



3rd ANNUAL New York Coronary and Vascular Summit (NYCVS)

TUESDAY, OCTOBER 1, 2019

MONTEFIORE, MOSES CAMPUS
Tishman Learning Center
111 E. 210th Street
Bronx, NY 10467

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GENERAL INFORMATION

CONFERENCE LOCATION

Montefiore Medical Center
Tishman Learning Center
111 E. 210th Street
Bronx, NY 10467
Directions: www.montefiore.org/locations-directions-parking

DATE

Tuesday, October 1, 2019

STATEMENT OF NEED

Coronary Artery Disease (CAD) is a world epidemic affecting over 110 million people and resulting in over 8.9 million deaths. It causes up to 15.9% of all deaths making it the most common cause of death in the world. In the United States 20% of those over 65 have CAD. Structural Heart Disease increases both morbidity and mortality in the elder population. Epidemiological studies have determined that one in eight people aged 75 or older have moderate or severe aortic stenosis and one in ten have moderate or severe mitral regurgitation. Similarly, Peripheral Arterial Disease (PAD) affects 155 million people worldwide. In 2015 it was responsible for over 52,500 deaths up from 16,000 deaths in 1990. It carries a greater than 20% risk of a cardiovascular event in 10 years and a 5-year mortality rate of 30%. The New York Coronary and Vascular Summit (NYCVS) is organized in conjunction with the Albert Einstein College of Medicine and the Montefiore Medical Center faculty from the section of Cardiology. This year it has also partnered with faculty from the section of interventional cardiology of Stony Brook School of Medicine and faculty from the section of interventional cardiology of the Icahn School of Medicine at the Mount Sinai Hospital. Guest faculty includes national and international thought leaders in the field of Interventional Cardiology, Vascular Surgery and Interventional Radiology.

ACTIVITY GOALS AND OVERVIEW

The primary focus of this course is to present a multidisciplinary approach to revascularization of patients with complex coronary and peripheral vascular disease. The critical role of percutaneous mechanical circulatory support devices (Impella, Impella RP, Percutaneous Heart Pump, ECMO) in supporting complex interventions will be discussed. Various interventional devices such as orbital atherectomy (OA), rotational atherectomy, laser atherectomy, and their use in complex peripheral and coronary interventions will be emphasized. Technical issues regarding retrograde CTO techniques both in coronary & peripheral cases, unprotected left main disease, heavily calcified lesions, bifurcation lesions, total occlusions, thrombotic lesions, recurrent in-stent restenosis, carotid stenting, and pedal access for complex critical limb ischemia

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interventions will be discussed by the faculty using live case presentations as platforms using the live case format. Treatment of emerging problems, appropriateness of revascularization and evidence-based practice guidelines will be discussed while live cases are performed. Within the live case format, current topics will be presented to provide interventional cardiologists and vascular interventionalists with state-of-the-art information for managing patients as the dynamic field of interventional cardiology and endovascular intervention continues to evolve.

LEARNING OBJECTIVES

- Select the appropriate revascularization strategy in the treatment of unprotected left main disease
- Plan for the best interventional strategy for revascularization of chronic total occlusion
- Apply case selection and choose the appropriate interventional devices for CAD, Structural Heart Disease and PAD treatment
- Choose the appropriate mechanical support device in high risk coronary interventions
- Describe the new technology, devices and approaches in the carotid stenting
- Discuss imaging approaches in CAD, Structural Heart Disease and PAD

INTENDED AUDIENCE

This activity is specifically designed for:

- Interventional cardiologists who manage patients with complex coronary and vascular lesions for revascularization
- Heart failure interventionist
- Interventional radiologists and vascular surgeons
- Cardiology fellows with an interest in Interventional Radiology and Endovascular Interventions
- Nurses, technicians, and other allied health care professionals who work in Cardiac Catheterization and Vascular Laboratories

ACCREDITATION

PHYSICIANS

Albert Einstein College of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Albert Einstein College of Medicine designates this live activity for a maximum of 7.5 **AMA PRA Category 1 Credits™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

NURSES

This program has been provided 7.5 continuing education hours from the Montefiore Learning Network, an approved provider of continuing nursing education by the American Nurses Credentialing Center's Commission on accreditation.



MAINTENANCE OF CERTIFICATION

Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 7.5 ABIM-Part II Medical Knowledge MOC points in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

SPECIAL NEEDS (ADA)

Albert Einstein College of Medicine and Montefiore Medical Center fully complies with the legal requirements of the Americans with Disabilities Act. If any participant is in need of special accommodations, please submit a written request at least two weeks prior to the activity via email to mquiles@montefiore.org, or mail to Center for Continuing Professional Development, 3301 Bainbridge Avenue, Bronx, NY 10467.

CANCELLATION POLICY

Request for refunds MUST be received in writing by **September 23, 2019** and will be subject to an administration fee of \$25.00. **NO REFUNDS WILL BE MADE AFTER THIS DATE.**

CONFLICT OF INTEREST

The "Conflict of Interest Disclosure Policy" of the Albert Einstein College of Medicine requires that faculty participating in any CME activity disclose to the audience any relevant relationship(s) with a pharmaceutical or equipment company* during the past 12-month period prior to the time that the individual is asked to assume a role controlling content of this CME activity. Any presenter whose disclosed relationships prove to create a conflict of interest, with regard to their contribution to the activity, will not be permitted to present.

Albert Einstein College of Medicine also requires that faculty participating in any CME activity disclose to the audience when discussing any unlabeled or investigational use of a commercial product or device, not yet approved in the United States

** The ACCME defines Commercial Interest as an entity producing, marketing, re-selling or distributing health care goods or services consumed by or used on patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interest – unless the provider of clinical service is owned, or controlled by, an ACCME-defined commercial interest*

FOR FURTHER INFORMATION CONTACT

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CONFERENCE SCHEDULE

MORNING SESSION

- 7:15 – 7:55AM** Registration and Continental Breakfast
- 7:55 – 8:00** Welcome: [Mario J. Garcia, MD](#)
- 8:00 – 10:20** **PERIPHERAL ARTERY DISEASE SUMMIT**
Moderator: [Prakash Krishnan, MD](#)
- 8:00 – 8:10 Non-Invasive Algorithm for Evaluating Patients with PAD – [Ian Del Conde Pozzi, MD](#)
- 8:10 – 8:20 Calcified SFA: Choice of Atherectomy Devices – [Douglas E. Drachman, MD](#)
- 8:20 – 8:30 Crossing Devices for Complex CTO: Strength & Weakness – [David Hirschl, MD](#)
- 8:30 – 8:40 DES & Supera: Have They Changed the Landscape of Popliteal Interventions
[Sahil Parikh, MD](#)
- 8:40 – 9:10** **DEBATE: IS PACLITAXEL DCB AND DES SAFE IN SFA INTERVENTIONS?**
- 8:40 – 8:50 Paclitaxel DCB & DES Should Be First Line Therapy for SFA Interventions
[John P. Reilly, MD](#)
- 8:50 – 9:00 Paclitaxel DCB & DES Are Dangerous and Should Be Avoided in SFA Interventions
[Rajesh Malik, MD](#)
- 9:00 – 9:05 Rebuttal- (Paclitaxel DCB & DES Should Be First Line Therapy for SFA Interventions)
[John P. Reilly, MD](#)
- 9:05 – 9:10 Rebuttal- (Paclitaxel DCB & DES Are Dangerous and Should Be Avoided in SFA Interventions) – [Rajesh Malik, MD](#)
- 9:10 – 10:20** **LIVE CASE #1: PERIPHERAL (MONTEFIORE-MOSES)**
Live Case Operators: [Jose Wiley, MD, MPH](#); [Sachin K. A. Jain, MD](#)
Live Case Discussants: [Ian Del Conde Pozzi, MD](#); [Douglas E. Drachman, MD](#); [David Hirschl, MD](#); [Sahil Parikh, MD](#); [John P. Reilly, MD](#); [Rajesh Malik, MD](#); [Evan C. Lipsitz, MD, MBA](#)
- 10:20 – 10:35** Break
- 10:35 – 12:40PM** **COMPLEX CORONARY SUMMIT**
Moderator: [George Dangas, MD, PhD](#)
- 10:35 – 10:45 Approach to “In Stent Restenosis” – [Ramesh Daggubati, MD](#)
- 10:45 – 10:55 My Algorithm to Treat Calcific Lesions and CTO's – [Dimitri Karpaliotis, MD](#)
- 10:55 – 11:05 Bifurcation PCI: When and Optimization Strategies – [Michael Johnson, MD](#)
- 11:05 – 11:15 My Algorithm for Using Mechanical Circulatory Support during PCI
[Ajay Kirtane, MD, MS](#)
- 11:15 – 11:25 DAPT after PCI in the Era of “Twilight” and DOAC's – [Usman Baber, MD, MS](#)
- 11:25 – 11:35 **Discussion**
Session and Live Case Discussants: [Ramesh Daggubati, MD](#); [Dimitri Karpaliotis, MD](#); [E. Scott Monrad, MD, CM](#); [Ajay Kirtane, MD, MS](#); [Usman Baber, MD, MS](#); [Mark A. Menegus, MD](#); [Sulejman Celaj, MD](#); [Nelson Chavarria, MD](#); [Marianne O'Shea, RN, BSN, CCRN](#)
- 11:35 – 12:40PM** **LIVE CASE #2: COMPLEX CORONARY (STONY BROOK)**
Live Case Operators: [Robert P. Pyo, MD](#); [On Chen, MD](#); [William Lawson, MD](#)
- 12:40 – 1:40** Lunch

AFTERNOON SESSION

- 1:40 – 4:55PM** **STRUCTURAL HEART DISEASE/ADULT CONGENITAL HEART DISEASE SUMMIT**
Moderator: George Dangas, MD, PhD
- 1:40 – 1:50 Percutaneous Approaches for Mitral Valve Disease 2019 – *Duane Pinto, MD, MPH*
- 1:50 – 2:00 Percutaneous Tricuspid Valve Repair Options 2019 – *Azeem Latib, MD*
- 2:00 – 2:10 Life-time Management of the TAVR Patient – Does the First Valve Matter?
Jason Kovacic, MD, PhD
- 2:10 – 2:20 New TAVR Devices and New Tips and Tricks for Old Devices
George Dangas, MD, PhD
- 2:20 – 2:30 Percutaneous Treatment of the Post MI VSD – When and How
Daniel H. Gruenstein, MD
- 2:30 – 2:40 Low EF & MR: When is it Worth to Repair the Valve – *Ulrich P. Jorde, MD*
- 2:40 – 2:55** **Break**
- 2:55 – 3:55** **LIVE CASE #3: STRUCTURAL HEART DISEASE (MONTEFIORE- MOSES)**
Live Case Operator: Azeem Latib, MD
Live Case Discussants: Duane Pinto, MD, MPH; Jason Kovacic, MD, PhD;
Daniel H. Gruenstein, MD; Juan Terre, MD; Michael N. Johnson, MD; Anna Bortnick, MD;
Pedro Cox-Alomar, MD, MPH
- 3:55 – 4:55** **LIVE CASE # 4: STRUCTURAL HEART DISEASE (STONY BROOK)**
Live Case Operators: Robert Pyo, MD; Puja Parikh, MD
Live Case Discussants: Duane Pinto, MD, MPH; Jason Kovacic, MD, PhD;
Daniel H. Gruenstein, MD; Juan Terre, MD; Michael N. Johnson, MD; Anna Bortnick, MD;
Pedro Cox-Alomar, MD, MPH
- 4:55 – 5:00** **Closing Remarks**



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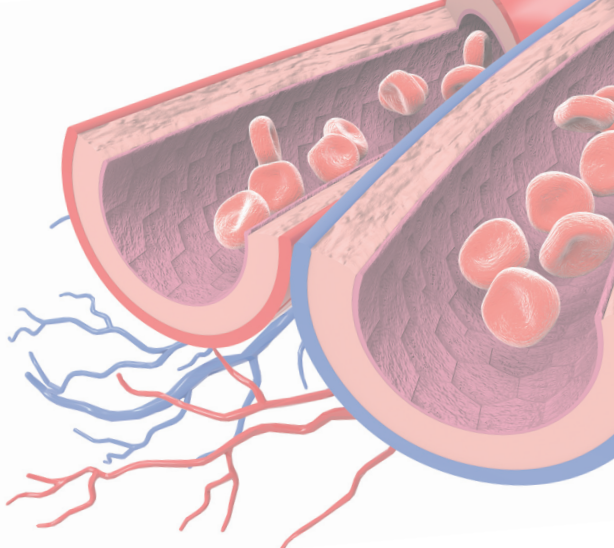
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REGISTRATION FORM

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Affiliation _____ Specialty _____

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Special Dietary Needs: ☐ Kosher ☐ Vegetarian ☐ Gluten-Free

REGISTRATION FEES

Practicing Physician	\$110.00
Fellow, Resident, PA, NP, RN	\$ 35.00
Einstein/Montefiore and Affiliates	Complimentary

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