific Software Solutions	510
PECA Labs	307	Sidra Medicine	401
Penumbra, Inc.	202	Venus Medtech	301
pfm Medical	208		
Philips Healthcare	501		



Willwork
Global Event Services

PICS Society
September 1 - 4, 2021
Aria Convention Center - Juniper Ballroom - Las Vegas, NV

BOOTH 10'x10'.....9
BOOTH 10'x20'.....10
POSTERBOARD 84\"/>

DRAWING DATE: 3/18/21
REVISION DATE: 8/10/21-v11
AE: JShutts
DESIGNER: SArrabito

GROWING TOGETHER.

COMMITTED TO PEDIATRIC AND
CONGENITAL INTERVENTIONAL
CARE FOR 25 YEARS AND COUNTING.



JOIN US AT PICS 2021 FOR OUR PRODUCT SHOWCASE EVENT

An exclusive opportunity to gain hands-on experience with our most referenced devices and our newest innovations. Each have been developed with your most important patients in mind.

Wednesday, September 1, 2021

Aria Hotel Hospitality Suite

Immediately following the PICS Welcome Reception.



Register
here to
attend.



B. Braun Interventional Systems Inc.
Part of the B. Braun Group of Companies
Bethlehem, PA 18018 | USA
Tel 877-836-2228 | Fax 610-849-1334
www.bisusa.org

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SAVE THE DATE Symposium 2022

GO

CHI

**7-10 SEPT
MARRIOTT
CHICAGO
DOWNTOWN**

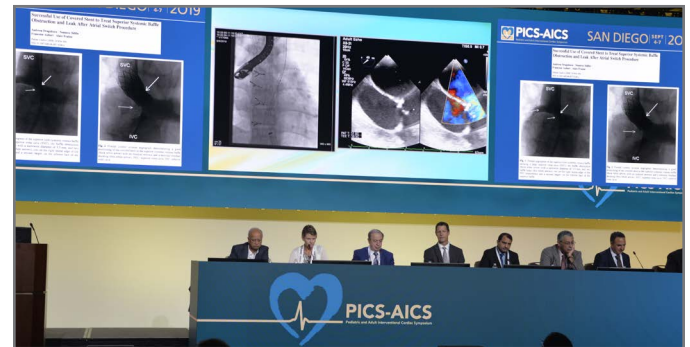
Focusing on the latest interventional catheter strategies for congenital and structural heart disease in children and adults.

www.picsymposium.com
www.CHDinterventions.org

Daily Program

Wednesday, September 1st

- 6:45am-6:00pm** Registration Open
Registration Desk – 3rd Floor
Convention Center
- 7:00-8:30am** Breakfast Available
- 8:00-8:15am** Welcome – Ziyad M. Hijazi
- 8:15-10:30am** Live Case Session #1
General Session – Ironwood 4 & 5
Moderators: Damien Kenny & Ziyad M. Hijazi
Panelists: Hesham Al-Saloos, Olivier Ghez, Lynn Peng, Seong-Ho Kim, Dan Aguirre
Digital Moderator: Alejandro Torres
Dante Pazzanese Instituto de Cardiology, Sao Paulo, Brazil
Toronto General Hospital, Toronto, Canada
King Faisal Cardiac Center, King Abdulaziz Medical City for National Guard, Jeddah, Saudi Arabia
- 10:30-10:45am** Coffee Break



Daily Program

- 10:45am-12:45pm Live Case Session #2**
General Session – Ironwood 4 & 5
Moderators: John Carroll, John Cheatham
Panelists: Levent Saltik, Howard Weber, Brian Boe, Olivier Ghez, Horacio Faella
Digital Moderator: Vivian Dimas
 Dante Pazzanese Instituto de Cardiologia, Sao Paulo, Brazil
 Toronto General Hospital, Toronto, Canada
 King Faisal Cardiac Center, King Abdulaziz Medical City for National Guard, Jeddah, Saudi Arabia
- 12:45-1:45pm Lunch Available – Ironwood Foyer**
- 1:00-1:45pm Lunchtime Taped Cases**
General Session – Ironwood 4 & 5
Moderators: John Moore, Alan Nugent
- 1:00-1:15pm AFR (Dublin) – Damien Kenny**
- 1:20-1:35pm Mitral Melody Re-dilation vs MitraClip**
 Scott Lim



Daily Program

- 2:00-4:00pm Pulmonary Valve Session**
General Session – Ironwood 4 & 5
The Impact of tPVR – What is the Data?
Moderators: Shakeel Qureshi, Ahmet Celebi
- 2:00-2:10pm What Has Been the Real Benefit of tPVR?**
 John Cheatham
- 2:11-2:21pm Putting the Impact of Melody into Perspective**
 Thomas Jones
- 2:22-2:32pm What Do We Really Know About the SAPIEN Valve Outcomes?**
 Shabana Shahanavaz
- 2:33-2:43pm What's Your Current Algorithm For The Fully-grown Patient With a Large, Patched RVOT? – Dan Levi**
- 2:44-2:54pm 3D Imaging of the RVOT and Tools for Analysis**
 Shelby Kuty
- 2:55-3:05pm How I Use Computer Cased Simulation Prior to tPVR Cases**
 Mario Carminati
- Self-Expanding Valves and Platforms:**
- 3:06-3:11pm Med Zenith Valve – John Cheatham**
- 3:12-3:17pm Pulsta Valve – Mario Carminati**
- 3:18-3:23pm Venus P Valve – Worakan Promphan**
- 3:24-3:29pm Harmony – Matt Gillespie**
- 3:30-3:35pm Alterra – Evan Zahn**
- 3:35-4:00pm Discussion/Q & A**
- 2:00-4:00pm Tips and Tricks Session**
Breakout Session – Ironwood 2 & 3
Moderators: Phil Moore, Terry King
- 2:00-2:10pm Dealing With Curvatures, Angles, and Vascular Tortuosity During Interventions in CHD – Frank Ing**
- 2:11-2:21pm A Structured Protocol for Transhepatic Interventions – Makram Ebeid**
- 2:22-2:32pm Dealing with Porto-systemic Shunts**
 Elchanan Bruckheimer
- 2:33-2:43pm Options for the Embolized Stent**
 Henri Justino
- 2:44-2:54pm When to Push and When to Fold – Complex Decision Making in CHD Interventions**
 David Nykanen
- 2:55-3:05pm Establishing an Advanced 3D Imaging Program for the Cath Lab – 10 Tips on How to Get Started – Sebastian Goreczny**
- Debate: Technological Advances Have Improved Outcomes in the last 10 years**
- 3:06-3:16pm Pro – Dan Gruenstein**
- 3:17-3:27pm Con – Zahid Amin**
- 3:28-3:38pm Debate Discussion**
- 3:40-4:00pm Q/A**

Celebrating 50 Years!

THANK YOU for all you do.

**We have weathered
many storms . . .**

Together we still can.

Daily Program

- 2:00-4:00pm** **PICES Breakout Session – Ironwood 7 & 8**
Theme: Expanding the Interventional
Quiver: Available Equipment for the
Congenital Interventional Cardiologist
PICES Business Meeting: 25 min
PICES Case Presenter 1: 15 min
PICES Case Presenter 2: 15 min
PICES Case Presenter 3: 15 min
Invited Talk: Keeping up with the Jones:
How I Manage and Adjust the Equipment in
My Lab – Tom Jones
- 3:30-4:00pm** **Coffee Available**
- 4:00-6:00pm** **Oral Abstract Presentations**
Room 1: Ironwood 2 & 3
Moderators: David Balzer & Terry King
Room 2: Ironwood 7 & 8
Moderators: Alex Javois & Masood Sadiq
- 6:00-8:00pm** **Welcome Reception**
Juniper Ballroom – Exhibit Hall Open



Daily Program



Thursday, September 2nd

- 6:45am-6:00pm** **Registration Open**
Registration Desk – 3rd Floor
Convention Center
- 6:45-8:15am** **Breakfast Available**
Exhibit Hall – Juniper Ballroom
- 7:00am-6:00pm** **POSTER Abstracts Displayed**
Juniper Ballroom
- 7:00-8:00am** **Venus MedTech Breakfast Symposium**
Ironwood 2 & 3
Moderator: Ziyad M. Hijazi
Panelists: Gejun Zhang, Shakeel Qureshi
Scope of the Problem – Lee Benson
A Visit to the Guidelines – Daniel Levi
MRI Assessment – Gurdeep Man
The Venus P Valve Results of the CE Trial
Shakeel Qureshi
Results of Chinese FDA Trial – Gejun Zhang
Q&A
- 8:00-8:15am** **Update on Live Cases 2020**
General Session – Ironwood 4 & 5
Gurumurthy Hiremath
- 8:15-10:30am** **Live Case Session #1**
General Session – Ironwood 4 & 5
Moderators: John Cheatham &
Jacqueline Kreutzer
Panelists: Ralf Holzer, Brian Boe, Alain Fraisse,
Emile Bacha
Digital Moderator: Gurumurthy Hiremath
New Orleans Children's Hospital
New Orleans, Louisiana, USA
Rush University Medical Center
Chicago, Illinois, USA
Children's Hospital of Philadelphia
Philadelphia, Pennsylvania, USA
- 10:30-10:45am** **Coffee Available**
Exhibit Hall – Juniper Ballroom

Daily Program

- 10:45am-12:45pm** **Live Case Session #2**
General Session – Ironwood 4 & 5
Moderators: Allison Cabalka, Thomas Jones
Panelists: Teiji Akagi, Maiy El-Sayed,
Hasri Samion, Tom Fagan, Michel Ilbawi
Digital Moderator: Brent Gordon
New Orleans Children's Hospital
New Orleans, Louisiana, USA
Rush University Medical Center
Chicago, Illinois, USA
Children's Hospital of Philadelphia
Philadelphia, Pennsylvania, USA
- 12:45-1:45pm** **Lunch Available**
Exhibit Hall – Juniper Ballroom
- 1:00-2:00pm** **Lunchtime Session – Ironwood 4 & 5**
How to Post-process 3DRA: 3 Different
Perspectives
Moderators: Gregor Krings, Damien Kenny
GE Healthcare: Gregory Fleming
Canon: Darren Berman
Philips: Jenny Zablah
Siemens: Nathan Taggart
- *Please visit the 3DRA Hands-on rooms for individualized instruction in 3D Rotational Angiography Post-processing**
- *The rooms will be open for instruction:**
Wednesday, 12:45-2:00pm
Thursday, 2:00-3:30pm
Friday, 12:45-2:00pm
Starvine 3 – Canon
Starvine 4 – Siemens
Starvine 5 – GE Healthcare
Starvine 6 – Philips





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 Henri Justino, MD Sanjeet Hegde, MD, PhD
 Kanishka Ratnayaka, MD Matthew Brigger, MD, MPH
 John Moore, MD, MPH Justin Ryan, PhD
 James Perry, MD

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Daily Program

- 2:00-5:30pm Lymphatic Session**
General Session – Ironwood 4 & 5
 Moderators: Elchanan Bruckheimer & Yoav Dori
- 2:00-2:12pm Demystifying the Lymphatic System**
 Anna Lillis
- 2:13-2:25pm Stratifying Fontan Risk by Pre-Op Lymphatic Imaging** – Suren Reddy
- 2:26-2:38pm Techniques for Accessing the Thoracic Duct: What are the Options?**
 Petru Liuba
- 2:39-2:51pm Defining the Optimum Target – Periportal Lymphatic vs THE Thoracic Duct**
 Marc Gewillig
- 2:52-3:04pm Redirecting Venous Flow for Lymphatic Decompression** – Chris Smith
- 3:05-3:17pm My Lymphatic Intervention Algorithm: How I Improve Outcomes** – Yoav Dori
- 3:30-5:15pm Case-Based Learning**
 Expert Panel: Yoav Dori, Marc Gewillig, Petru Liuba, Elchanan Bruckheimer



- 2:00-3:30pm Vascular Obstruction**
Breakout Session – Ironwood 2 & 3
 Moderators: Frank Ing & Evan Zahn
- 2:00-2:12pm Options for Thrombolysis and Thrombectomy** – Bryan Goldstein
- 2:13-2:25pm Options for Systemic Venous Obstruction in Pediatric Practice** – Henri Justino
- 2:26-2:38pm Dealing with Complete Pulmonary Artery Occlusion** – Athar Qureshi
- 2:39-2:51pm Recanalizing the Atretic Aorta** – Kevin Walsh
- 2:52-3:04pm Returning Flow Through Occluded Shunts**
 Alex Javois
- 3:05-3:17pm Recanalizing Occluded Vessels in Non-CHD: Technical Lessons Learned** – Evan Zahn
- 3:20-3:30pm Q/A Discussion**

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Daily Program

- 4:00-5:30pm Taped Cases and Debates**
Breakout Session – Ironwood 2 & 3
 Moderators: Robert Pass, Mark Galantowicz
Taped Cases:
4:00-4:15pm Mayo – Potts Shunt – Allison Cabalka
4:20-4:35pm Memphis – Pulmonary Flow Regulator in a Patient With Truncus Arteriosus
 Shyam Sathanandam
Debate: Interventionalists are Working in a Surgical Environment and Should Undergo Surgical Training
4:40-4:50pm Pro – Olivier Ghez
4:51-5:01pm Con – Joaquim Miro
Patient Volume Contributes to Outcomes in the Cath Lab
5:05-5:15pm Pro – Gareth Morgan
5:16-5:26pm Con – Martin Bocks

Friday, September 3rd

- 6:45am-6:00pm Registration Open**
Registration Desk – 3rd Floor Convention Center
7:00am-6:00pm POSTER Abstracts Displayed
Juniper Ballroom
7:00-8:30am Breakfast Available
Exhibit Hall – Juniper Ballroom
8:00-8:15am Introducing the PICS Society – Norm Linsky
General Session – Ironwood 4 & 5
8:15-10:30am Live Case Session #1
General Session – Ironwood 4 & 5
 Moderators: Evan Zahn & Francisco Garay
 Panelists: Carlos Zabala, Dietmar Schranz, Ali Al-Halabi, Michel Ilbawi
 Digital Moderator: Alejandro Peirone
 Nationwide Children's Hospital
 Columbus, OH
 Cincinnati Children's Hospital
 Cincinnati, OH
 Boston Children's Hospital
 Boston, MA
10:30-10:45am Coffee Available
Exhibit Hall – Juniper Ballroom

Daily Program

- 10:45am-12:45pm Live Case Session #2**
General Session – Ironwood 4 & 5
 Moderators: Ralf Holzer, Gregor Krings, Bharat Dalvi
 Panelists: Reda Ibrahim, Yun-Ching Fu, Howaida El-Said, Laith Alshawabkeh, Olivier Ghez, Jeff Zampi
 Digital Moderator: Gareth Morgan
 Nationwide Children's Hospital
 Columbus, Ohio, USA
 Cincinnati Children's Hospital
 Cincinnati, Ohio, USA
 Boston Children's Hospital
 Boston, Massachusetts, USA
12:45-1:45pm Lunch Available
Exhibit Hall – Juniper Ballroom
1:00-2:00pm Industry Sponsored Lunch Symposia
 Medtronic – Ironwood 2 & 3
 Abbott – Ironwood 7 & 8



Daily Program

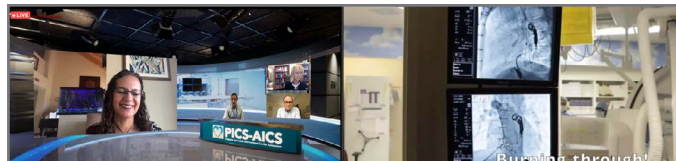
- 2:00-3:30pm PDA Stenting**
General Session – Ironwood 4 & 5
 Moderators: Athar Qureshi, Damien Kenny
- 2:00-2:12pm An Algorithmic Approach to PDA Stenting**
 Marc Gewillig
- 2:13-2:25pm Optimal Pre-procedural Imaging Modalities**
 Greg Fleming
- 2:26-2:38pm Impact of Ductal Morphology on Outcomes**
 Chris Petit
- 2:39-2:51pm Is Airway Compression a Real Concern?**
 Howaida El-Said
- 2:52-3:04pm PDA Stenting in Infants < 2.5 kgs**
 Damien Kenny
- 3:05-3:17pm DES vs BMS – What Does the Data Tell Us?**
 Bryan Goldstein
- 3:20-3:30pm Discussion**
- 2:00-3:30pm Pulmonary Artery Stenting**
Breakout Session – Ironwood 2 & 3
 Moderators: Tom Fagan, Henri Justino
- 2:00-2:12pm Stent Modifications for PA Stenting**
 Frank Ing
- 2:13-2:25pm Algorithm for Unzipping Small Diameter Stents**
 Howaida El-Said
- 2:26-2:38pm 3-D Imaging to Guide Complex Bifurcation Stenting – Gregor Krings**
- 2:39-2:51pm PA Stenting in the Context of tPVR – Planning For The Future – Ziyad Hijazi**
- 2:52-3:04pm Strategic Approach to Diffuse Branch PA Stenoses – Tom Forbes**
- 3:05-3:17pm Long-Term Strategy for PA Rehabilitation and Decision-Making – Case Based Presentations – Darren Berman**
- 4:00-5:30pm Interventional Treatment of SVASD**
General Session – Ironwood 4 & 5
 Moderators: Ziyad M. Hijazi, Francois Godart
- 4:00-4:12pm Preprocedural Imaging to Guide Patient Selection – Craig Fleishman**
- 4:13-4:23pm Debate: All Anatomical Subtypes Can Be Treated with Covered Stents**
 Pro – K. Sivakumar
 Con – Michel Ilbawi
- 4:24-4:34pm Intraprocedural Imaging Modalities**
 Haytham Ibrahim
- 4:36-4:48pm Procedural Techniques to Facilitate Stent Stability – Hesham Al-Saloos**
- 4:49-5:01pm Outcomes – Evan Zahn**
- 5:02-5:14pm Complications – Shakeel Qureshi**
- 5:15-5:27pm**

Daily Program



- 4:00-5:30pm Bioresorbable Technology**
Breakout Session – Ironwood 2 & 3
 Moderators: Dan Levi, Suren Reddy & Nicole Ibrahim
- 4:00-4:12pm Is There a Role for PLLA or Magnesium Coronary Stents in Children? – Suren Reddy**
- 4:13-4:25pm Advantages and Challenges of Zinc Alloys for Pediatric Stents – Tim Moran**
- 4:26-4:38pm Horst Sievert**
- 4:39-4:51pm Use of PLLA Septal Occluders in China**
 Zhiwei Zhang
- 4:52-5:04pm Possibilities For the Future: Iron Alloys and Nanoparticles? – Dan Levi**
- 5:05-5:17pm Regulatory and Commercialization Pathway for a Biodegradable Device in Pediatrics**
 Rachel Neubrandner
- 4:00-5:30pm Nursing and Associated Professionals**
Breakout Session – Ironwood 7 & 8
 Moderators: Sharon Cheatham & Emily Kish
- 4:00-4:12pm Transcatheter Pulmonary Valves: A Historical Perspective – John Cheatham**
- 4:14-4:26pm Cardiac Anesthesia in the Cath Lab**
 Ileen Cronin
- 4:28-4:40pm Are the Risks Higher in Today's Cath Lab?**
 Taylor Demkin
- 4:42-4:54pm How do We Manage Inventory with the High Cost of Technology?**
 Carrington Dehart
- 4:56-5:08pm New Cath Lab Guidelines – Emily Kish**
- 5:10-5:22pm Bioabsorbable Devices: Where are we at?**
 Darren Berman
- 5:22-5:30pm Questions/Discussion**
- 6:30-9:30pm PICS Dinner Event**
 Aria Palms Pool

Daily Program

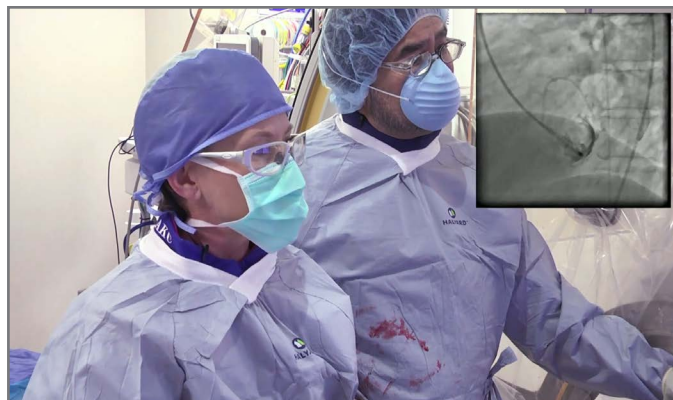


Saturday, September 4th

- 6:45am-1:00pm** **Registration Open**
*Registration Desk – 3rd Floor
Convention Center*
- 7:00-8:30am** **Breakfast Available**
Exhibit Hall – Juniper Ballroom
- 8:00-9:30am** **ACHD/Structural Session**
General Session – Ironwood 4 & 5
Moderators: Nathan Taggart & Alejandro Peirone
- 8:00-8:12am** **Update on TV Repair and Potential Application to CHD Patients** – Scott Lim
- 8:13-8:25am** **Interventions for Atrial Hypertension**
K. Sivakumar
- 8:26-8:38am** **Complex Coronary Artery Fistula in the Adult – Indications and Techniques for Closure** – Eric Horlick
- 8:39-8:51am** **The Adult with ASD and Atrial Arrhythmia – Decision-Making Algorithm** – Jae Young Choi
- 8:52-9:04am** **Transapical Techniques for Mitral PVL**
Cliff Kavinsky
- 9:05-9:17am** **Mitral Valve In Valve – How Far Can We Push?** – Allison Cabalka
- 8:00-9:30am** **Pulmonary Vein Stenosis**
Breakout Session – Ironwood 2 & 3
Moderators: Gregor Krings, Robert Vincent
- 8:00-8:12am** **Understanding Congenital Pulmonary Vein Stenosis** – Ryan Callahan
- 8:13-8:25am** **Surgery is a Better Primary Option**
Emile Bacha
- 8:26-8:38am** **Transcatheter Intervention is a Better Option** – Henri Justino
- 8:39-8:51am** **Multimodality Approach to Treat Pulmonary Vein Stenosis** – Chris Petit
- 8:52-9:04am** **Treating PVS – Should This be Restricted to Specialized Centers?** – Matt Crystal
- 9:05-9:17am** **Considerations Between Hope and Frustration: When To Treat and Not to Treat PVS** – Audrey Marshall
- 9:30-10:00am** **Coffee Break**
Juniper Ballroom – Exhibit Hall

Daily Program

- 10:00-11:30am** **Interventions in Infants < 2.5 kgs**
General Session – Ironwood 4 & 5
Joaquim Miro & Brian Morray
- 10:00-10:12am** **It Starts Before Birth: Update on Fetal Transcatheter Interventions**
Simone Pedra
- 10:13-10:25am** **Challenges, Risks and Risk Adjustments for Interventions Performed in Small Infants** – Brian Quinn
- 10:26-10:38am** **Percutaneous Vascular Access in Small Infants**
Shyam Sathanandam
- 10:39-10:51am** **Hybrid Procedures In Low Weight Infants**
Ralf Holzer
- 10:52-11:04am** **Limitations and Challenges of Circulatory Support and Surgical Bailout in Small Infants**
Mark Galantowicz
- 11:05-11:17am** **Pulmonary Flow Regulators in Small Infants – Technical Approach and Outcomes**
Dietmar Schranz



Daily Program

- 10:00-11:30am Aortic Interventions**
Breakout Session – Ironwood 2 & 3
 Moderators: Giafranco Butera & Francisco Garay
- 10:00-10:12am Balloon Angioplasty for Coarctation in Infancy – Is it a Good Option?** Lee Benson
- 10:13-10:25am Neonatal Balloon Aortic Valvuloplasty – What Has IMPACT Taught Us?** Brian Boe
- 10:26-10:38am Treating Coarctation of the Aorta in the Adult...A Different Kind of Beast** Nathan Taggart
- 10:39-10:51am Covered Stents Beyond Coarctation** Gareth Morgan
- 10:52-11:04am Interventional Therapy for Middle Aortic Syndrome – TBD**
- 11:05-11:17am How to Close Sinus Valsalva Rupture?** Tin Do
- 11:30am-1:00pm My Nightmare Case In The Cath Lab**
General Session – Ironwood 4 & 5
 Moderators: Damien Kenny & Alan Nugent
- 1:00pm Exhibit Hall Closes**
- 1:00pm Closing Remarks**
General Session – Ironwood 4 & 5
 Ziyad M. Hijazi & Damien Kenny



Daily Program as of 08.16.21. Additional updates available in the Meeting App.

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1997 Founding sponsor of first PICS



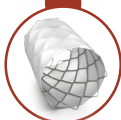
2003 Allen Tower Sr. receives PICS Lifetime Achievement Award



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2004 CP Stent® receives CE mark for Coarctation of the Aorta



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