

VEITH[®] SYMPOSIUM

Connecting The **Vascular** Community

42nd Anniversary

Tuesday - Saturday, November 17-21, 2015

VASCULAR ENDOVASCULAR ISSUES TECHNIQUES HORIZONS

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Frank J. Veith, MD

Symposium Co-Chairmen

Enrico Ascher, MD

Kenneth Ouriel, MD, MBA

Daniel G. Clair, MD

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SOCIETY for VASCULAR SURGERY

www.VEITHsymposium.org

PROGRAM OUTLINE AT A GLANCE

TUESDAY PROGRAMS

Program A: (Sessions 1-8)

6:40 A.M. – 5:50 P.M.

(9.75 CME Credits)

Progress In Valve, Aortic And Carotid Diseases And Their Treatment

Location: Grand Ballroom East, 3rd Floor

Program B: (Sessions 9-16)

6:40 A.M. – 6:03 P.M.

(10.25 CME Credits)

New Developments In Treatment Of AAAs, EVAR, Aortic Branch Lesions (Including Iliac Arteries), Laparoscopic Techniques, Outpatient Vascular Centers And Open Surgery

Location: Grand Ballroom West, 3rd Floor

Program C: (PART 1 - Sessions 17-18)

7:00 A.M. – 12:00 P.M.

(4.5 CME Credits)

New Developments In Management Options For Pulmonary Embolism

Location: Trianon Ballroom, 3rd Floor

Program C: (PART 2 - Sessions 19-22)

1:00 P.M. – 5:00 P.M.

(3.5 CME Credits)

Management Of Acute And Chronic Large Vein Occlusion

Location: Trianon Ballroom, 3rd Floor

WEDNESDAY PROGRAMS

Program D: (Sessions 23-30)

6:40 A.M. – 5:58 P.M.

(10 CME Credits)

Lower Extremity Arterial Disease And Its Treatment

Location: Grand Ballroom East, 3rd Floor

Program E: (Sessions 31-38)

6:45 A.M. – 6:25 P.M.

(10.5 CME Credits)

Natural History, Anti-Atherogenic And Medical Treatments, Renal Denervation, Endoleaks, Complications And Important Issues In Ethics, Government And Vascular Business, Key Carotid Topic

Location: Grand Ballroom West, 3rd Floor

Program F: (Sessions 39-46)

6:45 A.M. – 5:55 P.M.

(9.75 CME Credits)

More On Aortic Dissection, TEVAR, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR (F/BEVAR), Multilayer Flow Modulating (MLFM) Stents, Recorded Live Cases, Abdominal Aorta And EVAR

Location: Trianon Ballroom, 3rd Floor

THURSDAY PROGRAMS

Program G: (Sessions 47-54)

6:45 A.M. – 5:55 P.M.

(9.75 CME Credits)

New Techniques And Technology, Parallel Grafts, F/BEVAR, Military Topics, Ruptured AAAs, Robotics, Guidance, New Concepts And Controversies With Fenestration, EVAS, Embolization, Training Trauma Surgeons

Location: Grand Ballroom East, 3rd Floor

Program H: (Sessions 55-62)

6:45 A.M. – 5:44 P.M.

(9.5 CME Credits)

New Devices For Abdominal Aorta And EVAR; Thoracic Aorta And TEVAR; Lower Extremity And Stents And Stent-Grafts; Preventing And Treating Migration And Endoleaks; EndoAnchors; Embolization And Thrombectomy

Location: Grand Ballroom West, 3rd Floor

Program I: (Sessions 63-70)

7:30 A.M. – 5:00 P.M.

(8.5 CME Credits)

Superficial Venous Disease

Location: Trianon Ballroom, 3rd Floor

Program J: (Sessions 71-76)

8:00 A.M. – 5:30 P.M.

(9.25 CME Credits)

AIMsymposium Multidisciplinary Acute Stroke Management

Location: Murray Hill Suites East and West, 2nd Floor

FRIDAY PROGRAMS

Program K: (Sessions 77-84)

6:46 A.M. – 5:55 P.M.

(10 CME Credits)

New Techniques, Technology And Concepts; Carotid, Thoracic And Abdominal Aneurysm Disease; Spinal Cord Ischemia (SCI); CAS And CEA; Updates And New Concepts

Location: Grand Ballroom East, 3rd Floor

Program L: (Sessions 85-92)

6:45 A.M. – 5:56 P.M.

(9.25 CME Credits)

Popliteal Disease; Arterial Graft And Aneurysm Infection; Progress In Imaging And Hybrid ORs; Medical Treatment; Updates; Vascular Trauma; Thoracic Outlet Syndrome (TOS); Recorded Live Aneurysm Cases; Radiation Safety

Location: Grand Ballroom West, 3rd Floor

Program M: (Sessions 93-97)

7:00 A.M. – 5:00 P.M.

(9 CME Credits)

Deep Venous Disease

Location: Trianon Ballroom, 3rd Floor

Program N: (Sessions 98-101)

7:55 A.M. – 5:15 P.M.

(7.5 CME Credits)

Complex Vascular Malformations And Vascular Tumors

Location: Gramercy Suites East and West, 2nd Floor

SATURDAY PROGRAMS

Program O: (Sessions 102-109)

6:45 A.M. – 4:50 P.M.

(9.25 CME Credits)

Important New Developments In Vascular Disease Of The Lower Extremities, Carotids And Aorta; Vascular Trauma

Location: Grand Ballroom East, 3rd Floor

Program P: (Sessions 110-114)

7:55 A.M. – 4:25 P.M.

(7.25 CME Credits)

Improving Outcomes In Hemodialysis Access

Location: Grand Ballroom West, 2nd Floor

Program Q: (Sessions 115-120)

6:54 A.M. – 3:20 P.M.

(7.75 CME Credits)

New Developments In Treatment Of Diseases Of The Abdominal And Thoracic Aorta, TAAAs, TBADs And Lower Extremities; More Updates And New Concepts

Location: Trianon Ballroom, 3rd Floor



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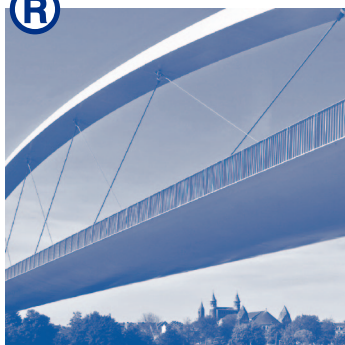
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March 6-8
2016

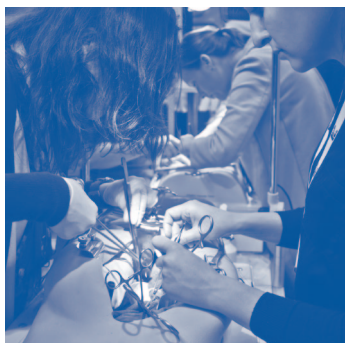
Maastricht
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100 invited lectures

Interactive case discussions

Hands-on training sessions

Arterial, Venous & Access
Master Classes & textbooks



20th ANNIVERSARY
1997-2016

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20th European Vascular Course

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COMPONENT MEETING LEADERS

Jose I. Almeida, MD, RVT, RPVI
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Allan L. Brook, MD
Jacob Cynamon, MD
Krassi Ivancev, MD, PhD
Michael R. Jaff, DO
Lowell S. Kabnick, MD, RPhS
Natalie A. Marks, MD, RVT, RPVI
Larry A. Scher, MD
Anton N. Sidawy, MD, MPH
Wayne F. Yakes, MD
Thomas W. Wakefield, MD

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CONTROVERSIES

CHALLENGES

CONSENSUS

VASCULAR & ENDOVASCULAR
Challenges Update

See you in 2016

26–29 APRIL 2016
TUESDAY–FRIDAY

OLYMPIA GRAND • LONDON • UNITED KINGDOM

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GENERAL INFORMATION

NEEDS ASSESSMENT

Vascular disease in all of its manifestations is a leading cause of death and disability affecting a large percentage of Americans over the age of 50. There is a critical need for physicians who diagnose, treat and manage patients with vascular disease to receive continuing medical education in this area. The latest pharmacologic, radiologic, surgical and endovascular techniques and technologies will be presented, along with discussions of when these treatments are justified and indicated and when they are not. Updates on clinical trials and opportunities for dialogue with experts in the field provide insight along with the latest data on the results of the various treatment modalities.

There is an enormous gap between actual practice and the current state of knowledge. This gap is filled imperfectly with material in books and published articles. These sources are also often negatively influenced by the biases of authors, reviewers and editors. VEITHsymposium attempts to fill this gap more perfectly and more currently by enlisting speakers with up-to-date information and data, and also those on both sides of controversial issues. In this way, the audience gets a current view of the state-of-the-art in vascular disease management as of the date of the meeting. All important topics are covered at the meeting and for further reference in the web based library, a long-term permanent resource.

In addition, by having numerous short (5-6 minutes) talks followed by panel discussions and capturing the entire meeting on the web based library, the meeting will provide an electronic reference source to help vascular specialists in their practice decisions throughout the year. It will also provide the most up-to-date unbiased information possible to help with these decisions.

FOCUS

The VEITHsymposium provides Vascular Surgeons and other Vascular Specialists with a five-day conference on the most current information about new developments in clinical practice and relevant research. Beginning Tuesday, the symposium offers over 900 fast-paced presentations on what is new and important in the treatment of vascular disease. Important updates and reevaluations, as well as the latest significant advances, changing concepts in diagnosis and management, pressing controversies and new techniques, agents and diagnostic modalities will be presented. Video case presentations will also be included.

OBJECTIVES

Upon completion of the VEITHsymposium, the participants will, after learning about a wide array of topics, be able to:

- Explain the practical implications of clinical trial data on new technologies and techniques for endovascular repair of abdominal aortic aneurysm and thoracic aortic disease
- Summarize the impact of data on therapeutic advances for stroke and carotid disease management
- Compare the safety, efficacy, and therapeutic indications of pharmacologic agents to the management of vascular disease
- Assess data on the latest state-of-the-art for the treatment of superficial femoral and tibial artery disease and describe potential implications for clinical care
- Summarize recent data on treatment advances for venous disease and explain their clinical implications
- Provide new information about the latest developments in hemodialysis access and vascular malformations and tumors

GENERAL INFORMATION

TARGET AUDIENCE

Vascular Surgeons, Interventional Radiologists, Interventional Cardiologists, Vascular Medicine Specialists and all others interested in the management of vascular disease.

ASSOCIATE FACULTY PODIUM PRESENTATIONS

In order to have more younger and less familiar vascular surgeons and vascular specialists play an active role as Associate Faculty at our meeting, we have initiated programs whereby they can present their scientific work at the podium. Vascular surgeons and vascular specialists participating in these programs will have submitted abstracts for a podium presentation, and these abstracts will be posted on our web site under the regions Asia, Latin America, Worldwide and International Society for Vascular Surgery (ISVS). Please visit our web site at www.veithsymposium.org for additional information and instructions on how to submit an abstract to the Associate Faculty Podium Presentations component of VEITHsymposium.

GENERAL SESSIONS

General Sessions will be held in the Grand Ballroom East, Grand Ballroom West, and in the Trianon Ballroom on the 3rd floor on Tuesday, Wednesday, Thursday, Friday and Saturday.

COMPONENT SESSIONS WILL BE HELD AS FOLLOWS:

AIMsymposium Multidisciplinary Acute Stroke Management

Thursday, November 19, 2015

Location: Murray Hill Suites East and West, 2nd floor

VEITHsymposium registrants are welcome to attend at no additional cost.

Hemodialysis Access

Saturday, November 21, 2015

Location: Grand Ballroom West, 3rd floor

Innovation and Investment Roundtable Luncheon

Monday, November 16, 2015

Location: Gramercy Suites East and West, 2nd floor

The VEITHsymposium Innovation and Investment (I&I) Roundtable, now in its second year, is a session dedicated to the presentation of novel medical products that have the potential to truly change patient care and the management of complex cardiovascular diseases. The presentations are by invitation only. Manufacturers and their topics are chosen by the VEITHsymposium Organizing Committee based upon knowledge of unique products that are at various stages of development. The roundtable session provides opportunities for manufacturers to showcase technology that, in many cases, will require further investment to complete development and clinical research. Similarly, the session provides an interactive setting for investors and investment firms to see novel technologies and probe the challenges and potential for each, with ample time for question and answer period that follows each presentation. Lastly, key cardiovascular thought leaders, physicians and scientists alike, are invited by the Organizing Committee to be in attendance and provide candid views on each innovation.

The VEITHsymposium Organizing Committee believes that the I&I Roundtable offers a unique opportunity to see the latest in novel, game-changing cardiovascular technology, all in one place and over the course of a half-day. This is an event that should not be missed by anyone with scientific or financial interests in emerging cardiovascular technology. (This is a non-CME activity.)

GENERAL INFORMATION

Vascular International Hands-On At VEITHsymposium

Thursday, November 19, 2015

Location: Americas Hall 1, 3rd Floor

Vascular International has been performing vascular surgical workshops, also known as 'Pontresina courses', for more than 20 years and has become the number one platform for practical hands-on training and education in open and endovascular techniques on lifelike simulators in Europe. This hands on course was made possible by Maquet, providing additional sponsorship along with open surgical simulators and a full line of vascular grafts and patches.

The Vascular International Open Vascular Surgery Course offers 2 sessions:

Morning Session: 8:00 a.m. – 12:30 p.m. (Course in Open Surgery for AAA)

Afternoon Session: 1:00 p.m. – 5:30 p.m. (Course for Open Carotid Surgery)

Attendance is limited to the first 100 VEITHsymposium registrants at no additional cost. Please contact registrar@veithsymposium.org, or (800) 987-9314, ext. 200 for information on how to register. (This is a non-CME activity.)

ACCREDITATION STATEMENT

The Cleveland Clinic Foundation Center for Continuing Education is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The Cleveland Clinic Foundation Center for Continuing Education designates this live activity for a maximum of 49.75 *AMA PRA Category 1 Credits*TM. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Participants claiming CME credit from this activity may submit the credit hours to the American Osteopathic Association for Category 2 credit.

ABS MAINTENANCE OF CERTIFICATION

VEITHsymposium provides Category 1 CME and self-assessment credits toward Part 2 of the ABS MOC Program.

CME CERTIFICATES AND COURSE EVALUATION FORMS

CME certificates will be available online at www.VEITHsymposium.org. An e-mail with a unique password and instructions on how to obtain the certificate and complete a brief, optional course evaluation will be sent to all registered attendees after the meeting. The e-mail will be sent to the e-mail address that was used to register the attendee. **Please note that CME Certificates must be claimed by February 29, 2016.**

FACULTY DISCLOSURE

The Cleveland Clinic Foundation Center for Continuing Education has implemented a policy to comply with the current Accreditation Council for Continuing Medical Education Standards for Commercial Support requiring resolution of all faculty conflicts of interest. Faculty declaring a relevant commercial interest will be identified in the activity syllabus.

ADA STATEMENT

The Cleveland Clinic Foundation Center for Continuing Education complies with the legal requirements of the Americans with Disability Act. If any participant of the VEITHsymposium requires special assistance, please send written request at least one month prior to the activity to admin@veithsymposium.org, or by fax to (845) 368-2324.

GENERAL INFORMATION

ONLINE ACCESS TO ABSTRACTS

Presentation slides will be used as abstracts and will be available on the program page of the VEITHsymposium web site at www.veithsymposium.org after the meeting. Abstracts will be available on the web site for one full year.

ONLINE CONFERENCE LIBRARY

The entire program with all the talks, all the slides, all the videos - fully synchronized - and all the panels, will be available in an Online Conference Library, which can be obtained at a nominal cost. For more information on how to obtain the VEITHsymposium Online Library, please visit www.veithondemand.com or call (800) 987-9314, ext. 300.

SOCIAL EVENTS

THE NEW YORK HILTON-MIDTOWN THEATER, TOUR, AND TRANSPORTATION DESK AT VEITHsymposium

HILTON THEATER, TOUR, AND TRANSPORTATION DESK SERVICES

Continental Guest Services' theater, tour, and transportation desk staff can assist you with many services including theater tickets, sightseeing tours, transportation to and from local airports, and more. Call or email marie@continentalguestservices.com or (212) 944-8910 ext. 535 for a complete listing of available tours or to pre-book.

AIRPORT TRANSPORTATION

Shuttle service and private car transfers are available between all area airports and the hotel. Shuttle service departs from the hotel once per hour and is the most economical way to travel to the airport; a private transfer can be arranged for any time and for any number of people.

BROADWAY | THEATER AND ENTERTAINMENT TICKETS

Continental Guest Services' staff can assist with tickets to hard to get theater, sports, and entertainment, even up until a few hours before performance time. For guaranteed availability it's best to book ahead, so call or email with the show you are interested in and they can make arrangements for you ahead of time.

SIGHTSEEING TOURS

Choose from popular double decker bus tours, Statue of Liberty, Empire State Building, harbor cruises, helicopter tours, Woodbury Commons Shopping and more. Prefer to explore museums? We can pre-arrange museum passes for MOMA, Metropolitan Museum of Art, or Museum of Natural History.

HOTEL AND TRAVEL

A block of rooms has been reserved at the conference rate of \$399 plus taxes per night. This rate is available until the block is filled or until October 11, 2015. *Please request the VEITH rate when reserving your accommodations.*

New York Hilton-Midtown (Symposium Site)

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TUESDAY, NOVEMBER 17, 2015

6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor
6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor
6:00 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT TUESDAY PROGRAMS

PROGRAM A: SESSIONS 1-8

Progress In Valve, Aortic And Carotid Diseases And Their Treatment

6:45 A.M. – 5:50 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM B: SESSIONS 9-16

New Developments In Treatment Of AAAs, EVAR, Aortic Branch Lesions (Including Iliac Arteries), Laparoscopic Techniques, Outpatient Vascular Centers And Open Surgery

6:40 A.M. – 6:03 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM C: SESSIONS 17-18 (PART 1)

New Developments In Management Options For Pulmonary Embolism

7:00 A.M. – 12:00 P.M.

Trianon Ballroom, 3rd Floor

Course Leader: **Michael R. Jaff, DO**

PROGRAM C: SESSIONS 19-22 (PART 2)

Management Of Acute And Chronic Large Vein Occlusion

1:00 P.M. – 5:00 P.M.

Trianon Ballroom, 3rd Floor

Course Leader: **Kenneth Ouriel, MD, MBA**

PROGRAM A (SESSIONS 1-8)

PROGRESS IN VALVE, AORTIC AND CAROTID DISEASES AND THEIR TREATMENT

Grand Ballroom East, 3rd Floor

6:45 – 6:49 Opening Remarks
Frank J. Veith, MD

SESSION 1 (Grand Ballroom East, 3rd Floor)

PROGRESS IN TRANSCATHETER HEART VALVES AND NEW APPROACHES TO ASCENDING AORTIC DISEASE

Moderators: Lars G. Svensson, MD, PhD
Nicholas J.W. Cheshire, MD

6:50 – 6:55 Valve-In-Valve Transcatheter Aortic Valve Implantation (TAVI) And Mitral Valve-In-Valve Endovascular Repair: How Well Do They Work
Dietmar H. Koschyk, MD

6:56 – 7:01 Current Status Of Transcatheter Mitral Valve Repair: New Technology And Techniques
Ted Feldman, MD

7:02 – 7:07 Current Status And Future Prospects For TAVI: A Cardiac Surgeon's Perspective
Allan Stewart, MD

7:08 – 7:13 Current Status And Future Prospects For TAVI: An Interventional Cardiologist's Perspective
Ted Feldman, MD

ASCENDING AORTIC ENDOGRAFTING

- 7:14 – 7:19** Ascending Aortic Endografting: Where Are We And What Are The Issues
Ralf R. Kolvenbach, MD
- 7:20 – 7:25** Endograft Repair Of Ascending Aortic Lesions And Type A Dissections With A Physician Sponsored IDE (PSIDE) For A Modified Valiant Device: Lessons Learned And What Are The Prospects For An Endograft-Valve Combined Device
Carlos E. Donayre, MD
Rodney A. White, MD
- 7:26 – 7:31** Ascending Aortic Endografting: Lessons Learned, Present Status And Future Potential: From A PSIDE Experience
Ali Khoynezhad, MD, PhD
- 7:32 – 7:37** Access Routes And Off-The-Shelf Devices For Ascending Aortic Endovascular Repair
Grayson H. Wheatley, MD
- 7:38 – 7:43** Panel Discussion

SESSION 2 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN TREATMENT OF AORTIC ARCH LESIONS AND DISSECTIONS

Moderators: *Hazim J. Safi, MD*

Timothy A.M. Chuter, DM

- 7:44 – 7:49** Aortic Arch Hybrid Repair With Supra-Aortic Trunks Rerouting: Current Indications, Long-Term Results And Complication Management In Patients With Degenerative Aneurysms And Dissections
Roberto Chiesa, MD
Germano Melissano, MD
- 7:50 – 7:55** Current Management Of Aortic Arch Lesions With Hybrid Procedures: What Are Key Details And Precautions
Eric E. Roselli, MD
- 7:56 – 8:01** Redo Procedures For Aortic Arch Lesions: When Open; When Endo
Michael J. Jacobs, MD
- 8:02 – 8:07** Update On Endovascular Repair Of Arch Aneurysms Using The Internally Branched Endograft (Cook): Advantages, Limitations And 3-Center Midterm Results
Stephan Haulon, MD
- 8:08 – 8:13** What Are The Best Endovascular Techniques For Managing Arch Lesions – Including Branched Endografts And In Situ Fenestration
Timothy A. Resch, MD, PhD
Björn Sonesson, MD, PhD
Martin Malina, MD, PhD
- 8:14 – 8:19** Status Of Sandwich (Parallel) Grafts For Total Endovascular Arch Replacement
Armando C. Lobato, MD, PhD
- 8:20 – 8:25** Parallel Grafts (Chimney And Periscope Grafts) For Arch Lesions: Advantages And Limitations
Ralf R. Kolvenbach, MD
- 8:26 – 8:31** What Is The Future For Endovascular Repair Of Aortic Arch Lesions: Advantages And Limitations Of Two Different Techniques Of Endograft Repair
Tilo Kölbel, MD, PhD

- 8:32 – 8:37** Update On Advantages Of Custom-Made Precurved Fenestrated Endograft (NAGUTA) For Arch Lesions: Durable Long-Term Results Are Better Than With Other Endo Techniques
Yoshihiko Yokoi, MD
- 8:38 – 8:43** Value And 3-Year Results With Branched Endograft From Bolton For Treating Complex Arch Lesions
Toru Kuratani, MD, PhD
- 8:44 – 8:49** Branched Endograft vs. Chimney Techniques For Treating Complex Arch Lesions: Which Is Best: When And Why
Qingsheng Lu, MD
Zaiping Jing, MD
- 8:50 – 8:58** Panel Discussion

SESSION 3 (Grand Ballroom East, 3rd Floor)

TYPE B AORTIC DISSECTIONS (TBADs) AND THEIR TREATMENT: THORACIC AORTIC TOPICS

Moderators: *Christoph A. Nienaber, MD, PhD*
Joseph S. Coselli, MD

- 8:58 – 9:03** What Do We Know About Intensive Medical Treatment For Acute TBADs: How Well Does It Work
Frank A. Lederle, MD
- 9:04 – 9:09** Natural History Of TBAD Patients Treated Medically: Predictors Of Deterioration And Which TBAD Patients Benefit Most From TEVAR (Based On 5-Year Results)
Mark Conrad, MD, MMSc
- 9:10 – 9:15** 4D Magnetic Resonance Imaging (MRI) In TBADs: Will It Enable Prediction Of Behavior (Aneurysm Formation, Etc.), Individualization Of Treatment And Assessment Of Its Effectiveness
Rachel E. Clough, MD, PhD
- 9:16 – 9:21** With Uncomplicated Acute TBAD Patients, What Factors Point To Deterioration On Medical Treatment And The Need For TEVAR: When Should TEVAR Be Performed: Based On New Data From The IRAD Registry
Santi Trimarchi, MD, PhD
Christoph A. Nienaber, MD, PhD
- 9:22 – 9:27** Optimal Management Of Malperfusion Syndrome From TBADs: What To Do When TEVAR Is Not Enough
Weiguo Fu, MD
- 9:28 – 9:33** Early Predictors Of Late Complications Including Aneurysm Formation In Patients With Acute TBADs
Jean-Marc Alsac, MD, PhD
- 9:34 – 9:39** Management Of Complications Of TBADs Before And After TEVAR: Intestinal, Spinal Cord And/Or Limb Ischemia
Chang Shu, MD
- 9:40 – 9:45** False Lumen Occlusion Techniques With TBADs: When Are They Needed, How Are They Done, What Are The Complications: What Is The World Experience
Tilo Kölbel, MD, PhD
- 9:46 – 9:51** Strategies And Devices For Eliminating False Lumen Flows With TBADs And When Are They Needed
Eric E. Roselli, MD
- 9:52 – 9:58** Panel Discussion
- 9:58 – 10:10** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 4 (Grand Ballroom East, 3rd Floor)

MORE NEW DEVELOPMENTS IN TEVAR, THE AORTA AND MANAGING TBAD PATIENTS

Moderators: *Richard P. Cambria, MD*
Roberto Chiesa, MD

10:10 – 10:15 Status Of Brain Embolic Protection Devices For TEVAR And TAVI: How Effective Are The Embrella, Sentinel And Triguard Neuroprotection Devices
Jeffrey P. Carpenter, MD

10:16 – 10:21 Effect Of TEVAR Timing On Freedom From Aortic Events And The Need For Reinterventions In TBADs: TEVAR Before 6 Months Is Better
Toru Kuratani, MD, PhD

10:22 – 10:27 A New Classification System For Aortic Dissections: DISSECT - Duration, Intimal Tear, Size Of Aorta, Segmental Extent, Complications, Thrombosis In False Lumen
Michael D. Dake, MD
Christoph A. Nienaber, MD, PhD

10:28 – 10:33 Correlation Between False Lumen Remodeling And Patent Intercostal Arteries
Wei Guo, MD

10:34 – 10:39 How The Petticoat Technique (Proximal Covered Stent And Distal Bare Stent) Is Better Than Standard TEVAR For TBAD Patients: Update On The STABLE I And II Trials
Joseph V. Lombardi, MD

10:40 – 10:45 Long-Term Results Of Medical Treatment And TEVAR For TBAD: False Lumen Thrombosis Is Not The End Of The Story: Thus The Need For Long-Term Surveillance And Late Reinterventions
Götz M. Richter, MD, PhD

10:46 – 10:53 Panel Discussion

Moderators: *Michael D. Dake, MD*
Frank J. Veith, MD

10:53 – 10:58 What Defines Chronic TBAD: When And How Should It Be Treated Conservatively; By Endo Repair; By Open Repair
Joseph E. Bavaria, MD

10:59 – 11:04 Fenestrated And Branched EVAR (F/B EVAR) Is The Best Treatment For Thoracoabdominal Aneurysms (TAAAs) After TBADs – Especially Chronic TBADs: Advantages And Limitations
Eric L.G. Verhoeven, MD, PhD

11:05 – 11:10 Current Optimal Treatment Of Patients With Chronic TBADs And Associated Complications And Aneurysms From Them
Gustavo S. Oderich, MD

11:11 – 11:16 Comparison Of Endovascular And Open Repair Of Degenerative And Dissecting Thoracic Aneurysmal Lesions In Patients Who Are Candidates For Both Types Of Repairs
Yamume Tshomba, MD
Germano Melissano, MD
Roberto Chiesa, MD

11:17 – 11:22 Secondary Interventions After TEVAR: Indications, Techniques And Results
Mark K. Eskandari, MD

- 11:23 – 11:28** Size (Diameter) And Normal Growth Rates Of The Aorta From Top To Bottom: At What Thoracic Aortic Size Is There A Real Risk Of Rupture
John A. Elefteriades, MD
- 11:29 – 11:34** The Mechanics Of TEVAR Device Conformability To Aortic And Arch Anatomy: How Do The Various Devices Compare
Ludovic Canaud, MD, PhD
- 11:35 – 11:40** True Lumen Volume/False Lumen Volume Ratio (<.8) On CT Can Predict The Need For TEVAR In Uncomplicated Acute TBAD
Jean M. Panneton, MD
- 11:41 – 11:46** Long-Term Results After TEVAR Are Not So Great: Some Notes Of Caution
Dittmar Boeckler, MD
- 11:47 – 11:52** Antegrade Delivery Of A Stent-Graft Into The Descending Aorta During Open Repair Of A Type A Aortic Dissection With Arch Involvement: A “Frozen Elephant Trunk”: How To Do It
Joseph S. Coselli, MD
Ourania Preventza, MD
- 11:52 – 12:00** Panel Discussion
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 5 (Grand Ballroom East, 3rd Floor)

NEW KEY DEVELOPMENTS IN THE MANAGEMENT OF PATIENTS WITH CAROTID DISEASE

Moderators: *Frank J. Veith, MD*

Wesley S. Moore, MD

- 1:00 – 1:05** Update On The ACT I Trial Comparing CAS And CEA In Patients With High-Grade Asymptomatic Carotid Stenosis (ACS)
Jon S. Matsumura, MD
- 1:06 – 1:11** **DEBATE:** CAS Is Equivalent To CEA In Many Circumstances
William A. Gray, MD
- 1:12 – 1:17** **DEBATE:** Not So: Lessons Learned From US Datasets On Outcomes After CEA And CAS Show CAS Results Are Substantially Worse Than In CREST: The Brighter The Light The Darker The Shadow
Ross Naylor, MD
- TWO-WAY DEBATE**
- 1:18 – 1:23** **DEBATE:** Late Results Of ICSS Trial Show CAS And CEA To Be Equivalent In Patients With Symptomatic Carotid Stenosis
Jonathan D. Beard, ChM, MEd
Martin M. Brown, MD
- 1:24 – 1:29** **DEBATE:** Late Results Of ICSS Do Not Show Equivalence Of CAS And CEA: CEA Still Wins For Symptomatic Carotid Stenosis
Anne L. Abbott, MD, PhD
- 1:30 – 1:35** Stroke And Death Rates (Early And Late) After CAS Are Higher Than The Randomized Controlled Trials (RCTs) Would Indicate: Therefore, We Should Be Less Aggressive With Our Use Of CAS – Especially In The Elderly And Asymptomatic Patients
J. David Spence, MD

- 1:36 – 1:41** Asymptomatic Carotid Stenosis (ACS) Up To 80% Is Benign: What About Those Stenoses Over 85% - Especially When Associated With A Contralateral Occlusion: Which ACS Patients Should Be Treated Invasively And How
Russell H. Samson, MD, RVT
- 1:42 – 1:47** Long-Term Results Of The SAMMPRIS (Intracranial Stenting) Trial In Patients With Intracranial Stenoses: What Does It Tell Us About Best Medical Treatment (BMRx); Compliance And Long-Term Benefits: The Recent VISSIT Trial Confirms The Negative Effects Of Intracranial Stenting
Colin P. Derdeyn, MD
- 1:48 – 1:54** Panel Discussion
- Moderators:** *Giorgio M. Biasi, MD*
Thomas S. Riles, MD
- 1:55 – 2:00** Why Transcranial Doppler (TCD) Is Essential Before, During And After CAS, CEA And TAVI
Zsolt Garami, MD
- 2:01 – 2:06** Status Of Endovascular Treatment Of Total Carotid Occlusions: Advantages, Technique, Complications And How To Avoid Them
Paul H.L. Kao, MD
- 2:07 – 2:12** Diaphragm Of The Internal Carotid Artery: An Underdiagnosed Cause Of Stroke
Emmanuel M. Houdart, MD
- 2:13 – 2:18** **DEBATE:** Carotid Plaque Morphology Is Only Important In Symptomatic Patients
Henrik Sillesen, MD, DMSc
- 2:19 – 2:24** **DEBATE:** Not So: Carotid Plaque Morphology Is Helpful (With Other Criteria) In Predicting Stroke Risk In ACS Patients: What Percent Of ACS Patients Are High Risk And Justifiably Need CEA Or CAS
Andrew N. Nicolaidis, MS
Stavros Kakkos, MD, PhD
- 2:25 – 2:30** Risk Stratification Of Patients With Carotid Stenosis: How To Quantify: An Aging Brain Is More Important Than Plaque Characteristics – And Even Symptom Status
Thomas G. Brott, MD
- 2:31 – 2:36** Importance Of Preoperative And Perioperative Statin Dosage In Patients With Carotid Stenosis: Can They Change And Shrink Plaque: How Often
Andrew N. Nicolaidis, MS
Stavros Kakkos, MD, PhD
- 2:37 – 2:42** What Is New In The Effects Of Carotid Disease And Carotid Treatments (CEA And CAS) On Cognitive Function: Are There Differences Between CEA And CAS
Wei Zhou, MD
- 2:43 – 2:48** Tips And Tricks For Obtaining Distal Exposure Of The Internal Carotid Artery – To The Skull Base: Your ENT Surgeon Colleagues Can Help
Ross Naylor, MD
- 2:49 – 2:55** Panel Discussion
- 2:55 – 3:05** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 6 (Grand Ballroom East, 3rd Floor)

EXCITING PROGRESS IN THE TREATMENT OF ACUTE STROKES

Moderators: *Sriram S. Iyer, MD*
Horst Sievert, MD

- 3:05 – 3:10** Urgent CEA And CAS Are Safe And Without A Bleeding Risk After A Small-To-Moderate Sized Stroke Is Treated By Thrombolysis
Hernan Bazan, MD
- 3:11 – 3:16** Carotid Interventions (CEA/CAS) In Acute Stroke Patients: Which Procedure On Which Patient And When
R. Clement Darling III, MD
- 3:17 – 3:22** Emergency CEA For Stroke In Evolution: When Is It Indicated And How Should It Be Done
Hans-Henning Eckstein, MD, PhD
- 3:23 – 3:28** Recent Progress In Endovascular Intracranial Treatment Of Acute Ischemic Strokes: Dramatic Positive Results Of ESCAPE, SWIFT-PRIME, EXTEND – IA, REVASCAT And MR CLEAN Trials: Why Are These Trials Positive And When Should Patients Be Treated And When Not
L. Nelson Hopkins, MD
- 3:29 – 3:34** Results And Techniques Of The ADAPT-FAST Trial Of A Newer Better Thrombus Removal Method For Treating Acute Strokes
Alejandro M. Spiotta, MD
- 3:35 – 3:40** New Developments In The Treatment Of Acute Strokes: It Is A New Treatment Horizon: Tips, Tricks, And Precautions And The Importance Of Balloon Tipped Guide Catheters To Decrease Prograde Flow During Clot Removal
Klaus D. Mathias, MD
- 3:41 – 3:46** Critical Elements In Stroke Interventions And Who Should Be In The Game
Colin P. Derdeyn, MD
- 3:47 – 3:52** Comments On Acute Stroke Treatment From A Pioneer: Why Others Than Neurointerventionists Must Be Involved And How Can They Be Trained
Horst Sievert, MD
- 3:53 – 3:59** Panel Discussion

SESSION 7 (Grand Ballroom East, 3rd Floor)

MORE ABOUT TBADs, THORACIC ANEURYSMS AND TEVAR

Moderators: *Matt M. Thompson, MD*
Ali Khojnejhad, MD, PhD

- 4:00 – 4:05** **DEBATE:** Stent-Grafts And Endovascular Repair Are Usually A Poor Option For Treating Aneurysm Patients With Connective Tissue Disorders
Michael J. Jacobs, MD
- 4:06 – 4:11** **DEBATE:** Stent-Grafts And Endovascular Repair Can Be A Reasonable Option For Treating Aneurysm Patients With Connective Tissue Disorders And Ehlers-Danlos Syndrome
Vicente Rimbau, MD, PhD
- 4:12 – 4:17** How To Fix Endoleaks From 2° Intimal Tears At The Celiac Axis And SMA After Remote TEVAR For TBADs
Ronald M. Fairman, MD

- 4:18 – 4:23** F/B EVAR To Treat Thoracoabdominal Dissections And Post Dissection TAAAs: Indications, Contraindications And Pitfalls
Stephan Haulon, MD
- 4:24 – 4:29** Saccular vs. Fusiform Configurations In Thoracic Aortic Aneurysms (TAAs): Does It Matter
Frank J. Criado, MD
- 4:30 – 4:35** **DEBATE:** For Arch And Thoracic Aortic Lesions That Are Embolizing, When Anticoagulation, When Bare Stent, When Endograft
Ramesh K. Tripathi, MD
- 4:36 – 4:41** **DEBATE:** For Aortic Lesions That Are Embolizing, Endograft Treatment Is Generally The Best And Most Durable Treatment
Michel Makaroun, MD
- 4:42 – 4:48** Panel Discussion

SESSION 8 (Grand Ballroom East, 3rd Floor)

HOW SHOULD MOST PATIENTS WITH UNCOMPLICATED ACUTE TBAD BE TREATED: CONTROVERSY EXISTS AND WILL CONTINUE: THE PROS AND CONS OF EARLY TEVAR

Moderators: *Lars G. Svensson, MD, PhD*
Santi Trimarchi, MD, PhD

FOR EARLY TEVAR

- 4:48 – 4:53** Most Patients With Acute/Subacute Uncomplicated TBADs Should Undergo TEVAR: The INSTEAD-XL RCT Shows Better Long-Term Survival With TEVAR Than With Medical Treatment
Christoph A. Nienaber, MD, PhD
- 4:54 – 4:59** Most Patients With Acute Uncomplicated TBAD Should Receive TEVAR Treatment: I Have Said It Before – Now I Know It Is True And No More Trials Are Needed
Rodney A. White, MD
- 5:00 – 5:05** Most Patients With Uncomplicated Acute TBAD Should Be Treated By TEVAR: Some Immediately And Some After A 6-12-Week Delay: How Can They Be Selected For Each Based On Data From The MOTHER Registry
Matt M. Thompson, MD
- 5:06 – 5:11** With Uncomplicated Acute TBAD There Is A High Risk Group That Should Be Treated By TEVAR: How Can They Be Selected And When Should They Be Treated
Michael D. Dake, MD

FOR MEDICAL TREATMENT AND CAREFUL OBSERVATION

- 5:12 – 5:17** Medical Treatment Is Adequate For Most Patients With Uncomplicated TBAD Based On Current Long-Term Results
John A. Elefteriades, MD
- 5:18 – 5:23** The ADSORB Trial Tells Us What We Need To Know About Treating Uncomplicated TBADs: We Don't Need Further Trials
Jan S. Brunkwall, MD, PhD

- 5:24 – 5:29** We Still Need More Evidence Before We Treat Most Uncomplicated Acute/Subacute TBAD Patients With TEVAR
Michel Makaroun, MD
- 5:30 – 5:35** Why Wider Use Of TEVAR For Uncomplicated TBADs Right Now May Not Be So Good
Frank J. Criado, MD
- 5:36 – 5:41** The INTACT-AD RCT Comparing TEVAR With Medical Treatment Will Give The Final Answer About The Best Treatment For Uncomplicated Acute/ Subacute TBAD Patients: We Need This International Trial And How Will It Be Structured
Firas F. Mussa, MD
Christoph A. Nienaber, MD, PhD
- 5:42 – 5:50** Panel Discussion
End of Program A

PROGRAM B (SESSIONS 9-16)
NEW DEVELOPMENTS IN THE TREATMENT OF AAAs, EVAR, AORTIC BRANCH LESIONS (INCLUDING ILIAC ARTERIES), LAPAROSCOPIC TECHNIQUES, OUTPATIENT VASCULAR CENTERS AND OPEN SURGERY
Grand Ballroom West, 3rd Floor

- 6:40 – 6:44** Opening Remarks
Frank J. Veith, MD

SESSION 9 (Grand Ballroom West, 3rd Floor)
NEW DEVELOPMENTS IN AAAs AND EVAR
Moderators: *Enrico Ascher, MD*
Ali F. AbuRahma, MD

- 6:45 – 6:50** Can Anything Besides Smoking Cessation Slow AAA Enlargement
Frank A. Lederle, MD
- 6:51 – 6:56** Redefining Adverse Neck Morphology With Newer EVAR Devices Which Perform Better In Short, Angulated And Large Diameter Necks And Those With A Thrombus Burden: What Are The Limits: From The ENGAGE Registry
Hence J.M. Verhagen, MD, PhD
- 6:57 – 7:02** Parallel Grafts To Revascularize Critical IMAs And Ectopic Renal Arteries When They Must Be Preserved: How To Do It
Konstantinos P. Donas, MD
- 7:03 – 7:08** How Will The Decreased Frequency And Increased Complexity Of Open AAA Repair Affect Vascular Surgery Training: What Can Be Done About It
Jeffrey E. Indes, MD
- 7:09 – 7:14** World's Largest AAA Repair: All Large AAAs Do Not Rupture
Dainis K. Krievins, MD
Christopher K. Zarins, MD
- 7:15 – 7:20** EVAR For All AAA Patients: We Are Going Too Far: Some Large Aneurysms Should Not Be Fixed: Some Should Be Fixed By Open Repair
Frank J. Criado, MD
- 7:21 – 7:26** Outcomes Of EVAR For Inflammatory AAAs Are Favorable
Furuzan Numan, MD

7:27 – 7:32 Toward 15-Year Results Of The EVAR Trials And Individual Patient Data (IPD) Meta-Analysis With The DREAM, ACE And OVER Trials
Roger M. Greenhalgh, MD

7:33 – 7:38 Long-Term Results Of EVAR Are Better Than We Thought – Particularly With The Newer EVAR Devices
Timur P. Sarac, MD

7:39 – 7:46 Panel Discussion

SESSION 10 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC BRANCH LESIONS – ESPECIALLY OF THE AORTO-ILIAC SEGMENT - AND TRAUMATIC AORTIC INJURY

Moderators: *Kenneth Ouriel, MD, MBA*
Barry T. Katzen, MD

7:46 – 7:51 Iliac Artery Endofibrosis In Hardcore Cyclists: Is Endovascular Treatment Ever Effective If They Won't Give Up Their Sport Or Is Surgery The Only Effective Treatment: What Should The Operative Treatment Be
Kenneth J. Cherry, MD

7:52 – 7:57 Retrograde Open Superior Mesenteric Artery Stenting For Acute Mesenteric Ischemia: Indications, Techniques And Results
Richard J. Powell, MD

7:58 – 8:03 Parallel Grafts For Hypogastric Artery Revascularization During EVAR: Techniques, Advantages And Disadvantages
Ronald L. Dalman, MD

8:04 – 8:09 What Factors Predict When Treatment Of Blunt Traumatic Aortic Injuries Can Safely Be Delayed
Robert S. Crawford, MD
Donald G. Harris, MD

8:10 – 8:14 Panel Discussion

Moderators: *Barry T. Katzen, MD*
Kenneth Ouriel, MD, MBA

TREATMENT OF AORTO-ILIAC OCCLUSIVE DISEASE

8:14 – 8:19 In Claudication Due To Aorto-Iliac Disease, Supervised Exercise Is As Effective As Stenting When Added To BMRx: What Can Make Exercise Work And Why It Is Good Treatment: The CLEVER RCT Results
Alan T. Hirsch, MD

8:20 – 8:25 With Juxtarenal Aorto-Iliac Occlusions Open Surgical Treatment Is Best And Safest: What Precautions May Be Needed
Giustino Marcucci, MD

8:26 – 8:31 Most Aorto-Iliac Occlusions Should Be Treated Endovascularly With Stents: But There Are Limits That Require Open Surgery
George H. Meier III, MD

8:32 – 8:37 All Aorto-Iliac Occlusions Can Be Treated Endovascularly By Stents – If Certain Precautions Are Taken To Prevent Renal And Visceral Embolization
Sonia Ronchey, MD, PhD
Nicola Mangialardi, MD

- 8:38 – 8:43** Complex Juxtarenal Aorto-Iliac Occlusions Can Be Treated Safely And Effectively With Covered Stents (The CERAB Technique) – However Renal Chimney Endografts May Be Required: Technique For Doing Them Without Risking Renal Or Visceral Embolization
Peter C.J. Goverde, MD
Michel M.P. Reijnen, MD, PhD
- 8:44 – 8:49** The CERAB Technique Using Covered Stents Is Better Treatment For Complex Aorto-Iliac Occlusions Than Bare Stents: Based On Flow Characteristics In An In Vitro Model
Michel M.P. Reijnen, MD, PhD
Peter C.J. Goverde, MD
- 8:50 – 8:55** Value Of Fusion Imaging To Facilitate Treatment Of Complex Aorto-Iliac Occlusions
Klaus Overbeck, MD, MPhil
- 8:56 – 9:01** Treatment Of TASC C And D Aorto-Iliac Occlusions With A Bifurcated Unibody Endograft (AFX – Endologix) Rather Than Kissing Stents Or Stent-Grafts: Technique And Early Results
Thomas S. Maldonado, MD
Michel M.P. Reijnen, MD, PhD
- 9:02 – 9:09** Panel Discussion

SESSION 11 (Grand Ballroom West, 3rd Floor)

VASCULAR LAPAROSCOPY, SOME ROBOTICS AND OPEN SURGERY SKILLS

Moderators: *Nicholas J.W. Cheshire, MD*
Alan B. Lumsden, MD

- 9:09 – 9:14** The Da Vinci Robot Facilitates Laparoscopic Aorto-Femoral Bypass For Occlusive Disease: Will It Displace Endovascular Techniques
Jean-Marc Alsac, MD, PhD
Salma El Batti, MD
- 9:15 – 9:20** Status Of Retroperitoneoscopic Techniques In Vascular Surgery: They Have Value But Will They Catch On
Bernard J. Segers, MD
- 9:21 – 9:26** A Propensity Score Matched Comparison Of Laparoscopic And Open Repair Of AAAs In Poor Candidates For EVAR: Is Laparoscopic Repair Better And Worth Learning
Jean-Baptiste Ricco, MD, PhD
- 9:27 – 9:32** **DEBATE:** Laparoscopy And Articulated Robots For Aortic Surgery Is A Failed Experiment
Willem Wisselink, MD
- 9:33 – 9:38** **DEBATE:** Laparoscopic Robotic Aortic Surgery Is Not Dead But Has A Bright Future: What Will It Be And What Is The Evidence
Fabien Thaveau, MD, PhD
- 9:39 – 9:44** Open AAA Repair Is Becoming A Lost Art: Why And What Can Be Done About It: Tips And Tricks For Learning It And For Doing It Well
Edward Y. Woo, MD
- 9:45 – 9:51** Panel Discussion
- 9:51 – 10:05** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 12 (Grand Ballroom West, 3rd Floor)

UPDATE ON OPTIMAL TREATMENT METHODS FOR JUXTARENAL AND PARARENAL AAAs: IT IS STILL CONTROVERSIAL AND OTHER NEW DEVELOPMENTS IN TAAA TREATMENT, TEVAR AND TBAD

Moderators: *Giovanni Torsello, MD*
Matthew J. Eagleton, MD

ADVOCACY FOR SEVERAL METHODS OF JUXTA AND PARARENAL AAA REPAIR

- 10:05 – 10:10** Open Repair Is The Procedure Of Choice For Juxta- And Pararenal AAAs: By What Approach
Michael S. Conte, MD
- 10:11 – 10:16** Fenestrated And Branched Grafts With EVAR (F/B EVAR) Is The Best Approach For Juxta- And Pararenal AAAs
Timothy A.M. Chuter, DM
- 10:17 – 10:22** Endografts With Parallel Grafts (Chimneys Or Periscopes) To The Renovisceral Arteries Are The Best Treatment For Juxta- Or Pararenal AAAs: Tips And Tricks For Doing Them Right
Zoran Rancic, MD, PhD
Mario L. Lachat, MD
- 10:23 – 10:28** For Juxta- And Pararenal AAAs Sometimes Chimney EVAR Is Best And When; Sometimes Fenestrated EVAR (F/EVAR With Z-Fen Endograft) Is Best And When: The Two Techniques Are Complementary
Jason T. Lee, MD
- 10:29 – 10:34** Use Of Parallel Grafts With EVAR To Treat Juxta- And Pararenal AAAs: A Simple Safe Technique
David J. Minion, MD
- 10:35 – 10:40** For Juxta- And Pararenal AAAs And Failed Standard EVARs Chimney EVAR Is Effective Midterm: Technical Tips And Tricks For Performing With Endurant Aortic Endografts: From The PROTAGORAS Registry
Konstantinos P. Donas, MD
Giovanni Torsello, MD
- 10:41 – 10:46** Late Results Of Parallel Grafts (Chimneys) For Juxta- And Pararenal AAAs Can Be Good If Done Right: Self-Expanding vs. Balloon-Expanding Branch Stents: Which Is Best
Ralf R. Kolvenbach, MD

OTHER RELATED TOPICS

- 10:47 – 10:52** New Concepts And Improvements In Fenestrated Aortic Endografts And Improvements In Imaging For F/BEVAR With Fusion And IVUS
Mark A. Farber, MD
- 10:53 – 10:58** Perils Of The Widespread Use Of FEVAR: All Results Are Not Good
Christopher J. Abularrage, MD
- 10:59 – 11:04** Tips For Decreasing The Learning Curve For Performing F/BEVAR
Andres Schanzer, MD
- 11:05 – 11:10** Value Of Ultrasound (Duplex) In Surveillance Of Renal Artery Branches After B/FEVAR For Juxta- And Pararenal AAAs
Martin R. Back, MD

11:11 – 11:19 Panel Discussion

*Moderators: Mark A. Farber, MD
James F. McKinsey, MD*

TAAA TREATMENT, TEVAR AND TBAD RELATED TOPICS

11:20 – 11:25 Novel Simplified Endograft Device With Off-The-Shelf Potential For Treatment Of TAAAs: The Gore TAMBE Device: How It Works And Early Clinical Results

Pierre Galvagni Silveira, MD, PhD

11:26 – 11:31 Avoiding Pitfalls In Sizing The Diameter Of Endografts For TEVAR: The Timing Of Gated CT Scans Matters

Juan C. Parodi, MD

11:32 – 11:37 Goals Of Treatment For Complicated And Uncomplicated TBAD: Value Of IVUS And Other Tips And Tricks For Getting Good Outcomes: From A Large Single Center Experience

Ali Azizzadeh, MD

Hazim J. Safi, MD

11:38 – 11:43 Value Of Chimney Grafts In Aortic Arch Repairs For Dissections And For Aneurysms: Pros And Cons

Jan S. Brunkwall, MD, PhD

11:44 – 11:49 Open And Endovascular Treatment Of Lusorian Artery (Ectopic Right SCA) And Associated Aneurysms (Kommerell's Diverticulum)

Michael J. Jacobs, MD

11:50 – 12:00 Panel Discussion

12:00 – 1:00 Lunch Break – 2nd Floor Promenade

Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 13 (Grand Ballroom West, 3rd Floor)

OUTPATIENT VASCULAR AND BUSINESS ISSUES

Moderators: Richard J. Powell, MD

Enrico Ascher, MD

1:00 – 1:05 Midterm Results Of Endovascular Treatment Of Common Femoral Artery Occlusive Disease Performed In An Outpatient Setting: It Works And Why

Sam S. Ahn, MD, MBA

1:06 – 1:11 Advantages And Limitations Of Same Day Discharge For Patients Undergoing EVAR: When Is It Safely Possible And When Not

Maciej L. Dryjski, MD, PhD

Linda Harris, MD

1:12 – 1:17 Office Based Lower Extremity Endovascular Treatment Is Safe, Effective And Cost-Saving: How To Prevent Operator Conflict Of Interest And Patient Abuse: The NY Times Is Not Always Right

Miguel F. Montero-Baker, MD

1:18 – 1:23 4-French Infringuinal Interventions In An Outpatient Setting Are Safer And Effective: What Equipment Is Needed

Jos C. van den Berg, MD, PhD

1:24 – 1:29 With Lower Extremity Revascularization Procedures Increased Cost Does Not Improve Outcomes: What Risk Factors Increase Costs And How Should This Influence Treatment

Richard J. Powell, MD

- 1:30 – 1:35** Outpatient Vascular (Angio) Centers: Are They Leading To Unethical Vascular Practices And Harming Patients: What Can Be Done About It
Stephen M. Bauer, MD
- 1:36 – 1:41** Importance Of An Office Based Practice To SVS Members And Vascular Surgeons: How Can The Conflict Of Interest (COI) Issue Be Dealt With Fairly
Kim J. Hodgson, MD
- 1:42 – 1:47** Assuring Quality Care In An Office Based Setting: Tips And Tricks For Opening An Outpatient Vascular Center And Doing It Right To Avoid Unmonitored And Unnecessary Procedures – As Described In The NY Times
Krishna Jain, MD
- 1:48 – 1:53** Centers For Amputation Prevention Have Clinical And Financial Advantages And Fill A Need: How To Set One Up And What Is Needed
Richard F. Neville, MD
- 1:54 – 2:00** Panel Discussion

SESSION 14 (Grand Ballroom West, 3rd Floor)

NEW TECHNIQUES, CONCEPTS AND UPDATES

Moderators: *Kim J. Hodgson, MD*

Daniel G. Clair, MD

- 2:00 – 2:05** Can Spiral Intermittent Limb Compression Be An Effective Treatment For CLI And Heart Failure
Magdiel Trinidad Vazquez, MD
- 2:06 – 2:11** Role Of Increased Shear Stress In Leading To Thrombosis: Mechanism And Significance For Vascular Devices And Reconstructions
David H. Deaton, MD
- 2:12 – 2:17** Telemedicine For Vascular Surgery: Is It Feasible: What Is Its Status And What Are Its Limitations And Risks
Clifford M. Sales, MD, MBA
Jonathan Levison, MD
- 2:18 – 2:23** Impact Of Delay In Treatment On Outcomes For CLI: For AAAs
Katariina M. Noronen, MD
- 2:24 – 2:29** Pneumatic Compression And Other Tricks For Brachial Access Hemostasis After Large Sheath Insertion
Rajiv Parakh, MBBS, MS
- 2:30 – 2:35** Transradial Access For Renal, Visceral And Lower Extremity Interventions: Equipment Needed, Tips And Tricks
Robert A. Lookstein, MD
- 2:36 – 2:41** Horizon And Nexus Endografts: A New Concept For Branch Endografting In The Thoracic And Abdominal Aorta
Mario L. Lachat, MD
- 2:42 – 2:47** OCT (Optical Coherence Tomography) To Improve Crossing Of CTOs And Treatment By OCT Directed Atherectomy: The Avinger Pantheris Device And Its Results And How They Correlate With Plaque Histology
Patrick E. Muck, MD
John B. Simpson, MD, PhD
- 2:48 – 2:53** Status Of Left Atrial Appendage Occlusive Devices To Prevent Strokes: Who Should Get Them
Ali Khojnejhad, MD, PhD

- 2:54 – 2:59** Arteries And Grafts On Fire: Value And Limitations Of 18F-FDG PET CT In Diagnosing Arteritis And Graft Infections
Hisham Rashid, FRCS
- 3:00 – 3:05** Update On Gaining Arterial Access For EVAR And TEVAR With Challenging Aorto-Iliac Anatomy: Tips And Tricks For Conduits And Direct Aortic Or Common Iliac Sheath Placement
Jeffrey P. Carpenter, MD
- 3:06 – 3:20** Panel Discussion And Break
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 15 (Grand Ballroom West, 3rd Floor)

RENAL AND VISCERAL ARTERY ISSUES

Moderators: *Timur P. Sarac, MD*
James C. Stanley, MD

RENAL ARTERY ISSUES

- 3:20 – 3:25** Current Status Of Renal Artery Stenting In Children And Adults: When Is It The Treatment Of Choice And What Is Its Future
Thomas A. Sos, MD
- 3:26 – 3:31** IV DSA Is The Best Way To Assess Occlusive Disease Of The Aorta And Its Branches In Children: Embolization May Be Best Treatment For Segmental Renal Artery Stenosis Causing Hypertension
Kyung Cho, MD
- 3:32 – 3:37** Value Of DEBs To Treat Renal Artery Lesions, Recurrent Lesions And ISR
Fabrizio Fanelli, MD
- 3:38 – 3:43** Open Renal Revascularization Can Salvage Failed Renal PTAs And Stents And Do So Durably: Tips And Tricks For These Operations
Thomas C. Bower, MD
- 3:44 – 3:49** Acute Renal Artery Occlusions: Causes; How To Treat And How Long After An Acute Occlusion Can Kidneys Be Salvaged With Good Function: Mechanism For Such Salvage After Long Delays
Samy S. Nitecki, MD
- 3:50 – 3:55** Renal Artery Aneurysms Rarely Rupture EVEN When >2 cm: How Fast Do They Grow: When And How Should They Be Fixed
Peter F. Lawrence, MD

VISCERAL ARTERY ISSUES

- 3:56 – 4:01** 10-Year Natural History Study Of Splanchnic Aneurysms (Splenic, Hepatic, Gastroduodenal And Mesenteric): When Should They Be Fixed And How
Mark Conrad, MD, MMSc
- 4:02 – 4:07** Endovascular Approaches To Treatment Of Giant Visceral Aneurysms (Up To 10 cm)
Michele Rossi, MD
- 4:08 – 4:13** Best Current Treatment For Mesenteric Ischemia: When Endo, When Open, When Hybrid
Timur P. Sarac, MD
- 4:14 – 4:19** Median Arcuate Ligament Syndrome: How To Diagnose And When And How To Treat Open, Laparoscopic Or Endovascularly: Does Treatment Work And How Should The Celiac Axis Be Managed
Alan M. Dietzek, MD, RPVI
Keith D. Calligaro, MD
- 4:20 – 4:26** Panel Discussion

SESSION 16 (Grand Ballroom West, 3rd Floor)

TOPICS RELATED TO OPEN SURGERY AND THE TREATMENT OF AORTIC COARCTATIONS

Moderators: *Richard P. Cambria, MD*

Hans-Henning Eckstein, MD, PhD

OPEN SURGERY TOPICS

- 4:26 – 4:31** New Improved Techniques For Open TAAA Repair: Better Organ Protection And Using Hybrid (Gore) Stent Graft For Faster Branch Revascularization
Roberto Chiesa, MD
Enrico M. Marone, MD
- 4:32 – 4:37** An Important Role For Open Surgery Exists For AAAs In 2015 And It Will In The Future
Arno von Ristow, MD
- 4:38 – 4:43** Prevention Of Incisional Hernias After Open AAA Repairs Via A Midline Laparotomy Incision By Mesh Augmented Primary Closure (The PRIMAAT Trial): Technique And Material
Isabelle Van Herzeele, MD, PhD
Frederik Berrevoet, MD
Filip Muysoms, MD
- 4:44 – 4:49** The Worst Patients For EVAR Are The Best For A Mini-Laparotomy Open Repair: How Is It Done
Francesco Spinelli, MD
- 4:50 – 4:55** Newer Innovations And Technical Tips And Tricks For Anterior Spine Exposure And Large Vessel Mobilization: What Vascular Surgeons Need To Know
Bauer E. Sumpio, MD, PhD
- 4:56 – 5:01** Open Retroperitoneal Exposure Of The Entire Abdominal Aorta And Its Branches Via A Left Retroperitoneal Approach (Video Presentation)
William J. Quinones-Baldrich, MD
- 5:02 – 5:07** Advantages And Disadvantages Of Hybrid Repair For Thoracoabdominal Aortic Aneurysms (TAAAs): Tips And Tricks For Doing It Right
Sebastian E. Debus, MD, PhD
- 5:08 – 5:13** Challenges And Results Of Open Repairs Of Residual TAAAs Distal To Prior TEVAR For TBADs
Manju Kalra, MBBS
- 5:14 – 5:19** Some CLI In Hemodialysis Patients Is Best Treated By Open Bypass Rather Than An Endovascular Procedure: Which Patients With What Anatomy
Mark G. Davies, MD
- 5:20 – 5:26** Panel Discussion

Moderators: *Hazim J. Safi, MD*

Elchanan Bruckheimer, MBBS

AORTIC COARCTATION TOPICS

- 5:26 – 5:31** **DEBATE:** For Adult Coarctations And Their Complications When Is Endo OK And When Is Open Surgery Needed: What Are The Best And Safest Procedures
Joseph E. Bavaria, MD
- 5:32 – 5:37** **DEBATE:** Adult Coarctations And Complications Of Previous Coarctation Repairs Are Best Treated Endovascularly But One Must Be Innovative
Jan S. Brunkwall, MD, PhD
- 5:38 – 5:43** 5-Year Results With Balloon-Expandable Stent-Grafts In The Treatment Of Adult Aortic Coarctations
Elchanan Bruckheimer, MBBS

- 5:44 – 5:49** TEVAR Treatment Of Patch Aneurysms And Other Complications Of Prior Open Repairs: Advantages, Limitations And Precautions
Dittmar Boeckler, MD
- 5:50 – 5:55** New Generation Stent-Grafts For Treating Complications Of Aortic Coarctation Repairs: The Landscape Is Changing
Colin D. Bicknell, MD
- 5:56 – 6:03** Panel Discussion
End of Program B

PROGRAM C (PART 1 – SESSIONS 17-18)
NEW DEVELOPMENTS IN MANAGEMENT
OPTIONS FOR PULMONARY EMBOLISM

Trianon Ballroom, 3rd Floor

SESSION 17 (Trianon Ballroom, 3rd Floor)

MANAGEMENT OF PULMONARY EMBOLISM:
THE MOMENTUM FOR EFFECTIVE TREATMENT IS
REAL – PART 1

Moderator: *Michael R. Jaff, DO*

- 7:00 – 7:05** Introduction To The Symposium
Frank J. Veith, MD
- 7:05 – 7:15** Welcome And Introduction
Michael R. Jaff, DO
- 7:15 – 7:25** The Basics Of Pulmonary Embolism: What Is The Role Of The History, Exam, Biomarkers?
Ido Weinberg, MD, MSc
- 7:25 – 7:35** The Basics Of Echocardiography For PE: What Must The Vascular Specialist Know, And Is An Emergent Echo Necessary
David M. Dudzinski, MD
- 7:35 – 7:50** What Is State-Of-The-Art Medical Therapy For PE
Geno J. Merli, MD, MACP
- 7:50 – 8:00** Intravenous Thrombolytic Therapy For PE: Does It Work Acutely
Christopher Kabrhel, MD, MPH
- 8:00 – 8:10** Catheter-Directed Thrombolysis For PE: What Are The Long-Term Outcomes
Rabih A. Chaer, MD
- 8:10 – 8:25** Percutaneous Pharmacomechanical Intervention For PE: Do We Really Know About The Hows And Whens
Nils Kucher, MD
- 8:25 – 8:35** Lysis For PE - What About The Nuts And Bolts: Heparin, PTT And Fibrinogen Monitoring, And How Do You Know When You Are Done
Raghu Kolluri, MD
- 8:35 – 8:45** Technical Tips For Pharmacomechanical Intervention For PE: How Do I Do It
Jeffrey Y. Wang, MD
- 8:45 – 9:15** Case Presentations/Discussion/Questions And Answers
Panelists: *Rabih A. Chaer, MD*
Christopher Kabrhel, MD, MPH
Raghu Kolluri, MD
Nils Kucher, MD
Geno J. Merli, MD, MACP
Jeffrey Y. Wang, MD
Ido Weinberg, MD, MSc
- 9:15 – 9:45** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 18 (Trianon Ballroom, 3rd Floor)

**MANAGEMENT OF PULMONARY EMBOLISM:
THE MOMENTUM FOR EFFECTIVE TREATMENT IS
REAL – PART 2**

Moderator: *Michael R. Jaff, DO*

- 9:45 – 9:55** PE Without DVT: What Does It Mean And Does It Matter
Anil P. Hingorani, MD
- 9:55 – 10:10** Percutaneous Thrombolysis And Thromboaspiration: The Impact Of Combination Therapy
Narendra N. Khanna, MD, DM
- 10:10 – 10:20** Vortex Strategy For Massive PE
Christopher J. Kwolek, MD
- 10:20 – 10:30** ECMO And Surgical Thromboembolectomy For Massive PE: When, How And Why
Nicholas G. Smedira, MD
- 10:30 – 10:45** What Is The Modern Algorithm For Management Of Massive And Submassive PE
Nils Kucher, MD
- 10:45 – 11:00** Vena Cava Filters In PE Treatment: Do We Need To Do This, And If So, When
Robert A. Lookstein, MD
- 11:00 – 11:15** And Now For Something Completely Different: Catheter-Directed Thrombolysis In The Pediatric Population
Peter H. Lin, MD
- 11:15 – 11:30** The Team Approach To PE Management: The Emergence Of National PERT Centers
Kenneth Rosenfield, MD
- 11:30 – 11:45** Challenging Cases And “PERT” Decisions
Panelists: *Anil P. Hingorani, MD*
Nils Kucher, MD
Christopher J. Kwolek, MD
Peter H. Lin, MD
Robert A. Lookstein, MD
Kenneth Rosenfield, MD
Nicholas G. Smedira, MD
- 11:45 – 12:00** Questions And Answers
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

PROGRAM C (PART 2 – SESSIONS 19-22)

**MANAGEMENT OF ACUTE AND CHRONIC LARGE
VEIN OCCLUSION**

Trianon Ballroom, 3rd Floor

SESSION 19 (Trianon Ballroom, 3rd Floor)

**RAPID EXPANSION OF OPPORTUNITIES FOR
EFFECTIVE TREATMENT OF LARGE VEIN STENOSIS,
THROMBOSIS, AND OCCLUSION**

Moderators: *Kenneth Ouriel, MD, MBA*

Peter Gloviczki, MD

- 1:00 – 1:05** Lower Extremity Venous Occlusive Disease: A Rapidly Progressing Field With Major Opportunities For Improving Clinical Outcomes
Peter Gloviczki, MD
- 1:06 – 1:11** Large Vein Occlusive Disease: A Global Health Issue In 2015 And Beyond
Manj S. Gohel, MD, RCS

- 1:12 – 1:17** Quality Of Life Surveys In Patients Undergoing Intervention For Chronic Venous Disease: The Good, The Bad, And The Ugly
Cees H.A. Wittens, MD, PhD
- 1:18 – 1:23** Non-Thrombotic May-Thurner Syndrome: Defining Pathology Mandating Treatment From Normal Anatomy
Brian G. DeRubertis, MD
- 1:24 – 1:29** When And How Should Pelvic Venous Compression Syndromes Be Treated
David L. Gillespie, MD
- 1:30 – 1:35** Treating Iliofemoral DVT In Pregnancy: Anticoagulation Alone Is No Longer Acceptable In Most Patients
Anthony J. Comerota, MD
- 1:36 – 1:41** Role Of Inflammation In DVT: Its Relationship With Thrombosis
Thomas W. Wakefield, MD
- 1:42 – 1:47** Hemodynamics Of Venous Disease: Toward A Better Understanding And Consensus
Byung-Boong Lee, MD
- 1:48 – 1:53** Third Party Payment For Venous Interventions: Current Deliberations And Gazing Into The Crystal Ball
Sean P. Roddy, MD
- 1:54 – 1:59** Panel Discussion

SESSION 20 (Trianon Ballroom, 3rd Floor)

ENDOVASCULAR INTERVENTIONS AND PHARMACOLOGIC REGIMENS FOR ACUTE LOWER EXTREMITY DVT: NEW EVIDENCE FOR CLINICAL SAFETY AND EFFECTIVENESS

Moderators: *Thomas W. Wakefield, MD*
Mark J. Garcia, MD

- 2:00 – 2:05** ATTRACT Study Of rt-PA For Acute DVT: Almost 7 Years And Almost 700 Patients, Almost Done: What Will We Find
Anthony J. Comerota, MD
- 2:06 – 2:11** Acute DVT Should Be Managed With An Aggressive Interventional Approach: Large Experience From South Asia
Narendra N. Khanna, MD, DM
- 2:12 – 2:17** Thrombolysis For DVT: Predictors Of Success
Rabih A. Chaer, MD
- 2:18 – 2:22** BERNUTIFUL: A Beautifully Designed Trial To Evaluate Ultrasound-Assisted Thrombolysis For DVT
Nils Kucher, MD
Iris Baumgartner, MD
- 2:23 – 2:28** How Long To Anticoagulate After DVT: Duplex Imaging Guides Treatment Duration
Timothy K. Liem, MD, MBA
- 2:29 – 2:34** Understanding The Genetics Of Warfarin Dosing And Implications For Safer Anticoagulant Therapy
Karthikeshwar Kasirajan, MD
- 2:35 – 2:40** New Oral Anticoagulants For Extending Treatment Of DVT: Do They Alter The Risk/Benefit Ratio
Anthony J. Comerota, MD
- 2:41 – 2:50** Panel Discussion
- 2:51 – 3:15** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 21 (Trianon Ballroom, 3rd Floor)

NEW DEVICES FOR TREATING LARGE VEIN OCCLUSIVE DISEASE

Moderators: *Cees H.A. Wittens, MD, PhD*
Robert A. Lookstein, MD

- 3:16 – 3:21** The First Comparative Study Of Four Dedicated Stents For The Venous System
Rick De Graaf, MD, PhD
- 3:22 – 3:27** **DEBATE:** Marketed Stents Designed For Arteries Are More Than Adequate For Treating Venous Disease
Mark J. Garcia, MD
- 3:28 – 3:33** **DEBATE:** Arterial Stents Are Suboptimal In Veins: Newer Stents Designed For The Venous Side Are Mandatory
Seshadri Raju, MD
- 3:34 – 3:39** Cutting Balloon Angioplasty For Symptomatic Femoropopliteal Vein Stenoses
Thomas O. McNamara, MD
- 3:40 – 3:45** The Cook Zilver Vena Venous Stent: Update From The VIVO Trial
Anthony J. Comerota, MD
- 3:46 – 3:51** Early Experience With The Veniti VICI Venous Stent And Update On The VIRTUS Trial
William A. Marston, MD
- 3:52 – 3:57** Rapid Clearance Of Acute Thrombus From The Large Veins: The AngioVac System
David J. Dexter, MD
- 3:58 – 4:03** Ultrasound-Enhanced Thrombolysis For Older DVT: Update From The ACCESS Study
Mark J. Garcia, MD
- 4:04 – 4:09** Panel Discussion

SESSION 22 (Trianon Ballroom, 3rd Floor)

THE INFERIOR VENA CAVA: CHALLENGES AND OPPORTUNITIES

Moderators: *Timur P. Sarac, MD*
Seshadri Raju, MD

- 4:10 – 4:15** Surgical Reconstruction Of The Iliocaval Segment: When And How
Peter Gloviczki, MD
- 4:16 – 4:21** Recanalization Of The Inferior Vena Cava: Technique And Results
Erin H. Murphy, MD
Seshadri Raju, MD
- 4:22 – 4:27** Advantages Of Robotic Vena Cava Surgery Over Traditional Techniques
Samuel R. Money, MD, MBA
- 4:28 – 4:33** Acute And Chronic IVC Occlusion: Why It Occurs And Options For Treatment
David L. Gillespie, MD
- 4:34 – 4:39** Massive DVT And Pulmonary Embolism: Early Institution Of ECMO And Aggressive Anticoagulant Improves Survival
Mark G. Davies, MD
- 4:40 – 4:45** Embolic Risk Of Percutaneous Thrombectomy And Thrombolysis For DVT: An IVC Filter Is Not Necessary
Peter H. Lin, MD

4:46 – 4:51 Newer, Safer Retrievable IVC Filter Designs Alter Risks And Rewards And Will Expand Applicability Indications
Richard G. McWilliams, FRCR

4:52 – 5:00 Panel Discussion
End of Program C

WEDNESDAY, NOVEMBER 18, 2015

6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor

6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor

6:00 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT WEDNESDAY PROGRAMS

PROGRAM D: SESSIONS 23-30

Lower Extremity Arterial Disease And Its Treatment

6:40 A.M. – 5:58 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM E: SESSIONS 31-38

Natural History, Anti-Atherogenic And Medical Treatments, Renal Denervation, Endoleaks, Complications And Important Issues In Ethics, Government And Vascular Business, Key Carotid Topic

6:45 A.M. – 6:25 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM F: SESSIONS 39-46

Aortic Dissection, TEVAR, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR (F/BEVAR), Multilayer Flow Modulating (MLFM) Stents, Recorded Live Cases, Abdominal Aorta And EVAR

6:45 A.M. – 5:55 P.M.

Trianon Ballroom, 3rd Floor

PROGRAM D (SESSIONS 23-30)

LOWER EXTREMITY ARTERIAL DISEASE AND ITS TREATMENT

Grand Ballroom East, 3rd Floor

SESSION 23 (Grand Ballroom East, 3rd Floor)

LOWER EXTREMITY OCCLUSIVE DISEASE MANAGEMENT – HOT TOPICS AND NEW DEVELOPMENTS

Moderators: Enrico Ascher, MD

Craig M. Walker, MD

6:40 – 6:45 Prosthetic (PTFE) Grafts Are As Good Or Better Than Non-Greater Saphenous Autologous Vein Grafts For Below The Knee (BTK) Bypasses

Rabih A. Chaer, MD

6:46 – 6:51 12 Commandments To Make BTK Interventions For CLI Succeed

Ali Amin, MD, RVT

6:52 – 6:57 What Is The Best Way To Deal Endovascularly With SFA Occlusions To Its Origin

George H. Meier III, MD

6:58 – 7:03 12-Month Results With The Endovascular Tacking Device (Tack-It) For Treating Flow Limiting Post PTA Dissections: The TOBA Trial

David H. Deaton, MD

- 7:04 – 7:09** New Approaches To Limb Salvage In CLI Due To Very Distal Disease: Pedal Loop, Transcollateral And Small Artery Access In The Foot: Techniques, Tips And Tricks
Roberto Ferraresi, MD
- 7:10 – 7:15** Fast, Cheap Way To Cross Tibial CTOs Antegrade And When It Doesn't Work, Improved Pedal Access Is Available: Techniques And Equipment
Gary M. Ansel, MD
- 7:16 – 7:21** Technical Tips, Pitfalls And Midterm Results With Pedal Access Procedures
Hosam F. El Sayed, MD
- 7:22 – 7:27** How Does Stent Design Influence Results Of SFA Stenting: Advantages And Limitations Of Newer Stents: Supera, Tigris, Biomimics, Etc.
Marc Bosiers, MD
Koen Deloose, MD
- 7:28 – 7:33** **DEBATE:** Based On 5-Year Results, The Zilver PTX Stent Is The Treatment Of Choice For SFA Occlusive Disease
Michael D. Dake, MD
- 7:34 – 7:39** **DEBATE:** Zilver PTX Stents Are Effective For Long Or Calcified SFA Lesions: But All Other SFA Lesions Should Be Treated With Drug Eluting Balloons (DEBs)
Thomas Zeller, MD
- 7:40 – 7:46** Panel Discussion

SESSION 24 (Grand Ballroom East, 3rd Floor)

MORE LOWER EXTREMITY HOT TOPICS AND NEW DEVELOPMENTS

Moderators: *Giancarlo Biamino, MD, PhD*
Kenneth Ouriel, MD, MBA

- 7:46 – 7:51** Comparison Of Tibial Bypasses With Saphenous Vein vs. Heparin Bonded PTFE (Propaten): Current Indications For Prosthetic Tibial Bypasses And New Developments For Limb Salvage
Richard F. Neville, MD
- 7:52 – 7:57** In Patients With Extensive Gangrene From CLI (Rutherford 5 And 6), Limited Vein And Occlusive Disease Of The SFA And Distal Arteries, Endovascular Treatment Of The SFA And A Short Vein Distal Bypass Is The Best Way To Achieve Limb And Patient Survival
Francesco Spinelli, MD
- 7:58 – 8:03** Below The Ankle And Perimalleolar Occlusive Disease With CLI: Tips And Tricks For Treating It Endovascularly And When They Should Be Used: Hydrodynamic Boost To Re-Enter The Tibial Artery True Lumen And Venous Arterialization
Roberto Ferraresi, MD
- 8:04 – 8:09** New Tips, Tricks And Devices For Pedal And Other Distal Access Procedures
Andrej Schmidt, MD

DRUG ELUTING BALLOONS (DEBs)

- 8:10 – 8:15** Importance Of Trial Design And Other Factors In Evaluating The Differing Results With DEBs
Kenneth Rosenfield, MD

- 8:16 – 8:21** Under What Conditions Should DEBs Be Used Preferentially: Diabetics, Calcified Lesions, Extensive Foot Necrosis: What Does It Take To Make DEBs Work Optimally
Francesco Liistro, MD
- 8:22 – 8:27** 2-Year Results With The Lutonix (Bard) DEB vs. Uncoated Balloon Angioplasty (POBA): The LEVANT II Trial In The SFA And BTK Lesions
Dierk Scheinert, MD
Kenneth Rosenfield, MD
Marianne Brodmann, MD
Thomas Zeller, MD
- 8:28 – 8:33** In Femoropopliteal Stenting Does Drug Elution Make A Difference vs. Uncoated Stents: New Data From The MAJESTIC Trial
Stefan Müller-Hülsbeck, MD
- 8:34 – 8:39** Access For BTK Interventions Via Puncture Through Totally Occluded SFAs (With Or Without A Previous Stent): How To Do It
Luigi Inglese, MD
- 8:40 – 8:45** What The Surgeon Should NOT Do To Preserve Options For Future Endovascular Therapy And Vice Versa
Sigrid Nikol, MD
- 8:46 – 8:52** Panel Discussion

SESSION 25 (Grand Ballroom East, 3rd Floor)

MORE LOWER EXTREMITY NEW DEVELOPMENTS AND HOT TOPICS

Moderators: *Dierk Scheinert, MD*
Frank J. Veith, MD

- 8:52 – 8:57** **DEBATE:** What Percent Of CLI Patients Will Require An Open Surgical Procedure At Some Point In Their Course: An Interventionist's Point Of View
Giancarlo Biamino, MD, PhD
- 8:58 – 9:03** **DEBATE:** What Percent Of CLI Patients Will Require An Open Procedure At Some Point In Their Course: An Endovascularly Oriented Vascular Surgeon's Point Of View
Joseph L. Mills, MD

MORE ON DRUG ELUTING BALLOONS (DEBs)

- 9:04 – 9:09** 2-Year Positive Results With The In.Pact Admiral DEB To Treat SFA And Popliteal Lesions: The In.Pact SFA RCT Shows Better Patency And Decreased Reintervention Rates Compared To POBA
Peter A. Schneider, MD
Gunnar Tepe, MD
John R. Laird, MD
- 9:10 – 9:15** Value Of The In.Pact DEB To Treat Long TASC C And D Lesions: From The In.Pact SFA Trial Long Lesion Cohort
Gunnar Tepe, MD
- 9:16 – 9:21** Critical Analysis Of The LEVANT II And In.Pact SFA RCTs Of DEBs vs. POBA: What Are The Take Home Messages
Thomas Zeller, MD
- 9:22 – 9:27** Update On The Status Of Drug Eluting Balloons In The US Currently – And What Is Coming
Edward Y. Woo, MD

**TREATMENT OF LEG AND FOOT ARTERY
OCCLUSIVE DISEASE**

- 9:28 – 9:33** Foot Artery Disease In CLI: Innocent Bystander Or Leading Villain: When Should It Be Treated; When Should It Not Be Treated; And When Can It Not Be Treated: Some Patent Arteries In Leg And Foot Are Not Seen On DSA: How They Can Be Visualized
Roberto Ferraresi, MD
- 9:34 – 9:39** Future Of Pedal Access And Interventions: What Are Its Limits And Potential: Can It Be Achieved With Duplex Guidance And Can It Be Used For Atherectomy (With The Diamond Back Device): Technical Tips
Jihad A. Mustapha, MD
- 9:40 – 9:45** DEBs And Drug Eluting Stents (DESs) For BTK Arteries: Where Are We And What Is The Future
Konstantinos Katsanos, MD, MSc, PhD
- 9:46 – 9:51** Novel Hybrid Technique For Treating Complex Disease Involving CFA, SFA And Tibial Disease: Distal Access, Retrograde Wire Passage To A Common Femoral Arteriotomy Facilitates Complex Prograde Endovascular Treatments
Joshua D. Adams, MD
Claudio J. Schonholz, MD
- 9:52 – 9:59** Panel Discussion
- 9:59 – 10:12** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 26 (Grand Ballroom East, 3rd Floor)

**MORE LOWER EXTREMITY NEW DEVELOPMENTS
AND HOT TOPICS**

Moderators: *Daniel G. Clair, MD*
Michael B. Silva, Jr., MD

- 10:12 – 10:17** **DEBATE:** An Endovascular First Approach To All CLI Patients Results In Better Limb Salvage: Based On Long-Term Follow-Up Of A Single Vascular Surgical Center
Ramon L. Varcoe, MD
- 10:18 – 10:23** **DEBATE:** Not So: Some CLI Patients Are Still Best Treated First By An Open Bypass: Which Ones And An Endovascular First Policy Can Harm Such Patients
Michael S. Conte, MD
- 10:24 – 10:29** Consequences Of An “Endovascular First Policy For All CLI Patients”: They Are Real – Especially With TASC C And D Lesions
Ross Milner, MD
- 10:30 – 10:35** Consequences Of Failed Tibial Angioplasty: How Often Is The Distal Target Vessel Altered Or Symptoms Increased: Open Bypass As The Initial Treatment Is Better For CLI Patients With TASC D Lesions
Marc L. Schermerhorn, MD
- 10:36 – 10:41** Endovascular Treatments For TASC C And D Lesions Have Improved And Justifies Their Use With Such Lesions: Do Results Support This Use
Gary M. Ansel, MD

NEW STENT DEVELOPMENTS

- 10:42 – 10:47** 5-Year Results With The Supera Interwoven Stent Are Better Than Other Bare Metal Stents (BMSs) And DEBs In A Propensity Matched Comparison
Dierk Scheinert, MD
Sabine Steiner, MD
- 10:48 – 10:53** 3-Year Results From The US IDE Trial With The Supera Stent: How Does The Deployment Technique Influence Midterm Patency
Lawrence A. Garcia, MD
- 10:54 – 10:59** Real World Experience With The Supera Stent For Long Challenging SFA/Pop Lesions: Deployment Tips And Mode Of Failure
D. Christopher Metzger, MD
- 11:00 – 11:05** 1-2-Year Good Results With The Xience Prime Balloon Expandable Everolimus DES For Long BTK Lesions Are Good: From The DESTINY 2 Trial
Marc Bosiers, MD
Patrick Peeters, MD
- 11:06 – 11:12** Panel Discussion

Moderators: *Peter A. Schneider, MD*
Darren B. Schneider, MD

NEW DEVELOPMENTS IN DEBs

- 11:12 – 11:17** Role Of DEBs For Infringuinal Lesions (SFA/Pop/ BTK) In 2015 And The Future: What Is It And What Will It Be In Primary And Recurrent Lesions And ISR
Giancarlo Biamino, MD, PhD
- 11:18 – 11:23** **DEBATE:** Why We Should Stay Away From DEBs For BTK Interventions
Erich Minar, MD
- 11:24 – 11:29** **DEBATE:** DEBs For BTK Lesions Have A Bright Future: Why The In.Pact Deep Trial Did Not Work And Lessons Learned That Should Make DEBs Effective BTK Including In Crural Arteries
Francesco Liistro, MD
- 11:30 – 11:35** Ongoing Trials Of Drug Delivery Techniques And Improved Stents For BTK Arteries: The Future Is Bright
Andrej Schmidt, MD
Dierk Scheinert, MD
- 11:36 – 11:41** Late Patency And Limb Salvage Results After Plantar And Pedal Loop PTAs For CLI: How Do They Differ In Patients With Gangrene And Ulceration And Those With Rest Pain
Roberto Ferraresi, MD
- 11:42 – 11:47** Infringuinal Artery Calcification In Fem/Pop And Tibial Arteries: What Is Its Location And Nature And How Does It Impact On Endovascular Treatments In The Thigh, Leg And Foot
Jihad A. Mustapha, MD
- 11:48 – 11:53** Meta-Analysis Of Results With Venous Arterialization For Limb Salvage: When Does It Work And Why: Properly Done It Offers A Hope For Limb Salvage In Otherwise Hopeless Circumstances
Pramook Mutirangura, FRCS
- 11:54 – 12:00** Panel Discussion
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 27 (Grand Ballroom East, 3rd Floor)

**LOWER EXTREMITY NEW DEVELOPMENTS
RELATED TO TREATMENT OF IN STENT
RESTENOSIS (ISR)**

Moderators: *Andrej Schmidt, MD*
Marc Bosiers, MD

- 1:00 – 1:05** How Can ISR Be Classified And What Is Currently The Best Treatment For Each Class
Peter A. Schneider, MD
- 1:06 – 1:11** The Spectranetics Excimer Laser Plus Balloon Angioplasty Is The Best Treatment For ISR: Based On The EXCITE-ISR Trial: Should The Balloon Be A DEB
Craig M. Walker, MD
D. Christopher Metzger, MD
- 1:12 – 1:17** Atherectomy (Silverhawk) Plus DEB Is The Best Treatment For ISR And Is Cost Effective: Based On The DEFINITIVE AR Trial
Thomas Zeller, MD
Gunnar Tepe, MD
- 1:18 – 1:23** Viabahn Relining Is Usually The Best Treatment For ISR: Based On Updated 2-Year Results Of The RELINE Trial: When Is It Not The Best
Patrick Peeters, MD
Marc Bosiers, MD
Koen Deloose, MD
- 1:24 – 1:29** Viabahn Stent-Grafts Are Good Treatment For ISR: When Are They The Best: What Is The Pattern Of Failure And What Can Be Done To Prevent It
Johannes Lammer, MD
- 1:30 – 1:35** DEB With The Cotavance Balloon vs. POBA For ISR: Good 1-Year Results: The COPA CABANA Trial
Gunnar Tepe, MD
- 1:36 – 1:41** Panel Discussion

SESSION 28 (Grand Ballroom East, 3rd Floor)

**NEW DEVELOPMENTS IN LOWER EXTREMITY
STENT-GRAFTS, POPLITEAL ANEURYSMS AND
OTHER CLI TOPICS OF INTEREST**

Moderators: *Wesley S. Moore, MD*
Craig M. Walker, MD

- 1:42 – 1:47** Emergency Treatment Of Vascular Injuries With Stent-Grafts (Covered Stents): Which Stent-Graft For Which Injuries And Other Tips And Tricks In Their Use
Maria Antonella Ruffino, MD
- 1:48 – 1:53** What Is The Best Current Treatment For Long SFA Occlusions: BMSs, DESs, DEBs, Atherectomy And PTA Or Viabahn Stent-Grafts
Johannes Lammer, MD
- 1:54 – 1:59** 3-Year Results With Heparin Bonded Viabahn Stent-Grafts To Treat Long SFA Occlusions
Michel M.P. Reijnen, MD, PhD
- 2:00 – 2:05** Heparin Bonding Probably Does Not Improve Results With PTFE Stent-Grafts Or Open PTFE Bypasses
Jonathan D. Beard, ChM, MEd

**POPLITEAL ANEURYSM HOT TOPICS
(SEE ALSO SESSION 85)**

- 2:06 – 2:11** Endoluminal Bypasses With Stent-Grafts For Thrombosed Popliteal Aneurysms: When Can It Work And How To Do It
Giovanni Pratesi, MD
- 2:12 – 2:17** **DEBATE:** Most Popliteal Aneurysms Should Be Treated Endovascularly: What Are The Exceptions And What Is Their Proportion
Irwin V. Mohan, MBBS, MD
- 2:18 – 2:23** **DEBATE:** Not So: Endovascular Repair Of Popliteal Aneurysms May Not Be As Good As It's Cracked Up To Be – Especially In Certain Circumstances: Open Repair Via A Posterior Approach Is Best For Most
Martin Björck, MD, PhD
- 2:24 – 2:29** Endovascular Stent-Graft Repair Is The Best Treatment For Most Popliteal Aneurysms: What Are The Exceptions
Franco Grego, MD
- 2:30 – 2:35** Open vs. Endo Repair For Popliteal Aneurysms: Which Is Best: From A Real World National Italian Registry
Walter Dorigo, MD
- 2:36 – 2:41** Surveillance Duplex Ultrasound Is Not Reliable For Predicting Stent-Graft Failure After Popliteal Aneurysm Repair But Is Reliable For Predicting Failure Of SFA Stent-Grafts For Occlusive Disease
Keith D. Calligaro, MD
Matthew J. Dougherty, MD
- 2:42 – 2:48** Panel Discussion

Moderators: *Joseph L. Mills, MD*
Patrick J. Lamparello, MD

OTHER LOWER EXTREMITY TOPICS OF INTEREST

- 2:48 – 2:53** Value Of Prostaglandins In CLI For Diabetics And Non-Diabetics: Beneficial Effects Can Be Documented By Flow Measurements
Afshin Assadian, MD
- 2:54 – 2:59** Myths Concerning Pedal Bypasses: Their Bad Reputation Is Undeserved: With Them And Pedal Loop Endovascular Techniques No Patient With CLI Should Be Untreatable
Hisham Rashid, FRCS
- 3:00 – 3:05** Failure Modes For Pedal Access Endovascular Interventions
Rabih A. Chaer, MD
- 3:06 – 3:11** Impact Of Nitinol Stent Oversizing On Outcomes Of Fempop Interventions: How Should Optimal Stent Size Be Determined
Nicolas A. Diehm, MD
- 3:12 – 3:17** Distal (Pedal) Bypasses vs. PTAs For The Treatment Of Tibial And Pedal Occlusive Lesions: Pros And Cons Of Each
Hany Zayed, MD
- 3:18 – 3:23** Panel Discussion
- 3:23 – 3:33** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 29 (Grand Ballroom East, 3rd Floor)

ADVANCES IN THE TREATMENT OF ACUTE LIMB ISCHEMIA (ALI) AND INTERMITTENT CLAUDICATION (IC)

*Moderators: Keith D. Calligaro, MD
Michael S. Conte, MD*

ACUTE LIMB ISCHEMIA (SEE ALSO SESSION 62)

- 3:33 – 3:38** **DEBATE:** All Patients With Acute Limb Ischemia (ALI) Should Be Treated Endovascularly: A Strategy For Doing So – Including Mechanical Thrombectomy: Which Device Is Currently Best
Ali Amin, MD, RVT
- 3:39 – 3:44** **DEBATE:** Some Patients With ALI Need Open Surgical Techniques: Who Are They And Why Are The Open Techniques Needed And Beneficial
Joseph L. Mills, MD
- 3:45 – 3:50** Update On Thrombosuction For ALI: What Are The Best Techniques: How To Do It And What Are The Results
*Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD*
- 3:51 – 3:56** Intraoperative Venous Drainage Through A Hemodialysis System Can Be A Limb And Life Saving Technique For Patients With Late Stage ALI And Reperfusion Injury: How To Do It
Pramook Mutirangura, FRCS

NEW DEVELOPMENTS IN THE MANAGEMENT OF INTERMITTENT CLAUDICATION (IC) AND OTHER CONDITIONS

- 3:57 – 4:02** **DEBATE:** How Should Most Patients With IC Be Treated: An Interventional Cardiologist's View
William A. Gray, MD
- 4:03 – 4:08** **DEBATE:** How Should Most Patients With IC Be Treated: A Vascular Surgeon's View
Frank B. Pomposelli, MD
- 4:09 – 4:14** With Supervised Exercise For IC When Is Stenting Needed: Never? Rarely?
Konstantinos Katsanos, MD, MSc, PhD
- 4:15 – 4:20** Patients With IC Should Have A Trial Of Exercise Treatment And Be Informed About Risks And Benefits Before They Are Treated Interventionally
Jonathan D. Beard, ChM, MEd
- 4:21 – 4:26** Use Of Electronic Devices Like Fitbits To Improve IC Treatment
Robyn A. Macsata, MD
- 4:27 – 4:32** New Automated Device For Rapid Percutaneous Insertion Of Femoral Artery Sheath In Emergent Situations
Rajabrata Sarkar, MD, PhD
- 4:33 – 4:39** Panel Discussion

SESSION 30 (Grand Ballroom East, 3rd Floor)

CLI AND THE ANGIOSOME CONCEPT; REOPERATIONS AND REINTERVENTION; OTHER NEW CONCEPTS AND TECHNIQUES

*Moderators: Timur P. Sarac, MD
Cynthia K. Shortell, MD*

DIFFERING VIEWS ON THE ANGIOSOME CONCEPT

- 4:39 – 4:44** **DEBATE:** The Angiosome Concept Has Been Proven Helpful With Open Surgical And Endovascular Treatments Of CLI With Gangrenous Or Ulcerated Lesions
Richard F. Neville, MD
- 4:45 – 4:50** **DEBATE:** The Angiosome Concept Has Not Been Proven Helpful In The Treatment Of CLI With Gangrenous Or Ulcerated Lesions
Bauer E. Sumpio, MD, PhD
- 4:51 – 4:56** Angiosome Targeted Revascularization Is More Important With Endovascular Repair Than Bypass Surgery
Maarit Venermo, MD, PhD
- 4:57 – 5:02** Critique Of The Angiosome Concept: It Is Not Simple: Outcomes Depend More On The Distribution System In The Foot Than Angiosomes
Roberto Ferraresi, MD
- 5:03 – 5:08** Is The Angiosome Concept Worthwhile And How Should It Be Used
Peter A. Schneider, MD
- 5:09 – 5:14** Update On The Angiosome Concept: It's Not All It's Cracked Up To Be: What Other Factors Are More Important
Hisham Rashid, FRCS
- 5:15 – 5:20** The Angiosome Concept Is Not Necessary To Achieve Limb Salvage With Ischemic Gangrenous Foot Lesions
Ignacio Escotto, MD
- 5:21 – 5:26** Angiosomes Of The Foot Have Tremendous Variability As Indicated By Laser-Assisted Indocyanine Green Imaging Using The SPY SYSTEM
Werner Lang, MD

REOPERATIONS AND REINTERVENTIONS

- 5:27 – 5:32** The Importance Of Reintervention When A Primary Intervention Or Operation For CLI Fails And The Limb Is Rethreatened: An Interventionalist's View
Nils Kucher, MD
Iris Baumgartner, MD
- 5:33 – 5:38** The Importance Of Reoperation Or Reintervention When A Primary Procedure For CLI Fails And The Limb Is Rethreatened: 1, 2, 3, 4 And More Procedures Can Be Worthwhile: A Vascular Surgeon's View
Evan C. Lipsitz, MD

NEW CONCEPTS AND TECHNIQUES

- 5:39 – 5:44** Vorapaxar - A New PAR-1 Receptor Blocker, Improves Cardiovascular And Limb Outcomes In PAD Patients: The FDA Agrees
Anthony J. Comerota, MD
- 5:45 – 5:50** When And How Should Distal Embolic Protection Devices Be Used With Lower Extremity Interventions
D. Christopher Metzger, MD
- 5:51 – 5:58** Panel Discussion
End of Program D

PROGRAM E (SESSIONS 31-38)

NATURAL HISTORY, ANTI-ATHEROGENIC AND MEDICAL TREATMENTS, RENAL DENERVATION, ENDOLEAKS, COMPLICATIONS AND IMPORTANT ISSUES IN ETHICS, GOVERNMENT AND VASCULAR BUSINESS

Grand Ballroom West, 3rd Floor

SESSION 31 (Grand Ballroom West, 3rd Floor)

NATURAL HISTORY, MEDICAL TREATMENTS AND ANTI-ATHEROSCLEROTIC MEDICATIONS

Moderators: Keith D. Calligaro, MD

Hans-Henning Eckstein, MD, PhD

- 6:45 – 6:50** Is The Metabolic Syndrome A Marker Of Adverse Outcomes After Vascular Procedures: What Can Be Done To Improve The Situation
Alan Dardik, MD, PhD
- 6:51 – 6:56** Cilostazol (Pletal) Is An Underutilized Medication In Vascular Patients: It Can Promote Patency And Decrease Amputations After Arterial Revascularizations: What Is Optimal Timing And Dosing For Its Use
Todd R. Vogel, MD, MPH
- 6:57 – 7:03** How Should Beta Blockers Be Used In Vascular Patients Undergoing Procedures: Use And Overuse Can Harm Patients And Their Use Should Not Be A Quality Metric
Michael C. Stoner, MD
- 7:04 – 7:09** How Do Patient Risk Factors And Antiplatelet Medications Influence Myocardial Ischemia And Infarction In Patients Undergoing Open Arterial Operations: What Can Be Done To Decrease These Adverse Events
Caron B. Rockman, MD
Jeffrey S. Berger, MD, MS
- 7:10 – 7:15** Smoking, Cholesterol, Obesity And BP: The Big 4 Modifiable Causes Of Vascular Disease: Fix Them And Live Forever: What Is Optimal Statin Usage
Richard Bulbulia, MA, MD
- 7:16 – 7:21** What Is Happening With The AHA Cholesterol Guidelines: Should We Measure Serum Cholesterol: How Low Should The LDL Be Pushed To And Can It Get There
Jeffrey S. Berger, MD, MS
- 7:22 – 7:27** Status Of Cholesterol Lowering Drug Zetia (Ezetimibe) And Its Combination With Statins (Vytorin): Do They Help To Prevent Cardiovascular Events More Than Statins Alone: Who Should Be On Them: The IMPROVE-IT Trial
Don Poldermans, MD
- 7:28 – 7:33** Status Of The New Cholesterol Lowering Drugs: The PCSK 9 Inhibitors (Evolucumab [Amgen] And Alirocumab [Sanofi]): Do They Decrease Cardiovascular Events: How Are They Given; What Are Their Downsides; What Will Their Role Be And When Will They Be Available
Ron Waksman, MD
- 7:34 – 7:39** Statins And Dual Antiplatelet Drugs Reduce Amputations: What Is The Evidence
Konstantinos Katsanos, MD, MSc, PhD
- 7:40 – 7:48** Panel Discussion

SESSION 32 (Grand Ballroom West, 3rd Floor)

RENAL DENERVATION AND OTHER TREATMENTS FOR RESISTANT HYPERTENSION: BLACK BOX WARNINGS: KEY CAROTID TOPIC

Moderators: *Ronald L. Dalman, MD*
Ali F. AbuRahma, MD

- 7:48 – 7:53** Current Status Of Catheter Based Renal Radiofrequency Denervation For Hypertension: Where Is It Going
Horst Sievert, MD
- 7:54 – 7:59** Why The Renal Denervation RCTs Have Not Shown A Positive Effect: Does The Treatment Concept Have A Future
Michael R. Jaff, DO
Krishna J. Rocha-Singh, MD
- 8:00 – 8:05** What Is The Future For Renal Denervation: What Are Its Assets Beyond Lowering BP: Will It Become A Mainstream Treatment
Melvin D. Lobo, MBChB, PhD
- 8:06 – 8:11** Does Surgical Renal Denervation Work: Why Does It Fail Long-Term: Is There A Bright Future For Renal Denervation
Juan C. Parodi, MD
- 8:12 – 8:17** Newer Methods To Achieve Renal Denervation: Can Catheter Based Ultrasound (Surround Sound) Be Effective And Safe For Lowering BP, For Treating Heart Failure (The RETREAT Trial): What About Catheter Chemical Denervation With Alcohol And DW 2013: How Are They Delivered
Horst Sievert, MD

OTHER TREATMENTS FOR RESISTANT HYPERTENSION

- 8:18 – 8:23** Update On Chronic Carotid Sinus Stimulation With An Implantable Device To Treat Resistant Hypertension
Fred A. Weaver, MD
- 8:24 – 8:29** Treatment Of Resistant Hypertension By The ROX AV Coupling Device: An Endovascular Technique To Create An Iliac A-V Fistula: Technique, Results And Risks
David H. Deaton, MD
Paul A. Sobotka, MD
- 8:30 – 8:35** Vascular Specialists Ignore Black Box Warnings About Certain Drugs And Their Optimal Usage Resulting In Poor Patient Care: What Can Be Done About It
Karthikeshwar Kasirajan, MD

KEY CAROTID TOPIC

- 8:36 – 8:41** What Is Best Medical Treatment (BMRx) For Patients With Carotid Disease
J. David Spence, MD
- 8:42 – 8:49** Panel Discussion

SESSION 33 (Grand Ballroom West, 3rd Floor)
**TREATMENT AND PREVENTION OF
COMPLICATIONS; ENDOTENSION AND
ENDOLEAKS**

*Moderators: Neal S. Cayne, MD
Timur P. Sarac, MD*

8:49 – 8:54 Value Of Measuring Troponins Before And After Open Vascular Operations: When And How Does It Help In Patient Management
*Caron B. Rockman, MD
Jeffrey S. Berger, MD, MS*

8:55 – 9:00 Open And Endo Rescue Procedures When The Initial Procedure Goes Awry Or Has A Complication: Tips And Tricks For Getting Out Of Trouble
Michael B. Silva, Jr., MD

ENDOTENSION

9:01 – 9:06 Is Endotension Still A Reality With Modern Vascular Imaging: What Conditions Can Mimic It
Jacques Busquet, MD

9:07 – 9:12 Strategies For Managing A Patient With A Growing AAA Sac After EVAR But No Apparent Endoleak: Open Or Laparoscopic, Fenestrated Cuff Or Relining Or Observe
Michael P. Jenkins, MBBS, BSc, MS

ENDOLEAKS

9:13 – 9:18 Better Imaging Of Endoleaks (Type I) With Contrast MRI Permits Better Diagnosis And Treatment Leading To Better Outcomes
Frans L. Moll, MD, PhD

9:19 – 9:24 Aneurysm Sac Filling: A New Endovascular Technique To Eliminate Any Kind Of Endoleak
Michael J. Jacobs, MD

9:25 – 9:30 Partial Conversion To Treat Persistent Type 2 Endoleaks: When And How To Do It
*Nicola Mangialardi, MD
Sonia Ronchey, MD, PhD*

9:31 – 9:36 Diagnosis And Treatment Of Endoleaks With Nellix Endografts (EVAS): Much Is Different
Fabio Verzini, MD, PhD

9:37 – 9:42 Type 2 Endoleak Embolization By Laser-Assisted Transendograft Micropuncture: How To Do It And Results
Mark W. Mewissen, MD

9:43 – 9:48 Keys To Success With Embolic Treatment Of Complex Recalcitrant Type 2 Endoleaks After EVAR
Martin R. Back, MD

9:49 – 9:54 **DEBATE:** Fenestrated Cuffs Are The Best Way To Treat Persistent Type 1A Endoleaks After EVAR
Timothy A.M. Chuter, DM

9:55 – 10:00 **DEBATE:** Not So: Chimney Techniques Are The Best Way To Treat Persistent Type 1A Endoleaks After EVAR
Konstantinos P. Donas, MD

10:01 – 10:08 Panel Discussion

10:08 – 10:20 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 34 (Grand Ballroom West, 3rd Floor)

HISTORY, MEDICAL/SURGICAL TOPICS AND IMPORTANT ISSUES

Moderators: *Herbert Dardik, MD*
Bruce A. Perler, MD, MBA

10:20 – 10:25 What Did Leonardo da Vinci Know About Atherosclerosis Before William Harvey
Christopher K. Zarins, MD

10:26 – 10:31 The First Published Report On CAS In 1977: An Interesting Story: How Was It Received
Klaus D. Mathias, MD

MEDICAL/SURGICAL TOPICS

10:32 – 10:37 Tests For The Hypercoaguable State Are Overused And Unnecessary In Most Vascular Patients: When Are They Needed And Helpful
Elna M. Masuda, MD

10:38 – 10:43 Atherosclerotic Plaque Regression: Is It Now A Reality: How Can It Occur: And What Are The Expectations For The Future
Ralph G. DePalma, MD

10:44 – 10:49 Value Of Frailty Indices In Vascular Surgical Procedures: What Are They And How Can They Be Helpful
Gregory L. Moneta, MD

10:50 – 10:55 Tips And Tricks In The Management Of Pediatric Vascular Trauma
Meryl E. Davis, FRCS
George Hamilton, MD

10:56 – 11:01 Panel Discussion

Moderators: *Ramon Berguer, MD, PhD*
Enrico Ascher, MD

IMPORTANT ISSUES

11:01 – 11:06 How Can Vascular Surgeons Reconcile Work And Family Responsibilities And Time Commitments And Succeed With Both
Marshall E. Benjamin, MD

11:07 – 11:12 Patient Benefit From Meetings Of The Vascular Community For Education, Innovation And Evidence With Active Collaboration Of CME And Industry Regulatory Bodies
Roger M. Greenhalgh, MD

11:13 – 11:18 Current Status Of MOC For Vascular Surgeons: Why Vascular Surgeons Should Join The Cardiologists To Resist The Existing Onerous Requirements
John F. Eidt, MD

11:19 – 11:24 Variability In Operating Time For The Same Procedure By Different Vascular Surgeons: How Does It Correlate With Outcomes: Do Slow Surgeons Get Better Or Worse Results
Jack L. Cronenwett, MD

11:25 – 11:30 How Should Academic Activity Be Rated And Rewarded: Should There Be Academic RVUs To Define And Quantitate Academic Activity And Productivity: How To Set Up Such A System
Mark G. Davies, MD
Alan B. Lumsden, MD

11:31 – 11:36 Lessons Learned From 2 Disasters: 9-11 And Superstorm Sandy
Mark A. Adelman, MD

- 11:37 – 11:42** Why Should Vascular Surgeons Get An MBA Or Other Advanced Degree
Robert B. McLafferty, MD, MBA
- 11:43 – 11:48** What Is The Value Of Vascular And Endovascular Societies: What Should They Do For Us And Our Specialty: Which Ones Should We Join And Why
Donald B. Reid, MD
- 11:49 – 11:54** Panel Discussion
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 35 (Grand Ballroom West, 3rd Floor)

ISSUES, ETHICS, HEALTH CARE REFORM AND THE AFFORDABLE CARE ACT (ACA)

Moderators: *Robert M. Zwolak, MD, PhD*
Ronald L. Dalman, MD

- 1:00 – 1:05** The Importance Of Dynasties In Vascular Surgery: Why They Develop And Why They Fall
Jerry Goldstone, MD
- 1:06 – 1:11** An Ethicist Looks At Overuse Of Procedures And Admissions By Doctors And Hospitals: Why Our Health Care System Incentivizes Such Overuse In Every Institution
James W. Jones, MD, PhD, MHA
- 1:12 – 1:17** The Battle Of Quality vs. Quantity In Hospital Administration: Quantity Wins All Too Often
Clifford M. Sales, MD, MBA
- 1:18 – 1:23** How Patients (And Their Medical Doctors) Should Be Aware Of Unnecessary Tests And Procedures On Their Veins And Arteries: Such Procedural Overuse Can Harm Patients And Increase Health Care Costs
Russell H. Samson, MD, RVT
- 1:24 – 1:29** How To Survive In An ACO-ACA Environment: Is Our Health Care System Crumbling
Bruce A. Perler, MD, MBA
- 1:30 – 1:35** What Is Happening With The Device Tax Component Of The ACA: What Are The Detrimental Effects Of The ACA On Industry
Pete R. Yonkman
Kem Hawkins, MBA
- 1:36 – 1:41** The Negative Impact Of The ACA On The Country And Health Care Is Worse Than We Thought It Would Be
Clifford J. Buckley, MD
- 1:42 – 1:47** There Are Some Good Parts To The ACA That Should Be Preserved: How Can That Be Done
Timothy F. Kresowik, MD
- 1:48 – 1:53** Perils Of The ACA For Patients: Health Care Exchanges Or Short Changes
James H. Black III, MD
- 1:54 – 1:59** Perspectives On Consolidation In The Health Care Industry: What Is Good And What Is Bad: How Can We Physicians Cope
Michael R. Jaff, DO
- 2:00 – 2:05** Medical Decision Making Should Be Shared With The Patient Especially With Vascular Patients: It Can Improve Care
Dirk T. Ubbink, MD, PhD

2:06 – 2:11 It Is An Imperfect World For Everyone – But Especially For Physicians And Super-Especially For Vascular Surgeons/Specialists
David H. Deaton, MD

2:12 – 2:20 Panel Discussion

SESSION 36 (Grand Ballroom West, 3rd Floor)
ACOs, GOVERNING BODIES (BOARDS/RRC), INDEPENDENCE, EDUCATION, REIMBURSEMENTS, TRAINING, SIMULATION

Moderators: *Peter F. Lawrence, MD*
Michel Makaroun, MD

2:20 – 2:25 Strategies To Allow Us To Confront The Changing Health Care System And ACOs
John H. Furtek, BS, RT(r)

2:26 – 2:31 Why ACOs Have Not And Will Not Decrease Health Spending In Cardiovascular Care
Philip P. Goodney, MD, MS

2:32 – 2:37 Is The RRC-S (Residency Review Committee-Surgery) Working Well For Vascular Surgery: Should We Have An Independent RRC-VS
Ronald L. Dalman, MD

2:38 – 2:43 Current Impact Of The 0+5 Vascular Surgery Residency Programs: Should Vascular Surgery Now Become An Independent Specialty As It Is In Most Other Civilized Countries
John F. Eidt, MD

2:44 – 2:49 The Need For Continuing Evolution And Recognition Of Vascular Surgery As An Independent Specialty
James C. Stanley, MD

2:50 – 2:55 Role Of Our Vascular Journals In Dealing With Political, Training And Governance Issues Facing Vascular Surgery
Timothy M. Sullivan, MD

2:56 – 3:01 Update On 0+5 Vascular Residencies: Numbers, Levels Of Resident Satisfaction And Incidence Of Dropouts
Murray L. Shames, MD

3:02 – 3:07 Comparison Of Knowledge Base, Surgical Skills And Other Characteristics Of 5+2 And 0+5 Vascular Surgery Residents
Robyn A. Macsata, MD

3:08 – 3:13 Importance Of Promoting The Careers Of Junior Faculty Vascular Surgeons (As Well As Residents And Fellows): A System For Doing It
Karl A. Illig, MD
John F. Eidt, MD

3:14 – 3:19 Panel Discussion

REIMBURSEMENT ISSUES

Moderators: *Ramon Berguer, MD, PhD*
Kim J. Hodgson, MD

3:19 – 3:24 Update On Coding And Reimbursement Issues For Vascular Surgery: Now, In 2016 And Beyond
Sean P. Roddy, MD

3:25 – 3:30 Financial Impact Of The ACA To Date And In The Future: What Will It Mean To Vascular Surgeons
Robert M. Zwolak, MD, PhD

SIMULATION ISSUES

- 3:31 – 3:36** How To Shift The Learning Curve For Vascular Surgery From The Patient To A Model: The Vascular International Training Course Helps To Do This
Hans-Henning Eckstein, MD, PhD
- 3:37 – 3:42** Advantages In Patient Specific Simulation For EVAR For Elective And Ruptured AAAs
Isabelle Van Herzeele, MD, PhD
Mario L. Lachat, MD
- 3:43 – 3:48** The Introduction Of New Technology For Treating Vascular Lesions May Lead To Unnecessary Adverse Events: Many Of These Can Be Avoided By Simulation And Team Training
Colin D. Bicknell, MD
- 3:49 – 4:00** Panel Discussion And Break
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 37 (Grand Ballroom West, 3rd Floor)

VASCULAR CARE, MALPRACTICE LAW, CONTRACTS, COSTS, REIMBURSEMENT AND THE FDA

Moderators: *Russell H. Samson, MD, RVT*
Sean P. Roddy, MD

- 4:00 – 4:05** The Indications And Results For EVAR Differ Widely In Different Regions: What Is The Reason
Barend M.E. Mees, MD, PhD
- 4:06 – 4:11** Health Care Literacy In Vascular Patients Is Inadequate: Do We Need Better Ways To Inform Patients
Olivier H.J. Koning, MD, PhD
- 4:12 – 4:17** What Is The Patient's Compensation System Law: Where Is It In Effect; How Will It Help End The Malpractice Problem, Help Patients And Doctors To Be Treated Fairly And Cut Health Care Costs
O. William Brown, MD, JD
- 4:18 – 4:23** How Vascular Surgeons And Specialists Should Negotiate Contracts With Hospitals, Employers Or Partners: Tips And Tricks
Hillel Presser, Esq., MBA
- 4:24 – 4:29** Vascular Surgery Patients Readmissions: What Can And Cannot Be Modified And Why Financial Penalties For Many Of Them Are Unfair
Peter Henke, MD
- 4:30 – 4:35** How To Make EVAR More Cost Effective And Profitable For Hospitals In Today's Health Care Environment
W. Charles Sternbergh III, MD
- 4:36 – 4:41** Tips And Tricks On How Vascular Surgeons Can Fairly Maximize Collections And Income In A Practice Or An Academic Setting
Alan M. Graham, MD
- 4:42 – 4:47** What The FDA Is Doing To Facilitate Access To New Devices Rapidly And With Assured Safety And Effectiveness – In Both The Civilian And Military Spheres
Kenneth J. Cavanaugh, Jr., PhD
J. Pablo Morales, MD
Brian Pullin, MD
- 4:48 – 4:53** When Do I Need A Physician Sponsored Investigative Device Exemption (PSIDE) And How Do I Get It
Dorothy B. Abel, BSBME

4:54 – 4:59 Tips And Tricks To Make A PSIDE Affordable
Carlos H. Timaran, MD

5:00 – 5:06 Panel Discussion

SESSION 38 (Grand Ballroom West, 3rd Floor)

ISSUES: PUBLISHING MDs' RESULTS; RESEARCH TIPS; EVIDENCE BASED MEDICINE; RCTs; GUIDELINES; ACA; DISHONEST WITNESSES; VQIs AND SOCIETIES

Moderators: Anton N. Sidawy, MD, MPH

Ronald M. Fairman, MD

5:06 – 5:11 Publishing Vascular Surgeons' Mortality Results In The Public Press Can Be A Disaster For The Surgeon And Bad For Patient Care: The UK Experience
Ian Loftus, MD

5:12 – 5:17 Issues In Planning And Interpreting Small Trials: How To Make Their Data Meaningful
Charles C. Miller, PhD

5:18 – 5:23 How To Get Access To Population Based Datasets
Todd R. Vogel, MD, MPH

5:24 – 5:29 The Tyranny Of p Values: The Importance Of Knowing The Details And Flaws In The Holy Grail Of RCTs
Jerry Goldstone, MD

5:30 – 5:35 The New SVS Practice Guidelines For Lower Extremity Occlusive Disease: Key Take Home Messages And How They Prevent Over Usage Of SFA Stents
Frank B. Pomposelli, MD
Michael S. Conte, MD

5:36 – 5:41 Validity Of The New SVS Lower Extremity Threatened Limb Classification System: The WIFI System (Wound Ischemia And Foot Infection): It Allows Prediction Of Poor Outcomes With CLI Treatment
Marc L. Schermerhorn, MD
Joseph L. Mills, MD

5:42 – 5:47 Preferential Funding For Primary Care vs. Specialty Care And Penalties For Readmissions (As Promoted In The ACA) Are Bad For Patients And Society And Will Not Decrease Costs
Bruce A. Perler, MD, MBA

5:48 – 5:53 What To Do When Physician Expert Witnesses Provide False Testimony Against You
O. William Brown, MD, JD

5:54 – 5:59 VQI In A Community Hospital: How It Succeeded In Improving Vascular Care And Resolving Harmful Turf Issues
Tej M. Singh, MD, MBA

6:00 – 6:05 **DEBATE:** Positive Value Of VQI Initiatives
Larry W. Kraiss, MD

6:06 – 6:11 **DEBATE:** Limitations And Possible Downsides Of VQI Initiatives
Kenneth Ouriel, MD, MBA

6:12 – 6:17 How Vascular Societies Should Prevent Risk Averse Behavior Of Surgeons And Gaming The System For The Benefit Of Surgeons And To The Detriment Of Patients: Do The Societies Do It Well
Jonathan D. Beard, ChB, MEd

6:18 – 6:25 Panel Discussion

End of Program E

PROGRAM F (SESSIONS 39-46)
MORE ON AORTIC DISSECTION, TEVAR, TAAAs,
JUXTA- AND PARARENAL AAAs, PARALLEL
GRAFTS, FENESTRATED AND BRANCHED EVAR
(F/BEVAR), MULTILAYER FLOW MODULATING
(MLFM) STENTS, RECORDED LIVE CASES,
ABDOMINAL AORTA AND EVAR

Trianon Ballroom, 3rd Floor

SESSION 39 (Trianon Ballroom, 3rd Floor)

**MORE NEW DEVELOPMENTS RELATING TO
THORACIC AORTA AND AORTIC DISSECTIONS**

Moderators: *Germano Melissano, MD*

Michael J. Jacobs, MD

- 6:45 – 6:50** How Often Are Additional Procedures (Open Or Endo) Required After An Open Ascending Aortic Repair Of A Type A Aortic Dissection (TAAD)
Ross Milner, MD
- 6:51 – 6:56** Clinical Outcomes Of TBADs In Patients With Connective Tissue Diseases (Marfans, Loeys-Dietz, Etc.) Are Worse Than In Those Without
Richard G.J. Gibbs, FRCS
- 6:57 – 7:02** Open Retrograde Access To Branch Arteries As A Bailout For Failed Antegrade Access During F/BEVAR
Eric L.G. Verhoeven, MD, PhD
- 7:03 – 7:08** Total Arch Replacement For Aortic Dissections: Value Of Frozen Elephant Trunk Procedures With EVITA, Jotec Or Thoraflex Hybrid (Vascutek) Grafts
Ali Khoynzhad, MD, PhD
- 7:09 – 7:14** MR Elastography To Characterize The Aortic Wall: Implications For The Design And Sizing Of Ascending Aortic Devices
Rachel E. Clough, MD, PhD
- 7:15 – 7:20** **DEBATE:** Branched Grafts Are The Best Endovascular Method To Treat Arch Aneurysms And TAAAs: Parallel Grafts Have Disadvantages
Stefan Haulon, MD
- 7:21 – 7:26** **DEBATE:** Disadvantages Of Off-The-Shelf And Patient Specific Branched Grafts: Parallel Grafts Are Better Solutions
Armando C. Lobato, MD, PhD
- 7:27 – 7:32** Pitfalls In F/BEVAR And How To Deal With Them
Götz M. Richter, MD, PhD
- 7:33 – 7:38** PET CT With 18F-FDG Can Predict Late Aortic Complications After TEVAR For TBADs
Natzi Sakalihasan, MD, PhD
- 7:39 – 7:44** Influence Of Respiratory And Cardiac Induced Movement On Precise Aortic Arch Endograft Deployment
Geert Willem H. Schurink, MD, PhD
- 7:45 – 7:51** Panel Discussion

SESSION 40 (Trianon Ballroom, 3rd Floor)

MORE TOPICS RELATING TO THE ASCENDING AORTA, THE ARCH AND PARALLEL GRAFTS

Moderators: *Ali Khojnejhad, MD, PhD*
Mario L. Lachat, MD

- 7:52 – 7:57** Further Experience With Longer Follow-Up On Arch Chimney Grafts: When Do They Work And Pitfalls To Avoid So They Do Not Fail
Nicola Mangialardi, MD
Sonia Ronchey, MD, PhD
- 7:58 – 8:03** In Vitro Analysis Of Parallel Grafts: How They Work And Why They Fail: New Lessons Learned
Jan D. Blankensteijn, MD
- 8:04 – 8:09** Tips And Tricks To Facilitate Successful Use Of Branched Endografts And Pitfalls To Avoid
Martin J. Austermann, MD
- 8:10 – 8:15** Use Of The VORTEC Technique – A Clampless, Sutureless Anastomosis Using An Endograft Connector To Revascularize The Supra-Aortic Branches Simplifies Hybrid Arch Repairs: Technique And Results
Zoran Rancic, MD, PhD
Mario L. Lachat, MD
- 8:16 – 8:21** Single Innominate Chimney Grafts: When Is It A Good Choice And When Is It Not
Boonprasit Kritpracha, MD
- 8:22 – 8:27** Various Cardiac Access Routes To Treat Ascending Aortic And Arch Lesions: Advantages And Limitations
Tilo Kölbel, MD, PhD
- 8:28 – 8:33** Redo Procedures After TEVAR: Why Needed; Tips, Tricks And Results; Value Of A Self-Expanding Extra Large Stent (Jotec E-XL)
Germano Melissano, MD
Roberto Chiesa, MD
- 8:34 – 8:39** Retrograde Aortic Dissection After TEVAR: Incidence, Risk Factors, Precautions And Treatment
Joseph S. Coselli, MD
Qurania Preventza, MD
- 8:40 – 8:46** Panel Discussion

SESSION 41 (Trianon Ballroom, 3rd Floor)

MORE TOPICS RELATED TO FENESTRATED, BRANCHED AND PARALLEL GRAFTS; JUXTARENAL AAAs AND TAAAs

Moderators: *Eric L.G. Verhoeven, MD, PhD*
Timothy A.M. Chuter, MD

- 8:46 – 8:51** Optimal Choice Of Bridging Stent-Grafts For F/BEVAR: What Is Available And Which Is Best
Richard G. McWilliams, FRCR
- 8:52 – 8:57** 3 Or 4 FEVAR vs. Standard FEVAR With 2 Fenestrations And A Scallop For The SMA: Advantages, Limitations And Differing Results
Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD
- 8:58 – 9:03** How To Avoid Brachial Or Axillary Access With Complex AAA Repairs: Tips And Tricks
Joshua D. Adams, MD
Claudio J. Schonholz, MD

- 9:04 – 9:09** **DEBATE:** EVAR With Short (8-15 mm) Necks Are Best Treated With Standard EVAR Using Newer Endograft Devices
Hence J.M. Verhagen, MD, PhD
- 9:10 – 9:15** **DEBATE:** EVAR With Short (8-15 mm) Necks Are Best Treated By FEVAR
Matthew J. Eagleton, MD
- 9:16 – 9:21** Strategies And Techniques To Treat Short Proximal Neck AAAs
Giovanni Torsello, MD
- 9:22 – 9:28** Panel Discussion
- Moderators:** *Jason T. Lee, MD*
Stephan Haulon, MD
- 9:28 – 9:33** **DEBATE:** Endovascular Methods Are Now The Best Treatment For Most TAAAs
Timothy A.M. Chuter, DM
- 9:34 – 9:39** **DEBATE:** Not So: Open Repair Is Still The Best Treatment For Many (Possibly Most) TAAAs
Hazim J. Safi, MD
- 9:40 – 9:45** Eight Simple Markers That Can Suggest The Presence Of A Thoracic Aneurysm
John A. Eleftheriades, MD
- 9:46 – 9:51** With Complicated TBADs, Are The Hard Indications For Treatment (Rupture And Malperfusion) Associated With Higher Mortality And Morbidity Than The Soft Indications (Pain And Persistent Hypertension)
Matt M. Thompson, MD
- 9:52 – 9:57** Update On Tips And Tricks For Treating Arterial Complications Of Ehlers-Danlos Syndrome, Marfan's And Other Connective Tissue Disorders: Endografts Can Be Valuable
James H. Black III, MD
- 9:58 – 10:03** Accurate Placement Of Thoracic Endografts Parallel To The Aortic Arch By Controlling Device Angulation Improves Outcomes: Techniques For Doing So
Ali Azizzadeh, MD
- 10:04 – 10:09** Purse-String Temporary Closure Of Femoral Access Sites During Complex EVARs (B/FEVAR) To Decrease Limb And Spinal Cord Ischemia
Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD
- 10:10 – 10:15** How To Identify Healthy Aorta To Land The Ends Of Aortic Endografts With Complex AAAs: Is It Always Necessary To Do So
Matthew J. Eagleton, MD
- 10:16 – 10:23** Panel Discussion
- 10:23 – 10:38** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 42 (Trianon Ballroom, 3rd Floor)

UPDATE ON THE STATUS OF MULTILAYER FLOW MODULATING STENTS (MLFM) FOR THE TREATMENT OF AORTIC ANEURYSMS AND DISSECTIONS

Moderators: *Frank J. Veith, MD*
Clifford J. Buckley, MD

- 10:38 – 10:43** The MLFM Stent Is A Better Treatment For TAAAs Than F/BEVAR, Parallel Grafts, Hybrid Repairs And Full Open Repair And Here Is The Data
Sherif Sultan, MD

- 10:44 – 10:49** 4-Year Results Of The MLFM Stent For The Treatment Of Complex Aortic Aneurysms: From The French Registry
Claude D. Vaislic, MD
- 10:50 – 10:55** Why I Am Still Somewhat Skeptical
Mark F. Fillinger, MD
- 10:56 – 11:01** For What Aortic Lesions Is The MLFM Stent An Effective Treatment: Tips And Tricks To Make It Work
Erno Ramsey-Semmelweis, MD
- 11:02 – 11:07** When Is The MLFM Stent An Effective Treatment Of Arch And Ascending Aortic Aneurysms And When Is It Not: A Partly Positive View And Experience
Ralf R. Kolvenbach, MD
- 11:08 – 11:13** Treatment Of Aortic Dissection And Complex TAAAs With The MLFM Stent: Experience In More Than 30 Patients
Victor S. Costache, MD, PhD
- 11:14 – 11:19** 4-Year Experience With MLFM Stents For The Treatment Of Complex Aortic Aneurysms: When They Do Not Work
Thomas Larzon, MD, PhD
- 11:20 – 11:25** Update On The MLFM Stent For Treatment Of Complex Aortic Aneurysms: Is Its Star Rising
Frans L. Moll, MD, PhD
- 11:26 – 11:31** Role Of Multilayer Uncovered Stents For The Successful Treatment Of TAAAs: The Concept Works: When And How
Qingsheng Lu, MD
Zaiping Jing, MD
- 11:32 – 11:37** Is The MLFM Stent A Valid Treatment In High Risk 80- And 90-Year Olds With Paravisceral And TAAAs
Arno von Ristow, MD
- 11:38 – 11:43** The MLFM Stent Has A Role In The Treatment Of Complex Aortic Aneurysms: What Is It And What More Do We Need To Know
Christos D. Liapis, MD
- 11:44 – 11:49** Histopathological Findings In Patients And Animals After Implantation Of MLFM Stents: Characteristics Of Endothelialization And Thrombus Formation
Antoine Alves, MD
- 11:50 – 12:00** Panel Discussion
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 43 (Trianon Ballroom, 3rd Floor)

MORE TOPICS RELATED TO AAAs, THE ABDOMINAL AORTA AND EVAR

Moderators: *Roger M. Greenhalgh, MD*
Kenneth Ouriel, MD, MBA

- 1:00 – 1:05** Comparative Changes In Aortic Neck Morphology After EVAR And Open AAA Repair: Is Open Repair Really That Good: From The DREAM Trial
Jan D. Blankensteijn, MD
- 1:06 – 1:11** EVAR Strategy To Deal With A Proximal Neck Over 35 mm In Diameter
Jacques Busquet, MD

- 1:12 – 1:17** Patterns Of Rupture Of AAAs After EVAR: How Does It Differ From Rupture Patterns In Untreated AAAs
Markus K. Furrer, MD
- 1:18 – 1:23** Differences In AAA Size At Rupture Between Patients Treated By EVAR And Those Not So Treated
James May, MD, MS
- 1:24 – 1:29** Progress In 18F-FDG Uptake On PET CT And Other Markers In Predicting AAA Rupture Risk
Natzi Sakalihan, MD, PhD
- 1:30 – 1:35** Current Indications For Repairing Small AAAs (<5 cm) By EVAR; By Open Repair: Has Anything Changed
Ronald M. Fairman, MD
- 1:36 – 1:42** Panel Discussion

SESSION 44 (Trianon Ballroom, 3rd Floor)

RECORDED LIVE COMPLEX ENDOVASCULAR CASES: COMPLICATIONS WITH SOLUTIONS

Moderators: *Plinio Rossi, MD*

Andrew Holden, MBChB

Carlo Setacci, MD

Frank J. Veith, MD

- 1:42 – 1:54** Single Session Pharmacomechanical Venous Thrombolysis
Gerard J. O'Sullivan, MD
- 1:54 – 2:06** Stent Graft-Induced New Entry (SINE) After TEVAR For Stanford Type B Aortic Dissection
Donald D. Lee, MD
- 2:06 – 2:18** Extensive Aorto-Iliac Occlusive Disease: A Modified CERAB Technique
Andrew Holden, MBChB
- 2:18 – 2:30** Hydrodynamic Boost: A Novel Re-Entry Technique In Distal BTK Vessel: When And How To Do It
Roberto Ferraresi, MD
- 2:30 – 2:42** CLI Patient Following 2 Failed Bypass Surgery Procedures Who Was Told The Next Step Would Be Amputation
Thomas Zeller, MD
- 2:42 – 2:54** Endovascular Techniques To Restore The Femoral Artery After Failed Bypass
Andrej Schmidt, MD
- 2:54 – 3:02** General Discussion
- 3:02 – 3:17** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 45 (Trianon Ballroom, 3rd Floor)

RECORDED LIVE COMPLEX ENDOVASCULAR CASES FROM LIEPZIG AND LINC, EXCITING TECHNICAL CHALLENGES AND SOLUTIONS

Moderator: *Dierk Scheinert, MD*

- 3:17 – 3:25** Latest Techniques For Aortoiliac Reconstruction Of TASC C And D Lesions: Are Covered Stents The Solution
Presenters: Koen Deloose, MD
- 3:25 – 3:37** Recorded Case: Chimney Reconstruction Of A Complete Aortoiliac Occlusion (Leriche Syndrome)
Presenters: Peter C.J. Goverde, MD, Andrej Schmidt, MD

- 3:37 – 3:45** Patient Specific Approaches For Femoropopliteal Lesions: Stents, Atherectomy And Drug-Eluting Devices
Presenters: D. Christopher Metzger, MD
- 3:45 – 3:57** Recorded Case: Recanalization Of A Severely Calcified SFA Occlusion With Interwoven Nitinol Stents
Presenters: M. Ulrich, MD, Andrej Schmidt, MD
- 3:57 – 4:05** The Angiosome Concept For BTK Interventions: How to Translate It Into Clinical Practice
Presenters: Giancarlo Biamino, MD, PhD
- 4:05 – 4:17** Recorded Case: Recanalization Of A Tibioperoneal Trunc Occlusion With DES Via Retrograde Peroneal Access
Presenters: Andrej Schmidt, MD, C. Piorkowski, MD
- 4:17 – 4:25** Current And Future Concepts To Improve Outcome Of BTK-Interventions In CLI
Presenters: Ramon L. Varcoe, MD
- 4:25 – 4:37** Panel Discussion

SESSION 46 (Trianon Ballroom, 3rd Floor)

MORE TOPICS RELATED TO AAAs, THE AORTA AND EVAR

*Moderators: James May, MD, MS
Enrico Ascher, MD*

- 4:37 – 4:42** How To Manage EVAR With Small Distal Aortas: When Are Bifurcated Grafts OK And When Is An Aorto-Uni-Iliac Device Needed
David J. Minion, MD
- 4:43 – 4:48** Screening For AAAs In Women: When Should They Be Screened And When Should They Not Be
*Andrew N. Nicolaides, MS
Mohsen Chabok, MD, MSc*
- 4:49 – 4:54** Is EVAR Good Treatment For Young (<60) AAA Patients: When Is Open Repair The Best Option
Thomas L. Forbes, MD
- 4:55 – 5:00** **DEBATE:** Off-Label Use Of EVAR Devices May Have Satisfactory Early Outcomes, But Long-Term Outcomes Are Guarded
Ali F. AbuRahma, MD
- 5:01 – 5:06** **DEBATE:** Not So: Off-Label Use Of EVAR Devices Is Sometimes Justified And Does Not Yield Higher Long-Term Failure Rates If Certain Requirements Are Fulfilled
B. Patrice Mwiipatayi, FRACS
- 5:07 – 5:12** What Has Changed Since Our Oft Quoted 2011 Circulation Article: I Now Believe Some Off-Label Use Of EVAR Devices Is Justified And Safe
Andres Schanzer, MD
- 5:13 – 5:19** Panel Discussion

*Moderators: Thomas L. Forbes, MD
Ali F. AbuRahma, MD*

- 5:19 – 5:24** Has EVAR Led To A Decrease In AAA Rupture Over The Last 2 Decades Or Has It Just Led To More Unnecessary AAA Repairs
James May, MD, MS
- 5:25 – 5:30** The Iliac Seal Zone In EVAR: Its Dynamics And Clinical Consequences
Hence J.M. Verhagen, MD, PhD

- 5:31 – 5:36** Diminished Sexual Function In AAA Patients Occurs After EVAR As Well As Open Repair
Jan S. Brunkwall, MD, PhD
- 5:37 – 5:42** Are Newer EVAR Devices Better Than The Previous Ones: Do They Produce Better Results Or Are They Just Easier To Use
Marc R.H.M. van Sambeek, MD, PhD
- 5:43 – 5:48** Patient Reported Quality Of Life (QOL) Measures After Open And Endo AAA Repair: Which Is Better
Robert J. Hinchliffe, MD
- 5:49 – 5:55** Panel Discussion
End of Program F

THURSDAY, NOVEMBER 19, 2015

6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor

6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor

6:00 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT THURSDAY PROGRAMS

PROGRAM G: SESSIONS 47-54

New Techniques And Technology, Parallel Grafts, F/BEVAR, Military Topics, Ruptured AAAs, Robotics, Guidance, New Concepts And Controversies With Fenestration, EVAS, Embolization, Training Trauma Surgeons

6:45 A.M. – 5:55 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM H: SESSIONS 55-62

New Devices For Abdominal Aorta And EVAR; Thoracic Aorta And TEVAR; Lower Extremity And Stents And Stent-Grafts; EndoAnchors; Embolization And Thrombectomy

6:45 A.M. – 5:44 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM I: SESSIONS 63-70

Superficial Venous Disease

7:30 A.M. – 5:00 P.M.

Trianon Ballroom, 3rd Floor

Course Leaders: Jose I. Almeida, MD, RVT, RPVI

Lowell S. Kabnick, MD, RPhS

Thomas W. Wakefield, MD

PROGRAM J: SESSIONS 71-76

AIMSymposium Multidisciplinary Acute Stroke Management

8:00 A.M. – 5:30 P.M.

Murray Hill Suites East and West, 2nd Floor

Course Leader: Allan L. Brook, MD

PROGRAM G (SESSIONS 47-54)

NEW TECHNIQUES AND TECHNOLOGY, PARALLEL GRAFTS, F/BEVAR, MILITARY TOPICS, RUPTURED AAAs, ROBOTICS, GUIDANCE, NEW CONCEPTS AND CONTROVERSIES WITH FENESTRATION, EVAS, EMBOLIZATION, TRAINING TRAUMA SURGEONS

Grand Ballroom East, 3rd Floor

SESSION 47 (Grand Ballroom East, 3rd Floor)

NEW TECHNIQUES, TECHNOLOGY AND CONCEPTS

Moderators: *Keith D. Calligaro, MD*

Nicholas J.W. Cheshire, MD

- 6:45 – 6:50** Implantable Microtechnology To Remotely Monitor Bypass Function
Richard F. Neville, MD
- 6:51 – 6:56** MR Based 3D Imaging In Peripheral Vascular Interventions: A Way To Reduce Radiation Exposure
Jos C. van den Berg, MD, PhD
- 6:57 – 7:02** Innovative Approaches To Cell Therapy For CLI And Bold MRI To Measure Calf Perfusion To Monitor Its Effects
Bijan Modarai, MD, PhD
- 7:03 – 7:08** Percussion Crossing Device (The Piculet Hammer) To Facilitate Crossing Heavily Calcified CTOs
Max Amor, MD
- 7:09 – 7:14** Shockwave Lithoplasty: A Balloon That Transmits Shockwaves To Crack Heavily Calcified Lesions And Then Dilate Them (PTA)
Andrew Holden, MBChB
Marianne Brodmann, MD
- 7:15 – 7:20** Variable Curve Directable Guide Sheath From Aptus To Facilitate Other Challenging Endovascular Procedures
Joshua D. Adams, MD
Claudio J. Schonholz, MD
- 7:21 – 7:26** What Has Anatomy And Pathology Taught Us About Renal Denervation: Where Are The Nerves That Need To Be Destroyed And What Damage Can Radiofrequency Do To The Renal Artery
Renu Virmani, MD
- 7:27 – 7:32** Human Tissue Engineered Arterial Grafts Are Finally Working As Lower Extremity Bypasses And Dialysis Access: Why And Prospects For The Future
Jeffrey H. Lawson, MD, PhD
- 7:33 – 7:38** What Is New In Better Balloon Angioplasty Catheters: Can They Inflate In A Curved Configuration
Timothy A.M. Chuter, DM
- 7:39 – 7:44** Value Of 3D Printing To Create A Vascular Phantom To Facilitate And Improve Complex AAA Repairs
Benjamin W. Starnes, MD
- 7:45 – 7:50** How To Non-Invasively Measure Blood Flow And Lesion Significance In Coronary Arteries With CTA: Fractional Flow Reserve (FFR) Is Valuable There: Will It Be In Other Arterial Beds And How Will It Work
Christopher K. Zarins, MD
- 7:51 – 7:58** Panel Discussion

SESSION 48 (Grand Ballroom East, 3rd Floor)

ADVANCES IN BRANCHED AND FENESTRATED EVAR (F/BEVAR) AND PARALLEL GRAFTS FOR LESIONS NEAR TO OR IN THE VISCERAL AORTA

Moderators: *Timothy A.M. Chuter, DM*

Frank J. Veith, MD

- 7:58 – 8:03** How Durable Are F/B Endografts For Various Aortic Lesions Including TAAAs
Tara M. Mastracci, MD

- 8:04 – 8:09** How Durable Are Parallel Grafts (Chimney And Periscope Grafts) For Various Aortic Lesions Including TAAAs
Mario L. Lachat, MD
- 8:10 – 8:15** Parallel Grafts (Chimneys, Etc.) Do Work As Proven By The PERICLES Registry: Midterm Results With A Variety Of Devices
Konstantinos P. Donas, MD
Jason T. Lee, MD
- 8:16 – 8:21** Parallel Grafts Are Valuable Even If F/BEVAR Is Available
Frank J. Criado, MD
- 8:22 – 8:27** Status Of Sandwich Grafts For Aneurysms Involving The Visceral Segment: What Are The Midterm Results – Single Center And Multicenter
Armando C. Lobato, MD, PhD
- 8:28 – 8:33** Sandwich (Parallel) Grafts Work For TAAAs: How Much Oversizing Of The Main Endograft And Overlap Of The Branch Grafts Are Required
Ralf R. Kolvenbach, MD
- 8:34 – 8:39** Failure Modes Of Chimney And Other Parallel Grafts And How They May Be Overcome
Claude Mialhe, MD
- 8:40 – 8:45** Inner Branched Endografts: A Better Solution For F/BEVAR Than Other Configurations For Treating Visceral Aortic Segment Lesions
Marcelo Ferreira, MD
- 8:46 – 8:51** Role Of Off-The-Shelf Fenestrated And Branched Grafts For Treating AAAs Involving The Visceral Segment Of The Aorta (Cook P-Branch And T-Branch) Devices: What Percent Of Patients Are Suitable
Mark A. Farber, MD
- 8:52 – 8:57** Patient Specific And Off-The-Shelf Devices Will Not Suffice For Many Patients With AAAs Involving The Visceral Aortic Segment: What Is The Solution
David J. Minion, MD
- 8:58 – 9:05** Panel Discussion
- 9:05 – 9:20** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 49 (Grand Ballroom East, 3rd Floor)

MORE TOPICS RELATED TO F/BEVAR AND PARALLEL GRAFTS FOR TREATMENT OF AAAs AND TAAAs

Moderators: *Mark A. Adelman, MD*
Frans L. Moll, MD, PhD

MORE ON THORACOABDOMINAL ANEURYSMS (TAAAs)

- 9:20 – 9:25** For Which TAAA Patient Is No Repair The Best Option: Better Than A B/FEVAR
Gustavo S. Oderich, MD
- 9:26 – 9:31** For Which TAAA Patient Is An Open Repair The Right Option: In What Type Of Institution
Richard P. Cambria, MD
- 9:32 – 9:37** For Which TAAA Patient Is A F/BEVAR The Best Option: In What Type Of Institution
Stephan Haulon, MD

- 9:38 – 9:43** In Which TAAA Patient Is A Parallel Graft Procedure With All Chimney And Periscope Grafts Or A Partially Hybrid Procedure The Best Treatment: What Are The Disadvantages Or Limitations
Mario L. Lachat, MD
- 9:44 – 9:49** In Which TAAA Patient Is A Sandwich Graft The Best Option: Advantages, Disadvantages And Limitations
Armando C. Lobato, MD, PhD
- 9:50 – 9:55** How To Detect And Best Manage Complications Of F/BEVAR: They Are Part Of The Game
Luis A. Sanchez, MD
- 9:56 – 10:01** Update On The French Countrywide Comparison Of Open Repair vs. F/BEVAR For The Treatment Of AAAs Involving The Visceral Aortic Segment: New 4-Year Results
Jean-Pierre Becquemin, MD
- 10:02 – 10:10** Panel Discussion

Moderators: *Evan C. Lipsitz, MD*
ShenMing Wang, MD, PhD

- 10:11 – 10:16** Staged Hybrid Repair Of Extensive TAAA Especially Those Associated With Aortic Dissections: Another Option With Advantages
Gilbert R. Upchurch, Jr., MD
- 10:17 – 10:22** A New Manifold Branched Endograft Device For Treating TAAAs And Other Complex Aortic Lesions: Concept, Advantages, Initial Clinical Experience Under A PSIDE
Patrick W. Kelly, MD
- 10:23 – 10:28** Tips And Tricks To Facilitate Upper Extremity Access For F/BEVAR And Parallel Graft Insertion And How To Avoid Complications
Carlos H. Timaran, MD
- 10:29 – 10:34** How Physicians Can Modify Gore C3 Devices To Facilitate F/BEVAR In Urgent TAAAs And Pararenal AAAs: Midterm Clinical Results
Wayne W. Zhang, MD
- 10:35 – 10:40** Can Parallel Graft EVAR Work In A Community Hospital Setting: Advantages And Limitations
Jeffrey Y. Wang, MD
- 10:41 – 10:46** Advances In Fenestrated And Branched Endografts To Simplify Their Use And Improve Results Including Methods To Minimize Lower Extremity Ischemia With Prolonged Sheath Insertion
Gustavo S. Oderich, MD
- 10:47 – 10:52** Midterm Results Following Hybrid (Octopus) Repair Of Complex TAAAs With And Without CT Disorders: It Is Still An Option In Experienced Centers
Sebastian E. Debus, MD, PhD
- 10:53 – 11:00** Panel Discussion

SESSION 50 (Grand Ballroom East, 3rd Floor)

IN TRIBUTE TO OUR MILITARY: TOPICS RELATED TO MILITARY TRAUMA AND VASCULAR SURGERY (7 AND 10-MINUTE TALKS)

Moderators: *Norman M. Rich, MD, DMCC*
Eric Elster, MD

- 11:00 – 11:07** Long-Term Results Of Vascular Injuries And Repairs After The Lebanon-Israel War
Samy S. Niteck, MD

- 11:08 – 11:15** Implementation Of A Vascular Trauma Course For Military And Civilian Surgeons In Germany: Important For Dealing With Combat And Terror Situations
Michael Engelhardt, MD
Afshin Assadian, MD
- 11:16 – 11:23** Novel Off-The-Shelf Conduits For Use With Military Vascular Injuries: The Humacyte Graft
Todd E. Rasmussen, MD
- 11:24 – 11:34** Medical Lessons From War: Turning Past Data Into Future Decisions And Guidelines
Eric Elster, MD
- 11:35 – 11:50** A Serious And Possible Limiting Problem With Visual Impairment From Protracted Space Flights: Increased Intracranial Pressure As A Possible Cause And What Can Be Done About It
Lee M. Morin, MD, PhD
- 11:50 – 12:00** Panel Discussion
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 51 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN THE MANAGEMENT OF RUPTURED AAAs (RAAAs): IT'S STILL CONTROVERSIAL

Moderators: *Benjamin W. Starnes, MD*
Jean-Pierre Becquemin, MD

THE RAAA CONTROVERSY

- 1:00 – 1:05** Level 1 Evidence (IMPROVE Trial, Etc.) Shows That EVAR Has No Survival Advantage Over Open Repair For RAAAs: The Outcome Of Treatment Depends On Bad Neck Anatomy More Than Treatment Method
Janet T. Powell, MD, PhD
Robert J. Hinchliffe, MD
- 1:06 – 1:11** Open Repair Is As Good As EVAR For RAAAs: The AJAX Trial Proves It
Willem Wisselink, MD
- 1:12 – 1:17** The IMPROVE And Other RCTs Reach A Misleading Main Conclusion – EVAR Has A Lower Mortality Than Open Repair For RAAAs If It Can Be Done
Frank J. Veith, MD
Martin Malina, MD, PhD
- 1:18 – 1:23** The Main Conclusions Of IMPROVE AJAX And ECAR - RCTs Comparing EVAR And Open Repair For RAAAs Are Incorrect: The Proof: 100% Of RAAAs Can Be Treated By EVAR Or Chimney EVAR With Low Early Mortality And Turn Down Rates
Thomas Larzon, MD, PhD
Dieter O. Mayer, MD
Mario L. Lachat, MD
Johnny Steuer, MD, PhD
- 1:24 – 1:29** With RAAAs, Patients With Hostile Neck Anatomy Do Not Have Worse Outcomes Than Those With Favorable Anatomy: Our Data Differs From Those In The IMPROVE Trial
Marc R.H.M. van Sambeek, MD, PhD
- 1:30 – 1:35** **DEBATE:** Midterm Re-Interventions And Survival Is No Better After EVAR For RAAAs Than After Open Repair
Willem Wisselink, MD

- 1:36 – 1:41** **DEBATE:** Midterm And Late Survival And Quality Of Life After EVAR For RAAAs Are Better Than After Open Repair
Dieter O. Mayer, MD
Zoran Rancic, MD, PhD
Mario L. Lachat, MD
- 1:42 – 1:47** Improving Nationwide Care For RAAAs: Lessons From The US And The UK: The Proportion Of Patients Reaching The Hospital But Not Treated Invasively (The Turn Down Rate) Is Shocking!
Matt M. Thompson, MD
- 1:48 – 1:53** Late Breaking (1-Year) Results From The IMPROVE Trial Shows That An EVAR Strategy May Be Better In Some Ways Than Open Repair For RAAAs
Robert J. Hinchliffe, MD
Janet T. Powell, MD, PhD
- 1:54 – 2:00** Panel Discussion

SESSION 52 (Grand Ballroom East, 3rd Floor)

MORE TOPICS RELATED TO RAAAs AND TAAAs

Moderators: *Gregg S. Landis, MD*

Alan B. Lumsden, MD

RAAA RELATED TOPICS

- 2:00 – 2:05** Asthma And The Drugs Used In Its Treatment Increases The Rupture Risk Of AAAs
Jes S. Lindholt, MD
- 2:06 – 2:11** What Are The Risk Factors For AAA Expansion And Rupture: Do Statins Help
Janet T. Powell, MD, PhD
- 2:12 – 2:17** Which Patients With RAAAs Benefit The Most From EVAR: Tips And Tricks For Doing It Well
Manish Mehta, MD, MPH
- 2:18 – 2:23** Acute Renal Failure Is More Common After Open Repair For RAAAs Than After EVAR
Jonathan R. Boyle, MD
- 2:24 – 2:29** Nellix Endografts Can Be Used Effectively To Treat RAAAs: Tips, Tricks, Advantages And Limitations
Michel M.P. Reijnen, MD, PhD
- 2:30 – 2:35** Emergency EVAR Should Be The New And Best Standard Of Care For RAAAs: Why
Hans-Henning Eckstein, MD, PhD
- 2:36 – 2:41** Open Repair Of RAAAs Is A Bad Option And Here Is Why
Sherif Sultan, MD

TAAA RELATED TOPICS

- 2:42 – 2:47** A New Preloaded Wire System To Simplify TAAA Branched Endograft Repairs
Timothy A. Resch, MD, PhD
- 2:48 – 2:53** What Is The Role Of Open Surgery For TAAAs And Thoracic Aneurysms In 2015 And Beyond
Michael J. Jacobs, MD
- 2:54 – 3:00** Panel Discussion
- 3:00 – 3:10** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 53 (Grand Ballroom East, 3rd Floor)

VASCULAR ROBOTICS AND GUIDANCE SYSTEMS

Moderators: Frans L. Moll, MD, PhD

Vicente Rimbau, MD, PhD

- 3:10 – 3:15** Progress In The Hansen Magellan Robot Technology For Catheter/Sheath Guidance: Results And How It Improves Procedural Success And Safety To The Patient And Operator
Nicholas J.W. Cheshire, MD
- 3:16 – 3:21** The Magellan Robot System Is Valuable For FEVAR, Carotid And Embolization Procedures
Celia Riga, BSc, MBBS, MD
Colin D. Bicknell, MD
- 3:22 – 3:27** Benefits From The Magellan Robotic Navigation With 3D Imaging: It Really Helps With Complex Endovascular Procedures
Alan B. Lumsden, MD
- 3:28 – 3:33** Lessons Learned From The Magellan Robot Catheter/Sheath Guidance System: Advantages And Limitation: When Is It Valuable And When Is It Essential
Barry T. Katzen, MD
- 3:34 – 3:39** What The ROVER Registry Tells Us About The Magellan Robot System And How It Has Facilitated Endo Procedures That Have Failed Standard Manual Attempts
Jean Bismuth, MD
- 3:40 – 3:45** How The Magellan Robotic System Helps In A Vascular Practice: And How It Improves Results And Efficiency
Joseph J. Ricotta II, MD, MS
- 3:46 – 3:51** The Magellan Robotic System Has Distinct Advantages In Performing Difficult Embolization Procedures: What Are They
Patrick E. Muck, MD
- 3:52 – 3:57** Robotic Aortic Surgery May Be A Failed Experiment But Robotically Directed Catheters Have A Bright Future In Vascular Surgery: Why
Hans M.E. Coveliers, MD, MBA
- 3:58 – 4:03** Duplex Guidance For Endovascular Interventions In Patients With Renal Insufficiency: Tips And Tricks To Make It Work
Natalie A. Marks, MD, RVT, RPVI
Enrico Ascher, MD
Anil P. Hingorani, MD
- 4:04 – 4:10** Panel Discussion

SESSION 54 (Grand Ballroom East, 3rd Floor)

MORE CONTROVERSIES, UPDATES AND NEW CONCEPTS – FENESTRATION IN TBADs; EVAS FOR EVAR; PRE-EVAR EMBOLIZATION; TRAINING TRAUMA SURGEONS, ETC.

Moderators: Luis A. Sanchez, MD

Firas F. Mussa, MD

FENESTRATION IN TBAD

- 4:10 – 4:15** A New Concept For Treating TBAD After TEVAR By Extensive Fenestration To Equalize True And False Lumen Pressures: And A Special New Instrument To Do It Endovascularly: Theory, Technique, Results
Juan C. Parodi, MD
Ramon Berguer, MD, PhD

- 4:16 – 4:21 **Role Of Fenestration For TBAD In The TEVAR Era: Management Of TBAD Patients Is Not Simple: Fenestration Is An Important Option For Some Patients: When And How To Do It**
David M. Williams, MD
- 4:22 – 4:27 **Cheese Wire Technique To Eliminate An Aortic Dissection Flap In Chronic TBAD Patient: When Needed; Advantages And Limitations**
Ronald L. Dalman, MD
- 4:28 – 4:33 **An Endovascular Flap Cutting Device To Fenestrate Chronic TBADs: When Is It Needed**
Jean-Marc Alsac, MD, PhD
- 4:34 – 4:39 **Possible Long-Term Disadvantages Of A Suprarenal Bare Stent With AAA EVAR Endografts**
Claude Mialhe, MD
- 4:40 – 4:45 **DEBATE: EVAS (Endovascular Aneurysm Sealing) With The Nellix Device Is A Game Changer For Endo AAA Repair**
Matt M. Thompson, MD
- 4:46 – 4:51 **DEBATE: EVAS With The Nellix Device Is Not A Game Changer For Endo AAA Repair**
Hence J.M. Verhagen, MD, PhD
- 4:52 – 4:58 **Panel Discussion**

Moderators: *Michel Makaroun, MD*
John B. Chang, MD

- 4:59 – 5:04 **Clinical Significance In Macrophage Types And Changes In Macrophage Types With Vascular Disease**
John P. Fletcher, MD
- 5:05 – 5:10 **New Approach To Median Arcuate Ligament Syndrome: Transthoracic Ligament Release And Mesenteric Revascularization: When Should It Be Done (Diagnosis), Technique And Results**
Enrique Criado, MD

VALUE OF PRE-EVAR BRANCH EMBOLIZATION

- 5:11 – 5:16 **DEBATE: AAA Branch (Lumbar And IMA) Before EVAR Is Seldom Worth The Effort And Has Downsides**
Richard G. McWilliams, FRCR
- 5:17 – 5:22 **DEBATE: Branch Coil Embolization During EVAR Is Worthwhile And Decreases Type 2 Endoleaks: When Should It Be Done**
Dominique Fabre, MD
- 5:23 – 5:28 **AAA Branch Embolization Before EVAR: Does It Have Value And When Should It Be Done**
Franco Grego, MD

TRAINING TRAUMA SURGEONS

- 5:29 – 5:34 **DEBATE: Why Trauma Surgeons Should Be Trained In Vascular And Endovascular Techniques**
Charles J. Fox, MD
- 5:35 – 5:40 **DEBATE: Nonsense: We Don't Train Trauma Surgeons To Do Procedures For Head Trauma And Should Not Train Them To Do Vascular And Endovascular Procedures**
Mark A. Adelman, MD
- 5:41 – 5:46 **I Have Changed My Mind: Chimney Grafts And Other Parallel Grafts Have A Role In The Era Of Fenestrated And Branched Endografts: What Is This Role**
Martin Malina, MD, PhD

5:47 – 5:55 Panel Discussion
End of Program G

PROGRAM H (SESSIONS 55-62)

NEW DEVICES FOR ABDOMINAL AORTA AND EVAR; THORACIC AORTA AND TEVAR; LOWER EXTREMITY AND STENTS AND STENT-GRAFTS; PREVENTING AND TREATING MIGRATION AND ENDOLEAKS; ENDOANCHORS; EMBOLIZATION AND THROMBECTOMY

Grand Ballroom West, 3rd Floor

SESSION 55 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES FOR EVAR AND JUXTARENAL AAA REPAIR (4 1/2-MINUTE TALKS)

Moderators: Michel Makaroun, MD

Gilbert R. Upchurch, Jr., MD

**DESCRIPTIONS OF NOVEL ASPECTS OF DEVICES,
TECHNIQUES FOR INSERTION AND CLINICAL
RESULTS**

6:45 – 6:50 Aorfix Endograft With The New IntelliFlex Delivery System For EVAR: Technique And Advantages
Andrew Holden, MBChB

6:50 – 6:55 Aorfix Endograft For EVAR: Interim Results Of The ARCHYTAS Post Market Registry Experience With On-Label And Off-Label Use Of The Graft With Unfavorable Anatomy
Vicente Riambau, MD, PhD

6:55 – 7:00 Aorfix Endograft For EVAR: 3-Year Results Of PYTHAGORAS Pivotal PMA Trial In Standard And Angulated Neck AAAs
Mark F. Fillinger, MD

7:00 – 7:05 Gore C3 Excluder Endograft With C3 Delivery System Which Allows Graft Repositioning: Advantages And Experience In >200 AAA Patients
Athanasios Katsargyris, MD
Eric L.G. Verhoeven, MD, PhD

7:05 – 7:10 Gore Excluder Endograft For EVAR: 10-Year Experience Demonstrates Endograft Durability
Giovanni Pratesi, MD

7:10 – 7:15 Gore Conformable CEXC Excluder Endograft For EVAR: The Angle Of The Proximal Graft Body Can Be Actively Changed To Conform To AAA Neck Angulation: How Does It Work And Early Results
Marc R.H.M. van Sambeek, MD, PhD
Dittmar Boeckler, MD
Hence J.M. Verhagen, MD, PhD

7:15 – 7:20 Cordis Incraft Endograft For EVAR: 4-Year Experience: Advantages And European Trial Results
Giovanni Torsello, MD

7:20 – 7:31 Panel Discussion

Moderators: ShenMing Wang, MD, PhD

James F. McKinsey, MD

- 7:31 – 7:36** Fenestrated Anaconda Endograft (Vascutek) For Juxtarenal AAA Repairs And Type 1A Endoleaks: Advantages And European Multicenter Results To Date
Donald B. Reid, MD
Clark J. Zeebregts, MD, PhD
Afshin Assadian, MD
- 7:36 – 7:41** Anaconda ONE-LOK Endograft (Vascutek) For EVAR: Technical Advantages And 1 Year US Results
Christopher J. Kwolek, MD
- 7:41 – 7:46** Update On The Medtronic Fenestrated Endovascular Graft System For Juxtarenal EVAR: Technical Aspects And Advantages
Willem Wisselink, MD
- 7:46 – 7:51** Newly Modified Medtronic Endurant (EVO) Endograft: Initial Clinical Experience And Advantages
Gilbert R. Upchurch, Jr., MD
- 7:51 – 7:56** Ovation Endograft From TriVascular For EVAR: Advantages And Tips And Tricks For Use
David J. Minion, MD
- 7:56 – 8:01** Ovation Endograft From TriVascular: The Real World European Experience And Advantages
Patrick Peeters, MD
- 8:01 – 8:06** Ovation Prime Endograft From TriVascular: Midterm Results And Advantages
Carlo Setacci, MD
Francesco Setacci, MD
- 8:06 – 8:12** Panel Discussion

SESSION 56 (Grand Ballroom West, 3rd Floor)

**MORE NEW OR IMPROVED DEVICES FOR EVAR
(5-MINUTE TALKS)**

Moderators: *Peter L. Faries, MD*
Gary Giangola, MD

**DESCRIPTION OF NOVEL ASPECTS OF DEVICES,
TECHNIQUES FOR INSERTION AND CLINICAL
RESULTS**

- 8:12 – 8:17** Aorfix Endograft Can Be Effective In Badly Angled AAA Necks: Tips And Tricks To Make It Work And When It Will Not
Mahmoud B. Malas, MD, MHS
- 8:18 – 8:23** Treovance Endograft (Bolton Medical) For EVAR: Experience To Date And Advantages
Matthew J. Eagleton, MD
- 8:24 – 8:29** New Cook Zenith Alpha Endograft System For EVAR: Why It Is Better
Eric L.G. Verhoeven, MD, PhD
- 8:30 – 8:35** Nellix Endograft System From Endologix For Endovascular Aneurysm Sealing (EVAS): Clinical Experience To Date: Type 1A Endoleaks Can Occur And Can Cause Rupture But They Can Be Detected And Fixed: How To Do So
Dittmar Boeckler, MD
- 8:36 – 8:41** Nellix Endograft System For EVAS: Key Points From The Global Registry And How To Prevent, Diagnose And Treat Type IA Endoleaks
Andrew Holden, MBChB
Jean-Paul de Vries, MD, PhD

- 8:42 – 8:47** Nellix Endograft System For EVAS: What Are The Anatomic Restrictions: Can Chimney Grafts Be Used With It: How To Detect And Fix Gutter Endoleaks
Ian Loftus, MD
- 8:48 – 8:53** In Vitro Model Shows That Sac And Gutter Sealing Is Achieved With Chimney Graft And The Nellix Device If Certain Conditions Are Fulfilled
Jan D. Blankensteijn, MD
- 8:54 – 8:59** How The Nellix Device Can Be Used To Treat AAAs With Iliac Aneurysms: Tips And Tricks
Dainis K. Krievins, MD
- 9:00 – 9:05** Gore Excluder Iliac Branched Endograft Device For Hypogastric Revascularization: The Initial European Experience: Advantages And Limitations
Michel M.P. Reijnen, MD, PhD
- 9:06 – 9:11** 1-Year US Results Of Gore Iliac Branched Endograft: Advantages And Limitations
Darren B. Schneider, MD
- 9:12 – 9:17** Cook Iliac Branched Device For Hypogastric Revascularization: Advantages And Long-Term Durability: Failure Rates And Contraindications
Fabio Verzini, MD, PhD
- 9:18 – 9:25** Panel Discussion
- 9:25 – 9:40** Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 57 (Grand Ballroom West, 3rd Floor)

NEW OR IMPROVED DEVICES FOR TEVAR OR BRANCHED EVAR FOR TAAAs

Moderators: *Michael L. Marin, MD*
Palma M. Shaw, MD

- 9:40 – 9:45** The Bolton Ascending Aortic Endovascular Endograft Device: Technical Aspects, Advantages And Limitations
Carlos E. Donayre, MD
Rodney A. White, MD
- 9:46 – 9:51** Bolton Relay Endograft System For TEVAR: Technical Description, Unique Advantages And Clinical Experience To Date
Vicente Rimbau, MD, PhD
- 9:52 – 9:57** Bolton Aortic Arch Endograft Device: Technical Description, Advantages And Clinical Results
W. Anthony Lee, MD
- 9:58 – 10:03** Proximal Scalloped Endografts (Bolton) For TEVAR To Maintain Left Subclavian Flow: Advantages, Limitations And Midterm Results
Michael P. Jenkins, MBBS, BSc, MS
- 10:04 – 10:09** Advantages Of The Bolton Relay TEVAR Device With A Proximal Scallop: Can It Serve As An Off-The-Shelf Device
Jean-Marc Alsac, MD, PhD
- 10:10 – 10:15** Gore Conformable TAG (CTAG) Device For TEVAR: 2-Year Multicenter Trial Results
William D. Jordan, Jr., MD
- 10:16 – 10:21** Value Of Hybrid Repairs Of Aortic Arch Lesions With And Without The Gore Hybrid Graft: Its Advantages
Grayson H. Wheatley, MD
- 10:22 – 10:27** Cook Zenith Low Profile Alpha Endograft System For TEVAR: Advantages And Clinical Results
Germano Melissano, MD
Roberto Chiesa, MD

10:28 – 10:33 Cook Zenith Alpha Endograft Device For TEVAR: Advantages And Clinical Experience
Jean-Pierre Becquemin, MD

10:34 – 10:39 Cook T-Branch Off-The-Shelf Branched Endograft System For TAAAs: Extending Its Applicability
Marcelo Ferreira, MD

10:40 – 10:49 Panel Discussion

SESSION 58 (Grand Ballroom West, 3rd Floor)

NEW THORACIC AORTIC AND TAAA DEVICES

Moderators: *Eric E. Roselli, MD*
Luis A. Sanchez, MD

10:50 – 10:55 Are New Endograft Devices For TEVAR Solving The Problems That Occurred With The Older Systems: What Does The Future Hold
Clifford J. Buckley, MD

10:56 – 11:01 The Value And Limitations Of The New Lower Profile Devices For TEVAR
Giovanni Torsello, MD

11:02 – 11:07 A New Simplified Endovascular Graft For TAAAs: It Needs Only A Single Measurement: Neck Diameter For Planning And Graft Selection
Juan C. Parodi, MD

11:08 – 11:13 Update On The Zenith TX2-LP Endograft System For Treatment Of Blunt Thoracic Aortic Injuries: Advantages, Limitations And Results
Benjamin W. Starnes, MD

11:14 – 11:19 For Treating Ischemic Complications Of TBADs, The Petticoat Concept Using A Proximal Bolton Relay Or E-Vita (Jotec) TEVAR And Distal Jotec E-XL Bare Stent Is Valuable But 50% Of Patients Also Require Aortic Branch Stents: Clinical Results
Burkhardt Zipfel, MD, PhD

LEFT SUBCLAVIAN ARTERY REVASCULARIZATION

11:20 – 11:25 Laser In Situ Fenestration Is The Best Way To Preserve LSA Flow When Its Origin Must Be Covered: Techniques, Limitations And Midterm Results
Jean M. Panneton, MD

BRANCHED TEVAR

11:26 – 11:31 The Medtronic Branched TEVAR Endograft – The Valiant Mona LSA System: Technique, Advantages And Results
Frank R. Arko, MD
Eric E. Roselli, MD

11:32 – 11:37 Gore Branched Endograft For Treating Arch Lesions: Technique, Early Results With The LSA And Future Potential For Treating Other Arch Branches
Michael D. Dake, MD

11:38 – 11:43 Will The Benefits Of LSA Branched TEVAR Devices Justify The Costs
Frank J. Criado, MD

11:44 – 11:49 New Developments In In Situ Fenestration: How Can It Be Made To Work In Complex Aortic And Arch Endografting
Björn Sonesson, MD, PhD

11:50 – 12:00 Panel Discussion

12:00 – 1:00 Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 59 (Grand Ballroom West, 3rd Floor)

NEW DEVICES FOR TREATMENT OF LOWER EXTREMITY DISEASE

Moderators: *Gregory L. Moneta, MD*
Palma M. Shaw, MD

PROSTHETIC ARTERIAL GRAFTS

- 1:00 – 1:05** 1-Year Results Of The FINAST RCT Comparing The Fusion Bioline Heparin Coated Prosthetic Graft vs. A Standard PTFE Graft For Femoropopliteal Bypasses: The Fusion Graft Had Better Patency And Less Suture Line Bleeding
Alan B. Lumsden, MD
- 1:06 – 1:11** Update On The Advantages Of Spiral Flow Prosthetic Grafts In Decreasing Intimal Hyperplasia After Bypasses
Sebastian E. Debus, MD, PhD
Christian A. Behrendt, MD
Hosam F. El Sayed, MD
- 1:12 – 1:17** Are Propaten-Bonded PTFE Arterial Fempop Grafts Cost Effective: How Well Does Their Improved Patency Persist
Jes S. Lindholt, MD
- 1:18 – 1:23** Interesting Uses For The Gore Hybrid PTFE Graft Which Combines A Covered Self-Expanding Stent At One End With A Standard Vascular Graft At The Other End: Advantages And Limitations
Edward Y. Woo, MD

ENDOVASCULAR INNOVATIONS

- 1:24 – 1:29** Present Status Of Drug Eluting Devices In Tibial Artery Endovascular Treatments
Mark G. Davies, MD
- 1:30 – 1:35** The Value Of DEBs In Infrapopliteal Arteries Is Promising: Why The In.Pact Deep Trial Failed To Show A Benefit And What Is Being Done To Make DEBs Work Better In Leg Arteries
Andrej Schmidt, MD
- 1:36 – 1:41** A New Concept For Local Drug Delivery To Arteries Using The Bullfrog Catheter Technology From Mercator
Dierk Scheinert, MD
- 1:42 – 1:47** Update On The Chocolate PTA Balloon: Mode Of Action, Advantages And Clinical Results
Jihad A. Mustapha, MD
- 1:48 – 1:53** Value Of Bioabsorbable Antibiotic Impregnated Beads In Treating Vascular Graft Infections
Rabih A. Chaer, MD
- 1:54 – 2:00** Panel Discussion

SESSION 60 (Grand Ballroom West, 3rd Floor)

NEW STENT AND STENT-GRAFT DEVICES AND CONCEPTS

Moderators: *Peter A. Schneider, MD*
Timur P. Sarac, MD

BIODEGRADABLE STENTS

- 2:00 – 2:05** The ABSORB III Trial Results: The Pivotal US Approval Randomized Trial Of Bioabsorbable Scaffolds vs. Metallic Drug-Eluting Stents In Coronary Artery Disease
Gregg W. Stone, MD

- 2:06 – 2:11** How Well Do Biodegradable Stents Work In The Coronary Arteries: Where Are They Going In Other Arteries – Especially Smaller Ones
Ron Waksman, MD
- 2:12 – 2:17** 1-Year Experience With Drug Eluting (Everolimus) Bioabsorbable Stents (ABSORB BVS From Abbott) In The BTK Arteries Including The Tibials
Ramon L. Varcoe, MD
- 2:18 – 2:23** The ESPRIT Bioabsorbable DES In The SFA: 2-Year Results Are Promising
Johannes Lammer, MD

OTHER NEW STENT TOPICS

- 2:24 – 2:29** New Approaches For DESs: The NITI DES Program: What Clever Ideas Are On The Horizon: We Are Just At The Beginning Of Better Endovascular Technology
Dierk Scheinert, MD
- 2:30 – 2:35** Rethinking Stent Designs And Techniques For Use In The SFA: What Does The Future Hold
Brian G. DeRubertis, MD
- 2:36 – 2:42** Panel Discussion

Moderators: *Dierk Scheinert, MD*
Firas F. Mussa, MD

- 2:43 – 2:48** New Nitinol Stents (Like SMART CONTROL From Cordis) In The SFA: Are They Better Than The Old Ones For Patency And Effectiveness – Especially For More Complex Lesions
Daniel G. Clair, MD
- 2:49 – 2:54** Pulsar Nitinol Stent In Combination With Other Adjunctive Techniques (DEBs, Scoring Balloons, Debulking Devices): 12-Month Results Of The BIOFLEX Registry Are Promising
Michael K.W. Lichtenberg, MD
- 2:55 – 3:00** >1 Year Experience With The Unique Two Component Gore Tigris Stent In The SFA And Popliteal Artery: What Are Its Unique Advantages And Limitations
Andrej Schmidt, MD
- 3:01 – 3:06** Self-Expanding Thin Strut Nitinol Stents (Pulsar) Plus DEBs: 2-Year Results From The DEBAS Trial Are Promising
B. Patrice Mwipatayi, FRACS
- 3:07 – 3:12** A Long Self-Expanding Bare Metal Stent (EverFlex From Covidien) Can Be Effective In Treating Complex Fempop Lesions: 3-Year Results From The DURABILITY II Trial
Jon S. Matsumura, MD
Krishna J. Rocha-Singh, MD
- 3:13 – 3:18** Silent Infection Of Endografts: How Can It Be Detected And What Is Its Significance
Werner Lang, MD
- 3:19 – 3:26** Panel Discussion
- 3:26 – 3:40** Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 61 (Grand Ballroom West, 3rd Floor)

PREVENTING AND TREATING MIGRATION AND ENDOLEAKS: UPDATE ON HELI-FX ENDOANCHORS

Moderators: *Mark A. Farber, MD*
Gregg S. Landis, MD

WITH EVAR

- 3:40 – 3:45** How Effective Is Embolization (With Coils And Onyx) For Otherwise Untreatable Proximal Type 1 Endoleaks After EVAR: Techniques, Midterm Outcomes, Pitfalls And Patient Selection
Robert A. Morgan, MD
- 3:46 – 3:51** When Do Aptus EndoAnchors Work In EVAR And When Don't They: Update On ANCHOR Registry: Do EndoAnchors Prevent Type 1A Endoleaks
William D. Jordan, Jr., MD
- 3:52 – 3:57** Can EndoAnchors Fix Early And Late Type 1A Endoleaks: Do They Prevent Migration
Jean-Paul de Vries, MD, PhD
- 3:58 – 4:03** Treatment Of Endograft Migration With Type 1A Endoleak With Chimney Grafts: Technical Tips And Results
Ignacio Escotto, MD
- 4:04 – 4:09** EndoAnchors Can Increase EVAR Durability: Comparison Of Matched Patients With And Without EndoAnchors
Bart E. Muhs, MD, PhD
- 4:10 – 4:15** Do EndoAnchors Stop Or Delay AAA Neck Dilatation After EVAR
Apostolos K. Tassiopoulos, MD

WITH TEVAR

- 4:16 – 4:21** Tips And Tricks For EndoAnchor Use During TEVAR: When Are They Indicated
Grayson H. Wheatley, MD
- 4:22 – 4:27** Technique Of EndoAnchor Placement During TEVAR: Indications And Results
Jean M. Panneton, MD
- 4:28 – 4:33** Use Of EndoAnchors To Seal Gutter Endoleaks After Parallel Grafts With TEVAR And EVAR: Technical Consideration And How To Place Them
Zvonimir Krajcer, MD
- 4:34 – 4:39** Value Of EndoAnchors In Complex TEVARs And F/B EVARs: Indications And Technical Tips
Piotr M. Kasprzak, MD
- 4:40 – 4:47** Panel Discussion

SESSION 62 (Grand Ballroom West, 3rd Floor)

NEW DEVICES AND CONCEPTS FOR EMBOLIZATION, THROMBECTOMY AND THROMBOLYSIS

Moderators: *Christopher J. Kwolek, MD*
Nicholas J. Morrissey, MD

- 4:48 – 4:53** POD Coils From Penumbra: A New Better Coil Embolization Device Which Fixes Coils To Vessel Wall And Permits Tighter Packing: Technical Aspects And Clinical Experience
Frank R. Arko, MD
- 4:54 – 4:59** Clinical Experience With PODCOIL Embolization In The ACE Multicenter Study
Claudio J. Schonholz, MD

CATHETER THROMBECTOMY AND THROMBOLYSIS (SEE ALSO SESSION 29)

- 5:00 – 5:05** Indigo Catheter Thrombectomy System From Penumbra: A Novel Endovascular Way To Remove Clot From Medium-Sized And Small Arteries: What Makes It Different And Better And Multicenter Clinical Results From The PRISM Trial
James F. Benenati, MD
- 5:06 – 5:11** Advantages Of The Indigo Thrombectomy Device For Treating ALI: How Does It Work And Why Does It Get Fresh And Old Clot Out More Effectively Than Other Systems
Patrick E. Muck, MD
- 5:12 – 5:17** The Indigo Thrombectomy System Reduces The Need For Thrombolytics And Decreases The Risk And Cost Of Treatment For ALI
Frank R. Arko, MD
- 5:18 – 5:23** When Thrombosis Complicates Retrograde Access For Complex Lower Extremity Interventions, Intra-Thrombus Bolus ReoPro And Catheter Aspiration Can Be Helpful: Technical Tips And Tricks
Thomas O. McNamara, MD
- 5:24 – 5:29** How To Decrease Bleeding Associated With Catheter Directed Thrombolysis And Improve Clot Lysis And Safety With A Microbubble Technique: Technical Aspects And Results
Kak Khee Yeung, MD, PhD
- 5:30 – 5:35** There Is No Advantage To Giving Heparin With Intra-arterial Thrombolysis: How To Prevent Clot Formation On Catheters And Sheaths
Martin Björck, MD, PhD
- 5:36 – 5:44** Panel Discussion
End of Program H

PROGRAM I (SESSIONS 63-70)
SUPERFICIAL VENOUS DISEASE

Trianon Ballroom, 3rd Floor

SESSION 63 (Trianon Ballroom, 3rd Floor)

VENOUS CLINICAL EXAMINATION AND HEMODYNAMICS

Moderators: Jose I. Almeida, MD, RVT, RPVI

Lowell S. Kabnick, MD, RPhS

Thomas W. Wakefield, MD

- 7:30 – 7:31** Introduction To Veins At VEITH
Jose I. Almeida, MD, RVT, RPVI
- 7:31 – 7:36** Establishing The Treatment Plan With CEAP & VCSS
Jose I. Almeida, MD, RVT, RPVI
- 7:37 – 7:42** Outcome Assessment Of CVD
Lowell S. Kabnick, MD, RPhS
- 7:43 – 7:48** Identifying Reflux Pathways With Duplex Ultrasound Mapping
Neil M. Khilnani, MD
- 7:49 – 7:54** Symptoms Of Chronic Venous Disease: Definition And Significance
Raghu Kolluri, MD
- 7:55 – 8:00** Veins: Beginning Or End Of Circulation: Differences In Physiology And Pathology
Seshadri Raju, MD
- 8:01 – 8:06** Air Plethysmography For Beginners
Andrew N. Nicolaidis, MS

- 8:07 – 8:12** Hemodynamic Approach On Superficial Venous Reflux (ASVAL): Does It Work
Sylvain Chastanet, MD
- 8:13 – 8:18** Hemodynamic Approach On Superficial Venous Reflux (CHIVA): Does It Work
Paolo Zamboni, MD
- 8:19 – 8:24** A New Look At Venous Hemodynamics: Measuring Reflux And Venous Outflow Obstruction
Andrew N. Nicolaidis, MS
- 8:25 – 8:30** Panel Discussion

SESSION 64 (Trianon Ballroom, 3rd Floor)

VENOUS IMAGING TECHNIQUES

Moderators: *Jose I. Almeida, MD, RVT, RPVI*

Mark H. Meissner, MD

- 8:31 – 8:36** Duplex Mapping: Tweaking The Buttons For Image Optimization
Jan M. Sloves, RVT
- 8:37 – 8:42** How To Recognize Variants On The Venous Duplex Exam
Neil M. Khilnani, MD
- 8:43 – 8:48** Reflux Exam In The Standing Position: Why Is This Still Controversial
Mark H. Meissner, MD
- 8:49 – 8:54** The Argument Against Routine Duplex Ultrasound After Truncal Ablation: An Evidence-Based Cost-Benefit Analysis
Thomas F. O'Donnell, Jr., MD
- 8:55 – 9:00** Vein Diameter Is Not The Key For Stratifying Interventional Strategies For Superficial Venous Disease
Alun H. Davies, MA, DM, DSc
- 9:01 – 9:06** The Use Of Wound Planimetry To Guide Decisions About Superficial And Perforator Ablations
Peter F. Lawrence, MD
- 9:07 – 9:12** C1 Disease And Truncal Incompetence: To Ablate Or Not To Ablate
Jose I. Almeida, MD, RVT, RPVI
- 9:13 – 9:18** Panel Discussion

SESSION 65 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VEIN TREATMENT STRATEGIES AND TECHNIQUES

Moderators: *Lowell S. Kabnick, MD, RPhS*

Alun H. Davies, MA, DM, DSc

- 9:19 – 9:24** Staged Phlebectomy: Why
Jean Luc Gerard, MD
- 9:25 – 9:30** Concomitant Treatment Of Truncal Reflux And Varicose Tributaries Is The Gold Standard
Alun H. Davies, MA, DM, DSc
- 9:31 – 9:36** Lessons Learned: RF Ablation
Mark S. Whiteley, MS
- 9:37 – 9:42** Lessons Learned: Laser Ablation
Jean Luc Gerard, MD
- 9:43 – 9:48** Lessons Learned: MOCA Ablation
Steve Elias, MD
- 9:49 – 9:54** Step By Step: Cyanoacrylate Embolic Adhesive
Ian J. Franklin, Mr., MS
- 9:55 – 10:00** Step By Step: Proprietary Foam
Kathleen D. Gibson, MD

- 10:01 – 10:06** Step By Step: Phlebectomy
Lowell S. Kabnick, MD, RPhS
- 10:07 – 10:12** Cyanocrylate Adhesive: More Than One Product Available: Is There A Difference
Ian J. Franklin, Mr., MS
- 10:13 – 10:18** A Strategy For Treatment Of Complex And Extensive Venous Burden
Barrie A. Price, Mr., MD, MS
- 10:19 – 10:24** Superficial Reflux With Obstructed Deep Veins: When And When Not To Treat
Manj S. Gohel, MD, RCS
- 10:25 – 10:30** Incidence, Causes, And Treatment Of Recurrent Varicose Veins Following Endovenous Thermal Ablation
Edward G. Mackay, MD
- 10:31 – 10:36** Will The 1920nm Laser Be The Best
Lowell S. Kabnick, MD, RPhS
- 10:37 – 10:42** Concomitant Truncal Venous Incompetence And Lymphedema: To Ablate Or Not To Ablate
Paul Pittaluga, MD
- 10:43 – 10:48** Reflux Extending To The Ankle: When And How To Treat
Steve Elias, MD
- 10:49 – 10:54** Panel Discussion

SESSION 66 (Trianon Ballroom, 3rd Floor)

VENOUS SOCIETAL AND GOVERNANCE

Moderators: *Lowell S. Kabnick, MD, RPhS*

Peter F. Lawrence, MD

- 10:55 – 11:00** 25 Years Of IAC-VL And Still No Link To Reimbursement: Should I Continue Spending Money To Re-Accredit
Mark H. Meissner, MD
- 11:01 – 11:06** IAC Vein Center: Importance And Update
Alan M. Dietzek, MD, RPVI
- 11:07 – 11:12** How To Deal With LCDs
Harold J. Welch, MD
- 11:13 – 11:18** Medicare Policy, Payments And Pitfalls
Harold J. Welch, MD
- 11:19 – 11:24** How Should Reflux Testing Be Performed According To IAC-VL
Ellen D. Dillavou, MD
- 11:25 – 11:30** Outpatient Interventions: Are Controls Needed
Paul J. Gagne, MD
- 11:31 – 11:36** Update On The SVS-PSO VQI Venous Registry
Jose I. Almeida, MD, RVT, RPVI
- 11:37 – 11:42** What Is The Future Of Venous Reimbursement
Glenn Jacobowitz, MD
- 11:43 – 11:48** A National Coverage Determination Policy Is Needed
Lowell S. Kabnick, MD, RPhS
- 11:49 – 11:54** Economic Forecast And Recommendations For Venous Intervention
Peter F. Lawrence, MD
- 11:55 – 12:00** Panel Discussion
- 12:00 – 12:59** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 67 (Trianon Ballroom, 3rd Floor)

EXAMINING THE EVIDENCE

Moderators: *Thomas W. Wakefield, MD*
Bo G. Eklof, MD, PhD

- 1:00 – 1:05** C6 Disease: Is Superficial Surgery A Cost Benefit
Thomas F. O'Donnell, Jr., MD
- 1:06 – 1:11** C6 Disease: When To Ablate A Refluxing Saphenous Vein
Brajesh K. Lal, MD
- 1:12 – 1:17** C5 Or C6 With Arterial Claudication: Which Comes First
Marc A. Passman, MD
- 1:18 – 1:23** C6: Treat Central Venous Occlusion First
Lowell S. Kabnick, MD, RPhS
- 1:24 – 1:29** Perforator Ablation For C3 Or C4
John Blebea, MD, MBA
- 1:30 – 1:35** Is Accessory Saphenous Vein Ablation Experimental
Elna M. Masuda, MD
- 1:36 – 1:41** Is C2 Disease Progressive
Mark H. Meissner, MD
- 1:42 – 1:47** Why Graduated Compression Is An Insurance Requirement
Fedor Lurie, MD, PhD
- 1:48 – 1:53** Panel Discussion

SESSION 68 (Trianon Ballroom, 3rd Floor)

MORE USEFUL SUPERFICIAL VEIN INFORMATION

Moderators: *Thomas W. Wakefield, MD*
Lowell S. Kabnick, MD, RPhS

- 1:54 – 1:59** Is The Saphenous Vein Sacred
Paul Pittaluga, MD
- 2:00 – 2:05** Sclerotherapy Pearls
Neil M. Khilnani, MD
- 2:06 – 2:11** Should You Use Foam For Telangiectasia Or Reticular Veins: Where Is The Evidence
Ellen D. Dillavou, MD
- 2:12 – 2:17** Neurological Complications Of Sclerotherapy For Varicose Veins
Edward G. Mackay, MD
- 2:18 – 2:23** Why Not Use Homemade Foam For The GSV
Lowell S. Kabnick, MD, RPhS
- 2:24 – 2:29** Laser Or Ohmic Devices For Telangiectasia: When And Why
Ian J. Franklin, Mr., MS
- 2:30 – 2:35** Superficial Vein Thrombophlebitis: To Treat Or Not To Treat
Dawn M. Coleman, MD
- 2:36 – 2:41** SVT In The Pregnant Patient
Omar L. Esponda, MD
- 2:42 – 2:47** Panel Discussion

SESSION 69 (Trianon Ballroom, 3rd Floor)

SUPERFICIAL VENOUS ABLATION, COMPRESSION AND RESEARCH

Moderators: *John Blebea, MD, MBA*
Mark A. Adelman, MD

- 2:48 – 2:53** How To Properly Design And Interpret Clinical Trials
Thomas W. Wakefield, MD

- 2:54 – 2:59** Thermal Ablation On Anticoagulated Patients: Is It Safe And Effective
Glenn Jacobowitz, MD
- 3:00 – 3:05** VeClose Randomized Clinical Trial: 12-Month Follow-Up Results - VenaSeal vs. RFT (ClosureFast)
Kathleen D. Gibson, MD
- 3:06 – 3:12** Complete Varicose Vein Surgery Improves VCSS: Advantages Of Ablation Plus Transilluminated Powered Phlebectomy (TIPP)
Thomas W. Wakefield, MD
- 3:13 – 3:18** Biological Differences And Similarities Between 147nm And 1920nm On The Vein Wall: Using Immunocytochemistry
Mark S. Whiteley, MS
- 3:19 – 3:24** Varithena: Summary Phase 3 Trials
Lowell S. Kabnick, MD, RPhS
- 3:25 – 3:30** The SECURE Trial: Update On Perforator Ablation
Mark A. Adelman, MD
- 3:31 – 3:36** Endovenous Thermal Ablation RCTs: Do We Know Enough
Peter Gloviczki, MD
- 3:37 – 3:42** Can Real World Experience Contradict RCTs (e.g., ESCHAR Trial)
Alfred M. Obermayer, MD
- 3:43 – 3:48** Shocking: All Companies' Graduated Compression Measurements Are Not The Same
John Blebea, MD, MBA
- 3:49 – 3:54** What To Do When Stockings Fail To Control Swelling
Mark H. Meissner, MD
- 3:55 – 4:00** What Does Compression Add To Thermal Ablation
Todd Berland, MD
- 4:01 – 4:06** What Is Short-Stretch Compression And Why Is That Important For Vascular Surgeons
Fedor Lurie, MD, PhD
- 4:07 – 4:12** Panel Discussion

SESSION 70 (Trianon Ballroom, 3rd Floor)

VENOUS PRACTICE MANAGEMENT

Moderators: *Lowell S. Kabnick, MD, RPhS*
Peter F. Lawrence, MD

- 4:13 – 4:18** Five Things Your Office Manager Should Be Doing
Barrie A. Price, Mr., MD, MS
- 4:19 – 4:24** Non-Thermal Devices Are Available For Truncal Ablation: How To Implement In Practice Without Dedicated CPT Codes
Steve Elias, MD
- 4:25 – 4:30** Venous EMR Trials And Tribulations
Edward G. Mackay, MD
- 4:31 – 4:36** Marketing Your Vein Practice
Mark S. Whiteley, MS
- 4:37 – 4:42** Optimizing Patient Throughput And Increasing Patient Satisfaction: Lean Six Sigma
Christopher M. Banoub, MPA
- 4:43 – 4:48** Practice Building Tips For Venous Specialists
Edward G. Mackay, MD
- 4:49 – 4:54** How To Get Vascular Surgeons Engaged In Venous Disease
Peter F. Lawrence, MD

4:55 – 5:00 Panel Discussion
End of Program I

PROGRAM J (SESSIONS 71-76)
AIMsymposium MULTIDISCIPLINARY ACUTE
STROKE MANAGEMENT
Murray Hill Suites East and West, 2nd Floor
(Please visit AIMsymposium.org for complete Program details.)

SESSION 71 (Murray Hill Suites East and West, 2nd Floor)
THE OPENING OF A NEW ERA: STROKE TRIALS
AND EVIDENCE

8:00 – 8:05 Introduction
8:06 – 8:16 Stroke Demographics And Epidemiology
8:17 – 8:27 Recent Negative NEJM Trials: What Did We Learn
8:28 – 8:38 MR CLEAN
8:39 – 8:49 ESCAPE
8:50 – 9:00 SWIFT PRIME
9:01 – 9:11 Innovative Endovascular Therapy: From Trials To
Practice
9:12 – 9:22 REVASCAT
9:23 – 9:33 THERAPY
9:34 – 9:44 Evidence Shared By Trials
9:45 – 9:55 Important Differences In Trials
9:56 – 10:05 Panel Discussion
10:05 – 10:25 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 72 (Murray Hill Suites East and West, 2nd Floor)
TRIAGE STRATEGIES THAT NEED TO BE ADDRESSED

10:26 – 10:36 Prior To The ER And Transport Issues
10:37 – 10:47 Emergency Room Issues And Solutions
10:48 – 10:58 Telestroke Implementation And Problems
10:59 – 11:09 Data: We Should Require Documenting Time Points:
AKA Cardiology
11:10 – 11:20 **DEBATE:** Cardiologists Can Do This: Why I Agree
11:21 – 11:31 **DEBATE:** Interventional Neuro Specialists Are
Plentiful And The Appropriate Standard Of Care
11:32 – 11:42 Stroke Care Organization: Rural vs. City
11:43 – 11:53 Wake Up Strokes: Do We Have Any Data Or Not
11:54 – 12:04 Panel Discussion

SESSION 73 (Murray Hill Suites East and West, 2nd Floor)
LUNCHEON SESSION: NEW FRONTIERS IN BRAIN
HEMORRHAGE EVACUATION

12:05 – 12:17 The Rationale For Minimally Invasive Surgery For The
Evacuation Of Intracranial Hemorrhage
12:18 – 12:30 Minimally Invasive Access Surgery For Intracerebral
Hemorrhage: Early Results And Future Directions
12:31 – 12:43 Minimally Invasive Surgery With Apollo: Experience
To Date And Next Steps
12:44 – 12:59 Panel Discussion

SESSION 74 (Murray Hill Suites East and West, 2nd Floor)
PATIENT SELECTION AND STATE-OF-THE-ART
IMAGING

- 1:00 – 1:10 Basics Of Imaging For Stroke And The Latest Tools
- 1:11 – 1:21 Clinical Triage Basics
- 1:22 – 1:32 CT/CTA Is The Standard And All I Need
- 1:33 – 1:43 Perfusion Is A Necessity For Best Practice And I Can Prove It
- 1:44 – 1:54 Size Of The Core And The Physiology Of Progression: My Pearls
- 1:55 – 2:05 Collateral Imaging At Its Best

SESSION 75 (Murray Hill Suites East and West, 2nd Floor)
HEMORRHAGIC STROKE

- 2:06 – 2:16 Intraparenchymal Hemorrhage: When To Decompress
- 2:17 – 2:27 Imaging Of Parenchymal Clots: Signs That Make You Worry
- 2:28 – 2:38 Aneurysm Therapy: Is There A Science Behind Which Aneurysms Will Grow And Rupture
- 2:39 – 2:49 Small Aneurysms: Coil Or Stent – Theory And Logic Behind My Decisions
- 2:50 – 3:00 Wide Neck Aneurysms: New Devices And Strategies
- 3:01 – 3:11 Flow Diversion: Next Generation Ideas
- 3:12 – 3:22 Managing Complications Of Aneurysm Therapy
- 3:23 – 3:33 AVM Treatment Options And Why
- 3:34 – 3:44 Dural Fistula: Venous Approaches
- 3:45 – 3:55 Dural Sinus Stenosis: When And Why I Treat
- 3:56 – 4:06 Direct Radial, Carotid And Venous Access

SESSION 76 (Murray Hill Suites East and West, 2nd Floor)
LATEST SCIENCE, LITERATURE AND NEWEST DEVICES

- 4:07 – 4:17 Suction Thrombectomy: Distal And Proximal
 - 4:18 – 4:28 Stent Retrievers Are The Standard Of Care: The Evidence
 - 4:29 – 4:39 Treating Stroke After The Time Window Closes: Physiology And Practical Issues
 - 4:40 – 4:50 Posterior Circulation Ischemia: Is There A Role For Thrombectomy
 - 4:51 – 5:01 Posterior Circulation Stroke: Strategies
 - 5:02 – 5:12 Economics Of Stroke Therapy
 - 5:13 – 5:23 Comprehensive Stroke Centers: Is It Going To Be Required For Treatment
 - 5:24 – 5:30 Panel Discussion
- End of Program**

FRIDAY, NOVEMBER 20, 2015

- 6:00 A.M. General Registration – Rhinelander Gallery, 2nd Floor
- 6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor
- 6:00 A.M. Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT FRIDAY PROGRAMS

PROGRAM K: (SESSIONS 77-84)
New Techniques, Technology And Concepts; Carotid, Thoracic And Abdominal Aneurysm Disease; Spinal Cord Ischemia (SCI); CAS And CEA; Updates And New Concepts
 6:40 A.M. – 5:55 P.M.
 Grand Ballroom East, 3rd Floor

PROGRAM L: (SESSIONS 85-92)

Popliteal Disease; Arterial Graft And Aneurysm Infection; Progress In Imaging And Hybrid ORs; Medical Treatment; Updates; Vascular Trauma; Thoracic Outlet Syndrome (TOS);

Recorded Live Aneurysm Cases; Radiation Safety

6:45 A.M. – 5:56 P.M.

Grand Ballroom West, 3rd Floor

PROGRAM M: (SESSIONS 93-97)

Deep Venous Disease

7:00 A.M. – 5:00 P.M.

Trianon Ballroom, 3rd Floor

Course Leaders: **Jose J. Almeida, MD, RVT, RPVI**
Lowell S. Kabnick, MD, RPhS
Thomas W. Wakefield, MD

PROGRAM N: (SESSIONS 98-101)

Complex Vascular Malformations And Vascular Tumors

7:55 A.M. – 5:15 P.M.

Gramercy Suites East and West, 2nd Floor

Course Leaders: **Wayne F. Yakes, MD**

Krassi Ivancev, MD, PhD

PROGRAM K (SESSIONS 77-84)

NEW TECHNIQUES, TECHNOLOGY AND CONCEPTS; CAROTID, THORACIC AND ABDOMINAL ANEURYSM DISEASE; SPINAL CORD ISCHEMIA (SCI); CAS AND CEA; UPDATES AND NEW CONCEPTS

Grand Ballroom East, 3rd Floor

SESSION 77 (Grand Ballroom East, 3rd Floor)

NEW TECHNIQUES, TECHNOLOGIES, CONCEPTS – CAROTID RELATED

Moderators: **Claudio J. Schonholz, MD**

Sriram S. Iyer, MD

- 6:46 – 6:51** Current Optimal Methods To Evaluate Plaque Instability With Asymptomatic Carotid Stenosis (ACS)
Clark J. Zeebregts, MD, PhD
- 6:52 – 6:57** Juxtaluminal Black Area (JBA) On Duplex Determines Stroke Risk In ACS Patients: How To Determine And Quantitate It: Can It Be Changed: What Other Factors Quantitate Risk
Andrew N. Nicolaidis, MS
Stavros Kakkos, MD, PhD
- 6:58 – 7:03** **DEBATE:** Patch Closure After CEA Should Be Used Most Of The Time: The Level 1 Evidence Shows It
Ali F. AbuRahma, MD
- 7:04 – 7:09** **DEBATE:** Patch Closure After CEA Is Usually Not Needed Despite The Level 1 Evidence
Nicholas J. Gargiulo III, MD
- 7:10 – 7:15** **DEBATE:** If Certain Techniques Are Employed, Patch Closure After CEA Is Not Always Needed And Patch Closures Have Complications: What Are They
Glenn M. LaMuraglia, MD
- 7:16 – 7:21** Is Preop Coronary Angiography Before CEA Beneficial Over The Long-Term: Based On A RCT
Jean-Baptiste Ricco, MD, PhD

MESH COVERED CAROTID STENTS

- 7:22 – 7:27 Midterm Results With A Micromesh Covered Stent For CAS (The Roadsaver Stent From Terumo); What Are The Differences Between The 3 Available Mesh Covered Stents
Max Amor, MD
- 7:28 – 7:33 Technical Aspects And Results With The Gore Scaffold Mesh Covered Stent For CAS: Are Any Of These Mesh Covered Stents Ready For Prime Time
Peter A. Schneider, MD
Claudio J. Schonholz, MD
- 7:34 – 7:39 MicroNet Covered Embolic Prevention Carotid Stent System: From CARENET And PARADIGM Studies To Routine Clinical Practice
Piotr Musialek, MD, DPhil
- 7:40 – 7:45 Update On Value Of Contrast Enhanced 3D Duplex And Carotid Artery Flow Dynamics To Detect Plaque Changes And Identify High Risk ACS Patients For Invasive Treatment
Brajesh K. Lal, MD
- 7:46 – 7:51 MRI Can Determine Carotid Plaque Characteristics And Embolic Risk Prospectively: These MRI Findings Correlate With Symptoms, TCD Hits And Cognitive Changes
Peter L. Faries, MD
- 7:52 – 8:00 Panel Discussion

SESSION 78 (Grand Ballroom East, 3rd Floor)

MORE ABOUT COMPLEX ANEURYSM TREATMENT AND SPINAL CORD ISCHEMIA (SCI)

Moderators: Gustavo S. Oderich, MD
Christian D. Etz, MD, PhD

SPINAL CORD ISCHEMIA (SCI) AND ITS PREVENTION

- 8:00 – 8:05 Mechanisms Of Neuronal Death In SCI With Aortic Repairs And What Can Be Done To Minimize It: CSF Drainage And High BP Will Not Stop All SCI: An Anesthesiologist's Perspective
Hamdy Awad, MD
- 8:06 – 8:11 Pitfalls And Safeguards In Spinal Cord Protection During And After TEVAR
Vicente Riambau, MD, PhD
- 8:12 – 8:17 Institutional And Administrative Barriers To Adequate Spinal Cord Protection Treatment After TAAA Repair – Open And Endo
Charles W. Acher, MD
- 8:18 – 8:23 New Concepts In Causes And Treatment Of SCI With TAAA Repairs – Open And Endo: Why Preemptive Ischemic Preconditioning With Coil Embolization Of Intercostals May Help Prevent SCI
Christian D. Etz, MD, PhD
- 8:24 – 8:29 Optimal Approaches To Decrease SCI After TEVAR And Open TAAA Repair
Michael J. Jacobs, MD
- 8:30 – 8:35 2 Staging B/FEVAR Procedures For Complex TAAAs Is A Better Way Than Leaving A Patent Branch To Prevent SCI: Why
Matthew J. Eagleton, MD

- 8:36 – 8:41** Selective Staging Based On Spinal Cord Function Monitoring Is The Best Way To Prevent SCI With TAAA F/BEVAR Repairs: Intrasac Pressure Measurements And Leaving A Patent Branch May Be Appropriate For Some Cases
Geert Willem H. Schurink, MD, PhD
- 8:42 – 8:47** Impact Of Early Pelvic And Lower Extremity Reperfusion In Preventing SCI During TAAA Endovascular Repairs: Techniques To Achieve It
Stephan Haulon, MD
- 8:48 – 8:53** Predictors Of SCI During TEVAR For TBAD And Strategies To Prevent It
Chang Shu, MD
- 8:54 – 8:59** Paraplegia After TEVAR: Etiology And Strategies To Prevent It
Germano Melissano, MD
Yamume Tshomba, MD
Roberto Chiesa, MD
- 9:00 – 9:07** Panel Discussion
- 9:07 – 9:23** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 79 (Grand Ballroom East, 3rd Floor)

CAROTID RELATED TOPICS

Moderators: *Giorgio M. Biasi, MD*
Enrico Ascher, MD

- 9:23 – 9:28** Safety And Effectiveness Of CAS With Radiation Induced Carotid Stenosis: Review Of A Multicenter Experience
Peter L. Faries, MD
- 9:29 – 9:34** Pathogenesis Of Carotid Radiation Arteritis: What Is Its Impact On How It Should Be Treated
Beatrice R. Amann-Vesti, MD
- 9:35 – 9:40** Carotid Artery Aneurysms: Is Open Surgery The Best Treatment For Most: When Are Endovascular Techniques Indicated
Gregg S. Landis, MD
- 9:41 – 9:46** How To Increase Intelligence By Increasing Cerebral Blood Flow: Can A Pill Do It
Juan C. Parodi, MD
- 9:47 – 9:52** Asymptomatic Carotid Stenosis (ACS) Is Associated With Cognitive Impairment: Does Correction Of The Stenosis With CEA Or CAS Reverse The Cognitive Defect
Brajesh K. Lal, MD
- 9:53 – 9:58** Implications Of The 2014 Revisions Of The AHA Carotid Guidelines For Symptomatic Patients: What Was Changed And What Should Have Been Changed
Kosmas I. Paraskevas, MD
- 9:59 – 10:05** Panel Discussion

Moderators: *Peter L. Faries, MD*
Juan C. Parodi, MD

PROGRESS IN EMBOLIC BRAIN PROTECTION DURING CAS

- 10:05 – 10:10** What Is New In Cerebral Embolic Protection Devices
Mark H. Wholey, MD
- 10:11 – 10:16** Some Form Of Proximal Brain Protection Should Be The Method Of Choice With CAS And Why
Sumaira Macdonald, MBChB, PhD
Horst Sievert, MD

- 10:17 – 10:22** CAS In High Risk Patients Has A Lower Embolic Stroke Risk With The Silk Road Cervical Access And Reversal Of Flow System: Outcomes Can Be As Good As With CEA (From The PROOF Trial)
Ralf R. Kolvenbach, MD
- 10:23 – 10:28** Transcervical Carotid Open Exposure And CAS With The Silk Road System And Flow Reversal: Favorable Results Of The ROADSTER Trial In High Risk Patients
Christopher J. Kwolek, MD
Richard P. Cambria, MD
- 10:29 – 10:34** **DEBATE:** A Surgeon's View Of The Silk Road System Of Cervical Access And Reversal Of Flow For CAS
L. Nelson Hopkins, MD
- 10:35 – 10:40** **DEBATE:** An Interventionalist's View Of The Silk Road System Of Cervical Access And Reversal Of Flow For CAS
Klaus D. Mathias, MD
- 10:41 – 10:47** Panel Discussion

SESSION 80 (Grand Ballroom East, 3rd Floor)

MORE CAROTID RELATED TOPICS: CAS vs. CEA

Moderators: *L. Nelson Hopkins, MD*
Frank J. Veith, MD

- 10:47 – 10:52** Double Filtration Embolic Brain Protection During CAS Improves Outcomes: A Novel PTA Balloon With An Integrated Filter Helps To Do This: The Paladin Balloon
Ravish Sachar, MD
- 10:53 – 10:58** Effect Of Statins On Restenosis And Late Patient Survival After CEA
Ali F. AbuRahma, MD
- 10:59 – 11:04** How Enlightened Surgeons Should Select Asymptomatic Carotid Stenosis (ACS) Patients For CEA; For CAS; For BMRx Alone: All ACS Patients Should Get BMRx
Anthony J. Comerota, MD
- 11:05 – 11:10** Striking Variability In Preop Carotid Imaging Before Invasive Treatment In Different Locations And Why It's Bad For Patient Care
Andres Schanzer, MD
- 11:11 – 11:16** **DEBATE:** Early CEA In Symptomatic Carotid Stenosis Patients Within <2 Weeks Of The First Symptom Carries No Increased Risk Even If The Patient Is On Dual Antiplatelet Agents
Ross Naylor, MD
- 11:17 – 11:22** **DEBATE:** Not So: Early CEA After Symptom Onset Has A Higher Risk Of Adverse Events (Death/Stroke) Than Delayed Operation: How Long Should CEA Be Delayed
Thomas C. Bower, MD
- 11:23 – 11:28** Current Optimal Ways To Manage Infected Carotid Patches When There Is No False Aneurysm And When There Is One
Patrick A. Stone, MD
- 11:29 – 11:34** **DEBATE:** CMS Data Based Studies Tell Us Correctly About CEA And CAS Results In Real World Practice
Thomas G. Brott, MD
- 11:35 – 11:40** **DEBATE:** Not So: CMS Data Based Studies Are Flawed Models Sinking In The Quicksand Of Pseudo-Data
Richard P. Cambria, MD

- 11:41 – 11:46** Update On The Status Of ACST-2 Comparing CEA And CAS In ACS Patients: Devices Used, Medical Treatments: Is CEA/CAS Equipose For ACS Being Supported
Alison Halliday, MS
- 11:47 – 12:00** Panel Discussion
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 81 (Grand Ballroom East, 3rd Floor)
**MORE NEW DEVELOPMENTS IN CAROTID DISEASE,
ONGOING TRIALS AND CONTROVERSIES**

Moderators: *Brajesh K. Lal, MD*
Frank J. Veith, MD

- 1:00 – 1:05** Predictors Of Stroke And Death After CAS: Post-Stent Ballooning Is Bad And Proper Use Of Beta Blockers Is Good: Data From The SVS VQI
Mahmoud B. Malas, MD, MHS
- 1:06 – 1:11** Guidelines For Management Of Carotid Stenosis Are Outdated, Inconsistent And Flawed: It Is Time For An Overhaul And Update
Anne L. Abbott, MD, PhD
- 1:12 – 1:17** How Do The SVS Guidelines For Management Of Extracranial Carotid Disease Impact On Clinical Practice: Do They Need To Be Updated
Enrico Ascher, MD
- 1:18 – 1:23** What Are The Ongoing Carotid Trials (CREST-2, SPACE-2, ACST-2, ACT-1, ECST-2) Telling Us And Going To Tell Us
Alison Halliday, MS
- 1:24 – 1:29** Status Of The SPACE-2 Trial: Although Patient Enrollment Has Been Stopped, What Useful Information Will It Provide
Hans-Henning Eckstein, MD, PhD
- 1:30 – 1:35** What Is Happening With CREST-2: When Will We Have Answers
Thomas G. Brott, MD
Brajesh K. Lal, MD
- 1:36 – 1:41** Why CREST-2 May Be A Bad Deal For CAS
Mark H. Wholey, MD
- 1:42 – 1:48** Panel Discussion

Moderators: *Thomas G. Brott, MD*
Mark H. Wholey, MD

- 1:48 – 1:53** **DEBATE:** Which Carotid Stenosis Patients Are Candidates For CAS In 2015: An Interventionist's View
Klaus D. Mathias, MD
- 1:54 – 1:59** **DEBATE:** Which Carotid Stenosis Patients Are Appropriate Candidates For CAS In 2015: A Vascular Surgeon's View
Bruce A. Perler, MD, MBA
- 2:00 – 2:05** What Lesion Characteristics Are Higher Risk For CAS Than CEA: How Should They Influence The Choice Of Treatment In Symptomatic And Asymptomatic Patients: Data From CREST
Wesley S. Moore, MD
- 2:06 – 2:11** **DEBATE:** Screening For Asymptomatic Carotid Stenosis (ACS) Is Justified In Some Patients: Which Ones And For What Reason
Glenn Jacobowitz, MD

- 2:12 – 2:17** **DEBATE:** Screening For ACS Is Not Justified For Any Reason
Erich Minar, MD
- 2:18 – 2:23** CEA, CAS And Best Medical Treatment (BMRx) Alone: Which Treatment For Which Patient
R. Clement Darling III, MD
- 2:24 – 2:29** Early Intervention After Symptom Onset Is Safe With CEA But Not With CAS
Hans-Henning Eckstein, MD, PhD
- 2:30 – 2:36** Panel Discussion

SESSION 82 (Grand Ballroom East, 3rd Floor)

LATE BREAKING IMPORTANT INFORMATION, KEY UPDATES AND PEVAR

Moderators: *Pedro P. Komlos, MD*
Mark A. Adelman, MD

- 2:36 – 2:41** Statins Are Safe, Cheap And Effective And Should Be Used More Widely: Late Breaking Long-Term Results Of The MRC/BHF HEART PROTECTION Study Of Statins vs. Placebo
Richard Bulbulia, MA, MD
- 2:42 – 2:47** Do ACE Inhibitors Slow AAA Growth: The AARDVARK Trial
Janet T. Powell, MD, PhD
- 2:48 – 2:53** What's New With Stem Cell Treatment For Unfixable CLI: What About For Myocardial Ischemia
Alan Dardik, MD, PhD
- 2:54 – 2:59** Active Smoking Increases The Risk Of Limb Loss After Infrainguinal Bypass For Intermittent Claudication
Raghuveer Vallabhaneni, MD
- 3:00 – 3:05** Dual Antiplatelet Drugs Are Better Than One Drug For All Lower Extremity Arterial Interventions – Endo And Open
Marc L. Schermerhorn, MD

UPDATE ON PEVAR

- 3:06 – 3:11** Update On The Status Of Percutaneous EVAR And TEVAR: What Device Is Best, Who Should Not Have It, Precautions And What Improved Devices Are On The Horizon
Zvonimir Krajcer, MD
- 3:12 – 3:17** Benefits Of PEVAR In More Than 3000 EVAR Cases: Technical Tips And How Can Costs Be Minimized
Giovanni Pratesi, MD
Bruno Freitas, MD
Dierk Scheinert, MD
- 3:18 – 3:23** Real World Results With PEVAR vs. Open Femoral Approaches For EVAR: They Are Not What Might Be Expected
Dipankar Mukherjee, MD
- 3:24 – 3:29** Do Closure Devices Accelerate Femoral Artery Atherosclerosis
Luis R. Leon, MD, RVT
- 3:30 – 3:35** Update On Facial Suture Technique For Minimally Invasive Sheath Insertion: Is It Better Than PEVAR: Tips And Tricks For Doing It Right
Thomas Larzon, MD, PhD
- 3:36 – 3:41** Endovascular AV Fistula Creation For Hemodialysis Access: Technique And Early Trial (NEAT) Results
Charmaine Lok, MD

3:42 – 3:55 Panel Discussion And Break
Visits Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 83 (Grand Ballroom East, 3rd Floor)
**NEW CONCEPTS AND UPDATES RELATED TO
CAROTID DISEASE AND ITS TREATMENT**

Moderators: *Gregory L. Moneta, MD*
Klaus D. Mathias, MD

- 3:55 – 4:00** Current Optimal Management Of Infected Carotid Patches Without And With Pseudoaneurysms
Joseph S. Giglia, MD
- 4:01 – 4:06** Radial Or Brachial Access As A Primary Choice For CAS With A Bovine Arch: Technical Tips
Luigi Inglese, MD
- 4:07 – 4:12** Screening For ACS Is Important: Not To Increase Invasive Treatments But To Lead To Better Medical Treatment: Which Patients Should Be Screened
Henrik Sillesen, MD, DMSc
- 4:13 – 4:18** Cranial Nerve Injuries With CEA: What Are The Risk Factors: How Serious Are They: What Can Be Done To Prevent Them
Cynthia K. Shortell, MD
- 4:19 – 4:24** FDA Regulation Of CAS Devices: What Is Happening And What Does The Future Hold
Thomas G. Brott, MD
- 4:25 – 4:30** Carotid Artery Replacement With Resection Of Recurrent Neck Cancer: When Yes And When No Based On A RCT: Tips And Tricks
Jean-Baptiste Ricco, MD, PhD
- 4:31 – 4:36** Is There A Current Role For EC-IC Bypasses Despite The Negative Level 1 Evidence: What Is Its Role
Mark A. Adelman, MD
- 4:37 – 4:42** Will Transcarotid Approaches For CAS Be A Game Changer Even Without Any Specialized Devices And Why
Patrice F. Bergeron, MD
- 4:43 – 4:49** Panel Discussion

SESSION 84 (Grand Ballroom East, 3rd Floor)
**NEW CONCEPTS AND UPDATES IN AORTIC
DISEASE AND ITS TREATMENT**

Moderators: *Evan C. Lipsitz, MD*
Benjamin W. Starnes, MD

- 4:49 – 4:54** Recognition And Surgical Management Of Non-Aortic Pediatric Arterial Aneurysms
James C. Stanley, MD
Frank M. Davis, MD
Dawn M. Coleman, MD
Jonathan L. Eliason, MD
- 4:55 – 5:00** Comparative Performance Of FEVAR, Open Repair And Off-Label EVAR For Juxtarenal AAAs Not Suitable For Standard On-Label EVAR: Beyond A Single Center Experience
S. Rao Vallabhaneni, MD
- 5:01 – 5:06** Chimney EVAR For Juxtarenal AAAs Has A Less Deleterious Effect On Renal Function Than Open Repair
Zoran Rancic, MD, PhD
- 5:07 – 5:12** When Do Parallel Grafts Work And When Don't They And Why
William D. Jordan, Jr., MD

- 5:13 – 5:18** Surgical Infrarenal Aortic Graft Replacement As An Adjunct To Other Procedures: It Can Be A Useful Part Of A Hybrid Approach To Complex Aortic Pathology
William J. Quinones-Baldrich, MD
- 5:19 – 5:24** Status Of The LEOPARD Trial To Compare Outcomes Of On-The-Bifurcation Fixation With The Endologix AFX EVAR Device To Current Proximally-Fixed EVAR Endografts
Christopher J. Kwolek, MD
Benjamin W. Starnes, MD
- 5:25 – 5:30** Why Is The Right Axillary Approach The Best For Inserting Chimney Grafts: Tips And Tricks For Inserting Multiple Chimneys Safely
Ross Milner, MD
- 5:31 – 5:36** **DEBATE:** Severely Angled Aortic Necks May Remodel Beneficially After EVAR, Minimizing The Need For Open Repair
Boonprasit Kritpracha, MD
- 5:37 – 5:42** **DEBATE:** No They Do Not: Minilap Open Repair Is Usually A Better Choice Than Off-Label Use Of EVAR Devices For AAAs
Francesco Spinelli, MD
- 5:43 – 5:48** For Aortic Operations On Scarred Or Heavily Calcified Aortas An Anastomotic Technique Using An Endograft Connector Avoids The Need For Difficult Aortic Dissection, Clamping And Suturing: The VORTEC Technique
Mario L. Lachat, MD
- 5:49 – 5:55** Panel Discussion
End of Program K

PROGRAM L (SESSIONS 85-92)

POPLITEAL DISEASE; ARTERIAL GRAFT AND ANEURYSM INFECTION; PROGRESS IN IMAGING AND HYBRID ORs; MEDICAL TREATMENT; UPDATES; VASCULAR TRAUMA; THORACIC OUTLET SYNDROME (TOS); RECORDED LIVE ANEURYSM CASES; RADIATION SAFETY

Grand Ballroom West, 3rd Floor

SESSION 85 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN DISEASES OF THE POPLITEAL ARTERY; ANEURYSMS, OCCLUSIONS AND ENTRAPMENT

Moderators: Cynthia K. Shortell, MD

Ali F. AbuRahma, MD

**POPLITEAL ANEURYSM RELATED TOPICS
(SEE ALSO SESSION 28)**

- 6:45 – 6:50** Is Totally Endovascular Treatment A Good Option For Ruptured Popliteal Artery Aneurysms: Tips And Tricks
Francesco Setacci, MD
- 6:51 – 6:56** Is Totally Endovascular Treatment A Good Option For A Thrombosed Popliteal Aneurysm: Tips On How To Do It
Giovanni Pratesi, MD
- 6:57 – 7:02** Open Repair Of Asymptomatic Popliteal Aneurysm Is Associated With Better Outcomes Than Endo Repair: When Should Endo Repair Be Used
Mohammad H. Eslami, MD, RVT

7:03 – 7:08 **DEBATE:** What Have I Learned About Repairing Popliteal Aneurysms Since Peter Gloviczki And I Treated A Famous Popliteal Aneurysm Patient Almost 10 Years Ago

Barry T. Katzen, MD

7:09 – 7:14 **DEBATE:** What Have I Learned About Popliteal Aneurysms Since Barry Katzen And I Treated A Famous Popliteal Aneurysm Patient Almost 10 Years Ago

Peter Gloviczki, MD

POPLITEAL OCCLUSIVE DISEASE

7:15 – 7:20 What Is The Best Treatment For Treating Popliteal Occlusive Disease: PTA With Plain Balloons Or DEBs, When Stenting (Bare Or DES), When Atherectomy Or When Bypass

Jörn O. Balzer, MD, PhD

7:21 – 7:26 Effectiveness Of Zilver PTX DESs Placed Across The Knee Joint For Occlusive Disease: Long-Term Results

Marcelo Ferreira, MD

POPLITEAL ENTRAPMENT SYNDROMES

7:27 – 7:32 Popliteal Entrapment Syndromes: Optimizing Diagnosis And Treatment In 2015 And Beyond

Niten Singh, MD

7:33 – 7:38 Functional Popliteal Entrapment In High Performance Athletes: How To Diagnose It And How To Treat It By Partial Medial Gastrocnemius Resection: Why Does It Work

Jason T. Lee, MD

7:39 – 7:45 Panel Discussion

SESSION 86 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE MANAGEMENT OF INFECTED ARTERIAL GRAFTS, EVARs, TEVARs AND MYCOTIC AAAs; USE OF ENDOGRAFTS TO TREAT AORTIC INFECTION AND AORTO-ENTERIC FISTULAS

Moderators: *R. James Valentine, MD*

Timur P. Sarac, MD

TREATMENT OF INFECTED EVARs AND TEVARs

7:45 – 7:50 Surgical Treatment Of Infected Abdominal Endografts (EVARs): Techniques And Results From A Multicenter Study

Samuel R. Money, MD, MBA

7:51 – 7:56 **DEBATE:** Management Of Infectious Complications Of EVARs And Aortic Graft Infections: The Graft Must Come Out

Thomas C. Bower, MD

7:57 – 8:02 **DEBATE:** Not So: New Concepts For Treating Infected EVARs And Aortic Grafts Less Invasively Can Work: Leaving The Graft In Place But Treating The Infected AAA Sac With Drainage/Irrigation Or Excision Can Be Effective And Less Morbid

Martin Malina, MD, PhD

8:03 – 8:08 How To Treat Infected FEVARs And TEVARs: What Strategies Work

Piotr M. Kasprzak, MD

8:09 – 8:14 Treatment Strategies For Infected Thoracic Endografts: The Graft Must Come Out: What If It Can't
Christos D. Liapis, MD

TREATMENT OF MYCOTIC AAAs WITH EVAR

8:15 – 8:20 EVAR Is Durable Treatment For Mycotic AAAs – Sometimes: Other Adjuncts And Surveillance Are Vital: Results Of European Multicenter Study
Anders Wanhainen, MD, PhD

8:21 – 8:26 With Infected AAAs, EVAR Should Be The First Choice Treatment: Based On Over 80 Patients – Some Followed Over 10 Years: What Problems Can Arise And How Can They Be Managed
Boonprasit Kritpracha, MD

8:27 – 8:33 Panel Discussion

Moderators: *Thomas C. Bower, MD*
Samuel R. Money, MD, MBA

MANAGEMENT OF AORTO-ENTERIC FISTULAS

8:33 – 8:38 EVAR And TEVAR Can Be Definitive Treatment For Aorto-Enteric Fistulas: What Is Required
Furuzan Numan, MD

8:39 – 8:44 Successful Radical And Semi-Radical Treatment Of Aortobronchial And Aortoesophageal Fistulas After TEVAR: What Is Required For Survival – Which Is Possible
Ludovic Canaud, MD, PhD

MORE ON INFECTED GRAFTS AND MYCOTIC AAAs

8:45 – 8:50 New Developments In The Treatment Of Infected Aortic Grafts And Mycotic AAAs: What Strategies Work
Kamphol Laohapensang, MD

8:51 – 8:56 New Developments In The Treatment Of Aortic Graft Infection: How Do Silver Impregnated Grafts And Negative Wound Pressure Help To Preserve Infected Grafts And When Won't These Measures Work
Max Zegelman, MD

8:57 – 9:02 Tips And Tricks To Deal With Infected Groin Wounds Containing Infected Grafts
Joseph S. Giglia, MD

9:03 – 9:08 How To Recognize Complications Of Femoral Vein Grafts Used To Treat Aortic Graft Infections And How To Manage These Complications
R. James Valentine, MD

9:09 – 9:16 Panel Discussion

9:17 – 9:37 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 87 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN HYBRID OPERATING SUITES AND IMPROVEMENTS IN IMAGING

Moderators: *Daniel G. Clair, MD*
Frans L. Moll, MD, PhD

9:37 – 9:42 Advantages Of Fusion And How It Reduces Contrast And X-ray Dosage For Complex AAA Repairs: How To Eliminate Registration Errors Due To Changes In Anatomy From Vascular Devices, Sheaths And Wires
Neal S. Clayne, MD

- 9:43 – 9:48** Advances In Fusion Techniques To Make Them More Accurate: Use Of Vascular Calcium To Correct For Aortic Distortion From Sheaths And Wires And Automatic Fusion Registration And Re-Registration
Alan B. Lumsden, MD
- 9:49 – 9:54** A New System For Automated 3D Fusion Overlay Which Works With All Digital Fluoroscopes – Fixed And MOBILE From All Manufacturers And Which Re-Registers With Patient And Table Movement
Tom Carrell, MD, MChir
- 9:55 – 10:00** A Modern Hybrid Room Will Reduce Radiation Dose And Protect Patients' Kidneys: Tips And Tricks To Use Such Rooms Optimally
Lieven F. Maene, MD
- 10:01 – 10:06** Rotation Angio-CT: What Is It And How Can It Improve Complex Endovascular Treatments Compared To Standard DSA And Pressure Measurements
Timothy A. Resch, MD, PhD
- 10:07 – 10:12** Update On New Assets In Hybrid Suites And How They Help Get Better Results
Stephan Haulon, MD
- 10:13 – 10:18** How To Train Hybrid Suite Staff Optimally For Complex Aortic Procedures: It's Essential They Know About All Equipment
Rodney A. White, MD
- 10:19 – 10:27** Panel Discussion
- Moderators:** *Rodney A. White, MD*
Alan B. Lumsden, MD
- 10:27 – 10:32** Mobile C-Arm (Ziehm Vision RFT Hybrid) And Stille Mobile Floating Table Has Many Of The Advantages Of A Hybrid Room At A Lower Cost And They Can Function In Multiple ORs
Peter C.J. Goverde, MD
- 10:33 – 10:38** Intra-arterial Arteriography Does Not Always Accurately Reflect The Anatomy: What Can Be Done To Fix This Problem
Nicolas A. Diehm, MD
- 10:39 – 10:44** RCT Comparing Ultrasound Guided Femoral Access vs. Standard Fluoro Guided Access: Ultrasound Is Superior And Should Be Used Routinely
Patrick A. Stone, MD
- 10:45 – 10:50** Can Optical Techniques Replace X-ray For Interventional Guidance: Some Specifics
Frans L. Moll, MD, PhD
- 10:51 – 10:56** Value Of Optical Coherence Tomography (OCT) In The Treatment Of Lower Extremity And Other Arteries: How Does It Work And What Are The Limitations
Vikram S. Kashyap, MD
- 10:57 – 11:02** Value Of IVUS To Evaluate Residual Stenoses After SFA Interventions And SPY To Evaluate Foot Tissue Perfusion To Assess Procedure Effectiveness: How Do They Work
Wei Zhou, MD
- 11:03 – 11:11** Panel Discussion

SESSION 88 (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THORACIC OUTLET SYNDROME (TOS)

Moderators: Karl A. Illig, MD

Robert W. Thompson, MD

- 11:11 – 11:16** What's New In The Treatment Of TOS
Robert W. Thompson, MD
- 11:17 – 11:22** New SVS Reporting Standards For TOS: Highlights And What Is New And Different
Karl A. Illig, MD
- 11:23 – 11:28** Value Of Supraclavicular Approach To TOS And First Rib Resection: Technical Tips And Tricks To Simplify The Approach
Ramesh K. Tripathi, MD
- 11:29 – 11:34** Robot Assisted Thoroscopic First Rib Resection Is The Approach Of Choice For TOS: Why And What Equipment And Skills Are Required
Hans M.E. Coveliers, MD, MBA
- 11:35 – 11:40** Treatment Of TOS In Competitive Athletes: When Is Surgical Treatment Indicated: Technical Tips And Tricks
Jason T. Lee, MD
- 11:41 – 11:46** How Can Cervical Ribs Cause A Stroke: What Is The Best Treatment If They Do
Fred A. Weaver, MD
- 11:47 – 11:52** Outpatient Surgery For TOS Is Safe And Effective: Technical Details, Precautions, And Requirements
Sam S. Ahn, MD, MBA
- 11:53 – 12:00** Panel Discussion
- 12:00 – 1:00** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 89 (Grand Ballroom West, 3rd Floor)

NEW OR UPDATED CONCEPTS REGARDING VASCULAR TRAUMA, TAKAYASU'S DISEASE; AND MEDICAL TOPICS

Moderators: Richard J. Powell, MD

Vivian Gahtan, MD

- 1:00 – 1:05** Improving Outcomes Of Treatment For Major Trauma (Vascular And Other) With Aortic Balloon Control And Other Over The Wire Endovascular Techniques: The REBOA Registry And How Aortic Balloon Control Should Work
Tal M. Hörer, MD, PhD
- 1:06 – 1:11** Resuscitative Endovascular Balloon Occlusion Of The Aorta (REBOA) With A Low Profile Not Over-A-Guide Wire: How Does It Work And Value In Military And Civilian Injuries
Todd E. Rasmussen, MD
- 1:12 – 1:17** Update On A Simplified Aortic Occlusion Balloon System For RAAAs, Major Vascular Or Other Hemorrhagic Trauma: Does It Require Fluoro And Who Can Use It
Benjamin W. Starnes, MD

TAKAYASU'S DISEASE

- 1:18 – 1:23** What Is The Role Of Endovascular Treatments In Takayasu's Disease Of The Aorta And Its Branches
Narendra N. Khanna, MD, DM

- 1:24 – 1:29 Pitfalls In The Endovascular Treatment Of Takayasu's Disease: Should They Ever Be Used And When
Byung-Boong Lee, MD
- 1:30 – 1:35 **DEBATE:** Endovascular Treatments Should Be Used In Many Patients With Intermittent Claudication
Ali Amin, MD, RVT
- 1:36 – 1:41 **DEBATE:** Not So: Exercise And Medical Therapy Are The Best Treatment For Almost All Patients With Intermittent Claudication
Erich Minar, MD
- 1:42 – 1:47 How To Predict Groin Wound Infections After Open Vascular Surgery: What Can Be Done To Prevent Them
Cynthia K. Shortell, MD
- 1:48 – 1:53 **DEBATE:** Statins Are Disruptive Safe Miracle Drugs And Should Be Used More Widely: Which Drug, What Dose And For Whom
Don Poldermans, MD
- 1:54 – 1:59 **DEBATE:** Not So: Statin Benefits Are Overblown And They Are Dangerous: They Should Be Used Less
Sherif Sultan, MD
- 2:00 – 2:06 Panel Discussion

SESSION 90 (Grand Ballroom West, 3rd Floor)

PROGRESS AND UPDATES ON MEDICAL TREATMENTS AND OTHER SUBJECTS

Moderators: *Elliot L. Chaikof, MD, PhD*

Andrew N. Nicolaidis, MS

MEDICAL TREATMENTS

- 2:06 – 2:11 How To Incorporate A Dedicated Cardiovascular Disease Prevention Program Into A Vascular Practice And Make It Work
Sam S. Ahn, MD, MBA
- 2:12 – 2:17 Value Of Cilostazol (Pletal) In Vascular Patients: It's Not Just For Claudication: Beneficial Effects, Who Should Get And At What Dose
Richard J. Powell, MD
- 2:18 – 2:23 With Vascular Patients And Vascular Procedures, When Are Beta Blockers Helpful: In What Dose And With What Precautions
Mark L. Friedell, MD
- 2:24 – 2:29 Preoperative Beta Blockers Reduce Operative Mortality (30-Day) And Non-Cardiac Morbidity After Elective Open AAA Repair
Mahmoud B. Malas, MD, MHS
- 2:30 – 2:35 What Is New In Best Medical Therapy For Vascular Patients: How Can Its Effectiveness Be Measured: What LDL Level Should We Strive For; Can The LDL Level Ever Be Too Low
Russell H. Samson, MD, RVT
- 2:36 – 2:41 When And Why Should Vascular Surgeons Prescribe Maximal Dose Statins: What Dose Is This And What Are The Risks
Anthony J. Comerota, MD
- 2:42 – 2:47 High Dose Ruvostatin (Crestor) Leads To Decreased Renal Damage After Contrast Arteriography: Should It Be Used More Widely As A Renal Protective Agent
Olivier H.J. Koning, MD, PhD

2:48 – 2:53 When After Coronary Stenting With A DES Or BMS Is It Safe To Stop Clopidogrel And Perform An Open Operation: The Latest Update
Don Poldermans, MD

2:54 – 3:02 Panel Discussion

Moderators: *Anthony J. Comerota, MD*
Russell H. Samson, MD, RVT

3:02 – 3:07 Mortality Is A More Important End Point Than Stroke In Patients With An Asymptomatic Carotid Stenosis: What Can Be Done About It
Andrew N. Nicolaidis, MS

3:08 – 3:13 Postoperative And Post-Procedural Myocardial Infarctions (MIs): Evaluation, Risk Factors And Optimal Prevention And Treatment: We Can Do More
Peter Henke, MD

CCSVI (SEE ALSO SESSION 97)

3:14 – 3:19 Update On CCSVI And Interventions For MS: Role Of Autonomic Nervous System And Is There Still A Role For Angioplasty Of Vein Stenoses
Donald B. Reid, MD

3:20 – 3:25 How Are 3D Navigational Tools Helpful In Lower Extremity Interventions
Jos C. van den Berg, MD, PhD

3:26 – 3:31 When Is Duplex Ultrasound Surveillance A Safe Alternative For CT Or MR – After EVAR; After Lower Extremity Revascularizations: What Are The Requirements
Keith D. Calligaro, MD
Matthew J. Dougherty, MD

3:32 – 3:39 Panel Discussion

3:40 – 4:00 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 91 (Grand Ballroom West, 3rd Floor)

RECORDED LIVE CASES ON COMPLEX AAA AND TAAA REPAIRS WITH FENESTRATED AND BRANCHED ENDOGRAFTS

Moderators: *Giovanni Torsello, MD*
Martin J. Austermann, MD
Gustavo S. Oderich, MD

4:00 – 4:20 Complex Cases From Münster
Martin J. Austermann, MD
Giovanni Torsello, MD

4:20 – 4:27 Questions And Discussion

4:28 – 4:48 Complex Cases From The Mayo Clinic
Gustavo S. Oderich, MD

4:48 – 4:55 Questions And Discussion

SESSION 92 (Grand Ballroom West, 3rd Floor)

NEW CONCEPTS AND TECHNIQUES AND RADIATION SAFETY

Moderators: *Lindsay Machan, MD*
Barry T. Katzen, MD

4:55 – 5:00 Innovative Approach To Angiogenic Cell Therapy For CLI: Hope For The Future And BOLD MRI: A New Method To Measure Calf Perfusion To Monitor Its Effects
Bijan Modarai, MD, PhD

5:01 – 5:06 Duplex Imaging Is The Best Surveillance Method After EVAR With Chimney Grafts
Ross Milner, MD

RADIATION SAFETY

5:07 – 5:12 Radiation Protection Training And Coaching In A Simulated Hybrid Suite Markedly Reduces Radiation Exposure To Patients And Staff
Lars B. Lönn, MD, PhD

5:13 – 5:18 New Developments In Radiation Safety: Proper C-Arm Angulation, Dynamic Computer Assisted Collimation (Ikomed Technologies), Radiation Reducing Cap (No Brainer) And Avoiding Mag Views
Lindsay Machan, MD

5:19 – 5:24 Disposable Radiation Absorbing Surgical Drapes Reduces X-ray Exposure To Operators And Nurses
Marc R.H.M. van Sambeek, MD, PhD

5:25 – 5:30 Fixed vs. Mobile Imaging For Endovascular Procedures: Comparative Radiation Exposure To Staff Members: How Should Staff Dosage Best Be Quantitated
Vikram S. Kashyap, MD

5:31 – 5:36 New Dose Aware System For Monitoring Staff Radiation Exposure As It Occurs
Mario L. Lachat, MD

5:37 – 5:42 Surgeon Or Operator Radiation Dose During Simple And Complex Endovascular Interventions: How Many Procedures Can An Operator Do Safely And How Can Dosage Be Decreased
Carlos H. Timaran, MD

5:43 – 5:48 How To Reduce Radiation Exposure With Endovascular Procedures
Barry T. Katzen, MD

5:49 – 5:56 Panel Discussion
End of Program L

PROGRAM M (SESSIONS 93-97)

DEEP VEIN DISEASE

Trianon Ballroom, 3rd Floor

SESSION 93 (Trianon Ballroom, 3rd Floor)

VEIN CROSS-SECTIONAL IMAGING

TECHNIQUES, PELVIC VEIN INCOMPETENCE

Moderators: Jose I. Almeida, MD, RVT, RPVI

Lowell S. Kabnick, MD, RPhS

7:00 – 7:05 Introduction
Lowell S. Kabnick, MD, RPhS

7:06 – 7:11 The Use Of IVUS To Document May-Thurner Anatomy
Lowell S. Kabnick, MD, RPhS

7:12 – 7:17 How To Measure Iliac Vein Stenosis
Seshadri Raju, MD

7:18 – 7:23 Compare IVUS And Multi-Planar Venography For Proper Characterization Of The Occlusive Disease In The Iliac Veins And CFV
Paul J. Gagne, MD

7:24 – 7:29 Novel Imaging Techniques With MRI For Thrombus Aging
Stephen A. Black, MD

7:30 – 7:35 MRV And CTV In Imaging Of Pelvic And Abdominal Venous Compressive Syndromes: Which Is Better And Why
Barry Stein, MD

- 7:36 – 7:41** Image Fusion With MRV For 3D Guidance Of Deep Venous Interventions
Rick De Graaf, MD, PhD
- 7:42 – 7:47** Cone Beam CT vs. IVUS In Iliac Venous Stenting
Gerard J. O’Sullivan, MD
- 7:48 – 7:52** Panel Discussion

PELVIC VENOUS INCOMPETENCE

- 7:53 – 7:58** Pelvic Venous Duplex: How To Find The Pathology
Jan M. Sloves, RVT
- 7:59 – 8:04** Anatomy Of Pelvic Pathology
Omar L. Esponda, MD
- 8:05 – 8:10** How To Treat Vulvar Veins Before Or After Pelvic Embolization
Barrie A. Price, Mr., MD, MS
- 8:11 – 8:16** How To Treat Peroneal Varicosities With Pelvic Symptoms: Combined Approach
Melvin Rosenblatt, MD
- 8:17 – 8:22** Embolization Has A Major Role In The Treatment Of Varicocele And Pelvic Congestion Syndrome
Lindsay Machan, MD
- 8:23 – 8:28** The Safety Of Coil Embolization Of Pelvic Veins And Subsequent Pregnancy
Mark S. Whiteley, MS
- 8:29 – 8:34** Ovarian Vein, Hypogastric Vein Incompetence Or Compression Syndrome: Coil, Stent, Both, Neither
Constantino Pena, MD
- 8:35 – 8:40** Should You Worry About The Left Renal Vein When Occluding The Left Ovarian Vein
Jose I. Almeida, MD, RVT, RPVI
- 8:41 – 8:46** Acute Or Chronic Ovarian Vein Thrombosis: What To Do
Mikel Sadek, MD
- 8:47 – 8:52** Nutcracker Syndrome: Favorable Outcomes With Endovascular Intervention (Over Open Repair)
Thomas S. Maldonado, MD
- 8:53 – 8:58** Panel Discussion

SESSION 94 (Trianon Ballroom, 3rd Floor)

FEMORO-ILIOCAVAL INTERVENTIONAL STRATEGIES TO REDUCE VENOUS HYPERTENSION, HOT IDEAS FOR RECANALIZING CHRONIC TOTAL OCCLUSIONS

Moderators: *Jose I. Almeida, MD, RVT, RPVI*
William A. Marston, MD

- 8:59 – 9:04** Quality Of Life Assessment After Iliac Vein Stenting For DVT From May-Thurner Syndrome
Todd Berland, MD
- 9:05 – 9:10** Classification Of Anatomic Involvement Of The Iliocaval Venous Outflow Tract And Its Relationship To Outcomes After Iliocaval Venous Stenting
William A. Marston, MD
- 9:11 – 9:16** Should Venous Interventions Be Performed In Patients With Right Heart Failure
Omar L. Esponda, MD
- 9:17 – 9:22** Crossing Femoro-Iliocaval Chronic Total Occlusions: Graduated Support And Tinkering
Jose I. Almeida, MD, RVT, RPVI

- 9:23 – 9:28** Occluded Iliac Venous Stents: How I Recanalize
Seshadri Raju, MD
Erin H. Murphy, MD
- 9:29 – 9:34** Cutting Balloon Angioplasty For Femoropopliteal Stenoses/Synechiae Causing Venous Post-Thrombotic Syndrome
Thomas O. McNamara, MD
- 9:35 – 9:40** Technical Considerations And Emerging Technology For Chronic Venous Occlusions
Brian G. DeRubertis, MD
- 9:41 – 9:46** Update On EKOS “ACCESS DVT” Trial For Post-Thrombotic Syndrome
Mark J. Garcia, MD
- 9:47 – 9:52** What To Do When Inflow To Groin Is Poor
Gerard J. O’Sullivan, MD
- 9:53 – 9:58** Selection Criteria For Venous Angioplasty To Treat Post-Thrombotic Syndrome
Thomas O. McNamara, MD
- 9:59 – 10:04** An Update On VIVO-EU – The Zilver Vena Venous Stent Study In Europe
Gerard J. O’Sullivan, MD
- 10:05 – 10:10** VIRTUS: An Evaluation Of The VICI Venous Stent System In Patients With Chronic Iliofemoral Venous Outflow Obstruction
Mikel Sadek, MD
- 10:11 – 10:16** The Modena Iliac Vein Stent Experience
Oscar Maleti, MD
- 10:17 – 10:22** When And How To Use Sharp Devices For Iliocaval Recanalization
Mark J. Garcia, MD
- 10:23 – 10:28** Stent Fenestration, Z-Stents, Or Use Of The Azygous For Difficult Iliocaval Outflow
Jose I. Almeida, MD, RVT, RPVI
- 10:29 – 10:34** What Is The Ideal Venous Stent
Lowell S. Kabnick, MD, RPhS
- 10:35 – 10:40** Panel Discussion

SESSION 95 (Trianon Ballroom, 3rd Floor)

STRATEGIES FOR CORRECTING SEVERE DEEP VENOUS REFLUX AND/OR OBSTRUCTION, WOUNDS AND NEW HORIZONS FOR VENOUS DISEASE MANAGEMENT

Moderators: *Joseph D. Raffetto, MD*
Ramesh K. Tripathi, MD

- 10:41 – 10:46** Surgical Reconstruction Of The Deep Veins
Stephen A. Black, MD
- 10:47 – 10:52** Chronic Deep Venous Occlusive Disease: What Is The True Extent Of The Problem; Do We Know; Optimal Anticoagulation After Deep Venous Stenting
Manj S. Gohel, MD, RCS
- 10:53 – 10:58** Causes Of Failure Of Iliac Vein Stenting And What To Do About Them
Ramesh K. Tripathi, MD
- 10:59 – 11:04** New Techniques In The Evaluation Of Lymphedema: Defining The Pathophysiology
Thomas F. O’Donnell, Jr., MD
- 11:05 – 11:10** Deep Venous Valve Treatment: When And Why
Ramesh K. Tripathi, MD

11:11 – 11:16 Deep Venous Valve Treatment: Technique And Patency Rates
Oscar Maleti, MD

WOUNDS AND NEW HORIZONS

11:17 – 11:22 RCT Demonstrating The Efficacy And Benefits Of Sulodexide Treatment In Patients With Venous Ulcers
Joseph D. Raffetto, MD

11:23 – 11:28 Definition Of Venous Ulcer: Clinical Evaluation Wound Care, Compression, Surgical Treatment, Ancillary Measures And Primary Prevention
Marc A. Passman, MD

11:29 – 11:34 Important RCTs For Venous Wound Healing
William A. Marston, MD

11:35 – 11:40 The Argument For Surgical Intervention In Patients With Venous Ulcer, Based On Healthcare Savings
Thomas F. O'Donnell, Jr., MD

11:41 – 11:46 Proteomics And Degradomics In Venous Leg Ulcers
Joseph D. Raffetto, MD

11:47 – 11:52 Not All Leg Ulcers Are Venous
Raghu Kolluri, MD

11:53 – 11:59 Panel Discussion

12:00 – 1:00 Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 96 (Trianon Ballroom, 3rd Floor)

STRATEGIES FOR THROMBOEMBOLIC EVENTS IN THE VENOUS SYSTEM, INCLUDING THE AXILLOSUBCLAVIAN SYSTEM

Moderators: *Joann Lohr, MD*
Gregory L. Moneta, MD

VTE MEDICAL

1:00 – 1:05 Do The NOACs Have Anti-Inflammatory Effects
Dawn M. Coleman, MD

1:06 – 1:11 Update On Reversal Agents For The NOACs
Timothy K. Liem, MD, MBA

1:12 – 1:17 Economy Class Syndrome: Air Travel-Related DVT And PE
Bo G. Eklof, MD, PhD

1:18 – 1:23 Isolated Soleal And Gastrocnemius Vein Thrombosis
Clifford M. Sales, MD, MBA

1:24 – 1:29 Neurological Presentation Of IVC Occlusion During Pregnancy With No Visible Changes Of Venous Hypertension
Joann Lohr, MD

1:30 – 1:35 Biomarkers Of Venous Thromboembolism
Thomas W. Wakefield, MD

1:36 – 1:41 Unusual Presentation/Complications Of Undiagnosed Thrombophilia
Joann Lohr, MD

1:42 – 1:48 Infection/Inflammation Associated With Acute DVT: From The Clinic To Bench
Peter Henke, MD

1:49 – 1:54 Experimental Insights Into PTS
Peter Henke, MD

VTE INTERVENTIONAL

- 1:55 – 2:00** Endovascular Management Of Ilio-Femoral DVT With Percutaneous Thrombectomy And Thrombolysis: Indications, Techniques And Results
Ali Amin, MD, RVT
- 2:01 – 2:06** Pharmacomechanical Thrombolysis Of Large Volume (Extensive) DVT Using The Rapid Lysis Technique
Mark J. Garcia, MD
- 2:07 – 2:12** ATTRACT Study: A Multicenter Randomized Trial To Evaluate Pharmacomechanical Catheter-Directed Thrombolysis
Constantino Pena, MD
- 2:13 – 2:18** First In Human Analysis Of The Aspirex Rotational Thrombectomy Catheter For Iliofemoral DVT
Michael K.W. Lichtenberg, MD
- 2:19 – 2:23** D-Dimer And/Or Duplex Findings To Manage DVT
Timothy K. Liem, MD, MBA
- 2:24 – 2:29** Impact Of Caval Occlusion On The Outcomes Of Thrombolysis For Iliofemoral DVT
Rabih A. Chaer, MD
- 2:30 – 2:35** Venous Issues In Thoracic Outlet Syndrome: Lysis, Venoplasty, First Rib Resection: Staged Or Same Setting
Enrique Criado, MD
- 2:36 – 2:41** Management Of Paget Schroetter Syndrome In Athletes
Handel R. Robinson, MD
- 2:42 – 2:47** Incidence Of Upper Extremity DVT After Central Venous Catheterization And What To Do
Gregory L. Moneta, MD
- 2:48 – 2:53** Panel Discussion

SESSION 97 (Trianon Ballroom, 3rd Floor)

ENDOASCULAR AND OPEN SOLUTIONS FOR INFERIOR VENA CAVA TUMORS AND OCCLUSIONS, VENA CAVA FILTRATION STRATEGIES, PITFALLS, AND COMPLICATIONS AND MORE ABOUT ILIAC VEIN STENTING

Moderators: *Peter Gloviczki, MD*

William J. Quinones-Baldrich, MD

MORE FEMORAL-ILIOCAVAL FLOW ISSUES

- 2:54 – 2:59** IVC Agenesis: Is This A Real Entity
David M. Williams, MD
- 3:00 – 3:05** Caval Tumors
William A. Marston, MD
- 3:06 – 3:11** Evolution Of Venous In-Stent Stenosis: Do Anti-Platelet Agents Help Mitigate
David M. Williams, MD
- 3:12 – 3:17** QOL After Deep Venous Recanalization Procedures: Any Relation To Patency
Cees H.A. Wittens, MD, PhD
- 3:18 – 3:23** Conduit Choices For In-Line Caval Reconstruction
Peter Gloviczki, MD
- 3:24 – 3:29** IVC Replacement For Malignancy: How To Do It And What Is The Best Graft
Thomas C. Bower, MD
- 3:30 – 3:35** Difficult Femoral And Iliocaval Endovascular Reconstructions: Lessons Learned
Jose I. Almeida, MD, RVT, RPVI

- 3:36 – 3:41 Patient Selection For In-Line Caval Reconstruction
William J. Quinones-Baldrich, MD
- 3:42 – 3:47 Endovascular Treatment Of Superior Vena Cava Syndrome Because Of Central Vein Occlusion
Narendra N. Khanna, MD, DM
- 3:48 – 3:53 Venous Atherectomy: Just Saying
Jose I. Almeida, MD, RVT, RPVI
- 3:54 – 3:59 Open Surgery For CCSVI Reduces The Brain Ventricles Volume
Paolo Zamboni, MD

CAVAL FILTRATION ISSUES

- 4:00 – 4:05 Indications For IVC Filters: Are They Being Observed
John E. Rectenwald, MD, MS
- 4:06 – 4:11 Update On The Sentry Bioconvertible Non-Retrieval IVC Filter
David Rosenthal, MD
- 4:12 – 4:17 Robotic Vena Cava Surgery
Samuel R. Money, MD, MBA
- 4:18 – 4:23 The PREPIC Trial: Fact Or Fiction
John E. Rectenwald, MD, MS
- 4:24 – 4:29 Update On The PRESERVE Vena Cava Filter Study
David L. Gillespie, MD
- 4:30 – 4:35 Early Clinical Experience With The Celect Platinum Filter, With Focused Pre-Retrieval Imaging Planning
Atul Gupta, MD
- 4:36 – 4:41 Major Complications After IVC Filter Placement And How To Avoid Them
Clifford M. Sales, MD, MBA
- 4:42 – 4:47 IVC Filter Retrieval Rates: The Influence Of Filter Design, Practice Administration And The Operator
Richard G. McWilliams, FRCR
- 4:48 – 4:53 IVC Recanalization In The Presence Of A Thrombosed IVC Filter
David M. Williams, MD
- 4:54 – 5:00 Panel Discussion
- End of Program M**

PROGRAM N (SESSIONS 98-101) COMPLEX VASCULAR MALFORMATIONS AND VASCULAR TUMORS

Gramercy Suites East and West, 2nd Floor

SESSION 98 (Gramercy Suites East and West, 2nd Floor) CLASSIFICATION, IMAGING, AND PHARMCO-THERAPY

Moderators: *Krassi Ivancev, MD, PhD*
Francine Blei, MD, MBA
Byung-Boong Lee, MD

- 7:55 – 8:00 Introduction
Krassi Ivancev, MD, PhD
- 8:00 – 8:10 Current Classification And Nomenclature Of Vascular Malformations
Patricia E. Burrows, MD
- 8:10 – 8:20 The Hamburg Classification In Vascular Malformations: Clinical Applications Of The System
Byung-Boong Lee, MD

- 8:20 – 8:30** 2015 ISSVA Classification Update
Francine Blei, MD, MBA
- 8:30 – 8:40** Vascular Tumors Confused With Vascular Malformations
Francine Blei, MD, MBA
- 8:40 – 8:50** New Imaging Modalities Essential For Accurate Diagnosis Of Vascular Malformations
Cynthia K. Shortell, MD
- 8:50 – 9:00** The Houdart CNS AVM Classification, The Do Peripheral AVM Classification, And The Yakes AVM Classification And Its Therapeutic Implications
Krassi Ivancev, MD, PhD
- 9:00 – 9:10** Update On the Role Of Pharmco-Therapy In Vascular Malformations
Gresham T. Richter, MD
- 9:10 – 9:20** The Role Of Medical Therapies For Pediatric Hemangioma And Vascular Malformations
Francine Blei, MD, MBA
- 9:20 – 9:40** Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 99 (Gramercy Suites East and West, 2nd Floor)

HEAD AND NECK VASCULAR MALFORMATION TREATMENT ISSUES

Moderators: *Guilherme Dabus, MD*
Gresham T. Richter, MD
Philip M. Meyers, MD
Pierre Gobin, MD

- 9:40 – 9:50** Dangerous Arterial Connections In The Head And Neck: Avoiding Vascular Neurological Complications And The Judicious Use Of Embolic Agents
Guilherme Dabus, MD
- 9:50 – 10:00** Endovascular Treatment Of Retinoblastoma: A Primary Form Of Therapy
Peter Gobin, MD
- 10:00 – 10:10** Endovascular Treatment Of Dural AVF: A Complex Acquired Vascular Lesion With Microfistulae Involving The Dural Sinuses
Philip M. Meyers, MD
- 10:10 – 10:20** Liquid Embolic Agents In The Treatment Of Craniofacial AVMs And AVSs: Techniques And Results
Guilherme Dabus, MD
- 10:20 – 10:30** Management Of Complex Head And Neck Low-Flow Venous And Lymphatic Malformations
Robert L. Vogelzang, MD
- 10:30 – 10:40** AVMs: Staged Multimodal Therapy For the Most Aggressive Head And Neck Vascular Malformations
Gresham T. Richter, MD
- 10:40 – 10:50** The Otolaryngologist's Distinct Role In The Multidisciplinary Vascular Malformation Management Team
Edward J. Hepworth, MD
- 10:50 – 11:00** Current Surgical Indications For Infantile Hemangioma In The Era Of Propranolol
Gresham T. Richter, MD
- 11:00 – 11:10** Surgical Reconstructive Techniques Post-Endovascular Ablation Of Head And Neck Vascular Malformation
Randolph C. Robinson, MD, DDS
- 11:10 – 11:15** Onyx AVM Embolotherapy: The Histologic Tissue Changes, Tissue Inflammatory Response, Fluoroscopy Issues, And Endovascular Issues With Its Use
Mollie Meek, MD

- 11:15 – 11:25** Laser Therapy For Cutaneous Vascular Anomalies
Gresham T. Richter, MD
- 11:25 – 11:35** Curative Endovascular Treatment Of Complex Multiple AVMs Of The Head And Neck
Robert L. Vogelzang, MD
- 11:35 – 12:55** Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION100 (Gramercy Suites East and West, 2nd Floor)

EXTREMITY LOW-FLOW VASCULAR MALFORMATION MANAGEMENT ISSUES

Moderators: *Cynthia K. Shortell, MD*
Patricia E. Burrows, MD
Emmanuel M. Houdart, MD
Ahmad Alomari, MD, MSc

- 12:55 – 1:05** Pitfalls In Superficial Vascular Malformation Endovascular Management
Emmanuel M. Houdart, MD
- 1:05 – 1:15** Management Of Vascular Anomalies In Genetic And Syndromic Disorders
Ahmad Alomari, MD, MSc
- 1:15 – 1:25** Treatment Of Vascular Malformations In Infants
Patricia E. Burrows, MD
- 1:25 – 1:35** Special Diagnostic Considerations In Vascular Malformation Patients
Cynthia K. Shortell, MD
- 1:35 – 1:45** Treatment Of Intramuscular Venous Malformations Of The Extremities
Robert J. Rosen, MD
- 1:45 – 1:55** Ethanol Ablation Of Venous Malformations Of The Chest, Abdomen, And Buttocks
Krassi Ivancev, MD, PhD
- 1:55 – 2:05** Surgical Approaches To Vascular Malformation Management: Triumphs And Pitfalls
Christopher J. Morin, MD
- 2:05 – 2:15** Surgical Concepts To Treat The Lateral Marginal Vein Of The Lower Extremity
Byung-Boong Lee, MD
- 2:15 – 2:25** Imaging And Management Of Chylous Leak
Ahmad Alomari, MD, MSc
- 2:25 – 2:35** Extensive Venous Malformations: How To Proceed With Low Platelets, Low Fibrinogen, And High D-Dimers
Iris Baumgartner, MD
- 2:35 – 2:45** Venous Malformations Of The Lower Extremity: Long-Term Follow-Up
Patricia E. Burrows, MD
- 2:45 – 3:05** Break – Visits Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 101 (Gramercy Suites East and West, 2nd Floor)
**AV MANAGEMENT: CURRENT CONTROVERSIES
IN VARIOUS TREATMENT STRATEGIES**

*Moderators: Robert L. Vogelzang, MD
Iris Baumgartner, MD
Robert J. Rosen, MD
Wayne F. Yakes, MD*

- 3:05 – 3:15** Common Femoral And Iliac Arterial Sparing Endovascular Techniques In Neonates
Patricia E. Burrows, MD
- 3:15 – 3:25** Non-Traumatic Acquired AVMs: More Common Than We Realize
Robert L. Vogelzang, MD
- 3:25 – 3:35** Fibro-Adipose Vascular Anomaly (FAVA) Of The Extremities: A Clinical-Radiological-Pathologic Review
Ahmad Alomari, MD, MSc
- 3:35 – 3:45** Curative Treatment Of Complex And Multiple Intraosseous AVMs
Robert L. Vogelzang, MD
- 3:45 – 3:55** Long-Term Outcomes For The Treatment Of Vascular Malformations: The Chicago Northwestern Experience
Robert L. Vogelzang, MD
- 3:55 – 4:05** Staged Endovascular Management Of Pelvic AVMs With nBCA
Robert J. Rosen, MD
- 4:05 – 4:15** Transvenous Endovascular And Percutaneous Treatment Of AVMs: Determining The Pathologic Aneurysmal Vein
Robert L. Vogelzang, MD
- 4:15 – 4:25** Vascular Malformation Repair Procedures: An International Road Show – Lessons Learned
Krassi Ivancev, MD, PhD
- 4:25 – 4:35** Endovascular Management Of Thoracic, Abdominal, And Mesenteric/Small Bowel AVMs
Krassi Ivancev, MD, PhD
- 4:35 – 4:45** Current Percutaneous Embolotherapy Techniques For Curative Treatment Of AVMs Of The Foot
Iris Baumgartner, MD
- 4:45 – 4:55** Intralipomatous Capillary-Venous Malformations: Endovascular And Surgical Considerations Of A Challenging New Entity
Christopher J. Morin, MD
- 4:55 – 5:05** Curative Endovascular Management Strategies For Yakes Types IIb, IIIa, And IIIb AVMs
Krassi Ivancev, MD, PhD
- 5:05 – 5:10** The Yakes Type IV AVM (Characterized By Total Tissue AVM Infiltration Complicated By Capillaries Admixed Within The Innumerable AVFs): Angio-Architecture Features And Curative Endovascular Treatment Strategies To Preserve The Involved Tissue
Robert L. Vogelzang, MD
- 5:10 – 5:15** Closing Remarks
Robert L. Vogelzang, MD
End of Program N

SATURDAY, NOVEMBER 21, 2015

6:00 A.M. General Registration – 2nd Floor Promenade
 6:00 A.M. Faculty Registration – Morgan Suite, 2nd Floor
 6:15 A.M. Continental Breakfast – 3rd Floor Foyer/Promenade

CONCURRENT SATURDAY PROGRAMS

PROGRAM O: SESSIONS 102-109

Important New Developments In Vascular Disease Of The Lower Extremities, Carotids And Aorta; Vascular Trauma

6:45 A.M. – 4:50 P.M.

Grand Ballroom East, 3rd Floor

PROGRAM P: SESSIONS 110-114

Improving Outcomes In Hemodialysis Access

7:55 A.M. – 4:25 P.M.

Grand Ballroom West, 3rd Floor

Course Leaders: **Larry A. Scher, MD**

Anton N. Sidawy, MD, MPH

PROGRAM Q: SESSIONS 115-120

New Developments In Treatment Of Diseases Of The Abdominal And Thoracic Aorta, TAAAs, TBADs And Lower Extremities; More Updates And New Concepts

6:54 A.M. – 3:40 P.M.

Trianon Ballroom, 3rd Floor

PROGRAM O (SESSIONS 102-109)

IMPORTANT NEW DEVELOPMENTS IN VASCULAR DISEASES OF THE LOWER EXTREMITIES, CAROTIDS AND AORTA; VASCULAR TRAUMA

Grand Ballroom East, 3rd Floor

SESSION 102 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN DISEASES OF THE LOWER EXTREMITY, ILIAC AND RENAL ARTERIES (4 ½-MINUTE HIT THE HIGHLIGHTS TALKS)

Moderators: **Patrice F. Bergeron, MD**

Frank J. Veith, MD

6:45 – 6:50 Why Your Patient's Primary Care Physician And Internist Are As Responsible As You For The Outcome Of Your Lower Extremity Revascularization

Philip P. Goodney, MD, MS

6:50 – 6:55 Health Care Benefits One Year After Invasive Treatment For Lower Extremity Ischemia: The Patient's Baseline Status Is Key

Jan M.M. Heyligers, MD, PhD

6:55 – 7:00 **DEBATE:** Endo First Approach For Lower Extremity Ischemia Does Not Compromise Later Open Bypass Procedures Or Their Results

Craig M. Walker, MD

7:00 – 7:05 **DEBATE:** Endo First Approach For All Lower Extremity Ischemia Sometimes Leads To Worse Outcomes If A Subsequent Bypass Is Required – Especially With TASC C And D Lesions: Some Patients Should Have A Bypass First

Fred A. Weaver, MD

- 7:05 – 7:10** With The Supera Stent Proper Artery Preparation And Deployment Techniques Are Important To Getting Good Results – Especially With Long Or Calcified Lesions: A Real World Experience
Donald L. Jacobs, MD
- 7:10 – 7:15** The Supera Stent And Vasculomimetic Technology: Why It Works So Well
Peter C.J. Goverde, MD
- 7:15 – 7:20** Endovascular Treatment Of A Large Aorta-To-Renal Vein Fistula (AVF): It's Not Simple
Jos C. van den Berg, MD, PhD
- 7:20 – 7:25** Long-Term Results Of The COBEST Trial Comparing Covered And Bare Metal Stents For Treatment Of Complex Aortoiliac Occlusive Lesions
B. Patrice Mwipatayi, FRACS
- 7:25 – 7:30** Panel Discussion

Moderators: *Enrico Ascher, MD*
John B. Chang, MD

- 7:30 – 7:35** Advantages Of Intraluminal vs. Subintimal Routes For Recanalization Of SFA CTOs: How To Achieve Them
Enrico M. Marone, MD
- 7:35 – 7:40** Should Transpedal Access Be Used More Widely For Lower Extremity Revascularizations: Pluses And Minuses
Michael H. Wholey, MD, MBA
- 7:40 – 7:45** Limitations Of Pedal And Other Retrograde Approaches For Lower Extremity Revascularizations
Fabrizio Fanelli, MD
- 7:45 – 7:50** Lower Extremity Interventions And CAS Can Be Improved And Made Easier By New Better Imaging
Koen Deloose, MD
- 7:50 – 7:55** What Intervention Can Be Done For Failed SFA Stents: Minimally Invasive Lesion And Stent Removal With Long Endarterectomy Followed By PTFE Lining: Another Option Before Open Surgery – Technique And Results
Patrice F. Bergeron, MD
Dieter Raithel, MD, PhD
- 7:55 – 8:00** Puncture Of The Occluded SFA As A Better Access Route For Treatment Of TASC D Lesions
Aravinda Nanjundappa, MD
- 8:00 – 8:05** Panel Discussion

SESSION 103 (Grand Ballroom East, 3rd Floor)
MORE EXCITING NEW DEVELOPMENTS IN LOWER EXTREMITY DISEASE AND ITS TREATMENT (4 1/2-MINUTE HIT THE HIGHLIGHTS TALKS)

Moderators: *Iris Baumgartner, MD*
Kenneth Ouriel, MD, MBA

- 8:05 – 8:10** Special Considerations In Treating CLI In ESRD-Dialysis Patients Endovascularly
Roberto Ferraresi, MD
- 8:10 – 8:15** Objective Performance Goals For Lower Extremity CLI Bypasses With And Without ESRD
Mark Conrad, MD, MMSc
- 8:15 – 8:20** With Severe CLI (Rutherford 5 And 6) Patient Survival After Endo Treatment Is Poor And Better With Open Surgery Treatment
Francesco Spinelli, MD

- 8:20 – 8:25** The Positive Correlation Between Osteoporosis And Arterial Disease: What Is Its Significance
Caron B. Rockman, MD
- 8:25 – 8:30** Micro-Oxygen Sensors (MOXYs) On Feet To Monitor The Effectiveness In Real Time Of Endovascular Treatments In CLI Patients
Miguel F. Montero-Baker, MD
- 8:30 – 8:35** **DEBATE:** How To Deal With Occluded Fempop Grafts Endovascularly: No Open Treatment Is Ever Needed
Marcelo Guimaraes, MD
- 8:35 – 8:40** **DEBATE:** Not So: There Is A Hybrid (Open/Endo) Technique Which Works Well When Endo Treatments Fail: Technique And Results
Neal S. Cayne, MD
- 8:40 – 8:45** Panel Discussion

Moderators: *Caron B. Rockman, MD*
Daniel G. Clair, MD

- 8:45 – 8:50** Treating Dissection, Perforations, Embolization And Other Complications Of Lower Extremity Interventions When Endo Rescue Fails: Tips And Tricks
Scott L. Stevens, MD
- 8:50 – 8:55** **DEBATE:** Statins After Infrainguinal Treatments For CLI Improves Patient Survival But With No Improved Patency
Philip P. Goodney, MD, MS
- 8:55 – 9:00** **DEBATE:** Statins After Infrainguinal Treatments For CLI Improves Patency As Well As Patient Survival
Iris Baumgartner, MD
- 9:00 – 9:05** Shockwave Lithoplasty: An Effective Treatment For Difficult BTK Lesions: Technical Tips And Results
Marianne Brodmann, MD
- 9:05 – 9:10** Not All ISR Lesions Need To Be Treated And Duplex Surveillance Predict ISR Lesions Requiring Treatment: Lesions >80% Require Treatment; Those <80% Can Be Observed
Miguel F. Montero-Baker, MD
- 9:10 – 9:15** Pathologic Insight Into The Safety And Efficacy Of Various Endovascular Treatments For ISR And CLI
Renu Virmani, MD
- 9:15 – 9:20** Durable Value Of DESs In Tibial Arteries For CLI: 3-4 Year Results: Indications And Contraindications
Michael J. Wilderman, MD
- 9:20 – 9:30** Panel Discussion And Break
Visit Exhibits And Pavilions (3rd Floor)

SESSION 104 (Grand Ballroom East, 3rd Floor)

MORE EXCITING NEW DEVELOPMENTS IN LOWER EXTREMITY DISEASE AND ITS TREATMENT (4 ½-MINUTE HIT THE HIGHLIGHTS TALKS)

Moderators: *James F. McKinsey, MD*
Neal S. Cayne, MD

- 9:30 – 9:35** Treatment Algorithm For Fempop Occlusive Disease: Which Treatment For Which Patient And Which Disease Pattern
Gary M. Ansel, MD

- 9:35 – 9:40** Value Of Sequential Biomechanical Compression Therapy In CLI: Does It Really Help In Patients With Rest Pain; With Ulceration And Gangrene
Sherif Sultan, MD
- 9:40 – 9:45** Novel Endovascular Method For Percutaneous Fempop Bypass Via The Venous System
Albrecht H. Krämer, MD
James D. Joye, DO
- 9:45 – 9:50** Status Of The SPINACH Registry From Japan Comparing Endo With Open Treatment For CLI: When Will We Have Answers
Nobuyoshi Azuma, MD
Osamu Iida, MD
- 9:50 – 9:55** DESs vs. DEBs: Which Is Best In What Setting
Thomas Zeller, MD
- 9:55 – 10:00** When Are DESs (Zilver PTX) Needed For CTOs In The SFA: Will Its New Delivery System Be Helpful
Fabrizio Fanelli, MD
- 10:00 – 10:05** Panel Discussion

Moderators: *Fabrizio Fanelli, MD*
Gary M. Ansel, MD

- 10:05 – 10:10** New Results With DESs For BTK Lesions For CLI: Results From The PES BTK-70 Trial (Stentys Stent With Paclitaxel); The PREVENT Trial (Promus Stent With Everolimus) And The DESTINY 2 Trial (XIENCE-PRIME Stent With Everolimus)
Koen Deloose, MD
Marc Bosiers, MD
- 10:10 – 10:15** Present Status Of Atherectomy Devices For Lower Limb Ischemia: Advantages Of The Different Devices: An Interventionalist's View
John R. Laird, MD
- 10:15 – 10:20** Present Status Of Atherectomy Devices For Lower Limb Ischemia: How Solid Is The Evidence That They Make A Difference: A Surgeon's View
James F. McKinsey, MD
- 10:20 – 10:25** Use Of Directional Atherectomy Via Retrograde Access From Pedal Or Popliteal Sites: Technique And Advantages
Syed M. Hussain, MD
- 10:25 – 10:30** Distal Embolic Protection For Lower Extremity Interventions: When, Why And How
Robert A. Lookstein, MD
- 10:30 – 10:35** Panel Discussion

SESSION 105 (Grand Ballroom East, 3rd Floor)

MORE EXCITING NEW DEVELOPMENTS IN LOWER EXTREMITY DISEASE AND ITS TREATMENT (4 ½-MINUTE HIT THE HIGHLIGHTS TALKS)

Moderators: *Andrej Schmidt, MD*
Amman Bolia, MD

- 10:35 – 10:40** Sustained >1 Year Effectiveness Of Interventions For CLI Is Improving: The Data Prove It And Why
Iris Baumgartner, MD
- 10:40 – 10:45** Overview Of Lower Extremity Occlusive Disease Treatment In Germany: Claudication vs. CLI; Endo vs. Open
Sebastian E. Debus, MD, PhD

- 10:45 – 10:50** Does The In.Pact Admiral DEB Work For TASC C And D Lesions And For ISR
Gary M. Ansel, MD
- 10:50 – 10:55** What Treatment Currently Works Best For Long Or Complex SFA Lesions
Koen Deloose, MD
Marc Bosiers, MD
Patrick Peeters, MD
- 10:55 – 11:00** **DEBATE:** Open Surgery Is The Best Treatment For Common Femoral Artery (CFA) Lesions
Sebastian E. Debus, MD, PhD
- 11:00 – 11:05** **DEBATE:** Techniques That Work For The Endovascular Treatment Of SFA Lesions: Midterm Results Justify Their Use
Thomas Zeller, MD
- 11:05 – 11:10** Panel Discussion
- Moderators:** *Thomas Zeller, MD*
Sebastian E. Debus, MD, PhD
- 11:10 – 11:15** **DEBATE:** Subintimal Guidewire Passage And Treatment Is The Best And Cheapest Technique For Fempop And BTK Lesions: How To Leave And Re-Enter The Lumen
Amman Bolia, MD
- 11:15 – 11:20** **DEBATE:** Intraluminal Guidewire Passage And Treatment Is The Best Technique For Most Lesions: How To Stay Intraluminal And Know It
Roberto Ferraresi, MD
- 11:20 – 11:25** **DEBATE:** Both Techniques Are Useful And Sometimes Required: Tips And Tricks
Andrej Schmidt, MD
- 11:25 – 11:30** Status Of The BEST Trial Comparing Endo And Open Treatments For Lower Extremity Occlusive Disease: Number Of Patients Recruited And When Will It Have Answers
Matthew T. Menard, MD
Alik Farber, MD
Kenneth Rosenfield, MD
- 11:30 – 11:35** The Truth About The BEST Trial
Mehdi H. Shishehbor, DO, MPH, PhD
- 11:35 – 11:40** In Young Patients With Intermittent Claudication: Some Uncommon Etiologies And How They Should Be Treated
Brian G. DeRubertis, MD
- 11:40 – 11:45** Panel Discussion
- 11:45 – 12:40** Lunch Break 3rd Floor Foyer/Promenade
Visit Exhibits And Pavilions (3rd Floor)

SESSION 106 (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN CAROTID DISEASE AND ITS TREATMENT (4 ½-MINUTE HIT THE HIGHLIGHTS TALKS)

Moderators: *Peter F. Lawrence, MD*
Ali F. AbuRahma, MD

- 12:40 – 12:45** CEA Outcomes Are Improving Over The Years: How Much
Alun H. Davies, MA, DM, DSc

- 12:45 – 12:50** Comparative Learning Curves And Procedural Times For Transfemoral CAS And Transcervical CAS Via An Open Exposure Of The Common Carotid: The Latter Is Easier
Sumaira Macdonald, MBChB, PhD
- 12:50 – 12:55** When Is Open Surgery Indicated After CAS With ISR: What Procedure Should Be Done So It Is Safe
Giustino Marcucci, MD
- 12:55 – 1:00** Pitfalls In Carotid Duplex Exams: How They Can Lead To False Positive And False Negative Results
Nicos Labropoulos, BS (Med), PhD, DIC, RVT
- 1:00 – 1:05** CEA Is Safe When Done Early After Thrombolytic Treatment For Acute Stroke
Martin Björck, MD, PhD
- 1:05 – 1:10** CAS Early After Symptom Onset Can Be Safe Under Certain Circumstances And With Specific Technical Precautions
Gioachino Coppi, MD
- 1:10 – 1:15** Panel Discussion

Moderators: *Alun H. Davies, MD, DM, DSc*
Sumaira Macdonald, MBChB, PhD

- 1:15 – 1:20** Carotid Duplex Surveillance Is Not Necessary After CEA With Patch Closure
Ali F. AbuRahma, MD
- 1:20 – 1:25** Tips And Tricks For Performing CAS With Proximal Embolic Protection
D. Christopher Metzger, MD
- 1:25 – 1:30** Retinal Embolization After Carotid Interventions (CEA Or CAS): Should It Be Used As A Surrogate End-Point In Asymptomatic Carotid Trials
Athanasios D. Giannoukas, MD, MSc, PhD
- 1:30 – 1:35** Effect Of Statins On Early And Late Outcomes Of CAS: Drug Dosage And Timing Of Administration Matter
Fabio Verzini, MD, PhD
Paola De Rango, MD
Piergiorgio Cao, MD
- 1:35 – 1:40** A Novel Frailty Risk Score Improves The Ability To Predict Outcomes Of CEA In Asymptomatic Carotid Stenosis Patients
Anton N. Sidawy, MD, MPH
- 1:40 – 1:45** Carotid Body Tumors: Update On Methods To Evaluate And Treat Including The Role Of Preop Embolization
Peter F. Lawrence, MD
- 1:45 – 1:50** Panel Discussion

SESSION 107 (Grand Ballroom East, 3rd Floor)
MORE NEW DEVELOPMENTS IN CAROTID DISEASE AND ITS TREATMENT (4 ½-MINUTE HIT THE HIGHLIGHTS TALKS)

Moderators: *Ross Naylor, MD*
Carlo Setacci, MD

- 1:50 – 1:55** After Thrombolysis For Acute Stroke, Which Is A Better And Safer Way To Treat Carotid Stenosis – CEA Or CAS
Alun H. Davies, MA, DM, DSc

- 1:55 – 2:00** Value Of Carotid Interposition PTFE Grafts For Failed, Difficult Or Redo CEA Procedures: Technical Tips, Precautions And Results
Dieter Raithel, MD, PhD
- 2:00 – 2:05** Gore Hybrid Vascular Grafts For Bailout Or Rescue For Intraoperative Problems During CEA
Dominico Valenti, DMChir, PhD
- 2:05 – 2:10** What Are The Current Duplex Velocities For Performing CEA In Asymptomatic Carotid Stenosis Patients: Why Other Imaging Should Be Obtained Preoperatively
Jack L. Cronenwett, MD
- 2:10 – 2:15** Long-Term Comparative Results Of CEA With A Patch And Eversion Endarterectomy: Which Is Better And When
Ashraf Mansour, MD
- 2:15 – 2:20** Technical And Other Tips To Improve CAS Results
L. Nelson Hopkins, MD
- 2:20 – 2:25** Panel Discussion

Moderators: *L. Nelson Hopkins, MD*
Jack L. Cronenwett, MD

- 2:25 – 2:30** Interventionists And Surgeons Do Equally Well With CAS: But Experience Matters: What Are Valid Minimum Numbers Of Cases
Roy M. Fujitani, MD, MBA
- 2:30 – 2:35** Lessons Learned From US Datasets With Outcomes After CEA And CAS: CAS Results Are Much Worse Than In CREST And Why
Ross Naylor, MD
- 2:35 – 2:40** Tips And Tricks For Vertebral Interventions: When Are They Needed
D. Christopher Metzger, MD
- 2:40 – 2:45** New Transcranial Doppler Technology And How It Can Help In Carotid Treatment
Gioachino Coppi, MD
- 2:45 – 2:50** Optimal Treatment Of Carotid Restenosis After CEA; And After CAS
Carlo Setacci, MD
- 2:50 – 2:55** Octogenarians With Asymptomatic Carotid Stenosis Rarely Benefit From CEA Or CAS
Michael Belkin, MD
- 2:55 – 3:05** Panel Discussion And Break

SESSION 108 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN DISEASES OF THE AORTA AND THEIR TREATMENT (4½-MINUTE HIT THE HIGHLIGHTS TALKS)

Moderators: *Nicholas J.W. Cheshire, MD*
Thomas S. Maldonado, MD

- 3:05 – 3:10** Quantitation Of Aortic (AAA) Neck And Sac Thrombosis: What It Tells Us; Is Neck Thrombosis A Risk Factor For Unsuccessful EVAR
Thomas S. Maldonado, MD
- 3:10 – 3:15** Should Saccular AAAs Be Treated Differently From Other AAAs: What Are The Size Criteria
Benjamin M. Jackson, MD

- 3:15 – 3:20** Back Table Reversed Limb Endografts (Zenith And Endurant) Help In The Treatment Of Challenging Aorto-Iliac Pathology: Technique And Indications
Berend M.E. Mees, MD, PhD
- 3:20 – 3:25** There Is No Seasonality To Ruptured AAAs
Irwin V. Mohan, MBBS, MD
- 3:25 – 3:30** Dedicated Workshop To Improve Treatment Of Ruptured AAAs: What Is Involved And What Benefits Are Derived
Zoran Rancic, MD, PhD
Dieter O. Mayer, MD
Mario L. Lachat, MD
- 3:30 – 3:35** Blunt Abdominal Aortic Injury: Incidence, Etiology, Diagnosis And Treatment
Zachary M. Arthurs, MD
- 3:35 – 3:45** Panel Discussion

SESSION 109 (Grand Ballroom East, 3rd Floor)
**MORE NEW DEVELOPMENTS IN AORTIC DISEASE,
TRAUMA AND INTRAMURAL HEMATOMAS
(4 ½-MINUTE HIT THE HIGHLIGHTS TALKS)**

Moderators: *Ronald M. Fairman, MD*
Edward Y. Woo, MD

- 3:45 – 3:50** Blunt Aortic Traumas: When Not To Use Endovascular Treatments
Joseph S. Giglia, MD
- 3:50 – 3:55** **DEBATE:** Significance Of Intramural Aortic Hematomas With Trauma And Dissections: They Are A Real Entity: How Should They Be Treated
Michael D. Dake, MD
- 3:55 – 4:00** **DEBATE:** Intramural Hematomas After Trauma Are A Myth – Rarely If Ever Seen
Benjamin W. Starnes, MD
- 4:00 – 4:05** Retroperitoneal Approach For Complex AAAs Unsuitable For EVAR Or FEVAR Or CHEVAR: Tips And Tricks
R. Clement Darling III, MD
- 4:05 – 4:10** Renal Insufficiency Is Not A Contraindication To TEVAR, FEVAR Or CHEVAR: How Should Such Patients Be Managed
Giovanni Torsello, MD
- 4:10 – 4:15** EVAR Or Open Repair For AAA Patients With Renal Insufficiency: On Dialysis
Vicente Rimbau, MD, PhD
- 4:15 – 4:20** Panel Discussion

Moderators: *R. Clement Darling III, MD*
Benjamin W. Starnes, MD

- 4:20 – 4:25** Failure Modes Of EVAR After 10 Years: When Can They Be Treated Endovascularly
Ronald M. Fairman, MD
- 4:25 – 4:30** The Scandal Of High Late Mortality After EVAR: What Causes It And How To Prevent It
Ciro Ferrer, MD
Piergiorgio Cao, MD
- 4:30 – 4:35** A Normal AAA Screening Does Not Rule Out An AAA 5 Years Later
Anders Wanhainen, MD, PhD
- 4:35 – 4:40** Contralateral Leg Cannulization In EVAR: Is It An Issue And How To Facilitate It
Willem Wisselink, MD

- 4:40 – 4:45** Isolated Infrarenal Aortic Dissection And Penetrating Aortic Ulcer: Non-Morbid Conditions: Indications For Treatment And How Should They Be Treated
Edward Y. Woo, MD
- 4:45 – 4:50** Panel Discussion
End of Program O

PROGRAM P (SESSIONS 109-114)
IMPROVING OUTCOMES IN HEMODIALYSIS ACCESS
Grand Ballroom West, 3rd Floor

- 7:55 – 8:00** Introduction
Anton N. Sidawy, MD, MPH
Larry A. Scher, MD

SESSION 110
PLANNING FOR HEMODIALYSIS ACCESS

Moderators: *Larry A. Scher, MD*
Anton N. Sidawy, MD, MPH

- 8:00 – 8:07** Predialysis Care Of The Patient With Chronic Kidney Disease
Theodore F. Saad, MD
- 8:08 – 8:15** Choosing The Right Access For The Right Patient
Ingemar J.A. Davidson, MD, PhD
- 8:16 – 8:23** Role Of Vessel Mapping In Planning For Vascular Access
Surendra Shenoy, MD, PhD
- 8:24 – 8:31** Vascular Access In The UK: What Lessons Can We Learn In The US
Eric Chemla, MD
- 8:32 – 8:39** Results Of The RAND Survey Of Optimal Practice Patterns In Dialysis Access
David L. Cull, MD
- 8:40 – 8:50** Panel Discussion
- 8:51 – 8:58** Do We Need Standardized Training And Certification In Dialysis Access
John R. Ross, Sr., MD
- 8:59 – 9:06** Preoperative Predictive Factors For AV Access Success Or Failure
Robyn A. Macsata, MD
- 9:07 – 9:14** **DEBATE:** Availability Of Ultrasound In The Dialysis Unit Is Essential
Eric Chemla, MD
- 9:15 – 9:22** **DEBATE:** Availability Of Ultrasound In The Dialysis Unit Is Not Practical
Deborah Brouwer-Maier, RN, CNN
- 9:23 – 9:35** Panel Discussion
- 9:36 – 10:00** Break – Visit Exhibits And Pavilions (3rd Floor)

SESSION 111
OPTIMIZING OUTCOMES IN HEMODIALYSIS ACCESS

Moderators: *Haimanot (Monnie) Wasse, MD, MPH*
Clifford M. Sales, MD, MBA

- 10:01 – 10:08** Should AV Fistulas Be Ligated Or Preserved Following Renal Transplantation
David Fox, MD
- 10:09 – 10:16** Strategies To Optimize Hemodialysis Catheter Dysfunction
Michele H. Mokrzycki, MD, MS

- 10:17 – 10:24** Algorithms For Maturation Of AV Fistulas
John E. Aruny, MD
- 10:25 – 10:32** Hemodynamic Significance Of Access Stenosis: A Fluid Dynamic Analysis
Surendra Shenoy, MD, PhD
- 10:33 – 10:40** Novel Therapies For Hemodialysis Vascular Access Dysfunction
Jeffrey H. Lawson, MD, PhD
- 10:41 – 10:48** Why Do We Need A Vascular Access Coordinator
Deborah Brower-Maier, RN, CNN
- 10:49 – 11:00** Panel Discussion
- 11:01 – 11:08** Algorithms For Management Of Acute And Chronic Steal Syndrome
David L. Cull, MD
- 11:09 – 11:16** Indications For Inflow Reduction Of AV Access In The Absence Of Steal
Haimanot (Monnie) Wasse, MD, MPH
- 11:17 – 11:25** Does Balloon Assisted Maturation Increase The Risk Of Steal Syndrome
Gregg A. Miller, MD
- 11:26 – 11:33** Cost Effectiveness Of Early Cannulation Grafts
David Kingsmore, MD, MBChB, BMedBiol
- 11:33 – 11:40** Expanding Role For Endoluminal Anastomosis In Vascular Access Surgery
Jeffrey H. Lawson, MD, PhD
- 11:41 – 11:55** Panel Discussion
- 11:55 – 12:40** Lunch Break – 3rd Floor Foyer/Promenade
Visit Exhibits And Pavilions (3rd Floor)

SESSION 112

POLITICAL, ECONOMIC AND LEGAL ISSUES IN HEMODIALYSIS ACCESS

Moderators: *Theodore F. Saad, MD*
Robert Provenzano, MD

- 12:40 – 12:47** End Stage Renal Disease Seamless Care Organizations (ESCO): Accepting Risk In A Dialysis Facility
Robert Provenzano, MD
- 12:48 – 12:55** Clinical Implications Of Healthcare Reform On Hospital Services
John Wigneswaran, MD, MBA
- 12:56 – 1:03** Financial Implications Of A Vascular Access Surveillance Program
Robert Provenzano, MD
- 1:04 – 1:11** Legal Implications Of The KDOQI And SVS Guidelines For Vascular Access
O. William Brown, MD, JD
- 1:12 – 1:19** What's New In Dialysis Access Coding: What Is Happening To The Bundle
Sean P. Roddy, MD
- 1:20 – 1:27** Affordable Care Act: Are We Willing To Pay For Prevention
Clifford M. Sales, MD, MBA
- 1:28 – 1:38** Panel Discussion

SESSION 113

NEW TECHNOLOGIES AND CONCEPTS IN HEMODIALYSIS ACCESS

*Moderators: Mitchell L. Henry, MD
Eric Chemla, MD*

- 1:39 – 1:46** Use Of Topical Elastase To Reduce AV Fistula Failure
Keith Ozaki, MD
- 1:47 – 1:54** Intergraft System For Minimally Invasive Sutureless Anastomosis
John R. Ross, Sr., MD
- 1:55 – 2:02** Use Of A Novel Pneumatic Compression Device To Improve Fistula Maturation
Tej M. Singh, MD, MBA
- 2:03 – 2:10** Percutaneous Creation Of Vascular Access: Results Of The NEAT Trial
Marc H. Glickman, MD
- 2:11 – 2:18** Treatment Of Central Venous Stenosis With The Angiosculpt Balloon
Thomas F. Panetta, MD
- 2:19 – 2:26** Inside Out Access For Central Vein Occlusions
John C. Gurley, MD
- 2:27 – 2:34** Results With Flixene IFG With Assisted Delivery In Hemodialysis Access
John R. Ross, Sr., MD
- 2:35 – 2:42** Use Of A Sirolimus-Eluting Collagen Implant To Improve Fistula Maturation
Sriram S. Iyer, MD, FACC
- 2:43 – 2:53** Panel Discussion

SESSION 114

UPDATE ON CLINICAL ISSUES IN HEMODIALYSIS ACCESS

*Moderators: David L. Cull, MD
Marc H. Glickman, MD*

- 2:54 – 3:01** Clinical Experience With An Early Cannulation Graft
Stephen E. Hohmann, MD
- 3:02 – 3:09** Role Of Biologic Grafts In Hemodialysis Access
Mahmoud B. Malas, MD, MHS
- 3:10 – 3:17** Advantages Of Spiral Flow Grafts In Reducing Intimal Hyperplasia
Hosam F. El Sayed, MD
- 3:18 – 3:25** Successes And Failures Of The HeRO Graft
Stephen E. Hohmann, MD
- 3:26 – 3:33** Modification Of HeRO Graft To Allow Early Cannulation
Christie W. Gooden, MD
- 3:34 – 3:43** Panel Discussion
- 3:44 – 3:51** Strategies For Management Of Prosthetic Dialysis Graft Infections
Mitchell L. Henry, MD
- 3:52 – 3:59** Can Adjunctive Operative Techniques Improve Vascular Access Outcomes
Richard F. Neville, MD
- 4:00 – 4:07** Management Of AV Fistula Aneurysms
Karl A. Illig, MD

4:08 – 4:15 Conversion Of Nonmaturing Fistulas To AV Grafts
Marc H. Glickman, MD

4:16 – 4:25 Panel Discussion
End of Program P

PROGRAM Q (SESSIONS 115-120)
NEW DEVELOPMENTS IN THE TREATMENT OF
DISEASES OF THE ABDOMINAL AND THORACIC
AORTA, TAAAs, TBADs; MORE UPDATES AND NEW
CONCEPTS

Trianon Ballroom, 3rd Floor

SESSION 115 (Trianon Ballroom, 3rd Floor)

INTERESTING TOPICS RELATED TO THE
ABDOMINAL AORTA AND ITS BRANCHES

Moderators: Hencé J.M. Verhagen, MD, PhD

Richard M. Green, MD

6:54 – 6:59 How To Treat Thrombosed (Occluded) AAAs And
Iliac Arteries With Bifurcated Endografts
Giovanni Pratesi, MD

7:00 – 7:05 Use Of Microcatheter Techniques To Treat Acute
Occlusions Of EVAR Limbs Or Aortobifemoral Grafts
Michael H. Wholey, MD, MBA

7:06 – 7:11 Causes Of Aortic Endograft Limb Occlusion: What
Are The Best Treatment Strategies
Christos D. Liapis, MD

7:12 – 7:17 Contrast Enhanced Ultrasound Eliminates The Need
For CT Scans After EVAR
Henrik Sillesen, MD, DMSc

7:18 – 7:23 **DEBATE:** Internal Iliac Arteries Must Be Revascu-
larized In EVAR Procedures
Fabio Verzini, MD, PhD

7:24 – 7:29 **DEBATE:** Internal Iliac Arteries May Not Have To Be
Revascularized In EVAR Procedures: It Is Usually Safe
Not To Do So
Dieter Raithel, MD, PhD

7:30 – 7:35 Update On The Global Endurant Experience: Lessons
Learned From The 5-Year Results Of The ENGAGE
Registry
Marc R.H.M. van Sambeek, MD, PhD

7:36 – 7:41 Update On Diagnosis And Treatment Of Ischemic
Bowel With Ruptured AAAs
Mario L. Lachat, MD

7:42 – 7:47 Management Of SMA Dissections And Total Occlusions
Eric D. Endean, MD

7:48 – 7:53 Importance Of Endograft Tilt And Sealing In
Angulated Aortic Necks: New Software To Predict It
And What Can Be Done To Offset It
Jean-Paul de Vries, MD, PhD

7:54 – 8:03 Panel Discussion

SESSION 116 (Trianon Ballroom, 3rd Floor)

MORE TOPICS RELATED TO THE ABDOMINAL AORTA, ENDOLEAKS AND INFECTED GRAFTS

Moderators: *James H. Black III, MD*
Fred A. Weaver, MD

- 8:04 – 8:09** Aortic Neck Enlargement After EVAR Differs With Self-Expanding And Balloon Expandable Endografts: Why The Difference Is Important
Dainis K. Krievins, MD
Christopher K. Zarins, MD
- 8:10 – 8:15** Contemporary Life Expectancy And Causes Of Death After Repair Of Intact And Ruptured AAAs
Hence J.M. Verhagen, MD, PhD
- 8:16 – 8:21** Fate Of 36 mm Endografts For Elective And Emergent (Rupture) Use: Are Such Larger Devices Still A Good Option
Michael J. Singh, MD
- 8:22 – 8:27** Endovascular Grafts And VAC Wound Treatment Of Infected Prosthetic Arterial Grafts Is A New Graft Preserving Strategy: Key Elements And Midterm Results
Anders Wanhainen, MD, PhD
- 8:28 – 8:33** Value Of PET CT (With 18F-FDB) For Management And Decision-Making In Patients With Concurrent AAAs And Cancer
Natzi Sakalihasan, MD, PhD
- 8:34 – 8:39** De Novo Periaortic Inflammatory Response After EVAR: What Is Its Significance
Andrea Stella, MD
- 8:40 – 8:45** Management Strategies For Proximal EVAR Failure: With These The Need For Open Conversion Should Be Rare
Murray L. Shames, MD
- 8:46 – 8:51** Intra- And Peri-Procedural Perigraft Access To The AAA Sac To Treat Endoleaks: How To Do It And Results
William J. Quinones-Baldrich, MD
- 8:52 – 8:57** Massive Endoleaks Can Be Compatible With AAA Sac Shrinkage: How Can This Occur And What Is Its Implications For Preventing Spinal Cord Ischemia, Etc.
Martin Malina, MD, PhD
- 8:58 – 9:04** Panel Discussion

SESSION 117 (Trianon Ballroom, 3rd Floor)

TOPICS RELATED TO THE THORACIC AORTA, THORACIC AND THORACOABDOMINAL ANEURYSMS

Moderators: *Robert S. Crawford, MD*
Martin Malina, MD, PhD

- 9:04 – 9:09** Management Of Distal Aortic Failure After TEVAR: Tips And Tricks
James H. Black III, MD
- 9:10 – 9:15** What Are The Expansion Rates Of Small Thoracic Aortic Aneurysms And How Should They Influence The Threshold For Repair
Matt M. Thompson, MD
- 9:16 – 9:21** Which TAAA Patient Can And Should Be Treated Conservatively: At What Size And Circumstance Should They Be Fixed
Henrik Sillesen, MD, DMSc

- 9:22 – 9:27** Tips And Tricks For Simplifying B/FEVAR
Gustavo S. Oderich, MD
- 9:28 – 9:33** Use Of Aortic Branch Balloons To Better Align Fenestrations With The Cook Z-FEN Device
David J. Minion, MD
- 9:34 – 9:39** Near-Infrared Spectroscopy To Non-Invasively Monitor Spinal Cord Perfusion: How Does It Work And Will It Replace Motor Evoked Potentials
Christian D. Etz, MD, PhD
- 9:40 – 9:45** New Developments In The Treatment Of Blunt Aortic Trauma: Is There Any Role For Open Surgery: Is Traumatic Intramural Hematoma Real And How Should It Be Treated
Ali Azizzadeh, MD
- 9:46 – 9:58** Panel Discussion And Break
Visit Exhibits And Pavilions (3rd Floor)

Moderators: *Ali Azizzadeh, MD*
David J. Minion, MD

- 9:58 – 10:03** Effect Of TEVAR On Coronary Perfusion And Cardiac Function As Determined By Quantitative Dynamic MR Imaging
Rachel E. Clough, MD, PhD
- 10:04 – 10:09** Value Of PITON (Double Lumen And Double Exit) Guiding Sheaths And Steerable Catheters For TEVAR And B/FEVAR: How They Work
Gioachino Coppi, MD
- 10:10 – 10:15** **DEBATE:** Routine LSA Revascularization Is The Way To Go When TEVAR Covers The LSA Orifice
Matt M. Thompson, MD
- 10:16 – 10:21** **DEBATE:** Selective LSA Revascularization Is The Way To Go When TEVAR Covers The LSA Orifice
Thomas S. Maldonado, MD
- 10:22 – 10:27** Impact Of LSA Coverage During TEVAR On Stroke And SCI: From The VQI: Does Revascularization Help
Fred A. Weaver, MD
- 10:28 – 10:33** Value Of Vascular Plugs In The Treatment Of Residual Aneurysms After Open And Endovascular Procedures
Ramesh K. Tripathi, MD
- 10:34 – 10:39** False Lumen Obliteration Improves Survival After TEVAR For Complex TBADs: How To Do It
Manish Mehta, MD, MPH
- 10:40 – 10:47** Panel Discussion

SESSION 118 (Trianon Ballroom, 3rd Floor)
MORE THORACIC AORTIC TOPICS; VISCERAL ARTERY DISSECTIONS; A NEW EVAR DEVICE; NEW CONCEPTS AND UPDATES

Moderators: *Manish Mehta, MD, MPH*
K. Craig Kent, MD

- 10:47 – 10:52** Hypogastric Revascularization During EVAR: Why Are Parallel Grafts Better Than Branched Endografts: Tips And Tricks To Do The Chimney And Sandwich Grafts For This Purpose
Jean-Pierre Becquemin, MD
- 10:53 – 10:58** Natural History Of Intramural Hematomas In The Thoracic Aorta: When To Fix And When To Observe
O. William Brown, MD, JD

- 10:59 – 11:04** Diagnosis, Prognosis And Treatment Of Isolated Celiac And SMA Dissections
Enrique Criado, MD
- 11:05 – 11:10** Use Of Branched Petticoat Devices To Treat Complex TBADs: How To Do Them And Do They Promote Remodeling In The Visceral Aortic Segment
Lars R. Kock, MD
- 11:11 – 11:16** The Altura EVAR Device: What Is Special About It And Early Clinical Results
Albrecht H. Krämer, MD
- 11:17 – 11:22** Differential Effects Of Various Endograft Fabric Coverings On Arterial Stiffness And EVAR Outcomes
Christos D. Liapis, MD
- 11:23 – 11:28** How To Recognize And Safely Manage An Inadvertent Large Sheath Placement In The Subclavian Artery During CVP Line Insertion
Neal S. Cayne, MD
- 11:29 – 11:34** Effect Of Increasing Vessel Tortuosity On EVAR Outcomes: How To Quantitate And Offset It
Sharif H. Ellozy, MD
- 11:35 – 11:40** Through-The-Knee (Gritti-Stokes) Amputation Is Better For The Patient And Leads To More Mobility Than Standard Above-Knee Amputation: How To Do It
Jonathan D. Beard, ChM, MEd
- 11:41 – 11:50** Panel Discussion
- 11:50 – 12:45** Lunch Break – 3rd Floor Promenade
Visit Exhibits And Pavilions (3rd Floor)

SESSION 119 (Trianon Ballroom, 3rd Floor)

**UPDATES AND LATE BREAKING HOT TOPICS
RELATED TO EXTREMITY AND OTHER TREATMENTS**

Moderators: *Jon S. Matsumura, MD*
Luis A. Sanchez, MD

**HOT NEW EXTREMITY TOPICS, CONCEPTS AND
UPDATES**

- 12:45 – 12:50** Simple Techniques For Crossing CTOs Using Only Catheters And Wires: When And How Often Are Special Techniques Needed
Ali Amin, MD, RVT
- 12:51 – 12:56** Novel Approaches To Drug Delivery To Vessel Walls To Prevent Restenosis After Open Vascular Surgery
K. Craig Kent, MD
- 12:57 – 1:02** Effectiveness And Safety Of DEBs In Treating SFA Occlusions: Based On A Chinese RCT
Wei Guo, MD
- 1:03 – 1:08** Interesting Results From The RAPID Trial: An RCT Comparing POBA With Legflow DEBs For Long Segment SFA Lesions
Jean-Paul de Vries, MD, PhD
- 1:09 – 1:14** The Need For Dedicated Limb Salvage Teams To Get Optimal Results With CLI: What Are The Essential Components
Christopher J. Abularrage, MD
- 1:15 – 1:20** Current Status Of Atherectomy Devices For Lower Extremity Occlusive Lesions: Which One(s) Are Best And Why: Are The Costs Justified
Lawrence A. Garcia, MD

1:21 – 1:26 The Disturbing Facts About Diabetic Foot Infections In Brazil: They Carry High Mortality And Amputation Rates: What Can Be Done About It: This Problem Also Probably Applies To Areas In The US
Tulio P. Navarro, MD, PhD

1:27 – 1:33 Panel Discussion

Moderators: *Kenneth Ouriel, MD, MBA*
Enrico Ascher, MD

OTHER HOT NEW CONCEPTS OR UPDATES

1:33 – 1:38 Role Of The Vascular Surgeon In Oncologic Resections: Do Endo Skills And Techniques Help
Luis A. Sanchez, MD

1:39 – 1:44 Heparin Dosing During Vascular Procedures Should Be Monitored By ACT Levels To Be Safe And Effective
Arno M. Wiersema, MD, PhD

1:45 – 1:50 Pudendal Artery Angioplasty: Its Role And Results In Complex Drug Resistant Erectile Dysfunction
Narendra N. Khanna, MD, DM

1:51 – 1:56 MRA Data And A Computerized Program Allows Non-Invasive Estimation Of Pressure Gradients Across Equivocal Iliac Stenoses
Jean-Paul de Vries, MD, PhD

1:57 – 2:02 Technology To Convert A Doppler Waveform Non-Invasively Into Mean Blood Pressure And Flow Measurements
Patrick W. Kelly, MD

2:03 – 2:08 Update On Recognition And Treatment Of Abdominal Compartment Syndrome (ACS) – Especially After EVAR Treatment Of Ruptured AAAs
Dieter O. Mayer, MD
Zoran Rancic, MD, PhD
Mario L. Lachat, MD

2:09 – 2:14 Follow-Up Compliance After EVAR Is <50% At 5 Years: What Can Be Done About It
Andres Schanzer, MD

2:15 – 2:27 Panel Discussion
(Refreshments Available)

SESSION 120 (Trianon Ballroom, 3rd Floor)

GAME-CHANGING UPDATES, NEW CONCEPTS OR TECHNIQUES

Moderators: *Daniel G. Clair, MD*
Frank J. Veith, MD

2:27 – 2:32 When Should Ruptured AAA Patients Be Transferred: Tips And Tricks For Doing It Safely And Effectively
Matthew W. Mell, MD, MS

2:33 – 2:38 Combined Stent-Graft And Multilayer Bare Stents For Thoracoabdominal Aortic Pathologies
Guangqi Chang, MD
Li Zilun, MD

2:39 – 2:44 The Case For Urgent Carotid Duplex Scanning Before Starting Thrombolytic Therapy For Acute Strokes: How Can It Help To Determine Optimal Therapy
Laura Capoccia, MD, PhD

2:45 – 2:50 The Role Of Telemedicine In Vascular Care: Current Status And Future Potential
John (Jeb) W. Hallett, MD

- 2:51 – 2:56** How Can Surgeons Succeed As Inventors And Entrepreneurs: Tips And Tricks
Jeffrey P. Carpenter, MD
- 2:57 – 3:02** How To Prevent Popliteal Artery Injuries During Orthopedic Knee Surgery
Martin Björck, MD, PhD
- 3:03 – 3:08** Stem Cell Treatment May Influence AAA Growth And Behavior
Peter L. Faries, MD
- 3:09 – 3:14** How Can The Hemodynamic Pressure Wire And Quantitative Perfusion Assessment Help In Treating CLI: Standard Methods With ABIs And PVRs Are Not Enough
Mehdi H. Shishehbor, DO, MPH, PhD
- 3:15 – 3:20** 2-Year Results With The Stellarex DEB Without Pre-Dilatation Show Durable Results With TASC A And B Lesions: The ILLUMENATE FIH Trial
Marianne Brodmann, MD
- 3:21 – 3:26** Management Of Asymptomatic Thrombus Inside Endografts After EVAR: Should We Treat Or Not
Hence J. M. Verhagen, MD, PhD
- 3:27 – 3:32** Percutaneous Deep Vein Arterialization (Limflow) As A Minimally Invasive Approach To Create Arterio-Venous Fistulae For The Treatment Of Critical Limb Ischemia: Results Of First Clinical Experience – 1 Year Follow-uppanel Discussion
Daniel G. Clair, MD
- 3:33 – 3:40** Panel Discussion
End of Program Q
Please visit the Grand Ballroom East for additional Hot Topics.



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(See Registration Form on reverse side)

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Associate Faculty Podium Presentations -
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Vascular International (Pontresina Courses)
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