VEITH SYMPOSIUM
Connecting The Vascular Community
46th

Tuesday - Saturday, November 19–23, 2019

Symposium Chairman
Frank J. Veith, MD

Symposium Co-Chairmen
Enrico Ascher, MD
Kenneth Ouriel, MD, MBA
Sean P. Lyden, MD

Sponsored by
Cleveland Clinic

www.VEITHsymposium.org
PROGRAM OUTLINE AT A GLANCE

TUESDAY PROGRAMS

Program A: (Sessions 1-8)
Progress In The Treatment Of Diseases Of Heart Valves And Coronary Arteries, And Thoracic And Abdominal Aortic Diseases
6:45 A.M. – 6:02 P.M.  Grand Ballroom East, 3rd Floor

Program B: (Sessions 9-16)
Progress In Vascular Robotics, Guidance Systems, Simulation And Laparoscopy; New Developments In Carotid Disease, Acute Strokes; And Their Treatments; Abdominal Aortic Branch Diseases And Their Treatments; New Concepts, Artificial Intelligence And Telemedicine; Vascular Branding, Recognition And Boards; Open Vascular Surgery And Progress In The Treatment Of Coarctations And Mid-Aortic Syndrome
6:40 A.M. – 6:00 P.M.  Grand Ballroom East, 3rd Floor

Program C-1: (Sessions 17-18)
Management Of Pulmonary Embolism: The Ultimate Team Approach
Course Leader: Michael R. Jaff, DO
7:00 A.M. – 12:00 P.M.  Trianon Ballroom, 3rd Floor

Program C-2: (Sessions 19-20)
Introduction To Vascular Malformations
Course Leaders: Wayne F. Yakes, MD, Krassi Ivancev, MD, PhD, Robert L. Vogelzang, MD
1:00 P.M. – 3:00 P.M.  Trianon Ballroom, 3rd Floor

Program C-3: (Sessions 21-22)
Hot New Topics In Lower Extremity Occlusive Disease Treatment
3:00 P.M. – 6:00 P.M.  Trianon Ballroom, 3rd Floor

WEDNESDAY PROGRAMS

Program D: (Sessions 23-30)
Progress In Lower Extremity Occlusive Disease And Its Treatments
6:40 A.M. – 6:15 P.M.  Grand Ballroom East, 3rd Floor

Program E: (Sessions 31-38)
Advances In Medical Treatments, New Drugs, Anti-Atherogenic And Anti-Hypertensive Treatments; Management Of Endoleaks And Complications; Recorded Live Cases; A Tribute And Assorted Issues Of Interest; Outpatient Vascular Treatment And Ethical Issues; Topics Related To The FDA, SVS, VQI, Costs And Reimbursement And The Value Of Vascular Surgeons
6:40 A.M. – 6:02 P.M.  Grand Ballroom West, 3rd Floor

Program F: (Sessions 39-46)
More New Developments In Thoracic Aortic Disease, Aortic Dissections, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR(F/B/EVAR), Multilayer Bare Stents, Infrarenal AAAs And Standard EVAR And Hot New Aortic And Carotid Topics
6:40 A.M. – 6:00 P.M.  Trianon Ballroom, 3rd Floor

THURSDAY PROGRAMS

Program G: (Sessions 47-54)
Exciting New Or Updated Techniques, Concepts And Devices; Advances In F/B/EVAR And Parallel Grafts For Complex AAAs; Tribute To Our Military; New Developments In The Treatment Of Ruptured AAAs And TAAAs; More New Developments In New Or Improved Devices, Techniques And Concepts, And Radiation Safety
6:45 A.M. – 6:02 P.M.  Grand Ballroom East, 3rd Floor

Program H: (Sessions 55-62)
New Or Improved Devices For Standard EVAR, EVAS And More Complex AAAs; Repair Of TAAAs, The Ascending Aortic Arch And The Descending Aorta (TEVAR); New Devices For Treating Lower Extremity Lesions By Endovascular Or Open Techniques; Updates On Endoanchors And Improvements In Their Usage; And New Or Improved Devices For Removing Clot And Occluding Blood Vessels Endovascularly
6:45 A.M. – 5:52 P.M.  Grand Ballroom West, 3rd Floor

Program I: (Sessions 63-70)
Superficial Venous Disease
Course Leaders: Jose I. Almeida, MD, RPVI, RVT, Lowell S. Kabnick, MD, RPhS, Kenneth Ouriel, MD, MBA, Thomas W. Wakefield, MD
7:00 A.M. – 6:05 P.M.  Trianon Ballroom, 3rd Floor

FRIDAY PROGRAMS

Program J: (Sessions 71-78)
New Developments In The Prevention And Treatment Of Spinal Cord Ischemia (SCI) With TEVAR And TAAA Repairs; Carotid Disease And Treatment Related Topics: New And Improved Devices And Techniques (TCAR And Mesh Covered Stents), Medical Treatment, Influence On Cognition, History Of CAS, Timing Of CEA And CAS, Management Of Asymptomatic Carotid Stenosis (ACS), CAS Versus CEA, Improved Carotid Techniques, RCT Updates, Continuing Controversies; Endo Treatment For Erectile Dysfunction; Carotid Patch Infections And Aneurysms; Percutaneous Closure Devices And Wound Care
6:40 A.M. – 5:42 P.M.  Grand Ballroom East, 3rd Floor

Program K: (Sessions 79-86)
New Developments In The Treatment Of Popliteal Diseases And Aneurysms; Advances In Treating Arterial And Graft Infections; Improvements In: Vascular Imaging And Hybrid Treatment Suites; Thoracic Outlet Syndrome Treatments; Recorded Live Complex Endovascular Cases From Münster, Germany And The Mayo Clinic; Updates On Medical Treatments And Treatment Of Rare Or Unusual Vascular Diseases And Vascular Trauma
7:00 A.M. – 5:52 P.M.  Grand Ballroom West, 3rd Floor

Program L: (Sessions 87-94)
Deep Venous Disease
Course Leaders: Jose I. Almeida, MD, RVT, RPVI; Lowell S. Kabnick, MD, RPhS; Kenneth Ouriel, MD, MBA, Thomas W. Wakefield, MD
7:00 A.M. – 6:00 P.M.  Trianon Ballroom, 3rd Floor

SATURDAY PROGRAMS

Program M: (Sessions 95-98)
Topics Too Important Or Too Hot To Miss: Related To Lower Extremity; Aortic; And Carotid Diseases And Their Treatment
7:00 A.M. – 12:25 P.M.  Grand Ballroom East, 3rd Floor

Program N: (Sessions 99-103)
Improving Outcomes In Hemodialysis Access
Course Leaders: Larry A. Scher, MD and Anton N. Sidawy, MD, MPH
8:00 A.M. – 3:40 P.M.  Grand Ballroom West, 3rd Floor

Program O: (Sessions 104-109)
Multidisciplinary Acute Stroke Management
Course Leader: Allan L. Brook, MD
8:00 A.M. – 3:50 P.M.  Murray Hill Suites East & West, 2nd Floor
Welcome to the 46th Global VEITH
Vascular Endovascular Issues Techniques Horizons
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## DISCLAIMER

VEITHsymposium is owned and operated by VEITHsymposium LLC, and sponsored and accredited by The Cleveland Clinic Foundation.

The information in this educational activity is provided for general medical education purposes only and not meant to substitute for the independent medical judgment of a physician relative to diagnostic and treatment options of a specific patient’s medical condition. The viewpoints expressed in this CME activity are those of the authors/faculty. They do not represent an endorsement by The Cleveland Clinic Foundation or VEITHsymposium LLC. In no event will The Cleveland Clinic Foundation or VEITHsymposium LLC be liable for any decision made or action taken in reliance upon the information provided through this CME activity.

We have made every effort to ensure that the syllabus is accurate. We cannot take responsibility for errors, deletions or omissions.
Dear Colleague:

Welcome to our 46th annual meeting. We hope that you will find this year’s symposium better than ever. To this end and in addition to our exciting main programs in Lower Extremity Occlusive Disease, New Developments in TEVAR, F/BEVAR, Parallel Grafts and Ruptured AAAs and advances in medical treatments, we will continue to have component meetings on Hemodialysis Access, AV Malformations and Multidisciplinary Acute Stroke Management. We will also have special expanded sessions on Emerging Management Options for Pulmonary Embolism, all aspects of small and large vein diseases and advances in the treatment of varicose veins. We will also have an expanded Associate Faculty Program to facilitate all vascular surgeons playing a more active role in our meeting. There will also be an expanded Fellows’ Career Development Program with didactic topics of interest for those entering the vascular surgery work place. This will be organized by Jim McKinsey for finishing vascular trainees and those wishing to seek new job opportunities.

A new development this year is that we have formed an Alliance with TCT. This Alliance will allow us to Co-Brand Sessions from our meeting which will be especially valuable for interventional specialists as well as vascular surgeons. It will also allow us to include a 2-day special hands on training program dealing with radial and distal access techniques and special techniques to treat very complex fem-pop disease. Also, as part of this Alliance we will have a 1-day VEITH-TCT Innovation Summit Program featuring an in depth look at techniques of the future.

Although the basic format of our meeting in 2018 worked well, we have made some changes to minimize the overlap of concurrent sessions. However, we will continue to have these simultaneous sessions so attendees can be exposed to all the new hot items that are appearing. We know attendees cannot be in two places at once. However, you can simply check off in your program brochure the talks you would like to hear but cannot. Then when you get your web-based version of the entire 2019 meeting, you can watch and hear these presentations and related discussion on your computer at home within 2 weeks of the meeting. All talks will be indexed in the online version of the meeting to correspond exactly to the program brochure. Simply check off presentations you want to attend but can’t, and then see and hear them on your web library. There will be a nominal fee for our attendees and our faculty for unlimited access to the 2019 web-based version of our meeting. This can be a most valuable resource for reference and learning. Slides for almost all talks in our program will also be posted daily on our web page.

So, thanks for coming this year. Please enjoy the meeting and all the ancillary non-CME industry and social events that go with it. Also enjoy the chance to meet old friends and make new ones - and please save the dates November 17-21, 2020 so you can return next year.

Cordially,

Frank J. Veith, MD  Enrico Ascher, MD  Kenneth Ouriel, MD, MBA  Sean P. Lyden, MD
The Cleveland Clinic Foundation Center for Continuing Education and VEITHsymposium acknowledge educational grants in support of this activity from:

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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 (4.5-7 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
GENERAL INFORMATION

- 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

TARGET AUDIENCE

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

ASSOCIATE FACULTY GLOBAL PODIUM PRESENTATIONS

Tuesday – Friday, November 19-22, 2019
Location: Concourse A, Concourse Level

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 website. Please visit www.veithsymposium.org for additional information about the Associate Faculty Global Podium Presentations component of VEITHsymposium.

COMPONENT SESSIONS

Hemodialysis Access
Saturday, November 23, 2019
Location: Grand Ballroom West, 3rd Floor

Multidisciplinary Acute Stroke Management
Saturday, November 23, 2019
Location: Murray Hill Suites East and West, 2nd Floor

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.
GENERAL INFORMATION

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 AMA PRA Category 1 Credits™. 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.

ETHICAL MEDTECH COMPLIANCE

VEITHsymposium is Compliant with the MedTech Europe Code of Ethical Business Practice.

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 28, 2020.

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 this 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 see a staff member in the Registration area, Rhinelander Gallery, 2nd floor.
ONLINE CONFERENCE LIBRARY

The entire program with almost all the talks, slides, audio and videos - fully synchronized - and 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.

ONLINE ACCESS TO ABSTRACTS

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

VEITHSYMPOSIUM NON-CME ACTIVITIES

VENOUS VENOUS VENOUS®WORKSHOPS AT VEITHsymposium - ASK THE EXPERTS!
Wednesday, November 20, 2019
12:15 P.M. – 5:30 P.M.
Location: Americas Hall 2, 3rd floor

Workshops will include Video Case Presentations, Lectures and Demonstration on vein management by experts, plus Hands-On opportunities where participants can rotate through multiple training stations staffed by professionals to assist with your experience.

Module 1: Current Superficial Venous Treatment, Wounds and Edema
Endothermal Therapy, Cyanoacrylate, MOCA, VTE and Recanalization, Perforators, Sclerotherapy, CVI, Lymphedema, Lipedema, Wound Care and Compression

Module 2: Thrombus Management
Thrombolysis and Thrombectomy, Stents, IVUS, Valves, Nutcracker Syndrome

Visit www.veithsymposium.org for details.
(This is a non-CME activity.)
VEITH-TCT INNOVATION SUMMIT
Thursday, November 21, 2019
Location: Murray Hill Suites East and West, 2nd Floor

The Innovation Summit at VEITH-TCT embraces the central role of clinical unmet needs driving innovation. In each one-hour session, a clinical case will be presented, demonstrating significant clinical challenges that are currently vexing, followed by a panel discussion. Next, a State-of-the-Art lecture will highlight all the contemporary techniques relevant to the unmet clinical need, and then TWO technologies will be featured as potential breakthrough technologies or approaches. Extended panel discussion will ensue. Audience members will be engaged in all aspects of the program along with multidisciplinary expert panelists from the clinical and business worlds.

CRF ENDOVASCULAR TRAINING PAVILION
Thursday – Friday, November 21-22, 2019
Location: Americas Hall 2, 3rd Floor

Expert guided professional education is the lifeblood of all medical training. The VEITH-TCT Alliance seeks to capture the essence of this type of education by providing small group, expert proctored educational sessions at this year’s meeting. All hands-on training workshops will be held in the Americas Hall 2 on the 3rd Floor. These are NON-CME programs concentrated to 90 minutes in which attendees will have intensive exposure to cutting edge techniques. Registration is first come, first served with a nominal fee required to hold your place. There will be 4 sessions each day, and participants may only register for ONE workshop each day.

Thursday, November 21, 2019
Tibiopedal and Radial Access
Times: 8:00 – 9:30 a.m.; 10:00 a.m. – 11:30 a.m.; 2:00 p.m. - 3:30 p.m.; 4:00 p.m. – 5:30 p.m.

Friday, November 22, 2019
SFA Intervention: Complex Lesion Management
Times: 8:00 – 9:30 a.m.; 10:00 a.m. – 11:30 a.m.; 2:00 p.m. - 3:30 p.m.; 4:00 p.m. – 5:30 p.m.
FOOD SERVICE

Coffee, lunch and refreshments breaks will be served in the Rhinelander Gallery, 2nd floor on Tuesday to Friday, and in the 3rd floor Foyer/Promenade on Saturday.

EXHIBITS/PAVILIONS

Exhibitors will display their products in the South Corridor on the 2nd floor, on the 2nd floor Promenade, in the 3rd floor Foyer and Promenade, and in other designated areas.

NAME BADGES

For the convenience of our exhibitors and attendees, the barcode on your name badge includes your name, address, telephone and fax numbers, and e-mail address. Exhibitors can scan your name badge for this information. Please wear your name badge at all times.

FLOOR PLAN

A Floor Plan of the New York Hilton-Midtown is included in this syllabus to help you find your way more easily.

HOSPITALITY DESK

The staff will be happy to answer any questions you have, or to make any arrangements that you may require. Staff members are located in the Rhinelander Gallery on the 2nd floor.

CELL PHONES

As a courtesy to other attendees, please turn off your cell phone, or set to vibrate.

COAT CHECK

Coat Check is located on the 2nd floor.
MULTIDISCIPLINARY ACUTE STROKE MANAGEMENT at VEITHsymposium
This activity has been approved for AMA PRA Category 1 Credits™

Saturday, November 23, 2019
New York Hilton-Midtown | 1335 Avenue of the Americas | New York, New York 10019

Symposium Chairman: Frank J. Veith, MD
Symposium Co-Chairmen:
Enrico Ascher, MD
Sean P. Lyden, MD
Kenneth Ouriel, MD, MBA

Course Leader: Allan L. Brook, MD

ACUTE STROKE DECISIONS – TRIAGE AND IMAGING
(Murray Hill Suites East & West, 2nd Floor)
Moderators: Lawrence R. Wechsler, MD
Joshua A. Hirsch, MD

8:00 – 8:05
Introduction
Allan L. Brook, MD

8:06 – 8:11
Organization Of Endovascular Thrombectomy And
Next Generation Solutions
J. Mocco, MD, MS

8:12 – 8:17
Basilar Thrombosis: Data And Guidelines
Aaron S. Dumont, MD

8:18 – 8:28
2019 Imaging The Clot, Collaterals, And Cerebral Structures
That Matter
R. Gilberto Gonzalez, MD, PhD

8:29 – 8:39
Low NIHSS And LVO: My Basis For Treatment And Triage
Lawrence R. Wechsler, MD

8:40 – 8:50
Emergency Room Issues: Triage At Its Best
Edward C. Jauch, MD, MS

8:51 – 9:01
Imaging Trends And What To Expect After DAWN
Howard A. Rowley, MD

9:02 – 9:12
AI Systems Of Triage: Pros And Cons
Don Frei, MD

9:13 – 9:23
European Stroke Systems And How They Differ
Zsolt Kulcsar, MD, PhD

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<th>Time</th>
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<td>Dangerous Imaging And Craniectomy Timing</td>
<td>Howard A. Riina, MD</td>
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<td>9:35 – 9:45</td>
<td>MRI In Acute Stroke Care And When It Is Best To Utilize</td>
<td>R. Gilberto Gonzalez, MD, PhD</td>
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<td>9:46 – 10:00</td>
<td>Break – Visit Exhibits And Pavilions (3rd Floor)</td>
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<td>10:00 – 10:10</td>
<td>Stroke Treatment – Advanced Methods And Standards Of Care</td>
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<td><strong>Murray Hill Suites East &amp; West, 2nd Floor</strong></td>
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<td><strong>Moderators:</strong> Daniel L. Labovitz, MD Henry H. Woo, MD</td>
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<td>Sudhakar R. Satti, MD</td>
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<td>Dorothea Altschul, MD</td>
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<td>Imaging As The Engine To Drive Stroke Forward</td>
<td>Thabile Leslie-Mazwi, MD</td>
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<td>Joshua A. Hirsch, MD</td>
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<td>11:39 – 11:49</td>
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<td>J. Mocco, MD, MS</td>
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<td>Stroke Legislation Update And Local Complications</td>
<td>Bradley Kaufman, MD, MPH</td>
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<td>11:56 – 12:05</td>
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<td>Richard L. Zampolin, MD</td>
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<td>12:06 – 12:10</td>
<td>Tandem Occlusions: Strategies And Lessons Learned</td>
<td>Don Heck, MD</td>
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<td>12:11 – 12:20</td>
<td>Aneurysm Devices And How I Choose</td>
<td>Richard P. Klucznik, MD</td>
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<td>What’s In The Pipeline: A Treatment For All Aneurysms</td>
<td>Peter K. Nelson, MD</td>
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<td>Ajay K. Wakhloo, MD, PhD</td>
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<td>David Fiorella, MD, PhD</td>
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<td>Philip M. Meyers, MD</td>
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<td>David J. Altschul, MD</td>
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For more Information and to REGISTER, please visit www.veithsymposium.org.

**Registration Fee:** $349
(Tuition includes access to all Saturday Only VEITHsymposium Sessions.)
EVC is the largest vascular training event in Europe with over 250 workshops

Learning by training

24th European Vascular Course
Vascular & Endovascular Consensus Update

21–24 APRIL 2020
TUESDAY–FRIDAY
OLYMPIA LONDON • UNITED KINGDOM

REGISTRATION NOW OPEN
WWW.CXSYMPOSIUM.COM/REGISTRATION

EARLY BIRD RATES AVAILABLE
UNTIL 23 FEBRUARY 2020
NON-CME ACTIVITIES
<table>
<thead>
<tr>
<th>TUESDAY, NOVEMBER 19</th>
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<tbody>
<tr>
<td>9:00 am</td>
<td>Pavilion opens</td>
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</table>
| Lunch Symposium     | **Clinical value in lower extremity disease:** Panelists discuss how advanced device design and improved user experiences impact outcomes  
  Osamu Iida, M.D., Amagasaki, Hyogo, Japan  
  Jean Panneton, M.D., Norfolk, Virginia  
  David Dexter, M.D., Norfolk, Virginia |
| Evening event       | **Fifty years of expanded PTFE: Improving life through advanced materials** |
| 6:00 pm             | Pavilion opens |

<table>
<thead>
<tr>
<th>WEDNESDAY, NOVEMBER 20</th>
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<tbody>
<tr>
<td>6:00 am</td>
<td>Pavilion opens</td>
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</table>
| Lunch Symposium       | **Using data to inform clinical decision making in vascular disease**  
  Sapan Desai, M.D., Arlington Heights, Illinois  
  Richard Neville, M.D., Falls Church, Virginia |
| Evening event         | Pavilion is in-use for invitation only event |
| 6:00 pm               | Pavilion is in-use for invitation only event |

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<thead>
<tr>
<th>THURSDAY, NOVEMBER 21</th>
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<tbody>
<tr>
<td>6:00 am</td>
<td>Pavilion opens</td>
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</table>
| Lunch Symposium       | **Precision in action: How the GORE® ACTIVE CONTROL System delivers landing zone precision and conformability in TEVAR**  
  William Jordan, M.D., Atlanta, Georgia  
  Sukgu Han, M.D., Los Angeles, California |
| Evening event         | Pavilion is in-use for invitation only event |

European experience with the GORE® EXCLUDER® Conformable AAA Endoprosthesis with ACTIVE CONTROL System: Making a difference in challenging EVAR anatomy  
Marc van Sambeek, M.D., Ph.D., Eindhoven, The Netherlands
Gore Main Pavilion, Mercury Ballroom

FRIDAY, NOVEMBER 22

6:00 am  Pavilion opens
Lunch Symposium  GREAT explorations: A look at patient subgroups and outcomes from one of the largest clinical registries for abdominal and thoracic aortic devices
Panelists:
Ross Milner, M.D., Chicago, Illinois
Pierre Galvagni Silveira, M.D., Florianopolis, Brazil
- A GREAT divide: Why analyzing patient data per gender is an important filter through which to understand outcomes
  Beth Tohill, Ph.D, Flagstaff, Arizona
- A GREAT question: Are age and gender predictors of endoleak and reintervention after EVAR?
  Trissa Babrowski, M.D., Chicago, Illinois
- GREAT evidence: Does gender determine AAA outcomes after EVAR?
  Patrice Mwipatayi, M.D., Perth, Australia
- GREAT insights: Does gender affect access related complications after TEVAR?
  Santi Trimarchi, M.D., Milan, Italy

SATURDAY, NOVEMBER 23

6:00 am  Pavilion opens
Lunch Symposium  Does recent data point to a need to shift the algorithm for dialysis graft management?
  Sapan Desai, M.D., Arlington Heights, Illinois

Improving dialysis access: A case for building a platform for continual education
  Richard Neville, M.D., Washington, D.C

Gore MEDICAL MASTERY series
Hands-on simulators for virtual training

Simulator Pavilion hours • 9 a.m.–5 p.m. • Tuesday–Friday
Join us in the Sutton Complex South to experience our lifelike virtual environment simulators for the Gore® EXCLUDER® Iliac Branch Endoprosthesis, the Gore® EXCLUDER® Device, and the Conformable Gore® TAG® Device.

* CE Mark approved and investigational device. Caution: Investigational device. Limited by United States law to investigational use only.
VENOUS VENOUS VENOUS™ WORKSHOPS At VEITHsymposium

Wednesday, November 20, 2019 | Americas Hall 2, 3rd Floor

12:45 pm - 5:30 pm

Workshops will include Video Case Presentations, Lectures and Demonstrations on vein management by experts, plus Hands-On opportunities where participants can rotate through multiple training stations staffed by professionals to assist with your experience.

Module 1: Current Superficial Venous Treatment, Wounds and Edema
Endothermal Therapy, Cyanoacrylate, MOCA, VTE and Recanalization, Perforators, Sclerotherapy, CVI, Lymphedema, Lipedema, Wound Care and Compression

Module 2: Thrombus Management
Thrombolysis and Thrombectomy, Stents, IVUS, Valves, Nutcracker Syndrome

Visit www.VEITHsymposium.org to REGISTER. Check the option for the Wednesday Venous Workshops.

This is a non-CME activity.
The Vascular world is coming together in New York this November... and you're invited!

WHO SHOULD ATTEND:
• Graduating Fellows and Residents in vascular surgery, interventional radiology and interventional cardiology
• Attending vascular specialists seeking new opportunity
• Potential employers of Vascular/IR specialists
• Wound care specialists
• Vascular/IR career recruiters

VEITHsymposium is the premier annual meeting where vascular specialists from all over the world come to meet and discuss the newest advances in vascular interventions.

VEITHsymposium acknowledge educational grants in support of this non-CME activity from Gore & Associates, Inc. and Medtronic, Inc.

WHO SHOULD ATTEND:

Program Director:
James F. McKinsey, MD
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<tr>
<th>Time</th>
<th>Session 1: Selecting Your First Job</th>
<th>Time</th>
<th>Session 4: Long-Term Practice Management</th>
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<tr>
<td>8:00 – 8:05</td>
<td>WELCOME</td>
<td>11:30 – 11:40</td>
<td>Questions and Answers</td>
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<tr>
<td></td>
<td>James F. McKinsey, MD</td>
<td>11:40 – 12:00</td>
<td>ROUND Table Discussion of Vascular Practice</td>
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<td>Issues: How, What, Why and When!</td>
</tr>
<tr>
<td>8:05 – 8:15</td>
<td>SESSION 1</td>
<td>12:00 – 1:00</td>
<td>Lunch Break – 2nd Floor Promenade</td>
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<tr>
<td></td>
<td>SELECTING YOUR FIRST JOB</td>
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<td>Visit Exhibits and Pavilions</td>
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<td></td>
<td>What a 21st Century Private/Hybrid Practice</td>
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<td>(2nd and 3rd Floors)</td>
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<td>Looks Like</td>
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<td></td>
<td>Carlo A. Dall’Olmo, MD</td>
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<td>8:15 – 8:25</td>
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<td>What a 21st Century Academic Practice Looks</td>
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<td>James H. Black III, MD</td>
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<td>8:25 – 8:35</td>
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<td></td>
<td>What to prioritize your first practice?</td>
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<td>Anil P. Hingorani, MD</td>
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<td>8:35 – 8:45</td>
<td>8:45 – 9:00</td>
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<td>Panel Discussion with Q&amp;A</td>
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<td>Things I Wish I Had Known When I Was</td>
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<td>Selecting My First Job</td>
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<td>Neal S. Cayne, MD</td>
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<td></td>
<td>SESSION 2</td>
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<td>Interviewing 101: The Right Questions to Ask</td>
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<td>9:00 – 9:10</td>
<td>INTERVIEWING FOR YOUR FIRST JOB</td>
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<td>When Interviewing</td>
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<td></td>
<td>Interviewing 101: The Right Questions to Ask</td>
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<td>Joseph V. Lombardi, MD</td>
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<td>9:10 – 9:20</td>
<td>9:20 – 9:40</td>
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<td></td>
<td>How to Find Out What the Practice Is Really Like</td>
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<td>Adam Beck, MD</td>
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<td>9:20 – 9:40</td>
<td>9:40 – 9:50</td>
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<td>Do I Need to Hire a Lawyer to Review My Employment Contract?</td>
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<td>Russell H. Samson, MD, RVT, FACS</td>
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<td>9:40 – 9:50</td>
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<td>Negotiating with Hospital Administrators</td>
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<td>Marc L. Schermerhorn, MD</td>
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<td>9:50 – 10:00</td>
<td>10:00 – 10:20</td>
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<td>Panel Discussion with Q&amp;A</td>
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<td></td>
<td>How to Incorporate Clinical Innovation and Change into your Practice</td>
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<td>Mark A. Farber, MD</td>
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<td>SESSION 3</td>
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<td>First Year in Practice</td>
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<tr>
<td>10:20 – 10:30</td>
<td>FIRST YEAR IN PRACTICE</td>
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<td>Keys to Building a Successful Practice</td>
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<td>Building Your Practice: Private Practice</td>
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<td>David J. Minion, MD</td>
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<td>10:30 – 10:40</td>
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<td>Building Your Practice: Private Practice</td>
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<td>Building Your Practice: Academic Practice</td>
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<td>Joseph J. Ricotta II, MD, MS, DFSVS, FACS</td>
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<td>10:40 – 10:50</td>
<td>10:50 – 11:00</td>
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<td>Building Your Practice: Private Practice</td>
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<td>Building Your Practice: Multispecialty Group</td>
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<td>Luis A. Sanchez, MD</td>
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<td>10:50 – 11:00</td>
<td>11:00 – 11:10</td>
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<td>Building Your Practice: Multispecialty Group</td>
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<td>Resources Available to You from Your Regional Vascular Societies</td>
<td></td>
<td>Manish Mehta, MD, MPH</td>
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<tr>
<td>11:00 – 11:10</td>
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<td>Resources Available to You from Your Regional Vascular Societies</td>
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<td>Surviving Your First 5 Years In Practice</td>
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<td>Jeffrey J. Siracuse, MD, RPVI, FACS</td>
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<tr>
<td>11:10 – 11:20</td>
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<td>Surviving Your First 5 Years In Practice</td>
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<td>Vascular Procedure Billing and Coding</td>
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<td>Palma M. Shaw, MD</td>
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<td>11:20 – 11:30</td>
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<td>Vascular Procedure Billing and Coding</td>
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FLOOR PLANS, EXHIBITS AND PAVILIONS
VEITHsymposium/AMsymposium/AVIdsymposium - NOVEMBER 18-23, 2019
NEW YORK HILTON MIDTOWN - 2ND FLOOR - NEW YORK, NY

FLOOR PLANS, EXHIBITS AND PAVILIONS
**FLOOR PLANS, EXHIBITS AND PAVILIONS**

**COMBINED EXHIBIT HALL for VEITHsymposium, AIMsymposium and AVIDsymposium**

(MONDAY – FRIDAY/SATURDAY)

We acknowledge the participation of the following companies as exhibitors:

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<td>510 – 3rd Floor Foyer</td>
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<td>Abbott</td>
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<td>AngioAdvancements</td>
<td>115 - South Corridor - 2nd Floor (Exhibiting Monday)</td>
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<td>AngioAdvancements</td>
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<td>Argon Medical Devices</td>
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<td>Avenu Medical</td>
<td>500 – 3rd Floor Foyer (Exhibiting Saturday)</td>
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<td>B. Braun Interventional Systems Inc.</td>
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<td>BD (Formerly Bard Peripheral Vascular)</td>
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<td>516, 517 and 518 – 3rd Floor Foyer</td>
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<td>Bentley</td>
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<td>Boston Scientific</td>
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<tr>
<td>Boston Scientific</td>
<td>Pavilion – Beekman Parlor, 2nd Floor Promenade</td>
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<td>BTG</td>
<td>305 and 306 - 3rd Floor Foyer</td>
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<td>Cardiovascular Systems, Inc.</td>
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<td>Cook Medical</td>
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<td>CryoLife, Inc.</td>
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<td>CX 2020/Vascular News</td>
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<td>Cydar Medical</td>
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<td>Endovascular Today</td>
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<td>Getinge</td>
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<td>Gore &amp; Associates</td>
<td>Pavilion (Simulation) - Sutton Parlor South and Regent Parlor - 2nd Floor</td>
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<td>Janssen Pharmaceuticals, Inc.</td>
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<td>Ziehm Imaging, Inc.</td>
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## PAVILIONS

VEITHsymposium, AIMsymposium and AVIDsymposium  
(Tuesday – Friday/Saturday)

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<td>Boston Scientific Corporation</td>
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<td>Philips Image Guided Therapy Devices</td>
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PROGRAM SCHEDULE
TUESDAY, NOVEMBER 19, 2019

6:00 A.M.  General Registration – Rhinelander Gallery, 2nd Floor
6:00 A.M.  Faculty Registration – Morgan Suite – 2nd Floor
6:15 A.M.  Continental Breakfast – Rhinelander Gallery, 2nd Floor

CONCURRENT TUESDAY PROGRAMS

Program A:  (Sessions 1-8)
Progress In The Treatment Of Diseases Of Heart Valves, Coronary Arteries And Thoracic And Abdominal Aortic Diseases
6:45 A.M. – 6:00 P.M.  Grand Ballroom East, 3rd Floor

Program B:  (Sessions 9-16)
Progress In Vascular Robotics, Guidance Systems, Simulation And Laparoscopy; New Developments In Carotid Disease, Acute Strokes; And Their Treatments; Abdominal Aortic Branch Diseases And Their Treatments; New Concepts, Artificial Intelligence And Telemedicine; Vascular Branding, Recognition And Boards; Open Vascular Surgery And Progress In The Treatment Of Coarctations And Mid-Aortic Syndrome
6:40 A.M. – 6:00 P.M.  Grand Ballroom West, 3rd Floor

Program C-1:  (Sessions 17-18)
Management Of Pulmonary Embolism: The Ultimate Team Approach (VEITH/TCT Co-Branded Sessions)
7:00 A.M. – 12:00 P.M.  Trianon Ballroom, 3rd Floor
Course Leader:  Michael R. Jaff, DO

Program C-2:  (Sessions 19-20)
Introduction To Vascular Malformations
1:00 P.M. – 3:00 P.M.  Trianon Ballroom, 3rd Floor
Course Leaders:  Wayne F. Yakes, MD
Krassi Ivancev, MD, PhD
Robert L. Vogelzang, MD

Program C-3:  (Sessions 21-22)
Hot New Topics In Lower Extremity Occlusive Disease Treatment (VEITH/TCT Co-Branded Sessions)
3:00 P.M. – 6:00 P.M.  Trianon Ballroom, 3rd Floor
SESSION 1  (Grand Ballroom East, 3rd Floor)
PROGRESS IN THE TREATMENT OF ASCENDING AORTIC DISEASE, TRANSCATHETER VALVE REPLACEMENT AND CORONARY ARTERY STENTING

Moderators:  Hazim J. Safi, MD
             Joseph S. Coselli, MD

THE ASCENDING AORTA

             Grayson H. Wheatley, MD

6:56 – 7:01  Update On Endovascular Treatment Of Ascending Aortic Lesions: What Is On The Horizon
             Christoph A. Nienaber, MD, PhD

7:02 – 7:07  Update On Ascending Aortic Endograft Treatment: Indications, Devices, Techniques And Results
             Rodney A. White, MD

7:08 – 7:13  Status Of Endovascular Combined Device For Repairing Lesions Of The Ascending Aorta And The Aortic Valve: The Endo-Bentall Concept
             Ali Khoynezhad, MD, PhD

             Alan B. Lumsden, MD

CORONARY STENTS

7:20 – 7:25  What Is New In Coronary Stenting: Current Status Of Non-Absorbable Stents, Drug Eluting And Bare Metal
             Gregg W. Stone, MD
7:26 – 7:31 Update Of Bioabsorbable Stents (BRSs) In The Coronary Arteries: Why Did The Absorb Stent Fail: Is There Hope For BRSs In The Future – In Coronary Or Peripheral Arteries  
Gregg W. Stone, MD

TRANSCATHETER HEART VALVES

7:32 – 7:32 Progress In Transcatheter Aortic Valve Replacement (TAVR): An Interventional Cardiologist’s View. This presentation will be given by Martin B. Leon, MD on Thursday, Session 47 at 7:03 – 7:08 a.m. in the Grand Ballroom East.

Lars G. Svensson, MD, PhD

7:39 – 7:44 Progress In Endovascular Mitral Valve Repair: What Devices Are Appearing And How Well Are They Working  
Juan F. Granada, MD

7:45 – 7:51 Panel Discussion

SESSION 2  
(Grand Ballroom East, 3rd Floor)

PROGRESS IN THE TREATMENT OF AORTIC ARCH LESIONS AND AORTIC DISSECTIONS

Moderators: Lars G. Svensson, MD, PhD  
Christoph A. Nienaber, MD, PhD

7:51 – 7:56 With Aortic Arch Lesions (Aneurysms And Dissections), When Should The Treatment Be Fenestrated Or Branched TEVAR (F/B/TEVAR), Chimney TEVAR (Ch/TEVAR), Hybrid Or Fully Open Surgical Repair  
Chang Shu, MD

7:57 – 8:02 Another View Of Current Optimal Treatment Of Aortic Arch Aneurysms: Total Endovascular, Hybrid, Open And Frozen Elephant Trunk: Which Is Best When  
Roberto Chiesa, MD  
Germano Melissano, MD

8:03 – 8:08 Update On Value And Limitations Of Frozen Elephant Trunk Repairs And The ThoroFlex Graft For Complex Aortic Arch Lesions: Is Spinal Cord Ischemia An Issue  
Joseph S. Coselli, MD

8:09 – 8:14 Six-Year Results With Terumo Aortic Relay 2 Branched Device For Aortic Arch Lesions: Indications And Contraindications  
Toru Kuratani, MD, PhD
8:15 – 8:20 Update On Total Endovascular Arch Repairs Using Cook Multibranched Devices: When Indicated, When Questionable, When Not Indicated; Advantages And Limitations
   Stephan Haulon, MD

8:21 – 8:26 Total Endovascular Aortic Arch Repairs With The Relay 2-Branched Endograft: The US Experience – Advantages And Limitations
   Eric E. Roselli, MD

8:27 – 8:32 Physician-Made Fenestrated Endograft Repair For Aortic Arch Lesions: Experience In >115 Cases: Challenges And Technical Tips
   Ludovic Canaud, MD, PhD

8:33 – 8:38 Experience With Branched Endografts For Treatment Of Aortic Arch Lesions
   Zaiping Jing, MD
   Qingsheng Lu, MD

8:39 – 8:44 Long-Term Results (>4 Years) Of Parallel Grafts (Chimneys And Periscopes) For Aortic Arch Lesions; Tips To Make Them Work And When Do They
   Mario L. Lachat, MD
   Nicola Mangialardi, MD

8:45 – 8:50 Results And Advantages With A Precurved Convertible F/B Endograft For Arch Lesions: How It Compares With Other Arch Grafts And Will It Be Available Outside Japan
   Yoshihiko Yokoi, MD

8:51 – 8:56 Real World Experience With Double Branched Endografts For Aortic Arch Lesions: Are They Ready For Prime Time: From The Italian And Dutch Registries
   Ciro Ferrer, MD
   Piergiorgio Cao, MD

8:57 – 9:04 Panel Discussion

SESSION 3 (Grand Ballroom East, 3rd Floor)
PROGRESS IN THE ENDOVASCULAR TREATMENT OF AORTIC DISSECTIONS: PETTICOAT, STABILISE, FLIRT, FENESTRATIONS AND TEVAR’S EFFECTS ON THE HEART

Moderators: Rodney A. White, MD
            Michael J. Jacobs, MD

9:04 – 9:09 Evolving An Optimal Treatment For Type B Aortic Dissections (TBADs) With TEVAR And False Lumen Embolization: Techniques And Results
   Weiguo Fu, MD

9:10 – 9:15 New Developments In The Treatment Of TBADs: False Lumen Intervention After TEVAR To Promote Thrombosis And Remodeling (FLIRT): Indications, Techniques And Results
   Christoph A. Nienaber, MD, PhD
9:16  –  9:21  Fenestration And Branched EVAR (F/B/VAR) To Treat Post TBAD AAAs: Technical Tips, Results And Limitations
Eric L.G. Verhoeven, MD, PhD

9:22  –  9:27  Update On PETTICOAT TEVAR For TBADs: Why The Addition Of A Distal Bare Dissection Stent To A Proximal Covered Stent Facilitates Treatment And Improves Outcomes
Joseph V. Lombardi, MD

9:28  –  9:33  Impact Of The PETTICOAT Technique (With A Distal Bare Stent Added To A Proximal Covered Stent) On Aortic Remodeling With Chronic TBADs: Indications, Timing Of Treatment And Results
Chun Che Shih, MD, PhD

9:34  –  9:39  The STABILISE Modification Of The PETTICOAT Technique To Rupture The Dissection Flap And Promote False Lumen Obliteration To Treat TBADs: Concept, Indications And Results
Jean-Marc Alsac, MD, PhD

9:40  –  9:45  Another Opinion About The STABILISE Modification Of The PETTICOAT Technique To Disrupt The Dissection Flap With A Compliant Balloon In The Covered Stent And A Non-Compliant Balloon In The Bare Stent: Precautions And Results
Luca Bertoglio, MD
Germano Melissano, MD
Roberto Chiesa, MD

9:46  –  9:51  Long Stent Grafts For TEVAR Have Bad Effects On The Heart And Tend To Migrate Proximally Causing Type 1B Endoleaks: What Are The Mechanisms
Frans L. Moll, MD, PhD

9:52  –  9:57  Update On Extensive Flap Disruption (Fenestration) To Treat TBADs: Why It Works By Equalizing Pressure In The 2 Lumens, Indications And Results
Juan C. Parodi, MD
Ramon Berguer, MD, PhD

9:58  –  10:03  Open Surgical Flap Excision In The Abdominal Aorta To Treat Complex Dissections: Indications, Theory, Technique, Precautions And Results
Sherif A.H. Sultan, MD, PhD

10:04 – 10:11  Panel Discussion

10:11 – 10:21  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 4 (Grand Ballroom East, 3rd Floor)
MORE NEW DEVELOPMENTS IN THE TREATMENT OF TBADs, THORACIC AORTIC DISEASE AND THORACOABDOMINAL ANEURYSMS (TAAAs)

**Moderators:** Nicholas J.W. Cheshire, MD  
Frank J. Veith, MD

10:21 – 10:26 Evidence For And Risks Of Endovascular Treatment Of Asymptomatic Acute Type B Aortic Dissection: Is TEVAR Really A Good Treatment  
Rachel E. Clough, MD, PhD

10:27 – 10:32 Long-Term Successful Treatment Of TBADs With Total Aortic Remodeling Usually Requires Multiple Re-Interventions – Many Long After The Original TEVAR: What Are These Re-Interventions  
Götz M. Richter, MD, PhD

10:33 – 10:38 A New Classification System For Aortic Dissections: Better For Prognosis, Predicting Complications And Guiding Treatment  
Martin Czerny, MD  
Bartosz Ryłski, MD, PhD

10:39 – 10:44 F/B/EVAR Treatment Of Chronic TBADs With An Enlarging AAA After TEVAR: A Positive 8-Year Experience; How To Deal With A Small True Lumen And Value Of Inner Branches  
Marcelo Ferreira, MD

10:45 – 10:50 How To Manage Re-Entry Sites In The Arch And Visceral Segment Of The Aorta After TEVAR For TBADs  
Timothy A. Resch, MD, PhD

10:51 – 10:56 Update On False Lumen Occlusion Techniques And Value After TEVAR For TBADs: New Devices; When Indicated; Results And When Preferred Over F/B/EVAR In Patients With AAAs  
Tilo Kölbel, MD, PhD

10:57 – 11:02 Effectiveness Of False Lumen Embolization For Chronic TBADs With Progressive Aortic Enlargement: Devices, Techniques And Results  
Herve Rousseau, MD, PhD

11:03 – 11:08 A New Modular Branched Stent-Graft For Aortic Arch Reconstruction: Advantages And Limitations From A First In Man Study  
Wei Guo, MD  
(Power Point Presentation With Synced Audio)

11:09 – 11:15 Panel Discussion

11:15 – 11:20 Improvements In Techniques And Grafts For Open TAAA Repair: In Virginal Cases And After Failed Endovascular Procedures  
Hazim J. Safi, MD
11:21 – 11:26 Open TAAA Repair After Failed TEVAR Or Endovascular TAAA Repair: Technical Advances And Results: Who Should Do These Redo Procedures
Roberto Chiesa, MD
Geriano Melissano, MD

11:27 – 11:32 Importance Of A Type III Aortic Arch And Descending Aorta Tortuosity In Determining Outcomes Of TEVAR And Treating TBADs: How To Deal With These Issues
Santi Trimarchi, MD, PhD

11:33 – 11:38 Current Status Of Cerebral Protection For TEVAR And TAVR: What Are The Devices, When Can They Help And When Not
Jeffrey P. Carpenter, MD

11:39 – 11:44 Staged Endovascular And Open TAAA Repairs Reduces Morbidity And Mortality: When And How To Do It And Results
Michael J. Jacobs, MD
Geert Willem H. Schurink, MD, PhD

11:45 – 11:50 TEVAR Has Better Long-Term Survival (>5 Years) Than Open Repair For Intact Descending Thoracic Aortic Aneurysms: TEVAR Should Be The Standard Of Care; Randomized Trials (RCTs) Are Not Needed
Michael D. Dake, MD

11:51 – 11:56 Short And Long-Term Comparison In Canada Of Open And Endo TAAA Repair Regarding Outcomes And Cost: Endo Is Best
Thomas F. Lindsay, MDCM

11:57 – 12:03 Panel Discussion

12:03 – 1:00 Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 5 (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN ABDOMINAL AORTIC ANEURYSM (AAA) TREATMENT, EVAR AND EVAS (ENDOVASCULAR ANEURYSM SEALING)

1:00 – 1:05 How And Why Is AAA Disease Different In Diabetics: How Do These Differences Impact Treatment
Ronald L. Dalman, MD

1:06 – 1:11 Update On The Nellix Graft And EVAS: Will Nellix Be A Failure Or A Phoenix Surmounting Its Problems
Matt M. Thompson, MD
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<tr>
<td>1:18</td>
<td>Anders Wanhainen, MD, PhD</td>
<td>Value Of Metformin And Ticagrelor In Inhibiting The Growth Of Small AAAs: What Is The Long-Term Fate Of 25-29 mm Abdominal Aortas: How Many Will Become AAAs</td>
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<td>1:24</td>
<td>Kak Khee Yeung, MD, PhD</td>
<td>Influence Of Metformin On AAA Derived Cells In Culture: A Clue To How Metformin Slows AAA Growth</td>
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<td>1:28</td>
<td>Andrej Schmidt, MD</td>
<td>Update On The Value Of And Indications For Pre EVAR Lumbar And Inferior Mesenteric Artery Embolization</td>
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<td>1:32</td>
<td>Peter Gloviczki, MD</td>
<td>DEBATE: There Are Several Good Reasons To Electively Repair AAAs &lt;5.5 cm In Maximum Diameter: What Are They</td>
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<td>1:36</td>
<td>Jonothan J. Earnshaw, DM, MBBS</td>
<td>DEBATE: Why AAAs &lt;5.5 cm Should Not Be Treated Invasively: The Rupture Rate (&lt;1%/Year) Is Less Than Commonly Thought</td>
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<td>Panel Discussion</td>
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<td>1:45</td>
<td>Andrew W. Bradbury, MD</td>
<td>DEBATE: Young Fit AAA Patients Have Better Long-Term Survival With Open Repair (OR) Than EVAR And Should Be Offered OR If They Need Invasive Treatment</td>
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<td>1:51</td>
<td>Jon M. Verhagen, MD, PhD</td>
<td>DEBATE: Not So: Survival Is Better In Young Fit AAA Patients After EVAR Than OR Hence</td>
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<td>1:57</td>
<td>Thomas C. Bower, MD</td>
<td>Why Open Repair Of AAAs Has Improving Outcomes: When Is OR Indicated And Better For Patients</td>
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<td>2:03</td>
<td>Jan D. Blankensteijn, MD</td>
<td>In AAA Patients Suitable For Both OR And EVAR Unfavorable Neck Characteristics (Short, Wide, Angulated Or Cone Shaped) Have More Adverse Outcomes And Higher Mortality After OR As Well As EVAR: From The DREAM RCT: How Should This Impact On AAA Treatment Decisions</td>
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| 2:09 – 2:14| Migration Patterns In Newer Lower Profile EVAR Stent-Grafts: What Are The Implications For EVAR Planning And Follow-Up  
  Colin D. Bicknell, MD |
| 2:15 – 2:20| Optimal Current Treatment For Inflammatory AAAs: When Medical; When Endo; When Open  
  Franco Grego, MD |
| 2:21 – 2:26| EVAS Treated Patients (With Nellix) Have A Lower 3-Year Mortality Than EVAR Treated Patients: What Is The Mechanism And Is This Difference Restricted To Patients With AAAs >5.5 cm  
  Marc L. Schermerhorn, MD |
| 2:27 – 2:32| Another View Of Why EVAS Treated Patients (With Nellix) Have A Lower Mortality Than EVAR Treated Patients: What Is The Mechanism And Is This Difference Restricted To Patients With AAAs >5.5 cm  
  Michel M.P. Reijnen, MD, PhD |
| 2:33 – 2:38| Panel Discussion |

**SESSION 6**  
(Grand Ballroom East, 3rd Floor)  
**MORE ABOUT AAAs AND EVAR; THE NICE GUIDELINES AND REACTIONS TO THEM**  
 **Moderators:**  
Ali F. AbuRahma, MD  
Frank J. Veith, MD

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| 2:38 – 2:43| Highlights Of Clinical Practice Guidelines For Endovascular Repair Of Complex AAAs Involving The Paravisceral Aorta  
  Thomas L. Forbes, MD |
| 2:44 – 2:49| Sac Shrinkage Is A Good Marker Of Durable Success After EVAR: Is There A Difference In This Marker With Different Endografts  
  Michael C. Stoner, MD |
| 2:50 – 2:55| Long-Term Results Of EVAR Outside Device IFUs Is Not So Bad: When Is It Acceptable To Use EVAR Devices Outside Their IFUs  
  B. Patrice Mwipatayi, MMed, MClinEd |
| 2:56 – 3:01| When Is EVAR First The Best Option For Repairing AAAs And When Is Open Repair First The Best Option: Late Failures Raise Questions Especially With Large Diameter Necks And Outside The IFUs  
  Daniel G. Clair, MD |
THE UK NICE AAA GUIDELINES AND REACTIONS TO THEM

3:02 – 3:07 Highlights Of The UK NICE Guidelines For Treating Elective And Ruptured AAAs: Why Do They Favor Open Repair Over EVAR And What Was The Influence Of The EVAR I Late Results
Andrew W. Bradbury, MD

3:08 – 3:13 Why The Early Survival Benefit For EVAR Versus Open Repair Outweighs The Late Survival Benefit For Open Repair Versus EVAR
Nicholas J.W. Cheshire, MD

MORE COMMENTS ON THE NICE AAA GUIDELINES

3:14 – 3:18 The NICE AAA Guidelines Are Misleading And Unfairly Biased Against EVAR
Michael P. Jenkins, MBBS, BSc, MS

Dittmar Böckler, MD

Alun H. Davies, MA, DM, DSc

3:26 – 3:30 Flaws In The NICE Guidelines For Treating AAAs: How They Were Based On Biases Of The Writing Committee And Why They Will Have An Impact Beyond The UK
Frans L. Moll, MD, PhD

3:30 – 3:36 Panel Discussion

3:36 – 3:46 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 7 (Grand Ballroom East, 3rd Floor)
MORE NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC DISSECTIONS AND THORACIC AORTIC PATHOLOGY

Moderators: Ronald L. Dalman, MD
Firas F. Mussa, MD

3:46 – 3:51 Best Medical Therapy For Acute TBAD Patients: What Is It And Strategies To Optimize It: How Effective Can It Be
Colin D. Bicknell, MD

David M. Williams, MD

3:58 – 4:03 Technical Tips To Improve Or Increase The Use And Safety Of The Cook T-Branch Off-The-Shelf (OTS) Device For TAAAs
Marcelo Ferreira, MD
4:04 – 4:09  Aortic Arch Anomalies, Especially Bovine Arches: What Are Their Bad Implications For Patients And Treatment Outcomes
   Frank J. Criado, MD

4:10 – 4:15  Update On The Natural History Of Penetrating Aortic Ulcers (PAUs) And Intramural Hematomas (IMHs) With And Without TEVAR Treatment: Medical Treatment Has A High Failure Rate: So When And How Should They Be Treated
   Jean M. Panneton, MD

4:16 – 4:21  Making EVAR Safer Long-Term Using Ultrasound Made Simple To Measure AAA Sac Diameter Annually At Home
   Roger M. Greenhalgh, MD

TIMING OF EVAR FOR UNCOMPLICATED TBAD

4:22 – 4:27  TEVAR Can Be Performed Safely Soon After Symptom Onset With TBADs Under Certain Conditions
   Edward Y. Woo, MD
   Tareq Massimi, MD

4:28 – 4:33  With Uncomplicated TBADs TEVAR Should Be Perfomed As Soon As Possible After Onset Of Symptoms: For These Reasons And With These Precautions
   Ali Khoynezhad, MD, PhD

4:34 – 4:39  Not So: With Uncomplicated Acute TBADs TEVAR Should Be Delayed 2 Weeks To 3 Months For These Reasons
   Matt M. Thompson, MD

4:40 – 4:45  With Uncomplicated Acute TBADs TEVAR Should Be Delayed For 1-3 Months After Symptom Onset And Why
   Mark A. Farber, MD

4:46 – 4:53  Panel Discussion

SESSION 8  (Grand Ballroom East, 3rd Floor)
MORE NEW DEVELOPMENTS RELATING TO TEVAR AND TBADs: CAUSES AND PREVENTION OF STROKE COMPLICATIONS; CONTROVERSIES OVER THE NEED FOR TEVAR IN SOME OR ALL ACUTE UNCOMPLICATED TBAD PATIENTS, AND OVER THE EXTENT OF TEVAR COVERAGE

Moderators:  Timur P. Sarac, MD
           Mark A. Farber, MD

4:53 – 4:58  Status Of Stroke Prevention During TEVAR: What Percent Are Due To Particulate Emboli And What Percent Due To Air Emboli: Techniques To Prevent Both
   Tilo Kölbl, MD, PhD
4:59 – 5:04 **Causes Of Stroke During TEVAR: Gaseous Emboli Are Important And Some But Not All Can Be Prevented By CO₂ Flushing Of Delivery Systems**  
*Richard G.J. Gibbs, FRCS*

5:05 – 5:10 **The STEP Registry: A Global Network To Decrease Strokes Associated With Thoracic Aortic Endografting Procedures: How Will It Work**  
*Fiona Rohlffs, MD*  
*Stephan Haulon, MD*  
*Tilo Kölbel, MD, PhD*

5:11 – 5:16 **IVUS Need Not Be Mandatory To Treat TBADs By TEVAR Safely: How So**  
*Frank J. Criado, MD*

5:17 – 5:22 **DEBATE: Most Acute Uncomplicated TBADs Need To Be Treated By TEVAR: The INSTEAD RCT Proves It: We Do Not Need Further RCTs**  
*Christoph A. Nienaber, MD, PhD*

5:23 – 5:28 **DEBATE: Not So: Controversy Lingers: We Do Need A RCT Comparing TEVAR With Best Medical Treatment (BMT) To BMT Alone For Acute Uncomplicated TBADs: How Could Such A Trial Be Structured And Financed**  
*Firas F. Mussa, MD*

5:29 – 5:34 **Why TEVAR For Acute Uncomplicated TBADs Is Imperfect: The Case For Using It Selectively**  
*Joseph V. Lombardi, MD*

5:35 – 5:40 **DEBATE: Treating More Acute Uncomplicated TBAD Patients With Extended TEVAR Coverage Almost To The Celiac Artery Will Improve Outcomes: It Is The Way To Go**  
*William D. Jordan, Jr., MD*

5:41 – 5:46 **DEBATE: Not So: Limited Coverage Of The Thoracic Aorta By TEVAR Is Safer And Better**  
*Michel Makaroun, MD*

5:47 – 5:52 **A Decision-Making Algorithm For Optimally Treating Uncomplicated Acute TBAD Patients**  
*Dittmar Böckler, MD*

5:53 – 6:00 **Panel Discussion**

End of Program A
PROGRAM B  (SESSIONS 9-16)
PROGRESS IN VASCULAR ROBOTICS, GUIDANCE SYSTEMS, SIMULATION AND LAPAROSCOPY; NEW DEVELOPMENTS IN CAROTID DISEASE, ACUTE STROKES; AND THEIR TREATMENTS; ABDOMINAL AORTIC BRANCH DISEASES AND THEIR TREATMENTS; NEW CONCEPTS, ARTIFICIAL INTELLIGENCE AND TELEMEDICINE; VASCULAR BRANDING, RECOGNITION AND BOARDS; OPEN VASCULAR SURGERY AND PROGRESS IN THE TREATMENT OF COARCTATIONS AND MID-AORTIC SYNDROME

Grand Ballroom West, 3rd Floor

6:40 – 6:44  Opening Remarks
Enrico Ascher, MD

SESSION 9  (Grand Ballroom West, 3rd Floor)
PROGRESS IN VASCULAR ROBOTICS, GUIDANCE SYSTEMS, SIMULATION AND LAPAROSCOPY

Moderators:  Alan B. Lumsden, MD
             Jean-Baptiste Ricco, MD, PhD

VASCULAR ROBOTICS

6:45 – 6:50  A New Vascular Robotic System From Corindus: How Does It Work: What Does It Do: Clinical Experience And Value
Joseph J. Ricotta II, MD, MS

Jean Bismuth, MD
Alan B. Lumsden, MD

6:57 – 7:02  Will Newer Technology And Platforms Lead To More Widespread Use Of Vascular Robotics: What Is On The Horizon And Beyond
Willem Wisselink, MD

7:03 – 7:08  A New Vascular Robotic System From China: How Does It Work: Advantages: Cost And When Will It Be Available
Qingsheng Lu, MD
Zaiping Jing, MD

Ravi K. Veeraswamy, MD
VASCULAR GUIDANCE

Stephan Haulon, MD

7:21  –  7:26  Update On An Emerging Radiation Free 3D Endovascular Guiding System (IOPS) From Centerline (BIOM) Medical: How Does It Work; When Will We Have It; How Much Will It Cost  
Matthew J. Eagleton, MD

7:27  –  7:32  A New 3D Device Guidance Technology Within The Vascular Tree: Fiber Optic RealShape (FORS Technology): How Does It Work And Initial Results  
Joost A. van Herwaarden, MD, PhD

Alun H. Davies, MA, DM, DSc

LAPAROSCOPY

7:39  –  7:44  Laparoscopic Median Arcuate Ligament Release: The Best Way To Treat Celiac Artery Compression Syndrome: Advantages And Limitations And Who Should Do It  
Joseph S. Giglia, MD  
George H. Meier III, MD

7:45  –  7:50  Why I Stopped Doing Laparoscopic Aortic Surgery After Performing 160 Cases  
Laurent Chiche, MD

7:51  –  7:59  Panel Discussion

SESSION 10  (Grand Ballroom West, 3rd Floor)  
NEW DEVELOPMENTS IN THE MANAGEMENT OF CAROTID DISEASE: UNRESOLVED CONTROVERSIES

Moderators:  Bruce A. Perler, MD, MBA  
L. Nelson Hopkins, MD

7:59  –  8:04  Role And Value Of Biomarkers Of Brain Injury In CAS And CEA Procedures: How Can They Help Decision Making  
Christos D. Liapis, MD

8:05  –  8:10  Systemic Biomarkers Can Predict The Volume Of Cerebral Infarct Associated With Carotid Interventions: Is There A Difference Between CAS And CEA  
Wei Zhou, MD
8:11  –  8:16  Cerebral Hyperfusion Syndrome After CAS Procedures: Etiology, Diagnosis, Optimal Treatment And Prevention
   Gert J. de Borst, MD, PhD

8:17  –  8:22  Intracranial Artery Dissection: An Unrecognized Cause Of Strokes: How To Diagnose And Treat It
   Emmanuel M. Houdart, MD

8:23  –  8:28  Eversion CEA: Technical Tips, When Is It The Best Method For CEA And When Not
   Timothy M. Sullivan, MD

8:29  –  8:34  New Developments In Best Medical Treatment For Carotid Patients: Can Carotid Plaques Be Stabilized Or Shrunk: Will Strokes And MIs Become Rare Or Eliminated
   Andrew N. Nicolaides, MS, FRCS

8:35  –  8:40  DEBATE: CEA Must Include Completion Imaging With Duplex Or Angiography
   Hans-Henning Eckstein, MD, PhD

8:41  –  8:46  DEBATE: Not So: Completion Duplex Can Be Misleading And Angiography Can Be Harmful And Misleading: Completion Imaging Causes More Harm Than Benefit
   R. Clement Darling III, MD

8:47  –  8:54  Panel Discussion

8:54  –  8:59  Avoiding And Managing Complications During Transfemoral CAS
   Horst Sievert, MD

9:00  –  9:05  Optimal Contemporary Treatment Of Carotid Artery Aneurysms, Pseudoaneurysms And Patch Infections: When Endo, When Open
   Peter L. Faries, MD

   Andrew N. Nicolaides, MS, FRCS

UPDATE ON CAROTID PATCHES

9:12  –  9:17  Careful Primary Closure Of CEA Arteriotomies (Without A Patch) Is Not Inferior To Patch Closures: In A Propensity Matched Analysis: Why Did The RCTs Get It Wrong
   Dong-ik Kim, MD

9:18  –  9:23  All Patches For CEA Closure Are Not Equal: Which Patch Material Is Best: How Big Should The Patch Be: Disadvantages And Complications Of Carotid Patches
   Vikram S. Kashyap, MD
   Norman Kumins, MD

9:24  –  9:29  Should All CEA Closures Be Patched: Could The RCTs Indicating That All CEA Patients Should Have Patch Closures Be Misleading
   Ali F. AbuRahma, MD
9:30 – 9:35  Femoral Vein Interposition Grafts Are The Best Treatment For Patch Infections After CEA: Technical Tips  
Salvatore T. Scali, MD  
Thomas S. Huber, MD, PhD

9:36 – 9:41  Carotid Interventions CEA And CAS Will Become Obsolete: Why And When  
Alun H. Davies, MA, DM, DSc

9:42 – 9:48  Panel Discussion

9:48 – 9:58  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 11  (Grand Ballroom West, 3rd Floor)  
MORE NEW DEVELOPMENTS IN CAROTID DISEASE AND ITS TREATMENT; PROGRESS IN THE INTERVENTIONAL MANAGEMENT OF ACUTE STROKES (5 AND SOME 4-MINUTE SHORT SUMMARY [SS] TALKS)

Moderators:  Allan L. Brook, MD  
Horst Sievert, MD

9:58 – 10:03  Carotid Plaque Characteristics With Duplex, CT And MRI Can Predict High Stroke Risk Patients With Asymptomatic Carotid Stenosis  
Christos D. Liapis, MD

10:04 – 10:08 [SS] DEBATE: Long-Term Results Of Transfemoral CAS Are Equivalent To Those Of CEA – Maybe Even Better  
Klaus D. Mathias, MD

10:08 – 10:12 [SS] DEBATE: Not So: Long-Term Results Of CAS Are Not Equal To Those Of CEA  
Anne L. Abbott, MD, PhD

Christos D. Liapis, MD

10:16 – 10:21  Value Of CAS In Treating Chronically Totally Occluded ICAs: Indications, Technical Tips, Results  
Piotr Myrcha, MD, PhD

10:22 – 10:26 [SS] Limb Shaking TIAs: What Are They, What Imaging Should Be Performed And How Should They Be Treated  
Bruce A. Perler, MD, MBA

MANAGEMENT OF ACUTE STROKES

10:26 – 10:31  Merit Of MRI vs. CTA To Evaluate Acute Strokes And Their Treatment: MRI Is Better Than CTA  
Emmanuel M. Houdart, MD
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| 10:32 – 10:37 | Urgent Interventional Treatment Of Strokes Complicating Cardiac Surgery, TEVAR And Other Endo Interventions: What Should Be Done Diagnostically And Therapeutically: Results  
L. Nelson Hopkins, MD |
| 10:38 – 10:43 | For Acute Strokes Later Thrombus Removal From Intracranial Arteries Can Be Beneficial Even 6-16 Hours After Symptom Onset: What Are The Conditions For Success And In Which Patients  
Colin P. Derdeyn, MD |
| 10:44 – 10:49 | Mechanical Intracranial Thrombectomy For Acute Strokes Has Worse Results At Low Volume Centers: What Are The Implications And Which Physicians Should Be Performing These Procedures  
L. Nelson Hopkins, MD  
Colin P. Derdeyn, MD |
| 10:50 – 10:55 | Value Of Suction Thrombectomy Versus Stentrievers To Remove Intracranial Arterial Clot: Advantages Of Penumbra Devices (Jet 7 And Jet D) For Acute Stroke Treatment  
Colin P. Derdeyn, MD |
| 10:56 – 11:00 | [SS] What Is The Role Of The Vascular Surgeon In The Treatment Of Acute Strokes  
Laura Capoccia, MD, PhD |
| 11:00 – 11:06 | Panel Discussion |

**SESSION 12**  
(Grand Ballroom West, 3rd Floor)  
**PROGRESS IN THE TREATMENT OF AORTO-ILIAC AND ILIAC OCCLUSIVE DISEASE**

**Moderators:**  
Keith D. Calligaro, MD  
Daniel G. Clair, MD

<table>
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<tr>
<th>Time</th>
<th>Presentation</th>
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| 11:06 – 11:11 | Optimal Endovascular Treatment Of Aorto-Iliac Occlusive Disease: Proper Stent Or Stent-Graft Selection And Technical Tips  
Jean Bismuth, MD |
| 11:12 – 11:17 | When Are Covered Stents The Best Treatment For Aorto-Iliac Occlusive Disease: Which Is The Best Stent-Graft For This: What Are The Long-Term Results  
B. Patrice Mwipatayi, MMed, MClinEd |
| 11:18 – 11:23 | Update On The CERAB Procedure (Covered Endovascular Reconstruction of Aortic Bifurcation) For Aorto-Iliac Occlusive Disease: Technical Tips, 4-Year Results, What Is The Best Stent-Graft For This Procedure  
Peter C.J. Goverde, MD  
Michel M.P. Reijnen, MD, PhD |
| 11:24 – 11:29 | Value Of The CERAB Procedure For Failed Iliac Stents: Technical Tips And Best Stent-Graft  
Maria Antonella Ruffino, MD |
11:30 – 11:35 Value Of Aortic (AAA) Endografts For Treatment Of Aorto-Iliac Occlusive Disease: Which Device Is Best And Results
Thomas S. Maldonado, MD

11:36 – 11:41 What Is The Best Endovascular Device For Aorto-Iliac Occlusive Lesions: When Self-Expanding Stent; When Balloon Expandable Stent; Which Covered Stent And For Which Lesion
Michel M.P. Reijnen, MD, PhD
Peter C.J. Goverde, MD

11:42 – 11:47 Thoraco-Bifemoral Bypass Is A Good Solution When Other Techniques Fail Or Are Contraindicated: Technical Tips And Results
Manju Kalra, MBBS

11:48 – 11:53 When Limb Occlusion Occurs After An EVAR, Endovascular Solutions Are The Way To Go: Technical Tips To Make Them Safe And Effective
Klaus M. Overbeck, MD, MPhil

11:54 – 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)
NEW OR UPDATED CONCEPTS AND TECHNIQUES; IMPORTANCE OF ARTIFICIAL INTELLIGENCE (AI) IN VASCULAR TREATMENT (5 AND ONE 4-MINUTE SHORT SUMMARY [SS] TALKS)
Moderators: Barry T. Katzen, MD
Ron Waksman, MD

1:00 – 1:05 The Evidence Base For Clinical Decision Making In Lower Extremity Treatments Is Poor: Guidelines Are Often Based On Shaky Foundations: What Is Needed And Are Things Improving
Michael R. Jaff, DO

1:06 – 1:11 Innovation In The Hybrid Operating Room And Angio Suite: What Future Developments Should We Expect: The Philips Azurion Flex C-Arm Fluoroscope Is One Example
Barry T. Katzen, MD

1:12 – 1:17 Advances In Transradial Access For Treating Non-Cardiac Arterial Lesions: Supplies Needed Like Sheathless Systems And 7 Key Technical Pillars To Make Radial Access Procedures Safe And Successful
Marcelo Guimaraes, MD
1:18 – 1:23 Update After 2 Years Of The BATTLE RCT Showing Equivalence Of The Zilver PTX DES (Cook) And Misago Bare Stent (Terumo) For Fempop Lesions: Despite The Misago's Suitability For Deployment Via Radial Access: How Is This Possible
Yann Gouëffic, MD, PhD

Vicente Riambau, MD, PhD

1:28 – 1:33 The Untethered Vascular Patient: How Sensor Technology And Telemedicine Will Improve Care And The Need For Doctor Visits
Tony S. Das, MD

1:34 – 1:39 New Evidence That Telehealth Virtual Visits Can Change Patient Behavior And Be Beneficial
John (Jeb) W. Hallett, MD

1:40 – 1:45 Lessons Learned By A Creative Physician-Inventor And How Artificial Intelligence Will Change Vascular Practice And The World
Lindsay Machan, MD

1:46 – 1:51 Relevance Of Cybersecurity And Artificial Intelligence To Endovascular Treatments
Ron Waksman, MD

1:52 – 1:57 How To Use Apps To Improve Vascular Surgery And A Vascular Surgeon’s Practice
Keith D. Calligaro, MD

1:58 – 2:06 Panel Discussion

SESSION 14  (Grand Ballroom West, 3rd Floor)
VASCULAR SURGERY BRANDING, RECOGNITION, TRAINING AND GOVERNING BODIES (BOARD AND RESIDENCY REVIEW COMMITTEE [RRC])

Moderators:  Alan M. Dietzek, MD, RPVI
Benjamin W. Starnes, MD

2:06 – 2:11 Vascular Surgeons Should Be Complete Vascular Doctors And Not Just Proceduralists: They Should Be Knowledgeable In And Manage All Aspects Of Non-Cardiac Vascular Disease Care
Jerry Goldstone, MD

2:12 – 2:17 Update On Vascular Surgery Training Programs: Number Of 0+5 Positions; Number Of 5+2 Programs: How Many More Of Each Are In The Pipeline
Murray L. Shames, MD

2:18 – 2:23 How Medical/Hospital Executives Perceive Vascular Surgery: It Is Not As A Separate Specialty: Why We Need To Be A Separate Specialty And To Have The Recognition That Goes With It
Jeffrey H. Hsu, MD
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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| 2:24  | Are Interventional Cardiologists Competing With Vascular Surgeons: What Are Their Advantages And Disadvantages: What Can Be Done About This Competition  
Timur P. Sarac, MD |
| 2:30  | Why Vascular Surgery Needs An Approved Independent Board And To Be An Independent Specialty: Status Of The American Board of Vascular Surgery Or ABVS And What Progress Is It Making In Its Quest  
Alan M. Dietzek, MD, RPVI |
| 2:36  | The Reasons Why Vascular Surgery Needs To Be An Independent Specialty With Its Own Separate Board And RRC: It Is Time To Move From Being A Colony To A Nation, Or A Territory To A State  
David H. Deaton, MD |
| 2:42  | Vascular Surgery Needs An Independent ABMS Approved Board And RRC To Thrive As A Specialty In The Medical Hierarchy And To Have Its Value Appropriately Recognized  
Timothy M. Sullivan, MD |
| 2:48  | Vascular Surgery Needs Its Own Separate Approved Board And Qualifies For It In Every Way: However, To Get It The Specialty’s Leadership Represented By The SVS Executive Committee Must Recognize This Need And Go After It With Full Force  
O. William Brown, MD, JD |
| 2:54  | What Is Wrong With The American Board of Surgery’s MOC (Maintenance Of Certification) System For Vascular Surgeons And What Can Be Done To Fix It  
K. Craig Kent, MD |
| 3:00  | The Present MOC System Is Flawed And Does Not Help Patients: MOC Should Be Abolished And Replaced By A Lifelong Learning System: How To Do It  
Gilbert R. Upchurch, MD |
| 3:06  | Panel Discussion |
| 3:15  | Break - Visit Exhibits And Pavilions (2nd and 3rd Floors) |

**SESSION 15**  (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS IN THE TREATMENT OF RENAL AND VISCERAL ARTERY DISEASE (5- AND SOME 4-MINUTE SHORT SUMMARY [SS] TALKS)

**Moderators:**  Ronald M. Fairman, MD  
Kenneth Ouriel, MD, MBA

<table>
<thead>
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<th>Time</th>
<th>Session</th>
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| 3:26  | [SS] Endovascular Treatment Of Large Renal Aneurysms With An Uncovered Stent Excludes The Aneurysm While Preserving Branch Flow: Does It Work  
Jacques Busquet, MD |
| 3:30  | [SS] An Occluded Renal Artery Does Not Mean A Lost Kidney Due To Collaterals Maintaining Its Viability: Revascularization Can Restore Function  
Wei Zhou, MD |
### PROGRAM SCHEDULE

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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| 3:34 – 3:39 | Renal Artery Aneurysms: When Are They Dangerous: Endovascular Techniques For Treatment: When Is Open Repair Indicated  
*Armando Mansilha, MD, PhD* |
| 3:40 – 3:45 | Endovascular Versus Open Treatment For Renal And Visceral Artery Aneurysms:  
When Is Each Treatment Best; Technical Tips  
*Timur P. Sarac, MD* |
| 3:46 – 3:51 | Update On Optimal Treatment For Acute Mesenteric Ischemia: When Endo; When Open: Technical Tips  
*Guillermo A. Escobar, MD* |
| 3:52 – 3:57 | Isolated Dissection Of The Celiac Axis Or Superior Mesenteric Artery (SMA) May Be Symptomatic Or Asymptomatic: Natural History And How Best To Treat  
*I-Hui Wu, MD, PhD* |
| 3:58 – 4:03 | Panel Discussion |
| 4:03 – 4:07 | [SS] DEBATE: Open Surgery Has An Important Role In The Treatment Of Mesenteric Aneurysms  
*Timur P. Sarac, MD* |
| 4:08 – 4:12 | [SS] DEBATE: Not So: Mesenteric And Renal Aneurysms Can All Be Treated Endovascularly: Technical Tips  
*Robert A. Morgan, MD* |
| 4:13 – 4:18 | Pancreaticoduodenal Artery Aneurysms: New Insights Into Their Natural History And Treatment: Endo Versus Open  
*Benjamin M. Jackson, MD*  
*Ronald M. Fairman, MD* |
| 4:19 – 4:24 | Embolization Treatment For Splenic Artery Aneurysms: When, When Not, Technical Tips And Long-Term Results  
*Robert A. Lookstein, MD, MHCDL* |
| 4:25 – 4:30 | Indications And Technical Tips For Safe Retrograde SMA Stenting In Acute Mesenteric Ischemia: Best Access Is Via A Small SMA Branch  
*Cynthia K. Shortell, MD* |
| 4:31 – 4:35 | [SS] Direct Percutaneous Approach To Treat Visceral Artery Aneurysms Difficult To Approach Intraluminally: How To Do It Safely  
*Jacob Cynamon, MD* |
| 4:36 – 4:42 | Panel Discussion |
SESSION 16  (Grand Ballroom West, 3rd Floor)
UPDATE ON OPEN SURGICAL AND HYBRID PROCEDURES; NEW DEVELOPMENTS IN THE TREATMENT OF AORTIC COARCTATION

Moderators:  
Enrico Ascher, MD
Sebastian E. Debus, MD, PhD

4:42 – 4:47  Can Simulation Substitute For The Decrease In Open Aortic Cases In Training And Practice
Ashraf Mansour, MD

4:48 – 4:53  When Is Open Surgery The Best Treatment For Visceral Occlusive Disease And Aneurysms And Why
Laurent Chiche, MD

4:54 – 4:59  Technical Tips For Obtaining Open Retroperitoneal Exposure For Treating Complex AAAs Involving The Pararenal And Visceral Aorta
R. Clement Darling III, MD

5:00 – 5:05  Long-Term Results Of Open Juxta-And Pararenal AAA Repair: From A Large Multicenter National Database With Mean Follow-Up Of 4 Years
Jean-Baptiste Ricco, MD, PhD

5:06 – 5:11  Durability And Late Results Of TAAA Repairs For Type IV And Types I-III TAAAs: When Should Open Repair Be The Preferred Treatment In The Current Endo World
Hazim J. Safi, MD

5:12 – 5:17  Minimal Incisions For Open Aortobifemoral And Fempop Bypasses: Technical Tips And Advantages
Robert M. Proczka, MD, PhD

5:18 – 5:23  Panel Discussion

5:24 – 5:29  Is There Still A Role For Hybrid Procedures In The Endo Era: Why And In What Conditions And Vascular Beds
Oscar L. Ojeda, MD

MID-AORTIC SYNDROME

5:30 – 5:35  Update On Revascularization For Renovascular Hypertension And Mid-Aortic Syndrome: It Is Almost Always Best Treated By Open Surgery
Dawn M. Coleman, MD

5:36 – 5:41  Renovascular Hypertension And Mid-Aortic Syndrome: There Is A Role For Endovascular As Well As Open Treatments: Which Treatment Is Best At What Ages
George Hamilton, MD
### Advances in Coarctation Treatment

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>5:42</td>
<td>Advances In Covered Stent Treatment Of Aortic Coarctation: Value Of New Balloon Expandable Stent-Grafts: Are Bare Stents Ever Indicated</td>
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<td>Elchanan Bruckheimer, MBBS</td>
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<td>5:48</td>
<td>Tips And Tricks For Endo Treatment Of Aortic Coarctation With Aneurysmal Degeneration As A Complication Of A Chronic TBAD</td>
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<td>Marcelo Ferreira, MD</td>
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<td>5:54</td>
<td>Panel Discussion</td>
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End of Program B
## PROGRAM C-1 SESSIONS 17-18

**MANAGEMENT OF PULMONARY EMBOLISM: THE ULTIMATE TEAM APPROACH**
(VEITH/TCT Co-Branded Sessions)

*Trianon Ballroom, 3rd Floor*

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

### SESSION 17  (Trianon Ballroom, 3rd Floor)
**MANAGEMENT OF PULMONARY EMBOLISM: THE ULTIMATE TEAM APPROACH – PART 1**
(VEITH/TCT Co-Branded Session)

**Moderator:** Michael R. Jaff, DO

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>7:00</td>
<td>Introduction To The Symposium</td>
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<td><em>Frank J. Veith, MD</em></td>
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<td>7:05</td>
<td>Welcome And Introduction</td>
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<td><em>Michael R. Jaff, DO</em></td>
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<td>7:15</td>
<td>The Basics Of Pulmonary Embolism—What Is The Role Of The History, Exam, Biomarkers</td>
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<td><em>Raghu Kolluri, MD</em></td>
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<td>7:25</td>
<td>Do We Need An Echo To Manage Acute Submassive PE</td>
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<td><em>David M. Dudzinski, MD</em></td>
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<td>7:35</td>
<td>Advanced Imaging For PE: What Is The Optimal Strategy For The Diagnosis Of Acute And Chronic PE</td>
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<td><em>Brian B. Ghoshhajra, MD, MBA</em></td>
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<td>7:45</td>
<td>Medical Treatment Of PE: When, Why, For How Long, And How Can I Remember</td>
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<td><em>Geno J. Merli, MD, MACP</em></td>
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<td>8:00</td>
<td>Testing For Cancer And Other Hypercoagulable States In PE</td>
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<td><em>Rachel Rosovsky, MD, MPH</em></td>
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<td>8:10</td>
<td>The First Opportunity—The Emergency Physician Algorithm For Acute PE Management</td>
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<td><em>D. Mark Courtney, MD</em></td>
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<td>8:20</td>
<td>Intravenous Thrombolytic Therapy For PE: No Need For Catheter-Based Intervention</td>
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<td><em>Jay Giri, MD, MPH</em></td>
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<td>8:35</td>
<td>Advancing The Science In PE Treatment—What Do We Need To Know, And How Will We Learn</td>
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<td><em>Akhilesh K. Sista, MD</em></td>
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<td>8:45</td>
<td>Ultrasound-Assisted Pharmacomechanical Thrombectomy—Does This Really Work</td>
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<td><em>Robert A. Lookstein, MD, MHCDL</em></td>
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<tr>
<td>8:55</td>
<td>What Device Is Best For Acute PE Intervention</td>
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<td><em>James F. Benenati, MD</em></td>
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9:05 – 9:15  **Step-By-Step Technical Tips For Pharmacomechanical Intervention For PE**  
*Gary M. Ansel, MD*

9:15 – 9:25  **Percutaneous Mechanical Thrombectomy Without Lytics: The Results Of The FLARE Study**  
*Thomas M. Tu, MD*

9:25 – 9:45  **Panel Discussion**  
*Moderator: Michael R. Jaff, DO*  
*Panelists: Gary M. Ansel, MD  
James F. Benenati, MD  
D. Mark Courtney, MD  
David M. Dudzinski, MD  
Brian B. Ghoshhajra, MD  
Jay Giri, MD, MPH  
Raghu Kolluri, MD  
Robert A. Lookstein, MD, MHCDL  
Geno J. Merli, MACP  
Rachel Rosovsky, MD, MPH  
Akilesh K. Sista, MD  
Thomas M. Tu, MD*

9:45 – 10:10  **Break - Visit Exhibits And Pavilions (2nd and 3rd Floors)**

**SESSION 18**  
**(Trianon Ballroom, 3rd Floor)**  
**MANAGEMENT OF PULMONARY EMBOLISM: THE ULTIMATE TEAM APPROACH – PART 2**  
*(VEITH/TCT Co-Branded Session)*  
*Moderator: Michael R. Jaff, DO*

10:10 – 10:20  **Technical Tips For Pharmacomechanical Intervention For PE: How Do I Do It?**  
*Gary M. Ansel, MD*

10:20 – 10:30  **Vortex Strategy For Massive PE**  
*Christopher J. Kwolek, MD*

10:30 – 10:40  **ECMO And Surgical Thromboembolectomy For Massive PE: When, How, And Why**  
*Mark G. Davies, MD*

10:40 – 10:55  **Putting It All Together: What Is The Modern Algorithm For Management Of Massive And Submassive PE**  
*Ido Weinberg, MD, MSc*

10:55 – 11:10  **Vena Cava Filters In PE Treatment—Do We Need To Do This, And If So, When**  
*Robert A. Lookstein, MD, MHCDL*

11:10 – 11:25  **Balloon Angioplasty For Chronic Thromboembolic Pulmonary Hypertension—Has This Become Mainstream**  
*Kenneth Rosenfield, MD*
11:25 – 11:35  **The Team Approach To PE Management: The National PERT Consortium**  
*Richard Channick, MD*

11:35 – 12:00  **Challenging Cases And “PERT” Decisions**  
*Moderator:  Michael R. Jaff, DO*

*Panelists:  Gary M. Ansel, MD  
Richard Channick, MD  
Mark G. Davies, MD  
Christopher J. Kwolek, MD  
Robert A. Lookstein, MD, MHCDL  
Kenneth Rosenfield, MD  
Ido Weinberg, MD, MSc*

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

*End of Program C-1*
PROGRAM C-2 (SESSIONS 19-20)
INTRODUCTION TO VASCULAR MALFORMATIONS
Trianon Ballroom, 3rd Floor

Course Leaders: Wayne F. Yakes, MD
Krassi Ivancev, MD, PhD
Robert L. Vogelzang, MD

SESSION 19 (Trianon Ballroom, 3rd Floor)
INTRODUCTION TO VASCULAR MALFORMATIONS

Moderators: Krassi Ivancev, MD, PhD
Fiona Rohlffs, MD

1:00 – 1:02 Welcome
Krassi Ivancev, MD, PhD

1:02 – 1:07 The International Society for the Study of Vascular Anomalies Classification System for Vascular Malformations
Fiona Rohlffs, MD

1:08 – 1:13 Pediatric Hemangioma And Propranolol Medical Management
Laurence M. Boon, MD, PhD

1:14 – 1:19 The Palliative Role Of Sirolimus In Vascular Malformation Management
Laurence M. Boon, MD, PhD

1:20 – 1:28 Ethanol Sclerotherapy Of Hepatic Venous Malformations
Krassi Ivancev, MD, PhD

1:29 – 1:37 Ethanol Sclerotherapy Of Complex Peripheral Venous And Lymphatic Malformations
Wayne F. Yakes, MD

SESSION 20 (Trianon Ballroom, 3rd Floor)
HEAD AND NECK VASCULAR MALFORMATION MANAGEMENT; HIGH-FLOW AVMs MANAGEMENT ISSUES

Moderators: Laurence M. Boon, MD, PhD
Robert L. Vogelzang, MD

1:38 – 1:46 Endovascular Ethanol Sclerotherapy Of Complex Head & Neck Venous And Lymphatic Malformations
Krassi Ivancev, MD, PhD

1:47 – 1:55 Combined Endovascular And Surgical Management Of Head & Neck Vascular Malformations
Laurence M. Boon, MD, PhD
1:56 – 2:04  Direct Laryngoscopy In The Diagnosis And Treatment Of Vascular Malformations  
Edward Hepworth, MD

2:05 – 2:13  Curative Endovascular Management Strategies Of Complex/Multiple Head & Neck AVMs

Moderators:  Tarek M.S. Radwan, FRCS  
Edward J. Hepworth, MD

Fional Rohlffs, MD

2:26 – 2:33  Where Is The AVM Nidus  
Robert L. Vogelzang, MD

2:34 – 2:41  Complex Capillary-Venous Malformations And Their Endovascular Management  
Tarek M.S. Radwan, FRCS

2:42 – 2:49  The Retrograde Vein Approach For Curative Endovascular Treatment Of AVMs  
Robert L. Vogelzang, MD

2:50 – 3:00  Endovascular Treatment Of Intraosseous Vascular Malformations  
Fiona Rohlffs, MD

End of Program C-2
### PROGRAM C-3 (SESSIONS 21-22)
HOT NEW TOPICS IN LOWER EXTREMITY OCCLUSIVE DISEASE TREATMENT
(VEITH/TCT Co-Branded Sessions)

*Trianon Ballroom, 3rd Floor*

**SESSION 21** (Trianon Ballroom, 3rd Floor)
HOT NEW SHORT SUMMARY TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE AND CLTI (ALL TALKS ARE 4 ¾ MINUTES)
(VEITH/TCT Co-Branded Session)

**Moderators:**
- Evan C. Lipsitz, MD, MBA
- Neal S. Cayne, MD

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<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>3:00 – 3:05</td>
<td>New Performance Goals For SFA Endovascular Treatments: How Good Are Current Devices: From The RAPID Multispecialty Registry</td>
<td>Jack L. Cronenwett, MD</td>
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<tr>
<td>3:05 – 3:10</td>
<td>12 Commandments For Successful BTK Endovascular Interventions In Patients With Chronic Limb Threatening Ischemia (CLTI)</td>
<td>Ali Amin, MD, RVT</td>
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<td>3:10 – 3:15</td>
<td>DEBATE: With Extensive Foot Gangrene From CLTI, Multivessel Endo Intervention Is The Best Treatment</td>
<td>Vikram S. Kashyap, MD, Norman Kumins, MD, Mehdi H. Shishehbor, MD</td>
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<tr>
<td>3:15 – 3:20</td>
<td>DEBATE: Not So: With Extensive Foot Gangrene From CLTI A Vein Bypass To A Single Good Outflow Artery Is The Best Treatment</td>
<td>Richard F. Neville, MD</td>
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<td>3:25 – 3:30</td>
<td>Panel Discussion</td>
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<td>3:30 – 3:35</td>
<td>Where Do We Stand With Below The Knee (BTK) Drug Coated Balloons (DCBs): What Is Their Future And What Are Open Questions</td>
<td>Marc Bosiers, MD</td>
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<td>3:35 – 3:40</td>
<td>New Devices To Facilitate Lower Extremity Endo Treatments And Crossing Of Chronic Total Occlusions (CTOs): A 4 Fr Catheter With A Retractable Needle – The Go Back Crossing Catheter (Upstream Peripheral) And The Bullfrog Device For Injecting Local Anesthesia In The Artery Wall: How Do They Work</td>
<td>Andrej Schmidt, MD</td>
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</tbody>
</table>
3:40 – 3:45 Spot Stenting Using Multiple Short Stents For Long SFA/Pop Lesions (Vascuflex Multiloc Device From B. Braun Medical): How Does It Work And Results
Thomas Zeller, MD

Dierk Scheinert, MD

3:50 – 3:55 The Challenge Of Treating Extensively Calcified Lesions In CLTI Patients And How To Overcome The Problem
Brian G. DeRubertis, MD

3:55 – 4:00 Panel Discussion

4:00 – 4:05 DEBATE: An Endo First Approach Is Best For All CLTI Patients And Does Not Burn Bridges If An Open Bypass Is Required Later
D. Christopher Metzger, MD

4:05 – 4:10 DEBATE: Not True: Patient First Is Better: Endo First Does Not Work For All CLTI Patients: Target Arteries For Later Open Bypass Can Be Damaged (Bridges Burned)
Philip P. Goodney, MD, MS

4:10 – 4:15 Long-Term (5 Years) Effectiveness Of Zilver PTX Drug Eluting Stents (DESs) For Fempop In Stent Restenosis (ISR): From The Japanese Post Market Surveillance Study
Kimihiro Komori, MD, PhD

4:15 – 4:20 The “Balloon Wrap” Issue As A Cause Of Dissections With Balloon Angioplasty (PTA): What Is It And Which Balloons Are Least Affected By It
Jos C. van den Berg, MD, PhD

4:20 – 4:25 Update On The Value Of Toe Pressures, Statins And Clopidogrel In CLTI: Why They Matter
Maarit Venermo, MD, PhD

4:25 – 4:30 Panel Discussion

SESSION 22 (Trianon Ballroom, 3rd Floor)
MORE HOT NEW SHORT SUMMARY TOPICS RELATED TO LOWER EXTREMITY OCCLUSIVE DISEASE AND CLTI (ALL TALKS ARE 4 ¾ MINUTES)
(VEITH/TCT Co-Branded Session)

Moderators: Craig M. Walker, MD
Peter A. Schneider, MD

4:30 – 4:35 Character And Localization Of Arterial Calcification Pathologically: What Are The Implications For Endo Treatments
Renu Virmani, MD

4:35 – 4:40 Significance Of Calcification In Lower Extremity Arteries Clinically: How To Evaluate It: What Does It Mean For Endo Treatments
Yann Gouëffic, MD, PhD
4:40 – 4:45 DESs Versus DCBs: Which Is Best When: Which Is More Cost Effective
Mohammad H. Eslami, MD, MPH

4:45 – 4:50 DEBATE: When Common Femoral Artery (CFA) Lesions Need Treatment, Open Endarterectomy Is The Procedure Of Choice
Matthew T. Menard, MD

4:50 – 4:55 DEBATE: Not So: CFA Lesions Are Best Treated By Angioplasty And Stenting: 2-Year Results With The Supera Stent (Vasculomimetic Implant [VMI] From Abbott)
Yann Gouëffic, MD, PhD
Koen R. Deloose, MD

4:55 – 5:00 Stenting Of CFA Lesions Compares Favorably To Endarterectomy In A RCT (TECCO Trial) Even When The Distal Bifurcation Is Involved: The Culotte Technique For Stenting Both CFA Branches
Yann Gouëffic, MD, PhD

5:00 – 5:05 2-Year Results Of The ZILVER PASS RCT Comparing Zilver PTX DES Treatment To Open Prosthetic Bypasses For Long Fempop Lesions: Patency Is Equal But Complications And Length Of Stay Less With Zilver PTX
Marc Bosiers, MD
Koen R. Deloose, MD

5:05 – 5:10 Distal Bypasses Can Save Limbs With Extensive Gangrene And Calcified Arteries In Dialysis Patients: Key Technical Tips
Nobuyoshi Azuma, MD

5:10 – 5:15 Panel Discussion

5:15 – 5:20 5-Year Follow-Up Outcomes And Lessons Learned From The In.Pact Deep DCB RCT For BTK Lesions: Managing CLTI Patients Is Challenging
Thomas Zeller, MD

5:20 – 5:25 Role Of New Stem Cell Therapies In Treating Lower Extremity Ischemia
Marianne Brodmann, MD

5:25 – 5:30 How To Use CO₂ As A Contrast Agent To Visualize Patent Foot Arteries In CLTI Patients
Jim Caridi, MD

5:30 – 5:35 Technical Tips For Using CO₂ As A Contrast Agent To Image Patent Tibial And Foot Arteries Better And Safely
Palma M. Shaw, MD

5:35 – 5:40 Value Of Adequate Vessel Prep And Duplex Imaging In Optimizing Results Of Balloon And DCB Angioplasty In Crural (Tibial) Arteries – Especially With Long Lesions
Francesco Liistro, MD

5:40 – 5:45 Nanotechnology: A New Frontier In The Imaging And Treatment Of CLTI
Sean C. Morris, MD

5:45 – 5:50 Infrainguinal Bypasses After Failed Endovascular Treatments Have Lower Patency And Higher Amputation Rates Than Primary Bypasses
Alik Farber, MD
5:50 – 5:55  Extensive Heel Gangrene With CLTI Is Not A Contraindication To Limb Salvage: How To Save The Limb In This Setting  
Alun H. Davies, MA, DM, DSc

5:55 – 6:00  Panel Discussion

End of Program C-3
WEDNESDAY, NOVEMBER 20, 2019

6:00 A.M. General Registration - Rhinelander Gallery, 2nd Floor
6:00 A.M. Faculty Registration - Morgan Suite, 2nd Floor
6:15 A.M. Continental Breakfast - Rhinelander Gallery, 2nd Floor

CONCURRENT WEDNESDAY PROGRAMS

Program D  (Sessions 23-30)
Progress In Lower Extremity Occlusive Disease And Its Treatments
(VEITH/TCT Co-Branded Sessions)
6:40 A.M. – 6:15 P.M.  Grand Ballroom East, 3rd Floor

Program E  (Sessions 31-38)
Advances In Medical Treatments, New Drugs, Anti-Atherogenic And Anti-Hypertensive Treatments; Management Of Endoleaks And Complications; Recorded Live Cases; A Tribute And Assorted Issues Of Interest; Outpatient Vascular Treatment And Ethical Issues; Topics Related To The FDA, SVS, VQI, Costs And Reimbursement And The Value Of Vascular Surgeons
6:40 A.M. – 6:02 P.M.  Grand Ballroom West, 3rd Floor

Program F:  (Sessions 39-46)
More New Developments In Thoracic Aortic Disease, Aortic Dissections, TAAAs, Juxta- And Pararenal AAAs, Parallel Grafts, Fenestrated And Branched EVAR (F/B/EVAR), Multilayer Bare Stents, Infrarenal AAAs And Standard EVAR And Hot New Aortic And Carotid Topics
6:40 A.M. – 6:00 P.M.  Trianon Ballroom, 3rd Floor
PROGRAM D  (SESSIONS 23-30)
PROGRESS IN LOWER EXTREMITY OCCLUSIVE DISEASE AND ITS TREATMENT

Grand Ballroom East, 3rd Floor

SESSION 23  (Grand Ballroom East, 3rd Floor)
GENERALITIES IN THE ENDOVASCULAR AND OPEN TREATMENT OF LOWER EXTREMITY OCCLUSIVE LESIONS
(VEITH/TCT Co-Branded Session)

Moderators:  
Enrico Ascher, MD  
Craig M. Walker, MD  
Frank J. Veith, MD

Patrick J. Geraghty, MD

6:46 – 6:51  Optimal Techniques For Vessel Preparation Before Deployment Of A Drug Coated Or Uncoated Balloon Or Stent
Erwin Blessing, MD

6:52 – 6:57  Value Of IVUS In Lower Extremity Endovascular Treatments: It Is A Management-Altering, Must Have Game Changer
Fabrizio Fanelli, MD

Craig M. Walker, MD

7:04 – 7:09  Endovascular Treatment Is Appropriate For CLTI Patients With Heel Gangrene Involving The Os Calcis And Achilles Tendon: Limb Salvage With Function Can Be Achieved And How
Iris Baumgartner, MD

Marc Bosiers, MD  
Koen R. Deloose, MD

SOME COMMENTS ON ENDOVASCULAR TREATMENTS OF ARTERIAL LESIONS IN THE FOOT

Marco G. Manzi, MD
PROGRAM SCHEDULE

7:22 – 7:27  Should We Treat Foot Vessel Lesions Or Is Such Treatment Fanciful Or Harmful: How Should We Monitor Such Treatment: What Is The End Point And When Is Open Surgery Better
Marianne Brodmann, MD

7:28 – 7:33  Small Artery Disease (SAD) And Medial Artery Calcification (MAC) In The Foot: What Is Its Role In Severe CLTI And How Is It Best Treated
Roberto Ferraresi, MD

7:34 – 7:39  Open Bypass To Foot Arteries Can Save Limbs If Foot Arteries And Arches Have Not Been Instrumented: A Note Of Caution
Francesco Spinelli, MD

7:40 – 7:45  Role Of Distal Bypass In CLTI With Severe Gangrene: What % Of Such Patients Will Need One At Some Time In Their Course: When Are Pedal Bypasses Better Than Pedal Loop Procedures
Richard F. Neville, MD

7:46 – 7:52  Panel Discussion

SESSION 24  (Grand Ballroom East, 3rd Floor)
PROGRESS IN STENT BASED TREATMENTS, ATERECTOMY AND LITHOPLASTY (LITHOTRIPSY) FOR LOWER EXTREMITY OCCLUSIVE LESIONS (VEITH/TCT Co-Branded Session)

Moderators:  Patrick J. Geraghty, MD
Kenneth Rosenfield, MD

7:52 – 7:57  DCBs Versus DESs: Advantages And Disadvantages Of Each: Why DCBs Should Be First Line Therapy For Most Lesions In Most Patients
Thomas Zeller, MD

7:58 – 8:03  For Fempop Lesions, Zilver PTX DESs Are Durable Effective Treatment: 5-Year Results Show It Even In Adverse Circumstances: New Findings From The Zilver PTX RCT
Michael D. Dake, MD

8:04 – 8:09  Which Patients With Fempop Occlusive Lesions Are Not Candidates For DCB Treatment: How Should They Be Treated
Fabrizio Fanelli, MD

8:10 – 8:15  New Findings From The IMPERIAL RCT Comparing Zilver PTX DESs With Eluvia DESs For Fempop Lesions: Do Differences In Technology And Results In High Risk Subgroups Suggest That Eluvia Is A Better Stent
William A. Gray, MD
Stefan Müller-Hülsbeck, MD

8:16 – 8:21  Not Sure That IMPERIAL RCT To Date Shows Differences That Are Important: Zilver PTX Is Still A Good DES With Favorable Longer-Term Results And Both Stents Produced Equal Improvement In Symptoms
Gary M. Ansel, MD
8:22 – 8:27 Another View On When To Use Which Stent For Fempop Lesions: Supera, Zilver PTX, Eluvia Or Others
Iris Baumgartner, MD

8:28 – 8:33 Eluvia (Boston Scientific) Is The Only Polymer Based Paclitaxel DES Technology, And It Is Being Studied For BTK Lesions In The SAVAL RCT
Patrick J. Geraghty, MD
Jihad A. Mustapha, MD

8:34 – 8:39 Bioresorbable Everolimus DESs For Treating BTK Lesions: The Results With The Absorb Stent (Abbott) Were Favorable For 5 Years: What Does The Future Hold For Such Stents
Steven Kum, MD
Ramon L. Varcoe, MBBS, MS, PhD

8:40 – 8:45 Current Status And Improvements In Atherectomy Devices: Which One Or Ones Are Best And Why: For Stand-Alone Treatment Or For Vessel Preparation For Other Treatments
Lawrence A. Garcia, MD

8:46 – 8:51 Which Atherectomy Device Is Best And Why; A European Perspective And Shockwave Based Technology With A Jack-Hammer Effect To Facilitate CTO Wire Crossing (From Soundbite Medical Solutions); How It Works
Marianne Brodmann, MD

8:52 – 8:57 Update On Intravascular Lithotripsy (Lithoplasty) To Treat Calcified Occlusive Lesions: When Is It Worthwhile And When Not: From The DISRUPT PAD Trials And The REAL World Registry
Andrew Holden, MBChB

8:58 – 9:10 Panel Discussion And Break
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 25 (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN LOWER EXTREMITY RELATED TOPICS: DOWNSIDE OF DCBs: THE PACLITAXEL COATED DEVICES INCREASE MORTALITY ISSUE (VEITH/TCT Co-Branded Session)

Moderators: Kenneth Ouriel, MD, MBA
Gary M. Ansel, MD

9:10 – 9:15 Introductory Remarks And Overview
Gary M. Ansel, MD

9:16 – 9:21 The Downsides To DCBs: Cost; Distal Embolization; Increased Mortality: Are They Substantive
Andrew Holden, MBChB
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<tr>
<th>Time</th>
<th>Session Title</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>9:22 – 9:27</td>
<td>Update On The Meta-Analysis Showing An Increased Mortality In Patients Treated With Drug (Paclitaxel) Coated Lower Extremity Devices (DCBs And DESs): What Is The Current Interpretation</td>
<td>Konstantinos Katsanos, MSc, MD, PhD</td>
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<td>9:34 – 9:39</td>
<td>Is The Increased Mortality Risk Of Paclitaxel Coated Lower Extremity Devices Observed In The Meta-Analysis Real And Meaningful: Update From The VIVA Leaders Analysis: Currently How Should It Influence Use Of These Devices: Where Is This Issue Going</td>
<td>Peter A. Schneider, MD</td>
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<td>9:40 – 9:45</td>
<td>Current Status Of The Discussion On Paclitaxel Coated Lower Extremity Devices And Their Impact On Patient Mortality: Another View And Where Does The FDA Stand And Why</td>
<td>Michael R. Jaff, DO</td>
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<td>9:46 – 9:51</td>
<td>What Is The Society for Vascular Surgery (SVS) Doing About This Issue And Where Does It Stand On It</td>
<td>Kim J. Hodgson, MD</td>
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<td>9:52 – 9:57</td>
<td>What Is The Response To And Position Of An Industry Partner (Medtronic) Which Is Vested In Drug Eluting Technology</td>
<td>Jason R. Weidman, MS, MBA</td>
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<td>9:58 – 10:03</td>
<td>Update On The Late Results (&gt;5 Years) Of The Zilver PTX DES Trials That Are Relevant To This Issue: Including The Corrected Late Patient Mortality Data</td>
<td>Michael D. Dake, MD</td>
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<td>10:04 – 10:09</td>
<td>Long-Term Safety And Effectiveness Of Paclitaxel Coated Devices Versus Non-Coated Devices For Fempop Occlusive Lesions: From Japanese RCTs And Registries: How Do These Data Bear On The Paclitaxel-Mortality Issue</td>
<td>Osamu Iida, MD, Hiroyoshi Yokoi, MD</td>
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<td>10:10 – 10:15</td>
<td>6-Year Comparison Of Mortality And Its Causes In 1500 Patients Treated With Paclitaxel Coated DCBs Or DESs Versus Bare Metal Stents (BMSs) Or Plain Old Balloon Angioplasty (POBA)</td>
<td>Francesco Liistro, MD</td>
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<td>10:16 – 10:19</td>
<td>Large Population Based Multicenter German Study Indicates Paclitaxel Coated Devices May Be Associated With Lower Late Mortality Than Uncoated Devices In Some Patient Subgroups</td>
<td>Christain A. Behrendt, MD</td>
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<td>10:19 – 10:22</td>
<td>Panel Discussion</td>
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SESSION 26  (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN DRUG COATED BALLOONS (DCBs) AND OTHER DEVICES FOR TREATING LOWER EXTREMITY OCCLUSIVE LESIONS; RANDOMIZED CONTROLLED TRIALS (RCTs) AND BTK TREATMENTS (5- AND 4-MINUTE SHORT SUMMARY [SS] TALKS) (VEITH/TCT Co-Branded Session)

Moderators:  
Sean P. Lyden, MD  
Michael D. Dake, MD

Gunnar Tepe, MD

John R. Laird, MD

10:37 – 10:42  The REAL PTX RCT Compares DESs Versus DCBs For Treating Fempop Lesions, Some Long And Complex: At 2 Years, Results Are Better With DESs  
Andrej Schmidt, MD  
Yvonne Bausback, MD

10:43 – 10:48  5-Year Results From The IN.PACT SFA RCTs Shows Maintained Benefit Of In.Pact DCB Versus POBA For Treatment Of SFA Lesions With No Increase In Complications Or Mortality  
Peter A. Schneider, MD  
John R. Laird, MD

10:49 – 10:54  The Real World GLOBAL REGISTRY Confirms The Value Of The In.Pact DCB For Treating More Complex SFA Lesions Including In Stent Restenosis (ISR)  
Marianne Brodmann, MD  
Gary M. Ansel, MD  
Jos C. van den Berg, MD, PhD

10:55 – 11:00  2-Year Results Of The COMPARE PILOT RCT Comparing The Ranger DCB (Boston Scientific) With The In.Pact DCB (Medtronic) For Treating Complex Fempop Lesions And 12-Month Results Of Ranger II Trial  
Dierk Scheinert, MD  
Thomas Zeller, MD  
Marianne Brodmann, MD

11:01 – 11:06  Safety And Effectiveness Of The Stellarex DCB (Philips) With Low Dose Paclitaxel Up To 3 Years In The Treatment Of Fempop Occlusive Lesions  
Fabrizio Fanelli, MD  
Sean P. Lyden, MD

11:07 – 11:12  Panel Discussion
BELOW THE KNEE DCBs

11:13 – 11:18  The ACO ART II RCT Shows Favorable Results With The Orchid DCB To Treat BTK Lesions: With The Right DCB Technology The Future For BTK DCBs Is Brighter Than The Past
Francesco Liistro, MD
Wei Guo, MD

11:19 – 11:24  Results Of A RCT Show The Lutonix DCB (Becton Dickinson/Bard) To Be Better Than POBA For BTK Occlusive Lesions
Patrick J. Geraghty, MD
Jihad A. Mustapha, MD
Marianne Brodmann, MD

11:25 – 11:30  Value Of The Stellarex DCB (Philips) For Treating BTK Occlusive Lesions: The ILLUMINATE BTK Trial
Craig M. Walker, MD
Mahmood Razavi, MD

Kenneth Rosenfield, MD

11:37 – 11:42  Economic Factors In The Treatment Of CLTI: Are Drug Coated Balloons (DCBs) DESs Stents Cost Effective: How Can The Costs Of Devices Be Met
Gary M. Ansel, MD

11:43 – 11:48  What Is The Importance Of Dual Antiplatelet Agents To The Success Of DCBs And What Is The Current Status Of DCBs With Drugs Other Than Paclitaxel
Gunnar Tepe, MD

SHORT SUMMARY 4-MINUTE TALKS

11:49 – 11:53  [SS] Value Of A Scoring Balloon (Ultrascore From Becton Dickinson/Bard) In Vessel Preparation Before DCB Use In Fempop Lesions: How It Works And Experience To Date
Dierk Scheinert, MD

Lawrence A. Garcia, MD

11:57 – 12:01  [SS] DEBATE: Not So: Drug Elution Is Essential For SFA Endovascular Treatments To Be Effective And Durable
Thomas Zeller, MD
Andréj Schmidt, MD

12:01 – 12:06  Panel Discussion
12:06 – 1:00  Lunch Break – 2nd Floor Promenade
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 27  (Grand Ballroom East, 3rd Floor)
EXOTIC AND EXTREME NEW TREATMENTS FOR VERY DISTAL LOWER EXTREMITY
OCCLUSIVE DISEASE CAUSING SEVERE CHRONIC LIMB THREATENING ISCHEMIA (CLTI):
HOW TO SAVE THE “NO OPTION FOR TREATMENT” LIMB AND THE “DESERT FOOT” WITH
NO PATENT TARGET ARTERIES
(VEITH/TCT Co-Branded Session)
Moderators:  Daniel G. Clair, MD
Giancarlo Biamino, MD, PhD
Frank J. Veith, MD

1:00 – 1:05  How To Gain Retrograde Arterial Access Via Leg Arteries: The Tibioperoneal Trunk,
Peroneal, Posterior Tibial And Anterior Tibial: Equipment And Technical Tips
Miguel F. Montero-Baker, MD

1:06 – 1:11  ‘Fancy’ Techniques For Getting A Guidewire Across Difficult Chronic Total Occlusions
– Especially Those In BTK Arteries In CLTI Patients
Osamu Iida, MD

1:12 – 1:17  No Option CLTI: The “Desert Foot”: An Increasing Epidemic: An Overview Of
Solutions For It And How To Salvage Some Of These Limbs
Marco G. Manzi, MD

1:18 – 1:23  Extreme Distal Lower Limb Revascularization: Durable Solution Or Technical Show
Off: Distal Access, Plantar Loop Procedures And Subintimal Angioplasty In Foot
Arteries: What Is Their Impact On Mid And Long-Term Results
Michele Rossi, MD

1:24 – 1:29  Treatment Possibilities For “No Option” Patients: Including The Pros And Cons Of
Venous Arterialization
Erwin Blessing, MD

UPDATE ON VENOUS ARTERIALIZATION

1:30 – 1:35  Surgical Arterialization Of Foot Veins For No Option CLTI: How To Do It And Long-
Term Outcomes: From A Pioneer
Pramook Mutirangura, FRCS

1:36 – 1:41  Arterialization Of Foot Veins Can Save Limbs With No Option CLTI: How And Why
Does It Work And Why Does It Fail: What Is Hybrid Arterialization Of Foot Veins:
How Does It Compare To The LimFlow Totally Endo Procedure
Roberto Ferraresi, MD
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<th>Time</th>
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| 1:42   | Update On Percutaneous Deep Vein Arterialization (pDVA) With The LimFlow Device For No Option CLTI: Techniques And Results | Steven Kum, MD  
Daniel G. Clair, MD  
Jihad A. Mustapha, MD |
| 1:48   | Panel Discussion                                                      |                                                                           |
| 1:53   | Tibial Bypasses With PTFE Grafts Are Worthwhile (When Autologous Vein Is Lacking) In Hopelessly Threatened Limbs And Can Save A Functional Limb For Many Years: They Deserve A Better Reputation Than They Have | Gregg S. Landis, MD  
Richard F. Neville, MD  
Neal S. Cayne, MD  
Evan C. Lipsitz, MD, MBA  
Nicholas J. Gargiulo III, MD, RPVI, RVT, RDMS  
Frank J. Veith, MD |
| 1:59   | Ultradistal Bypasses To Below The Ankle Arteries Can Save Limbs With CLTI And Gangrene: How Distal In The Foot Can One Go: No Option CLTI Is Usually A Mismomer | Hisham Rashid, FRCS |
| 2:05   | Extended Open Techniques To Save Threatened Feet When All Endovascular Attempts Have Failed | Enrico Ascher, MD |
| 2:11   | Below The Ankle Angioplasty And Stenting For CLTI: Technical Tips, Indications And Challenges: Poor Patency Rates May Not Hamper Limb Salvage | Konstantinos Katsanos, MSc, MD, PhD |
| 2:17   | Panel Discussion                                                      |                                                                           |
SESSION 28  (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN LOWER EXTREMITY IN STENT RESTENOSIS (ISR); SELF-EXPANDING STENT-GRAFTS (VIABAHN); HEPARIN BONDING; ARTERIAL CALCIFICATION; UNUSUAL LOWER EXTREMITY STENTS AND THE IMPORTANCE OF HEPARIN BONDING TO PTFE GRAFTS AND DCB INFLATION PRESSURES (SEE ALSO SESSION 59) (VEITH/TCT Co-Branded Session)

**Moderators:** Richard F. Neville, MD
Neal S. Cayne, MD

**IN STENT RESTENOSIS (ISR)**

2:22 – 2:27 Update On Best Current Treatment For In Stent Restenosis (ISR): A European Perspective  
Jos C. van den Berg, MD, PhD

2:28 – 2:33 Update On The Best Current Treatment For ISR Of Varying Grades: A US Perspective  
Brian G. DeRubertis, MD

2:34 – 2:39 A Different View Of Optimal Treatment For Varying Grades Of ISR: When Is A Stent-Graft The Best Treatment  
Marc Bosiers, MD

**NEW DEVELOPMENTS IN VALUE OF SELF-EXPANDING STENT GRAFTS (VIABAHN)**

2:40 – 2:45 Update On Value And Indications Of The Viabahn Self-Expanding Stent-Graft For Fempop Occlusive Disease: Evolution Of The Device: Technical Tips And 5-Year Results From Japan  
Osamu Iida, MD

2:46 – 2:51 Value Of Viabahn Stent-Grafts To Treat Failing And Failed Fempop Grafts: Technical Tips And Results  
Naoki Fujimura, MD, PhD

Brian G. DeRubertis, MD

2:58 – 3:03 Panel Discussion
PTFE-HEPARIN BONDING

3:03 – 3:08  Comparison Of Heparin Bonded PTFE Grafts To Those Without Heparin Bonding  
*Yann Gouëffic, MD, PhD*

THE DETOUR PROCEDURE

3:09 – 3:14  Percutaneous (PQ) Transvenous Endovascular Fempop Arterial Bypass For Treating Long (30-40 cm) SFA Occlusions: How Does It Work And 2-Year Results: From The DETOUR Trials  
*Sean P. Lyden, MD*

3:15 – 3:20  Will The Detour Procedure For PQ Endovenous Fempop Arterial Bypass Eliminate The Need For Open Surgery: When Will It And When Won’t It  
*Dainis K. Krievins, MD*

ARTERIAL CALCIFICATION

3:21 – 3:26  Types Of Arterial Calcification And How They Impede Balloon Angioplasty Of Occluded Tibial Arteries: How Can It Be Overcome: The DEKIAP (Direct Extravascular Kalcium Interruption Arterial Procedure): Technique And Results  
*Steven Kum, MD*

UNUSUAL LOWER EXTREMITY STENTS

3:27 – 3:32  Initial Experience With A 3 French Compatible Microstent For Antegrade Or Retrograde Treatment Of Tibial Artery Lesions (From Micro Medical Solutions)  
*Robert E. Beasley, MD*

3:33 – 3:38  Advantages And Durability Of The Supera Vasculomimetic Stent (Abbott Vascular) For Treating Lesions In Tortuous Arteries Other Than The SFA  
*Rajiv Parakh, MBBS, MS*

3:39 – 3:44  2-Year Results With The 3D Helical Stent ThatInduces Swirling Flow: The MIMICS-2 Trial Shows This Stent Works Well For Complex SFA Lesions (From Veryan Medical)  
*Timothy M. Sullivan, MD  
Peter Gaines, MD  
Michael K.W. Lichtenberg, MD*

3:45 – 3:50  Panel Discussion

3:50 – 4:00  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 29  (Grand Ballroom East, 3rd Floor)
UPDATES ON LOWER EXTREMITY CLTI GUIDELINES, RCTs AND FOOT PERFUSION INDICATORS
(VEITH/TCT Co-Branded Session)

Moderators:  
Joseph L. Mills, MD  
Thomas Zeller, MD

4:00 – 4:10  
What Is New And Good About The Recent Multispecialty Global Vascular Guidelines For CLTI: What Are Their Limitations And Why Is TASC Outdated  
Michael S. Conte, MD  
Andrew Bradbury, MD  
Philippe Kolh, MD

4:11 – 4:16  
Update On The BASIL 2 And 3 RCTs: 2 Compares Crural Vein Bypasses With Endovascular Treatments; 3 Compares DCBs And DESs With POBA And Uncoated Stents  
Andrew W. Bradbury, MD

4:17 – 4:22  
DEBATE: Progress In The BEST-CLI RCT Comparing Open And Endo Treatments: This Trial Will Provide Important New Information On The Best Treatment For CLTI  
Alik Farber, MD  
Matthew T. Menard, MD  
Kenneth Rosenfield, MD

4:23 – 4:28  
DEBATE: Sorry, BEST-CLI Does Not Reflect Real World Practice And Will Have Little Value In Guiding Best Treatment For CLTI Which Must Be Individualized  
George L. Adams, MD  
Miguel F. Montero-Baker, MD

4:29 – 4:34  
The SPINACH Registry Shows That Open Bypass Is Better In CLTI With Extensive Gangrene: On The Other Hand, Endo First Is Better In High Risk Patients  
Nobuyoshi Azuma, MD

4:35 – 4:40  
How To Evaluate Below The Ankle Arteries And Occlusions: CTA And Standard Arteriography Is Inadequate And Some Patent Arteries Will Not Be Seen; Need Distal Interventional Arteriography: How To Do It  
Roberto Ferraresi, MD

4:41 – 4:46  
Surgery Guided Revascularization And Flow Guided Surgery: What Do They Mean And Why They Are Important To Saving Limbs: Optimal Timing And Type Of Surgery For Gangrene In CLTI: How To Get A Functional Limb  
Giacomo Clerici, MD  
Roberto Ferraresi, MD

4:47 – 4:52  
How To Optimize Endovascular Treatment To Achieve Adequate Foot Perfusion To Heal Foot Wounds In CLTI: How To Measure It; What Are The Variables  
Vikram S. Kashyap, MD  
Mehdi H. Shishehbor, DO, MPH, PhD
**PROGRAM SCHEDULE**

*Maarit Venermo, MD, PhD*

4:59 – 5:04  Pedal Temperature Measurements After Revascularization Will Indicate Healing Potential And Optimal Time For Foot Surgery: How To Standardize These Measurements And Make Them Valid  
*Wayne J. Caputo, DPM*

5:05 – 5:11  Panel Discussion

**SESSION 30  (Grand Ballroom East, 3rd Floor)**  
**NEW DEVELOPMENTS IN THE TREATMENT OF LOWER EXTREMITY INTERMITTENT CLAUDICATION (IC) AND ACUTE LIMB ISCHEMIA (ALI)**  
(VEITH/TCT Co-Branded Session)

**Moderators:**  
*John R. Laird, MD*  
*Michael S. Conte, MD*

**INTERMITTENT CLAUDICATION (IC)**

5:11 – 5:16  In Patients With IC From SFA Lesions, Stenting Plus Best Medical Treatment (BMT) Improved Quality Of Life And ABI More Than BMT Alone For 2 Years In An RCT  
*Hans I.V. Lindgren, MD*

5:17 – 5:22  Why Most Patients With IC Due To SFA Lesions Should Not Undergo Stenting  
*Neal S. Cayne, MD*

5:23 – 5:28  Endovascular Treatments For IC Can Lead To CLTI And Burn Bridges: Causes And Remedies  
*Niten Singh, MD*

**ACUTE LIMB ISCHEMIA (ALI)**

5:29 – 5:34  Update On Newer Endovascular Thrombosuction Devices For ALI: When Is Open Treatment Required  
*Athanasios Katsargyris, MD*

5:35 – 5:40  Thrombolysis For ALI: Is Its Use Increasing Or Decreasing: Tips In Its Use To Make It Safer By Coupling It With Mechanical Thrombectomy Devices  
*Marcus Thieme, MD*
5:41 – 5:46 Mechanical Endo thrombectomy Is Eliminating The Need For Lytic Agents And Making The Treatment Of ALI Safer
Patrick E. Muck, MD

5:47 – 5:52 DEBATE: All Patients With ALI Can And Should Be Treated Endovascularly
Ali Amin, MD, RVT

Joseph L. Mills, MD

5:59 – 6:04 New Findings In The Treatment Of ALI: From The Recently Updated European Guidelines: Paradigms Are Changing
Martin Björck, MD, PhD

6:05 – 6:10 Aspiration Thrombectomy For ALI Due To Thrombosed Popliteal Aneurysms: A Better Way To Treat: Technical Tips And Results
Frank R. Arko, MD

6:11 – 6:20 Panel Discussion

End of Program D
PROGRAM E (SESSIONS 31-38)
ADVANCES IN MEDICAL TREATMENTS, NEW DRUGS, ANTI-ATHEROGENIC AND ANTI-HYPERTENSIVE TREATMENTS; MANAGEMENT OF ENDOLEAKS AND COMPLICATIONS; RECORDED LIVE CASES; A TRIBUTE AND ASSORTED ISSUES OF INTEREST; OUTPATIENT VASCULAR TREATMENT AND ETHICAL ISSUES; TOPICS RELATED TO THE FDA, SVS, VQI, COSTS AND REIMBURSEMENT AND THE VALUE OF VASCULAR SURGEONS

Grand Ballroom West, 3rd Floor

SESSION 31 (Grand Ballroom West, 3rd Floor)
ADVANCES IN MEDICAL TREATMENTS, ANTI-ATHEROGENIC DRUGS AND CARDIAC AND CORONARY ARTERY RISK EVALUATION IN PATIENTS WITH VASCULAR DISEASE (VEITH/TCT Co-Branded Session)

Moderators: Ido Weinberg, MD, MSc
              Caron B. Rockman, MD

6:40 – 6:45 What Is Currently The Best Way To Assess Cardiac Risk In Open Vascular Surgery Patients; In Endovascular Treatment Patients
Peter Henke, MD

Gregg W. Stone, MD

6:52 – 6:57 Value Of Non-Invasive FFRCT In Decreasing Cardiac Complications In Patients Undergoing Lower Extremity Revascularization (Bypasses) And CEAs: It Allows High Risk Asymptomatic Patients To Be Detected Proactively And Treat Better
Christopher K. Zarins, MD
              Dainis K. Krievins, MD

6:58 – 7:03 Improvements In And What Is Coming In Medical Treatment To Prevent Death And Complications From Arteriosclerosis: Update On PCSK-9 Inhibitors Including Inclisiran, Ezetemibe, Anti-Inflammatory Drugs And Treating High Lp(a) Levels
Michael R. Jaff, DO

7:04 – 7:09 DEBATE: Adherence To Statin Therapy With Attention To Increase Dosage Of High Potency Statins (Atorvastatin And Ruvostatin) Boosts Survival And Is Valuable In The Elderly (>75): Adverse Effects Are Rare
Richard Bulbulia, MA, MD

7:10 – 7:15 DEBATE: Statins Are Not A Miracle Drug And Have Been Overvalued: They Have Unrecognized Harmful Effects As Does Excessive Lowering Of LDL Cholesterol (LDL-C): Have We Been Misled And By Whom
Sherif A.H. Sultan, MD, PhD
Jeffrey S. Berger, MD, MS

7:22 – 7:27  Value Of Lipid Lowering For Treating Plaques In Coronary And Other Arteries: Best Drug Combination And Benefit Of PCSK-9 Inhibitors: How Low Should LDL-C Be Driven: Can Plaques Be Made Smaller And Less Dangerous  
Ron Waksman, MD

7:28 – 7:33  Current Value Of Antithrombotic And Antiplatelet Therapy In Vascular Patients: What Drugs Should They Be On – When And Why: The COMPASS RCT Shows That Low Dose Rivaroxaban And Aspirin Decreases Death, Stroke And MI In Vascular Patients: What About Aspirin Alone  
Jeffrey S. Berger, MD, MS

7:34 – 7:39  How To Detect Vulnerable Plaque (Lipid Rich Plaque [LRP]) And Mortality Risk With New Infrared Spectroscopy (NIRS); How Does It Work: What Can Be Done About LRPs  
Ron Waksman, MD

7:40 – 7:47  Panel Discussion

SESSION 32  (Grand Ballroom West, 3rd Floor)
MORE ADVANCES IN MEDICAL TREATMENTS; MORE ABOUT NEW DRUGS; STEM CELL TREATMENTS; CATHETER BASED TREATMENTS FOR RESISTANT HYPERTENSION (VEITH/TCT Co-Branded Session)

Moderators: Michael R. Jaff, DO  
Kim J. Hodgson, MD

MORE ABOUT NEW DRUG TREATMENTS

7:47 – 7:52  New RCT Evidence Shows That An Omega 3 Fatty Acid Formula, Vascepa, Reduces By 25% Major Adverse Cardiac Events In Patients With High Triglycerides (The REDUCE-IT Trial): Bempedoic Acid Reduces LDL-C And C-Reactive Protein: Improved Best Medical Treatment Will Sharply Decrease The Need For Interventional Treatments  
Jeffrey S. Berger, MD

7:53 – 7:58  Optimal Use Of Direct Oral Anticoagulants (DOACs) After Open Bypasses And After Endovascular Procedures  
Peter Henke, MD

Christos D. Liapis, MD
## UPDATE ON STEM CELL THERAPY

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<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Presenter</th>
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<tr>
<td>8:05</td>
<td>Does Stem Cell Therapy Have A Future In The Treatment Of Ischemic Vascular Disease</td>
<td>Dong-ik Kim, MD</td>
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<td>8:11</td>
<td>Update On The Value Of Autologous Stem Cell Therapy To Treat Lower Extremity Ischemia: Many Studies Indicate It Helps, But Not Much</td>
<td>Sigrid Nikol, MD</td>
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## ADVANCES IN CATHETER BASED TREATMENT OF RESISTANT HYPERTENSION

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<th>Time</th>
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<tr>
<td>8:17</td>
<td>Current Status And Future Potential Of Endovascular Devices In The Treatment Of Resistant Hypertension: Does Renal Denervation Work</td>
<td>Sahil A. Parikh, MD</td>
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<td>8:23</td>
<td>Status Of RCTs And Other Trials Showing The Comparative Value Of Different Catheter Based Techniques For Renal Denervation For Alleviating Resistant Hypertension: Radiofrequency (Spyral – Medtronic), Ultrasound Paradise Catheter (ReCor Medical), And Alcohol Infusion Into Renal Artery Adventitia (Peregrine Catheter, Ablative Solutions); They All Work</td>
<td>Horst Sievert, MD</td>
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<td>8:29</td>
<td>Value Of A Stent-Like Mobius HD Device (From Vascular Dynamics) To Reshape The Carotid Sinus, Amplify The Baroreflex And Lower Blood Pressure In Drug Resistant Hypertension</td>
<td>Gregg W. Stone, MD, Kim J. Hodgson, MD</td>
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<td>8:35</td>
<td>Update On Value Of ROX Coupler Device To Create An Iliac A-V Fistula And Control Blood Pressure In Resistant Hypertension: How It Works And Results Of A Sham Controlled RCT</td>
<td>David H. Deaton, MD, Krishna J. Rocha-Singh, MD</td>
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<td>8:41</td>
<td>Late Breaking Results Cast Doubt On The Katsanos Meta-Analysis: A Multicenter Study In 2071 Propensity Matched Patients (With CTLI And IC) Shows No Mortality Effect Of Paclitaxel Coated Devices 2 Years After Treatment</td>
<td>Hany Zayed, MD, MSc</td>
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<td>8:47</td>
<td>Panel Discussion</td>
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<td>8:54</td>
<td>Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)</td>
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SESSION 33  (Grand Ballroom West, 3rd Floor)
PROGRESS IN MANAGING COMPLICATIONS AND ENDOLEAKS AFTER EVAR AND TEVAR

Moderators:  
Juan C. Parodi, MD  
Michel Makaroun, MD

9:04 – 9:09  Total Aortic Occlusion With Worsening Visceral And Renal Ischemia After TEVAR For Acute TBAD Can Be Due To Complete Dissection Flap Detachment And Distal Migration: Causes And Diagnosis: Urgent Open Flap Excision Is Life-Saving  
Mark K. Eskandari, MD  
Heron E. Rodriguez, MD

Carlo Setacci, MD

Maciej L. Dryjski, MD, PhD

9:22 – 9:27  Natural History Of Type 2 Endoleaks With And Without Treatment: From A 1000 Patient Study  
Carlo Pratesi, MD  
Raffaele Pulli, MD

9:28 – 9:33  Little Known Facts About Endoleaks After EVAR: Natural History Of Late Type 1 Endoleaks Is Not Benign – Urgent Treatment Is Required: An Enlarging AAA Sac With A Type 2 Endoleak Usually Indicates The Presence Of An Associated Type 1 Endoleak  
O. William Brown, MD, JD

9:34 – 9:39  Value Of CT Fusion Guidance And Liquid Embolic Agents To Treat Type 2 Endoleaks: Technical Tips And How To Do It With The Best Chance Of Success  
Neal S. Cayne, MD

9:40 – 9:45  How Common Are Failures Of Interventions For Type 2 Endoleaks: What Are The Reasons And When Is Open Treatment Indicated: What Should That Open Treatment Be  
Ronald M. Fairman, MD

9:46 – 9:51  Minimizing Type 2 Endoleaks With Careful Imaging And Pre-EVAR Side Branch Coiling: It Works: Technical Tips  
Götz M. Richter, MD, PhD

9:52 – 9:59  Panel Discussion

9:59 – 10:04  Transgraft Access And Onyx Embolization For Type 2 Endoleaks Difficult To Approach And Treat: Technique And Results  
Mark W. Mewissen, MD, RVT

10:05 – 10:10  Optimal Strategy For And Results Of Treating Type 2 Endoleaks: It Is Not Simple  
Sonia Ronchey, MD, PhD
10:11 – 10:16  Role Of Anticoagulation And Endogenous Thrombolysis In The Occurrence And Resolution Of Late Type 2 Endoleaks: How Should They Influence Treatment  
Natzi Sakalihasan, MD, PhD

10:17 – 10:22  Value Of Fibrin Glue Sac Filling With EVAR To Prevent Type 2 Endoleaks: Technique, Value And Limitations  
Qingsheng Lu, MD  
Zaiping Jing, MD

10:23 – 10:28  Sac Access Routes To Treat Type 2 Endoleaks: Techniques, Advantages And Limitations Of Each  
Claudio J. Schonholz, MD  
Joshua D. Adams, MD

10:29 – 10:34  Treating Type 2 Endoleaks By A Paragraft Approach: Indications, Technique And Results  
Peter A. Schneider, MD

10:35 – 10:40  How Does Endograft Covering Material (Polyester vs. PTFE) Influence Type 2 Endoleak Rates And Behavior After EVAR  
Ross Milner, MD

10:41 – 10:46  Value Of Liquid Embolic Agents And Onyx In Treating Type 1 And Type 2 Endoleaks: Technical Tips And Results  
Robert A. Morgan, MD

10:47 – 10:52  Importance Of Recognizing Visceral Artery Occlusive Disease Before Performing EVAR: How To Diagnose And Treat  
Karan Garg, MD  
Neal S. Cayne, MD  
Carlos H. Timaran, MD  
Frank J. Veith, MD

10:53 – 11:00  Panel Discussion

SESSION 34 (Grand Ballroom West, 3rd Floor)  
RECORDED LIVE CHALLENGING AND COMPLEX CASES FROM LINC AND LEIPZIG

Moderators:  
Dierk Scheinert, MD  
Giancarlo Biamino, MD, PhD  
Andrej Schmidt, MD

11:00 – 12:00  Program To Be Determined. Please visit www.veithsymposium.org for updates.

12:00 – 12:50  Lunch Break – 2nd Floor Promenade  
Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 35  (Grand Ballroom West, 3rd Floor)
CHALLENGING RECORDED LIVE CASES AND THOSE EMPLOYING INNOVATIVE TECHNIQUES

Course Leaders:  Fabrizio Fanelli, MD  
                 Andrew Holden, MBChB

Moderators:     Fabrizio Fanelli, MD  
                 Andrew Holden, MBChB  
                 Carlo Setacci, MD  
                 Frank J. Veith, MD

12:50 – 12:57  When Is A Technically Successful Arterialization Of The Foot Veins Effective In Preventing Amputation In No-Option CLI Patients  
                Roberto Ferraresi, MD

12:57 – 12:59  Discussion

12:59 – 1:06  Open Surgery For Infra-And Juxtrarenal AAA In The Endovascular Era  
              Dittmar Böckler, MD

1:06 – 1:08  Discussion

1:08 – 1:15  Unexpected Initial And Final Completion Angiogram For A First In Human Fenestrated Endograft  
             Vicente Riambau, MD, PhD

1:15 – 1:17  Discussion

1:17 – 1:24  Single Session Venous Thrombectomy For Acute Ilio-Femoral Deep Vein Thrombosis: The Advantages Of ZERO Thrombolysis  
              Gerard J. O’Sullivan, MD

1:24 – 1:26  Discussion

1:26 – 1:33  Most Successful Tools For Complex Femoropopliteal CTO Recanalizations  
              Andrej Schmidt, MD

1:33 – 1:35  Discussion

1:35 – 1:42  Endovascular Management Of Complex Fem-Pop And Below Lesions In 2019  
              Fabrizio Fanelli, MD

1:42 – 1:44  Discussion

1:44 – 1:51  Vessel Preparation – Is It Relevant In The Tibial Arteries  
              Andrew Holden, MBChB

1:51 – 1:53  Discussion

1:53 – 1:59  Panel Discussion
SESSION 36  (Grand Ballroom West, 3rd Floor)
TRIBUTE TO A VALUED PARTNER; IMPORTANT ISSUES RELATED TO VASCULAR PRACTICE AND VASCULAR SURGEONS

*Moderators:* Michael L. Marin, MD
Ronald L. Dalman, MD

2:00 – 2:05  A Tribute To Sushil K. Gupta, MD, MBA (1949-2019) – A Creative And Talented Surgeon, A Brilliant Innovator And A Treasured Colleague And Friend
Larry A. Scher, MD

2:06 – 2:11  Trials And RCTs Versus Registries: Advantages And Disadvantages Of Each: How Can We Reach The Truth
Charles C. Miller, PhD

2:12 – 2:17  Keys To A Successful Career In Vascular Surgery
Ronald L. Dalman, MD

2:18 – 2:23  How Vascular Surgeons Can Develop Leadership Skills
Robert B. McLafferty, MD, MBA

2:24 – 2:29  How Women Vascular Surgeons Look Differently At Gender Differences In Procedural Results Than Their Male Counterparts And Why This Is Advantageous For Female Patients
Rebeca Reachi Lugo, MD

2:30 – 2:35  How To Teach Competent Open Surgery In The Endovascular Era
R. Clement Darling III, MD

Samuel R. Money, MD, MBA

2:42 – 2:47  What Constitutes Futility In Our Present Health Care System: When Is Enough Too Much
James W. Jones, MD, PhD, MHA

2:48 – 2:53  Panel Discussion

2:53 – 2:58  Lessons Learned By A Creative Physician-Inventor: How To Avoid The Pitfalls In Bringing An Idea To Fruition Without Losing Your Idea Or Your Shirt
Lindsay Machan, MD

2:59 – 3:04  How Are Silicon Valley Giants And Entrepreneurs Planning To Disrupt Health Care: Will It Improve Things For Patients; For Doctors; For Vascular Specialists
Ido Weinberg, MD, MSc

3:05 – 3:10  Screening For Vascular Diseases Can Cause More Harm Than Benefit: How To Avoid This Problem
Anders Wanhainen, MD, PhD

3:11 – 3:16  Variations Around The World In The Treatment Of AAAs And Carotid Stenosis Patients: What Are The Implications: From The Consortium Of Vascular Registries
Jack L. Cronenwett, MD
Are There Problems With The Appropriateness Of Invasive Treatment By Vascular Surgeons, By Other Vascular Specialists
Peter F. Lawrence, MD

The Hospital Readmission Reduction Program And Its Incentives Have Led To Increased Morbidity And Mortality For Vascular Patients: How Can It Be Fixed To Make It Safe
Philip P. Goodney, MD, MS
Richard J. Powell, MD

What Is The Impact Of The New AAA DRGs On Hospital Reimbursement: Does More Have To Be Done
W. Charles Sternbergh III, MD

Panel Discussion

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

SESSEION 37 (Grand Ballroom West, 3rd Floor)
ISSUES RELATED TO VASCULAR OUTPATIENT CENTERS, OFFICE BASED LABS AND MEDICAL ETHICS

Moderators: Enrico Ascher, MD
Glenn Jacobowitz, MD

Why Outpatient Centers And Office Based Labs (OBLs) Are The Best Place To Do Which Endovascular Procedures: Best For Patients And Best For Operators: When Can Atherectomies Be Performed Safely There; When Not
Krishna Jain, MD

Real World Results Of Lower Extremity Atherectomy (Mostly In Outpatient Centers) From Medicare Billing Data Is Much Worse Than Favorable Registry Data: Where Lies The Truth
Dipankar Mukherjee, MD

How To Avoid Unethical Practices In An Outpatient Center Or Office Based Lab (OBL): The Temptation And Incentives To Overtreat Is Great
Stephen M. Bauer, MD

Characteristics Of Physicians Who Are Suited To Work In An OBL And Characteristics Of Those Who Are Not
Sam S. Ahn, MD, MBA

Office Based Versus Hospital Based Vascular Care: Impact On Indications, Physician Income And Overall Costs
Clifford M. Sales, MD, MBA

Another View Of The Impact Of Office Based Vascular Practice Patterns On Indications, Physician Incomes And Outcomes
Matthew W. Mell, MD, MS
SESSION 38  (Grand Ballroom West, 3rd Floor)
TOPICS RELATED TO THE FDA, VALUE OF A VASCULAR SURGEON, VASCULAR PRACTICE, THE SVS, VQI AND GOVERNMENTAL REGULATIONS AND REIMBURSEMENT

Moderators:  
Ali F. AbuRahma, MD  
Keith D. Calligaro, MD

4:55 – 5:00  
How Innovative Vascular Devices Can Get To Market: What Is The De Novo Pathway  
Dorothy B. Abel, BSBME

5:01 – 5:06  
What Is The Value Of A Vascular Surgeon To A Health Care System In And Out Of The Operating Room: In Many Ways It Is Priceless But Under-Reward  
Richard J. Powell, MD  
Fred A. Weaver, MD

5:07 – 5:12  
Robert M. Zwolak, MD, PhD

5:13 – 5:18  
What Is On The Horizon For Vascular Surgeons And Vascular Specialists  
Reimbursement: Will Income Go Up Or Down For The Same Amount Of Work  
Sean P. Roddy, MD

5:19 – 5:24  
Opposite Trends In Reimbursement By CMS For Arterial And Venous Procedures: Implications For Vascular Surgery Practices  
Thomas F. O’Donnell, Jr., MD

5:25 – 5:30  
Revascularization For CLTI By Endovascular Treatments Or Open Surgery Is Cost Effective And Saves Lives Compared To Major Amputations  
Richard F. Neville, MD  
Jihad A. Mustapha, MD
Fred A. Weaver, MD

5:37 – 5:42  Progress In And Value Of The SVS VQI Program: Where Is It Going And Why Will It Become Increasingly Important
Jack L. Cronenwett, MD

5:43 – 5:48  Improvements In Vascular Specialist, The SVS Newspaper: Opportunities And Challenges And How It Can Benefit Vascular Surgeons And Others
Malachi G. Sheahan III, MD

5:49 – 5:54  Recent Improvements In The JVS: How To Get A Paper Accepted In The JVS: How Best To Review A Paper For The JVS
Peter Gloviczki, MD
Peter F. Lawrence, MD

5:55 – 6:02  Panel Discussion

End of Program E
PROGRAM F (SESSIONS 39-46)
MORE NEW DEVELOPMENTS IN THORACIC AORTIC DISEASE, AORTIC DISSECTIONS, TAAAs, JUXTA- AND PARARENAL AAAs, PARALLEL GRAFTS, FENESTRATED AND BRANCHED EVAR (F/B/EVAR), MULTILAYER BARE STENTS, INFRARENAL AAAs AND STANDARD EVAR AND HOT NEW AORTIC AND CAROTID TOPICS

Trianon Ballroom, 3rd Floor

SESSION 39  (Trianon Ballroom, 3rd Floor)
MORE TOPICS RELATED TO NEW DEVELOPMENTS IN TREATING AORTIC DISSECTIONS AND ITS COMPLICATIONS

Moderators:  Ramon Berguer, MD, PhD
Zhong Chen, MD

6:40 – 6:45 Retrograde SMA Stenting May Be The Best Way To Treat Mesenteric Compromise From Malperfusion With Aortic Dissections: How To Do It And Results
Dipankar Mukherjee, MD

6:46 – 6:51 When Can The Celiac Trunk Orifice Be Covered Safely During TEVAR And When Not: From A New Meta-Analysis
Wayne W. Zhang, MD

6:52 – 6:57 Left Subclavian Revascularization During Zone 2 TEVARs: Comparison Of Open Surgical Bypass Versus Endovascular Revascularization With Parallel Grafts (Chimney Or Periscope)
Giovanni Pratesi, MD

6:58 – 7:03 When Should False Lumen Thrombosing Techniques Be Used In Patients With TBADs: How Best To Do It
Cherrie Z. Abraham, MD

7:04 – 7:09 New Technique For False Lumen Occlusion In Chronic Aortic Dissections: Using A Physician Modified Device: How To Do It And Results
I-Hui Wu, MD, PhD

7:10 – 7:15 New Proximal And Distal Re-Entry Tears After TEVAR: What Are The Causative Mechanisms, Risk Factors And Treatments
Ludovic Canaud, MD, PhD

7:16 – 7:21 Another View On Endograft Induced Distal Re-Entry Tears After TEVAR: Strategies To Prevent, Diagnose And Treat
Martin Czerny, MD
Bartosz Rylski, MD, PhD

7:22 – 7:27 Best Treatment Options For Aortic Dissections In Patients With Connective Tissue Disorders: When Endo; When Open; When Hybrid
Roberto Chiesa, MD
Germano Melissano, MD
PROGRAM SCHEDULE

7:28 – 7:33 EVAR And TEVAR Can Work Surprisingly Well In Some Aneurysm Patients With Connective Tissue Disorders; When And When Not: Technical Tips
Tilo Köbel, MD, PhD

7:34 – 7:39 With TBADs, What Are The Flow/Pressure Dynamics That Explain Why TEVAR Can Make Things Worse
Firas F. Mussa, MD

7:40 – 7:45 Advantages To Hybrid Approaches To Complex Aortic And Aortovisceral Artery Pathology: Indications And Technical Tips
William J. Quinones-Baldrich, MD

7:46 – 7:54 Panel Discussion

SESSION 40 (Trianon Ballroom, 3rd Floor)
MORE NEW DEVELOPMENTS RELATED TO THE ASCENDING AORTA, AORTIC ARCH, F/B/TEVAR AND PARALLEL GRAFTS FOR TREATMENT OF LESIONS IN OR NEAR THE AORTIC ARCH

Moderators: Rodney A. White, MD
Ali Khoynezhad, MD, PhD

7:54 – 7:59 Wrapping Of The Dilated Ascending Aorta To Avoid More Complex Procedures And Facilitate Placement Of Grafts To Arch Branches: Indications, Contraindications, Technical Tips And Results
Mario L. Lachat, MD
Ralf R. Kolvenbach, MD

8:00 – 8:05 Variations In The Morphology Of Proximal Entry Tears In TBADs: Importance Of These Variations And How Should They Influence Treatment
Ali Azizzadeh, MD

8:06 – 8:11 Significance Of Aortic Arch Anomalies: What Are They Associated With: When Do They Require Treatment: What Is The Best Current Treatment
Erik E. Debing, MD, PhD

8:12 – 8:17 What Do Fluid Dynamics Tell Us About The Durability And Long-Term Results Of Aortic Arch Branch And Fenestrated Endografts
Santi Trimarchi, MD, PhD

8:18 – 8:23 3-Branch Endograft For Aortic Arch Aneurysm Repair (From Terumo Aortic): Advantages, Limitations And Results To Date
W. Anthony Lee, MD

8:24 – 8:29 Unusual Branched Endograft Solutions For Aortic Arch Lesions When Industry-Made Commercial Devices Are Unavailable Or Unsuitable
Ourania Preventza, MD
Joseph S. Coselli, MD
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<th>Time</th>
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<tr>
<td>8:30 – 8:35</td>
<td>How Best To Treat TBADs Extending Into The Arch And Ascending Aorta</td>
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<td>I-Hui Wu, MD, PhD</td>
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<td>8:36 – 8:41</td>
<td>Value Of Chimney TEVAR (Ch/TEVAR) To Treat Elective And Ruptured Aneurysms Involving The Aortic Arch: A 15-Year Experience And Results</td>
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<td>Thomas Larzon, MD, PhD, Tal M. Hörer, MD, PhD</td>
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<td>8:42 – 8:47</td>
<td>Ch/TEVAR In The Aortic Arch If Done Right Is As Good As F/B/TEVAR And Safer Than Open Surgery: Technical Tips And Results</td>
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<td>Armando Lobato, MD, Jan S. Brunkwall, MD, PhD</td>
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<td>8:48 – 8:53</td>
<td>Update On Sandwich Grafts For Zone 0 Aortic Arch Lesions: 8-Year Results And Technical Tips</td>
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<td>Armando C. Lobato, MD, PhD</td>
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<td>8:54 – 9:02</td>
<td>Panel Discussion</td>
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**SESSION 41** *(Trianon Ballroom, 3rd Floor)*

**MORE ABOUT JUXTA- AND PARARENAL AAAs, TAAAs, F/B/EVAR AND PARALLEL GRAFTS (CHIMNEY EVAR [Ch/EVAR]*)

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

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<td>9:02 – 9:07</td>
<td>A New And Better Way To Define And Classify AAA Neck Anatomy And Indicate Best Treatment</td>
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<td>David J. Minion, MD</td>
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<td>9:08 – 9:13</td>
<td>For Juxta- And Pararenal AAAs Ch/EVAR Can Yield Dependably Good And Durable Results If Certain Technical Requirements Are Followed And Certain Standardized Device Combinations Are Used: Results From The ENCHANT Registry</td>
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<td>Konstantinos P. Donas, MD, Giovanni Torsello, MD</td>
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<td>9:14 – 9:19</td>
<td>Ch/EVAR For Juxta And Pararenal AAA: Technical Tips To Assure Good Long-Term Results: A 9-Year Experience</td>
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<td>Nicola Mangialardi, MD, Sonia Ronchey, MD, PhD</td>
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<td>9:20 – 9:25</td>
<td>Indications For Chimney And Sandwich Grafts In The F/B/EVAR Era: Yes They Exist</td>
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<td>Martin Malina, MD, PhD</td>
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<td>9:26 – 9:31</td>
<td>Repair Of Juxta- And Pararenal AAAs Using A Combination Of Fenestrations And Chimney Grafts: Advantages, Techniques And Results</td>
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<td>Mark W. Mewissen, MD, RVT</td>
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**SESSION 42 (Trianon Ballroom, 3rd Floor)**

**UPDATE ON MULTILAYER FLOW MODULATING BARE STENTS FOR TREATING ANEURYSMS AND DISSECTIONS; NEW DEVELOPMENTS IN TREATING ILIAC ANEURYSMS AND REVASCULARIZING HYPOGASTRIC ARTERIES**

**Moderators:**
- Eric L.G. Verhoeven, MD, PhD
- Rodney A. White, MD

**UPDATE ON MULTILAYER FLOW MODULATING BARE STENTS**

**10:20 – 10:25**

Multilayer Flow Modulating (MLFM) Uncovered Stents (From Cardiatis): Indications, Contraindications, Advantages And Results  
*Rodney A. White, MD*

**10:26 – 10:31**

Why MLFM Uncovered Stents Should Be The First Choice For Treating Renal, Visceral And Popliteal Aneurysms And Possibly Other Lesions: Results Show That These Stents Preserve Branch Flow And Prevent Aneurysm Rupture  
*Micel Henry, MD*

**10:32 – 10:37**

Role Of MLFM Uncovered Stents To Treat Type A Aortic Dissections: Indications, Advantages, Limitations And Results  
*Victor S. Costache, MD, PhD*
10:38 – 10:43 Value Of MLFM Uncovered Stents To Treat Aortic Dissections And Recurrent Emboli From Paroxysmal Atrial Fibrillation: They Prevent Emboli From Going To The Brain
Ralf R. Kolvenbach, MD

10:44 – 10:49 Role Of MLFM Stents For Treating Type A And B Aortic Dissections: Indications And Results: What About For Complex Aneurysm Treatment
Zoran Stankov, MD
Ivo Petrov, MD, PhD

10:50 – 10:55 MLFM Uncovered Stents For Treating Complex AAAs And TAAAs: What Do The Longer-Term Results From The Multicenter DRAGON Trial Show: Do These Stents Prevent Rupture
Claude D. Vaislic, MD

10:56 – 11:01 Long-Term Follow-Up Of Multilayer Bare Stent Treatment Of TAAAs, Complex AAAs And Type B Aortic Dissections: The Moroccan Experience
Amira Benjelloun, MD

11:02 – 11:07 Panel Discussion

TREATMENT OF ILIAC ANEURYSM AND PRESERVING HYPOGASTRIC FLOW

11:07 – 11:12 Comparing The Various Industry-Made Iliac Branch Devices (IBDs) For Treating Common And Internal Iliac Aneurysms: Advantages And Limitations Of Each: When To Use Which One
Fabio Verzini, MD, PhD

11:13 – 11:18 Advantages, Limitations And Results Of Unilateral And Bilateral Gore IBD To Treat AAAs With Iliac Aneurysms: Early Results From The International ICEBERG Registry
Michel M.P. Reijnen, MD, PhD
Thomas S. Maldonado, MD

11:19 – 11:24 How To Prevent Complications And Failure With The Gore IBD When The Anatomy Is Tortuous: What Is The Iliac Tortuosity Index And How Does It Help
Jon S. Matsumura, MD

11:25 – 11:30 Value Of IBDs To Treat Isolated (No AAA) Common And Internal Iliac Aneurysms: At What Size Should They Be Treated: Which Device Is Best
Giovanni Pratesi, MD

11:31 – 11:36 Advantages And Limitations Of The Jotec-Cryolite IBD For Treating Common And Internal Iliac Aneurysms; This Device Works Well With The Endurant Endograft (Medtronic)
Lee H. Bouwman, MD, PhD, MSc

11:37 – 11:42 Sandwich Grafts To Treat Common Iliac Aneurysms And Preserve Hypogastric Flow: Advantages, Technical Tips And Results In 151 Cases
Jan S. Brunkwall, MD, PhD
Vicente Riambau, MD, PhD
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<th>Time</th>
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<tr>
<td>11:49</td>
<td>How Common Iliac Aneurysms (CIAs) Have An Impact On Aortic Morphology: Why A New Classification System For CIAs Will Be Helpful</td>
<td>Janet T. Powell, MD, PhD</td>
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<td>11:55</td>
<td>Panel Discussion</td>
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<td>12:00</td>
<td>Lunch Break – 2nd Floor Promenade Visit Exhibits And Pavilions (2nd and 3rd Floors)</td>
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<td>1:00</td>
<td>AAA Sac Shrinkage Is A Good Marker Of Durable Success After EVAR: Which Endografts Have The Best Rates Of Sac Shrinkage</td>
<td>Michael C. Stoner, MD</td>
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<td>1:06</td>
<td>Large Diameter Of The Flow Lumen In AAAs Is A Risk Factor For A Poor Outcome After EVAR Just Like Large Proximal Neck Diameter: What Are The Reasons For These Observations</td>
<td>Hence J.M. Verhagen, MD, PhD</td>
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<td>1:12</td>
<td>Large Proximal Necks (&gt;28 mm In Diameter) Are Predictive Of A Poor Outcome From EVAR: Based On A Meta-Analysis</td>
<td>Matt M. Thompson, MD</td>
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<td>1:18</td>
<td>Highlights From The New 2019 European (ESVS) AAA Guidelines: What Is Different And Better About Them</td>
<td>Sebastian E. Debus, MD, PhD</td>
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<td>1:30</td>
<td>Increasing Disparity Between The SVS Guideline AAA Indications For AAA Repair And Real World Practice: Are The Guidelines Relevant Currently</td>
<td>Alan M. Dietzek, MD, RPVI</td>
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**SESSION 43** (Trianon Ballroom, 3rd Floor)

INTERESTING NEW DEVELOPMENTS IN STANDARD EVAR AND INFRARENAL AAAs: ACCEPTABLE NECK ANATOMY; NEW GUIDELINES; AAA SAC THROMBUS AND SHRINKAGE; NEW CLASSIFICATION SYSTEM; EFFECT OF STEROIDS ON EVAR

**Moderators:**  
Elliott L. Chaikof, MD, PhD  
Janet T. Powell, MD, PhD

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<td>Alan M. Dietzek, MD, RPVI</td>
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1:36 – 1:41 DEBATE: Increasing Volume Of Mural Clot Within An AAA Sac Does Not Increase The Rupture Risk
Athanassios D. Giannoukas, MSc, MD, PhD

David H. Deaton, MD

1:48 – 1:53 A New Classification System For AAAs Helps In Understanding Their Behavior, In Determining Treatments And Evaluating Them
Claude Mialhe, MD

1:54 – 1:59 Does Preprocedure Steroid Administration Before EVAR Produce A More Benign Postprocedure Course And Facilitate Earlier Discharge: What Is The Mechanism
Lars B. Lönn, MD, PhD

2:00 – 2:06 Panel Discussion

SESSION 44 (Trianon Ballroom, 3rd Floor)
MORE NEW DEVELOPMENTS IN AAA PATHOGENESIS, NATURAL HISTORY AND TREATMENT

Moderators: Ali F. AbuRahma, MD
Juan C. Parodi, MD

2:06 – 2:11 Inflammatory AAAs: Medical Treatment With Steroids Is Adequate For Many Patients With Them: What Is The Regimen And Results: When Is Invasive Treatment Needed – Open Or Endo
Julien G. Sfeir, MD

2:12 – 2:17 How Long Can Patients With Moderate Sized AAAs Safely Wait For Elective Repair: Rupture Risk For AAAs <6.0 cm In Diameter Is Low And Overemphasized
Richard G.J. Gibbs, FRCS

2:18 – 2:23 Acceptable Results Can Be Achieved With EVAR Devices Used Outside IFU Requirements If Certain Precautions Are Followed: What Are They And What Are The Limitations
Francesco Speziale, MD

2:24 – 2:29 Depleted Nutritional Status And Muscle Mass Increases The Risk Of Open AAA Repair: What About With EVAR
Kimihiro Komori, MD, PhD

2:30 – 2:35 Why F/EVAR For Failed EVAR Is Not Simple: Technical Tips To Make It Work
Barend M.E. Mees, MD, PhD

2:36 – 2:41 A New Gene Family That May Be Vital In Causing AAAs: The Gene Can Be Identified From Skin Biopsies: How Can They Help In Diagnosis And Treatment
Kak Khee Yeung, MD, PhD
2:42 – 2:47 Comparison Of Aortic Neck Dilatation After AAA Repair In Patients Undergoing EVAR Versus Open Repair: From The DREAM Trial Which Allows This Comparison To Be Made In Patients Suitable For Both Procedures
Jan D. Blankensteijn, MD

2:48 – 2:53 How Should AAA Shape (With An Eccentric Sac Or Two Sacs) Influence Indications For Repair: How Should Diameter Measurements Be Made In These Circumstances
Jacques Busquet, MD

2:54 – 3:00 Increasing Requirement For Open Conversion Following EVAR: Reasons For And Technical Tips: Why Is It More Often Required For A Persistent Type 2 Endoleak With An Enlarging AAA Sac
Michel Makaroun, MD

3:00 – 3:15 Panel Discussion And Break
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 45 (Trianon Ballroom, 3rd Floor)
SHORT HOT NEW TOPICS RELATED TO AORTIC DISEASES AND THEIR TREATMENT (4 ¾-MINUTE FAST PACED TALKS)

Moderators: Mark A. Adelman, MD
Michael L. Marin, MD

EVAR AND AAA RELATED TOPICS

3:15 – 3:20 External Iliac To Internal Iliac Artery Bypass: Does It Have A Role In Preserving Hypogastric Flow In The Endo Era: Technical Tips
Heron E. Rodriguez, MD

3:20 – 3:25 Increasing Role Of Endovascular Treatments And EVAR For Vascular Complications Of Connective Tissue Disorders
Anders Wanhainen, MD, PhD

3:25 – 3:30 Value And Indications For Preprocedural Embolization Of The IMA And Lumbar Arteries Before EVAR
Timothy M. Sullivan, MD
Jesse Manunga, MD

3:30 – 3:35 Why Should Aortic AAA Neck Dilatation Differ After EVAR And After F/EVAR: Does It
Thomas S. Maldonado, MD

3:35 – 3:40 EVAR Treatment Of Atypical AAAs: Technical Tips And Special Precautions
Furuzan Numan, MD
3:40 – 3:45  5 Years After AAA Repair The Quality Of Life Is Better In Those Having EVAR Than In Those Having Open Repair  
Mauro Gargiulo, MD  
Gianluca Faggioli, MD

3:45 – 3:50  Why Do Fluoroquin Drugs Increase The Risk Of Aortic Aneurysms And Dissections  
Natzi Sakalihasan, MD, PhD

3:50 – 3:55  Panel Discussion

F/B/EVAR AND PARALLEL GRAFT RELATED TOPICS

3:55 – 4:00  When With F/EVAR Should A Renal Or Mesenteric Branch Not Be Stented  
Benjamin W. Starnes, MD

4:00 – 4:05  How To Avoid Complications And Problems From Parallel Grafts And How To Make Them Work Safely And Effectively  
Murray L. Shames, MD

4:05 – 4:10  Update On In Situ Fenestration For Branch Revascularization: How To Use It For Renal And Mesenteric Branches In Urgent TAAA Repairs: Imaging Is Key And It Is Not Simple  
Jean M. Panneton, MD

4:10 – 4:15  Multicenter Results Of The t-Branch Off-The-Shelf Graft (From Cook) For TAAA Repairs: Advantages, Technical Tips, Limitations  
Martin J. Austermann, MD

AORTIC DISSECTION RELATED TOPICS

4:15 – 4:20  The SKIRT Stent-Graft To Prevent Endoleaks From Fenestrated And Chimney TEVARs: How Does It Work  
Chang Shu, MD

4:20 – 4:25  Troubleshooting Challenging TBADs During Endovascular Treatment And Making TEVAR Work Safely And Effectively  
Rami Tadros, MD  
Michael L. Marin, MD

4:25 – 4:30  Branched Endografts For Treating Aortic Dissections: Which Graft For Which Patient And Anatomy: Technical Tips  
Luis A. Sanchez, MD

4:30 – 4:35  Panel Discussion
SESSION 46  (Trianon Ballroom, 3rd Floor)
MORE SHORT HOT NEW TOPICS RELATED TO AORTIC AND CAROTID DISEASES AND THEIR TREATMENT (4 ¾-MINUTE FAST PACED TALKS)

Moderators: Luis A. Sanchez, MD
K. Wayne Johnston, MD

AORTA RELATED TOPICS

4:35 – 4:40 International Comparison Of How AAAs Are Treated And How It Influences Results
Pete Holt, MD, PhD

4:40 – 4:45 Long-Term Outcomes From The OVER RCT Comparing AAA Treatment With EVAR Versus Open Repair: How Are Results Similar And How Do They Differ From The EVAR 1 And DREAM RCTs And Why
Jon S. Matsumura, MD

4:45 – 4:50 At What Size Do Hypogastric Aneurysm Need To Be Treated: How Best To Do It And Technical Tips
Darren B. Schneider, MD

Carlos H. Timaran, MD

4:55 – 5:00 Acute Kidney Injury During F/B/EVAR: What Are The Long-Term Consequences And What Can Be Done To Prevent Or Treat It Better
Andres Schanzer, MD

5:00 – 5:05 Why Outcomes Of F/B/EVAR For Women Are Different Than Those For Men: What Are The Implications
Tara M. Mastracci, MD

5:05 – 5:10 Progress And Improvements In F/B/EVAR Decrease Complications And Improve Results
Federico E. Parodi, MD

5:10 – 5:15 New Developments In The Treatment And Results Of Aorto-Enteric Fistulas: From The Low Frequency Vascular Disease Consortium
Peter F. Lawrence, MD

5:15 – 5:20 Technical Tips For AAA Sac Branch Embolization During EVAR: When And How To Do It And What Is Its Value
Eric Allaire, MD, PhD

5:20 – 5:25 Panel Discussion
CAROTID RELATED TOPICS

5:25 – 5:30  Mini-Incision CEA Is Safer, Cheaper And More Effective Than TCAR: How To Do It In Most Patients Needing Invasive Treatment
            Enrico Ascher, MD

5:30 – 5:35  Update On Current Outcomes Of CEA And CAS In Women: What Are The Implications
            Caron B. Rockman, MD

5:35 – 5:40  DEBATE: Screening For Carotid Disease Will Prevent Strokes And Should Be Expanded: To Whom
            George S. Lavenson, MD

5:40 – 5:45  DEBATE: Not So: Screening More Widely For Carotid Disease Will Cause More Harm Than Benefit: Why
            Anne L. Abbott, MD, PhD

5:45 – 5:50  Safety Of CEA And CAS In Patients With A History Of Coronary Artery Disease: From The 4 RCTs
            Gert J. de Borst, MD, PhD

5:50 – 5:55  Technical Tips And Indications For Eversion CEA: When Is It Best And When Not
            Timothy M. Sullivan, MD

5:55 – 6:00  Panel Discussion

End of Program F
THURSDAY, NOVEMBER 21, 2019

6:00 A.M. General Registration - Rhinelander Gallery, 2nd Floor
6:00 A.M. Faculty Registration - Morgan Suite, 2nd Floor
6:15 A.M. Continental Breakfast - Rhinelander Gallery, 2nd Floor

CONCURRENT THURSDAY PROGRAMS

Program G  (Sessions 47-54)
Exciting New Or Updated Techniques, Concepts And Devices; Advances In F/B/EVAR And Parallel
Grafts For Complex AAAs; Tribute To Our Military; New Developments In The Treatment Of
Ruptured AAAs And TAAAs; More New Developments In New Or Improved Devices, Techniques
And Concepts, And Radiation Safety
6:45 A.M. – 6:02 P.M.     Grand Ballroom East, 3rd Floor

Program H  (Sessions 55-62)
New Or Improved Devices For: Standard EVAR, EVAS And More Complex AAAs; Repair Of
TAAAs, The Aortic Arch And The Descending Aorta (TEVAR): New Devices For Treating
Lower Extremity Lesions By Endovascular Or Open Techniques; Updates On Endoanchors And
Improvements In Their Usage; And New Or Improved Devices For Removing Clot And Occluding
Blood Vessels Endovascularly
6:45 A.M. – 5:52 P.M.     Grand Ballroom West, 3rd Floor

Program I  (Sessions 63-70)
Superficial Venous Disease
7:00 A.M. – 6:05 P.M.     Trianon Ballroom, 3rd Floor

Course Leaders: Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD
PROGRAM G (SESSIONS 47-54)
EXCITING NEW OR UPDATED TECHNIQUES, CONCEPTS AND DEVICES; ADVANCES IN F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAs; TRIBUTE TO OUR MILITARY; NEW DEVELOPMENTS IN THE TREATMENT OF RUPTURED AAAs AND TAAAs; MORE NEW DEVELOPMENTS IN NEW OR IMPROVED DEVICES, TECHNIQUES AND CONCEPTS, AND RADIATION SAFETY

**Grand Ballroom East, 3rd Floor**

SESSION 47 (Grand Ballroom East, 3rd Floor)
EXCITING NEW OR UPDATED CONCEPTS, TECHNIQUES OR DEVICES

**Moderators:** Frans L. Moll, MD, PhD
Frank J. Veith, MD

6:45 – 6:50 Theoretically Promising Technologies Don’t Always Work Out: Reasons And Implications For Creative Vascular Surgeons And Specialists
S. Rao Vallabhaneni, MD

6:51 – 6:56 Lumee Implantable 02 Sensors; How Do They Work; How Accurate Are They And How Can They Help During And After Foot Revascularization Procedures: The OMNIA Trial
Miguel F. Montero-Baker, MD

6:57 – 7:02 Iliac Artery Endofibrosis: External Iliac Occlusive Disease In Young Athletes (Especially Cyclists): Pathogenesis And Optimal Treatment – Endo Treatments Don’t Work
Kenneth J. Cherry, MD

7:03 – 7:08 Progress In Transcatheter Aortic Valve Replacement (TAVR): An Interventional Cardiologist’s View
Martin B. Leon, MD

Juan C. Parodi, MD

7:15 – 7:20 Restricting Needed Transfusion In Patients Undergoing Vascular Procedures Is Bad Practice: So-Called Permissive Anemia After Vascular Operations Or Procedures Increases Morbidity And Mortality
Panagiotis Kougias, MD
Joseph L. Mills, MD

7:21 – 7:26 Advantages Of Curved Balloons (Curved When Inflated) In Endovascular Procedures: How Do They Work And When Will They Be Available
Timothy A.M. Chuter, DM
7:27 – 7:32 A F/EVAR Device Automatically Computer Generated From CTA Images With Compensation For Device Induced Anatomic Changes And A Specialized Stent-Graft (BoulEVARd) For FEVAR Branches
Benjamin W. Starnes, MD

7:33 – 7:38 Non-Invasive Measurement Of Intra-Arterial Pressure Gradients And Vector Flow Imaging: Current Status And Value In Endovascular Treatments
Lars B. Lönn, MD, PhD

7:39 – 7:44 A New Retrievable Stent Device (The Rescue Stent) To Control Massive Aortic And Caval Bleeding Without Fluoroscopy: How Does It Work And Experience To Date
Bryan W. Tillman, MD, PhD
Michel Makaroun, MD

7:45 – 7:50 Update On The Art-Assist Device To Provide Pneumatic Sequential Compression For Ischemia: It Is The Best Treatment For Many CLTI Patients: How It Works And Results From A 20-Year Experience
Sherif A.H. Sultan, MD, PhD

7:51 – 8:00 Panel Discussion

SESSION 48 (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN FENESTRATED AND BRANCHED EVAR (F/B/EVAR AND PARALLEL GRAFTS FOR COMPLEX AAAs AND TAAAs)

Moderators: Matthew J. Eagleton, MD
Mark A. Farber, MD

8:00 – 8:05 New Findings From The UK Complex AAA Multicenter Study Comparing Outcomes And Cost For F/B/EVAR Versus Open Repair For Juxta- And Pararenal AAAs And TAAAs
S. Rao Vallabhaneni, MD

8:06 – 8:11 Update On The Results Of The French Multicenter Study Comparing Outcomes And Costs Of F/EVAR And Open Repair For Complex AAAs
Stephan Haulon, MD

8:12 – 8:17 Update On Improving Results With F/B/EVAR For Complex AAAs: How Are The New Bridging Stent-Grafts And Inner Branched Grafts Helping And Making Procedures More Effective
Eric L.G. Verhoeven, MD, PhD
Athanasios Katsargyris, MD

8:18 – 8:23 Expanded Use Of Preloaded Catheters And Wires For F/B/EVAR Treatment Of Complex AAAs And TAAAs: How Do They Work: Advantages And Limitations
Carlos H. Timaran, MD

8:24 – 8:29 DEBATE: Longer Follow-Up And Good Outcomes Support The Continued And Wider Use Of Parallel Graft Repairs Of Complex AAAs
Edward Y. Woo, MD
8:30 – 8:35  DEBATE: Not So: Parallel Graft Use Should Be Decreasing: F/B/EVAR Is Best For Complex AAAs And TAAAs
Stephan Haulon, MD

8:36 – 8:41  Long-Term Results Of Chimney EVAR (Ch/EVAR) From The PERICLES Registry Show Good Results Comparable To F/EVAR: How Can These Results Be Duplicated And Devices Gain Approval For This Usage
Jason T. Lee, MD
Konstantinos P. Donas, MD

8:42 – 8:47  Endovascular Docking Station To Make Parallel Graft TAAA Repair Safe And Dependable And Avoid Gutter Endoleaks With 4-Parallel Grafts (2 Chimney And 2 Sandwich Grafts)
Manish Mehta, MD, MPH
James F. McKinsey, MD

8:48 – 8:53  3-Vessel Parallel Grafts Can Yield Good Results For Complex AAA Repair If Certain Techniques Are Used: From The PERICLES Registry: Technical Tips
Konstantinos P. Donas, MD
Gergana Taneva, MD

8:54 – 8:59  How To Prevent Gutter Endoleaks With Parallel Grafts By The “Eye Of The Tiger” Technique: When Is It Needed And How To Do It
David J. Minion, MD

9:00 – 9:05  TAAA Repair With An Off-The-Shelf Multibranched Manifold Device: 7-Year Experience In <100 Patients: Advantages, Limitations, Complications And Device Modifications To Avoid Them
Patrick W. Kelly, MD

9:06 – 9:15  Panel Discussion

9:15 – 9:30  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 49  (Grand Ballroom East, 3rd Floor)
MORE ABOUT F/B/EVAR AND PARALLEL GRAFTS TO TREAT COMPLEX AAAs AND TAAAs

Moderators:  James F. McKinsey, MD
Frank J. Veith, MD

9:30 – 9:35  DEBATE: Why 2-Vessel F/EVAR Is Different And Less Complex Than 3- Or 4-Vessel F/EVAR: The Latter Requires Different Techniques, Has More Complications And Worse Results
Geert Willem H. Schurink, MD, PhD
Michael J. Jacobs, MD

9:36 – 9:41  DEBATE: Not So: 4-Vessel F/EVARs Have Many Advantages In Many Patients And Are Not Substantially More Difficult
Eric L.G. Verhoeven, MD, PhD
Giovanni F. Torsello, MD
Giovanni Torsello, MD

9:48 – 9:53  For F/B/EVAR Treatment Of Complex AAAs And TAAAs What Are The Indications For And The Value And Disadvantages Of Fenestrations, Outer Branches And Inner Branches: Comparison Of Cook And Jotec Devices
Piergiorgio Cao, MD
Ciro Ferrer, MD

9:54 – 9:59  F/B/EVAR To Treat Failed EVARs: What Are The Challenges: Technical Tips To Make A Difficult Procedure Easier
Andres Schanzer, MD

10:00 – 10:05  DEBATE: The Evidence To Support The Success And Durability Of Ch/EVAR For Complex AAAs Is Solid: If Done Right, Ch/EVAR Is Equal To F/EVAR And Has Real Advantages
Konstantinos P. Donas, MD
Jason T. Lee, MD

10:06 – 10:11  DEBATE: Not So: F/EVAR Is The Gold Standard For Complex AAAs And Has Better Outcomes: Ch/EVAR Is A Dying Procedure
Tara M. Mastracci, MD

10:12 – 10:17  What Anatomy Is Unsuitable For F/EVAR With The Cook Z-FEN Device: When Can This Device Be Used Successfully Outside Its IFU
Martin R. Back, MD

10:18 – 10:23  Technique For Safe Percutaneous Axillary Access For F/B/EVAR And Ch/EVAR Using Ultrasound, Closure Devices, Through And Through Wire And Balloon Control
Germano Melissano, MD
Luca Bertoglio, MD
Roberto Chiesa, MD

10:24 – 10:29  Update On The Value Of Variable Curvature Sheaths For F/B/EVAR: They Make Upper Extremity Access Largely Unnecessary And Decrease Radiation Exposure, Contrast Dose And Procedure Time
Joshua D. Adams, MD

10:30 – 10:35  Importance Of Secondary Procedures After F/B/EVAR: Indications, Type Of Interventions And Impact On Outcomes
Salvatore T. Scali, MD
(Power Point Presentation With Synced Audio)

10:36 – 10:45  Panel Discussion
SESSION 50  (Grand Ballroom East, 3rd Floor)
A TRIBUTE TO OUR MILITARY AND SERVICE PHYSICIANS: MILITARY HISTORY, CONTROL AND TREATMENT OF MILITARY AND CIVILIAN VASCULAR INJURIES, CURRENT COMBAT CONDITIONS AND VALUE OF A TISSUE ENGINEERED VASCULAR GRAFT (6-MINUTE TALKS)

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

Norman M. Rich, MD, DMCC

10:52 – 11:04  A Heroic Rescue And Battle From The War In Afghanistan: 20 US Airborne Army Rangers And 7 Navy SEALS Take On 400 Taliban Attackers And Win At Takurghar
Wayne F. Yakes, MD

Zachary M. Arthurs, MD

11:12 – 11:18  Comparison Of Current Treatments Of Combat And Civilian Vascular Injuries In Israel: When Open; When Endovascular
Samy S. Nitecki, MD

11:19 – 11:25  Role Of Military Medicine In Improving National Preparedness: Advances In Homeland Security And Department Of Defense Combat Casualty Care
Todd E. Rasmussen, MD
Eric A. Elster, MD

11:26 – 11:32  Advantages And Limitations Of Tourniquet Use In Military And Civilian Limb Vascular Trauma: Tourniquets Saves Lives If Used Properly
Michael Engelhardt, MD

Jeffrey H. Lawson, MD, PhD

11:40 – 11:46  Updated Military Experience With REBOA (Resuscitative Endovascular Balloon Occlusion of the Aorta) And Endovascular Resuscitation
Joseph J. DuBose, MD

11:47 – 11:53  Update On Civilian Use Of REBOA In Trauma And Other Conditions Including Cardiac Arrest: Advantages And Disadvantages
Tal M. Hörer, MD, PhD

11:54 – 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 TREATMENT OF RUPTURED ABDOMINAL AORTIC ANEURYSMS (RAAAs)

**Moderators:**
- Timur P. Sarac, MD
- Mario L. Lachat, MD
- Frank J. Veith, MD

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<td>1:00–1:05</td>
<td>Value Of Telemedicine In The Management Of Patients With RAAAs</td>
<td>Nobuyoshi Azuma, MD</td>
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<td>1:06–1:11</td>
<td>Risk Evaluation Scores And Systems Are Inaccurate And Do Not Help In The Management Of RAAA Patients: They Cannot Predict Patients Who Should Be Denied Treatment</td>
<td>Janet T. Powell, MD, PhD</td>
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<td>1:12–1:17</td>
<td>With Adjuncts Such As Chimney Grafts And Onyx, 100% Of RAAA Patients Can And Should Be Treated By EVAR</td>
<td>Thomas Larzon, MD, PhD</td>
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<td>Mario L. Lachat, MD</td>
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<td>1:18–1:23</td>
<td>The Debate Is Over: EVAR Is The Best Treatment For RAAA Patients – Even If The RCTs Show Otherwise</td>
<td>Martin Malina, MD, PhD</td>
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<td>1:24–1:29</td>
<td>The IMPROVE RCT Comparing EVAR To Open Repair For RAAAs Finally Showed Late Survival Is Better For EVAR: What Did The AJAX RCT Show Regarding Late Survival After RAAA Repair</td>
<td>Willem Wisselink, MD</td>
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<td>1:30–1:35</td>
<td>EVAR Outcomes Are Improving In RAAA Patients: EVAR Should Be The Standard Of Care In Most RAAA Patients: Which RAAA Patients Currently Should Get Open Repair</td>
<td>Anders Wanhainen, MD, PhD</td>
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<td>1:36–1:41</td>
<td>Techniques For Rapid Percutaneous Access And Quick Contralateral Gate Cannulation In RAAA Patients: Technical Tips</td>
<td>Felice Pecoraro, MD</td>
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<td>Mario L. Lachat, MD</td>
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<td>1:42–1:47</td>
<td>How Should Aortic Endogafts Be Sized In Hypotensive RAAA Patients: CTA Measurements May Be Misleading</td>
<td>Zoran Rancic, MD, PhD</td>
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<td>1:48–1:53</td>
<td>Why Have Survival Rates For RAAA Patients Improved In Recent Years: It Is Not Just The Increasing Use Of EVAR</td>
<td>Martin Björck, MD, PhD</td>
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<td>Kevin Mani, MD, PhD</td>
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1:54 – 2:00  Why The Endologix Ovation Alto Device Has Advantages For EVAR Treatment Of RAAAs: It Eliminates The Need For Supraceliac Aortic Balloon Control: How So
Benjamin W. Starnes, MD

2:00 – 2:08  Panel Discussion

SESSION 52  (Grand Ballroom East, 3rd Floor)
MORE NEW DEVELOPMENTS IN THE TREATMENT OF RAAAs AND RUPTURED JUXTA- AND PARARENAL AAAs AND TAAAs

Moderators:  Manish Mehta, MD, MPH
Sebastian E. Debus, MD, PhD

2:08 – 2:13  After EVAR For RAAAs Sac Shrinkage Is Greater Than After Elective EVAR: But Survival Is Similar: What Are The Explanations
Hence J.M. Verhagen, MD, PhD

2:14 – 2:19  Update On Improvements In The Diagnosis And Treatment Of Abdominal Compartment Syndrome (ACS) After EVAR For RAAAs
Martin Björck, MD, PhD
Mario L. Lachat, MD

2:20 – 2:25  DEBATE: Surgeon Modified Endografts Or Off-The-Shelf Devices Are The Best Way To Treat Ruptured Complex AAAs (Juxta- Or Pararenal)
Nikolaos Tsilimparis, MD, PhD

2:26 – 2:31  DEBATE: Not So: Chi/EVAR Is The Best Way To Treat Ruptured Complex AAAs
Mario L. Lachat, MD
Konstantinos P. Donas, MD
Drosos Kotelis, MD

2:32 – 2:37  Peridontal Inflammatory Disease With Gram Negative Pockets May Cause Rapid AAA Growth And Instability: How Should It Be Treated In Patients With Small AAAs
Natzi Sakalihasan, MD, PhD

2:38 – 2:43  Finnish Nationwide Study Shows That Most RAAA Patients Never Reach A Hospital And Many RAAA Patients Are Not Picked Up By AAA Screening: Are These Findings True In Other Countries And How Can They Be Fixed
Maarit Venermo, MD, PhD

2:44 – 2:49  In Japan: EVAR Is The Best Treatment For RAAAs: The Surprising Significance Of Retroperitoneal Hematoma Volume
Naoki Fujimura, MD, PhD

Gianluca Faggioli, MD
Mauro Gargiulo, MD
Andrea Stella, MD
2:56 – 3:01  Endovascular Repair Of Ruptured TAAAs: European Multicenter Results: What Endografts Were Used: Management And Technical Tips  
Athanasiou Katsargyris, MD  
Eric L.G. Verhoeven, MD, PhD

3:02 – 3:10  Panel Discussion

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

SESSION 53  (Grand Ballroom East, 3rd Floor)  
EXCITING NEW OR IMPROVED TECHNIQUES, CONCEPTS AND DEVICES; UPDATES ON EVOLVING ENDOVASCULAR TREATMENTS

Moderators:  Reese A. Wain, MD  
Patrick J. Lamparello, MD

3:20 – 3:25  Improved Less Invasive Technique For Anterior Lumbar Spine Exposure For Interbody Fusion: Complications And How To Avoid Them  
Christian Ochoa, MD

3:26 – 3:31  Endovascular Treatment Of Vascular Complications Of Kidney Transplantation: These Complications Are More Frequent Than One Might Think  
Maria Antonella Ruffino, MD

3:32 – 3:37  How Computational Fluid Dynamic Analyses Can Help In Determining The Optimal Treatment Of Aortic Lesions  
James C. Stanley, MD  
C. Alberto Figueroa, PhD  
Christopher Tossas, BS  
Theodorus van Bakel, MD, PhD

3:38 – 3:43  Use Of Thoracic Stent-Grafts To Control Major Iliac Vein Or Caval Bleeding From Trauma Or During Open Surgery: How To Do It  
Geert Willem H. Schurink, MD, PhD

Jeffrey J. Siracuse, MD

3:50 – 3:55  The Aortyx Patch: What Is It And How Does It Work To Repair Focal Aortic Defects With Loss Of Tissue  
Vicente Rambau, MD, PhD

3:56 – 4:01  A Sirolimus External Patch To Prevent Anastomotic Intimal Hyperplasia When Placed Around The Distal Anastomosis Of A PTFE Fempop Arterial Graft  
Sriram S. Iyer, MD

4:02 – 4:07  Panel Discussion
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<th>Speaker(s)</th>
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<tbody>
<tr>
<td>4:07</td>
<td>Left Gastric Embolization To Treat Obesity: Indications, Technique And How Effective Is It</td>
<td>Robert E. Beasley, MD</td>
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<tr>
<td>4:13</td>
<td>Current Status Of Prostate Artery Embolization For Benign Prostatic Hypertrophy: Will It Replace Surgery; Technical Requirements And Results From A Meta-Analysis</td>
<td>Lars B. Lönn, MD, PhD</td>
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</tbody>
</table>
| 4:19  | Occlusion Perfusion Catheter (From Advanced Catheter Therapies) To Inject Paclitaxel Or Other Drugs Into The Arterial Wall After Atherectomy: How Does It Work And 1-Year Results | Lawrence A. Garcia, MD  
George L. Adams, MD                                                             |
| 4:25  | Preservation Of A Favorable Aortic Bifurcation During AAA Repair (Open And Endo) To Facilitate Later Contralateral Approaches For Lower Extremity Occlusive Disease: How To Do It | Sigrid Nikol, MD                                                            |
| 4:31  | Mini-Incision Open AAA Repair: When And How To Do It                  | Kamphol Laohapensang, MD                                                   |
| 4:37  | External Support Of Vein Grafts For Lower Extremity Bypasses: When Is It Helpful And How To Do It | Francesco Spinelli, MD                                                     |
| 4:43  | Panel Discussion                                                     |                                                                            |

**SESSION 54** (Grand Ballroom East, 3rd Floor)
MORE ABOUT NEW CONCEPTS, DEVICES AND TECHNIQUES; PROGRESS IN RADIATION SAFETY

**Moderators:**
Barry T. Katzen, MD  
Robert A. Lookstein, MD, MHCDL

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<th>Time</th>
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<tr>
<td>4:48</td>
<td>V-Healthy And V-Awareness Programs To Enhance Public Awareness Of Vascular Diseases And What Can Be Currently Done To Treat It Effectively</td>
<td>Manish Mehta, MD, MPH</td>
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<td>4:54</td>
<td>Status Of Credentialing For Vascular Outpatient Centers And OBLs: What Organization Or Society Is Leading The Initiative</td>
<td>Anton N. Sidawy, MD, MPH</td>
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<td>5:00</td>
<td>How To Do Perfusion Angiography To Assess Foot Circulation And Adequacy Of Treatment: Value In Diabetic Gangrene And Ulceration</td>
<td>Jim Reekers, MD, PhD</td>
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<td>5:06</td>
<td>How To Create A Poor Man’s Variable Curve/ Deflection Sheath That Is Stable: How To Make It And Value In F/B/EVAR: It Can Minimize The Need For Axillary Access</td>
<td>Tilo Kölbel, MD, PhD</td>
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ADVANCES IN RADIATION SAFETY

5:18 – 5:23  New Developments In Radiation Safety To Decrease Exposure To The Staff And Patients: What Is Claimed To Work But Does Not And What Works
Lindsay Machan, MD

5:24 – 5:29  How Can Simulation Help To Promote Radiation Safety For Operators And Staff Members
Lars B. Lönn, MD, PhD

5:30 – 5:35  New Methods To Quantitate And Minimize Radiation Exposure To Personnel During Endovascular Procedures: Why Consequences From Given Exposure Vary Between Individuals: Can This Variability Be Determined
Bijan Modarai, PhD, FRCS

5:36 – 5:41  What Is New In Radiation Protection For Pregnant Physicians, Other Staff Members And Patients
Palma M. Shaw, MD

Götz M. Richter, MD, PhD

5:48 – 5:53  Radiation Treatment For Lung Or Esophageal Cancer Can Cause Aortic Ruptures: Endografts Can Prevent Or Treat The Problem
Maciej L. Dryjski, MD, PhD

5:54 – 6:02  Panel Discussion
PROGRAM H  (SESSIONS 55-62)
NEW OR IMPROVED DEVICES FOR STANDARD EVAR, EVAS AND MORE COMPLEX AAAs;
REPAIR OF TAAAs, THE AORTIC ARCH AND THE DESCENDING AORTA (TEVAR): NEW
DEVICES FOR TREATING LOWER EXTREMITY LESIONS BY ENDOVASCULAR OR OPEN
TECHNIQUES; UPDATES ON ENDOANCHORS AND IMPROVEMENTS IN THEIR USAGE;
AND NEW OR IMPROVED DEVICES FOR REMOVING CLOT AND OCCLUDING BLOOD
VESSELS ENDOVASCULARY

Grand Ballroom West, 3rd Floor

SESSION 55  (Grand Ballroom West, 3rd Floor)
NEW OR IMPROVED DEVICES FOR STANDARD INFRARENAL EVAR PROCEDURES AND
STRATEGIES FOR OPEN AAA REPAIR TRAINING

Moderators: Wesley S. Moore, MD
Mark A. Adelman, MD

6:45 – 6:50  Current Status Of The Treo Endograft (Terumo Aortic) For EVAR In Europe And The
US: Advantages And Limitations
Matthew J. Eagleton, MD

6:51 – 6:56  The Altura Endograft For EVAR Repairs Of Standard Infrarenal AAAs: It Has A
Double D Configuration In The Proximal Neck: Advantages, Limitations And 5-Year
Results
Dainis K. Krievins, MD
Albrecht H. Krämer, MD

6:57 – 7:02  Updated 2-Year Results Of The LEOPARD RCT Comparing The AFX (Endologix)
Endograft To Other Standard Endografts For AAA Repair
Christopher J. Kwolek, MD

7:03 – 7:08  Will Newer Lower Profile EVAR Devices Make A Positive Or Negative Difference On
Outcomes And Availability Of EVAR
David H. Deaton, MD

7:09 – 7:14  There Are Fewer Type 2 Endoleaks With The Gore Excluder Endograft Than Other
EVAR Devices: What Is The Reason
Sherif A.H. Sultan, MD, PhD

7:15 – 7:20  Update On The Ovation Polymer Based Endograft (Endologix) Without And With
Chimney Grafts: Advantages, Limitations And 5-Year Results
Venkatesh G. Ramaiah, MD

7:21 – 7:26  Why The ALTO (Ovation) Endograft Has Advantages For AAA Repair: How Does
Raising Its Polymer Proximal Sealing Ring Improve EVAR Applicability Based On
Early Results
Sean P. Lyden, MD
<table>
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<tr>
<th>Time</th>
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<tr>
<td>7:27</td>
<td>Panel Discussion</td>
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| 7:33   | Long-Term (10-Year) Follow-Up After EVAR With The Cook Zenith Endograft Shows It To Be Durable And Effective: Are There Any Downsides  
  Timothy A. Resch, MD, PhD |
| 7:39   | Update On The Cook Alpha Device For EVAR: Advantages, Limitations And Results  
  Eric L.G. Verhoeven, MD, PhD  
  Athanasios Katsargyris, MD |
| 7:45   | The Gore Conformable Excluder With Active Proximal (Neck) Angulation Control: Results Of US IDE Trial To Date: Advantages And Limitations  
  Robert Y. Rhee, MD |
| 7:51   | European Results With The Gore Conformable AAA Endograft With Active Proximal Angulation Control  
  Marc R.H.M. van Sambeek, MD, PhD |
| 7:57   | The Low Profile Incraft (From Cordis-Cardinal Health) For EVAR Has Real Advantages Based On Midterm Results From The Italian Multicenter Experience: The Device Is Now FDA Approved  
  Matteo Orrico, MD  
  Nicola Mangialardi, MD  
  Franco Grego, MD |
| 8:03   | How Use Of Regional Referral Centers Can Remedy The Shortfall Of Vascular Surgical Training In Open AAA Repair In The EVAR, F/EVAR Era  
  Lee Kirskey, MD, MBA |
| 8:09   | Panel Discussion                                                        |
| 8:15   | Why AAA Sac Filling Endografts Like Nellix May Be Better Devices For Endo AAA Repair: What Are Their Disadvantages  
  Venkatesh G. Ramaiah, MD |
| 8:21   | Prevention Of Endoleaks After EVAR With A New Sac Filling Polymer Based Device: How It Works And What Is Its Status  
  Michael J. Jacobs, MD |
| 8:27   | Advantages Of The Ovation Endograft (Endologix) For AAA Repair: Why The Polymer Filled Sealing Rings Are A Better Way To Secure And Maintain A Proximal Seal: Value Of The New Alto Modification  
  David J. Minion, MD |

**SESSION 56** (Grand Ballroom West, 3rd Floor)  
MORE NEW OR UPDATED INFORMATION ABOUT NON-STANDARD DEVICES FOR EVAR OR ENDOVASCULAR ANEURYSM SEALING (EVAS) (TALKS ARE 4 ¾ OR 5 MINUTES)

**Moderators:**  
Jerry Goldstone, MD  
Nicholas J.W. Cheshire, MD  

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<th>Time</th>
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| 8:15   | Why AAA Sac Filling Endografts Like Nellix May Be Better Devices For Endo AAA Repair: What Are Their Disadvantages  
  Venkatesh G. Ramaiah, MD |
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  Michael J. Jacobs, MD |
| 8:27   | Advantages Of The Ovation Endograft (Endologix) For AAA Repair: Why The Polymer Filled Sealing Rings Are A Better Way To Secure And Maintain A Proximal Seal: Value Of The New Alto Modification  
  David J. Minion, MD |
8:33 – 8:38 Status Report On The Endologix Nellix Endograft For EVAS: Advantages, Limitations, Precautions And When Should It Be Used  
Jeffrey P. Carpenter, MD

8:39 – 8:44 Evolution Of Nellix And EVAS: From A Single Center 295-Patient Experience: Advantages And Limitations  
Pete Holt, MD, PhD
Ian Loftus, MD

8:45 – 8:50 Panel Discussion

8:50 – 8:55 Pros And Cons Of Nellix EVAS: From An Early Enthusiast: What Is Its Future And How Does It Decrease Post-Procedure Mortality  
Andrew Holden, MBChB

8:56 – 9:01 Current Role And Value Of Nellix EVAS In A Busy EVAR Practice: How Best To Detect And Manage Failures  
Michel M.P. Reijnen, MD, PhD

9:02 – 9:07 Nellix In Nellix Procedure For Failed EVAS: Technical Challenges And Tips To Overcome Them  
Piotr Szopinski, MD, PhD

9:08 – 9:13 What Are The Definitive Advantages Of EVAS That Prompt Its Continued Use  
Daniel G. Clair, MD

9:14 – 9:19 Chimney EVAS: When Should It Be Used: Advantages And Technical Tips To Do It Safely And Effectively  
William J. Quinones-Baldrich, MD

9:20 – 9:26 Panel Discussion

9:26 – 9:40 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 57 (Grand Ballroom West, 3rd Floor)
NEW OR UPDATED ENDOVASCULAR DEVICES FOR TREATING ANEURYSMS AND OTHER LESIONS IN OR NEAR THE AORTIC ARCH (5-MINUTE TALKS)

Moderators: Rodney A. White, MD  
Ali Khoynezhad, MD, PhD

9:40 – 9:45 Update On The Nexus Off-The-Shelf Single Branch Device For Treating Lesions Involving The Entire Aortic Arch (Zone 0 Lesions): Unique Advantages, Precautions And Midterm Results  
Mario L. Lachat, MD  
Nicola Mangialardi, MD

9:46 – 9:51 Terumo Aortic 2 Inner Branched Relay Device For Treating Aortic Arch Lesions: Advantages, Limitations And Early Registry Results  
Ciro Ferrer, MD  
Piergiorgio Cao, MD
PROGRAM SCHEDULE

9:52 – 9:57  Gore Single Branched Device For Revascularizing The Left Subclavian Artery For Aortic Lesions Near The Arch Or More Complex Arch Lesions: Current Status, Advantages, Precautions And Results  
Michael D. Dake, MD  
Michel Makaroun, MD

9:58 – 10:03  Medtronic Valiant Mona LSA Single Branch Endograft For TEVAR Treatment Of Aortic Lesion Involving Or Near To The Left Subclavian Artery: Advantages, Precautions And Midterm Results  
Frank R. Arko, MD

10:04 – 10:09  More About The Valiant Mona LSA Single Branched TEVAR Device: Why Use It In Preference To A Chimney Or Periscope Parallel Graft  
Herve Rousseau, MD, PhD

10:10 – 10:15  Custom-Made Scallops In Relay TEVAR: Results Of The French “REP” Study: A Step Forward To An Off-The-Shelf Device  
Jean-Marc Alsac, MD, PhD

10:16 – 10:22  Panel Discussion

SESSION 58  (Grand Ballroom West, 3rd Floor)  
NEW OR UPDATED ENDOVASCULAR DEVICES FOR TREATING DESCENDING AORTIC LESIONS (TEVAR) AND TAAA (5-MINUTE TALKS)  
Moderators:  Ramon Berguer, MD, PhD  
Thomas S. Maldonado, MD

10:22 – 10:27  Is TEVAR Device Integrity Compromised By Low Profile Devices  
James H. Black III, MD

10:28 – 10:33  Long-Term Outcomes Of TEVAR With Low Profile Devices: Which Ones Are Durable; Which Are Not  
Giovanni F. Torsello, MD  
Giovanni Torsello, MD  
Martin J. Austermann, MD

10:34 – 10:39  How Does The New Valiant Navion Low Profile Endograft Expand The Therapeutic Options For TEVAR: Early Experience  
Ali Azizzadeh, MD

10:40 – 10:45  Valiant Navion Low Profile And Captiva Devices (From Medtronic) For TEVAR: Advantages For Various Aortic Lesions  
Fabio Verzini, MD, PhD

10:46 – 10:51  Value Of The New Low Profile Relay Pro Endograft (From Terumo Aortic) For TEVAR In Patients With Thoracic Aortic Aneurysms And Dissections: Advantages Over The Relay Plus Device  
Edward Y. Woo, MD  
Vicente Riambau, MD, PhD
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<th>Time</th>
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<tr>
<td>10:52</td>
<td>Advantages Of The Relay Plus Endograft For TEVAR: Why Does It Have A Lower Stroke Rate Than Other TEVAR Devices</td>
<td>Mahmoud B. Malas, MD, MHS, Vicente Rimbau, MD, PhD</td>
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<td>10:58</td>
<td>Value Of The Relay Pro Low Profile Device For TEVAR In Blunt Thoracic Aortic Injuries: Why It Is Advantageous</td>
<td>Benjamin W. Starnes, MD</td>
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<td>11:04</td>
<td>Advantages Of A New Gore Conformable C-Tag Endograft For TEVAR: It Has Active Proximal Angulation Control To Deal With Complex Aortic Arch Angles; And Staged Deployment To Avoid Aortic Flow Interruption And Get Accurate Positioning Without The Need For Rapid Pacing</td>
<td>Dittmar Böckler, MD, Giovanni Torsello, MD</td>
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<td>11:10</td>
<td>Panel Discussion</td>
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<td>11:17</td>
<td>Update On Worldwide Results With The Anaconda Fenestrated Endograft For Repair Of Juxta- And Pararenal AAAs: Advantages And Limitations: From The FACT Registry</td>
<td>Clark J. Zeebregts, MD, PhD</td>
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**NEW ENDOVASCULAR DEVICES TO TREAT TAAAs**

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<tr>
<td>11:23</td>
<td>New Hybrid Device (Open And Endo) To Treat TAAAs: ThoracoFlo From Terumo Aortic: How It Works, Advantages And Early Clinical Results</td>
<td>Sebastian E. Debus, MD, PhD</td>
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<td>11:29</td>
<td>The Gore TAMBE Endovascular Device To Treat TAAAs: Device Evolution, Current Status, Advantages And Results</td>
<td>Mark A. Farber, MD, Gustavo S. Oderich, MD</td>
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<td>11:35</td>
<td>The Valiant Off-The-Shelf Manifold Device (From Medtronic) For Treating TAAAs: How Does It Work, Advantages, Early Clinical Experience And Present Status</td>
<td>Murray L. Shames, MD, Patrick W. Kelly, MD</td>
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<td>11:41</td>
<td>Update On The Colt Multibranched Manifold Device For Treating TAAAs: Clinical Experience And Present Status</td>
<td>Piotr Szopinski, MD, PhD</td>
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<td>11:47</td>
<td>Physician Modifications To The Excluder Endograft To Make It Effective For Treating TAAAs: Technique And Results</td>
<td>Wayne W. Zhang, MD</td>
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<td>11:53</td>
<td>Panel Discussion</td>
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<td>12:00</td>
<td>Lunch Break – 2nd Floor Promenade Visit Exhibits And Pavilions (2nd and 3rd Floors)</td>
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SESSION 59  (Grand Ballroom West, 3rd Floor)
NEW OR UPDATED INFORMATION ON LOWER EXTREMITY PROSTHETIC GRAFTS OR STENT-GRAFTS FOR TREATMENT OF OCCLUSIVE DISEASE AND OTHER USES; VALUE OF HYBRID GRAFTS (PARTIALLY STENTED) FOR RENAL-VISCERAL DEBRANCHING (SEE ALSO SESSION 28)

Moderators:  
Enrico Ascher, MD  
Keith D. Calligaro, MD

1:00 – 1:05  
Cryopreserved Vein Allografts For Lower Extremity Bypasses: Indications, Value, Advantages And Limitations  
Robyn A. Macsata, MD

1:06 – 1:11  
Increasing Usage And Value Of Covered Stents Are Facilitated By Newly Available Devices: What Are The New Devices And What Benefits Do They Provide  
Paulo E. Ocke Reis, MD, PhD

1:12 – 1:17  
Broadening Applications And Value Of Balloon Expandable Covered Stents: The VBX Covered Stent From Gore  
W. Anthony Lee, MD

1:18 – 1:23  
Value Of The VBX Balloon Expandable Stent-Graft In Treating Challenging Aorto-Iliac Occlusive Lesions: 3-Year Results, Advantages And Limitations  
Jean M. Panneton, MD

1:24 – 1:29  
Advantages Of Balloon Expandable Covered Bridging Stents In F/B/EVAR Procedures: Which One Is Best And Why  
Mauro Gargiulo, MD  
Gianluca Faggioli, MD  
Andrea Stella, MD

1:30 – 1:35  
Positive 3-Year Results With The iCAST Balloon Expandable Covered Stents For Iliac Occlusive Disease: From The iCARUS Trial Comparing Them To VBX FLEX And Bolster Covered Stents  
John R. Laird, MD

1:36 – 1:41  
Value Of Gore Hybrid Partially Stented PTFE Stent-Graft For Renal And Visceral Debranching Procedures To Treat Complex AAAs: How To Use Them  
Francesco Setacci, MD

1:42 – 1:48  
Panel Discussion
SESSION 60  (Grand Ballroom West, 3rd Floor)
NEW OR UPDATED DEVICES FOR LOWER EXTREMITY TREATMENTS: STENTS, BALLOONS,
TACKS AND ATERECTOMY DEVICES
(VEITH/TCT Co-Branded Session)

**Moderators:**  
Dierk Scheinert, MD  
Fred A. Weaver, MD

1:48 – 1:53  
2-Year Follow-Up Findings And Results From The Lutonix BTK DCB Global Registry  
Michael K.W. Lichtenberg, MD  
Dierk Scheinert, MD

1:53 – 1:58  
Novel Angioplasty Balloon With Integrated Distal Embolic Protection Filter  
(Vanguard System From Contego Medical) For Use With Lesions Having High Embolic Potential: How It Works And Results Of The ENTRAP Study  
Thomas Zeller, MD

1:58 – 2:03  
Update On Results And Value Of The Chocolate Touch DCB (QT Vascular - Medtronic) To Minimize Dissection During Balloon Angioplasty  
Jos C. van den Berg, MD, PhD  
Mehdi H. Shishehbor, DO, MPH, PhD

2:03 – 2:08  
The Biomimics 3D Helical Swirling Flow Inducing Stent (From Veryan Medical):  
2-Year Results Of The MIMICS-2 Trial Show It Works Well For Complex Fempop Lesions: Now FDA Approved  
Thomas Zeller, MD  
Peter Gaines, MD  
Timothy M. Sullivan, MD  
Michael K.W. Lichtenberg, MD

2:08 – 2:13  
What Is The Ideal Stent To Use When Fempop Angioplasty With A DCB Fails Early; Late  
Stefan Müller-Hülsbeck, MD

2:13 – 2:18  
4-Year Results With The Smart Flex Stent (From Cordis-Cardinal Health): Advantages And Tips For Use With Complex Fempop Lesions: From The REALISTIC Trial  
Peter C.J. Goverde, MD

2:18 – 2:23  
The Tigris Dual Component Stent (PTFE/Nitinol – From Gore): Is It Better And Why: Results From Multicenter Registries  
Maria Antonella Ruffino, MD  
Martin Werner, MD

2:23 – 2:29  
Panel Discussion

2:29 – 2:34  
Tack Optimized Balloon Angioplasty With The Tack Endovascular System (From Intact Vascular) To Eliminate Dissections After Angioplasty: How Does This Device Work; Why It Is Better Than Stents; The TOBA Trials Show It Works Above The Knee: Now FDA Approved  
Peter A. Schneider, MD  
Marianne Brodmann, MD
2:34 – 2:39  How Well Does The Tack Endovascular System Work With BTK Balloon Angioplasty: TOBA II BTK-Pivotal Trial Results For A BTK Tack Implant
Patrick J. Geraghty, MD
George L. Adams, MD

2:39 – 2:44  Management Of Arterial Dissections Following PTA Is Cost Effective: Results Of An Analysis With The Intact (Tack) Vascular Device
Michael R. Jaff, DO

PROGRESS IN AHERECTOMY

2:44 – 2:49  The Phoenix Atherectomy System (From Volcano-Philips): What Makes It Different And Possibly Better Than Other Atherectomy Devices
Miguel F. Montero-Baker, MD

2:49 – 2:54  IVUS Directed Atherectomy Of BTK Lesions With The Phoenix Atherectomy (ATX) Device: Why It Works Better Than Other ATX Devices: Technical Tips And Results Of The PRESTIGE PILOT Trial
Michael K.W. Lichtenberg, MD
Thomas Zeller, MD

2:54 – 2:59  Jetstream Atherectomy (Boston Scientific) With Active Aspiration And DCBs For Use With DCBs For Complex SFA Lesions: What Makes It Different And Advantageous: Technical Tips
Richard J. Powell, MD

2:59 – 3:04  Value Of Lithotripsy, Orbital Atherectomy (From CSI) And DCBs For Long Calcified BTK Occlusive Lesions: How Do They Work In Concert And Why Do They Promise Good Results
Erwin Blessing, MD

3:04 – 3:09  Improvements In The Turbohawk Turbopowered Laser Atherectomy Device (From Medtronic): What Makes It Different: How Does It Work With Various Lesion Pathologies: 12-Month Results And IVUS Evaluations
George L. Adams, MD

3:09 – 3:15  Panel Discussion

3:15 – 3:25  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 61  (Grand Ballroom West, 3rd Floor)
UPDATES ON ANCHORING DEVICES (ENDOANCHORS) TO PREVENT OR TREAT ENDOLEAKS WITH EVAR OR TO PREVENT DEVICE MIGRATION

**Moderators:**
- William D. Jordan, Jr., MD
- Jean-Paul de Vries, MD, PhD

### ENDOANCHORS AND EVAR

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>3:31-3:36</td>
<td>When Are Endoanchors Indicated And When Are They Contraindicated:  Causes Of Failure And Technical Tips For Optimal Use</td>
<td>Jean-Paul de Vries, MD, PhD</td>
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<tr>
<td>3:37-3:42</td>
<td>Computational Analysis Of AAA Neck Seal Zone Preservation With EVAR And Predicting The Need For Endoanchors To Prevent Migration With Imperfect Necks: Is It Valid</td>
<td>Ross Milner, MD</td>
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<tr>
<td>3:43-3:48</td>
<td>Sac Regression Is Important, And Endoanchors May Be Of Benefit In Hostile Necks</td>
<td>Marc L. Schermerhorn, MD</td>
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<td>3:49-3:54</td>
<td>How Can 3D Fusion Imaging Help In Precision Deployment Of Endoanchors: Does It Improve Outcomes</td>
<td>Giovanni Pratesi, MD</td>
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<td>4:01-4:06</td>
<td>When Can Endoanchors Placed Secondarily Fix Established Type 1A Endoleaks After EVAR: And When Can’t They: What Is The Durability Of Endoanchor Fixes</td>
<td>Jean-Paul de Vries, MD, PhD</td>
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### ENDOANCHORS AND TEVAR

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<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker(s)</th>
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<tr>
<td>4:07-4:12</td>
<td>Value Of Endoanchors To Fix Type 1 Endoleaks After TEVAR</td>
<td>Piotr M. Kasprzak, MD</td>
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<td>4:13-4:18</td>
<td>Value Of Endoanchors With TEVAR: They Decrease The Incidence Of Type 1 Endoleaks And Migration: When Should They Be Used</td>
<td>Jean M. Panneton, MD</td>
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<tr>
<td>4:19-4:25</td>
<td>Panel Discussion</td>
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SESSION 62  (Grand Ballroom West, 3rd Floor)
NEW OR IMPROVED DEVICES FOR REMOVING DISEASE RELATED OR IATROGENIC CLOT;
NEW DEVICES FOR INTRA-ARTERIAL EMBOLIZATION
(4 ¾- MINUTE TALKS)

Moderators:  Frank R. Arko, MD
James F. Benenati, MD

CLOT REMOVING DEVICES

4:25 – 4:30  Inari ClotTriever Device For Quick Removal Of Large Amounts Of Intravascular Clot
From Large Arteries And Veins: How Does It Work And Advantages
Thomas S. Maldonado, MD

4:30 – 4:35  Value Of The Rotarex Device (Straub Medical) For Removing Thrombus And
Atheromatous Material From Fempop Occlusions: Advantages, Limitations And
Technical Tips
Michael K.W. Lichtenberg, MD
Christian Wissgott, MD

4:35 – 4:40  New Findings For Removing Clot With Microbubbles Ultrasound And Thrombolytic
Drugs: Its Safer And More Efficient Than Other Lytic Methods
Kak Khee Yeung, MD, PhD

4:40 – 4:45  Latest Innovations And Advances In Endovascular Power Clot Removal/Aspiration:
How They Work And Why They Work Better Than Older Devices
James F. Benenati, MD

4:45 – 4:50  Pros And Cons Of Percutaneous Clot Removal Techniques: When Do They Work And
When Don’t They
Michele Rossi, MD

4:50 – 4:55  Update On The Treatment Of Acute Limb Ischemia: Advantages And Limitations Of
The New Endovascular Devices: Are Open Techniques Ever Required
Jos C. van den Berg, MD, PhD

4:55 – 5:00  The New Endovascular Pharmaco-Mechanical Thrombectomy Devices: How Each
Works And Advantages Of Each Device And When Is Each Best
Guillermo A. Escobar, MD

5:00 – 5:06  Panel Discussion

Works And How Best To Use It: Technical Tips And Limitations
Claudio J. Schonholz, MD
Joshua D. Adams, MD

5:11 – 5:16  Multiple Uses Of The Indigo Percutaneous Clot Aspiration System (From Penumbra):
How It Works And Why It Simplifies Treatment And Improves Outcomes
Frank R. Arko, MD
5:16 – 5:21 Value Of Arterial Thrombolysis In Patients With Contraindications: How To Do It With Reasonable Safety
Anil P. Hingorani, MD

5:21 – 5:26 Improving Outcomes Of Treatment Of Long Segment Fempop Chronic Occlusions (CTOs) With Initial Indigo Clot Aspiration Before Definitive Use Of A DCB Or Stent
Mazin Foteh, MD

ADVANCES IN EMBOLOTHERAPY

5:27 – 5:32 Mechanical Percutaneous Aspiration Thrombectomy With The Indigo System Is Safe And Effective In Treating Acute Limb Ischemia: When Is It Not: From the Multicenter INDIAN Registry
Gianmarco de Donato, MD
Carlo Setacci, MD

5:33 – 5:38 Endovascular Treatment Of Visceral And Renal Aneurysms With Detachable Coils: Technical Tips, Limitations And Results
Ripal T. Gandhi, MD

5:39 – 5:44 How To Manage Serious Hemorrhage With Newer Coils And Liquid Embolic Agents
Jacob Cynamon, MD

5:45 – 5:52 Panel Discussion

End of Program H
PROGRAM I  (SESSIONS 63-70)
SUPERFICIAL VENOUS DISEASE

Trianon Ballroom, 3rd Floor

Course Leaders:  Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD

SESSION 63  (Trianon Ballroom, 3rd Floor)
VENOUS CLINICAL EXAMINATION AND HEMODYNAMICS

Moderators:  Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Thomas W. Wakefield, MD

7:00 – 7:04  Introduction To Veins At VEITH
Jose I. Almeida, MD, RPVI, RVT

7:05 – 7:10  Classification Of Chronic Venous Disease: CEAP, VCSS And Beyond
Marc A. Passman, MD

7:11 – 7:16  VCSS Versus Villata – Pros And Cons As An Outcome Measure
Alun H. Davies, MA, DM, DSc

7:17 – 7:22  Physiology Of Venous Return
Brajesh K. Lal, MD

7:23 – 7:28  Analysis Of Biofluids From Patients With CVD
Sarah Onida, MD, PhD

7:29 – 7:34  Lower Limb Venous Kinetics And Impact On Venous Drainage
Sergio Gianesini, MD, PhD

7:35 – 7:40  An Algorithm To Predict Disease Severity In C2 Patients
Lowell S. Kabnick, MD, RPhS

7:41 – 7:46  Evidence Summary On The Pathophysiology Of Varicose Veins
Thomas W. Wakefield, MD

7:47 – 7:52  Understanding Effects Of External Positive And Negative Pressure On The Venous System
Seshadri Raju, MD

7:53 – 7:58  Non-Venous Causes Of The Swollen Extremity
Andrea T. Obi, MD

7:59 – 8:04  Superficial Reflux With Obstructed Deep Veins: When And When Not To Treat
Jose I. Almeida, MD, RPVI, RVT

8:05 – 8:10  Quality Of Life Tools Reflect Disease Severity, But They Can Be Improved
Alun H. Davies, MA, DM, DSc
8:11 – 8:16  Panel Discussion

SESSION 64  (Trianon Ballroom, 3rd Floor)
VENOUS IMAGING TECHNIQUES

Moderators:  Jose I. Almeida, MD, RPVI, RVT
             Paul J. Gagne, MD

8:17 – 8:22  Identifying Reflux Pathways With Duplex Ultrasound Mapping
             Neil M. Khilnani, MD

8:23 – 8:28  Iliocaval Duplex Ultrasound With Image Optimization
             Jan M. Sloves, RVT

8:29 – 8:34  Getting A Look At Inflow With Duplex Ultrasound Prior To Endovascular
             Reconstruction Of Post-Thrombotic Iliocaval Disease
             Jose I. Almeida, MD, RPVI, RVT

8:35 – 8:40  MRV And Major Venous Interventions
             Mark G. Davies, MD

8:41 – 8:46  Single Center Retrospective Review Of Patients With Iliac Thrombosis Who
             Underwent CT And DUS .... Showing The Limitations Of DUS
             Heron E. Rodriguez, MD

8:47 – 8:52  Value Of IVUS And Other Techniques To Improve The Diagnosis And Treatment Of
             Iliofemoral Occlusion
             Erin H. Murphy, MD

8:53 – 8:58  Detailed Anatomy Of The Gastrocnemius And Soleus Veins Based On CT-Venography
             Evgeny Shaydakov, MD, PhD

8:59 – 9:04  The VIDIO Trial Comparing IVUS Versus Multiplanar Venogram For Diagnosing
             Iliofemoral Vein Obstruction
             Paul J. Gagne, MD

9:05 – 9:10  Transillumination Phlebscopy: What Do We Need To Avoid
             Gutenberg A. Gurgel, MD

9:11 – 9:16  Ambulatory Venous Pressure, Air Plethysmography, And The Role Of Calf Venous
             Pump In Chronic Venous Disease
             Seshadri Raju, MD

9:17 – 9:22  Panel Discussion
SESSION 65  (Trianon Ballroom, 3rd Floor)
SUPERFICIAL VEIN TREATMENT STRATEGIES AND TECHNIQUES

Moderators:  Lowell S. Kabnick, MD, RPhS
             Saum A. Rahimi, MD

9:23 – 9:28  Venous Drugs And Do They Work – The Colombian Experience
            Jorge H. Ulloa, MD

9:29 – 9:34  What Drugs Do I Recommend For Symptomatic Venous Disease
            Alberto C. Duque, MD

9:35 – 9:40  “Choosing Wisely” Items For Chemical Or Thermal Ablation In The Treatment Of The
            Incompetent Saphenous Veins And Recurrence
            Claudine Hamel-Desnos, MD

9:41 – 9:46  Truncal Vein Diameters Should Not Be Used As A Rationing Tool
            Sarah Onida, MD, PhD

9:47 – 9:52  Combined Ablation Plus Phlebectomy Is Associated With Improvements In Venous
            Outcomes
            Nicholas H. Osborne, MD, MS

9:53 – 9:58  Long-Term (25 Years) Results Of Venopreserving Operations
            Evgeny Shaydakov, MD, PhD

9:59 – 10:04 Polidocanol Foam Sclerotherapy Of Lymphoceles After Varicose Vein Surgery: An
            Effective And Safe First-Choice Treatment
            Lourdes Reina, MD

10:05 – 10:10 Do You Need To Treat EHIT 2
            Lowell S. Kabnick, MD, RPhS

10:11 – 10:16 SVT In The Pregnant Patient
            Ellen D. Dillavou, MD

10:17 – 10:22 Saphenous Vein Histopathology 5.5 Years After Cyanoacrylate Closure
            Jose I. Almeida, MD, RPVI, RVT

10:23 – 10:28 Radiofrequency And Laser Vein Ablation For Patients On Anticoagulation Is Safe,
            Effective, And Durable
            Glenn Jacobowitz, MD

10:29 – 10:34 Panel Discussion

SESSION 66  (Trianon Ballroom, 3rd Floor)
THERMAL AND NON-THERMAL ABLATION

Moderators:  Lowell S. Kabnick, MD, RPhS
             Kathleen D. Gibson, MD

10:35 – 10:40 Ultrasound Guided Foam Sclerotherapy: What We Should Know
            Jean Luc Gerard, MD
10:41 – 10:46  Is Thermal Ablation Obsolete  
Kathleen D. Gibson, MD

10:47 – 10:52  Radiofrequency Ablation: Something New  
Lowell S. Kabnick, MD, RPhS

10:53 – 10:58  VenaSeal™ Closure System Post Procedure Care  
Brian Lee Ferris, MD

10:59 – 11:04  Proprietary Polidocanol Microfoam: What We Should Know  
Lowell S. Kabnick, MD, RPhS

11:05 – 11:10  SECURE Trial Update  
Mark A. Adelman, MD

11:11 – 11:16  New Venous Closure Devices: Mechanical  
Lowell S. Kabnick, MD, RPhS

11:17 – 11:22  Contraindications And Limits: MOCA  
Michel M.P. Reijnen, MD, PhD

11:23 – 11:28  Contraindications And Limits: Laser  
Jose I. Almeida, MD, RPVI, RVT

11:29 – 11:34  Contraindications And Limits: Radiofrequency Ablation  
Alan M. Dietzek, MD, RPVI

11:35 – 11:40  Panel Discussion

SESSION 67  (Trianon Ballroom, 3rd Floor)  
SPIDER VEINS, TRUNCAL VEINS, TRIBUTARY VEINS, EXOTIC VEIN TREATMENT  
Moderators:  Edward G. Mackay, MD  
Jean Luc Gerard, MD

11:41 – 11:46  Morel Lavallée Syndrome  
Jean Luc Gerard, MD

11:47 – 11:52  Laser Or Ohmic Devices For Telangiectasia: When And Why  
Edward G. Mackay, MD

11:53 – 11:58  Phlebectomy: Step By Step  
Saum Rahimi, MD

Sarah Onida, MD, PhD

12:05 – 12:10  Foam Therapies (PCF Vs PEM): When To Use And Does It Make A Difference  
Edward G. Mackay, MD

12:11 – 12:16  How To Treat Labial Varices: Sclerotherapy, USG Sclerotherapy And/Or Phlebectomy  
Ellen D. Dillavou, MD

12:17 – 12:22  Should All Saphenous Recanalizations Be Treated  
Kathleen D. Gibson, MD
PROGRAM SCHEDULE

12:23 – 12:28  Laser And/Or Sclerosant For Cosmetic Veins: How And Why  
Gutenberg A. Gurgel, MD

12:29 – 12:34  Panel Discussion

12:35 – 1:00  Lunch Break – 2nd Floor Promenade  
Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 68  (Trianon Ballroom, 3rd Floor)  
VENOUS SOCIETAL AND GOVERNANCE

Moderators:  
Kathleen J. Ozsvath, MD  
Harold J. Welch, MD

1:00 – 1:05  CMS Policy Update On Nonthermal Ablation  
Harold J. Welch, MD

1:06 – 1:11  The Future Of Venous Reimbursement In A Non-Fee For Service Environment  
Thomas F. O'Donnell, Jr., MD

1:12 – 1:17  What Are The Next Venous Trials  
Manj S. Gohel, MD

1:18 – 1:23  Diametric Opposite CMS Trends In Arterial And Venous Procedures: Implications For Manpower And Training  
Thomas F. O'Donnell, Jr., MD

1:24 – 1:29  Is The Vein Center Accreditation Important For MACRA  
Kathleen J. Ozsvath, MD

1:30 – 1:35  Update On Deep Venous Accreditation  
Stephen F. Daugherty, MD, RVT, RPhS

1:36 – 1:41  Appropriateness In Venous Surgery - What’s The Problem  
Peter F. Lawrence, MD

1:42 – 1:47  Results Of Appropriateness Criteria (AVF) I  
Elna M. Masuda, MD

1:48 – 1:53  Results Of Appropriateness Criteria (AVF) II  
Kathleen J. Ozsvath, MD

1:54 – 1:59  Can VQI Be Used As A Benchmark For Setting Ethical Standards  
Nicholas H. Osborne, MD, MS

2:00 – 2:05  Should There Be A CPT Code For Physician Compounded Foam  
Stephen F. Daugherty, MD, RVT, RPhS

2:06 – 2:11  Panel Discussion
SESSION 69  (Trianon Ballroom, 3rd Floor)
TRUNCAL ABLATION: TIPS AND TRICKS (VIDEOS)

Moderators:  
Jose I. Almeida, MD, RPVI, RVT  
Kursat A. Bozkurt, MD

2:12 – 2:17  
VenaSeal™ Truncal Ablation  
Kathleen D. Gibson, MD

2:18 – 2:23  
Turkish Glue  
Kursat A. Bozkurt, MD

2:24 – 2:29  
Laser Perforator Ablation  
Jose I. Almeida, MD, RPVI, RVT

2:30 – 2:35  
RF Ablation  
Jose I. Almeida, MD, RPVI, RVT

2:36 – 2:41  
Laser Truncal Ablation  
Lowell S. Kabnick, MD, RPhS

2:42 – 2:47  
Varithena Truncal Ablation  
Edward G. Mackay, MD

2:48 – 2:53  
Clarivein Truncal Ablation  
Edward G. Mackay, MD

2:54 – 2:59  
Panel Discussion

SESSION 70  (Trianon Ballroom, 3rd Floor)
VENOUS CLINICAL TRIALS, LYMPHATIC, SUPERFICIAL VEIN TREATMENT STRATEGIES

Moderators:  
Thomas F. O'Donnell, Jr., MD  
Raghu Kolluri, MD

3:00 – 3:05  
Why Graduated Compression Hose Should Not Be An Insurance Requirement  
Thomas F. O'Donnell, Jr., MD

3:06 – 3:11  
Thrombosis Prophylaxis Following Venous Ablation  
Joseph A. Caprini, MD

3:12 – 3:17  
RCT Reviews Using Turkish Glue  
Kursat A. Bozkurt, MD

3:18 – 3:23  
Varithena® VLU Registry: The Effects Of Polidocanol Endovenous Microfoam On Wound Healing And Recurrence  
Raghu Kolluri, MD

3:24 – 3:29  
RFA Versus GSV Stripping In Spain: 3-Year Follow-Up  
Lourdes Reina, MD

3:30 – 3:35  
Summary Of Thermal Ablation  
Bo G. Eklof, MD, PhD
3:36 – 3:41 Randomized Controlled Study Of EVLA And Foam In The SSV - Fovellass Study: 2-Year Results
Claudine Hamel-Desnos, MD

3:42 – 3:47 Results Of The EVRA Randomized Clinical Trial
Alun H. Davies, MA, DM, DSc

3:48 – 3:53 Overview Of Lymphatic Imaging Techniques
Maxim Itkin, MD

3:54 – 3:59 Evidence Based Compression Recommendations For Lymphedema
Joseph A. Caprini, MD

4:00 – 4:05 Phlebolymphedema: Hallmark Of Combined Insufficiency Of Venous-Lymphatic System
Byung-Boong (B.B.) Lee, MD

4:06 – 4:11 Pneumatic Compression For Lymphedema: Continued Benefits
Thomas S. Maldonado, MD

4:12 – 4:17 Panel Discussion

Moderators: Peter J. Pappas, MD
Joseph A. Caprini, MD

EXAMINING THE EVIDENCE I

4:18 – 4:23 When To Use Inelastic Compression
Joseph A. Caprini, MD

4:24 – 4:29 Preliminary Data: HIFU For Venous Disease Treatment
Alfred M. Obermayer, MD

4:30 – 4:35 Varicose Vein Procedures In The Very Elderly Patients: How To Do It And Avoid Complications
Alberto C. Duque, MD

4:36 – 4:41 Chronic Venous Insufficiencies Outcomes Based On BMI And CEAP
Peter J. Pappas, MD

4:42 – 4:47 Is Saphenous Vein Stripping A Cost-Effective Treatment
Lourdes Reina, MD

4:48 – 4:53 Clinical Effectiveness Of MOCA Versus RF For Symptomatic GSV Or SSV Reflux
Peter J. Pappas, MD

4:54 – 4:59 ABRE IDE STUDY: Overview Of Baseline Demographics
Erin H. Murphy, MD

5:00 – 5:05 A Pathologic Perforator May Predict The Recurrence Of An Ipsilateral Central Venous Stenosis
Mikel Sadek, MD

5:06 – 5:11 Panel Discussion
### EXAMINING THE EVIDENCE II

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<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker(s)</th>
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<tr>
<td>5:12</td>
<td>Can We Predict And Avoid The Evolution Of Chronic Venous Disease</td>
<td>Armando Mansilha, MD, PhD</td>
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<td>5:18</td>
<td>Investigating Venous Elasticity As A Biomarker In Lower Extremity Veins Using Shear-Wave Elastography And Force-Controlled Ultrasound</td>
<td>Joseph D. Raffetto, MD</td>
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<td>5:24</td>
<td>C2 Progressive</td>
<td>Mark H. Meissner, MD</td>
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<td>5:30</td>
<td>Should We Consider Diagnostic Deep Venous IVUS During Saphenous Vein Ablation</td>
<td>Todd Berland, MD</td>
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<td>5:36</td>
<td>Looking For Reflux In All The Wrong Places</td>
<td>Seshadri Raju, MD</td>
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<td>5:42</td>
<td>Turkish Glue Versus RFA: 5-Year Results</td>
<td>Fatih Islamoglu, MD</td>
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<td>5:48</td>
<td>Success Rate And Factors Predictive Of Redo RFA Of Perforator Veins</td>
<td>Anil P. Hingorani, MD</td>
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<td>5:54</td>
<td>Lymphocele Development And Treatment After Varicose Vein Intervention</td>
<td>Joann Lohr, MD</td>
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<td>6:00</td>
<td>Panel Discussion</td>
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End of Program I
FRIDAY, NOVEMBER 22, 2019

6:00 A.M. General Registration - Rhinelander Gallery, 2nd Floor
6:00 A.M. Faculty Registration - Morgan Suite, 2nd Floor
6:15 A.M. Continental Breakfast - Rhinelander Gallery, 2nd Floor

CONCURRENT FRIDAY PROGRAMS

Program J  (Sessions 71-78)
New Developments In The Prevention And Treatment Of Spinal Cord Ischemia (SCI) With TEVAR And TAAA Repairs; Carotid Disease And Treatment Related Topics: New And Improved Devices And Techniques (TCAR And Mesh Covered Stents), Medical Treatment, Influence On Cognition, History Of CAS, Timing Of CEA And CAS, Management Of Asymptomatic Carotid Stenosis (ACS), CAS Versus CEA, Improved Carotid Techniques, RCT Updates, Continuing Controversies; Endo Treatment For Erectile Dysfunction; Carotid Patch Infections And Aneurysms; Percutaneous Closure Devices And Wound Care
6:40 A.M. – 5:42 P.M.  Grand Ballroom East, 3rd Floor

Program K  (Sessions 79-86)
New Developments In The Treatment Of Popliteal Diseases And Aneurysms; Advances In Treating Arterial And Graft Infections; Improvements In: Vascular Imaging And Hybrid Treatment Suites; Thoracic Outlet Syndrome Treatments; Recorded Live Complex Endovascular Cases From Münster, Germany And The Mayo Clinic; Updates On Medical Treatments And Treatment Of Rare Or Unusual Vascular Diseases And Vascular Trauma
7:00 A.M. – 5:52 P.M.  Grand Ballroom West, 3rd Floor

Program L  (Sessions 87-94)
Deep Venous Disease
7:00 A.M. – 6:00 P.M.  Trianon Ballroom, 3rd Floor

Course Leaders: Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD
PROGRAM J (SESSIONS 71-78)

NEW DEVELOPMENTS IN THE PREVENTION AND TREATMENT OF SPINAL CORD ISCHEMIA (SCI) WITH TEVAR AND TAAA REPAIRS; CAROTID DISEASE AND TREATMENT RELATED TOPICS: NEW AND IMPROVED DEVICES AND TECHNIQUES (TCAR AND MESH COVERED STENTS), MEDICAL TREATMENT, INFLUENCE ON COGNITION, HISTORY OF CAS, TIMING OF CEA AND CAS, MANAGEMENT OF ASYMPTOMATIC CAROTID STENOSIS (ACS), CAS VERSUS CEA, IMPROVED CAROTID TECHNIQUES, RCT UPDATES, CONTINUING CONTROVERSIES; ENDO TREATMENT FOR ERECTILE DYSFUNCTION; CAROTID PATCH INFECTIONS AND ANEURYSMS; PERCUTANEOUS CLOSURE DEVICES AND WOUND CARE

Grand Ballroom East, 3rd Floor

SESSION 71 (Grand Ballroom East, 3rd Floor)

NEW DEVELOPMENTS IN THE PREVENTION AND TREATMENT OF SPINAL CORD ISCHEMIA (SCI) ASSOCIATED WITH TEVAR AND THE TREATMENT OF TAAAs (5-MINUTE TALKS)

**Moderators:** Richard P. Cambria, MD
Hazim J. Safi, MD

Hamdy Awad, MD

6:46 – 6:51 SCI In The Physician-Sponsored IDEs For F/BEVAR To Treat Complex AAA And TAAAs: Incidence, Optimal Prevention Techniques And Lessons Learned
Adam Beck, MD

6:52 – 6:57 Maintaining Euglycemia During Endovascular TAAA Repairs Seems To Decrease The Incidence And Severity Of SCI: What Is The Evidence And What Is The Mechanism
Jade S. Hiramoto, MD

6:58 – 7:03 Update On Minimally Invasive Intercostal Segmental Artery Coil Embolization (MIS2ACE) To Produce Ischemic Preconditioning To Prevent SCI With TAAA Repair: Clinical Experience And Status Of The PAPA- ARTIS RCT
Christian D. Etz, MD, PhD
Daniela Branzan, MD

7:04 – 7:09 Oversized EMBO Aortic Stent-Graft To Occlude The Origins Of Intercostal Arteries To Produce Ischemic Preconditioning Of The Spinal Cord Prior To TAAA Repair And Prevent SCI: How Does It Work And Updated Experience
Björn Sonesson, MD, PhD
7:10 – 7:15 How Can Cerebrospinal (CSF) Fluid Analysis Help In The Management Of SCI After TAAA Repair: Can It Indicate Prognosis
   Bijan Modarai, PhD, FRCS

   Michel J. Bosiers, MD

7:22 – 7:27 What Is New In The Prevention Of SCI During Open And Endo TAAA Repairs: When CSF Drainage: When Not And How To Make It Safe
   Germano Melissano, MD
   Roberto Chiesa, MD

7:28 – 7:33 Preoperative Spinal Drain Placement Does Prevent SCI In Endovascular TAAA And Thoracic Aneurysm Repairs Based On The Results Of A Larger Multicenter Propensity Matched Analysis
   James H. Black III, MD

   Michael J. Jacobs, MD
   Geert Willem H. Schurink, MD, PhD

7:40 – 7:45 Value Of Near Infrared Spectrometry (NIRS) Monitoring Of Spinal Muscles Oxygenation To Reflect SCI During TAAA Repairs: How It Works And Updated Experience
   Christian D. Etz, MD, PhD

7:46 – 7:51 Progress In Preventing SCI During Endo TAAA Repairs: Value Of NIRS Monitoring To Guide Temporary Sac Perfusion And Staging: Complications Of Spinal Fluid Drainage And How To Minimize Them
   Gustavo S. Oderich, MD

7:52 – 8:00 Panel Discussion

SESSION 72 (Grand Ballroom East, 3rd Floor)
ADVANCES IN THE TREATMENT OF CAROTID STENOSIS: MESH COVERED STENTS FOR CAROTID ARTERY STENTING (CAS) AND UPDATE ON TRANSCERVICAL CAROTID ARTERY REVASCULARIZATION (TCAR) FOR CAS

Moderators: Frank J. Veith, MD
            Klaus D. Mathias, MD

NEW DEVELOPMENTS IN MESH COVERED STENTS

8:00 – 8:05 Update On The 3 Mesh Covered Stents For CAS: What Are The Differences Between Them And Overview Of The Status Of Their Safety And Efficacy
   Max Amor, MD
<table>
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<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 8:06   | Update On The C-Guard Micronet Mesh Covered Stent For CAS: Longer Term Results: Advantages And Are There Late Downsides Like ISR Or Late Thrombosis  
Piotr Musialek, MD, DPhil |
| 8:12   | Value And Limitations Of Mesh Covered Stents For CAS In Symptomatic And Asymptomatic Patients: 6-Year Results: Are ISR And Thrombotic Occlusions A Problem: Technical Tips To Optimize Their Use  
Stefan Müller-Hülsbeck, MD |
| 8:18   | Randomized Controlled Trial (RCT) Of CAS With C-Guard Mesh Covered Stent Versus Wallstent: Is There A Difference In Perioperative Strokes Or DW-MRI Brain Lesions Up To 12 Months: The IRON-GUARD Study  
Laura Capoccia, MD, PhD |
| 8:24   | What Value Will Mesh Covered Stents Have In Improving CAS Outcomes: Is There A Downside  
L. Nelson Hopkins, MD |
| 8:30   | Panel Discussion                                                       |
|        | **TCAR RELATED TOPICS**                                                |
| 8:36   | ROADSTER 2 Trial Shows Low Stroke Risk (0.7%) With TCAR (Silk Road Medical) Even With Inexperienced Operators And In High Risk Patients With High Risk Lesions  
Vikram S. Kashyap, MD  
Christopher J. Kwolek, MD  
Peter A. Schneider, MD  
Richard P. Cambria, MD |
| 8:42   | TCAR Outcomes Compare Favorably With Those Of CEA Even In Symptomatic Medically High Risk Patients: A Propensity Matched Study Of 5160 Patients From The SVS VQI Registry  
Mahmoud B. Malas, MD, MHS  
Marc L. Schermerhorn, MD |
| 8:48   | DEBATE: TCAR Is Not Safer Than Transfemoral CAS: Based On Results From A Multicenter Registry  
Thomas G. Brott, MD |
| 8:54   | DEBATE: Not So: TCAR Is Safer Than Transfemoral CAS Especially In Older (>77) High Risk Patients With High Risk Lesions: TCAR Should Be The Standard Of Care For Invasive Treatment  
Mahmoud B. Malas, MD, MHS |
| 9:00   | DEBATE: Not So: In Experienced Hands And With Appropriate Precautions Transfemoral CAS Will Be The Best Invasive Treatment For Most Patients  
Giancarlo Biamino, MD, PhD |
| 9:06   | Why TCAR Should Replace Transfemoral CAS And Why It Won’t  
Venkatesh G. Ramaiah, MD |
9:12 – 9:17  DEBATE: Why TCAR Should Replace CEA And Transfemoral CAS For Carotid Stenosis Patients Justifiably Requiring Invasive Treatment  
Wesley S. Moore, MD  
9:18 – 9:23  DEBATE: Not So: Why CEA Should Remain The Standard Of Care For Carotid Stenosis Patients Requiring Invasive Treatments  
Ross Naylor, MD  
9:24 – 9:32  Panel Discussion  
9:32 – 9:42  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)  

SESSION 73  (Grand Ballroom East, 3rd Floor)  
MORE CAROTID RELATED TOPICS: MORE ON TCAR; BEST MEDICAL TREATMENT (BMT) FOR CAROTID DISEASE AND BMT’S IMPACT ON INVASIVE TREATMENTS; THE EFFECT OF CAROTID DISEASE AND ITS TREATMENT ON COGNITION  
Moderators:  Ross Naylor, MD  
Glenn M. LaMuraglia, MD  
9:42 – 9:47  Technical Tips For Optimal Performance Of TCAR: Pitfalls Of And Contraindications To TCAR  
Vikram S. Kashyap, MD  
Richard P. Cambria, MD  
9:48 – 9:53  Favorable TCAR Results In Patients Over 80  
Joseph J. Ricotta II, MD, MS  
9:54 – 9:59  Cost Comparison Of TCAR, CEA And Transfemoral CAS  
Richard J. Powell, MD  

MEDICAL TREATMENTS RELATED TO CAROTID STENOSIS  
10:00 – 10:05  Good Medical Treatment (With PCSK-9 Inhibitors) Can Control And Shrink Carotid Plaques: How Low Should The LDL-C Be Pushed: Will Patients Really Needing CAS Or CEA Vanish  
Thomas G. Brott, MD  
10:06 – 10:11  What Is Best Medical Treatment For Patients And Arteries With Carotid Stenosis: How To Render Most Plaques Harmless: Value Of Statins, Ezetimibe And Diet; Optimal LDL-C Level To Strive For  
J. David Spence, MD
CAROTID STENOSIS AND COGNITION

10:12 – 10:17  Asymptomatic Carotid Stenosis (ACS) Is Associated With Cognitive Dysfunction, Impaired Mobility And Increased Fall Rates: Is There Any Evidence That CEA Or CAS Will Improve These Impairments: Will CREST 2 Provide Answers
   Brajesh K. Lal, MD

10:18 – 10:23  Does CEA For ACS Prevent Dementia 10-25 Years Later: Findings From The ACST RCT
   Alison Halliday, MS, FRCS

10:24 – 10:31  Panel Discussion

SESSION 74  (Grand Ballroom East, 3rd Floor)
MORE CAROTID RELATED TOPICS: CONTROVERSIES OVER INVASIVE TREATMENTS OF ASYMPTOMATIC PATIENTS WITH CAROTID STENOSIS (ACS) AND OPTIMAL TIMING OF INVASIVE CAROTID TREATMENTS AFTER SYMPTOM ONSET
Moderators:  Ali F. AbuRahma, MD
             Frank J. Veith, MD

TREATMENT OF ACS – A MEGA-DEBATE

10:31 – 10:36  DEBATE: What % Of Patients With ACS Need Invasive Treatment With CEA Or CAS: 0% - Such Treatment Causes More Harm Than Providing Benefit
   Anne L. Abbott, MD, PhD

10:37 – 10:42  DEBATE: Which Patients With ACS Can Justifiably Be Treated Invasively: It Is A Small Percentage (<5%): How Can They Be Identified
   J. David Spence, MD

10:43 – 10:48  DEBATE: The Low Stroke Risk (~1% Per Year) In Patients With Severe ACS Prior To Intervention Or Only Treated Medically In A Large Health Care System Study (3855 Patients) Indicates That CEA And CAS Cannot Do Better
   Robert W. Chang, MD
   Jeffrey H. Hsu, MD

10:49 – 10:54  DEBATE: The Case For Treating ~20% Of High Grade ACS Patients With CEA, TCAR Or CAS: How Can They Be Identified
   Richard P. Cambria, MD

10:55 – 11:00  DEBATE: The Case For Treating >20% Of Patients With High Grade ACS Invasively By CEA, TCAR Or CAS: How Can They Be Selected
   Peter A. Schneider, MD

11:01 – 11:06  Panel Discussion
OPTIMAL TIMING OF CEA AND CAS AFTER SYMPTOM ONSET

11:06 – 11:11  In Stroke Patients With A Large Cerebral Infarct On CT From Carotid Stenosis, CEA Should Be Performed But Only After A Delay Of 4-6 Weeks  
Gianluca Faggioli, MD  
Mauro Gargiulo, MD  
Andrea Stella, MD

Mohammad H. Eslami, MD, MPH

11:18 – 11:23  DEBATE: Optimal Timing For CEA After A TIA Or Small Stroke Is 7-14 Days: But CAS Is Unsafe Within That Window  
Ross Naylor, MD

Klaus D. Mathias, MD

11:30 – 11:35  CEA For A TIA Or Small Stroke Is Safely Performed 2-5 Days After The Event, Not So For CAS: When Is CAS Equally Safe Based On A Large German Registry Study  
Hans-Henning Eckstein, MD, PhD

R. Clement Darling III, MD

11:42 – 11:47  DEBATE: Not So: CEA Within 48 Hours Of Stroke Symptom Onset Has High Risks: After 48 Hours The Risk Between 3-14 Days Is The Same As After 14 Days: So Optimal Time For CEA Is 3-14 Days After Symptom Onset  
Peter Gloviczki, MD  
Thomas C. Bower, MD

11:48 – 11:53  The Value Of Early CEA Within 7 Days Of The Index TIA Or Small Stroke Is Neutralized By Aggressive Treatment With High Dose Statins  
Gert J. de Borst, MD, PhD

11:54 – 12:00  Panel Discussion

12:00 – 1:00  Lunch Break – 2nd Floor Promenade  
Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 75  (Grand Ballroom East, 3rd Floor)
NEW DEVELOPMENTS IN THE CAS VERSUS CEA CONTROVERSY; NEED FOR CEA/CAS WITH OTHER SURGERY; AND OTHER UNUSUAL BUT IMPORTANT CAROTID RELATED TOPICS AND A HISTORICAL NOTE ON CAS

**Moderators:**  
Keith D. Calligaro, MD  
Hans-Henning Eckstein, MD, PhD

1:00 – 1:05  
DEBATE: CEA Is Currently Superior To CAS, But The Paradigm Could Shift And Why  
J. David Spence, MD

1:06 – 1:11  
DEBATE: Not So: The Paradigm Has Already Shifted: CAS Is Better Than CEA – Especially In Patients <70 Years Of Age: What Are Future Expectations  
D. Christopher Metzger, MD

1:12 – 1:17  
CAS Versus CEA: Why The Debate Will Never End: Bias Overwhelms Facts And Logic  
Carlo Setacci, MD

1:18 – 1:23  
CEA Or CAS Are Rarely If Ever Justified For ACS In Patients About To Undergo A Coronary Artery Bypass, Coronary Stenting Or Other Major Surgery: What Is The Evidence  
Ross Naylor, MD

1:24 – 1:29  
How To Decide The Timing Of Intervention After An Acute Carotid Lesion Related Stroke: Role Of Telemedicine: What Imaging Helps: How To Decide CEA Versus CAS  
Hernan A. Bazan, MD

1:30 – 1:35  
Value And Limitations Of Intraoperative Duplex Scanning During CEA And Value Of Gore Hybrid (Partially Stented) Graft For Bailout Of Difficult Technical Problems During CEA  
Domenico Valenti, DMChir, PhD

1:36 – 1:41  
Carotid Webs Are A Cause Of Serious Strokes: How To Diagnose And Treat Them  
Bruce A. Perler, MD, MBA

1:42 – 1:47  
Concomitant CEA And Carotid-Subclavian Bypass Indications, Technical Tips And Results: Based On A 40-Year Experience  
Ali F. AbuRahma, MD

1:48 – 1:53  
Surveillance Is Rarely Needed After CEA And CAS Because Reintervention Is Rarely Needed: When Is Surveillance Justified  
Ross Naylor, MD

AN HISTORICAL NOTE

1:54 – 1:59  
40 Years Of CAS: A Pioneer’s Look Back  
Klaus D. Mathias, MD

2:00 – 2:07  
Panel Discussion
SESSION 76  (Grand Ballroom East, 3rd Floor)
UPDATES ON THE COMPLETED AND ONGOING CAROTID RCTs AND THEIR PITFALLS; NEED FOR POST CEA/CAS SURVEILLANCE; IMPLICATIONS OF FILTER DEBRIS

Moderators: Wesley S. Moore, MD  
Peter L. Faries, MD  

2:07 – 2:12  Pooled Analysis Of ACT 1 And CREST In Asymptomatic Carotid Stenosis (ACS) Patients Under 80 Years Of Age: How It Can Help In Decision Making  
Jon S. Matsumura, MD  
(Power Point Presentation With Synced Audio)

2:13 – 2:18  Stroke And TIA Rates After 1 Year In SPACE 2: A Stopped RCT Comparing CEA Versus CAS Versus Best Medical Treatment In ACS Patients: What Hint Do They Give Us  
Hans-Henning Eckstein, MD, PhD

2:19 – 2:24  DEBATE: Update On Progress In CREST 2: It Will Produce Valuable Results, Conclusions And Answers: Interesting Findings To Date  
Brajesh K. Lal, MD  
Thomas G. Brott, MD

2:25 – 2:30  DEBATE: Not So: A Skeptic’s View: Why CREST 2, A Good RCT, May Produce Interesting Information But Will Not Answer Key Questions Or Settle Existing Controversy  
Anne L. Abbott, MD, PhD

2:31 – 2:36  What Impact Will CREST 2 Have On CEA And CAS And The Controversy Surounding The Treatment Of Patients With ACS: Predictions For The Future Of Carotid Treatment - Invasive And Otherwise  
L. Nelson Hopkins, MD

Richard Bulbulia, MA, MD

2:43 – 2:48  Update On ACST 2: When Will This RCT Complete Recruitment: What Has It Told Us Thus Far: What Are Its Limitations  
Alison Halliday, MS, FRCS

2:49 – 2:54  Pitfalls And Limitations Of The Esteemed And Often Quoted CAS Versus CEA RCTs: Why They May Be Misleading  
Ali F. AbuRahma, MD

2:55 – 3:00  Addition To CEA Of A Proximal Intervention (To Common Carotid Or Innimate Arteries) Increases The Risk Of Stroke Or Death: From SVS VQI Data  
Mark Conrad, MD, MMSc

3:01 – 3:06  Qualitative Analysis Of Embolic Debris Caught In Different Filters During CAS: What Is Their Nature And What Are The Implications  
Franco Grego, MD
PROGRAM SCHEDULE

SESSION 77  (Grand Ballroom East, 3rd Floor)
A CAROTID CONTROVERSY AND MORE CAROTID UPDATES; OTHER HOT NEW OR UPDATED TOPICS

Moderators:  
Mark A. Adelman, MD  
Caron B. Rockman, MD

3:24 – 3:29  
Carotid Body Tumors: Recent Advances In Treatments; Importance Of Adjunctive Measures And Endovascular Aids In Advanced Cases  
Martin Björck, MD, PhD

3:30 – 3:35  
DEBATE: CAS Is The Best Treatment For Carotid Pseudo-Occlusions Or String Sign: When And When Not To Treat  
Sonia Ronchey, MD, PhD

3:36 – 3:41  
DEBATE: Not So: No Intervention Or CEA Are The Best Treatments For A Carotid String Sign: When Is Each Best  
Ross Naylor, MD

3:42 – 3:47  
Update On The Value And Safety Of Protamine Use In CEA: It Should Be Used, How And Precautions: From The New England VQI  
David H. Stone, MD

3:48 – 3:53  
Why Duplex Findings Can Be Misleading For Carotid And Lower Extremity Lesions: When Should Treatment Decisions Not Be Based Solely On Them  
Ido Weinberg, MD, MSc

3:54 – 3:59  
CEA In Patients With Neck Irradiation Has No Higher Risks Of Stroke, Death Or MI Than Standard CEA: What Are The Technical Challenges And When Should CAS Or Medical Treatment Be Preferred  
Mark Conrad, MD, MMSc

4:00 – 4:05  
PTFE Grafts Work As Well Long-Term As Vein Grafts For Carotid Reconstructions After Carotid Degenerative Aneurysm Excision  
Jean-Baptiste Ricco, MD, PhD  
(Power Point Presentation With Synced Audio)

4:06 – 4:12  
Panel Discussion

OTHER EXCITING TOPICS AND UPDATES

4:12 – 4:17  
The Real Origin Of The Flow Reversal Concept For Cerebral Protection During CAS  
Juan C. Parodi, MD
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<th>Time</th>
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</table>
| 4:18  | Update On Endovascular Treatment Of Erectile Dysfunction: Diagnosis, Indications, Techniques And Results  
Nicolas A. Diehm, MD |
| 4:24  | Difference In Cancer Rates After Open AAA Repair And EVAR: What Are The Reasons For These Differences  
Matt M. Thompson, MD |
| 4:30  | Can Oral Anticoagulation Treatment With TBADs Promote Remodeling And Healing; What Is The Evidence And Possible Mechanisms  
Mario L. Lachat, MD |
| 4:36  | Panel Discussion |

SESSION 78  (Grand Ballroom East, 3rd Floor)  
Percutaneous Closure Devices: New Developments In Established Devices And New Devices; Advances In Wound Care  
**Moderators:**  
Zvonimir Krajcer, MD  
Gregg S. Landis, MD  

**CLOSURE DEVICES**

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| 4:42  | Update On Perclose And Proglide Devices For Large Sheath Access Site Closure; Why They Are Better Than Open Closure And Hard To Beat: What Is The Early Bird Sheath Technology (From Saranas) To Detect Access Site Bleeding  
Zvonimir Krajcer, MD |
| 4:48  | Facial Closure Of Large Sheath Percutaneous Access Has Its Limitations: Open Surgical Access Is Better  
Nikolaos Tsilimparis, MD, PhD |
| 4:54  | Fancy And Unusual Methods To Overcome Disadvantaged Routine Access For EVAR, TEVAR And TAVR: Direct Aortic Sheath Placement, Transcaval Access, External And Endo Conduits, And More  
Jeffrey P. Carpenter, MD |
| 5:00  | Next Generation Access Site Closure Devices: Manta, Per Q Seal, In Seal, Cross-Stitch, And NXT: How Do They Work: How Good Will They Be: Advantages And Limitations  
Zvonimir Krajcer, MD |
| 5:06  | Panel Discussion |
## PROGRAM SCHEDULE

### ADVANCES IN WOUND CARE

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<th>Session</th>
<th>Presenter(s)</th>
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<tbody>
<tr>
<td>5:12</td>
<td>Good And Durable Results Of Negative Pressure Non-Graft-Excisional Wound Care Treatment Of Prosthetic Arterial Graft Infection: It Is A Game Changer But Excision Of Infected Tissue Is Still Required</td>
<td>Zoran Rancic, MD, PhD</td>
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<tr>
<td>5:18</td>
<td>Rectus Femoris Muscle Flap For Non-Healing Groin Wounds With Arterial Grafts: It Is Better Than A Sartorius Flap: It Is Easy And How To Do It</td>
<td>Jan-Willem W.M. Elshof, MD</td>
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<tr>
<td>5:30</td>
<td>Another View Of Hyperbaric O₂: What Is The Evidence That It Improves Wound Healing Or Does It Just Provide Good Wound Care</td>
<td>Robert B. McLafferty, MD, MBA</td>
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<tr>
<td>5:36</td>
<td>Panel Discussion</td>
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End of Program J
PROGRAM K  (SESSIONS 79-86)
NEW DEVELOPMENTS IN THE TREATMENT OF POPLITEAL DISEASES AND ANEURYSMS; ADVANCES IN TREATING ARTERIAL AND GRAFT INFECTIONS; IMPROVEMENTS IN: VASCULAR IMAGING AND HYBRID TREATMENT SUITES; THORACIC OUTLET SYNDROME TREATMENTS; RECORDED LIVE COMPLEX ENDOVASCULAR CASES FROM MÜNSTER, GERMANY AND THE MAYO CLINIC; UPDATES ON MEDICAL TREATMENTS, TREATMENT OF RARE OR UNUSUAL VASCULAR DISEASES AND VASCULAR TRAUMA

Grand Ballroom West, 3rd Floor

SESSION 79  (Grand Ballroom West, 3rd Floor)
NEW DEVELOPMENTS IN POPLITEAL DISEASES AND THEIR TREATMENT: POPLITEAL ANEURYSMS, NON-ATHEROMATOUS DISEASES AND ENTRAPMENT SYNDROMES; VALUE OF DUPLEX AND OTHER IMAGING IN THEIR DIAGNOSIS

Moderators:  Barry T. Katzen, MD
             Martin Björck, MD, PhD

PROGRESS IN THE TREATMENT OF POPLITEAL ANEURYSMS

7:00 – 7:05  With Thrombosed Popliteal Aneurysms Producing Acute Limb Ischemia Aspiration Vacuum Assisted Thrombectomy With The Indigo Device Works: Technical Tips And Results
Frank R. Arko, MD

7:06 – 7:11  Treatment Of A Giant Popliteal Aneurysm In A Patient With Loeys-Dietz Connective Tissue Disorder
Domenico Valenti, DMChir, PhD

7:12 – 7:17  Endovascular Versus Open Treatment For Popliteal Aneurysms: When Is Each Best And Why
Joseph J. Ricotta II, MD, MS

7:18 – 7:23  DEBATE: Open Surgical Repair Of Popliteal Aneurysms Yields Better Results Than Stent-Graft Endo Repair In A Large Case Matched Swedish Study: The Differences Are Not Due To Tortuosity, Outflow Arteries Or Other Anatomic Variables
Martin Björck, MD, PhD

7:24 – 7:29  DEBATE: New Developments In Stent Graft Treatment Make Me Disagree: Endovascular Treatment Is Better In Many Cases: When Is It Not
Irwin V. Mohan, MBBS, MD
## NEW DEVELOPMENTS IN POPLITEAL ENTRAPMENTS

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<th>Speaker(s)</th>
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<tr>
<td>7:30</td>
<td>Progress In The Treatment Of Popliteal Entrapment Syndromes: An Algorithm To Help With Successful Treatment</td>
<td>Niten Singh, MD</td>
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</table>
Thomas W. Wakefield, MD |
| 7:42  | Non-Atherosclerotic Popliteal Artery Occlusive Disease: What Can It Be Due To And What Is The Best Treatment | Ramesh K. Tripathi, MD     |
| 7:48  | Duplex Findings In Non-Atherosclerotic Popliteal Artery Occlusive Disease: What Other Imaging May Be Needed | Michael R. Jaff, DO        |
| 7:54  | Panel Discussion                                                                                 |                            |

### SESSION 80  (Grand Ballroom West, 3rd Floor)

NEW DEVELOPMENTS AND CONTROVERSIES IN THE OPTIMAL TREATMENT FOR INFECTED ARTERIES, AAAs, ARTERIAL GRAFTS AND ENDOGRAFTS

**Moderators:**  
Keith D. Calligaro, MD  
Peter F. Lawrence, MD

### MYCOTIC INFECTED ANEURYSMS

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<th>Speaker(s)</th>
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<tr>
<td>8:02</td>
<td>Mycotic Peripheral Arterial Aneurysms: Etiology And Best Current Treatment: When And How To Revascularize And When Not To</td>
<td>Mohammad H. Eslami, MD, MPH</td>
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<tr>
<td>8:08</td>
<td>How Valuable Is EVAR For The Treatment Of Mycotic AAAs: When Does It Work: Technical Tips And When Will It Not Work</td>
<td>Fred A. Weaver, MD</td>
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<tr>
<td>8:14</td>
<td>For Mycotic AAAs, Why Is EVAR Better Than Open Repair: It Provides Better Short-Term Survival With No Long-Term Disadvantages: Technical Tips</td>
<td>Anders Wanhainen, MD, PhD</td>
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</table>
INFECTED ARTERIAL GRAFTS AND ENDOGRAFTS

Samy S. Nitecki, MD

8:26 – 8:31  DEBATE: With Infected Arterial Grafts And Endografts, Removal Of The Graft Is Mandatory With Some Form Of Revascularization: How To Do It  
Werner Lang, MD

8:32 – 8:37  DEBATE: Not So: Non-Excisional Treatment Is Better And Safer In Most Instances: How To Do It And Technical Requirements: When Must The Graft Be Removed  
Martin Malina, MD, PhD

8:38 – 8:43  Value Of PET/CT Scans In Detecting And Treating Vascular Graft Infections: What Are Their Limitations  
Zoran Rancic, MD, PhD

Patrick A. Stone, MD

8:50 – 8:58  Panel Discussion

8:58 – 9:03  Obturator Bypass Remains An Option For Revascularization With Multi-Operated Infected Groins: Tips And Tricks: However, There Are Other Options – What Are They  
Frederic Cochennec, PhD

9:04 – 9:09  Staging Classification For Treating Infected Arterial Prosthetic Grafts: When Can All Or A Portion Of An Infected Graft Be Left In Place: Technical Requirements  
Russell H. Samson, MD, RVT  
Keith D. Calligaro, MD  
Frank J. Veith, MD

Michael B. Silva, Jr., MD

SUPRARENAL AORTIC GRAFT AND ENDOGRAFT INFECTIONS

9:16 – 9:21  Excision And Replacement Of Infected Suprarenal Open Or Endo Infected Grafts Is Feasible But Challenging: How To Do It  
Thomas C. Bower, MD
9:22 – 9:27  Optimal Treatment Of Infected Aortic Grafts – Infrarenal And Suprarenal; Open And Endo
Germano Melissano, MD
Roberto Chiesa, MD

9:28 – 9:33  New Developments And Long-Term Experience With The Treatment Of Infected AAAs And Aortic Endografts
Kamphol Laohapensang, MD

9:34 – 9:39  Optimal Treatment Of Aortobronchial And Aortoesophageal Fistulas After TEVAR: Both Are Challenging And Neither Is Hopeless: Technical Tips
Germano Melissano, MD
Roberto Chiesa, MD

9:40 – 9:47  Panel Discussion

9:47 – 10:02  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 81  (Grand Ballroom West, 3rd Floor)
ADVANCES IN IMAGING AND HYBRID OPERATING/PROCEDURE ROOMS

Moderators:  Barry T. Katzen, MD
Ronald M. Fairman, MD

10:02 – 10:07  SFA And Popliteal Stenting Under Duplex Ultrasound Guidance: Tips And Tricks To Make It Work: It Is A Better Way And Decreases Radiation Exposure And Avoids Contrast Toxicity
Ignacio Escotto, MD

10:08 – 10:13  Why Incidental Findings On Vascular Imaging Are Increasing In Frequency And – Although Sometimes Helpful – Are More Frequently Harmful
Frank J. Criado, MD

10:14 – 10:19  How To Use CO₂ To Image Tibial Arteries Safely And More Accurately Than With The Usual Contrast Agents
Palma M. Shaw, MD

10:20 – 10:25  Optical Coherence Tomography (OCT): How To Use It And How It Can Help In Decision Making With The Treatment Of Carotid Stenosis And During CAS
Francesco Setacci, MD
Carlo Setacci, MD

Todd R. Vogel, MD, MPH

10:32 – 10:37  How To Use MRI And MRA For Planning And Fusion In The Treatment Of TAAAs: Advantages And Limitations
Martin J. Austermann, MD
10:38 – 10:43  Unique Value Of 3D Holographic Imaging In Complex Endovascular Procedures: How Does It Work: When Will It Be Available And What Does It Cost
Elchanan Bruckheimer, MBBS

10:44 – 10:49  Improvements In Any C-Arm Capability With Cloud Based 3D CT Fusion From Cyder Medical: Its Software Can Compensate For Changes In Anatomy By Stiff Wires And Devices: It Can Decrease Radiation Exposure And Contrast Usage
Cynthia K. Shortell, MD

10:50 – 10:55  Comparison Of Philips Vessel Navigator And Cydar Medical Fusion Systems: How They Work And Advantages, Limitations And Cost Of Each
Jan M.M. Heyligers, MD, PhD

10:56 – 11:01  New Advances In Transcranial Doppler (TCD) And Its Value In Monitoring Carotid Procedures And Those Involving The Proximal Aorta And Arch: It Can Improve Results And Is An Underutilized And Under-Appreciated Technology
Zsolt Garami, MD
Alan B. Lumsden, MD

11:02 – 11:07  Future Advances In Hybrid Operating Suites: What Is On The Horizon And Beyond
Alan B. Lumsden, MD

11:08 – 11:18  Panel Discussion

SESSION 82  (Grand Ballroom West, 3rd Floor)
CHALLENGING RECORDED LIVE CASES FROM MÜNSTER
Moderators:  Giovanni Torsello, MD
Martin J. Austermann, MD

11:18 – 12:00  Complex Cases From Münster With Questions And Discussion
Giovanni Torsello, MD
Martin J. Austermann, MD

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

SESSION 83  (Grand Ballroom West, 3rd Floor)
CHALLENGING RECORDED LIVE CASES FROM THE MAYO CLINIC
Moderators:  Gustavo S. Oderich, MD
Bernardo C. Mendes, MD

1:00 – 1:40  Complex Cases From The Mayo Clinic With Questions And Discussion
Gustavo S. Oderich, MD
Bernardo C. Mendes, MD
SESSION 84  (Grand Ballroom West, 3rd Floor)
NEW DEVELOPMENTS IN THE TREATMENT OF THORACIC OUTLET SYNDROMES (TOSS)

Moderators:  Mark A. Adelman, MD
           Karl A. Illig, MD

1:40 – 1:45  Current Fair Indications For Surgical Treatment Of Neurogenic TOS: Objective
Outcome Measures To Determine Treatment Success  
Karl A. Illig, MD

1:46 – 1:51  DEBATE: Transaxillary Approach Is The Best Way To Surgically Treat TOS: When Is It
Not: How Can Video Assistance Be Helpful  
Francesco Spinelli, MD

1:52 – 1:57  DEBATE: Not So: The Supraclavicular Approach Is Best For Surgical Treatment Of
Most Patients With TOS: Technical Tips And When Is It Not  
Ramesh K. Tripathi, MD

1:58 – 2:03  Two New Developments In TOS: 1) A Paradigm Shift In Venous TOS Treatment: Open
Decompression Combined With Selective Stenting Is The Way To Go; And 2) The
Pectoralis Minor Syndrome Can Cause Recurrent Neurogenic TOS; How To Diagnose
And Treat  
Michael J. Singh, MD

VENOUS TOS

2:04 – 2:09  The Value Of Balloon Angioplasty For Venous TOS: When Is It Helpful And When
Not: First Rib Removal Is Not Always Necessary: When Is It
Sam S. Ahn, MD, MBA

2:10 – 2:15  Evolving Strategies For Treating Venous TOS: When Does It Need Surgical Treatment
And When Not: Why The Infracavicular Approach Is Best For Rib Resection And
Allows Exposure Of The Subclavian Vein: Technical Tips  
Keith D. Calligaro, MD

2:16 – 2:21  With Venous TOS And Subclavian Vein Thrombosis, For The Majority Of Patients,
Thrombolytics Are Of No Benefit: How Should The Condition Be Treated
George Geroulakos, MD, PhD

2:22 – 2:27  Direct Oral Anticoagulant Treatment Versus Thrombolysis Plus First Rib Resection
For Venous TOS With Subclavian Vein Thrombosis (Paget-Schrotter Syndrome): Are
We Overtreating These Patients: From The UTOPIA Trial  
Gert J. de Borst, MD, PhD

2:28 – 2:34  Panel Discussion
SESSION 85  (Grand Ballroom West, 3rd Floor)
IMPORTANT NEW DEVELOPMENTS IN MEDICAL AND ANTI-ATHEROGENIC AND ANTIMACULAR DRUG TREATMENTS; UPDATES ON UNUSUAL DISEASES AND THEIR INTERVENTIONAL VASCULAR TREATMENT; MANAGEMENT OF TAVR ARTERIAL ACCESS COMPLICATIONS
(VEITH/TCT Co-Branded Session)

Moderators:  
Michael R. Jaff, DO  
Kenneth Ouriel, MD, MBA

2:34 – 2:39  
Statin Intolerance In Vascular Patients: Incidence, Management Techniques And Their Outcomes: From The VQI  
Adam Beck, MD

2:40 – 2:45  
Optimal Current Antiplatelet Treatment In Patients With Vascular Disease And After Interventional Or Open Treatment: When Is Aspirin Indicated And When Not  
Roxana Mehran, MD

2:46 – 2:51  
Value Of Protamine Use With Transfemoral CAS, TCAR And CEA: It Decreases Strokes And Postprocedural Bleeding  
Marc L. Schermerhorn, MD

2:52 – 2:57  
Why Clopidogrel Testing Is Important In CAS Trials And Other Vascular Trials  
Karthikeshwar Kasirajan, MD

2:58 – 3:03  
Why Vascular Surgeons And Specialists Should Replace Heparin With Bivalirudin For Vascular Interventions  
George H. Meier III, MD

3:04 – 3:09  
Newer Oral Anticoagulants Are Not Helpful In Improving Outcomes After Lower Extremity Bypasses: However, Warfarin Is Helpful: What Is The Evidence  
William P. Robinson, MD

3:10 – 3:15  
Why EVAR Patients Must Be Given Statins Or Have Their Statin Dose Increased Perioperatively: Cardiac Complications Are The Main Cause Of Complications And Readmissions And Statins Decrease These  
Bruce A. Perler, MD, MBA

3:16 – 3:22  
Panel Discussion

3:22 – 3:32  
Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
UPDATE ON ENDOVASCULAR TREATMENT OF MULTIPLE SCLEROSIS AND OTHER HOT TOPICS

Moderators: Ronald M. Fairman, MD
Roxana Mehran, MD

3:32 – 3:37 Is There Any Hope That There Will Be Evidence To Support The Value Of Venous Angioplasty To Treat Multiple Sclerosis – Despite Negative Level 1 Evidence
Paolo Zamboni, MD

3:38 – 3:43 What Is The Evidence That Venous Obstruction Contributes To Multiple Sclerosis And That Relieving This Obstruction Can Help Some Patients: Which Patients And How To Select Them
Donald B. Reid, MD

Todd R. Vogel, MD, MPH

3:50 – 3:55 Natural History Of Penetrating Ulcers Of The Abdominal Aorta: How Should They Be Treated
Caron B. Rockman, MD

3:56 – 4:01 Natural History Of Common Iliac And Internal Iliac Artery Aneurysms: They Are Benign When ≤4 cm And Do Not Require Treatment Until >4 cm
Nicos Labropoulos, BSc, PhD, DIC, PhD

4:02 – 4:07 Current Endovascular Treatment Of Buerger’s Disease: What Is Possible And What Is Not
Kamphol Laohapensang, MD

4:08 – 4:13 Vascular Complications Of TAVR And How Are They Best Managed
Ashraf Mansour, MD

4:14 – 4:20 Panel Discussion

SESSION 86 (Grand Ballroom West, 3rd Floor)
NEW DEVELOPMENTS IN THE MANAGEMENT OF VASCULAR TRAUMA: PROS AND CONS OF REBOA; ENDO VERSUS OPEN TREATMENTS

Moderators: Michael B. Silva, Jr., MD
Todd E. Rasmussen, MD

4:20 – 4:25 Why And How Vascular Surgeons Need To Take The Lead In Supporting Excellence In Trauma Management And Treatment Of Vascular Injuries: There Is No Valid Competition
Joseph J. DuBose, MD
Todd E. Rasmussen, MD
  Tal M. Hörer, MD, PhD

  Gilbert R. Upchurch, MD

4:38 – 4:43 REBOA Is A Double-Edged Sword: The SOROKA Experience From Israel
  Gabriel Szendro, MD

4:44 – 4:49 Endovascular Access In Untrained Hands Can Fail: This Has Led To A Declining Use Of REBOA: How Can This Be Fixed
  Charles J. Fox, MD

  James W. Dennis, MD

4:56 – 5:01 How Endovascular Procedures Are Saving Patients With Vascular Emergencies: Why Vascular Surgeons Need To Take Advantage Of Them And Incorporate Them In Their Practice
  Todd R. Vogel, MD, MPH

5:02 – 5:08 Panel Discussion

BLUNT THORACIC AORTIC INJURIES (BTAIs)

5:08 – 5:13 Long-Term (>5 Years) Follow-Up Of TEVAR For BTAIs: It Is A Very Durable Procedure
  Johnny Steuer, MD, PhD

5:14 – 5:19 Optimal Management Of Patients With BTAIs And Intracranial Bleeding: Timing Of Treatments, Use Of Heparin And Other Tips
  Elina Quiroga, MD

5:20 – 5:25 Shorter Than Usual Proximal Landing Zones For TEVAR Are Acceptable For BTAIs Because Aortas Are Usually Smaller And Healthier In These Patients: What Are The Limits And Technical Tips
  Shang A. Loh, MD

5:26 – 5:31 In TEVAR For BTAIs It Is Safe To Cover The Left Subclavian Artery Without Revascularizing It If The Left Vertebral Artery Is Patent
  Michael C. Stoner, MD

  Markus K. Furrer, MD
Tips And Tricks For Damage Control In Vascular Surgery: Value Of Embolic Agents In Vascular Trauma: Which Is Best And Other Technical Tips
Ravi Rajani, MD

Panel Discussion

End of Program K
PROGRAM L (SESSIONS 87-94)
DEEP VENOUS DISEASE

Trianon Ballroom, 3rd Floor

Course Leaders: Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Kenneth Ouriel, MD, MBA
Thomas W. Wakefield, MD

SESSION 87 (Grand Ballroom West, 3rd Floor)
PELVIC VENOUS DISORDERS, NUTCRACKER SYNDROME, CHRONIC VENOUS OCCLUSIONS,
STRATEGIES TO DIAGNOSE AND INTERVENE

Moderators: Jose I. Almeida, MD, RPVI, RVT
Lowell S. Kabnick, MD, RPhS
Thomas W. Wakefield, MD
Kenneth Ouriel, MD, MBA

7:00 – 7:04 Introduction: Deep System
Lowell S. Kabnick, MD, RPhS

7:05 – 7:10 ACCESS Trial Data From Chronic DVT: Role Of EKOS And TPA
Mark J. Garcia, MD

7:11 – 7:16 Venographic Techniques To Identify Pelvic Anatomy And Escape Points
Mark H. Meissner, MD

7:17 – 7:22 Pelvic Reflux: Is Coil Embolization The Answer
Alun H. Davies, MA, DM, DSc

7:23 – 7:28 Complications Of Renal Vein Stenting For Nutcracker Syndrome
Peter Gloviczki, MD

7:29 – 7:34 Open Surgery For Nutcracker: Techniques And Results
Cynthia K. Shortell, MD

7:35 – 7:40 Corrective Procedures For Failed Renal Vein Stenting
Peter Gloviczki, MD

7:41 – 7:46 Panel Discussion

Moderators: Peter Gloviczki, MD
Stephen A. Black, MD

CHRONIC VENOUS OCCLUSIONS

7:47 – 7:52 Anatomical And Clinical Variations In Patients With Post-Thrombotic Venous
Outflow Obstruction
Manj S. Gohel, MD
### PROGRAM SCHEDULE

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<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker/Location</th>
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<tr>
<td>7:53</td>
<td>A Good Stent Went Bad: What To Do</td>
<td>Gerard J. O’Sullivan, MD</td>
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<td>7:59</td>
<td>Recanalizing Occluded Venous Stents</td>
<td>Akhilesh K. Sista, MD</td>
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<td>8:05</td>
<td>Contralateral Deep Vein Thrombosis After Iliac Vein Stenting: A Clear And Present Danger</td>
<td>Peter Gloviczki, MD</td>
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<td>8:11</td>
<td>Crossing Chronic Femoro-Iliocaval Occlusions With Cone Beam CT</td>
<td>Jose I. Almeida, MD, RPVI, RVT</td>
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<td>8:17</td>
<td>Endovenectomy And Iliac Vein Stent Placement - How I Do It (Video Technique Demonstration)</td>
<td>Houman Jalaie, MD</td>
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<td>8:23</td>
<td>Abre™ Venous Self-Expanding Stent System Procedure Video</td>
<td>Stephen A. Black, MD</td>
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<td>8:29</td>
<td>Challenging Deep Venous Recanalization: Go-To Tools And Approaches</td>
<td>Kush R. Desai, MD</td>
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<td>8:35</td>
<td>Panel Discussion</td>
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**SESSION 88**  
(Trianon Ballroom, 3rd Floor)  
ILIACAVAL STENTS, STENT TRIALS AND STENT SURVEILLANCE

**Moderators:**  
Kenneth Ouriel, MD, MBA  
Michael K.W. Lichtenberg, MD

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<th>Time</th>
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<tr>
<td>8:41</td>
<td>Importance Of Stent Shape And Area On Clinical Outcome After Iliofemoral Venous Stenting (VICI Trial)</td>
<td>Lowell S. Kabnick, MD, RPhS</td>
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<td>8:47</td>
<td>Venovo Venous Stent Trial: Update</td>
<td>Jose I. Almeida, MD, RPVI, RVT</td>
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<td>8:53</td>
<td>Zilver/Vena Stent Trial: Update</td>
<td>Gerard J. O’Sullivan, MD</td>
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<td>8:59</td>
<td>VICI Stent Trial Update: 2 Years</td>
<td>Mahmood Razavi, MD</td>
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<td>9:05</td>
<td>Technical Properties Of Nitinol: The Role Of Venous Stenting</td>
<td>Erin H. Murphy, MD</td>
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<td>9:11</td>
<td>What You Should Know About The 4 Dedicated Venous US Stents: European Experience</td>
<td>Michael K.W. Lichtenberg, MD</td>
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<td>9:17</td>
<td>Use Of Biopsy Of Venous In-Stent Stenosis To Guide Post-Operative Management</td>
<td>David M. Williams, MD</td>
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PROGRAM SCHEDULE

9:23 – 9:28 Surveillance After Venous Stenting: How And When
Kenneth Ouriel, MD, MBA

9:29 – 9:34 Panel Discussion

SESSION 89 (Trianon Ballroom, 3rd Floor)
MORE ON ILIOCAVAL STENTS, STENT PROBLEMS POST-IMPLANTATION, MEDICAL AND HYBRID TECHNIQUES TO REDUCE VENOUS HYPERTENSION

Moderators: Houman Jalaie, MD
Michael R. Jaff, DO

9:35 – 9:40 A Novel Technique And Outcomes For Iliocaval Extravascular Reconstruction (TIER) For Iliocaval Agenesis
Steven D. Abramowitz, MD
Edward Y. Woo, MD

9:41 – 9:46 Neointima Formation Following Venous Placement Of Self-Expanding Nitinol-Stents Of Different Porosity: Clinical And Experimental Results
Houman Jalaie, MD

9:47 – 9:52 Predictors Of Failure Of Iliac Vein Stenting
Rabih A. Chaer, MD

9:53 – 9:58 New And Validated Classification Of Chronic Venous Obstruction And Its Clinical Implications
Houman Jalaie, MD

9:59 – 10:04 What Is The Optimal Anticoagulant/Antithrombotic Regimen For Patients Undergoing Iliac Vein Stent
Michael R. Jaff, DO

10:05 – 10:10 Managing Anticoagulation To Avoid Postoperative Hemorrhage
Timothy K. Liem, MD, MBA

10:11 – 10:16 Percutaneous, Open Or Hybrid Deep Venous System Surgery: Indications And Results
Ignacio Escotto, MD

Rick De Graaf, MD, PhD

10:23 – 10:28 Panel Discussion
SESSION 90  (Trianon Ballroom, 3rd Floor)
STRATEGIES FOR CORRECTING SEVERE DEEP VENOUS OBSTRUCTION, VENOUS ULCERS AND NEW HORIZONS IN WOUND CARE

Moderators:  Cees H.A. Wittens, MD, PhD
            Marzia Lugli, MD

10:29 – 10:34 SSAT Trial: Single Session Angioplasty Thrombolysis For Chronic Intrainguinal Deep Disease
Steve Elias, MD

10:35 – 10:40 Venous Issues In Thoracic Outlet Syndrome: Lysis, Venoplasty, First Rib Resection: Staged Or Same Setting
Karl A. Illig, MD

10:41 – 10:46 When Venous Stents Are Not Enough
Marzia Lugli, MD

10:47 – 10:52 90% Well-Recognized Venographic Signs Of Significant Iliac Vein Compression In Asymptomatic Young Volunteers
Cees H.A. Wittens, MD, PhD

10:53 – 10:58 Non-Invasive 24/7 Flow Augmentation In Deep Venous Pathology
Cees H.A. Wittens, MD, PhD

10:59 – 11:04 Panel Discussion

Moderators:  William A. Marston, MD
            Joseph D. Raffetto, MD

VENOUS ULCERS AND NEW HORIZONS IN WOUND CARE

11:05 – 11:10 The Use Of Skin Substitutes To Promote Venous Leg Ulcer Healing
Sarah Onida, MD, PhD

11:11 – 11:16 The Link Between Deep Vein Reflux And Non-Healing Ulcers, A Deep Vein Valve Is Sorely Needed
William A. Marston, MD

11:17 – 11:22 Different Biochemical Profiles In Inflammatory And Granulating Wounds
Joseph D. Raffetto, MD

11:23 – 11:28 The True Cost Of Managing Venous Leg Ulcers: An International Review
Manj S. Gohel, MD

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

11:35 – 11:40 The Recalcitrant Venous Ulcer: An Analysis Of Factors In 22 Of 60 That Failed To Heal After A 52-Week Period Of Treatment In Our Wound Center
Thomas F. O’Donnell, Jr., MD

11:41 – 11:46 Panel Discussion
SESSION 91  (Trianon Ballroom, 3rd Floor)
CAVAL RECONSTRUCTION AND MORE FEMORAL AND ILOCAVAL FLOW ISSUES

**Moderators:**  
R. Clement Darling III, MD  
Jose I. Almeida, MD, RPVI, RVT

11:47 – 11:52  
**IVC Replacement For Malignancy: How I Do It**  
R. Clement Darling III, MD

11:53 – 11:58  
**Long-Term Patency Of Primary Inferior Vena Cava Reconstructions**  
Mark K. Eskandari, MD

11:59 – 12:04  
**Optimal PTS Prevention**  
Peter Henke, MD

12:05 – 12:11  
**Venous Stent Fractures: Does It Matter**  
David J. Dexter, MD

12:12 – 12:17  
**Stent Reconstruction Following IVC Filter-Related Caval Thrombosis**  
Akhilesh K. Sista, MD

12:18 – 12:23  
**Thrombosed IVC Filter: How To Recanalize The Cava And Manage The Filter**  
Jose I. Almeida, MD, RPVI, RVT

12:24 – 12:29  
**Panel Discussion**

12:30 – 12:59  
**Lunch Break – 2nd Floor Promenade**  
Visit Exhibits And Pavilions (2nd And 3rd Floors)

SESSION 92  (Trianon Ballroom, 3rd Floor)
SURGICAL AND INTERVENTIONAL MANAGEMENT STRATEGIES FOR THROMBOEMBOLIC EVENTS IN THE VENOUS SYSTEM

**Moderators:**  
Patrick E. Muck, MD  
Robert Mendes, MD

1:00 – 1:05  
**Single Session Continuous Aspiration Thrombectomy (SSCAT) For All DVT Utilizing Indigo Thrombectomy System**  
Patrick E. Muck, MD

1:06 – 1:11  
**Inari CloTriever Device For Acute DVT**  
William A. Marston, MD

1:12 – 1:17  
**Thrombolysis For Acute DVT: Utilization And Guidance From Current Clinical Trials**  
Brian G. DeRubertis, MD

1:18 – 1:23  
**Sentry Two-Year Data**  
Robert Mendes, MD

1:24 – 1:29  
**A Comparison Of Angiojet Versus CDT For The Treatment Of Iliofemoral DVT**  
Stephen A. Black, MD

1:30 – 1:35  
**Subgroup Analyses Of The ATTRACTION Trial**  
Suresh Vedantham, MD
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<th>Time</th>
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<tr>
<td>1:36</td>
<td>Treating Venous Thromboembolism Without Lytic Medications</td>
<td>Constantino Pena, MD</td>
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<td>1:42</td>
<td>Angiovac Venous Thrombectomy: Where, When, And How</td>
<td>Mikel Sadek, MD</td>
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<td>1:48</td>
<td>Renal Failure In Acute DVT Treatment - Incidence And Strategies For Prevention</td>
<td>Stephen A. Black, MD</td>
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<td>1:54</td>
<td>P-Max Study: Mechanical Thrombectomy For Iliofemoral DVT With Aspirex</td>
<td>Michael K.W. Lichtenberg, MD</td>
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<td>2:00</td>
<td>Interventional Treatment Of Iliofemoral And Caval DVT In The Office Based Lab</td>
<td>Mark J. Garcia, MD</td>
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<td>2:06</td>
<td>Treatment Of Chronic Deep Venous Occlusions: Patient Selection, Procedural Pearls</td>
<td>Kush R. Desai, MD</td>
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<td>2:12</td>
<td>Outcome Of Venous Stents In Adolescents, Teenagers, And Pregnancy</td>
<td>Mahmood Razavi, MD</td>
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<td>2:18</td>
<td>May-Thurner Syndrome: From Board Question To Epidemic</td>
<td>Clifford M. Sales, MD, MBA</td>
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<td>2:24</td>
<td>Pressure Measurements And IVUS In Deep Venous Obstructions, Mandatory Or Fancy</td>
<td>Rick De Graaf, MD, PhD</td>
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<td>2:30</td>
<td>Is An Open Popliteal Vein A Prerequisite For Success: Does PMT Now Lead To Over-Stenting</td>
<td>Stephen A. Black, MD</td>
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<td>2:36</td>
<td>How Important Is Rapid Flow Restoration In DVT</td>
<td>Robert A. Lookstein, MD, MHCDL</td>
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<td>2:42</td>
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**Session 93**  
(Trianon Ballroom, 3rd Floor)  
MEDICAL MANAGEMENT STRATEGIES FOR THROMBOEMBOLIC EVENTS IN THE VENOUS SYSTEM  

*Moderators: Kenneth Ouriel, MD, MBA  
Thomas W. Wakefield, MD*  

**PART 1**  

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<tr>
<th>Time</th>
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<th>Speaker/Authors</th>
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<tbody>
<tr>
<td>2:48</td>
<td>The Open Vessel Hypothesis: Applicability To DVT</td>
<td>Kenneth Ouriel, MD, MBA</td>
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<td>2:54</td>
<td>Inflammation And Venous Thrombosis – An Evidence Summary</td>
<td>Thomas W. Wakefield, MD</td>
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<td>3:00</td>
<td>Should All Patients With Acute VTE Be Treated With A Statin</td>
<td>Anthony J. Comerota, MD</td>
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<td>3:06 –</td>
<td>Update On Reversal Agents For The DOAC</td>
<td>Timothy K. Liem, MD, MBA</td>
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<td>3:12 –</td>
<td>Thrombus Aging Using MRI</td>
<td>Stephen A. Black, MD</td>
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<td>3:18 –</td>
<td>What Is The Optimal Anticoagulant/Antithrombotic Regimen For Patients Undergoing Iliac Vein Stent</td>
<td>Michael R. Jaff, DO</td>
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<td>3:24 –</td>
<td>E-Selecting Inhibition Is Effective To Treat Proximal DVT In A Primate Model</td>
<td>Thomas W. Wakefield, MD</td>
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<td>3:30 –</td>
<td>Panel Discussion</td>
<td>Peter Henke, MD</td>
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<td>Alberto C. Duque, MD</td>
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<td>3:36 –</td>
<td>Breakthrough DVT: When Thromboprophylaxis Is Not Enough</td>
<td>Andrea T. Obi, MD</td>
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<td>3:42 –</td>
<td>Pediatric DVT – An Evidence Summary</td>
<td>Dawn M. Coleman, MD</td>
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<td>3:48 –</td>
<td>Provoked Or Unprovoked DVT - Does It Matter Therapeutically</td>
<td>Peter Henke, MD</td>
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<td>3:54 –</td>
<td>Heparin Resistance During Thrombolysis For DVT</td>
<td>Jinsong Wang, MD</td>
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<td>4:00 –</td>
<td>MIST Therapy In Warfarin Necrosis</td>
<td>Joann Lohr, MD</td>
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<td>4:06 –</td>
<td>Introduction: Chinese DVT Database</td>
<td>Jinsong Wang, MD</td>
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<td>4:12 –</td>
<td>Is Bridging Anticoagulation With The Direct Oral Anticoagulants Necessary</td>
<td>Alberto C. Duque, MD</td>
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<td>Panel Discussion</td>
<td>Peter Henke, MD</td>
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<td>Alberto C. Duque, MD</td>
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Session 94  (Trianon Ballroom, 3rd Floor)
DEEP VEIN VALVE TECHNOLOGIES, CAVAL INTERRUPTION AND IVC FILTER COMPLICATIONS

Moderators: Jorge H. Ulloa, MD
Mikel Sadek, MD

DEEP VALVE PROGRESS

4:24 – 4:29 Safety And Efficacy Report On The Blueleaf Endovenous Valve Formation System
Update On International And US Clinical Progress
Mikel Sadek, MD

4:30 – 4:35 Safety And Efficacy Report On The Venovalve (First In Man)
Jorge H. Ulloa, MD

4:36 – 4:41 What Are The Challenges In The Deep System - What Is The Role Of Venous Valves
Fedor Lurie, MD, PhD

4:42 – 4:47 What’s Up With The Sail Valve
Steve Elias, MD

4:48 – 4:53 Surgical Creation Of A Monocusp Valve
Marzia Lugli, MD

4:54 – 4:59 Surgical Creation Of “Rival” Bicuspid Valve And Its Place In The Treatment Of Venous Ulceration
Ramesh K. Tripathi, MD

5:00 – 5:05 Internal Compression Treatment Application For Deep Venous Insufficiency: 1.5-Year Clinical Results
Erdinc Eroglu, MD

5:06 – 5:11 Panel Discussion

Moderators: Timothy K. Liem, MD, MBA
Constantino Pena, MD

CAVAL INTERRUPTION AND IVC FILTER COMPLICATIONS

5:12 – 5:17 The Novate Sentry Trial With A Novel Bio-Convertible IVC Filter: Follow-Up At 2 Years
Robert Mendes, MD

5:18 – 5:23 Surgical Removal Of Perforated IVC Filters
Timothy K. Liem, MD, MBA

5:24 – 5:29 Avoiding And Managing IVC Disruption During Difficult IVC Filter Removal
Brian G. DeRubertis, MD

5:30 – 5:35 Outcomes And Associated Factors In Malpractice Litigation Involving IVC Filters
Anil P. Hingorani, MD
5:36 – 5:41  The PREPIC Trial: Fact Or Fiction  
    John E. Rectenwald, MD, MS

5:42 – 5:47  Why Temporary Filters Are Not Removed: Clinical Predictors In 1,000 Consecutive Cases  
    Heron E. Rodriguez, MD

5:48 – 5:53  What To Do With Fractured Filters And Embolic Filter Fragments  
    Constantino Pena, MD

5:54 – 6:00  Panel Discussion

End of Program L
### SATURDAY, NOVEMBER 23, 2019

6:15 A.M. General Registration – Bryant Suite, 2nd Floor
6:00 A.M. Faculty Registration – Morgan Suite – 2nd Floor
6:30 A.M. Continental Breakfast – 3rd Floor Promenade/Foyer

<table>
<thead>
<tr>
<th><strong>CONCURRENT SATURDAY PROGRAMS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Program M</strong> (Sessions 95-98)</td>
</tr>
<tr>
<td>Topics Too Important Or Too Hot To Miss: Related To Lower Extremity; Aortic; And Carotid (VEITH/TCT Co-Branded Sessions)</td>
</tr>
<tr>
<td>7:00 A.M. – 12:25 P.M. Grand Ballroom East, 3rd Floor</td>
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<tr>
<td><strong>Program N</strong> (Sessions 99-103)</td>
</tr>
<tr>
<td>Improving Outcomes In Hemodialysis Access</td>
</tr>
<tr>
<td>8:00 A.M. – 3:40 P.M. Grand Ballroom West, 3rd Floor</td>
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<tr>
<td>Course Leaders: Larry A. Scher, MD</td>
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<tr>
<td>Anton N. Sidawy, MD, MPH</td>
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<tr>
<td><strong>Program O</strong> (Sessions 104-109)</td>
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<tr>
<td>Multidisciplinary Acute Stroke Management</td>
</tr>
<tr>
<td>8:00 A.M. – 3:50 P.M. Murray Hill Suites East &amp; West, 2nd Floor</td>
</tr>
<tr>
<td>Course Leader: Allan L. Brook, MD</td>
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</table>
PROGRAM M (SESSIONS 95-98)
TOPICS TOO IMPORTANT OR TOO HOT TO MISS: RELATED TO LOWER EXTREMITY; AORTIC; AND CAROTID DISEASES AND THEIR TREATMENT

Grand Ballroom East, 3rd Floor

SESSION 95 (Grand Ballroom East, 3rd Floor)
LOWER EXTREMITY TOPICS TOO IMPORTANT OR TOO HOT TO MISS (4 ¾-MINUTE TALKS)
(VEITH/TCT Co-Branded Session)

Moderators: Keith D. Calligaro, MD
Frank J. Veith, MD

7:00 – 7:05 In Patients With CLTI And Major Gangrene And/Or Infection, Is More Than 1 Crural Revascularization Better: If Treating Endo; If Treating With Open Bypass
Ignacio Escotto, MD

7:05 – 7:10 Tips For Treating CLTI With Extensive Gangrene And Necrosis (Rutherford 6): Which Is Better – Bypass Or Multilevel Endo Revascularization
Peter A. Schneider, MD

7:10 – 7:15 Long-Term Results Of Coronary DESs In Treating Lower Extremity Occlusive Lesions And Failing Lower Extremity Bypasses: When Are They The Best Treatment
Christopher J. Abularrage, MD

7:15 – 7:20 Value Of Everolimus DESs For Treating Long Infrapopliteal Disease Causing CLTI: They Deserve Wider Use: Which Stent And Technical Tips
Robert A. Lookstein, MD, MHCDL

7:20 – 7:25 Endovascular Interventions With Stents And Atherectomy On The Common And Deep Femoral Arteries Are Safe, Effective And Durable: They Do Not Preclude Use Of The CFA For Access For Other Interventions
Karthikeshwar Kasirajan, MD

7:25 – 7:30 Real World Experience With DESs And Bare Metal Stents (BMSs) In Lower Extremity Occlusive Disease: Does Metformin Influence DES Or BMS Patency
Anil P. Hingorani, MD

7:30 – 7:35 Panel Discussion

7:35 – 7:40 Value Of Toe Pressures And Toe/Brachial Index In Evaluating Lower Extremity Occlusive Disease And Healing Potential: What Are Normal Values And Values That Indicate Healing Is Likely
Gabriel Szendro, MD

7:40 – 7:45 Lower Extremity Bypasses Are Money Losers For Hospitals And Poorly Reimbursed For Vascular Surgeons: At Least In The US: What Can Be Done About It
Richard J. Powell, MD
<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 7:45 – 7:50  | Outcomes Of Isolated Inframelleolar (Pedal) Artery Interventions: When Are They Worthwhile  
Alun H. Davies, MA, DM, DSc |
| 7:50 – 7:55  | How Can WIFI (Wound, Ischemia, and foot Infection) Classification Help To Identify CLTI Patients Most Likely To Benefit From Revascularization; From An Open Bypass  
Joseph L. Mills, MD  
Miguel F. Montero-Baker, MD |
| 7:55 – 8:00  | Outcomes Of Peroneal Artery Revascularization For CLTI: Open And Endo: When They Work And When They Don’t  
Rabih A. Chaer, MD |
| 8:00 – 8:05  | Real World Experience With DCBs Is Not As Favorable As The Trials Might Suggest: Why Is This So  
Ali F. AbuRahma, MD |
| 8:05 – 8:10  | Panel Discussion |

**SESSION 96**  
(Grand Ballroom East, 3rd Floor)  
MORE LOWER EXTREMITY TOPICS TOO IMPORTANT OR TOO HOT TO MISS (4 ¾-MINUTE TALKS)  
(VEITH/TCT Co-Branded Session)  

Moderators:  
Ali F. AbuRahma, MD  
Enrico Ascher, MD

**BEST CLI LEADERS’ VIEWS ON WHICH TREATMENT SHOULD BE USED FIRST – ENDO OR OPEN**

<table>
<thead>
<tr>
<th>Time</th>
<th>Debate/Panel Discussion</th>
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</table>
| 8:10 – 8:15  | DEBATE: Durable Good Results With Tibial Artery Bypasses Support Their Use As First Treatment In Many Diabetics With CLTI  
Alik Farber, MD |
| 8:15 – 8:20  | DEBATE: Not So: Endo First Is Best In Most Diabetic Patients With CLTI  
Matthew T. Menard, MD |
| 8:20 – 8:30  | A Critical Appraisal Of Endovascular Treatments For Infrapopliteal Occlusive Disease: Bringing Reason To The Jumble Of Claims (10-Minute Talk)  
Iris Baumgartner, MD |
| 8:30 – 8:35  | Modifications In The Surgical Technique Of The Standard BTK Amputation To Facilitate Easier Walking Functions With The New Improved High-Tech Prostheses  
Michael E. Barfield, MD |
| 8:35 – 8:40  | Pitfalls In Upper Extremity Access For Lower Extremity Procedures And How To Avoid Them  
Matthew W. Mell, MD, MS |
<p>| 8:40 – 8:45  | Panel Discussion |</p>
<table>
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<tr>
<th>Time</th>
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| 8:45 – 8:50 | Supera Stents Versus DESs For Treating SFA-Pop Lesions: A Propensity Analysis Indicates Which Stent Is Best For Which Lesion: How Does Calcification Matter  
   Hany Zayed, MD, MSc |
| 8:50 – 8:55 | Value Of IVUS (Intravascular Ultrasound) In Vascular Diagnosis And Treatments: New Technical Advances And Which Device System Is Best  
   Donald B. Reid, MD |
| 8:55 – 9:00 | Value Of Stent-Grafts To Treat Access Site Complications From TAVR In The Femoral Or Iliac Arteries: Technical Tips And Long-Term Results  
   Lars B. Lönn, MD, PhD |
| 9:00 – 9:05 | The Serranator Balloon Angioplasty Device (From Cagent Vascular) For Lesion Prep And Minimizing Dissections: How It Works, Current Status And Results  
   Peter A. Schneider, MD |
| 9:05 – 9:10 | Lithoplasty (Shockwave Medical) Plus DCB For Treating CFA Occlusive Lesions: Technique And Results  
   Aravinda Nanjundappa, MD |
   John H. Rundback, MD |
| 9:15 – 9:20 | Panel Discussion |
| 9:20 – 9:30 | Break - Visit Exhibits And Pavilions (3rd Floor) |

**SESSION 97**  
(Grand Ballroom East, 3rd Floor)  
AORTIC TOPICS TOO IMPORTANT OR TOO HOT TO MISS (4 ¾-MINUTE TALKS)  
(VEITH/TCT Co-Branded Session)  
**Moderators:**  
Timur P. Sarac, MD  
Kenneth Ouriel, MD, MBA

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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| 9:30 – 9:35 | Combining Endografts From Different Companies Can Solve Problems And Has Few Downsides: Some Positive Examples  
   Sigrid Nikol, MD |
| 9:35 – 9:40 | Predicting Visceral Segment Aortic Growth After Infrarenal AAA Repair By EVAR And Open Surgery: What Factors Are Involved And Why It Matters  
   Sean P. Lyden, MD |
| 9:40 – 9:45 | DEBATE: Invasive Treatment Of Takayasu’s Disease Should Be Mostly By Open Surgery: Late Results Prove It: Value Of Endo Treatments Is Minimal  
   Thomas C. Bower, MD |
| 9:45 – 9:50 | DEBATE: Not So: Endovascular Treatments Have A Major Role In The Treatment Of Takayasu’s Lesions: What Is That Role: When Is Open Surgery Required  
   Ramesh K. Tripathi, MD |
<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>9:50 – 9:55</td>
<td>Aortic Stump Blow Out After Removal Of An Infected Aortic Graft: How To Prevent It And How To Treat It So As To Save Some Patients</td>
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<td>Alan B. Lumsden, MD</td>
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<td>9:55 – 10:00</td>
<td>Giant AAA Causing Gastric Outlet Obstruction: Rare But Real And How To Treat It</td>
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<td>Gabriel Szendro, MD</td>
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<td>10:00 – 10:05</td>
<td>Why 3D Ultrasound Is Better Than CTA For EVAR Follow-Up: What Equipment Is Required</td>
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<td>Henrik Sillesen, MD, DMSc</td>
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<td>10:05 – 10:10</td>
<td>Panel Discussion</td>
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<td>10:10 – 10:15</td>
<td>Value Of Terumo Aortic Relay Plus TEVAR Graft For Very Tortuous Anatomy: What Are Its Advantages Over Other Grafts And Long-Term Results</td>
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<td>Patrick E. Muck, MD</td>
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<td>10:15 – 10:20</td>
<td>Isolated Common And Internal Iliac Aneurysms Without An Aortic Aneurysm: At What Size Should They Be Fixed: What Iliac Branched Device (IBD) Should Be Used And When</td>
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<td>Fabio Verzini, MD, PhD</td>
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<td>Martin Malina, MD, PhD</td>
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<td>10:25 – 10:30</td>
<td>How To Treat Substantial Type 1A Endoleak After A Standard EVAR: Cuff, Chimney, Embolization, F/ EVAR, Conversion: When Is Each Best</td>
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<td>Nicola Mangialardi, MD</td>
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<td>Sonia Ronchey, MD, PhD</td>
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<td>10:30 – 10:35</td>
<td>AAAs With Aorto-Iliac Occlusive Disease: What Is Its Significance And How Is It Best Treated</td>
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<td>Christopher J. Smolock, MD</td>
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<td>10:35 – 10:40</td>
<td>Creative Alternative Access Sites For TEVAR And TAVR And What Can Go Wrong With Them</td>
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<td>Shang A. Loh, MD</td>
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<tr>
<td>10:40 – 10:45</td>
<td>Panel Discussion</td>
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SESSION 98  (Grand Ballroom East, 3rd Floor)
AORTIC AND CAROTID TOPICS TOO IMPORTANT OR TOO HOT TO MISS (4 ¾-MINUTE TALKS)
(VEITH/TCT Co-Branded Session)

**Moderators:**
Sean P. Lyden, MD
Frank J. Veith, MD

AORTIC OR BRANCH RELATED TOPICS

10:45 – 10:50  **Prophylactic Sac Embolization To Prevent Type 2 Endoleaks: When And How To Do It And How 3D AAA Modeling Can Help**
Andrew Barleben, MD, MPH

10:50 – 10:55  **TEVAR Treatment For Infected Thoracic Aortic Aneurysms: Lessons Learned And Tips And Tricks For Secondary Interventions: From An Experience With >130 Cases**
Boonprasit Kritpracha, MD

10:55 – 11:00  **Endovascular Treatment Of Ruptured And Intact Visceral Aneurysms: When Is It Possible And When Is It Not: Technical Tips**
Rabih A. Chaer, MD

10:55 – 11:00  **Endovascular Treatment Of EVAR Limb Occlusion: Technical Tips And Precautions: Is A Fem-Fem Bypass Ever Needed**
Klaus M. Overbeck, MD, MPhil

11:00 – 11:05  **Endovascular Rescue After Inadvertent False Lumen Stent-Graft Deployment During TEVAR For TBAD**
Sukgu M. Han, MD
Fred A. Weaver, MD
Timothy A.M. Chuter, DM

11:10 – 11:15  **When Endovascular Procedures Fail, Axillofemoral Bypass Is Better Than Aortofemoral Bypass In Most Patients: Technical Tips, Contraindications And Results**
Russell H. Samson, MD, RVT

11:15 – 11:20  **Why Randomized Controlled Vascular Trials Do Not Always Reflect Reality**
Kosmas I. Paraskevas, MD
Gert J. de Borst, MD, PhD
Frank J. Veith, MD
((Power Point Presentation With Synced Audio))

11:20 – 11:25  **Panel Discussion**
## CAROTID RELATED TOPICS

<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>11:30</td>
<td>Update On Current Optimal Treatment Of Carotid Body Tumors: Technical Tips And Adjuncts</td>
<td>Ross Naylor, MD</td>
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<tr>
<td>11:35</td>
<td>Guidelines For Carotid Disease Management – Why We Need A Fresh Approach: The Asymptomatic Disease Challenge</td>
<td>Jose Fernandes e Fernandes, MD, PhD</td>
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<tr>
<td>11:40</td>
<td>How Does Carotid Plaque Morphology Differ Between Acutely Symptomatic Patients And Asymptomatic Patients: What Does Adequate Statin Treatment Do To Plaque Morphology</td>
<td>Henrik Sille, MD, DMSc</td>
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<tr>
<td>11:45</td>
<td>The Incidence Of In Stent Restenosis (ISR) After CAS Is Underestimated: What Are The Clinical Implications</td>
<td>Ali F. AbuRahma, MD</td>
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<tr>
<td>11:50</td>
<td>Why Is Surveillance Necessary After CAS Since ISR Is Rare And Benign</td>
<td>William A. Gray, MD</td>
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<tr>
<td>11:55</td>
<td>How To Avoid Problems With TCAR: When Is The Procedure Contraindicated</td>
<td>Michael C. Stoner, MD</td>
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<tr>
<td>12:00</td>
<td>How To Perform TCAR Safely: Technical Tips: What Are The Pitfalls</td>
<td>Glenn M. LaMuraglia, MD</td>
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<tr>
<td>12:05</td>
<td>What Risk Factors Predict When A Patient With Asymptomatic Carotid Stenosis (ACS) Has A Good Chance Of Having A Stroke And Should Be Treated Invasively</td>
<td>Richard P. Cambria, MD</td>
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<tr>
<td>12:10</td>
<td>What Are The Real Differences Between Open And Closed Cell Stents For CAS: When Are Closed Cell Stents Worse: From SVS VQI Data</td>
<td>Mahmoud B. Malas, MD, MHS</td>
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<tr>
<td>12:15</td>
<td>Panel Discussion</td>
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End of Program M

Hemodialysis Access and Multidisciplinary Acute Stroke Management Programs continue in the Grand Ballroom West, 3rd floor and in the Murray Hill Suites, 2nd floor.
PROGRAM N  (SESSIONS 99-103)
IMPROVING OUTCOMES IN HEMODI-DIALYSIS ACCESS

Grand Ballroom West, 3rd Floor

Course Leaders:  Larry A. Scher, MD
                Anton N. Sidawy, MD, MPH

8:00 – 8:05  Introduction
            Anton N. Sidawy, MD, MPH
            Larry A. Scher, MD

SESSION 99  (Grand Ballroom West, 3rd Floor)
IMPORTANT ISSUES IN HEMODI-DIALYSIS ACCESS (7-MINUTE TALKS)

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

8:06 – 8:13  The Right Patient With The Right Access: Updated KDOQI Recommendations And How They Will Change Your Practice
             Deborah Brouwer-Maier, RN, CNN

8:14 – 8:21  Helping Patients To Advocate For Themselves
             Dori Schatell, MS

8:22 – 8:29  How Good Is The Information On Hemodialysis Access That Patients Find On The Internet
             Mark G. Davies, MD

8:30 – 8:37  Top 10 Newly Published AV Access Publications You Should Know About
             Ziv J. Haskal, MD

8:38 – 8:45  It’s A FACT: Update On The Fist Assist Pre-Surgery Vein Dilatation Study
             Tej M. Singh, MD, MBA

8:46 – 8:54  Panel Discussion

8:55 – 9:02  Strategies To Maintain Hemodialysis Access And Avoid Running Out Of Real Estate
             Robyn A. Macsata, MD

9:03 – 9:10  How Do Outflow Venous Valves, Collateral Branches And Arterial Calcification Affect AV Fistula Maturation
             Surendra Shenoy, MD, PhD

9:11 – 9:18  Contemporary Evaluation Of Factors Affecting AV Fistula Maturation
             Thomas S. Huber, MD, PhD

9:19 – 9:26  The Role Of Duplex Ultrasound In Assessing AV Fistula Maturation
             Yana Etkin, MD
9:27 – 9:34 Safe Cannulation Patterns In AV Fistulas: Rope Ladder Versus Buttonhole Versus Area Cannulation To Avoid Fistula Aneurysms
  Dori Schatell, MS

9:35 – 9:42 Wearable Device For Continuous Noninvasive Monitoring Of Vascular Access Health In Hemodialysis Patients
  Richard F. Neville, MD

9:43 – 9:50 Interwoven Nitinol Stents To Treat Radiocephalic Anastomotic AV Fistula Stenosis
  Shannon Thomas, MD

9:51 – 9:59 Panel Discussion

10:00 – 10:15 Break - Visit Exhibits And Pavilions (3rd Floor)

SESSION 100  (Grand Ballroom West, 3rd Floor)
OPTIMIZING OUTCOMES IN HEMODIALYSIS ACCESS (7-MINUTE TALKS)

Moderators: Clifford M. Sales, MD, MBA
             Ellen D. Dillavou, MD

10:16 – 10:23 Can Our Understanding Of AV Fistula Stenosis Be Translated To Better Patient Care
  Prabir Roy-Chaudhury, MD, PhD

10:24 – 10:31 Ultrasound Differentiation Of AV Access Lesions: When To Treat And When Not To Treat
  Kate Steiner, MD

10:32 – 10:39 Is There Any Current Role For Drug Coated Balloons And Stents In Hemodialysis Access
  Panoagiotis M. Kitrou, MD, MSc, PhD

10:40 – 10:47 Is A Pharmacological Solution The Answer To The Improving Outcomes With AV Fistulas And Grafts
  Sriram S. Iyer, MD

  Haimanot (Monnie) Wasse, MD, MPH

10:56 – 11:04 Panel Discussion

11:05 – 11:12 Removal Of Infected AV Grafts Is A Morbid Procedure
  Jeffrey J. Siracuse, MD, RPVI

11:13 – 11:20 Use And Abuse Of The Outpatient Dialysis Access Center
  Clifford M. Sales, MD, MBA

11:21 – 11:28 Use Of The In.Pact Balloon In Treating AV Access Stenoses
  Robert A. Lookstein, MD, MHCDL
DEBATE: SHOULD AV FISTULAS BE LIGATED AFTER RENAL TRANSPLANTATION

11:29 – 11:36  No: We Should Preserve Fistulas For Possible Future Hemodialysis  
*Haimanot (Monnie) Wasse, MD, MPH*

11:37 – 11:44  Yes: Cardiac Decompensation Is Potentially Life Threatening: Here’s The Data  
*Sriram S. Iyer, MD*

11:45 – 11:53  Panel Discussion

11:53 – 12:30  Lunch Break - (3rd Floor Foyer)  
Visit Exhibits And Pavilions (3rd Floor)

SESSION 101 (Grand Ballroom West, 3rd Floor)  
POLITICAL, ECONOMIC AND LEGAL ISSUES IN HEMODIALYSIS ACCESS (7-MINUTE TALKS)

*Moderators: Haimanot (Monnie) Wasse, MD, MPH  
Thomas S. Huber, MD, PhD*

12:30 – 12:37  Is Comprehensive ESRD Care The Responsibility Of A Society  
*Prabir Roy-Chaudhury, MD, PhD*

*Evan C. Lipsitz, MD, MBA*

12:46 – 12:53  Why The Future Of AV Access Care Must Begin With Collaboration  
*Sapan S. Desai, MD, PhD, MBA*

12:54 – 1:01  Site Of Service Influence On Stent Utilization For Hemodialysis Interventions  
*Matthew J. Dougherty, MD*

1:02 – 1:09  Impact Of Changing Reimbursement For Outpatient Hemodialysis Procedures On Hospital IR Workflow  
*Ziv J. Haskal, MD*

1:10 – 1:18  Panel Discussion
SESSION 102  (Grand Ballroom West, 3rd Floor)
NEW TECHNOLOGIES AND CONCEPTS IN HEMODIALYSIS ACCESS (7-MINUTE TALKS)

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

**PERCUTANEOUS AV FISTULAS:**
WHAT IS THEIR ROLE IN CONTEMPORARY DIALYSIS ACCESS PRACTICE

1:19 – 1:26  Update On The Ellipsys Vascular Access System
Robert Shahverdyan, MD

1:27 – 1:34  Update On The WavelinQ Device
Panagiotis M. Kitrou, MD, MSc, PhD

1:35 – 1:42  Optimizing Success: Patient Selection For Successful Percutaneous AV Fistula Placement
Haimanot (Monnie) Wasse, MD, MPH

1:43 – 1:50  Assessment And Cannulation Of Percutaneous AV Fistulas
Deborah Brouwer-Maier, RN, CNN

1:51 – 1:58  Tips And Tricks For Percutaneous AV Fistula Creation: How Long Is The Learning Curve
John E. Aruny, MD

1:59 – 2:06  Surgical Revision Of Percutaneous AV Fistula: How Often Is It Necessary
John R. Ross, Sr., MD

2:07 – 2:17  Kidney X: Accelerating Innovation In The Prevention, Diagnosis And Treatment Of Kidney Diseases (10-Minute Talk)
John Sedor, MD

2:18 – 2:28  Panel Discussion

SESSION 103  (Grand Ballroom West, 3rd Floor)
UPDATE ON CLINICAL CHALLENGES IN HEMODIALYSIS ACCESS (7-MINUTE TALKS)

**Moderators:**
- Larry A. Scher, MD
- Surendra Shenoy, MD, PhD

2:29 – 2:36  Hybrid Technique To Manage The Aneurysmal Degenerative Fistula
Charles J. Fox, MD

2:37 – 2:44  AV Graft Coatings And Configurations: How Do We Choose What Is Best
Marc H. Glickman, MD

2:45 – 2:52  Immediate Access Grafts Provide Comparable Patency To Standard Grafts With Fewer Reinterventions And Catheter Related Complications
Ellen D. Dillavou, MD
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<tr>
<td>2:53</td>
<td>Tapered AV Grafts Do Not Provide Significant Advantage Over Non-Tapered Grafts In Upper Extremity Dialysis Access&lt;br&gt;Jeffrey J. Siracuse, MD, RPVI</td>
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<td>3:01</td>
<td>Spectrum Of Hand Dysfunction After AV Access Placement&lt;br&gt;Thomas S. Huber, MD, PhD</td>
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<td>3:09</td>
<td>Dialysis Access In The Pediatric Population: Technical Tips And Outcomes&lt;br&gt;Vincent I. Rowe, MD</td>
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<td>3:17</td>
<td>Utilization Of Stent Grafts In The Management Of AV Access Pseudoaneurysms&lt;br&gt;Anil P. Hingorani, MD</td>
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<td>3:25</td>
<td>The Good, The Bad And The Ugly Of Central Venous Bypass To Allow Upper Extremity AV Access&lt;br&gt;Mark G. Davies, MD</td>
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<td>3:33</td>
<td>Panel Discussion</td>
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End of Program N
PROGRAM O (SESSIONS 104-109)
MULTIDISCIPLINARY ACUTE STROKE MANAGEMENT

Murray Hill Suites East & West, 2nd Floor

Course Leader: Allan L. Brook, MD

SESSION 104 (Murray Hill Suites East & West, 2nd Floor)

ACUTE STROKE DECISIONS – TRIAGE AND IMAGING

Moderators: Lawrence R. Wechsler, MD  
Joshua A. Hirsch, MD

8:00 – 8:05 Introduction  
Allan L. Brook, MD

8:06 – 8:11 Organization Of Endovascular Thrombectomy And Next Generation Solutions  
J. Mocco, MD, MS

8:12 – 8:17 Basilar Thrombosis: Data And Guidelines  
Aaron S. Dumont, MD

8:18 – 8:28 2019 Imaging The Clot, Collaterals, And Cerebral Structures That Matter  
R. Gilberto Gonzalez, MD, PhD

8:29 – 8:39 Low NIHSS And LVO: My Basis For Treatment And Triage  
Lawrence R. Wechsler, MD

8:40 – 8:50 Emergency Room Issues: Triage At Its Best  
Edward C. Jauch, MD, MS

8:51 – 9:01 Imaging Trends And What To Expect After DAWN  
Howard A. Rowley, MD

9:02 – 9:12 AI Systems Of Triage: Pros And Cons  
Don Frei, MD

9:13 – 9:23 European Stroke Systems And How They Differ  
Zsolt Kulcsar, MD, PhD

9:24 – 9:34 Dangerous Imaging And Craniectomy Timing  
Michele H. Johnson, MD

9:35 – 9:45 MRI In Acute Stroke Care And When It Is Best To Utilize  
R. Gilberto Gonzalez, MD, PhD

9:46 – 10:00 Break - Visit Exhibits And Pavilions (3rd Floor)
SESSION 105  (Murray Hill Suites East & West, 2nd Floor)
STROKE TREATMENT – ADVANCED METHODS AND STANDARDS OF CARE

Moderators:  
Daniel L. Labovitz, MD
Henry H. Woo, MD

10:00 – 10:10  Radial Access For Stroke Intervention
Sudhakar R. Satti, MD

10:11 – 10:21  Stroke Thrombectomy 2025: My Predictions
Muhammad S. Hussain, MD

10:22 – 10:32  Distal Occlusions, M2 And Beyond: My Criteria
David S. Liebeskind, MD

10:33 – 10:43  Time Saving Pearls To Revascularization: All Hospitals Are Not Created Equally
Reade A. De Leacy, MBBS

10:44 – 10:54  Low Aspect Score Is No Barrier To Thrombectomy And Why
Charles Esenwa, MD, MS

10:55 – 11:05  Review Of The Latest Literature In Stroke Care
Dorothea Altschul, MD

11:06 – 11:16  Imaging As The Engine To Drive Stroke Forward
Thabele Leslie-Mazwi, MD

SESSION 106  (Murray Hill Suites East & West, 2nd Floor)
HOT TOPICS AND TRENDS 2019

Moderators:  
Amichai J. Erdfarb, MD
Neil Haranhalli, MD

11:17 – 11:27  ELVO Stroke: How Should We Meet The Perceived Demand
Joshua A. Hirsch, MD

11:28 – 11:38  Techniques For Thrombectomy: Next Generation Trending Now
Reade A. De Leacy, MBBS

11:39 – 11:49  Multidisciplinary Teams: Our Strategic Implementation And Success
J. Mocco, MD, MS

11:50 – 12:00  Stroke Legislation Update And Local Complications
Bradley Kaufman, MD, MPH

12:00 – 12:09  Pick up Lunch from the Grand Ballroom Foyer (3rd Floor) and return to the Murray Hill Suite for the Luncheon Session.
SESSION 107  (Murray Hill Suites East & West, 2nd Floor)
LUNCHEON SESSION – ATHEROSCLEROSIS, INTRACRANIAL STENTING AND CAROTID STENTING 2019 TRENDING POSITIVE!

Moderators:  Thomas G. Brott, MD
             Vitor Mendes Pereira, MD, MSc

12:10 – 12:20  Carotid Literature Review 2018
               Thomas G. Brott, MD

               Mahmoud B. Malas, MD, MHS

12:32 – 12:42  Thrombectomy Outcomes Of Intracranial Atherosclerosis Related Occlusions Data And Issues
               Vitor Mendes Pereira, MD, MSc

12:43 – 12:53  Vessel Wall Imaging: Latest Techniques And Where It Is Beneficial
               Richard L. Zampolin, MD

12:54 – 1:04  Tandem Occlusions: Strategies And Lessons Learned
               Don Heck, MD

SESSION 108  (Murray Hill Suites East & West, 2nd Floor)
BRAIN ANEURYSM AND VASCULAR MALFORMATIONS

Moderators:  Peter K. Nelson, MD
             Seon-Kyu Lee, MD, PhD

1:05 – 1:15  Aneurysm Devices And How I Choose
             Richard P. Klucznik, MD

1:16 – 1:26  What’s In The Pipeline: A Treatment For All Aneurysms
             Peter K. Nelson, MD

1:27 – 1:37  Surpassing Pipeline And Why
             Ajay K. Wakhloo, MD, PhD

             Alexander Coon, MD

1:49 – 1:59  Role Of Intra-Aneurysmal Therapy: Devices And Where They Are Best Used
             David Fiorella, MD, PhD

2:00 – 2:10  SAH And Wide Neck Aneurysms Treatment Options And Protocols
             Philip M. Meyers, MD

2:11 – 2:21  Panel Discussion
**SESSION 109  (Murray Hill Suites East & West, 2nd Floor)**
**FUTURE ENDOVASCULAR TREATMENT AND EXPANDING YOUR PRACTICE**

**Moderators:**
- Peter K. Nelson, MD
- Allan L. Brook, MD

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<th>Time</th>
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<tr>
<td>2:22</td>
<td>Perfusion Failure And Neurosurgical Options</td>
<td>Howard A. Riina, MD</td>
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<td>2:33</td>
<td>Collateral Circulation: Scoring And Where It Matters Most</td>
<td>Allan L. Brook, MD</td>
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<td>2:44</td>
<td>Robotics: Am I Putting Myself Into Early Retirement</td>
<td>Athos Patsalides, MD, MPH</td>
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<td>2:55</td>
<td>CSF Flow Dynamics And Treatment Strategies</td>
<td>Seon-Kyu Lee, MD, PhD</td>
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<td>3:06</td>
<td>Current Billing And Coding Updates In The Neurointerventional Surgery</td>
<td>Henry H. Woo, MD</td>
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<td>3:17</td>
<td>Intracranial Hemorrhage: When Does The Interventional Team Play A Role</td>
<td>David Fiorella, MD, PhD</td>
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<td>3:28</td>
<td>BATMAN: AVM And SRS – What Do We Know</td>
<td>David J. Altschul, MD</td>
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<td>3:39</td>
<td>Panel Discussion</td>
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End of Program O
ASSOCIATE PROGRAM SCHEDULE

TUESDAY - CONCOURSE A - CONCOURSE LEVEL

ASSOCIATE FACULTY GLOBAL PODIUM PRESENTATIONS PROGRAM

TUESDAY, NOVEMBER 19, 2019

7:00 A.M.  
Associate Faculty Registration – Rhinelander Gallery, 2nd Floor

7:07 – 7:11  
Opening Remarks  
Frank J. Veith, MD  
Enrico Ascher, MD

SESSION 1  
(Concourse A, Concourse Level)  
ABDOMINAL AORTA AND ITS BRANCHES - PART I

Moderators:  
Neal S. Cayne, MD  
Carlos H. Timaran, MD  
Yuehong Zheng, MD  
Matthew J. Eagleton, MD

7:12 – 7:17  
Outcome Of Open Versus Percutaneous Access For Patients Enrolled In The GREAT Registry  
Ronald D. Baxter, MD

7:18 – 7:23  
Predisposing Factors For ProGlide® Vascular Closure Failure In Greater Than 16 French Sheaths  
I-Ming Chen, MD, PhD

7:24 – 7:29  
Ultra Low-Profile Aortic Endograft: Early And Mid-Term Outcomes From The Italian Triveneto Incraft Registry  
Marco U. Zavatta, MD

7:30 – 7:35  
Infra Renal Aortic Aneurysm Associated With External Or Common Iliac Artery Occlusion  
André M. Cancela, MD

7:36 – 7:41  
Systematic Review Of Prevalence Of Abdominal Aortic Aneurysms In Asians  
Wai Kiu Chan, MBBS

7:42 – 7:47  
Cell-Specific Profiling Of Transcriptional Landscape In Human Abdominal Aortic Aneurysm By Single-Cell RNA Sequencing  
Michele Silvestro, MD

7:48 – 7:53  
AAA Treatment In Women – Excellent Long-Term Results For EVAR  
Tina U. Cohnert, MD

7:54 – 7:59  
Simultaneous Trans-Catheter Aortic Valve Replacement And Endovascular Aortic Aneurysm Repair  
Halim Yammine, MD
ASSOCIATE PROGRAM SCHEDULE

8:00 – 8:05  Massive Vertebral Erosion By Chronic Contained Rupture Of The Abdominal Aortic Aneurysm
             Yasuhiko Terai, MD

8:06 – 8:11  Risk Scoring Strategy For Ruptured Abdominal Aortic Aneurysms
             Bowen Liu, MD

8:12 – 8:17  Endovascular Repair Or Open Surgery For Geriatric Patients With Ruptured Abdominal Aortic Aneurysm
             Chen Yao, MD

8:18 – 8:23  Utility And Implications Of 3D Printed Aortic Models In Teaching, Simulation And Preoperative Planning For Fenestrated And Branched Endografts
             Jason Chuen, MD, MPH, FRACS

8:24 – 8:29  Bridging Stent-Grafts In Fenestrated Aortic Repair: Performance Of Different Covered Stents For This Indication In An In Vitro Model
             Martin J. Austermann, MD

8:30 – 8:35  A Comparison Of EndoSuture Aneurysm Repair Versus Chimney Stent Grafts For Treating Short Neck Infrarenal Abdominal Aortic Aneurysms
             Adam W. Calarese, MD

8:36 – 8:41  Anatomical Applicability Of The Gore TAMBE Off-The-Shelf Multibranched Endograft For The Treatment Of Pararenal And Thoracoabdominal Aortic Aneurysms
             Alessandro Grandi, MS

8:42 – 8:47  Midterm Results Of Parallel Grafts In Patients With Pararenal And Type IV Thoracoabdominal Aortic Aneurysms Unsuitable For Fenestrated/Branch Endografts
             Wassim Mansour, MD, PhD

8:48 – 8:53  In Situ Laser Fenestration For Treatment Of Endoleak Type 1A
             Marek Majewski, MD

8:54 – 8:59  Re-Do Chimney EVAR With 2 AUI Into Descending Aortic Aneurysm In Treating Infected AAA
             Supatcha Prasertcharoensuk, MD

9:00 – 9:05  Juxta Renal Aortoiliac Occlusive Disease-Contemporary Results Of Surgical Management And Outcome In A Tertiary Care Center In North India
             Sriharsha Balraj, MBBS

9:06 – 9:11  Morphological Changes In Renal And Superior Mesenteric Arteries After Fenestrated Endovascular Aortic Repair
             Manuela M. Hernández Mateo, MD, PhD

9:12 – 9:30  Panel Discussion

9:30 – 10:00 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
SESSION 2  (Concourse A, Concourse Level)
ABDOMINAL AORTA AND ITS BRANCHES - PART II

Moderators:  Kenneth Ouriel, MD, MBA
             R. Clement Darling, III, MD
             Sherif A.H. Sultan, MD, PhD
             Benjamin W. Starnes, MD

10:00 – 10:05  Video Presentation: Open Paravisceral Aneurysm Repair
               Elizabeth Ramos Duran, MD

10:06 – 10:11  Endovascular Aneurysm Sealing Fails
               Rosa Villardefrancos, MD

10:12 – 10:17  Reversed Bell-Bottom Technique (REBEL-B) For The Endovascular Treatment Of Iliac Artery Aneurysms
               Paolo Righini, MD

10:18 – 10:23  Long-Term Survival After Endovascular Treatment Of Aorto-Iliac Aneurysms With The Bell-Bottom Technique
               Bernardo Massiere, MD

10:24 – 10:29  Perioperative Complications In Patients With “Shaggy Aorta” Undergoing EVAR And Open Aortic Surgery – A Retrospective Case Series And Case Discussion
               Johannes N. Hoffman, MD

10:30 – 10:35  MINS (Myocardial Injury After Non-Cardiac Surgery) After EVAR– Implications For Long-Term All-Cause Mortality
               Joel Sousa, MD

10:36 – 10:41  Outcomes After Aortic Aneurysm Repair In Patients With History Of Cancer From A Nationwide Dataset Analysis
               Hyunmin Ko, MD

10:42 – 10:47  Endovascular Technique Versus Conventional Replacement For AAA Up To 24 Months Follow Up
               Ignacio De Luca, MD

10:48 – 10:53  Ring On Anastomosis For Avoidance Of Proximal Anastomotic Leak Following Open Surgical Repair Of Abdominal Aortic Aneurysm
               Baihong Pan, MD

10:54 – 10:59  The Effects Of Post-Operative Intensive Care After Abdominal Aortic Aneurysms Repair
               Gianfranco Varetto, MD

11:00 – 11:05  Different Techniques In Endovascular Treatment Of Obstructive Aorto-Iliac Disease
               Sergio Zacà, MD

11:06 – 11:11  Bare Metal Stents For Leriche Syndrome: Outcomes Of 3-year Follow-Up
               Bihui Zhang, MD

11:12 – 11:17  Endovascular Approach Replacing Surgical Repair For Aorto-Iliac Occlusive Disease
               Tamer O. Tamimi, MD
11:18 – 11:23 Video Presentation: Concomitant Aortobifemoral Bypass And SMA Endarterectomy
Tony Shao, MD

11:24 – 11:29 Hybrid Pelvic Revascularization For Complex Open Repair Of Aorto-Iliac Aneurysms
Benjamin J. Pearce, MD

11:30 – 11:35 Cryopreserved Venous Allografts In Suprainguinal Reconstructions: A Single-Center Experience
Ivika Heinola, MD, PhD

11:36 – 11:41 Surgical Management Of Reno-Vascular Hypertension In Middle Aortic Syndrome
Yuehong Zheng, MD

11:42 – 11:47 Surgical Treatment Of Six Complex Renal Artery Aneurysms With Open “Ex-Vivo” Technique
Lucas Ribe, MD

11:48 – 12:05 Panel Discussion

12:05 – 1:06 Lunch - 2nd Floor Promenade
Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 3 (Concourse A, Concourse Level)
THORACO-ABDOMINAL AORTA, THORACIC AND ARCH AORTA - PART I

Moderators: Thomas S. Maldonado, MD
Fuxian Zhang, MD
Luis A. Sanchez, MD
Jean M. Panneton, MD

1:06 – 1:11 Mid - Long-Term Outcomes Of Scallop Endografts In The Management Of Aortic Pathology With Unfavorable Proximal Landing Zone In The Arch
Lydia Hanna, MBBS, BSc

1:12 – 1:17 Endovascular Creation Of Acute In-Vivo Swine Model And Multi-Modality Imaging For Understanding The Pathophysiology Of Type B Aortic Dissection
Viony M. Belvroy, MD

1:18 – 1:23 Four-Dimensional CT Angiography (4D-CTA) For Unclassified Endoleaks After Thoracic Endovascular Vascular Aortic Repair (TEVAR)
Yuanqing Kan, MD
Yi Si, MD

1:24 – 1:29 Local And Regional Management Variation After Acute Type B Aortic Dissection Accompanies Regional Disparities In Post Dissection Mortality in Ontario
Miranda Witheford MD, PhD

1:30 – 1:35 Characterization Of Non-Syndromic Familial Type B Aortic Dissection
Sherene Shalhub, MD, MPH
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<tr>
<td>1:36 – 1:41</td>
<td>FAN’s Classification Of Aortic Arch And Its Effect On Thoracic Endovascular Aortic Repair</td>
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<td>Weidong Fan, MD</td>
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<td>1:42 – 1:47</td>
<td>Short-Term Outcomes Of The T-Branch Off-The-Shelf Multi-Branched Stent-Graft For Re-Intervention After Previous Infra-Renal Aortic Repair</td>
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<td>Ahmed S. Eleshra, MD</td>
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<td>1:48 – 1:53</td>
<td>The Impact Of Aortic Remodeling On The Performance Of Bridging Stents After Branched Endovascular Aortic Repair</td>
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<td>Stefano Fazzini, MD, PhD</td>
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<td>1:54 – 1:59</td>
<td>Staging Procedures, Cerebrospinal Fluid Drainage, Selective Neuro-Monitoring And Use Of Conduits During Complex Endovascular Aortic Repair In Patients With High Risk Of Spinal Cord Injury</td>
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<td>Luis M. Ferreira, MD</td>
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<td>2:00 – 2:05</td>
<td>Treatment Evolution In Aortic Dissection: Review Of 100 Cases In A Tertiary Center</td>
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<td>Alice C. Lopes, MD</td>
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<td>2:06 – 2:11</td>
<td>Trends In Stanford B Dissection Patients In East China From 2009 To 2018</td>
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<td>Lihong Huang, PhD</td>
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<td>2:12 – 2:17</td>
<td>A Comparative Study Of Laser-Fenestrated Stent Grafts Versus Company-Manufactured Stent Grafts In Aortic Aneurysm: Initial Results</td>
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<td>Pascal Desgranges, MD, PhD</td>
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<td>2:18 – 2:23</td>
<td>Safety And Efficiency Of Distal Restrictive Covered Stent In Patients With Aortic Dissection Undergoing In Situ Laser</td>
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<td>Xiaobing Liu, MD</td>
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<td>2:24 – 2:29</td>
<td>A Novel Technique For The Open Repair Of Type III Thoraco-Abdominal Aortic Aneurysm Results In Less End Organ Ischemia: NO Bypass Shunt, NO Perfusions, And NO Hypothermia Techniques</td>
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<td>Narendranadh Meda, MS, DNB</td>
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<td>2:30 – 2:35</td>
<td>Biomechanical Pattern Of Proximal Landing Zones For Thoracic Endovascular Aortic Repair In The Bovine Arch Variant</td>
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<td>Massimiliano M. Marrocco-Trischitta, MD, PhD</td>
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<td>2:36 – 2:41</td>
<td>Early Results Of One-Stage Repair For Aortic And Coronary Artery Disease</td>
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<td>Yuanyuan Guo, MD</td>
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<td>2:42 – 3:00</td>
<td>Panel Discussion</td>
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<td>3:00 – 3:30</td>
<td>Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)</td>
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Session 4 (Concourse A, Concourse Level)
Thoraco-Abdominal Aorta, Thoracic and Arch Aorta - Part II

Moderators: James F. McKinsey, MD
Firas F. Mussa, MD
Zhong Chen, MD
Wayne W. Zhang, MD

3:30 – 3:35  Endovascular Treatment For Aortic Arch Dissection: Case Series And Literature Review
Kaixiong Qing, MBBS, M.Med, PhD

3:36 – 3:41  Endovascular Treatment Of The Ascending And Thoracic Aortic Arch Pseudoaneurysm
Mohammed Natour, MD

3:42 – 3:47  Dissected Aorta Repair Through Stent Implantation (DARTS) Trial: International Results
Michael C. Moon, MD

3:48 – 3:53  Use Of Uncovered E-XL Nitinol Stent In Combination With TEVAR In Complicated EVAR And Highly Angulated Necks
Rolf A. Dammrau, MD

3:54 – 3:59  A New Off-Label Technique For A Total Endovascular Aortic Arch Repair
Leonardo Ferber, MD

4:00 – 4:05  Mid-Term Durability Of Ascending Aortic Banding Technique For Off-Pump Total Arch Repair
Takayuki Shijo, MD

4:06 – 4:11  Wrapping Of An Ascending Aorta Aneurysm And Hybrid Technique For Acute TBAD In High Risk Patient
Tung Son Nguyen, MD

4:12 – 4:17  Tapered Covered Stent: A Reasonable Choice For TEVAR In Acute Aortic Dissection
Jian Zhang, MD

4:18 – 4:23  Endovascular Repair Of Kommerell's Diverticulum With Or Without An Aberrant Left Subclavian Artery In Right-Side Aortic Arch: Report Of 4 Cases
Peixian Gao, MD

4:24 – 4:29  Hybrid Repair Techniques For Kommerell's Diverticulum: New Aortic Arch Classification And Results
Gioavanni Tinelli, MD, PhD

4:30 – 4:35  Deterioration Of The Aortic Dissection After TEVAR
Shenghan Song, MD

4:36 – 4:41  Hybrid Repair Of Ruptured Aortic Arch Aneurysm Combined With Aberrant Right Subclavian Artery: Case Report
Stefan L. Stefanov, MD, PhD
4:42 – 4:47  Comparing Results Of Treating Infected Thoracic And Abdominal Aortic Aneurysms Between Open And Endovascular Repair  
Chonlathorn Chaichote, MD

Dong Yan, MD

4:54 – 4:59  The Role Of Heparin In Endovascular Repair Of Blunt Thoracic Aortic Injury  
Jorge Rey, MD

5:00 – 5:05  Abnormal Hemodynamics Could Act As Another Surgical Indication In Takayasu’s Arteritis Patients  
Mengxin Zhou, MM

5:06 – 5:11  Different Mechanisms Of The Impact Force In Acute Aortic Dissections  
Ernő Remsey-Semmelweis, MD

5:12 – 5:30  Panel Discussion

WEDNESDAY, NOVEMBER 20, 2019

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

SESSION 5  (Concourse A, Concourse Level)  
CAROTID, UPPER EXTREMITIES, SUPERIOR MESENTERIC ARTERY

Moderators:  
Peter L. Faries, MD  
Sean P. Lyden, MD  
Evan C. Lipsitz, MD, MBA  
Mahmoud B. Malas, MD, MHS  
Caron B. Rockman, MD

7:00 – 7:05  Carotid Flow Volume Measurement With Doppler Ultrasonography As A New Approach To The Diagnosis Of Internal Carotid Artery Stenoses  
Piotr Kaszczewski, MD, PhD

7:06 – 7:11  Duplex Ultrasound Surveillance Of Trans-Carotid Artery Revascularization Patients In Routine Clinical Practice  
Brian R. Beeman, MD

7:12 – 7:17  A Comparative Quantitative Analysis Of Embolic Filter Debris Load During Carotid Artery Stenting Among Open Cell, Closed Cell And Micromesh Stents  
Michele Antonello, MD

7:18 – 7:23  Preliminary Results From A Prospective Real-World Multicenter Clinical Practice Of CAS Using The Cguard Embolic Prevention System: The IRONGUARD 2 Study  
Pasqualino Sirignano, MD
7:24 – 7:29  Hybrid Surgery For Neurologically Symptomatic Patients With Near Total Or Total Occlusion Of The Internal Carotid Artery  
Changming Wang, MD

7:30 – 7:35  Multimodal Neurophysiological Monitoring Reduces Shunt Incidence During Carotid Endarterectomy  
Marco Leopardi, MD, PhD

7:36 – 7:41  Duration Of Blood Flow Reversal During Trans-Carotid Artery Revascularization Does Not Affect Outcome  
Norman H. Kumins, MD

7:42 – 7:47  Comparison Of Perioperative Cerebrovascular Events Among Different Surgical Approaches For Severe Bilateral Carotid Artery Stenosis  
Xiaona Wang, MD

7:48 – 7:53  The ‘Sleeve Shaping’ Technique In The Treatment Of Complex Peripheral Artery Aneurysms: Report Of 2 Cases  
Lei Ji, MD

7:54 – 7:59  Acute Bleeding Caused By Infected Carotid Pseudo-aneurysm And Carotid Patch-Cutaneous Fistula 12 Years Post Endarterectomy  
Lucia I. Martinez, MD, PhD

8:00 – 8:05  Modifiable Factors That Reduce Post-Operative Complications Following Carotid Endarterectomy  
Jens Eldrup-Jorgensen, MD

8:06 – 8:11  Emergent Carotid Revascularization For Acute Stroke Therapy: A Role For Open Surgery And Catheter-Based Therapy Based On Brain Imaging  
Scott S. Berman, MD, MHA

8:12 – 8:17  Neurological Complication Rates Of Intravenous Thrombolysis Combined With Early Carotid Endarterectomy For Treatment Of Hyperacute Ischemic Stroke  
Ewa Swiecka, MD

8:18 – 8:23  Rare Supra-Aortic Steal Syndromes Treated With An Endovascular Approach  
Nelson Camacho, MD

8:24 – 8:29  Surgical Management Of Carotid Body Tumors: 24-Year Experience At Royal Medical Services In Amman, Jordan  
Mohammad Raffat Jaber, MD

8:30 – 8:35  Surgical Outcomes Of Carotid Body Tumor With Shamblin III And Related Factors Of Malignancy  
Wei Zhang, MD

8:36 – 8:41  Endovascular Therapy For Subclavian Artery Aneurysm: Long-Term Outcome  
Fei Liu, MD

8:42 – 8:47  Superior Mesenteric Artery Thrombosis: International Endovascular Treatment Team Approach  
Bella Huasen, MD
8:48 – 8:53 Prognosis And Predictors For Spontaneous Isolated Superior Mesenteric Artery Dissection
Lei Wang, MD

8:54 – 8:59 Percutaneous Mechanical Thrombectomy For Acute Superior Mesenteric Artery Embolism: Preliminary Experience In Five Cases
Zhe Zhang, MD

9:00 – 9:05 Conservative Management For Symptomatic Spontaneous Isolated Dissection Of Superior Mesenteric Artery With Or Without Antithrombotic Therapy: A Meta-Analysis
Seung-Kee, Min, MD, PhD

9:06 – 9:30 Panel Discussion

9:30 – 10:00 Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 6 (Concourse A, Concourse Level)
LOWER EXTREMITIES ARTERIAL - PART I

Moderators: Alik Farber, MD
Cynthia K. Shortell, MD
Timur P. Sarac, MD
Samuel R. Money, MD, MBA

10:00 – 10:05 Poor Mobility, Lack Of Statin Use And Socio-Economic Deprivation Are Associated With Worse Survival After A Major Lower Limb Amputation: A 10 Year Prospective Study From A Rehabilitation Center
Arsalan Wafi, MBBS

10:06 – 10:11 Clinical Characteristics And Treatment Of Femoral Pseudo-Aneurysms Secondary To Intravenous Drug Abuse In China: A Single Center Study
Zhoupeng Wu, MD

10:12 – 10:17 A Rare Superficial Femoral Pseudo-Aneurysm Formation After Treatment With Drug-Coating Balloon
Xiangjiang Guo, MD

Carlo Maturi, MD

Harry G. Narroway, MD

10:30 – 10:35 Impact Of Calcification Modeling And Planning Circles With Fusion Imaging For The Chronical Total Occlusion Of Iliac And Femoral-Popliteal Arteries
Nicolas Louis, MD
10:36 – 10:41  Association Of Provisional Stenting With Long-term All-Cause Mortality: A Further Analysis Of 5-Year Outcome Of The ACOART I Study
   Jie Liu, MD
10:42 – 10:47  Mortality Of Paclitaxel Patients In An Australian Vascular Surgical Center
   David R.B. Herlihy, MBBS
10:48 – 10:53  Qualitative And Quantitative Malnutrition As A Risk Factor For Major Amputation After Revascularization In Patients With Critical Limb Ischemia
   Piotr Ciostek, MD
10:54 – 10:59  Preventable Complications Drive Rising Costs In The Management Of Patients With Critical Limb Ischemia
   Anahita Dua, MD
11:00 – 11:05  Composite PTFE-Autologous Saphenous Vein Graft To Treat Critical Limb Ischemia: Long-Term Results
   Salvatore A. Turiano, MD
11:06 – 11:11  Experimental Model To Assess Safety Of Energy Sealing Devices In Saphenous Vein Graft In Bypass Surgery
   Moisés Falcón Espínola, MD
11:12 – 11:17  Iliac Remote Endarterectomy: Restoring Circulation In A Patient With Infected Aorto-Femoral And Axillo-Bifemoral Bypasses
   Kenneth R. Nakazawa, MD
11:18 – 11:23  Placement Of Prosthetic Axillofemoral Or Axillo-Iliac Bypass Under The Muscle At The Inguinal And Abdominal Area To Avoid Infection
   Matti Pokela, MD, PhD
11:24 – 11:29  Safety And Effectiveness Of A New Valvulotome: Insights From The LIMBSAVE Registry (Treatment Of Critical Limb Ischemia With Infragenicular Bypass Adopting In Situ Saphenous Vein Technique)
   Nicola Troisi, MD
11:30 – 11:35  The Effect Of Direct Revascularization Of A Target Vessel On Improving Wound Healing
   Mohamed A. Rizk, MD
11:36 – 11:41  Tibial Occlusive Disease In Chronic Kidney Disease: Saving The Limb And The Kidney
   Nalaka Gunawansa, MD
   Xin Nee Ho, MBBS
11:48 – 12:00  Panel Discussion
12:00 – 1:00  Lunch Break - 2nd Floor Promenade
   Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)
## SESSION 7  (Concourse A, Concourse Level)
### LOWER EXTREMITIES ARTERIAL - PART II

**Moderators:**
- Wei Zhou, MD
- Fred A. Weaver, MD
- Alan M. Dietzek, MD, RPVI

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>1:06</td>
<td>DCB For Complicated Femoral-Popliteal Lesions: 12-Month Outcome From A Single Center In China</td>
<td>Zhidong Ye, MD</td>
</tr>
<tr>
<td>1:12</td>
<td>Individualized Treatment Strategy For Lower Extremity Arterial Ulcer Based On Endovascular Intervention</td>
<td>Peng Wang, MD</td>
</tr>
<tr>
<td>1:18</td>
<td>Retrograde Use Of The Outback Re-Entry Catheter In Complex Infra-Inguinal Arterial Recanalization</td>
<td>Lorenzo Patrone, MD</td>
</tr>
<tr>
<td>1:24</td>
<td>Randomized, Multicenter Trial Of ZENFlowTM Drug-Eluting Balloon In The Treatment Of Femoropopliteal Artery Occlusive Disease</td>
<td>Leng Ni, MD</td>
</tr>
<tr>
<td>1:30</td>
<td>VIABAHN® Stent Graft For The Endovascular Treatment Of Occlusive Lesions In The Femoropopliteal Artery: A Retrospective Cohort Study With 4-Year Follow-Up</td>
<td>Qilong Ni, MD, PhD</td>
</tr>
<tr>
<td>1:36</td>
<td>Novel Hybrid Retrograde Metatarsal Angioplasty As Bailout Technique In Chronic Limb Threatening Ischemia With Tissue Loss</td>
<td>Mahmoud Salah, MD</td>
</tr>
<tr>
<td>1:42</td>
<td>Imaging And Quantifying Microperfusion In Non-Healing Ulcers Using Contrast Enhanced Ultrasound: A Novel Approach</td>
<td>Sarah Raza, DO</td>
</tr>
<tr>
<td>1:48</td>
<td>Outcomes After Split-Thickness Skin Grafting In Peripheral Arterial Disease And Diabetic Foot Wounds In An Asian Population</td>
<td>Joel S.H. Wong, MBBS</td>
</tr>
<tr>
<td>1:54</td>
<td>Use Of Disposable Negative Pressure Wound Therapy On Split-thickness Skin Graft Recipient Sites For Peripheral Arterial Disease Foot Wounds - 2 Case Reports</td>
<td>Sze Wai Leong, MBBChBAO</td>
</tr>
<tr>
<td>2:00</td>
<td>Revascularization And Growth Factor Injection: It Is Effective For The Healing Of Foot Ulcers</td>
<td>Mohamed Nadjib Bouayed, PhD</td>
</tr>
<tr>
<td>2:06</td>
<td>ROS-Responsive Particles EGCG-Zinc Networks For Therapeutic Angiogenesis In Mouse Model Of Limb Ischemia</td>
<td>Zuoguan Chen, MS</td>
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<tr>
<td>Time</td>
<td>Session/Event</td>
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</table>
| 2:12  | Low-Dose Ionizing Radiation Modulates The Expression Of Pro-Angiogenic Genes In Critical Limb Ischemia Patients: Preliminary Results  
*Augusto M.A. Ministro, MD, PhD* |
| 2:18  | Venous Allograft Transplantation From Living Donor As A Last Resort For Limb Salvage  
*Sagi Levental, MD* |
| 2:24  | Surgical Management Of Functional Popliteal Entrapment Syndrome In Athletes  
*Kedar Lavingia, MD* |
| 2:30  | Below Knee Popliteal Vascular Injuries: The Jerusalem Experience  
*Jakob D. Nowotny, MD* |
| 2:36  | Short-Term Outcome Of Primary Stent-Graft For Peripheral Arterial Aneurysm In Patients With Behcet’s Disease  
*Tamer Khafagy, MD, PhD* |
| 2:42  | Panel Discussion |
| 3:00  | Break – Visit Exhibits And Pavilions (2nd and 3rd Floors) |

**SESSION 8**  
**Concourse A, Concourse Level**  
**LOWER EXTREMITY ARTERIES - PART III AND VEINS**

**Moderators:**  
*Mark A. Adelman, MD*  
*Patrick E. Muck, MD*  
*Sherene Shalhub, MD*  
*Jan M.M. Heyligers, MD, PhD*  
*Anil P. Hingorani, MD*  

<table>
<thead>
<tr>
<th>Time</th>
<th>Session/Event</th>
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</table>
| 3:30  | Endovascular Repair Of Femoral-Popliteal Aneurysms  
*Guilherme Napp, MD* |
| 3:36  | Initial Experience With Cre8® Stent For Below-The-Knee Disease In Patients With Critical Limb Ischemia  
*Africa Duque Santos, MS, MD* |
| 3:42  | 4-Year Long Outcome With Drug Coated Balloons For SFA Lesions In Patients With CLI: Comparison With Conventional Bypass Surgery  
*Onur S. Göksel, MD* |
| 3:48  | Synthetic Marijuana And Acute Lower Limb Thrombo-Embolism And Ischemia: A Case Report  
*Asaf Rabin, MD* |
| 3:54  | Pediatric Penetrating Injury Of Popliteal Fossa  
*Ronza R. Salem, MD* |
| 4:00  | Small Diameter Recanalization Of The Great Saphenous Vein After Ultrasound-Guided Sclerotherapy: A Three-Year Follow-Up  
*Jean L. Gillet, MD* |
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<tr>
<th>Time</th>
<th>Title</th>
<th>Presenter/Author</th>
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<tbody>
<tr>
<td>4:06</td>
<td>Immediate Versus Early Endovenous Ablation In Venous Ulcer</td>
<td>Toni Pihlaja, MD</td>
</tr>
<tr>
<td>4:12</td>
<td>Healing Rates Of Lower Extremity Ulceration Following Ultrasound Guided Foam Sclerotherapy As An Adjunct To Radiofrequency Ablation</td>
<td>Alisha Oropallo, MD</td>
</tr>
<tr>
<td>4:18</td>
<td>Intravenous Sulodexide Promotes Wound Healing In Chronic Venous Ulcers: A New Perspective In Treatment</td>
<td>Nora E. Lecuona, M.Ed.</td>
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<tr>
<td>4:24</td>
<td>Endovenous Laser Ablation Of Great Saphenous Vein: Effects Of The Various Lengths Treated On The Outcome</td>
<td>Syed Sulaiman Shoab, FRCS</td>
</tr>
<tr>
<td>4:30</td>
<td>Bridge Negative Pressure Wound Therapy + Compression Versus Compression Alone In Non-Healing Venous Ulcers: A Randomized Controlled Trial</td>
<td>Wael Tawfick, MD</td>
</tr>
<tr>
<td>4:36</td>
<td>Recanalization Rate And Postthrombotic Syndrome In Patients With Deep Venous Thrombosis Treated With Rivaroxaban Or Warfarin: A Comparative Study</td>
<td>Rafael A. Soares, MD</td>
</tr>
<tr>
<td>4:42</td>
<td>Hyperhomocysteinemia: A Risk Factor And A Predictor Of The Severity In Primary Chronic Venous Disease</td>
<td>Luv Luthra, MCh</td>
</tr>
<tr>
<td>4:48</td>
<td>Clinical And Health Economic Outcomes Of A Single Use Negative Pressure Wound Therapy For Vascular Patients In The Netherlands</td>
<td>Otmar R.M. Wikkeling, MD, MBA</td>
</tr>
<tr>
<td>4:54</td>
<td>The Effects Of Two Nursing Care Plans Of Hydration Therapy To Avoid Renal Insufficiency In Patients With Lower Extremity DVT Receiving Mechanical Thrombectomy</td>
<td>Yanjie Wang, RN</td>
</tr>
<tr>
<td>5:00</td>
<td>Nurses’ Objectives Regarding Venous Thromboembolism Prophylaxis: A National Survey Study</td>
<td>Yuan Xu, RN, MS</td>
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<tr>
<td>5:06</td>
<td>National Survey On Management Of Varicose Veins In China</td>
<td>Fuxian Zhang, MD</td>
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<tr>
<td>5:12</td>
<td>Endovenectomy Of The Common Femoral Vein As Last Option In Severe Post-Thrombotic Syndrome</td>
<td>Nelson Encarnacion, MD</td>
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<td>5:18</td>
<td>Panel Discussion</td>
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THURSDAY, NOVEMBER 21, 2019

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

SESSION 9 (Concourse A, Concourse Level)
VENA CAVA, ILIAC VEINS AND INTERESTING MISCELLANEOUS TOPICS

Moderators:  
Peter Gloviczki, MD  
Peter Henke, MD  
Palma M. Shaw, MD  
Vikram S. Kashyap, MD

7:06 – 7:11 Early Identification Of Patients With Iliofemoral DVT Using Plasma D-dimer Concentration  
Laith Al-Balbissi, MD

7:12 – 7:17 Black-Blood Venous Imaging (BBVI) + Phase Contrast (PC): A Contrast-Free Cardiovascular Magnetic Resonance Approach In The Diagnosis Of May-Thurner Syndrome  
Zhangbo Cheng, MD

7:18 – 7:23 Outcomes Of Iliac Vein Stenting In The Asian Population  
Zhiwen Joseph Lo, MBBS, BSc (Anat)

7:24 – 7:29 Hybrid Management Of Acute Deep Vein Thrombosis In The Iliocaval Segment: Eliminating The Underlying Anatomical Occlusion/Stenosis  
Leopoldo Alvarado, MD

7:30 – 7:35 Vena Cava Filter Deployment Prior To Percutaneous Endovenous Therapy For Proximal Lower Limb Deep Venous Thrombosis: Should It Be A Standard Technique  
Mohamed Ismail, MD

7:36 – 7:41 Midterm Outcome Of Pharmaco-Mechanical Catheter-Directed Thrombolysis Combined With Stenting For Treatment Of Iliac Vein Compression Syndrome With Acute Iliofemoral Deep Vein Thrombosis  
Fenghe Li, MD

7:42 – 7:47 Indwelling Skills Improve Retrievable Vena Cava Filters Retrieval Rate  
Tao Zhou, MD

7:48 – 7:53 Capturing A Migrating IVC Filter In A Migrant Patient  
Irwin M. Best, MD

7:54 – 7:59 Comparison Study On The Hemodynamics Of Three Types Of Inferior Vena Cava Filters By Using CFD Technique: Vena-Tech, Denali And OptEase  
Wen Huang, MD

8:00 – 8:05 Inferior Cava Thrombosis With Decreased Antithrombin III And Protein S In Pregnant Patient With Hypertension: Case Report  
Le Xiao, MD
MISCELLANEOUS TOPICS OF INTEREST

<table>
<thead>
<tr>
<th>Time</th>
<th>Title</th>
<th>Speaker</th>
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<tbody>
<tr>
<td>8:06</td>
<td>Surgical Treatment Of Rare, Isolated Left Innominate Vein Aneurysms</td>
<td>Wei Wang, MD</td>
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<tr>
<td>8:12</td>
<td>The Qualitative Study Of The VTE Patients’ And Care Providers’ Needs On Mobile Health Solutions And The Prototype Systems</td>
<td>Lei Wang, RN</td>
</tr>
<tr>
<td>8:18</td>
<td>Clinical Significance Of D-dimer And Intestinal Fatty Acid Binding Protein In Patients With Acute Superior Mesenteric Vein Thrombosis</td>
<td>Jia Wan, MD</td>
</tr>
<tr>
<td>8:24</td>
<td>Trends In Survival Of Under 55 And Over 55 Year Old Women Following Major Vascular Intervention: A Gender And Age Comparison</td>
<td>Matthew S. Jorgensen, BS</td>
</tr>
<tr>
<td>8:30</td>
<td>Femoral Arteries Are Better Indicators Than Carotid Arteries Of Cardiovascular Risk In HIV/AIDS Patients</td>
<td>Dragan M. Vasic, MD, PhD</td>
</tr>
<tr>
<td>8:36</td>
<td>Comparative Evaluation Of The Barbeau’s Test For Radial Access In Defined Age Segments</td>
<td>Altino O. Moraes, MD</td>
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<tr>
<td>8:42</td>
<td>Trans-Radial Access For Endovascular Interventions With Same-Day Discharge: Feasibility And Safety In A Community Hospital</td>
<td>Robert L. Minor, MD</td>
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<tr>
<td>8:48</td>
<td>Improved Perfusion As A Predictor Of Successful Perioperative Blood Pressure Control</td>
<td>Lijing Fang, MD</td>
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<tr>
<td>8:54</td>
<td>Design Modifications Of Low-Compliance Angioplasty Balloons To Minimize Inflation-Induced Straightening</td>
<td>Benton G. Chuter, MSME</td>
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<tr>
<td>9:00</td>
<td>Panel Discussion</td>
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<td>9:30</td>
<td>Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)</td>
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SESSION 10  (Concourse A, Concourse Level)

ARTERIAL-VENOUS ACCESS FOR HEMODIALYSIS AND OTHER TOPICS OF INTEREST

Moderators:  Maria Frankovicova, MD
             Todd Berland, MD
             Larry A. Scher, MD
             Anton N. Sidawy, MD, MPH
             Matthew J. Dougherty, MD

10:00 – 10:05 Long-Term Complications Of Central Venous Access Catheters: A Meta-Analysis
       John T. Loree, BA

10:06 – 10:11 Clinical Efficacy Of Percutaneous Transluminal Angioplasty To Promote
          Arteriovenous Fistula Maturation
          Hui Li, MD

10:12 – 10:17 Single-Center Experience Of Endovascular AV-Fistula (EndoAVF) Creation With Both
           WavelinQ™ And Ellipsys® Systems
           Robert Shahverdyan, MD

10:18 – 10:23 Outcomes Comparison Between Basilic Vein Transposition And Arm Straight Graft In
             Hemodialysis Patients
             Kanoklada Srikuea, MD

             Support Device
             Vladimir Matoussevitch, MD

10:30 – 10:35 Diagnostic Value Of Different Ultrasound Criteria To Assess Arteriovenous Fistula
          Maturation At The 6th Post-Operative Week
             Yifeng Zhu, MD

10:36 – 10:41 Brachial Artery Reconstruction In Ruptured Anastomotic Pseudoaneurysm Of A
            Brachiocephalic A-V Fistula
            Himamshu Verma, MBBS, MS

MISCELLANEOUS TOPICS OF INTEREST

10:42 – 10:47 Coil Embolization In The Treatment Of Coronary Artery Aneurysm: Case Report With
             2-Year Follow-Up
             Lei Li, MD

10:48 – 10:53 Unusual Injury Of Common Iliac And Median Sacral Arteries After Air Gunshot With
              Distal Embolization Of The Pellet: Case Report
              Nadelin K. Nikolov, MD, PhD

10:54 – 10:59 Role Of Antibiotic-Loaded Chitosan Nano-Droplets On Enterococci Isolated From
            Chronic Ulcers Of The Lower Limbs
            Daniela Mazzaccaro, MD
11:00 – 11:05  Elevated Circulating TIMP-1 In Patients With COPD And Pulmonary Hypertension  
              Wenjun He, MD

11:06 – 11:30  Panel Discussion

End of the VEITHsymposium Associate Faculty Program
FRANK J. VEITH INTERNATIONAL SOCIETY ASSOCIATE FACULTY PROGRAM
AT VEITHsymposium

THURSDAY, NOVEMBER 21, 2019

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

1:00 – 1:05 Introduction
Juan C. Parodi, MD
President of the FJV International Society

SESSION 11 (Concourse A, Concourse Level)
ABDOMINAL AORTA AND THORACIC AORTA

Moderators: Juan C. Parodi, MD
Michel Makaroun, MD
Michael L. Marin, MD

1:06 – 1:11 Safety Of Patient Stratification Based On Initial Imaging Follow-up After Endovascular Aneurysm Repair (EVAR)
Suvi J. Väärämäki, MD, PhD

1:12 – 1:17 Update On The ESVS Guidelines For Aortoabdominal And Iliac Aneurysms; What Is New And How Does It Differ From The SVS And The NICE Guidelines In Preparation?
Karin Elisabeth Schmidt, MD

1:18 – 1:23 ERAS Protocol Versus EVAR For Isolated Abdominal Aortic Aneurysm
Alessandro Robaldo, MD

1:24 – 1:29 An Endovascular Approach Is Safe And Effective In The Treatment Of Abdominal Aortic Aneurysms Detected By The National Abdominal Aortic Aneurysm Screening Program
Katherine Stenson, MD

1:30 – 1:35 First-In-Man Clinical Application Of The TrackCath System In Endovascular Repair Of Aortic Aneurysms - A Prospective Multi-Center Clinical Trial
Nikolaos Floros, MD

1:36 – 1:41 Versatility Of In Situ Laser Fenestration For Antegrade Recanalization Of Visceral Branches In Complex Aortic Repair
Fanny S. Alie-Cusson, MD

1:42 – 1:47 Migration After ChEVAS
Aleksandra C. Zoethout, MD

1:48 – 1:53 Quantification Of Suprarenal Aortic Neck Dilation Following Fenestrated Endovascular Aneurysm Repair
Kenneth Tran, MD
ASSOCIATE PROGRAM SCHEDULE

1:54 – 1:59  Impact Of Oversizing In Relation To Aortic Arch Tortuosity In The Occurrence Of Bird Beak Effect after TEVAR
William J. Yoon, MD

2:00 – 2:05  Outcomes Of Total Aortoiliac Reconstruction With Kissing Self-Expanding Covered Stents In Chinese Population
TBD

2:06 – 2:11  Hybrid Surgery May Represent A Valid Alternative To Open Surgery For Aortic Arch Pathologies
Apostolou Dimitrios, MD

2:12 – 2:17  Occlusion Of A Retrograde Fed Iliac Aneurysm Years After An Aortobifemoral Bypass
José Norberto Allende, MD

2:18 – 2:23  Frequency Of Perigraft Hygroma After Aortic Reconstructions Using Expanded Polytetrafluoroethylene (ePTFE) Versus Dacron Grafts
Jae S. Cho, MD

2:24 – 2:29  Elevated Neutrophil-Lymphocyte Ratio Predicts Mortality Following Elective Open And Endovascular Abdominal Aortic Aneurysm Repair
Alexander H. King, MD

2:30 – 2:45  Panel Discussion

2:45 – 3:15  Break – Visit Exhibits And Pavilions (2nd and 3rd Floors)

SESSION 12  (Concourse A, Concourse Level)
CAROTID AND LOWER EXTREMITY ARTERIAL

Moderators:  Frans L. Moll, MD, PhD
Wesley S. Moore, MD
Piotr Myrcha, MD, PhD
Michael S. Conte, MD

3:15 – 3:20  General Anesthesia Versus Loco-Regional Anesthesia For Carotid Endarterectomy: A Systematic Review
Wudi Ma, MD

3:21 – 3:26  Combined Carotid And Coronary Atherosclerosis - Complex Diagnosis And Endovascular Treatment
Lyubinka Yanevskya, MD

Ajay Savlania, MCh

3:33 – 3:38  Explore No More: Endovascular Management Of Penetrating Trauma To Zone II Of The Neck
Sarah Kaslow, MD, MPH
3:39 – 3:44  Correlation Between Multidetector Computer Tomography And Carotid Plaque Histological Heterogeneity  
Gian Franco Veraldi, MD

3:45 – 3:50  Sustained Limus Release Designed Drug Eluting Balloons: Is This The Solution For The Potential Increased Mortality With Paclitaxel Devices When Treating The SFA?  
Thomas Zeller, MD

3:51 – 3:56  Three Years Follow-up In BIOPAC trial – Treating Lesions In Femoral-popliteal Segment Using Microcrystalline And Biocompatible Polymer Paclitaxel Coated Balloon Versus Plain Balloon Angioplasty  
Przemek M. Nowakowski, MD

3:57 – 4:02  Endovascular Intervention Versus Above-The-Knee Bypass Surgery In Femoropopliteal Arterial Lesion Of Minimum 10 cm Complete Occlusion  
Rui Zhang, MD

4:03 – 4:08  Outcomes Of Popliteal Stents Placement Crossing Versus Not Crossing  
Junjie Ning, MD

4:09 – 4:14  Outcomes Of Orbital Atherectomy Treatment In Symptomatic Peripheral Artery Disease Patients: Sub-Analysis Of The LIBERTY 360 Study  
George Adams, MD, MHS, MBA

4:15 – 4:20  Result Of 309 Consecutive Retrograde Recanalization Of Complex Femoropopliteal Or Below-The-Knee Occlusions  
Erwin Blessing, MD

Bahaa Nasr, MD

4:27 – 4:32  Outcomes Of Dialysis Patients With Critical Limb Ischemia After Revascularization Compared To Patients With Normal Renal Function  
Alexander Meyer, MD

4:33 – 5:05  Panel Discussion
ASSOCIATE PROGRAM SCHEDULE

FRIDAY, NOVEMBER 22, 2019

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

SESSION 13  (Concourse A, Concourse Level)
MORE LOWER EXTREMITY ARTERIAL, VENOUS, ARTERIAL-VENOUS ACCESS FOR HEMODIALYSIS AND OTHER INTERESTING TOPICS

Moderators:  Armando Mansilha, MD, PhD
Jerry Goldstone, MD
Alan M. Dietzek, MD, RPVI
Keith D. Calligaro, MD

7:00 – 7:05  Sexual Dysfunction Following Aorto-Iliac Surgery: Does Endovascular Repair Preserve Erectile Function?
Souad Benallal, MD

7:06 – 7:11  True Anterior Tibial Artery Aneurysm With Rupture And Compartment Syndrome
Deena AlQedrah, MD

7:12 – 7:17  New Biomaterials In Vascular Surgery
Michael Gorlitzer, PhD, MD, MBA

7:18 – 7:23  Off-Label Medical Device Use In Vascular Surgery-An Analysis Through Both Surgical And Legal Lens
Wei Li, MPH

7:24 – 7:29  Validity Of Adjuvant Therapy In Patients With Chronic Limb-Threatening Ischemia
Massimiliano W. Guerrieri, MD

7:30 – 7:35  Percutaneous Sharp Recanalization Of A Surgically Ligated Infra-Renal IVC
Justin M. Milligan, MD

7:36 – 7:41  Chronic Low Back Pain Associated With Proximal Venous Outflow Obstruction
Windsor Ting, MD

7:42 – 7:47  The Catheter Directed Thrombolysis Plus Aspiration Thrombectomy Treatment Show An Invariable Fibrinogen Level During Thrombolysis
Yuan Che, MD

7:48 – 7:53  Primary Chronic Venous Insufficiency Is Distinguished By Attenuated Healing Networks And T-Cell Activation
Ulka Sachdev, MD

7:54 – 7:59  New Mechanical Precision Bandager For Pediatric And Adult Patients
Magdiel J. Trinidad, MD

8:00 – 8:05  Simultaneous Treatment Of Acute Pulmonary Embolism And Deep Venous Thrombosis
Domenico Benevento, MD
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<th>Time</th>
<th>Title</th>
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<tr>
<td>8:06</td>
<td>Atypical Use of HeRO Device</td>
<td>Fernando T. Faria, MD</td>
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<tr>
<td>8:12</td>
<td>Creating Arteriovenous Fistulas In 132 Consecutive Patients Using New Baig’s Microvascular Forceps: Lightweight, Atraumatic, And Versatile Tool</td>
<td>Mirza Baig, FRCS</td>
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<tr>
<td>8:18</td>
<td>Evaluation Of The Endovascular Salvage Outcome For Dysfunctional Hemodialysis Arteriovenous Fistula According To The Site Of The Lesion</td>
<td>Usama Ali Lotfi, MD</td>
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<td>8:24</td>
<td>The Utility Of Audio-clip Files In Long-Term Monitoring Of Arteriovenous Fistulas And Grafts</td>
<td>Andrew Schulick, MD</td>
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<tr>
<td>8:30</td>
<td>Endovascular Management Of Blunt Celiac And Mesenteric Artery Injuries: Midterm Outcomes</td>
<td>Aditya Safaya, MD</td>
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<tr>
<td>8:36</td>
<td>Ureteral Arterial Fistula – A Role For Open Operation In The 21st Century</td>
<td>Daniel J. Badia, DO</td>
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<td>8:42</td>
<td>Renal Salvage Using Stent Graft Placement After Acute Renal Artery Occlusion With Prolonged Ischemic Time</td>
<td>Yue Gao, MD</td>
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<td>8:48</td>
<td>Panel Discussion</td>
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End of the Frank J. Veith International Society Associate Faculty Program
CHINESE SOCIETY FOR VASCULAR SURGERY ASSOCIATE FACULTY PODIUM PRESENTATIONS PROGRAM AT VEITHsymposium

FRIDAY, NOVEMBER 22, 2019

10:00 – 10:05 Opening Remarks
Frank J. Veith, MD
Enrico Ascher, MD

SESSION 14 (Concourse A, Concourse Level)
CHINESE SOCIETY FOR VASCULAR SURGERY ASSOCIATE FACULTY PODIUM PRESENTATIONS PROGRAM
Moderators: Gustavo S. Oderich, MD, FACS
Russell H. Samson, MD, RVT, FACS

10:06 – 10:11 Prevent Restenosis With Procedural Drug Delivery System
Yongiun Li, MD

10:12 – 10:17 Successful Renal Artery Reconstruction During EVAR: Chimney And Snorkel Technique
Chenglei Zhang, MD

10:18 – 10:23 Application Of Integrated Branch Stent In The Treatment Of Complex Aortic Arch Lesions: Analysis Of 26 Cases
Guoquan Wang, MD

10:24 – 10:29 Excimer Laser Atherectomy For Chronic Femoropopliteal Artery Occlusion Following Failed Femoropopliteal Bypass – A Case Report
Hui Liu, MD

10:30 – 10:35 Excimer Laser Assisted Balloon Angioplasty For The Treatment Of Left Subclavian Arterial Occlusive Lesions
Weixiao Li, MD

10:36 – 10:41 A Novel Modified Endovascular Strategy For Treatment Of Acute Pulmonary Embolism Using AngioJet Rheolytic Thrombectomy System
Kun Li, MD

10:42 – 10:47 Effects Of Carotid Endarterectomy And Carotid Artery Stenting In A Single Center
Zoujun Hu, MD

10:48 – 10:53 Ultrasound Guided Hybrid Surgery For Salvage Forearm Thrombosed Fistula Aneurysm
Yaxue Shi, MD
10:54 – 10:59  Mid-Term Results Of Endovascular Treatment For Spontaneous Isolated Dissection Of The Superior Mesenteric Artery  
Ziheng Wu, MD  
11:00 – 11:05  In Situ Venous Laser Fenestration Of Stanford Type A Aortic Dissection During Thoracic Endovascular Aortic Repair  
Xinwu Lu, MD  
Yangyang Ge, MD  
11:12 – 11:17  The 301 Classification: A Proposed Modification To The Stanford Type B Aortic Dissection Classification For Thoracic Endovascular Aortic Repair Prognostication  
Yangyang Ge, MD  
11:18 – 11:23  Midterm Outcomes Of In-situ Laser Fenestration During TEVAR For Complex Aortic Arch Diseases And Analysis Of Its Complications  
Zhen Li, MD, PhD  
11:24 – 11:29  The Midterm Results Of Endovascular Therapy For Post-Thrombotic Syndrome Combined With Arteriovenous Fistula: 4 Cases Report  
Sheng Huang, MD  
11:30 – 11:35  Effect Of Endovascular Repair For Blunt Traumatic Aortic Injury Compared With Primary Type B Aortic Dissection: Propensity Analysis From A Single Center Experience  
Lixin Wang, MD, PhD  
11:36 – 11:45  Panel Discussion  

End of the Chinese Society for Vascular Surgery Associate Faculty Podium Presentations Program.
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Lars B. Lonn
Company(ies): Mentice
Relationship(s): Employment

Robert A. Lookstein
Company(ies): Boston Scientific, BTG
Relationship(s): Membership on Advisory Committee or Review Panels

Company(ies): Medtronic
Relationship(s): Consulting, Membership on Advisory Committee or Review Panels

Company(ies): Abbott, Endologix, Cook Medical
Relationship(s): Teaching and Speaking

Sean P. Lyden
Company(ies): Endologix, Shockwave, Abbott, Boston Scientific, Spectranetics, Medtronic, PQ Bypass
Relationship(s): Consulting

Company(ies): VIVA
Relationship(s): Board Membership

Lindsay Machan
Company(ies): A4L, Cohesic, Emurmur, Harmonic Medical, Innover Medical, Calgary Scientific
Relationship(s): Ownership Interest

Company(ies): Boston Scientific
Relationship(s): Membership on Advisory Committee or Review Panels

William A. Marston
Company(ies): Boston Scientific, Pfizer, Inari Medical
Relationship(s): Consulting

Tara M. Mastracci
Company(ies): Cook Medical, Cydar Medical
Relationship(s): Consulting
Jon S. Matsumura  
Company(ies): W.L. Gore, Cook Medical, Covidien, Endologix, Abbott  
Relationship(s): Grant and Research Support

Manish Mehta  
Company(ies): Medtronic, Boston Scientific  
Relationship(s): Consulting, Teaching and Speaking  
Company(ies): Penumbra  
Relationship(s): DSMB Board

Matthew T. Menard  
Company(ies): Janssen, Inc.  
Relationship(s): Membership on Advisory Committee or Review Panels

Ross Milner  
Company(ies): Medtronic, W.L. Gore  
Relationship(s): Consulting, Teaching and Speaking  
Company(ies): Endospan  
Relationship(s): Consulting

Patrick E. Muck  
Company(ies): Penumbra  
Relationship(s): Consulting, Teaching and Speaking

Piotr Musialek  
Company(ies): Abbott Vascular  
Relationship(s): Consulting, Teaching and Speaking, Independent Contractor, Membership on Advisory Committee or Review Panels  
Company(ies): InspireMD  
Relationship(s): Consulting, Membership on Advisory Committee or Review Panels  
Company(ies): Medtronic  
Relationship(s): Consulting, Teaching and Speaking, Membership on Advisory Committee or Review Panels

Bibombe Patrice Mwipatayi  
Company(ies): Medtronic, Getinge, Biotronik  
Relationship(s): Consulting  
Company(ies): Boston Scientific  
Relationship(s): Consulting, Teaching and Speaking

Peter K. Nelson, MD  
Company(ies): Medtronic  
Relationship(s): Consulting

Kenneth Ouriel  
Company(ies): Numerous medical device companies  
Relationship(s): Research Funding

Jean M. Panneton  
Company(ies): Medtronic, W.L. Gore  
Relationship(s): Consulting, Teaching and Speaking, Independent Contractor, Membership on Advisory Committee or Review Panels  
Company(ies): Cook Medical  
Relationship(s): Independent Contractor  
Company(ies): Terumo Aortic  
Relationship(s): Consulting, Teaching and Speaking, Independent Contractor  
Company(ies): Getinge  
Relationship(s): Consulting  
Company(ies): Mellon Medical  
Relationship(s): Membership on Advisory Committee or Review Panels

Sahil A. Parikh  
Relationship(s): Teaching and Speaking, Membership on Advisory Committee or Review Panels  
Company(ies): Phillips  
Relationship(s): Consulting, Membership on Advisory Committee or Review Panels  
Company(ies): Shockwave Medical, Trireme Medical, Surmodics  
Relationship(s): Research  
Company(ies): Terumo  
Relationship(s): Consulting, Teaching and Speaking  
Company(ies): Abiomed  
Relationship(s): Teaching and Speaking

Constantino Pena  
Company(ies): Penumbra, Boston Scientific, Cook Medical, CR Bard BD, Abbott Vascular  
Relationship(s): Teaching and Speaking

Ourania Preventza  
Company(ies): W.L. Gore and Associates, Terumo Aortic  
Relationship(s): Consulting

Seshadri Raju  
Company(ies): Veniti, Inc.  
Relationship(s): Ownership Interest  
Company(ies): IVUS, Venous Stent Design  
Relationship(s): US Patent
**FACULTY DISCLOSURE STATEMENT**

**Jim Reekers**
Company(ies): Phillips  
Relationship(s): Consulting, Teaching and Speaking

**Timothy A. Resch**
Company(ies): Cook Medical  
Relationship(s): Intellectual Property Rights, Consulting, Membership on Advisory Committee or Review Panels

**Robert Y. Rhee**
Company(ies): W.L. Gore  
Relationship(s): Consulting, Teaching and Speaking

**Vicente Riambau**
Company(ies): Aortyx  
Relationship(s): Ownership Interest, Consulting, Board Membership

**Heron E. Rodriguez**
Company(ies): W.L. Gore  
Relationship(s): Teaching and Speaking

**Eric E. Roselli**
Company(ies): Terumo Aortic  
Relationship(s): Teaching and Speaking

**Kenneth Rosenfield**
Company(ies): Abbott, BTG, Cordis,  
Relationship(s): Membership on Advisory Committee or Review Panels  
Company(ies): Access Vascular, Shockwave, Capture Vascular, Endospan, Magneto, Micell, Silk Road, Valcare, Thrombolex, Embolitech, PQ Bypass, Summa Therapeutics, Cruzar Systems, Endospan,  
Relationship(s): Ownership Interest, Membership on Advisory Committee or Review Panels  
Company(ies): Eximo  
Relationship(s): Ownership Interest, Consulting  
Company(ies): Volcano-Philips  
Relationship(s): Consulting, Membership on Advisory Committee or Review Panels  
Company(ies): Surmodics, University of Maryland  
Relationship(s): Consulting  
Company(ies): Contego, Janacare, Primacea  
Relationship(s): Ownership Interest  
Company(ies): VIVA 501c3, PERT Consortium 501c3  
Relationship(s): Teaching and Speaking, Board Membership

Company(ies): Getinge-Atrium, Boston Scientific, Inari Medical  
Relationship(s): Research Funding to Institution

**Howard A. Rowley**
Company(ies): IschemaView / RAPID  
Relationship(s): Membership on Advisory Committee or Review Panels  
Company(ies): GE Healthcare, W.L. Gore  
Relationship(s): Consulting

**John H. Rundback**
Company(ies): Ekos, Av Impact, National Pi: Eximo  
Relationship(s): Research Institutional Support – (Site Co-Pi - No Individual Compensation)  
Company(ies): Abbott, Bard, Cook, CSI, Gore, Medtronic  
Relationship(s): Teaching and Speaking  
Company(ies): Medtronic, NIH, Biologic, Cordis, PQ Bypass, Limbo  
Relationship(s): Research Institutional Support – (Site PI - No Individual Compensation)  
Company(ies): VIVA  
Relationship(s): Board Membership  
Company(ies): Eximo, Abbott, Boston Scientific, Medtronic  
Relationship(s): Consulting, Scientific Advisory Board  
Company(ies): Bayer, Daiichi Sanko, Philips, Toray, Vesper  
Relationship(s): Consulting  
Company(ies): EXIMO (Options)  
Relationship(s): Ownership Interest

**Russell H. Samson**
Company(ies): W.L. Gore  
Relationship(s): Consulting, Teaching and Speaking

**Andres Schanzer**
Company(ies): Cook Medical  
Relationship(s): Consulting

**Dierk Scheinert**
Company(ies): Abbott, Bayer, Boston Scientific, Cook Medical, Cardionovum, CR Bard, Gardia Medical/Allium, Medtronic, Philips, Upstream Peripheral Technologies  
Relationship(s): Consulting
## FACULTY DISCLOSURE STATEMENT

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Company(ies)</th>
<th>Relationship(s)</th>
</tr>
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<tbody>
<tr>
<td><strong>Marc L. Schermerhorn</strong></td>
<td>Abbott, Endologix</td>
<td>Consulting, Membership on Advisory Committee or Review Panels</td>
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<tr>
<td></td>
<td>Cook, Medtronic, Silk Road</td>
<td>Consulting</td>
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<tr>
<td><strong>Andrej Schmidt</strong></td>
<td>Abbott, Bard</td>
<td>Consulting, Teaching and Speaking</td>
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<td>Cordis, Cook, Medtronic</td>
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<td>Upstream Peripheral</td>
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<tr>
<td><strong>Darren B. Schneider</strong></td>
<td>W.L. Gore</td>
<td>Consulting, Independent Contractor, Membership on Advisory Committee or Review Panels</td>
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<tr>
<td></td>
<td>Cook</td>
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<td>Consulting, Membership on Advisory Committee or Review Panels</td>
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<tr>
<td><strong>Peter A. Schneider</strong></td>
<td>Silk Road Medical</td>
<td>Consulting, Teaching and Speaking</td>
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<td>Consulting, Teaching and Speaking</td>
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<td>W.L. Gore</td>
<td>Consulting, Independent Contractor, Membership on Advisory Committee or Review Panels</td>
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<td></td>
<td>Intact Vascular, Cagent</td>
<td>Consulting, Board Membership</td>
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<tr>
<td><strong>Robert Shahverdyan</strong></td>
<td>BD Medical/BARD, AVENU Medical, Laminate Medical</td>
<td>Consulting and Speaking</td>
</tr>
<tr>
<td><strong>Murray L. Shames</strong></td>
<td>Medtronic</td>
<td>Consulting, Membership on Advisory Committee or Review Panels</td>
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<tr>
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<td>Cydar</td>
<td>Membership on Advisory Committee or Review Panels</td>
</tr>
<tr>
<td><strong>Benjamin W. Starnes</strong></td>
<td>Aortica Corporation</td>
<td>Ownership Interest, Intellectual Property Rights, Board Membership</td>
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<tr>
<td><strong>Gregg W. Stone</strong></td>
<td>REVA, HeartFlow, Vascular Dynamics</td>
<td>Consulting</td>
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<tr>
<td><strong>Michael C. Stoner</strong></td>
<td>SilkRoad Medical</td>
<td>Consulting</td>
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<tr>
<td><strong>Timothy M. Sullivan</strong></td>
<td>Veryan Medical</td>
<td>Consulting</td>
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<tr>
<td><strong>Piotr Szopinski</strong></td>
<td>Cryolife</td>
<td>Intellectual Property Rights, Consulting, Teaching and Speaking</td>
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<tr>
<td><strong>Shannon D. Thomas</strong></td>
<td>Abbott Vascular</td>
<td>Consulting, Teaching and Speaking</td>
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<tr>
<td><strong>Matt M. Thompson</strong></td>
<td>Endologix</td>
<td>Employment, Ownership Interest</td>
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<tr>
<td><strong>Nikolaos Tsilimparis</strong></td>
<td>Cook Medical</td>
<td>Consulting</td>
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<tr>
<td><strong>Thomas M. Tu</strong></td>
<td>Inari Medical</td>
<td>Employment</td>
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<tr>
<td><strong>Suresh Vedantham</strong></td>
<td>Cook Medical</td>
<td>Research Grant Support to my Institution</td>
</tr>
<tr>
<td><strong>Hence J.M. Verhagen</strong></td>
<td>Medtronic</td>
<td>Consulting, Membership on Advisory Committee or Review Panels</td>
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<td>W.L. Gore</td>
<td>Consulting, Teaching and Speaking</td>
</tr>
</tbody>
</table>

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Company(ies): Abbott  
Relationship(s): Teaching and Speaking  
Company(ies): Endologix  
Relationship(s): Consulting, Teaching and Speaking, Membership on Advisory Committee or Review Panels  
Company(ies): Arsenal AAA  
Relationship(s): Consulting  

**Eric L.G. Verhoeven**  
Company(ies): Cook Medical  
Relationship(s): Intellectual Property Rights, Consulting, Teaching and Speaking  

**Fabio Verzini**  
Company(ies): Medtronic  
Relationship(s): Membership on Advisory Committee or Review Panels  
Company(ies): W.L. Gore  
Relationship(s): Consulting  

**Ajay K. Wakhloo**  
Company(ies): Stryker Neurovascular  
Relationship(s): Consulting, Teaching and Speaking, Membership on Advisory Committee or Review Panels  

**Ron Waksman**  
Company(ies): Biotronik, Nipro  
Relationship(s): Consulting  

**Jason R. Weidman**  
Company(ies): Medtronic  
Relationship(s): Employment  

**Grayson H. Wheatley**  
Company(ies): Medtronic, Terumo Aortic, Ethicon, Madeon, Cydar Medical  
Relationship(s): Consulting  

**Rodney A. White**  
Company(ies): Medtronic  
Relationship(s): Consulting, Teaching and Speaking, Independent Contractor  
Company(ies): Cardiatis  
Relationship(s): Consulting, Teaching and Speaking  
Company(ies): IntactVascular, AneuMed  
Relationship(s): Consulting, Membership on Advisory Committee or Review Panels  

**Christopher K. Zarins**  
Company(ies): HeartFlow, Inc.  
Relationship(s): Employment, Ownership Interest, Intellectual Property Rights  

**Clark J. Zeebregts**  
Company(ies): Terumo  
Relationship(s): Consulting, Teaching and Speaking  

**Thomas Zeller**  
Company(ies): Abbott Vascular  
Relationship(s): Workshop Honoraria  
Company(ies): Veryan, W.L. Gore, Philips, Intact Vascular, Vesper Medical  
Relationship(s): Consulting  
Company(ies): Biotronik, BIBA Medical, Bayer, B. Braun  
Relationship(s): Teaching and Speaking  
Company(ies): Boston Scientific, Cook Medical, Medtronic, Shockwave  
Relationship(s): Consulting, Teaching and Speaking  
Company(ies): QT Medical  
Relationship(s): Ownership Interest
The following faculty have indicated they have no Relationship(s) which, in the context of their presentation(s), could be perceived as a potential Conflict of Interest:

Anne L. Abbott
Dorothy B. Abel
Steven D. Abramowitz
Ali F. AbuRahma
George L. Adams
Mark A. Adelman
Sam S. Ahn
Eric Allaire
Jose I. Almeida
Deena AlQedrah
Jean-Marc Alsac
David J. Altschul
Dorothea Altschul
Ali Amin
Max Amor
Frank R. Arko
Zachary M. Arthurs
John E. Aruny
Enrico Ascher
Hamdy Awad
Ali Azizzadeh
Nobuyoshi Azuma
Martin R. Back
Michael E. Barfield
Iris Baumgartner
Hernan A. Bazan
Adam Beck
Christian A. Behrendt
Amira Benjelloun
Jeffrey S. Berger
Ramon Berguer
Todd Berland
Luca Bertoglio
Giancarlo Biamino
Colin D. Bicknell
Jean Bismuth
Martin Bjorck
Stephen A. Black
Jan D. Blankensteijn
Dittmar Boeckler
Laurence M. Boon
Marc Bosiers
Michel J. Bosiers
Thomas C. Bower
Kursat A. Bozkurt
Andrew W. Bradbury
Marianne Brodman
Allan L. Brook
Thomas G. Brott
Deborah Brouwer-Maier
O. William Brown
Jan S. Brunkwall
Richard Bulbulia
Jacques Busquet
Keith D. Calligaro
Richard P. Cambria
Ludovic Canaud
Piergiorgio Cao
Laura Capoccia
Joseph A. Caprini
Wayne J. Caputo
Jim Caridi
Jeffrey P. Carpenter
Neal S. Cayne
Rabih A. Chaer
Elliot L. Chaikof
Venita Chandra
Robert W. Chang
Richard N. Channick
Zhong Chen
Kenneth J. Cherry
Nicholas J.W. Cheshire
Laurent Chiche
Roberto Chiesa
Timothy A.M. Chuter
Daniel G. Clair
Giacomo Clerici
Rachel E. Clough
Frederic Cochennec
Dawn M. Coleman
Anthony J. Comerota
Mark Conrad
Michael S. Conte
Victor S. Costache
D. Mark Courtney
Frank J. Criado
Jack L. Cronenwett
Jacob Cynamon
Martin Czerny
Ronald L. Dalman
R. Clement Darling III
Stephen F. Daugherty
Alun H. Davies
Mark G. Davies
Gert J. de Borst
Rick De Graaf
Jean-Paul de Vries
Erik E. Debing
Sebastian E. Debus
James W. Dennis
Sapan S. Desai
David J. Dexter
Nicolas A. Diehm
Alan M. Dietzek
Konstantinos P. Donas
Matthew J. Dougherty
Maciej L. Dryjski
Joseph J. DuBose
David M. Dudzinski
Aaron S. Dumont
Alberto C. Duque
Jonathan J. Earnshaw
Hans-Henning Eckstein
Bo G. Eklöf
Steve Elias
Jan-Willem Elshof
Eric A. Elster
Michael Engelhardt
Amichai J. Erdfarb
Erdinc Eroglu
Guilermo A. Escobar
Ignacio Escotto
Charles Esenwa
Mark K. Eskandari
Mohammad H. Eslamia
Yana Etkin
Christian D. Etz
Dominique Fabre
Gianluca Faggioli
Ronald M. Fairman
Fabrizio Fanelli
Alik Farber
Peter L. Faries
Jose Fernandes e Fernandes
Ciro Ferrer
Brian Ferris
David Fiorella
Thomas L. Forbes
Mazin Foteh
Don Frei
Weiguo Fu
Markus K. Furrer
Katherine A. Gallagher
Ripal T. Gandhi
Karan Garg
Mauro Gargiulo
Jean Luc Gerard
George Geroulakos
Sergio Gianesini
Athanasios D. Giannoukas
Richard G.J. Gibbs
Joseph S. Giglia
Jay Giri
Marc H. Glickman
Peter Głowicki
Jerry Goldstone
R. Gilberto Gonzalez
Philip P. Goodney
Yann Gouëffic
Peter C.J. Goverde
Juan F. Granada
Roger M. Greenhalgh
Franco Grego
Marcelo Guimarães
Wei Guo
Gutenberg A. Gurgel
John (Jeb) W. Hallett
Alison Halliday
George Hamilton
Sukgu Han
Neil Haranhalli
Ziv J. Haskal
Peter Henke
Michel C. Henry
Edward J. Hepworth
Jan M.M. Heyligers
Anil P. Hingorani
Joshua A. Hirsch
Kim J. Hodgson
Pete Holt
Tal M. Hörer
Emmanuel M. Houdart
Jeffrey H. Hsu
Thomas S. Huber
Muhammad S. Hussain
Osamu Iida
Karl A. Illig
Fatih Islamoglu
Maxim Itkin
Krassi Ivancev
Benjamin M. Jackson
Glenn Jacobowitz
Michael J. Jacobs
Krishna Jain
Houman Jalaie
Edward C. Jauch
Michael P. Jenkins
Zaiping Jing
K. Wayne Johnston
James W. Jones
William D. Jordan, Jr.
Manju Kalra
Vikram S. Kashyap
Karthikeshwar Kasirajan
Konstantinos Katsanos
Athanasios Katsargyris
Barry T. Katzen
Bradley Kaufman
K. Craig Kent
Neil M. Khilnani
Ali Khoynezhad
Dong-ik Kim
Lee Kirksey
Richard P. Klucznik
Raghu Kolluri
Ralf R. Kolvenbach
Kimihiro Komori
Panos Kougias
Zvonimir Krajcer
Dainis K. Krievins
Boonprasit Kritpracha
Zsolt Kulcsar
Toru Kuratani
Daniel L. Labovitz
Nicos Labropoulos
Brajesh K. Lal
Patrick J. Lamparello
Glenn M. LaMuraglia
Gregg S. Landis
Werner Lang
Kamphol Laohapensang
Thomas Larzon
George S. Lavenson
Peter F. Lawrence
Jeffrey H. Lawson
Byung-Boong Lee
Jason T. Lee
Seon-Kyu Lee
W. Anthony Lee
Martin B. Leon
Thabele Leslie-Mazwi
Christos D. Liapis
David S. Liebeskind
Timothy K. Liem
Francesco Liistro
Hans Lindgren
Jes S. Lindholt
Thomas F. Lindsay
Evan C. Lipsitz
Armando C. Lobato
Shang Loh
Joann Lohr
Joseph V. Lombardi
Qingsheng Lu
Marzia Lugli
Alan B. Lumsden
Fedor Lurie
Edward G. Mackay
Robyn A. Macsata
Michel Makaroun
Mahmoud B. Malas
Thomas S. Maldonado
Martin Malina
Nicola Mangialardi
Armando Mansilha
Ashraf Mansour
Marco G. Manzi
Michael L. Marin
Elna M. Masuda
Klaus D. Mathias
James F. McKinsey
Robert B. McLafferty
Barend M.E. Mees
Roxana Mehran
George H. Meier
Mark H. Meissner
Germano Melissano
Matthew W. Mell
Bernardo C. Mendes
Robert Mendes
Vitor Mendes Pereira
Geno J. Merli
D. Christopher Metzger
Mark W. Mewissen
Philip M. Meyers
Claude Mialhe
Charles C. Miller
Joseph L. Mills
David J. Minion
J. Mocco
Bijan Modarai
Irwin V. Mohan
Frans L. Moll
Samuel R. Money
Miguel F. Montero-Baker
Wesley S. Moore
Robert A. Morgan
Sean C. Morris
Stefan Müller-Hülsbeck
Dipankar Mukherjee
Erin H. Murphy
Firas F. Mussa
Pramook Mutirangura
Piotr Myrcha
Aravinda Nanjundappa
Ross Naylor
Richard F. Neville
Andrew N. Nicolaides
Christoph A. Nienaber
Sigrid Nikol
Samy S. Nitecki
Katariina M. Noronen
Furuzan Numan
Thomas F. O’Donnell, Jr.
Gerard J. O’Sullivan
Alfred M. Obermayer
Andrea T. Obi
Christian Ochoa
Paulo E. Ocke Reis
Gustavo S. Oderich
Oscar L. Ojeda
Sarah Onida
Matteo Orrico
Nicholas H. Osborne
Klaus M. Overbeck
Kathleen J. Ozsvath
Peter J. Pappas
FACULTY DISCLOSURE STATEMENT

Rajiv Parakh
Federico E. Parodi
Juan C. Parodi
Marc A. Passman
Athos Patsalides
Felice Pecoraro
Bruce A. Perler
Janet T. Powell
Richard J. Powell
Carlo Pratesi
Giovanni Pratesi
Robert M. Proczka
William J. Quinones-Baldrich
Elina Quiroga
Tarek M.S. Radwan
Joseph D. Raffetto
Saum A. Rahimi
Ravi Rajani
Venkatesh G. Ramaiah
Zoran Rancic
Hisham Rashid
Todd E. Rasmussen
Mahmood Razavi
Rebeca Reachi Lugo
John E. Rectenwald
Donald B. Reid
Michel M.P. Reijnen
Lordes Reina
Jean-Baptiste Ricco
Norman M. Rich
Götz M. Richter
Joseph J. Ricotta II
Howard A. Riina
William P. Robinson
Caron B. Rockman
Sean P. Roddy
Fiona Rohlffs
Sonia Ronchey
Rachel Rosovsky
John R. Ross, Sr.
Michel Rossi
Herve Rousseau
Vincent L. Rowe
Prabir Roy-Chaudhury
Maria Antonella Ruffino
Mikel Sadek
Hazim J. Safi
Natzi Sakalihasan
Clifford M. Sales
Luis A. Sanchez
Timur P. Sarac
Sudhakar R. Satti
Salvatore T. Scali
Dori R. Schatell
Larry A. Scher
Claudio J. Schonholz
Geert Willem H. Schurink
John R. Sedor
Carlo Setacci
Francesco Setacci
Julien G. Sfeir
Palma M. Shaw
Evgeny Shaydakov
Malachi Sheahan
Surendra Shenoy
Chun Che Shih
Chang Shu
Anton N. Sidawy
Horst Sievert
Henrik Sillesen
Michael B. Silva, Jr.
Michael J. Singh
Niten Singh
Tej M. Singh
Jeffrey J. Siracuse
Akhilesh K. Sista
Jan M. Sloves
Christopher J. Smolock
Björn Sonesson
J. David Spence
Francesco Speziale
Francesco Spinelli
Zoran Stankov
James C. Stanley
Kate Steiner
W. Charles Sternbergh III
Johnny Steuer
David H. Stone
Patrick A. Stone
Sherif A.H. Sultan
Lars G. Svensson
Gabriel Szendro
Rami Tadros
Apostolos K. Tassiopoulos
Gunnar Tepe
Marcus Thieme
Bryan W. Tillman
Carlos H. Timaran
Giovanni Torsello
Giovanni F. Torsello
Santi Trimarchi
Ramesh K. Tripathi
Jorge H. Ulloa
Gilbert R. Upchurch
Claude D. Vaislic
Domenico Valenti
S. Rao Vallabhaneni
Jos C. van den Berg
Joost A. van Herwaarden
Marc R.H.M. van Sambeek
Ravi K. Veeraswamy
<table>
<thead>
<tr>
<th>FACULTY DISCLOSURE STATEMENT</th>
</tr>
</thead>
</table>

| Frank J. Veith               | Haimanot (Monnie) Wasse     | I-Hui Wu          |
| Maarit Venermo               | Fred A. Weaver              | Wayne F. Yakes    |
| Renu Virmani                 | Lawrence R. Wechsler        | Kak Khee Yeung    |
| Todd R. Vogel                | Ido Weinberg                | Yoshihiko Yokoi  |
| Robert L. Vogelzang          | Harold J. Welch             | Paolo Zamboni     |
| Reese A. Wain                | David M. Williams           | Richard L. Zampolin|
| Thomas W. Wakefield          | Willem Wisselink            | Hany Zayed        |
| Craig M. Walker              | Cees H.A. Wittens           | Wayne W. Zhang    |
| Jinsong Wang                 | Edward Y. Woo               | Wei Zhou          |
| Anders Wanhainen             | Henry H. Woo                | Robert M. Zwolak  |
**ASSOCIATE FACULTY LISTING**

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