



# PICS-AICS

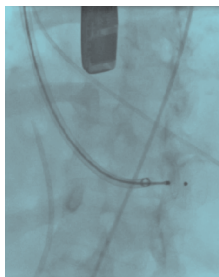
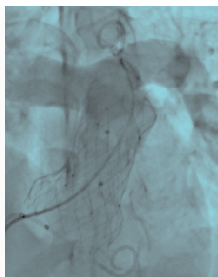
Pediatric and Adult Interventional Cardiac Symposium

# SAN DIEGO

MARRIOTT MARQUIS - SAN DIEGO MARINA

September 4-7, 2019

## POCKET GUIDE

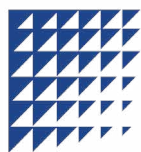


LIVE CASE DEMONSTRATIONS | ABSTRACT SESSIONS  
TAPED CASES | HOT DEBATES | BREAKOUT SESSIONS  
MY NIGHTMARE CASE IN THE CATH LAB



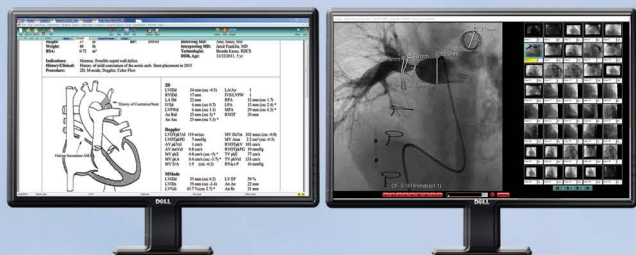
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**PICS-AICS 2019 Booth #401**

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Pediatric and Adult Interventional Cardiac Symposium

# 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 four days of lectures and live case operations.

If you would like to support the PICS Foundation, please contact:

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## Live Surgery Cases: VSD Closure

\*VSD device is not available for sale in the USA

► September 5<sup>th</sup>, 2019

• Private Hospital of  
Cordoba, Cordoba,  
Argentina (2 cases)

► Dr. Alejandro Peirone

► Dr. Carlos Pedra

► Dr. Francisco Garay

# Educational Objectives

PICS-AICS 2019 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 into 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

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 29.50 AMA PRA Category 1 Credit(s)<sup>TM</sup>.

Physicians should claim only credit commensurate with the extent of their participation in the activity.

ANCC Credit Designation – Nurses

The maximum number of hours awarded for this CE activity is 29.50 contact hours.

This activity is being presented without bias and with commercial support.

This activity has been approved for 38.00 ASRT Category A credits.





## Acknowledgments

The PICS Foundation & PICS-AICS 2019 wish to gratefully thank the following exhibitors for their support of this year's program:

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### PICS-AICS also Thanks

CONGENITAL CARDIOLOGY TODAY  
DR. HASAN ABDALLA, CEO CHILDREN'S HEART INSTITUTE  
JOURNAL OF STRUCTURAL HEART DISEASE  
THE SOCIETY FOR CARDIOVASCULAR ANGIOGRAPHY  
AND INTERVENTIONS

## Acknowledgments

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**NuDEL®**  
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Coil System For PDA Closure

**NuDEL™ Indications for Use:**

The NuDEL is indicated for use in the treatment of native and/or recurrent coarctation of the aorta involving the aortic isthmus or first segment of the descending aorta where there is adequate size and patency of at least one femoral artery associated with one or more of the following: acute or chronic wall injury; nearly atretic descending aorta of 3 mm or less in diameter; a non-compliant stenotic aortic segment found on pre-stent balloon dilation; a genetic or congenital syndrome associated with aortic wall weakening or ascending aortic aneurysm.

The NuDEL is indicated for use in the treatment of right ventricle to pulmonary artery (right ventricular outflow tract) conduit disruptions that are identified during conduit pre-dilatation procedures performed in preparation for transcatheter pulmonary valve replacement.

**Caution:** Federal (USA) Law restricts this device to sale by or on the order of a physician. **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 of 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:** Administer appropriate anticoagulation therapy to reduce potential thrombosis. If the patient is not appropriately anticoagulated, thrombus formation may occur. The sheath must be flushed with heparinized saline via the proximal side port prior to introducing the delivery system into the body. The inflated diameter of the stent should at least equal the diameter of the intended implant site. Excessive handling and manipulation of the covering while crimping the stent may cause the covering to tear off of the stent. Retracting the covered stent back into the sheath may cause the covering to catch and tear off of the stent. Do not exceed the RBP. An inflation device with pressure gauge is recommended to monitor pressure. Pressure in excess of the RBP can cause balloon rupture and potential inability to withdraw the catheter into the sheath. Confirm that the distal end of the introducer sheath is at least 2.5cm back from the most proximal image band before inflating the outer balloon. Failure to do so may stretch the outer tubing and severely hinder balloon deflation. Exercise caution when handling the stent to prevent breakage. The NuDEL system, especially at the stent, is rigid and may make negotiation through vessels difficult. The inflation diameter of the balloon used during stent delivery should approximate the diameter of the obstructive vessel and the intended implant site. If resistance is encountered upon removal, the whole system (balloon, guidewire and sheath) should be removed as a single unit, particularly if balloon rupture or leakage is known or suspected. **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. The platinum/iridium stent may migrate from the site of the implant. 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 (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.

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**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 IFUs for a complete listing of indications, contraindications, warnings and precautions. [www.bisusa.org](http://www.bisusa.org)

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# PICS-AICS 5K Run

Come join everyone in an invigorating morning run. Get up, get healthy, and get your brain and body ready for the day!

- Thursday, September 5<sup>th</sup> at 6:00am
- Start on the boardwalk behind the Marriott
- The race will take place rain or shine
- All race packets can be picked up at  
*PICS-AICS Registration Desk*  
*Marriott Grand Ballroom Foyer*  
*2<sup>nd</sup> Level*

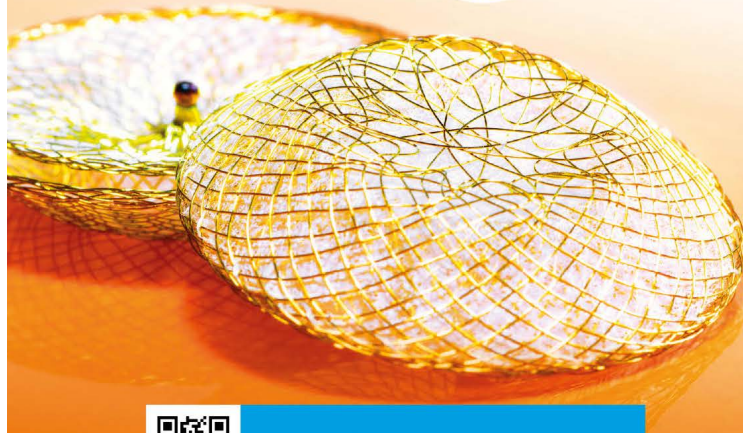


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logia, Mexico

### Jeff Zampi, MD

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### Gejun Zhang, MD

Fuwai Hospital  
China

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Sidra Medicine  
Qatar

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Cardiology, Brazil

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### Ralf Holzer, MD

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### Allison Cabalka, MD

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### Felix Berger, MD

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## Melody TPV — The Right Choice for Your Patients

The only transcatheter pulmonary valve specifically designed for RVOT conduits and bioprosthetic valves. The longest studied, with the largest body of clinical evidence at 8 years post-implant.\* Over 12 years of implants, more than 14,000 patients' lives have been changed.

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**12**  
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\*Melody Transcatheter Pulmonary Valve Study:  
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Not intended to constitute medical advice or in any way replace the independent medical judgment of a trained and licensed physician with respect to any patient needs or circumstances. Melody TPV is not suitable for all patients and ease of use, outcomes, and performance may vary. See the Instructions for Use for indications, contraindications, precautions, warnings, and adverse events.

**Medtronic**  
Further, Together

# Melody™ Transcatheter Pulmonary Valve, Ensemble™ II Transcatheter Valve Delivery System

## Important Labeling Information for the United States

**Indications:** The Melody TPV is indicated for use in the management of pediatric and adult patients who have a clinical indication for intervention on a dysfunctional right ventricular outflow tract (RVOT) conduit or surgical bioprosthetic pulmonary valve that has ≥ moderate regurgitation, and/or a mean RVOT gradient ≥ 35 mm Hg.

**Contraindications:** None known.

### Warnings/Precautions/Side Effects:

- **DO NOT implant in the aortic or mitral position. Pre-clinical bench testing of the Melody valve suggests that valve function and durability will be extremely limited when used in these locations.**
- DO NOT use if patient's anatomy precludes introduction of the valve, if the venous anatomy cannot accommodate a 22 Fr size introducer, or if there is significant obstruction of the central veins.
- DO NOT use if there are clinical or biological signs of infection including active endocarditis. Standard medical and surgical care should be strongly considered in these circumstances.
- Assessment of the coronary artery anatomy for the risk of coronary artery compression should be performed in all patients prior to deployment of the TPV.
- To minimize the risk of conduit rupture, do not use a balloon with a diameter greater than 110% of the nominal diameter (original implant size) of the conduit for pre-dilation of the intended site of deployment, or for deployment of the TPV.
- The potential for stent fracture should be considered in all patients who undergo TPV placement. Radiographic assessment of the stent with chest radiography or fluoroscopy should be included in the routine postoperative evaluation of patients who receive a TPV.
- If a stent fracture is detected, continued monitoring of the stent should be performed in conjunction with clinically appropriate hemodynamic assessment. In patients with stent fracture and significant associated RVOT obstruction or regurgitation, reintervention should be considered in accordance with usual clinical practice.

Potential procedural complications that may result from implantation of the Melody device include the following: rupture of the RVOT conduit, compression of a coronary artery, perforation of a major blood vessel, embolization or migration of the device, perforation of a heart chamber, arrhythmias, allergic reaction to contrast media, cerebrovascular events (TIA, CVA), infection/sepsis, fever, hematoma, radiation-induced erythema, blistering, or peeling of skin, pain, swelling, or bruising at the catheterization site.

Potential device-related adverse events that may occur following device implantation include the following: stent fracture, stent fracture resulting in recurrent obstruction, endocarditis, embolization or migration of the device, valvular dysfunction (stenosis or regurgitation), paravalvular leak, valvular thrombosis, pulmonary thromboembolism, hemolysis.

"The term "stent fracture" refers to the fracturing of the Melody TPV. However, in subjects with multiple stents in the RVOT it is difficult to definitively attribute stent fractures to the Melody frame versus another stent.

For additional information, please refer to the Instructions for Use provided with the product or available on <http://manuals.medtronic.com>.

**CAUTION:** Federal law (USA) restricts this device to sale by or on the order of a physician.

## medtronic.com

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UC201912909 EN 07/2019

# Medtronic

## Live Case Schedule



## Wednesday, September 4<sup>th</sup>

*LeBonheur Children's Hospital, Memphis, TN*  
(as part of the PDA Symposium)  
Shyam Sathanandam – 1 case  
10:00-10:30am

*University of Colorado, Aurora, CO*  
John Carroll – 1 case  
(as part of the PFO Symposium)  
3:25-3:55pm

## Thursday, September 5<sup>th</sup>

*Hospital Privado Universitario de Cordoba*  
*Cordoba, Argentina*  
Alejandro Peirone, Carlos Pedra & Francisco Garay  
– 2 cases

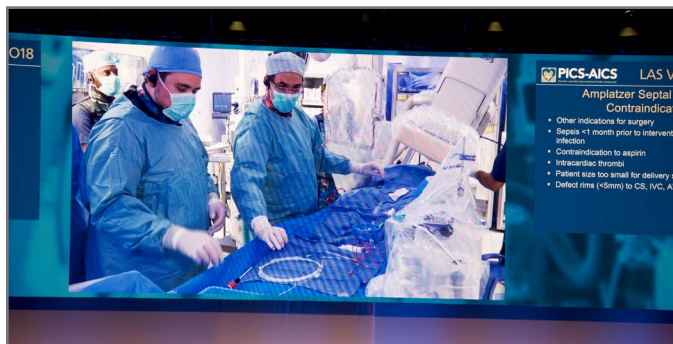
*Sidra Medicine, Doha, Qatar*  
Younes Boudjemline – 2 cases

*Jeddah, Saudi Arabia*  
Wail Alkashkari – 2 cases

**Session 1**  
8:15-10:30am – 135 minutes – 45 minutes each site

**Session 2**  
10:45am-12:45pm – 120 minutes – 40 minutes each site

# Live Case Schedule



## Friday, September 6<sup>th</sup>

*New York-Presbyterian Morgan Stanley Children's Hospital at Columbia*

Alejandro Torres & Matt Crystal – 2 cases

*Seattle Children's Hospital, Seattle, WA*

Thomas Jones – 2 cases

*New York-Presbyterian Komansky Children's Hospital at Weill Cornell Medicine*

Ralf Holzer & Harsimran Singh – 2 cases

### Session 1

8:15-10:30am – 135 minutes – 45 minutes each site

### Session 2

10:45am-12:45pm – 120 minutes – 40 minutes each site

## Saturday, September 7<sup>th</sup>

*Pontificia Universidad Catolica de Chile, Santiago, Chile*

Francisco Garay (2 cases)

*Mattel Children's Hospital at UCLA, Los Angeles, CA*

Dan Levi, Jamil Aboulhosn, Morris Salem – 2 cases

*Rush University Medical Center, Chicago, IL*

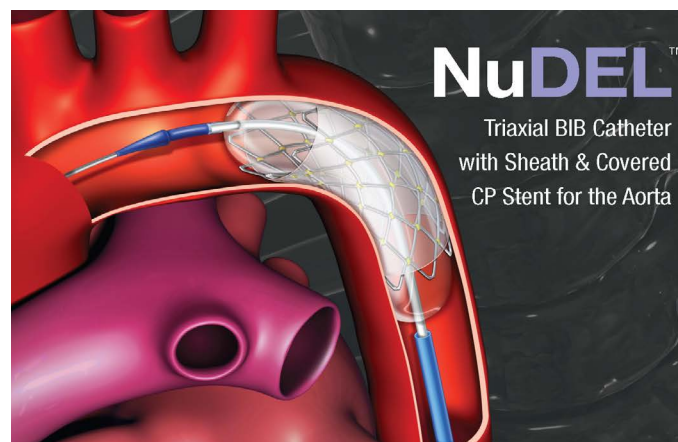
Cliff Kavinsky, Joshua Murphy & Hussam Suradi – 2 Cases

### Session 1

8:00-10:00am – 120 minutes – 40 minutes each site

### Session 2

10:00am-12:00pm – 120 minutes – 40 minutes each site



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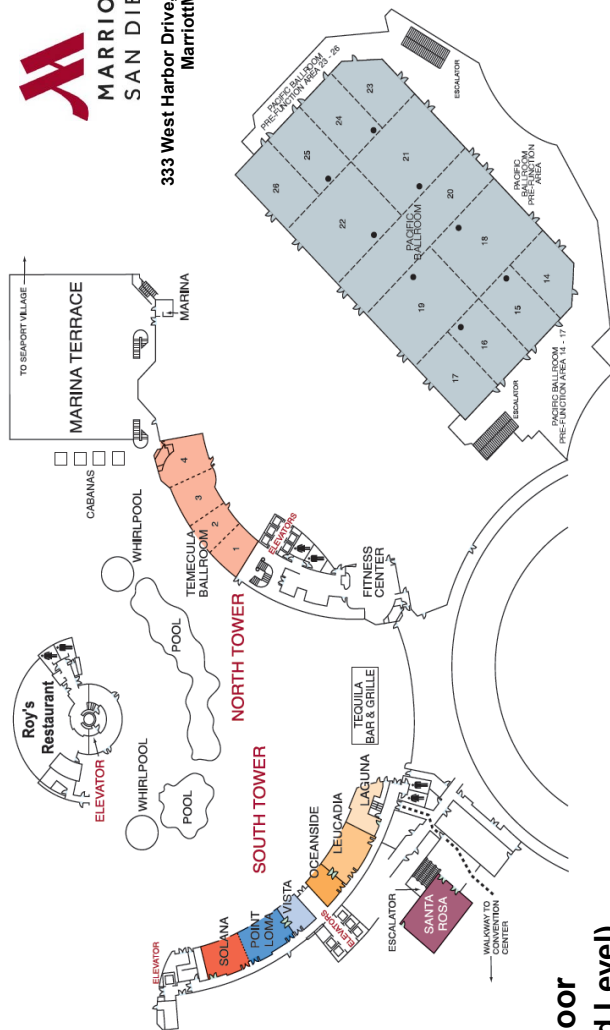
*This device is subject to individual country regulations regarding the importation and sale of this product. Not for resale in the USA.*



# Hotel Floor Plan

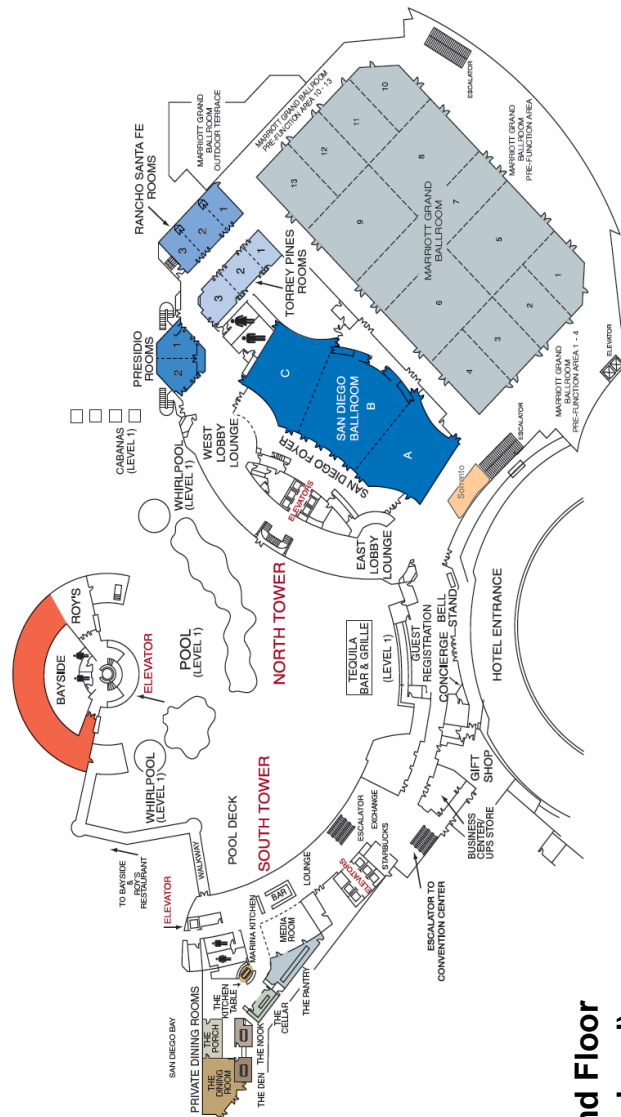


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**First Floor  
(Ground Level)**

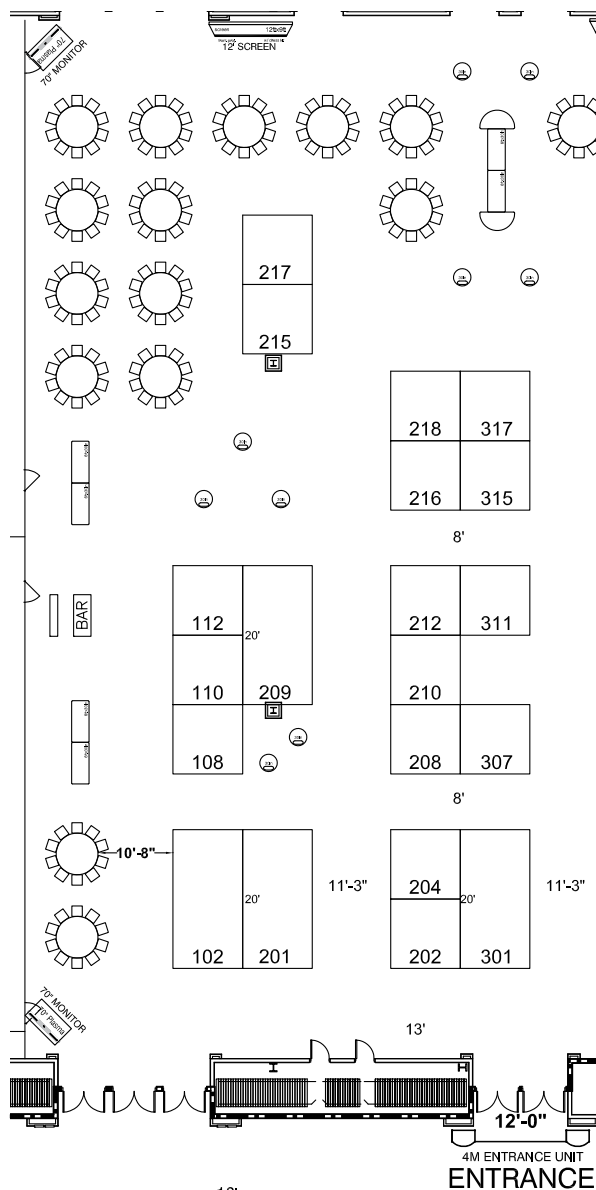
# Hotel Floor Plan



**Second Floor  
(Lobby Level)**

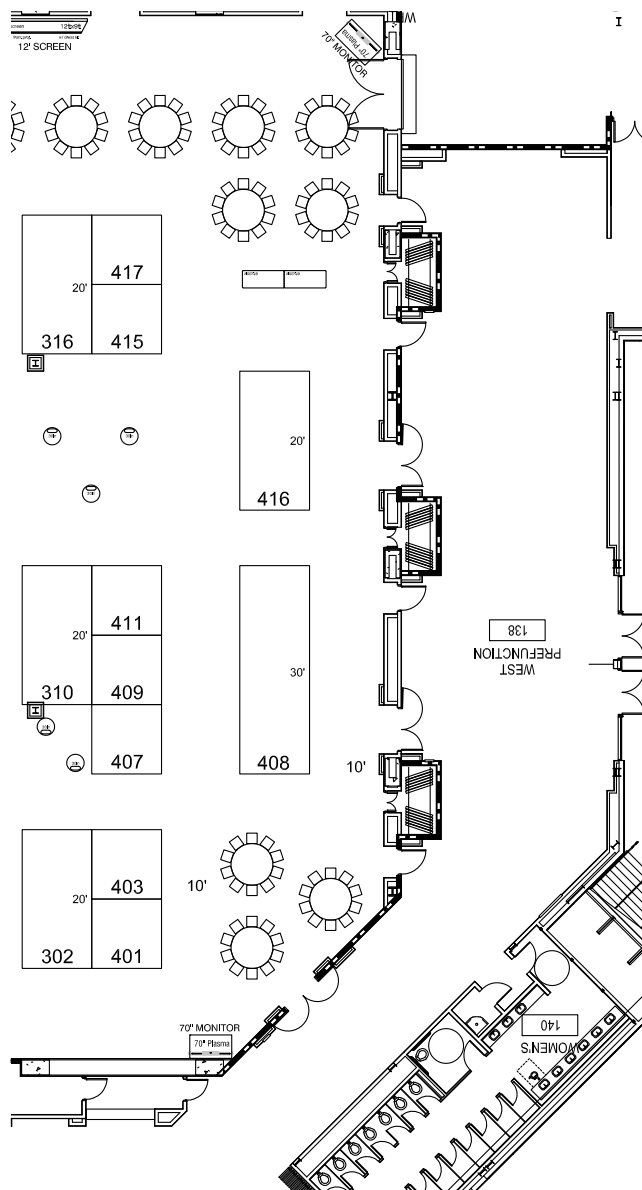
# Exhibitor Information

Abbott	310	Cook Medical	311
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Congenital Cardiology Today	409	Lifetech Scientific Corporation	411



# Exhibitor Floor Plan

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Rady Children's Hospital SCAI	317 210		



# Daily Program

## Tuesday, September 3<sup>rd</sup>

**2:00-6:00pm**      **Registration Open**  
*Marriott Grand Foyer*  
*2<sup>nd</sup> Floor Lobby Level*

## Wednesday, September 4<sup>th</sup>

**6:45am-6:00pm**      **Registration Open**  
*Marriott Grand Foyer*  
*2<sup>nd</sup> Floor Lobby Level*

**7:00-8:30am**      **Breakfast Available**  
*Marriott Grand Foyer*  
*2<sup>nd</sup> Floor Lobby Level*

**6:45-8:00am**      **Moderated Poster Presentations**  
*Marriott Grand Foyer*  
*2<sup>nd</sup> Floor Lobby Level*  
**Moderators: Posters 1-10**  
 Joshua Murphy & Makram Ebeid  
**Moderators: Posters 11-20**  
 Craig Fleishman & Jeremy Asnes  
**Moderators: Posters 21-30**  
 Ralf Holzer & Howaida El-Said

**7:00am-5:00pm**      **Poster Abstracts**  
*Marriott Grand Foyer*  
*2<sup>nd</sup> Floor Lobby Level*

**8:00-10:00am**      **Quality and Outcomes – Are We  
 Doing Enough to Protect Ourselves  
 and Our Patients?**  
 Main Session  
 Moderators: John Moore & Ralf Holzer  
*Marriott Grand Ballroom*  
*2<sup>nd</sup> Floor Lobby Level*

**8:00-8:15**      **There is More than One Way to Skin a  
 Cat: How to Compare Outcomes**  
 Lisa Bergersen

**8:16-8:36**      **IMPACT: What the Future Holds**  
 Robert Vincent

**8:37-8:52**      **How Can Accreditation Help to Improve  
 Quality and Outcomes in the Cath Lab?**  
 Aimee Armstrong

**8:53-9:08**      **Dose Reduction in the Pediatric Cath  
 Lab: How far can we go? – Henri Justino**

**9:09-9:24**      **When the SHIT Hits the Fan: How do We  
 Prepare for Bad Outcomes?**  
 Ralf Holzer

**9:25-9:40**      **When the Public Wants to Know: Public  
 Outcomes Reporting**  
 Ralph Brindis (NCDR representative)

**9:40-9:55**      **Discussion**

# Daily Program

**9:30-10:00am**      **Coffee Available**  
*Marriott Grand Ballroom Foyer*  
*2<sup>nd</sup> Floor Lobby Level*

**10:00am-12:00pm**      **Smaller and Safer - PDA Symposium**  
 Main Session  
 Moderators: Evan Zahn & Olivier Ghez  
*Marriott Grand Ballroom*  
*2<sup>nd</sup> Floor Lobby Level*

**10:00-10:30am**      **Live Case (Memphis)**  
 Shyam Sathanandam

**10:30-10:45am**      **Transcatheter PDA Closure in the  
 Premature Infant – Neonatologists  
 Viewpoint – William Benitz**

**10:45-11:00am**      **Transcatheter PDA Closure – What  
 Does the Data Show? Evan Zahn**

**11:00-11:15am**      **Surgical PDA Ligation – The Surgeons View**  
 Olivier Ghez

**11:15-11:35am**      **Taped Case – PDA stent (Texas)**  
 Henri Justino

**Taped Case – PDA stent (Texas)**  
 Athar Qureshi

**Debate: PDA Stenting Should be First Choice  
 for Sustaining Pulmonary Blood Flow**

**Pro: Bryan Goldstein**

**Con: John Nigro**

**11:35-11:45am**      **Lunch Available**  
*\*Grab your lunch to take to one of the  
 lunch symposiums*  
*Marriott Grand Ballroom Foyer*  
*2<sup>nd</sup> Floor Lobby Level*

**11:45-11:55am**

**12:00-12:30pm**

**12:15-1:55pm**      **Lunch Symposia #1**  
**Advances in Imaging Modalities**  
 Moderators: Craig Fleishman & Shelby Kutty  
*Breakout Room 1*  
*Marriott Grand Rooms 1-3*  
*2<sup>nd</sup> Floor Lobby Level*

**12:15-12:27**      **Intraprocedural Imaging for Fetal  
 Interventions – Who Should be  
 Performing This? – Simone Fontes-Pedra**

**12:28-12:40**      **Predictive Modeling for Interventions-  
 What Needs to Improve? – Matt Gillespie**

**12:41-12:53**      **Update on Cardiac MR Interventions**  
 Kanishka Ratnayaka

**12:54-1:06**      **3 Cases Where Fusion Imaging Improved  
 My Intervention – Thomas Fagan**

**1:07-1:19**      **Transthoracic Echo Guided Interventions  
 – Why Hasn't It Caught On? – Xiang Bin Pan**

**1:20-1:32**      **Personalized Medicine – CFD and 3-D  
 Printed Devices - Another False Dawn?**  
 Aimee Armstrong

## Daily Program

1:33-1:45	<b>From Holography to Augmented Reality: Will the Technology Improve Outcomes?</b> Eric Horlick
1:45-1:55	<b>Discussion</b>
12:15-1:55pm	<b>Lunch Symposia #2 Still Learning From our Interventions</b> Moderators: Richard Ringel & Suren Reddy <i>Breakout Room 2 Marriott Grand Rooms 10-12 2<sup>nd</sup> Floor Lobby Level</i>
12:15-12:27	<b>Stenting of the Ascending Aorta</b> Howaida El-Said
12:28-12:40	<b>Branch Pulmonary Artery Valve Insertion: When and How? – Brian Morray</b>
12:41-12:53	<b>RV Decompression for Pulmonary Atresia with IVS – 5 Things I Have Learned from over 100 Cases! – Mazeni Alwi</b>
12:54-1:04	<b>Closing the Pulmonary Hypertensive Duct – An Algorithm from a High Volume Center – Carlos Zabala</b>
1:05-1:17	<b>Embolization of Rudimentary RV to Avoid Coronary Damage in PA-IVS – Marc Gewillig</b>
1:18-1:30	<b>tPVR in Patients Less Than 20 Kgs</b> Jose Luis Zunzunegui
1:31-1:43	<b>1 Year Outcome Data From the GORE Assured Trial – Matt Gillespie</b>
1:45-1:55	<b>Discussion</b>
12:15-1:55pm	<b>Lunch Symposia #3 – Main Session Interventions in ACHD</b> Moderators: Jamil Aboulhoss & Hussam Suradi <i>Marriott Grand Ballroom 2<sup>nd</sup> Floor Lobby Level</i>
12:15-12:27	<b>Risk Calculators in ACHD Catheterization – Are They Accurate in Predicting SAE?</b> Nathan Taggart
12:28-12:40	<b>Do I Need an Adult Cardiologist Whilst Performing Interventions on Adults</b> Alex Javois
12:41-12:53	<b>Adapting Surgery in Childhood to Augment Interventions in Adults</b> Emile Bacha
12:54-1:06	<b>Emerging Technology in Adult Cardiology Applicable to Adults with CHD</b> Robert Lederman
1:07-1:19	<b>Surgical Strategies to Minimise CPB in Adults with CHD – Is a Sternotomy the Same as CPB? – Massimo Caputo</b>

## Daily Program

1:20-1:32	<b>The Atrial Septum – Gateway to the Left Heart – Think Carefully Before You Shut the Door! – Kevin Walsh</b>
1:33-1:50	<b>Discussion</b>
2:00-3:45pm	<b>Rebirth of the PFO - Will it be Different the Second Time Around?</b> Main Session Moderators: Cliff Kavinsky & Thomas Forbes <i>Marriott Grand Ballroom 2<sup>nd</sup> Floor Lobby Level</i>
2:00-2:15	<b>Taped Case – Iqbal Malik</b>
2:18-2:28	<b>Transcatheter Suture Mediated PFO Closure: Initial US Experience</b> James Thompson
2:30-2:42	<b>PFO and Migraine – Can We Accurately Define Responders? – Eric Horlick</b>
2:43-2:55	<b>PFO and Hypoxemia – Case Presentation</b> TBD
2:56-3:08	<b>Challenging Anatomical Subtypes and How to Deal with Them – Horst Sievert</b>
3:09-3:21	<b>PFO – The Neurologists Viewpoint</b> David Thaler
3:25-3:55	<b>Live Case (Colorado) – John Carroll</b>
3:45-4:15pm	<b>Coffee Available</b> <i>Marriott Grand Ballroom Foyer 2<sup>nd</sup> Floor Lobby Level</i>
4:00-6:00 pm	<b>Oral Abstract Presentations</b> Main Session Moderators: Massimo Caputo, Jacqueline Kreutzer & Larry Latson <i>Marriott Grand Ballroom 2<sup>nd</sup> Floor Lobby Level</i>
6:00-8:00pm	<b>Welcome Reception – Exhibit Hall Open</b> <i>Pacific Ballroom 1<sup>st</sup> Floor Ground Level</i>

## Thursday, September 5<sup>th</sup>

6:00-7:00am	<b>PICS-AICS 5K Run</b>
6:45am-6:00pm	<b>Registration Open</b> <i>Marriott Grand Ballroom Foyer 2<sup>nd</sup> Floor Lobby Level</i>
7:00-8:30am	<b>Breakfast Available</b> <i>Exhibit Hall – Pacific Ballroom 1<sup>st</sup> Floor Ground Level</i>
6:45-8:00am	<b>Moderated Poster Presentations</b> Moderators: Posters 1-10 Dan Gruenstein & Jacqueline Kreutzer



# Daily Program

## Moderators: Posters 11-20

JV DeGiovanni & Hussam Suradi

## Moderators: Posters 21-30

Thomas Forbes & Alan Nugent

*Marriott Grand Ballroom Foyer*

*2<sup>nd</sup> Floor Lobby Level*

7:00am-5:00pm

## Poster Abstracts

*Pacific Ballroom Foyer*

*1<sup>st</sup> Floor Ground Level*

8:00-8:15am

## Welcome

Main Session

Ziyad M. Hijazi & Damien Kenny

*Marriott Grand Ballroom*

*2<sup>nd</sup> Floor Lobby Level*

8:15-10:30am

## Live Cases – Cordoba, Doha, Jeddah

Main Session

Moderators: Damien Kenny & Ziyad M Hijazi

Panelists: Daniel Aguirre, Emile Bacha,

Francois Godart, Petru Liuba & Noa Holoschitz

*Marriott Grand Ballroom*

*2<sup>nd</sup> Floor Lobby Level*

10:30-10:45am

## Coffee Available – Exhibit Hall

*Pacific Ballroom*

*1<sup>st</sup> Floor Ground Level*

10:45am-12:45pm

## Live Cases – Cordoba, Doha, Jeddah

Main Session

Moderators: Thomas Jones, John Cheatham

Panelists: Michel Ilbawi, Raul Rossi,

Howard Weber, Teiji Akagi,

Joshua Murphy & Sebastian Goreczny

*Marriott Grand Ballroom*

*2<sup>nd</sup> Floor Lobby Level*

12:30-1:30pm

## CCISC Meeting

*Marriott Grand Rooms 1-3*

*2<sup>nd</sup> Floor Lobby Level*

12:45-1:30pm

## Lunch Available – Exhibit Hall

*Pacific Ballroom*

*1<sup>st</sup> Floor Ground Level*

1:15-1:55pm

## Taped Cases

Main Session

Moderators: Dan Levi & Zahid Amin

*Marriott Grand Ballroom*

*2<sup>nd</sup> Floor Lobby Level*

1:15-1:30

**Michigan** – Jeff Zampi

1:35-1:50

**Cairo** – Maiy El Sayed

1:00-2:00pm

## Lunch Breakout Session

**Pulmonary Valve Replacement -**

**My Best and Worst Case**

Moderators: Ziyad M. Hijazi & John P. Cheatham

*Marriott Grand Rooms 10-12*

*2<sup>nd</sup> Floor Lobby Level*



# PICS-AICS

Pediatric and Adult Interventional Cardiac Symposium



## SAVE THE DATE

## SEPTEMBER 8-11, 2020

# BOSTON

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# Daily Program

<b>1:00-1:10</b>	<b>Melody Valve</b> – Philip Roberts
<b>1:11-1:21</b>	<b>Alterra Valve</b> – Vivian Dimas
<b>1:22-1:32</b>	<b>Venus Valve</b> – Worakan Promphan
<b>1:33-1:43</b>	<b>Harmony Valve</b> – Matt Gillespie
<b>1:44-1:54</b>	<b>Sapien Valve</b> – Shabana Shahanavaz
<b>2:00-5:30pm</b>	<b>3DI3 at PICS-AICS</b> Main Session Moderators: Gregor Krings & Aimee Armstrong <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>2:00-3:30pm</b>	
<b>2:00-2:12</b>	<b>From 2D to 3DRA in PA Stenting: Start-Up and Learning Curve</b> – Jeremy Asnes <b>Debate: Stenting in the PA Bifurcation: 3DRA is Mandatory</b> <b>Pro:</b> Gareth Morgan <b>Con:</b> Alain Fraisse <b>Discussion</b> <b>From Stage I-III: Topography and Stenting</b> – Gregor Krings
<b>2:13-2:25</b>	
<b>2:26-2:38</b>	
<b>2:38-2:45</b>	
<b>2:46-2:58</b>	
<b>2:59-3:11</b>	<b>Extra-Cardiac Structures – When 3D Can Help</b> – Mirella Molenschot
<b>3:12-3:30</b>	<b>Taped Case: 3DRA Guided Complex PA Bifurcation Stenting</b> – Aimee Armstrong
<b>3:30-4:00pm</b>	<b>Coffee Available – Exhibit Hall</b> <i>Pacific Ballroom</i> <i>1<sup>st</sup> Floor Ground Level</i>
<b>4:00-5:30pm</b>	
<b>4:00-4:15</b>	<b>3D imaging Pre-, Peri-, and Post-TPVR: How, When, and Why?</b> – Shelby Kutty
<b>4:15-4:30</b>	<b>3DRA Workflow in TPVR</b> – Gregor Krings
<b>4:30-4:45</b>	<b>TPVR in the Patched RVOT: Defining Dimensions and Device Choice</b> Evan Zahn
<b>4:45-5:00</b>	<b>Finite Element Analysis in TPVR: Predict to Prevent</b> – Mario Carminati
<b>5:00-5:15</b>	<b>Taped Case: PPVI guided by 3DRA</b> Mirella Molenschot
<b>5:15-5:30</b>	<b>Discussion</b>
<b>2:00-3:45pm</b>	<b>Nursing &amp; Associated Professionals</b> Breakout Moderators: Sharon Cheatham & Karen Iacono <i>Marriott Grand Rooms 1-3</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>2:00-2:15</b>	<b>Reducing Radiation in the Cath Lab</b> Clinton Fulk

# Daily Program

<b>2:15-2:30</b>	<b>Emergencies in the Cath Lab</b> Ileen Cronin
<b>2:30-2:45</b>	<b>Navigating the Waters of a Multidisciplinary Approach to QI and Research</b> Karen Iacono
<b>2:45-3:00</b>	<b>Pitfalls of Femoral Access: How to Prevent Complications</b> – Soodevi Boolkah
<b>3:00-3:15</b>	<b>Planning a New Hybrid Interventional Lab: Things We Forget When Planning</b> Emily Kish
<b>3:15-3:30</b>	<b>Designing the Perfect Transcatheter Pulmonary Valve for Pulmonary Regurgitation... What Are the Issues?</b> John P. Cheatham
<b>3:30-3:45</b>	<b>Q &amp; A</b>
<b>2-3:30pm</b>	<b>Transcatheter VSD Closure – Time to Rethink</b> BreakOut Moderators: JV DeGiovanni & Terry King <i>Marriott Grand Rooms 10-12</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>2:00-2:12</b>	<b>PMVSD Closure – No Data – Really?</b> Dan Gruenstein
<b>2:13-2:25</b>	<b>Transcatheter Closure of DCSA VSD's – Technique and Outcomes</b> Worakan Promphan
<b>2:26-2:38</b>	<b>Transcatheter Closure of PMVSD's with Aortic Valve Prolapse</b> – Do Tin
<b>2:39-2:54</b>	<b>Taped Case (Dublin)</b> – Damien Kenny
	<b>Debate: Transcatheter Closure of the Majority of VSD's will be Achievable within 10 Years</b> <b>Pro:</b> Joaquim Miro <b>Con:</b> Michel Ilbawi <b>Discussion</b>
<b>4:00-5:30pm</b>	<b>Interventions on the Atrial Septum</b> Breakout Moderators: Zahid Amin & Felix Berger <i>Marriott Grand Rooms 1-3</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>4:00-4:15</b>	<b>Taped Case (Philadelphia)</b> Matt Gillespie
<b>4:16-4:28</b>	<b>Missing Posterior Rim – To Close or Not to Close? Implications for Device Selection</b> – Marco Papa
<b>4:29-4:41</b>	<b>Device Embolization – Plan A: Avoid Plan B: Retrieve</b> – Jay Young Choi
<b>4:42-4:54</b>	<b>Fenestrated Device Closure – Why and How?</b> – Bharat Dalvi

# Daily Program

4:55-5:07	<b>Secondary Fenestration of the Atrial Septum or of the Implanted Device – Tips and Tricks!</b> – Lee Benson
5:08-5:20	<b>Interventional Treatment of Sinus Venosus Defects – Current Status and Lessons Learned</b> – K. Sivakumar
5:20-5:30	<b>Discussion</b>
5:30pm	<b>PICS Achievement Award</b> Main Session <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
6:00-7:00pm	<b>“The Shark Tank”</b> Main Session Moderators/Judges: Aimee Armstrong, Tom Forbes, Henri Justino, Suren Reddy, Robert Lederman, Jacqueline Kreutzer, JV DeGiovanni, Philip Roberts <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>

## Friday, September 6<sup>th</sup>

6:45am-6:00pm	<b>Registration Open</b> <i>Marriott Grand Foyer</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
7:00-8:30am	<b>Breakfast Available – Exhibit Hall</b> <i>Pacific Ballroom</i> <i>1<sup>st</sup> Floor Ground Level</i>
6:45-8:00am	<b>Moderated Poster Presentations</b> <b>Moderators: Posters 1-10</b> John Moore & Bryan Goldstein <b>Moderators: Posters 11-20</b> Mario Carminati & Brent Gordon <b>Moderators: Posters 21-30</b> Lynn Peng & Shelby Kutty <i>Marriott Grand Foyer</i> <i>2nd Floor Lobby Level</i>
7:00am-5:00pm	<b>Poster Abstracts</b> <i>Pacific Ballroom Foyer</i> <i>1<sup>st</sup> Floor Ground Level</i>
8:00-8:15am	<b>Update on Live Cases 2018</b> Main Session Kiran Mallula <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
8:15-10:30am	<b>Live Cases – NYP/Columbia, Seattle, NYP/Weill Cornell</b> Main Session Moderators: William Hellenbrand, Felix Berger Panelists: Mazeni Alwi, Massimo Caputo, Martin Bocks, Yoav Dori, Oscar Mendiz

# Daily Program

	<i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
10:15-10:45am	<b>Coffee Available – Exhibit Hall</b> <i>Pacific Ballroom</i> <i>1<sup>st</sup> Floor Ground Level</i>
10:45am-12:45pm	<b>Live Cases – NYP/Columbia, Seattle, NYP Weill/Cornell</b> Main Session Moderators: Allison Cabalka, Shakeel Qureshi Panelists: Makram Ebeid, Horacio Faella, Brent Gordon, Olivier Ghez, Amjad Mahmood, Hesham Al-Saloos <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
12:45-1:30pm	<b>Lunch Available – Exhibit Hall</b> <i>Pacific Ballroom</i> <i>1<sup>st</sup> Floor Ground Level</i>
1:15-1:55pm	<b>Taped Cases and New Interventions</b> Main Session Moderators: Alex Javois, Thomas Fagan <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
1:15-1:30	<b>Israel – Elchanan Bruckheimer</b>
1:35-1:50	<b>Istanbul – Omer Goktekin</b>
2:00-3:45pm	<b>Pulmonary Artery Interventions in the Modern Era</b> Main Session Moderators: Alan Nugent, John Moore <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
2:00-2:15	<b>Taped Case – Frank Ing</b>
2:16-2:28	<b>Cutting Balloons, Ultra-High Pressure Dilation and Stenting – A Structured Approach – Felix Berger</b>
2:29-2:41	<b>Beyond the Proximal PAs: Interventional Strategies for Patients with Multiple Peripheral PA Stenosis</b> Doff McElhinney
2:42-2:54	<b>Strategies for Complex PA Bifurcation Lesions – Ahmet Celebi</b>
2:55-3:07	<b>Newer Stent Options Specific for PA Stenting – John Cheatham</b>
3:08-3:20	<b>When the Interventionalist is Not Enough: Hybrid PA Rehab and Surgical PA Interventions – Mark Galantowicz</b>
3:20-3:32	<b>Procedural Success, and Medium/Longterm Outcome of PA Rehab: How Do We Know We are winning? – Thomas Forbes</b>
3:32-3:45	<b>Discussion</b>

# Daily Program

2:00-4:00pm

## Interventions in Heart Failure

Breakout

Moderators: Lynn Peng, Charles Mullins,  
Yoav Dori

*Marriott Grand Rooms 1-3*

*2<sup>nd</sup> Floor Lobby Level*

2:00-2:12

**Reverse PA Banding – Who, Why and How?** – Dietmar Schranz

2:13-2:28

**Taped Case – Darren Berman**

2:29-2:41

**Coronary Artery Stenting in Children – Is There Ever Justification?** – Hideshi Tomita

2:42-2:54

**Establishing ECMO in the Cath Lab**

Shabana Shahanavaz

2:55-3:10

**Lymphatic Intervention – Taped Case**

(Leuven) Marc Gewillig

3:11-3:23

**Impella in the Fontan – When and How**  
Vivian Dimas

3:24-3:36

**New Insights in Cardiac Pumping – Clinical Relevance** – Marcus Carlsson

3:37-3:49

**Syntach – A Novel Long Term Cardiac Support Concept** – Kristian Solem

2:00-3:30pm

## PICES Breakout

Moderators: Ryan Callahan, Sara Trucco,  
Gurumurthy Hiremath

*Marriott Grand Rooms 10-12*

*2<sup>nd</sup> Floor Lobby Level*

**Trials and Tribulations – Establishing a Career as a Pediatric Cardiologist Case Presentation – “Good Thing We Had Two Needles”**

Jeffrey Darst, Children’s Hospital of Colorado

**Case Presentation – “Under Pressure: A Complex Lymphatic Intervention”**

Sanjay Sinha, MD, UCLA

**“What to do when the “Fasten Your Seatbelt” Light Comes On: Lessons Learned Through the Turbulence Of My Early Career.”**

Carrie Herbert, MD, UT Southwestern

**Keynote Speaker: “Am I a Tortoise or a Hare? The Importance of Pace”**

Audrey Marshall, MD

Harvard School of Public Health

3:30-4:00pm

**Coffee Available – Exhibit Hall**

*Pacific Ballroom*

*1<sup>st</sup> Floor Ground Level*

# PICS-AICS

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# Daily Program

<b>4-5:45pm</b>	<b>Transcatheter Valve Replacement – New Strategies and Techniques</b> Main Session Moderators: Allison Cabalka, Lee Benson <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>4:00-4:12</b>	<b>When I Should Have Used a Long Sheath To Implant a SAPIEN Valve in the Native RVOT</b> – Shabana Shahanavaz
<b>4:13-4:25</b>	<b>When I Should Have Used A Pre-stent in the Native RVOT</b> – Jamil Aboulhosen
<b>4:26-4:38</b>	<b>5 Options for Transcatheter Tricuspid Valve Replacement and Why</b> Reda Ibrahim
<b>4:39-4:51</b>	<b>Tips and Tricks for Successful Mitral Valve in Valve Therapy</b> – Allison Cabalka
<b>4:52-5:04</b>	<b>Reintervention on the Melody in the Mitral Position in Small Children</b> Mario Carminati <b>Debate:</b> Balloon Expandable Systems are Superior to Self-expanding Systems for the Native RVOT
<b>5:05-5:15</b>	<b>Pro:</b> Gareth Morgan
<b>5:16-5:26</b>	<b>Con:</b> Zahid Amin
<b>5:30-5:45</b>	<b>Discussion</b>
<b>4-5:45pm</b>	<b>LA Appendage Session Breakout</b> Moderators: Kevin Walsh, Horst Sievert <i>Marriott Grand Rooms 10-12</i> <i>2nd Floor Lobby Level</i>
<b>4:00-4:12</b>	<b>Patient Selection – Are the Indications too Rigid?</b> – Issam Moussa
<b>4:13-4:25</b>	<b>Update on Trials</b> – Kevin Walsh
<b>4:26-4:38</b>	<b>Established and Evolving Devices</b> Horst Sievert
<b>4:39-4:51</b>	<b>Who Should be Doing these Cases and Why?</b> – Mark Osten
<b>4:52-5:25</b>	<b>Taped Case – Anatomical Variants and Implications for Closure (Seattle)</b> Mark Reisman
<b>5:25-5:35</b>	<b>Discussion</b>

# Daily Program

<b>4:00-5:45pm</b>	<b>Latin Session Breakout</b> Moderators: Carlos Pedra, Alejandro Peirone <i>Marriott Grand Rooms 1-3</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>4:00-4:10</b>	<b>From Polar Bears to Raptors – Championing Assistance and Research in Canada</b> – Joaquim Miro
<b>4:11-4:21</b>	<b>Becoming the Chief was a Small Step for a Woman but what about Cath Research? What is New in Pittsburgh?</b> Jaqueline Kreutzer
<b>4:22-4:32</b>	<b>Cowboys, Cattle, Guns and Rockets – Has Anything Changed in the Cath Lab in Houston?</b> – Henri Justino
<b>4:33-4:43</b>	<b>Mixing Wind and Pasta with Fish &amp; Chips! New Italian Valves in England</b> Massimo Caputo
<b>4:44-4:54</b>	<b>Seafood and Wine. Snow Mountains and Beaches – Is There a Better Combination in Interventional Cardiology in Chile?</b> – Daniel Aguirre
<b>4:55-5:05</b>	<b>Is Spanish Pediatric Interventional Cardiology Really Better than the Real Madrid?</b> – Jose Luis Zunzunegui
<b>5:06-5:16</b>	<b>Gauchos in the Argentinean Inland – What is Making a Differences for our Kids with CHD?</b> – Alejandro Peirone
<b>5:17-5:27</b>	<b>Syncretism in Pediatric Cardiology – A Mexican Tale</b> – Carlos Zabal
<b>5:28-5:38</b>	<b>Forget about Soccer!!! Brazil is about Music!! How to Orchestrate to Become a World Class Program</b> – Carlos Pedra
<b>7:00-10:00pm</b>	<b>PICS-AICS Dinner</b> Discover Space Past, Present and Future, Dinner and Dancing <i>San Diego Air &amp; Space Museum at Balboa Park</i>
<b>6:30pm</b>	<b>Motor Coaches Depart the Marriott Marquis</b> <i>Outside the Pacific Ballroom on the Lower Level of Pacific Drive</i>

# Daily Program

**Saturday, September 7<sup>th</sup>**

<b>6:45am-1:30pm</b>	<b>Registration Open</b> <i>Marriott Grand Foyer</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>7:00-8:30am</b>	<b>Breakfast Available – Exhibit Hall</b> <i>Pacific Ballroom</i> <i>1<sup>st</sup> Floor Ground Level</i>
<b>8:00-10:00am</b>	<b>Live Cases – Santiago, UCLA, Chicago Main Session</b> Moderators: Carlos Pedra, Damien Kenny Panelists: Satoshi Yasukochi, Jou-Kou Wang, Levent Saltik, Philip Roberts, Michel Ilbawi, Masood Sadiq, Pan Xin <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>10:00-10:30am</b>	<b>Coffee Available – Exhibit Hall</b> <i>Pacific Ballroom</i> <i>1<sup>st</sup> Floor Ground Level</i>
<b>10am-12:00pm</b>	<b>Live Cases – Santiago, UCLA, Chicago Main Session</b> Moderators: Ziyad Hijazi, John Cheatham Panelists: Hala Almarsafawy, Jesus Damsky Barbosa, Hasri Samion, Mark Galantowicz, Gejun Zhang, Ozge Pamukcu <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>12:00pm</b>	<b>Exhibit Hall Closes</b>
<b>12:00-12:30pm</b>	<b>Lunch Available</b> <i>Marriott Grand Ballroom Foyer</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>12:10-1:30pm</b>	<b>My Nightmare Case in the Cath Lab Main Session</b> Moderators: Shakeel Qureshi, Damien Kenny <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>
<b>1:30pm</b>	<b>Closing Remarks Main Session</b> Ziyad M. Hijazi & Damien Kenny Exhibit Passport Winner Announcement <i>Marriott Grand Ballroom</i> <i>2<sup>nd</sup> Floor Lobby Level</i>



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ISSN 1554-7787 print - ISSN 1554-0499 electronic  
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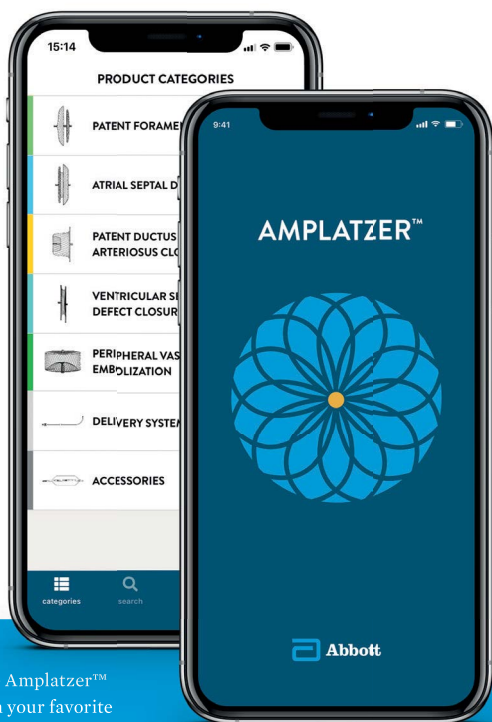
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