



ECHO INDIA 2017

Pre-Conference Workshop: 5th October 2017

Venue: Birla Auditorium, Jaipur.

8.30 AM – 8.45AM: Welcome & Orientation of venue: Rakesh Gupta, Secretary General (HALL A)

8.45 am - 09.00 AM: Welcome & orientation of course: H.K. Chopra, President IAE, S Shanmugasundaram, Scientific Chair

Program flow of all sessions: (a) Introduction of topic (b) How to acquire (c) How to measure (d) How to analyze and interpret (e) How to report and conclude (f) we show a case and you interpret (g) recorded case demonstration in sessions where applicable

Time	Hall B	Hall C	Hall D	Hall E	Hall F
09.15 AM 10.25 AM	<p>Science of performing an ideal Echo & Doppler: Back to Basics</p> <ol style="list-style-type: none"> 1. Role of controls on the Echo machine & their setting 2. What are various ideal echocardiographic 2D views and their echo-anatomic correlation 3. Minimum standard recording of a complete echo study 3A: Artifacts – how to recognize & how to eliminate 4. Basics of clinical Doppler 5. How to optimize ideal Spectral Doppler and Color Flow mapping 6. Nyquist limit simplified. When to choose PW and CW Doppler The usual mistakes made and their solution 7. Reporting format – minimum requirements <p><i>Manish Bansal (Gurgaon)</i> <i>Vikrant Vijan (Nashik)</i></p> <p>EXPERT CRITIQUE Joseph Maalouf (USA)</p>	<p>Science of performing an ideal Echo & Doppler: Back to Basics</p> <ol style="list-style-type: none"> 1. Role of controls on the Echo machine & their setting 2. What are various ideal echocardiographic 2D views and their echo-anatomic correlation 3. Minimum standard recording of a complete echo study 3A: Artifacts – how to recognize & how to eliminate 4. Basics of clinical Doppler 5. How to optimize ideal Spectral Doppler and Color Flow mapping 6. Nyquist limit simplified. When to choose PW and CW Doppler The usual mistakes made and their solution 7. Reporting format – minimum requirements <p><i>Aniruddha De (Kolkata)</i> <i>Rajat Subhra Ghose (Kolkata)</i></p> <p>EXPERT CRITIQUE Thomas Binder (Austria)</p>	<p>Science of performing an ideal Echo & Doppler: Back to Basics</p> <ol style="list-style-type: none"> 1. Role of controls on the Echo machine & their setting 2. What are various ideal echocardiographic 2D views and their echo-anatomic correlation 3. Minimum standard recording of a complete echo study 3A: Artifacts – how to recognize & how to eliminate 4. Basics of clinical Doppler 5. How to optimize ideal Spectral Doppler and Color Flow mapping 6. Nyquist limit simplified. When to choose PW and CW Doppler The usual mistakes made and their solution 7. Reporting format – minimum requirements <p><i>Nitin Burkule (Mumbai)</i> <i>Rishikesh Shah (Mumbai)</i></p> <p>EXPERT CRITIQUE K. Hanumanth Reddy (USA)</p>	<p>Science of performing an ideal Echo & Doppler: Back to Basics</p> <ol style="list-style-type: none"> 1. Role of controls on the Echo machine & their setting 2. What are various ideal echocardiographic 2D views and their echo-anatomic correlation 3. Minimum standard recording of a complete echo study 3A: Artifacts – how to recognize & how to eliminate 4. Basics of clinical Doppler 5. How to optimize ideal Spectral Doppler and Color Flow mapping 6. Nyquist limit simplified. When to choose PW and CW Doppler The usual mistakes made and their solution 7. Reporting format – minimum requirements <p><i>Ravi Kasliwal (Gurgaon)</i> <i>Hardeep Grewal (Gurgaon)</i></p> <p>EXPERT CRITIQUE Sudhir Wahi (Australia)</p>	<p>Science of performing an ideal Echo & Doppler: Back to Basics</p> <ol style="list-style-type: none"> 1. Role of controls on the Echo machine & their setting 2. What are various ideal echocardiographic 2D views and their echo-anatomic correlation 3. Minimum standard recording of a complete echo study 3A: Artifacts – how to recognize & how to eliminate 4. Basics of clinical Doppler 5. How to optimize ideal Spectral Doppler and Color Flow mapping 6. Nyquist limit simplified. When to choose PW and CW Doppler The usual mistakes made and their solution 7. Reporting format – minimum requirements <p><i>S Natarajan (Coimbatore)</i> <i>Gaurav Kapoor (Amritsar)</i> <i>Vinod Vijan (Nashik)</i></p> <p>EXPERT CRITIQUE Kameswari Maganti (USA)</p>

10.30 am
10.50 am

TEA BREAK

<p>10.50 AM 12.00 PM</p>	<p>Echocardiography: A pulmonary artery catheter in the box: Imaging & Hearty Hemodynamics of Right Heart</p> <ol style="list-style-type: none"> 1. RA pressure <ul style="list-style-type: none"> • IVC method • Hepatic vein flow reversals • Tricuspid valve Doppler 2. Pulmonary artery peak and mean pressures 2-D Semiquantitative & Doppler quantitative methods <ul style="list-style-type: none"> • How do I measure in cases of VSD, PDA, PA diastolic pressure by PR jet <ul style="list-style-type: none"> • How do I measure RA volume, tricuspid and pulmonary annulus • RV functions in daily practice like RVFAC, TAPSE, RV-TDI • Significance of notch in RVOT Doppler <p><i>SK Parashar (Noida)</i> <i>Shahana Zaman (Bangladesh)</i> <i>Mohammadullah Firoz (Bangladesh)</i></p> <p>EXPERT CRITIQUE Bharati Shivalkar (Belgium)</p>	<p>Echocardiography: A pulmonary artery catheter in the box: Imaging & Hearty Hemodynamics of Right Heart</p> <ol style="list-style-type: none"> 1. RA pressure <ul style="list-style-type: none"> • IVC method • Hepatic vein flow reversals • Tricuspid valve Doppler 2. Pulmonary artery peak and mean pressures 2-D Semiquantitative & Doppler quantitative methods <ul style="list-style-type: none"> • How do I measure in cases of VSD, PDA, PA diastolic pressure by PR jet <ul style="list-style-type: none"> • How do I measure RA, tricuspid and pulmonary annulus • RV functions in daily practice like RVFAC, TAPSE, RV-TDI • Significance of notch in RVOT Doppler <p><i>Manish Bansal (Gurgaon)</i> <i>Sunil Bohra (Bengaluru)</i></p> <p>EXPERT CRITIQUE Mani Vannan (USA)</p>	<p>Echocardiography: A pulmonary artery catheter in the box: Imaging & Hearty Hemodynamics of Right Heart</p> <ol style="list-style-type: none"> 1. RA pressure <ul style="list-style-type: none"> • IVC method • Hepatic vein flow reversals • Tricuspid valve Doppler 2. Pulmonary artery peak and mean pressures 2-D Semiquantitative & Doppler quantitative methods <ul style="list-style-type: none"> • How do I measure in cases of VSD, PDA, PA diastolic pressure by PR jet <ul style="list-style-type: none"> • How do I measure RA, tricuspid and pulmonary annulus • RV functions in daily practice like RVFAC, TAPSE, RV-TDI • Significance of notch in RVOT Doppler <p><i>R J Manjuran (Kochi)</i> <i>Debika Chatterjee (Kolkata)</i></p> <p>EXPERT CRITIQUE Debasish Roychoudhury (USA)</p>	<p>Echocardiography: A pulmonary artery catheter in the box: Imaging & Hearty Hemodynamics of Right Heart</p> <ol style="list-style-type: none"> 1. RA pressure <ul style="list-style-type: none"> • IVC method • Hepatic vein flow reversals • Tricuspid valve Doppler 2. Pulmonary artery peak and mean pressures 2-D Semiquantitative & Doppler quantitative methods <ul style="list-style-type: none"> • How do I measure in cases of VSD, PDA, PA diastolic pressure by PR jet <ul style="list-style-type: none"> • How do I measure RA, tricuspid and pulmonary annulus • RV functions in daily practice like RVFAC, TAPSE, RV-TDI • Significance of notch in RVOT Doppler <p><i>Rakesh Gupta (Delhi)</i> <i>Sabina (Bangladesh)</i> <i>AKM Monwarul Islam (Bangladesh)</i></p> <p>EXPERT CRITIQUE Nilda Gladys Espinola Zavaleta (Mexico)</p>	<p>Echocardiography: A pulmonary artery catheter in the box: Imaging & Hearty Hemodynamics of Right Heart</p> <ol style="list-style-type: none"> 1. RA pressure <ul style="list-style-type: none"> • IVC method • Hepatic vein flow reversals • Tricuspid valve Doppler 2. Pulmonary artery peak and mean pressures 2-D Semiquantitative & Doppler quantitative methods <ul style="list-style-type: none"> • How do I measure in cases of VSD, PDA, PA diastolic pressure by PR jet <ul style="list-style-type: none"> • How do I measure RA, tricuspid and pulmonary annulus • RV functions in daily practice like RVFAC, TAPSE, RV-TDI • Significance of notch in RVOT Doppler <p><i>G Vijayaraghavan (Trivandrum)</i> <i>Rachel Daniel (Kollam)</i></p> <p>EXPERT CRITIQUE Mehmet Serdar Küçükoglu (Turkey)</p>
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<p>12.05 PM 01.15 PM</p>	<p>LV chamber quantitation 1. Current guidelines for measurement of LV size thickness and mass, LA, aortic root & aorta at various levels 2. How to record pulmonary vein, LA volume, & tissue Doppler imaging 3. Evaluation of mean LA pressure / LVEDP 4. Evaluation of LV ejection fraction by 2-D echo 5. Tips & tricks for ideal study 6. LV, RV segments – coronary supply</p> <p><i>S. Shanmugasundaram (Chennai)</i> <i>Rohit Tandon (Ludhiana)</i></p> <p>EXPERT CRITIQUE Masood Ahmad (USA)</p>	<p>LV chamber quantitation 1. Current guidelines for measurement of LV size thickness and mass,, LA, aortic root & aorta at various levels 2. How to record pulmonary vein, LA volume & tissue Doppler imaging 3. Evaluation of mean LA pressure / LVEDP 4. Evaluation of LV ejection fraction by 2-D echo 5. Tips & tricks for ideal study 6. LV, RV segments – coronary supply</p> <p><i>Simmi Manocha (Faridabad)</i> <i>Rekha Mishra (Delhi)</i></p> <p>EXPERT CRITIQUE <i>Madhavi Kadiyala (USA)</i></p>	<p>LV chamber quantitation 1. Current guidelines for measurement of LV size thickness and mass,, LA, aortic root & aorta at various levels 2. How to record pulmonary vein, LA volume & tissue Doppler imaging 3. Evaluation of mean LA pressure / LVEDP 4. Evaluation of LV ejection fraction by 2-D echo 5. Tips & tricks for ideal study 6. LV, RV segments – coronary supply</p> <p><i>Shantanu Sengupta (Nagpur)</i> <i>Sajan Ahmad (Cochin)</i></p> <p>EXPERT CRITIQUE Jae K Oh (USA)</p>	<p>LV chamber quantitation 1. Current guidelines for measurement of LV size thickness and mass,, LA, aortic root & aorta at various levels 2. How to record pulmonary vein, LA volume & tissue Doppler imaging 3. Evaluation of mean LA pressure / LVEDP 4. Evaluation of LV ejection fraction by 2-D echo 5. Tips & tricks for ideal study 6. LV, RV segments – coronary supply</p> <p><i>Abhijit Chatterjee (Kolkata)</i> <i>Nandita Chakravorty (Kolkata)</i></p> <p>EXPERT CRITIQUE Fabiola Sozzi (Italy)</p>	<p>LV chamber quantitation 1. Current guidelines for measurement of LV size thickness and mass,, LA, aortic root & aorta at various levels 2. How to record pulmonary vein, LA volume & tissue Doppler imaging 3. Evaluation of mean LA pressure / LVEDP 4. Evaluation of LV ejection fraction by 2-D echo 5. Tips & tricks for ideal study 6. LV, RV segments – coronary supply</p> <p><i>U.P. Singh (Chandigarh)</i> <i>Sandeep Joneja (Jaipur)</i> <i>Subhash Saxena (Jaipur)</i></p> <p>EXPERT CRITIQUE Arnold Pasia (Phillipines)</p>
<p>01.30 PM 02.30 PM LUNCH</p>	<p>HALL :A</p> <p>Workshop on Myocardial Strain imaging: (Ticketed Session) Limited to 100 delegates</p> <ul style="list-style-type: none"> • What is strain. How to perform speckle –tracking echo • How to analyze and interpret especially GLS • Clinical applications • Value of Bulls Eye Plot or AFI in coronary artery disease & cardiomyopathies • limitations <p><i>R. Alagesan, R. Manivasagam</i> EXPERT CRITIQUE : Thomas Marwick (Australia)</p>				

<p>02.30 PM 03.40 PM</p>	<p>Prosthetic valve 1. Introduction to types of prosthetic valves 2. How does their hemodynamics differ from native valve – concept of EROA 3. Echo - anatomic demonstration of various types of prosthetic valves 4. Normal vs abnormal prosthetic valve & gradients 5. Stepwise approach when the gradient is high/increasing in follow up 6 Pannus, thrombus . How to differentiate 7. How to report a prosthetic valve case 8. Recorded studies of dysfunctional prosthetic valve. What is the abnormality</p> <p><i>Sameer Shrivastava (Delhi)</i> <i>Vinay Sharma (Delhi)</i></p> <p>EXPERT CRITIQUE Rekha Mankad (USA)</p>	<p>Prosthetic valve 1. Introduction to types of prosthetic valves 2. How does their hemodynamics differ from native valve – concept of EROA 3. Echo - anatomic demonstration of various types of prosthetic valves 4. Normal vs abnormal prosthetic valve & gradients 5. Stepwise approach when the gradient is high/ increasing in follow up 6 Pannus, thrombus. How to differentiate 7. How to report a prosthetic valve case 8. Recorded studies of dysfunctional prosthetic valve. What is the abnormality</p> <p><i>J.C Mohan (Delhi)</i> <i>Atul Karande (Indore)</i></p> <p>EXPERT CRITIQUE Natesa G Pandian (USA)</p>	<p>Prosthetic valve 1. Introduction to types of prosthetic valves 2. How does their hemodynamics differ from native valve – concept of EROA 3. Echo - anatomic demonstration of various types of prosthetic valves 4. Normal vs abnormal prosthetic valve & gradients 5. How to report a prosthetic valve case 5. Stepwise approach when the gradient is high/increasing in follow up 6 Pannus, thrombus. How to differentiate 7. How to report a prosthetic valve case 8. Recorded studies of dysfunctional prosthetic valve. What is the abnormality</p> <p><i>A George Koshy (Trivandrum)</i> <i>Arif Mustaqueem (Delhi)</i></p> <p>EXPERT CRITIQUE Hari P Chaliki (USA)</p>	<p>Prosthetic valve 1. Introduction to types of prosthetic valves 2. How does their hemodynamics differ from native valve – concept of EROA 3. Echo - anatomic demonstration of various types of prosthetic valves 4. Normal vs abnormal prosthetic valve & gradients 5. How to report a prosthetic valve case 5. Stepwise approach when the gradient is high/increasing in follow up 6 Pannus, thrombus. How to differentiate 7. How to report a prosthetic valve case 8. Recorded studies of dysfunctional prosthetic valve. What is the abnormality</p> <p><i>Chandramukhi Sunehra (Hyderabad)</i> <i>Ashok Garg (Jaipur)</i></p> <p>EXPERT CRITIQUE K. Chandrasekaran (USA)</p>	<p>Prosthetic valve 1. Introduction to types of prosthetic valves 2. How does their hemodynamics differ from native valve – concept of EROA 3. Echo - anatomic demonstration of various types of prosthetic valves 4. Normal vs abnormal prosthetic valve & gradients 5. How to report a prosthetic valve case 5. Stepwise approach when the gradient is high/increasing in follow up 6 Pannus, thrombus . How to differentiate 7. How to report a prosthetic valve case 8. Recorded studies of dysfunctional prosthetic valve. What is the abnormality</p> <p><i>C.K .Ponde (Mumbai)</i> <i>Mohsin Ansari (Mumbai)</i></p> <p>EXPERT CRITIQUE Hector I. Michelena (USA)</p>
<p>03.40 PM 04.00 PM</p>	<p>TEA BREAK</p>				

<p>4.00 PM 5.15 PM</p>	<p>3D Echo 360 Degrees: Case based presentation</p> <ol style="list-style-type: none"> 1. Basic concepts of optimizing a 3D image; demonstration of cropping modalities & controls 2. Left ventricular Tomographic views: Biplane, Triplane & Multiplane 3. L V 3D Volume calculation Step by Step: Gold standard of EF 4. 3-D evaluation of tricuspid valve 5. 3D Evaluation of mitral valve 6. 3-D Evaluation of aortic valve <p><i>R. Alagesan (Chennai)</i></p> <p>EXPERT CRITIQUE Aasha Gopal (USA)</p>	<p>3D Echo 360 Degrees: Case based presentation</p> <ol style="list-style-type: none"> 1. Basic concepts of optimizing a 3D image, demonstration of cropping modalities & controls 2. Left ventricular Tomographic views: Biplane, Triplane & Multiplane 3. L V 3D Volume calculation Step by Step: Gold standard of EF 4. 3-D evaluation of tricuspid valve 5. 3D Evaluation of mitral valve 6. 3-D Evaluation of aortic valve <p><i>V. Amuthan (Madurai)</i></p> <p>EXPERT CRITIQUE Sunil Mankad (USA)</p>	<p>3D Echo 360 Degrees: Case based presentation</p> <ol style="list-style-type: none"> 1. Basic concepts of optimizing a 3D image, demonstration of cropping modalities & controls 2. Left ventricular Tomographic views: Biplane, Triplane & Multiplane 3. L V 3D Volume calculation Step by Step: Gold standard of EF 4. 3-D evaluation of tricuspid valve 5. 3D Evaluation of mitral valve 6. 3-D Evaluation of aortic valve <p><i>K Raghu (Hyderabad)</i> <i>Srikanth Sola (Bengaluru)</i></p> <p>EXPERT CRITIQUE Navin C Nanda (USA) Krasimira Hristova (Bulgaria)</p>	<p>3D Echo 360 Degrees: Case based presentation</p> <ol style="list-style-type: none"> 1. Basic concepts of optimizing a 3D image, demonstration of cropping modalities & controls 2. Left ventricular Tomographic views: Biplane, Triplane & Multiplane 3. L V 3D Volume calculation Step by Step: Gold standard of EF 4. 3-D evaluation of tricuspid valve 5. 3D Evaluation of mitral valve 6. 3-D Evaluation of aortic valve <p><i>K.K. Kapur (Delhi)</i> <i>Satish Govind (Bengaluru)</i></p> <p>EXPERT CRITIQUE Raj Janardhanan (USA)</p>	<p>3D Echo 360 Degrees: Case based presentation</p> <ol style="list-style-type: none"> 1. Basic concepts of optimizing a 3D image, demonstration of cropping modalities & controls 2. Left ventricular Tomographic views: Biplane, Triplane & Multiplane 3. L V 3D Volume calculation Step by Step: Gold standard of EF 4. 3-D evaluation of tricuspid valve 5. 3D Evaluation of mitral valve 6. 3-D Evaluation of aortic valve <p><i>Ashok Omar (Delhi)</i> <i>Rahul Mehrotra (Delhi)</i></p> <p>EXPERT CRITIQUE Jaroslaw D Kasprzak (Poland)</p>
<p>6.30 PM onwards</p>	<p>IAE EXECUTIVE COMMITTEE MEETING: HOTEL LALIT, Jaipur</p>				