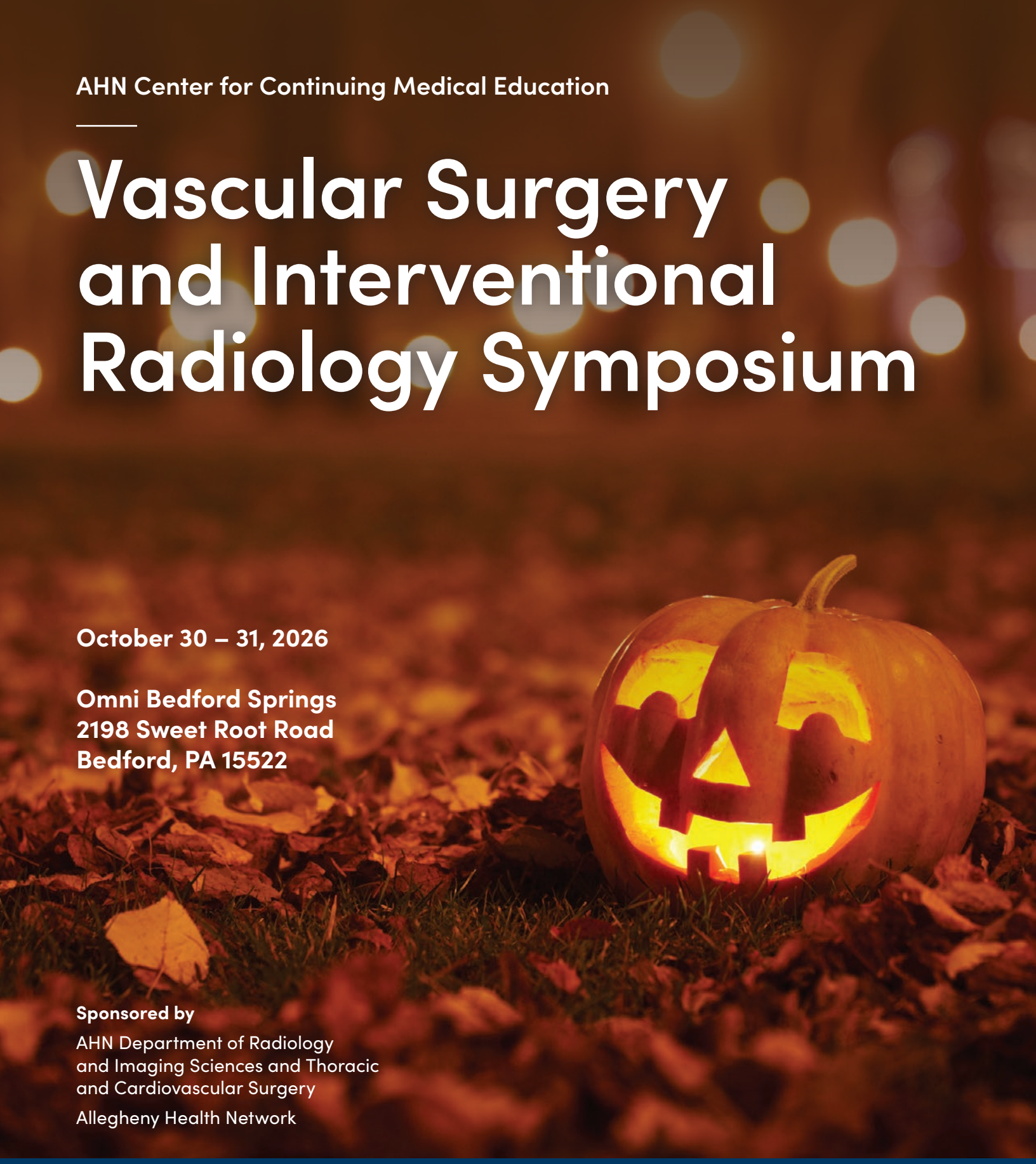
AHN Center for Continuing Medical Education

Vascular Surgery and Interventional Radiology Symposium



October 30 – 31, 2026

Omni Bedford Springs
2198 Sweet Root Road
Bedford, PA 15522

Sponsored by

AHN Department of Radiology and Imaging Sciences and Thoracic and Cardiovascular Surgery

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[1] Data on File

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Save the Date

We're pleased to announce that the **Vascular Surgery and Interventional Radiology Symposium** will return to the historic **Omni Bedford Springs Resort October 29 – 30, 2027.**

Save the date and watch for future announcements regarding program details, faculty, and registration.

Medtronic

EndoSuture Aneurysm Repair (ESAR) with the Heli-FX™ EndoAnchor™ system: Reinforced seal,[1] redefined outcomes.[2-6]

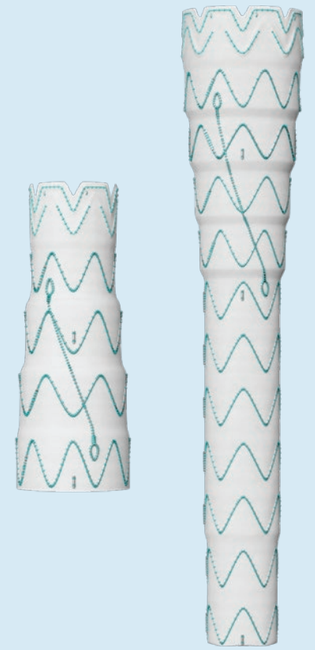
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Reference:
1. https://www.fda.gov/medical-devices/recently-approved-devices/lava-liquid-embolic-system-p220020

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LAVA™
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The **FIRST** and **ONLY** liquid embolic approved for the treatment of peripheral arterial hemorrhage[1]



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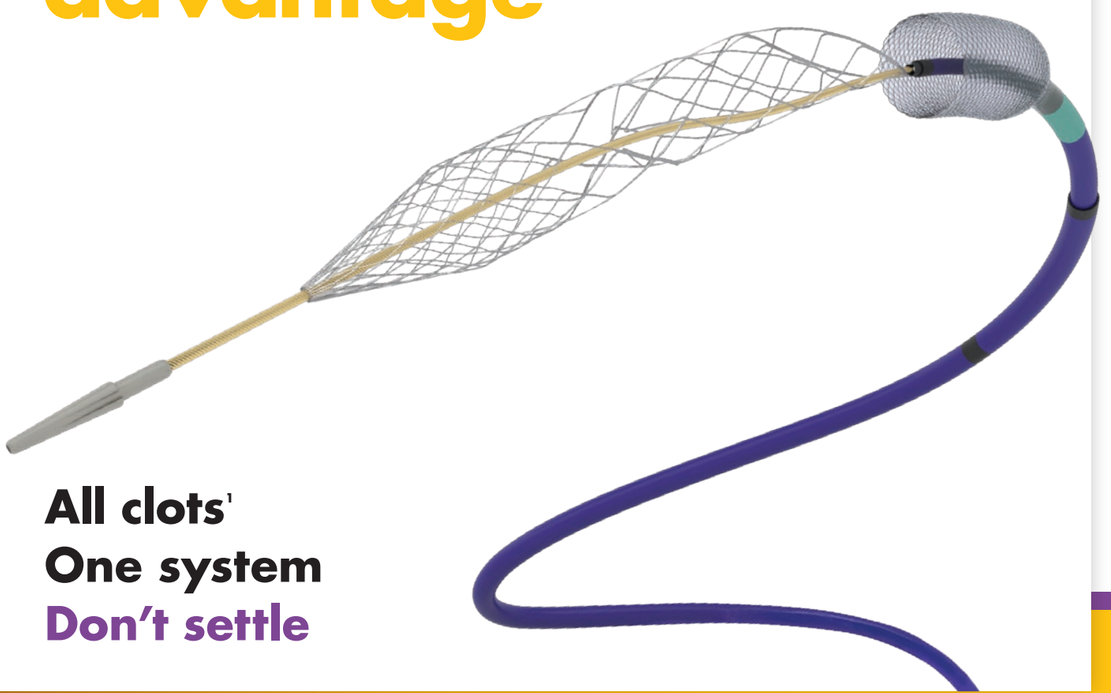
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References
1. Designed to remove acute to chronic arterial clots. According to benchtop testing compared to control. Internal data on file. Narula et al. JACC 2018;72:2153-63

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The Artix Thin-Walled Sheath is indicated for: (1) The non-surgical removal of emboli and thrombi from blood vessels. (2) Injection, infusion, and/or aspiration of contrast media and other fluids into or from a blood vessel. (3) Use as a conduit for endovascular devices. (4) Use in facilitating the insertion and guidance of an intravascular catheter into a selected blood vessel. The funnel provides temporary vascular occlusion during these and other angiographic procedures. The Artix Thin-Walled Sheath is intended for use in the peripheral vasculature. The Artix MT thrombectomy device is indicated for (1) the non-surgical removal of emboli and thrombi from a blood vessel; and (2) injection, infusion, and/or aspiration of contrast media and other fluids into or from a blood vessel. The Artix MT thrombectomy device is intended for use in the peripheral vasculature. The Artix AX aspiration catheter is indicated for (1) the non-surgical removal of emboli and thrombi from blood vessels; and (2) injection, infusion, and/or aspiration of contrast media and other fluids into or from a blood vessel. The Artix AX aspiration catheter is intended for use in the peripheral vasculature. The FlowSaver Blood Return System is used with Inari Medical catheters and sheaths for autologous blood transfusion. Review complete Instructions for Use, Indications for Use, Warnings, Precautions, Possible Adverse Effects and contraindications prior to use of the product. For all non-Stryker products, please refer to manufacturer Instructions for Use/Intended Purpose for complete indications for use, contraindications, warnings and precautions.
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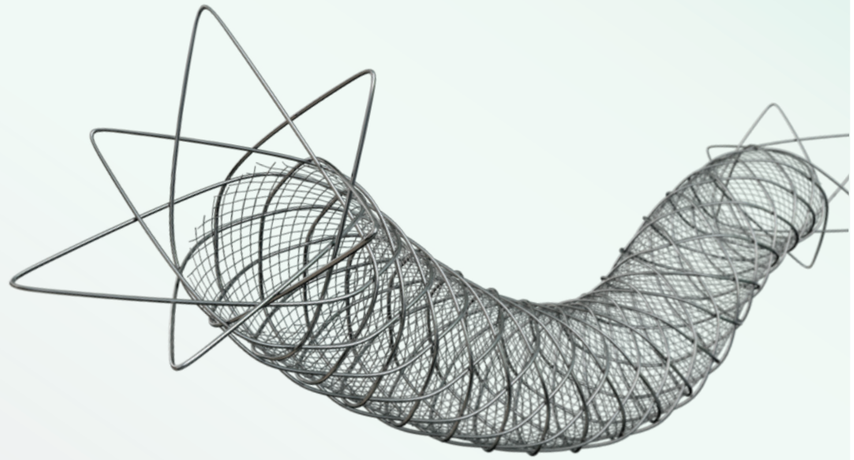
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Overview

The symposium on Vascular Surgery and Interventional Radiology aims to bring together experts, researchers, and practitioners in the field to discuss recent advancements, emerging technologies, and best practices. This event will provide a platform for sharing knowledge, networking, and fostering collaborations to improve patient care and outcomes. Attendees will have the opportunity to engage in meaningful discussions, exchange ideas, and gain insights into the latest trends and research findings in vascular surgery and interventional radiology.

Objectives

- Evaluate evidence-based preoperative evaluation strategies for vascular surgery patients
- Analyze management approaches for the internal iliac artery in patients with common iliac aneurysms
- Compare open versus endovascular treatment outcomes for claudication
- Identify management and repair strategies for the thrombosed arteriovenous (AV) fistula
- Apply current radiation safety protocols in daily endovascular clinical practice
- Analyze the economic and reimbursement frameworks associate with modern vascular care delivery

CME accreditation

Physicians

Allegheny General Hospital is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

Allegheny General Hospital designates this live activity for a maximum of 8.5 *AMA PRA Category 1 Credits*™. Physicians should claim only the credit commensurate with the extent of their participation in this activity.

ABS-certified surgeons

Successful completion of this CME activity enables the learner to earn credit toward the CME of the American Board of Surgery's Continuous Certification program. It is the CME activity provider's responsibility to submit learner completion information to ACCME for the purpose of granting ABS credit.

ABTS-certified surgeons

Successful completion of this CME activity enables the learner to earn credit toward the CME of the American Board of Thoracic Surgery's Continuous Certification program. It is the CME activity provider's responsibility to submit learner completion information to ACCME for the purpose of granting ABTS credit.

NPs and PAs

American Nurses Credentialing Center (ANCC) accepts *AMA PRA Category 1 Credits*™ from organizations accredited by the ACCME. American Academy of Nurse Practitioners (AANP) accepts *AMA PRA Category 1 Credits*™ from organizations accredited by the ACCME.

The National Commission on Certification of Physician Assistants (NCCPA) states that the *AMA PRA Category 1 Credits*™ are acceptable for continuing medical education requirements for recertification.

Non-physicians

Allegheny General Hospital has approved this activity for 8.5 contact hours for non-physicians.

Program agenda

Friday, October 30, 2026

7:30 – 8:25 a.m. Registration, breakfast, and visit exhibits
Breakfast sponsor: Boston Scientific | Penumbra

8:25 – 8:30 a.m. Introduction and overview
Andrew Klobuka, MD, and Satish Muluk, MD

8:30 – 9 a.m. The vascular pre-game
Elisa Taffe, MD, CWSP, FSVM

9:00 – 9:30 a.m. Managing the internal iliac artery in patients with common iliac aneurysms (IBD, VORTEC, bypass)
Carlos Rosales, MD, and Westin Yu, DO

9:30 – 10 a.m. Vascular surgeons: How much value do they provide the medical system?
Satish Muluk, MD

10:00 – 10:30 a.m. Is renal artery denervation beneficial? Which patients should have it?
Deepak Shan, MD

10:30 – 10:45 a.m. Break and visit exhibits

10:45 – 11:15 a.m. When should we treat chronic TBAD? What are the available strategies?
Bart Chess, MD

11:15 – 11:45 a.m. When and how should we intervene for renal artery stenosis?
Vie Shaun Siow, MD

11:45 a.m. – 12:45 p.m. Lunch in Constitution Hall and visit exhibitors

12:45 – 1:15 p.m. Micro-mesh covered stents: A new frontier for carotid stenting and TCAR
Josephine Gottsponer, MD, and Schae Saravitz, MD

1:15 – 1:45 p.m. Open vs endo treatment for claudication. What do the data reveal?
Abdulrahman Hammad, MD

1:45 – 2:15 p.m. Myths of AV fistula thrombectomy
Benjamin Contrella, MD

2:15 – 2:45 p.m. Break visit with exhibitors

2:45 – 3:15 p.m. Updates in DVT intervention
Abdullah Shaikh, MD

Program agenda

3:15 – 3.45 p.m. PE risk stratification: How can we better select patients for intervention?
William Terrill, MD

3:45 – 4:15 p.m. Endovascular history trivia
Robert Lewis, DO

4:30 – 6 p.m. Reception in Constitution Hall for attendees, faculty, and exhibitors
Reception sponsor: Terumo Aortic

Saturday, October 31, 2026

8:00 – 9 a.m. Registration, breakfast, and visit exhibits

9:00 – 9:30 a.m. Update on embolics
Jean Jagiello, DO, and Bhavita Jagessar, MD

9:30 – 10 a.m. ERPDs (enhanced radiation protection devices) in interventional labs: 2026 Multi-society consensus statement
Margaret Blackwood, MD, DABR

10:00 – 10:30 a.m. Break with grab-n-go snacks and room check-out

10:30 – 11:30 a.m. Economics of vascular care: How to get paid for what you do
Arianne Damico, RRT, and Andrew Klobuka, MD

11:30 a.m. – noon Course wrap-up

Planning committee

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Notes

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