

ECHO FLORIDA™

ANNUAL 12th



FINAL PROGRAM

April 5 – 7, 2025

Disney's Yacht & Beach Club Resort

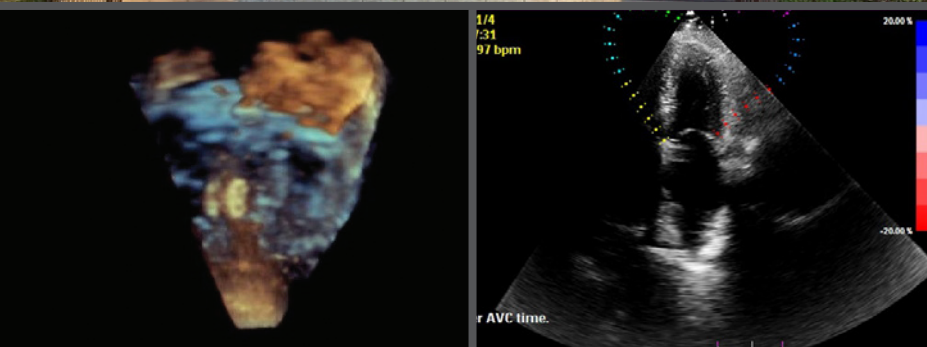
Walt Disney World® Resort - Lake Buena Vista, FL

Course Director

Matt Umland, ACS, RDCS, FASE
Aurora Health Care
Milwaukee, WI

Course Co-Director

Vincent L. Sorrell, MD, FASE
University of Kentucky
Lexington, KY



LUMASON®

(sulfur hexafluoride lipid-type A microspheres)
for injectable suspension, for intravenous
use or intravesical use

VISUALLY DECISIVE

STUDY BY FILIPPONE ET AL^{1*}

- Data from prospective studies with LUMASON UEA in patients at higher than usual risk for developing cardiopulmonary reactions suggested:
 - No detrimental effects on cardiac electrophysiology in patients with coronary artery disease; no significant effects on pulmonary hemodynamics in patients with pulmonary hypertension or congestive heart failure
 - No effects on several assessments of pulmonary function in patients with chronic obstructive pulmonary disease, and no clinically meaningful changes in oxygen saturation or other safety parameters in patients with diffuse interstitial pulmonary fibrosis
- Post-marketing surveillance data up to February 2023 revealed very low reporting rates for all serious adverse events (<1 every 10,000 exposures), of which part were due to hypersensitivity to the agent

UNLOCKING THE INVISIBLE

*LUMASON® is known globally as SonoVue®.

¹As of January 2023. The numbers shown represent the combined global market data for both LUMASON and SonoVue. The individual who appears is for illustrative purposes. The person depicted is a model and not a real patient.

LUMASON® (sulfur hexafluoride lipid-type A microspheres) for injectable suspension, for intravenous use or intravesical use

Indications

LUMASON® (sulfur hexafluoride lipid-type A microspheres) for injectable suspension, for intravenous use or intravesical use is an ultrasound contrast agent indicated for use:

- in echocardiography to opacify the left ventricular chamber and to improve the delineation of the left ventricular endocardial border in adult and pediatric patients with suboptimal echocardiograms
- in ultrasonography of the liver for characterization of focal liver lesions in adult and pediatric patients
- in ultrasonography of the urinary tract for the evaluation of suspected or known vesicoureteral reflux in pediatric patients

IMPORTANT SAFETY INFORMATION

WARNING: SERIOUS CARDIOPULMONARY REACTIONS

Serious cardiopulmonary reactions, including fatalities, have occurred uncommonly during or following the injection of ultrasound contrast

agents, including sulfur hexafluoride lipid microspheres. Most serious reactions occur within 30 minutes of administration.

- Assess all patients for the presence of any condition that precludes administration
- Always have resuscitation equipment and trained personnel readily available

Contraindications

LUMASON (sulfur hexafluoride lipid-type A microspheres) for injectable suspension, for intravenous use or intravesical use is contraindicated in patients with known or suspected hypersensitivity to sulfur hexafluoride lipid microsphere or its components, such as polyethylene glycol (PEG).

Warnings

Serious cardiopulmonary reactions, including fatalities, have occurred uncommonly during or shortly following administration of ultrasound contrast agents, including LUMASON. Always have cardiopulmonary resuscitation personnel and equipment readily available prior to LUMASON administration and monitor all patients for acute reactions.

LEARN MORE
BY VISITING
LUMASON.COM/SAFETY



OVER
12 MILLION
DOSES
ADMINISTERED
WORLDWIDE^{2†}

BRACCO Bracco Diagnostics

LUMASON[®]

(sulfur hexafluoride lipid-type A microspheres)
for injectable suspension, for intravenous
use or intravesical use

Rx ONLY
Please see full
prescribing information.
A brief summary follows.

WARNING: SERIOUS CARDIOPULMONARY REACTIONS
Serious cardiopulmonary reactions, including fatalities, have occurred uncommonly during or following the injection of ultrasound contrast agents, including sulfur hexafluoride lipid microspheres [see Warnings and Precautions (5.1)]. Most serious reactions occur within 30 minutes of administration [see Warnings and Precautions (5.1)].

- Assess all patients for the presence of any condition that precludes administration [see Contraindications (4)].
- Always have resuscitation equipment and trained personnel readily available [see Warnings and Precautions (5.1)].

1 INDICATIONS AND USAGE

Echocardiography Lumason is indicated for use in adult patients with suboptimal echocardiograms to opacify the left ventricular chamber and to improve the delineation of the left ventricular endocardial border.

Ultrasonography of the Liver Lumason is indicated for use with ultrasound of the liver in adult and pediatric patients to characterize focal liver lesions.

Ultrasonography of the Urinary Tract Lumason is indicated for use in ultrasonography of the urinary tract in pediatric patients for the evaluation of suspected or known vesicoureteral reflux.

2 DOSAGE AND ADMINISTRATION

2.1 Important Administration Instructions Do not administer Lumason by intra-arterial injection [see Warnings and Precautions (5.3)].

2.2 Recommended Dosage

Echocardiography The recommended dose of Lumason after reconstitution is 2 mL administered as an intravenous bolus injection during echocardiography. During a single examination, a second injection of 2 mL may be administered to prolong contrast enhancement. Follow each Lumason injection with an intravenous flush using 5 mL of 0.9% Sodium Chloride Injection.

Ultrasonography of the Liver

Adults The recommended dose of Lumason after reconstitution in adult patients is 2.4 mL administered as an intravenous injection during ultrasonography of the liver. During a single examination, a second injection of 0.03 mL per kg may be administered, if needed. Do not exceed 2.4 mL per injection. Follow Lumason injection with an intravenous flush of 0.9% Sodium Chloride Injection.

Pediatric Patients The recommended dose of Lumason after reconstitution in pediatric patients is 0.03 mL per kg administered as an intravenous injection during ultrasonography of the liver. During a single examination, a second injection of 0.03 mL per kg may be administered, if needed. Do not exceed 2.4 mL per injection. Follow Lumason injection with an intravenous flush of 0.9% Sodium Chloride Injection.

Ultrasonography of the Urinary Tract

Pediatric Patients The recommended dose of Lumason after reconstitution is 1 mL. The bladder may be refilled with normal saline for a second cycle of voiding and imaging, without the need of a second Lumason administration.

2.3 Reconstitution Instructions

- Inspect the Lumason kit and its components for signs of damage. Do not use the kit if the protective caps on the Lumason vial and prefilled syringe with 5 mL Sodium Chloride 0.9% Injection are not intact or if the kit shows other signs of damage.

- Under aseptic conditions, reconstitute Lumason by injecting the prefilled syringe with 5 mL Sodium Chloride 0.9% Injection into the Lumason vial using the following steps:

1. Connect the plunger rod to the prefilled syringe barrel by screwing it clockwise into the syringe.
2. Open the Mini-Spike blister and remove the syringe tip cap.
3. Open the Mini-Spike green cap and connect the syringe to the Mini-Spike by screwing it in clockwise.
4. Remove the flip cap plastic protective cap from the vial, remove the Mini-Spike spike protection and position the spike in the center of the rubber stopper of the vial. Press firmly inward until the spike is fully inserted in the stopper.
5. Empty the content of the syringe into the vial by pushing on the plunger rod.
6. Shake vigorously for 20 seconds, mixing all the contents in the vial. A homogeneous white milky liquid indicates formation of sulfur hexafluoride lipid microspheres.
7. For preparation of doses greater than or equal to 1 mL, invert the system and slowly withdraw the intended volume of suspension into the syringe. For preparation of doses less than 1 mL, withdraw 2 mL of the reconstituted suspension into the 5 mL syringe and measure the volume of Lumason to inject by using the 0.2 mL graduations between the 1 mL and 2 mL marks.
8. Unscrew the syringe from the Mini-Spike. Peel and remove the diluent label to display the reconstituted product label. For intravenous administration, immediately connect the syringe to a dose administration line (20 G) and administer as directed under the Administration Instructions. For intravesical administration, immediately connect the syringe to a sterile urinary catheter (8 French to 8 French) and administer as directed under the Administration Instructions.
- Following reconstitution, Lumason suspension contains 1.5 to 5.6 x10¹⁰ microspheres/mL with 45 mcg/mL of sulfur hexafluoride.

- Use immediately after reconstitution. If the suspension is not used immediately after reconstitution, resuspend the microspheres for a few seconds by hand agitation before the suspension is drawn into the syringe. Reconstituted suspension within a vial may be used for up to 3 hours from the time of its reconstitution. Maintain the vial containing the reconstituted suspension at room temperature.

2.4 Administration Instructions

Inspect visually for particulate matter and discoloration prior to administration, whenever solution and container permit. The reconstituted suspension is milky-white, and does not contain visible particulate matter. Do not use the single-patient use vial for more than one patient.

Intravenous Administration

Administer Lumason as an intravenous bolus injection.

Intravesical Administration in Pediatric Patients

1. Insert a sterile 6 French to 8 French urinary catheter into the bladder under sterile conditions;
2. Empty the bladder of urine, and then fill the bladder with saline (sterile 0.9% sodium chloride solution) to approximately one third or half of its predicted total volume. The total bladder volume in children is calculated as [(age in years + 2) x 30] mL;
3. Administer Lumason as an intravesical bolus injection through the urinary catheter;
4. Continue filling the bladder with saline until the patient has the urge to micturate or at the first sign of back pressure to the infusion.
5. Immediately following the first voiding, the bladder may be refilled with normal saline for a second cycle of voiding and imaging, without the need of a second Lumason administration

4 CONTRAINDICATIONS

Lumason is contraindicated in patients with:

- history of hypersensitivity reactions to sulfur hexafluoride lipid microsphere components or to any of the inactive ingredients in Lumason

5 WARNINGS AND PRECAUTIONS

5.1 Cardiopulmonary Reactions

Serious cardiopulmonary reactions, including fatalities have occurred uncommonly during or shortly following administration of ultrasound contrast agents, including Lumason. These reactions typically occurred within 30 minutes of administration. The risk for these reactions may be increased among patients with unstable cardiopulmonary conditions (acute myocardial infarction, acute coronary artery syndrome, worsening or unstable congestive heart failure, or serious ventricular arrhythmias). Always have cardiopulmonary resuscitation personnel and equipment readily available prior to Lumason administration and monitor all patients for acute reactions.

The reported reactions that may follow the administration of ultrasound contrast agents include: fatal cardiac or respiratory arrest, shock, syncope, symptomatic arrhythmias (atrial fibrillation, tachycardia, bradycardia, supraventricular tachycardia, ventricular fibrillation, and ventricular tachycardia), hypertension, hypotension, dyspnea, hypoxia, chest pain, respiratory distress, stridor, wheezing, loss of consciousness, and convulsions.

5.2 Hypersensitivity Reactions

Hypersensitivity reactions such as skin erythema, rash, urticaria, flushing, throat tightness, dyspnea, or anaphylactic shock have uncommonly been observed following the injection of Lumason. These reactions may occur in patients with no history of prior exposure to sulfur hexafluoride lipid containing microspheres. Always have cardiopulmonary resuscitation personnel and equipment readily available prior to Lumason administration and monitor all patients for hypersensitivity reactions.

5.3 Systemic Embolization

When administering Lumason to patients with cardiac shunt, microspheres can bypass filtering by the lung and enter the arterial circulation. Assess patients with shunts for embolic phenomena following Lumason administration. Lumason is only for intravenous and/or intravesical administration; do not administer Lumason by intra-arterial injection [see Dosage and Administration (2.1)].

5.4 Ventricular Arrhythmia Related to High Mechanical Index

High ultrasound mechanical index values may cause microsphere cavitation or rupture and lead to ventricular arrhythmias. Additionally, end-systolic triggering with high mechanical indices has been reported to cause ventricular arrhythmias.

Lumason is not recommended for use at mechanical indices greater than 0.8.

6 ADVERSE REACTIONS

The following serious adverse reactions are discussed elsewhere in the labeling:

- Cardiopulmonary reactions [see Warnings and Precautions (5.1)]
- Hypersensitivity reactions [see Warnings and Precautions (5.2)]

6.1 Clinical Trials Experience

Because clinical trials are conducted under widely varying conditions, adverse reaction rates observed in the clinical trials of a drug cannot be directly compared to rates in the clinical trials of another drug and may not reflect the rates observed in practice.

In completed clinical trials, a total of 6984 adult subjects (128 healthy volunteers and 6856 patients) received Lumason at cumulative doses ranging from 0.2 to 161 mL (mean 9.8 mL). Lumason was administered mainly as single or multiple injections; however, some subjects received infusion dosing. The majority (75%) of subjects received

Lumason at cumulative doses of 10 mL or less. There were 64% men and 36% women, with an average age of 59 years (range 17 to 99 years). A total of 79% subjects were Caucasian, 4% were Black, 16% were Asian; <1% were Hispanic; and <1% were in other racial groups or race was not reported.

In the clinical trials, serious adverse reactions were observed in 2 subjects: one who experienced a hypersensitivity-type rash and presyncope and another who experienced anaphylactic shock shortly following Lumason administration.

The most commonly reported adverse reactions among patients

(occurring among at least 0.2% of patients) are listed below (Table 1). Most adverse reactions were mild to moderate in intensity and resolved spontaneously.

TABLE 1. ADVERSE REACTIONS IN PATIENTS* n = 6856

Number (%) of Patients with Adverse Reactions	340 (5%)
Headache	65 (1%)
Nausea	37 (0.5%)
Dyspnea	29 (0.4%)
Injection site pain	23 (0.3%)
Feeling Hot	18 (0.3%)
Chest discomfort	17 (0.2%)
Chest pain	12 (0.2%)
Dizziness	11 (0.2%)
Injection Site Warmth	11 (0.2%)

*occurring in at least 0.2% of patients

6.2 Postmarketing Experience

In the international postmarketing clinical experience and clinical trials, serious adverse reactions have uncommonly been reported following administration of Lumason. Because these reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or establish a causal relationship to drug exposure. The serious adverse reactions include fatalities, especially in a pattern of symptoms suggestive of anaphylactic/hypersensitivity reactions. Other serious reactions included arrhythmias and hypotensive episodes. These reactions typically occurred within 30 minutes of Lumason administration.

8 USE IN SPECIFIC POPULATIONS

8.1 Pregnancy

Risk Summary There are no data with Lumason use in pregnant women to inform any drug-associated risks. No adverse developmental outcomes were observed in animal reproduction studies with administration of sulfur hexafluoride lipid-type A microspheres in pregnant rats and rabbits during organogenesis at doses up to at least 10 and 20 times, respectively, the maximum human dose of 4.8 mL based on body surface area (see Data).

In the U.S. general population, the estimated background risk of major birth defects and miscarriage in clinically recognized pregnancies is 2-4% and 15-20%, respectively.

Data

Animal Data Lumason was administered intravenously to rats at doses of 0.2, 1, and 5 mL/kg (approximately 0.4, 2, and 10 times the recommended maximum human dose of 4.8 mL, respectively, based on body surface area). Lumason doses were administered daily for about 30 consecutive days, from two weeks before pairing until the end of organogenesis. Lumason was administered intravenously to rabbits at doses of 0.2, 1, and 5 mL/kg (approximately 0.8, 4, and 20 times the recommended maximum human dose, respectively, based on body surface area). Lumason doses were administered daily from gestation day 6 to day 19 inclusive. No significant findings on the fetus were observed.

8.2 Lactation

Risk Summary There are no data on the presence of Lumason in human milk, the effects on the breastfed infant, or the effects on milk production. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for Lumason and any potential adverse effects on the breastfed infant from Lumason or from the underlying maternal condition.

8.4 Pediatric Use

Ultrasonography of the Liver Effectiveness in pediatric patients has been established for use in ultrasonography of the liver for characterization of focal liver lesions from adequate and well-controlled trials in adult patients and a clinical study of 44 pediatric patients [see Clinical Studies (14)]. Safety of intravenous use of Lumason was based on evaluation of published literature involving use of Lumason in over 900 pediatric patients. Non-fatal anaphylaxis was reported in one pediatric patient.

Ultrasonography of the Urinary Tract Effectiveness in pediatric patients has been established for use in ultrasonography of the urinary tract for the evaluation of suspected or known vesicoureteral reflux from two published studies comprising a total of 411 pediatric patients [see Clinical Studies (14)]. Safety of intravenous use of Lumason was based on evaluation of published literature involving use of Lumason in over 6000 pediatric patients. No adverse reactions were reported.

Echocardiography Safety and effectiveness in pediatric patients have not been established for use in echocardiography.

8.5 Geriatric Use

Of the total number of 6856 adult patients in clinical studies of Lumason, 39% were 65 and over, while 11% were 75 and older. No overall differences in safety or effectiveness were observed between these subjects and younger subjects, and other reported clinical experience has not identified differences in responses between the elderly or younger patients, but greater sensitivity of some older individuals cannot be ruled out.

17 PATIENT COUNSELING INFORMATION

Advise patients to inform their healthcare provider if they develop any symptoms of hypersensitivity after LUMASON administration including rash, wheezing, or shortness of breath.

Rx Only

LUMASON is manufactured for Bracco Diagnostics Inc., Monroe Township, NJ 08831 by Bracco Suisse S.A., Plan-les-Ouates Geneve, Switzerland (LUMASON lyophilized powder vial-25 mg lipid-type A/60.7 sulfur hexafluoride gas); Vetter Pharma-Fertigung GmbH & Co. KG, 88212 Ravensburg, Germany (Sodium Chloride 0.9% Injection, USP); B. Braun Melsungen AG, 34212 Melsungen, Germany (Mini-Spike). This product is covered by US Patent No. 5,686,060

Post-marketing hypersensitivity reactions, including serious hypersensitivity reactions, have been observed during use or shortly following LUMASON administration. These reactions may occur in patients with no history of prior exposure to sulfur hexafluoride lipid-containing microspheres. LUMASON contains PEG. There may be increased risk of serious reactions including death in patients with prior hypersensitivity reaction(s) to PEG.

Systemic embolization may occur in patients with cardiac shunts. Assess patients with cardiac shunts for embolic phenomena following LUMASON administration.

There is a risk of **ventricular arrhythmia related to high mechanical index** in patients administered LUMASON. LUMASON is not recommended for use at mechanical indices greater than 0.8.

The most common adverse reactions (incidence \geq 0.5%) are headache (1%) and nausea (0.5%).

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch or call 1-800-FDA-1088.

Please see BRIEF SUMMARY of Prescribing Information for LUMASON

ultrasound contrast agent, including BOXED WARNING on Serious Cardiopulmonary Reactions.

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LUMASON and SonoVue are registered trademarks of Bracco Diagnostics Inc. and its affiliated entities.

References: 1. Filippone A, Kirchin MA, Monteith J, et al. Safety of LUMASON[®] (SonoVue[®]) in special populations and critically ill patients. *Front Cardiovasc Med.* 2023 Aug 2;10:1225654. doi: 10.3389/fcvm.2023.1225654. PMID: 37600063; PMCID: PMC10433219. 2. Data on file. Bracco Diagnostics Inc.

Bracco Diagnostics Inc.

510 Carnegie Center, Suite 300

Princeton, NJ 08540 USA

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Phone: 609-514-2200

Toll-Free: 1-800-631-5245 (U.S. only)

Fax: 609-514-2424

Welcome Message and Faculty

Welcome Message

Welcome to the 12th Annual Echo Florida live course, sponsored by ASE. Along with our expert faculty and the ASE team, we have prepared a comprehensive and entertaining review of echocardiography as currently practiced.

The goal of Echo Florida is to introduce you to the basics of the newest applications of echocardiography while emphasizing the strengths and weaknesses of routine echocardiography. We intend to insert our unique tips and tricks to help you to use echo to its full capability. Recognizing that Echo is a team sport, we are excited to have a Sonographer and a Physician serve as your Course Directors which ensures that this team-model is rigorously represented throughout this Program. There are multiple sessions that highlight this important relationship which we wholeheartedly believe is a necessary model to have a successfully operating echo lab.

As course directors, it is our goal to make sure the presentations you receive are relevant to the day-to-day practice of high-quality, clinically meaningful echocardiography. We have designed the sessions to be engaging and interactive, while simultaneously adhering to our published, evidence-based guidelines. We encourage each of you to use the WhoVa App to pose thoughtful questions during each presentation and throughout the entire program. We will address every question and will use your insights to prepare future educational material.

The Course Faculty have been recruited because they are superb clinicians, approachable people, and, like us, they each share a passion for teaching. Our participating faculty are exceptionally diverse and have been encouraged to be open and transparent as they highlight their skills and expertise. We have all made interpretation errors and suffered from clinical misadventures where a valuable lesson was learned and we want you to learn from those experiences.

A brief review of the program: Saturday, Sunday, and Monday will all include interactive presentations with a case-based flavor. Additionally, Saturday and Sunday afternoon will feature optional small group sessions with a focus on strain, hands-on TEE simulator training, 3D for sonographers, and fascinating cases from the archives of CASE.

When looking at this upcoming program, you will quickly see that there are multiple opportunities to actively participate with the expert faculty during Interactive Case Reviews, Read with the Expert Sessions, and Small Group Workshops. There is a heavy reliance on actual Clinical Case Studies, Pro and Con Debates and Computer-based Cases. On Saturday, the program includes Chamber Quantifications – Follow the Guidelines with dedicated presentations on LV and RV systolic and diastolic function, strain imaging, the left atrium, and 3D echo. The day concludes with a Break-Out session that allows you to have hands-on TEE simulator training experience with our experts and a Cases from CASE session that highlights fascinating and educational reports from the CASE Editor-in-Chief. On Sunday we will switch to Valvular Heart Disease – Follow the Guidelines with presentations on Aortic Stenosis, Mitral Regurgitation, the Tricuspid Valve including the important Role of CCT and CMR. Additional presentations will include Cardiomyopathies, Intra-operative and 3D TEE, Intra-Cardiac Echocardiography (ICE) Prosthetic Valves, and the Pericardium. Once again, the day concludes with Break-Out sessions on TEE, 3D TTE, and ICE. On Monday, we finish with dedicated sessions on Mechanical Assist Devices, Ultrasound Enhancing Agents, CAD and Infarct Complications, Adults with Congenital Heart Disease, the Aorta, Cardiomyopathies and an update from the recent Chest Pain Guidelines. We will close the day with more Cases, Cases, and Cases including an opportunity for you to share your own Cases that you have brought with you for the Expert Panel to weigh in on and learn from. We won't conclude the program until all of your questions have been answered.

Welcome to Orlando! We plan to leave time in the evening for you to meet your family for fun and entertainment. We hope that our faculty's passion for echocardiography is evident and that you walk away with renewed energy and new knowledge as you return to your own echo labs. We are so pleased you chose to join us for Echo Florida – your active engagement helps us achieve our stated goals!



Course Director
**Matt Umland, ACS,
RDCS, FASE**
Aurora Health Care
Milwaukee, WI



Course Co-Director
**Vincent L. Sorrell,
MD, FASE**
University of Kentucky
Lexington, KY

Faculty

Theodore Abraham, MD, FASE
University of California, San Francisco
San Francisco, CA

Gerry Aurigemma, MD, FASE
UMass Memorial Medical Center
Boston, MA

Melissa Bond, BHS, ACS, RDCS
University of Kentucky
Lexington, KY

Casey Carlson, RDCS
Aurora Health Care
Milwaukee, WI

Renuka Jain, MD, FASE
Aurora St. Luke's Medical Center
Milwaukee, WI

Eric Kruse, BS, ACS, RDCS, RVT, FASE
University of Chicago Medical Center
Chicago, IL

Matthew Martinez, MD
Atlantic Health System
Morristown, NJ

Sherif Nagueh, MD, FASE
Houston Methodist Hospital
Houston, TX

Nishath Quader, MD, FASE
Washington University in St. Louis
St. Louis, MO

Muhamed Saric, MD, PhD, FASE
New York University
New York, NY

McKenzie Schweitzer, BS, RDCS, FASE
Aurora Health Care
Milwaukee, WI

Lissa Sugeng, MD, MPH, FASE
Northwell Health
Manhasset, NY

Program Information

Overview of Echo Florida

Echo Florida is a comprehensive review of echocardiography, including dedicated sessions on cardiomyopathies, coronary artery disease (including stress testing), valvular heart disease, pericardial disease, heart failure, emerging technologies, complex congenital heart disease and case-based demonstrations on the role of 2D, and real time 3D/4D echocardiography, as well as strain imaging.

Target Audience

This course is designed for adult and pediatric cardiologists, cardiovascular surgeons, cardiovascular anesthesiologists, cardiac radiologists, fellows in training, cardiovascular sonographers, cardiovascular nurse specialists, internists, intensivists, and emergency physicians with a special interest in clinical cardiology and echocardiography.

Course Learning Objectives

Upon completion of these sessions, participants will be better able to:

1. Know the echocardiographic features of aortic, mitral, tricuspid, and pulmonic valve disease (stenosis and regurgitation).
2. Be able to quantitate valve stenosis and regurgitation and help select appropriate interventions.
3. Identify hypertrophic cardiomyopathy and HCM-mimickers.
4. Identify simple and complex congenital disease.
5. Use echocardiography to diagnose and manage pericardial diseases.
6. Use echocardiographic strain, 3D imaging, and ultrasound enhancing agents to optimize the information obtained from echocardiography.
7. Guide optimal clinical and procedural management decisions.

Workshops – Small Group Sessions

Small group workshops offer registered participants the opportunity to get one-on-one time with faculty in a hands-on learning experience. Workshops are included with registration and in the total number of CME credits offered.

Disclaimer

The information provided during this accredited CE activity is for continuing education purposes only and is not meant to substitute for the independent medical judgment of a healthcare provider relative to diagnostic and treatment options of a specific patient's condition.

Accreditation and Designation

The American Society of Echocardiography is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The American Society of Echocardiography designates this in-person activity for a maximum of **21.5 AMA PRA Category 1 Credits™**.

To claim all 21.5 CME credits you must attend two of the workshop sessions. Participants should claim only the credit commensurate with the extent of their participation in the activity.

Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to **21.5 MOC points in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program, the American Board of Pediatrics (ABP) MOC program, and/or The American Board of Anesthesiology® (ABA) Maintenance of Certification in Anesthesiology Program® or MOCA® (pending approval)**.

Participants will earn MOC and/or MOCA points equivalent to the amount of CME credits claimed for the activity. It is ASE's responsibility to submit participant completion information to ACCME for the purpose of granting ABA MOCA, ABP MOC, and/or ABIM MOC points.

ARDMS, CCI, and Sonography Canada recognize ASE's certificates and have agreed to honor the CME credit hours toward their registry requirements for sonographers.



Maintenance of Certification in Anesthesiology Program® and MOCA® are registered certification marks of the American Board of Anesthesiology®. MOCA 2.0® is a trademark of the American Board of Anesthesiology®.

Daily Breakdown of CME/MOC Credits:

Saturday General Session = 6.25

Saturday Workshop = 1.00 per workshop

Sunday General Session = 6.75

Sunday Workshop = 1.25 per workshop

Monday General Session = 6.25

Participants should claim only the credit commensurate with the extent of their participation in the activity. To claim all 21.5 credits/points you must attend two workshop sessions.

Disclosure

ASE is committed to ensuring that its educational mission and all accredited continuing educational programs provide a protected space to learn, teach, and engage in scientific discourse free from influence from organizations that may have an incentive to insert commercial bias into education.

While a monetary or professional affiliation with an ineligible company does not necessarily influence a speaker's presentation, the Standards for Integrity and Independence in Accredited Continuing Education and policies of the ACCME require that all financial relationships with ineligible companies be identified and mitigated prior to engaging in an accredited CE activity. In accordance with these policies, ASE actively identified relevant financial relationships between faculty in control of this accredited CE activity and ineligible companies and implemented mitigation strategies to eliminate any potential influence from persons or organizations that may have an incentive to insert commercial bias in this activity. Disclosure information is referenced and can be found on page 14 of this program.

Commercial Support Disclosure Statement

Educational Grants: This accredited CE activity is supported in part by unrestricted educational grants from Abbott, Alnylam, BridgeBio, Edwards Lifesciences, and Pfizer.

In-Kind Donations: This accredited CE activity is supported in part by in-kind donations. These donations are for the following activities and purposes. Elevate Health, TEE simulators for the TEE workshops; GE Healthcare, CV Ultrasound machine for support of the Scan with Me Session; Philips, ICE simulators for the ICE workshop and CV Ultrasound machine for support of the Scan with Me Session.

How to Claim CME/MOC

The deadline to claim credits/points is **April 7, 2026**.

On April 7, 2025, you will receive an email containing the link to the CME/MOC Evaluation Form for Echo Florida (email subject will be "ASE Echo Florida CME/MOC Evaluation"). Firewalls and security features on your email account may block or direct these emails to your spam/junk folder. Please be sure to thoroughly check your email account. If you are not able to locate the email, please contact CME@ASEcho.org.

The evaluation will include the opportunity to provide your registry board information to allow us to submit your credits or points on your behalf. ASE submits credits/points to ABIM, ABA, ABP, ARDMS and CCI on behalf of the learner. Credits for Echo Florida will be sent to these boards on a weekly basis beginning April 11, 2025. At this time, your CME/MOC Certificate will be uploaded to your ASE Learning Hub account. Instructions to accessing your ASE Learning Hub account will be included in the email.

Registration Location and Hours

The ASE Registration desk is located in the Newport Ballroom Lobby. The Registration desk will be staffed during the following hours:

Friday, April 4, 2025 4:00 PM – 6:00 PM
Saturday, April 5, 2025 6:30 AM – 5:00 PM
Sunday, April 6, 2025 6:30 AM – 5:30 PM
Monday, April 7, 2025 7:00 AM – 3:00 PM

Food Functions

ASE will provide breakfast, lunch, and coffee breaks for all registered attendees Saturday–Monday in Newport Ballroom East. Please refer to the program schedule beginning on page 9 for the times.

Disney's Yacht & Beach Club Resorts offers their guests a variety of dining options. Please see page 8 for more details.

Internet Access

There is complimentary wireless internet available throughout Disney's Yacht & Beach Club Resorts. Attendees of this course also receive complimentary wireless internet in their guest rooms. In the Convention Center, you can access Disney Convention Center Guest Complimentary Access. No Password Needed.

Business Center

The Business Center is located in the Convention Center and is open daily. It offers fax, photo-copier, mail, and computer services.

Safety

Audience seating is on a first-come, first-served basis. According to fire code, a session must be closed if the room fills to capacity. Inappropriate behavior or undesirable conduct, including, but not limited to, verbal or physical abuse, whether threatened or performed, will not be permitted or tolerated. You must wear your name badge at all times when attending the session or events.

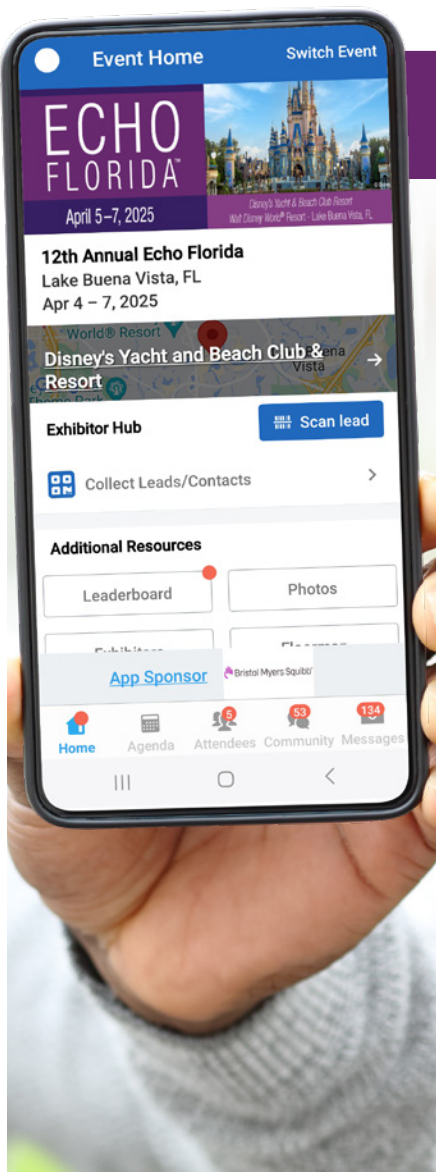


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Download Whova, ASE's New Live Course App

ASE is using the online platform Whova as its live courses app. Whova will give you access to the entire meeting program at your fingertips. You can also use the app to ask questions during the sessions you attend. Search "Whova" in the Google Play and Apple Stores to download.

Whova allows for more interaction among participants at the meeting including:

- Finding others who are attending Echo Florida and reaching out to them at any time.
- Planning social activities such as a morning run, coffee hours, or meet-ups with your fellow attendees.

Important course information like:

- The event agenda and planning your personal schedule.
- Access to documents and slides shared by organizers or speakers.
- Updates like possible last minute session changes from the organizers.

If you have already used the Whova app, just double-check it is installed on your phone, tablet, or computer, and log in using your existing account email and password.

First Time Whova User?

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After downloading Whova, you will be prompted to create an account. We suggest that you use the email address you used when registering for Echo Florida and create a strong password. By using the email address you used when registering for Echo Florida, the platform will automatically associate you with the event and take you to your event page automatically.

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If you are not automatically connected to the event and you are prompted for an event code, please reference the email you were sent on Monday, March 29, from "event-noreply@whova.io", or visit the registration desk in the Newport Ballroom Lobby.

Location Information

Disney's Yacht & Beach Club Resort

Delight in the formal grace of a grand New England-style yacht club at this lakeside hotel. Relax in the inviting elegance of a plush lobby replete with nautical touches, explore the three leisure pools, and rent a variety of watercraft from Bayside Marina. Sharing many amenities with its pastel-toned sister, Disney's Beach Club Resort, Disney's Yacht Club Resort is walking distance to Epcot® and a convenient boat ride to Disney's Hollywood Studios®.

Guests seeking a tranquil swim can choose from three leisure pools in Disney's Beach and Yacht Club Resorts.

- Disney's Beach Club Resort pool—the 43,000-gallon Tidal pool—is located in a garden area on the far end of the resort facing Crescent Lake.
- Disney's Yacht Club Resort pool—the 54,000-gallon Admiral pool—can be found in its own quiet garden area.
- A third pool—the 55,350-gallon Dunes Cove pool—is privately located at Disney's Beach Club Villas. Though it is situated for the convenience of guests staying at the Disney Beach Club Villas, all Resort Guests are welcome to enjoy it.

All pools include steaming whirlpool spas. There is also an array of other dazzling leisure activities like tennis, volleyball, fishing, and movie projections under the stars to name a few.

The Ship Shape Resort Fitness Center and Salon features a full-service spa, salon, and fitness facility where you can keep up with your daily workout routine or surrender to pampering treatments like a massage or facial.

The championship golf courses at Walt Disney World Resort are just a short drive away! These courses have garnered praise and prestigious awards for their superlative design, impeccable service, world-class amenities, and overall playability throughout the years. When you play any of the four courses, you will discover the characteristic beauty and benefits that continue to rake in the accolades for Disney Golf.

Make Time for the Magic!

As a Disney Resort Guest, you will enjoy special benefits that make your Walt Disney World® stay easier and more relaxing than ever. These benefits provide everything from extra time in the Theme Parks to convenient transportation.

Special ticket options are available for meeting attendees. You must purchase online at [MyDisneyGroup.com/EchoFL2025](https://www.mysdisneygroup.com/EchoFL2025) or call **407-939-4686** to receive these special Theme Park tickets. If you plan on visiting a Theme Park, please be aware that to enter a park both a park reservation and valid admission for the same park on the same date are required for all guests ages 3 and up.

Plan your Walt Disney World vacation by setting up a My Disney Experience account. You can manage your Disney Resort reservation, purchase your Theme Park tickets and, access Resort transportation routes all with the touch of your finger. Set up an account at [MyDisneyExperience.com](https://www.mysdisneyexperience.com) and download the mobile app from the Apple Store or Google Play.



Disney's Yacht & Beach Club Resorts Dining Options

Ale & Compass Restaurant: Dine on New England comfort food and classic seafood dishes in a coastal-inspired restaurant that's reminiscent of a cozy lighthouse. Serving breakfast, lunch, and dinner.

Beaches & Cream Soda Shop: Bring your appetite to this retro soda fountain where the burger is king and every day is sundae. Offering lunch and dinner.

Beach Club Marketplace: Start your day with a breakfast sandwich or Mickey waffles. Then fuel up on lunch and dinner with a selection of macaroni and cheese dishes, hot or cold sandwiches, or refreshing salads. Open for breakfast, lunch, and dinner.

Cape May Café: Stop by this New England-inspired venue for buffet meals including a bountiful breakfast or sensational surf and turf dinner. Serving breakfast and dinner.

Crew's Cup Lounge: Race into port for a refreshing beverage at this cozy outpost nestled next to the Yachtsman Steakhouse. Unwind with a pint, a glass of wine or a cool cocktail or from a selection of tasty menu items. Hours vary.

Martha's Vineyard: Canoodle over a Cape Cod or any signature cocktail from the full bar menu at this mellow New England beach house-inspired lounge. Imported wines and draft beers, including Sam Adams Seasonal, enhance the mood. Available for dinner and late night dining.

The Market at Ale & Compass: Find breakfast favorites like Mickey waffles with bacon, tasty sandwiches, and hot paninis at lunchtime and delightful coffee beverages to brighten your day. Offering breakfast, lunch, and dinner.

Yachtsman Steakhouse: Savor premium steaks, fresh seafood, and more at this family-friendly, New England-style steakhouse. Serving dinner.

Disney's Yacht & Beach Club Resorts is conveniently connected by water taxi, bus, or walking paths to numerous Disney restaurants within the Epcot Resort area.

Schedule of Events

Friday, April 4, 2025

4:00 – **Registration**
6:00 PM Newport Ballroom Lobby

Saturday, April 5, 2025

6:30 AM **Registration, Breakfast, and Visit Exhibits**
Newport Ballroom Lobby and Newport East

Chamber Quantifications: Follow the Guidelines Part 1

Moderators: *V. Sorrell, M. Umland*
Newport Ballroom West

7:15 AM **Welcome and Logistics**
M. Umland

7:30 AM **President's Welcome**
T. Abraham

7:45 AM **Approaches to Assessing Left Ventricular Systolic Function**
V. Sorrell

8:05 AM **Strain Imaging: What, How, Why and When**
G. Aurigemma

8:25 AM **Computer Based Cases: How to Optimize Strain Imaging**
G. Aurigemma, M. Umland

9:00 AM **Optimizing Left Atrial Chamber Assessment in 2D and 3D**
L. Sugeng

9:20 AM **Diastolic Physiology and Assessment**
S. Nagueh

9:40 AM **Computer Based Cases: Assessing and Interpreting Diastolic Function**
S. Nagueh, M. Schweitzer

10:15 AM **Question and Answer**
All Session Presenters

10:30 AM **Break and Visit Exhibits**
Newport Ballroom East

10:50 AM **Latest on Right Ventricular and Right Atrial Assessment**
R. Jain

11:10 AM **3D: Acquisition, Cropping, and Display**
L. Sugeng

11:30 AM **Case Studies: 3D TTE How to Acquisition, Crop, and Display**
E. Kruse, L. Sugeng

12:15 PM **Question and Answer**
All Session Presenters

12:30 PM **Lunch and Visit Exhibits**
Newport Ballroom East

1:00 – **Science & Technology Theater Presentation**
2:00 PM *Presented by Northwest Imaging Forums, Inc. Supported with an unrestricted educational grant provided by Bracco Diagnostics Inc. (This session is not included in the CME/MOC for this course.)*
Newport Ballroom West

2:00 PM **Break and Visit Exhibits**
Newport Ballroom East

Chamber Quantifications: Follow the Guidelines Part 2

Moderators: *E. Kruse, L. Sugeng*
Newport Ballroom West

2:30 PM **Artificial Intelligence: How Will It Effect the Echo Lab**
T. Abraham

2:50 PM **Read with the Experts Part I: Interactive Session**
Moderator: M. Umland
Presenters: M. Bond, C. Carlson, M. Schweitzer
Panel: G. Aurigemma, R. Jain, V. Sorrell, L. Sugeng,

3:45 PM **General Session Adjourn**

Workshops – Optional Small Group Sessions

4:00 PM **TEE Simulation: How to Get Those Hard-to-Get Views**
R. Jain, M. Martinez, M. Saric, L. Sugeng
Cape Cod A&B

Cases from CASE
V. Sorrell
Newport Ballroom West

5:00 PM **Adjourn**



Schedule of Events

Sunday, April 6, 2025

6:30 AM **Breakfast and Visit Exhibits**
Newport Ballroom Lobby and Newport East

Valvular Heart Disease: Follow the Guidelines Part 1

Moderators: *V. Sorrell*
Newport Ballroom West

7:30 AM **Aortic Valve Stenosis: Area, Gradients, Flow? Core Concepts in Aortic Stenosis**

R. Jain

7:50 AM **Multi-Modality Imaging in Aortic Stenosis**

N. Quader

8:10 AM **Aortic Regurgitation: What Should We Measure and Report?**

G. Aurigemma

8:30 AM **Computer Based Cases: Aortic Stenosis and Regurgitation**

M. Bond, R. Jain, M. Schweitzer

9:10 AM **The Tricuspid: How to Assess**

L. Sugeng

9:30 AM **Question and Answer**

All Session Presenters

9:45 AM **Break and Visit Exhibits**
Newport Ballroom East

10:00 AM **Mitral Regurgitation: How to Get It Right**

M. Martinez

10:20 AM **DEBATE: Mitral Regurgitation PISA**

Moderator: L. Sugeng

PRO: It's a Must

S. Nagueh

CON: Don't Need It

V. Sorrell

Rebuttal

S. Nagueh, V. Sorrell

10:55 AM **Computer Based Cases: Mitral Valve**

M. Martinez, M. Schweitzer

11:30 AM **Question and Answer**

All Session Presenters

11:45 AM **Lunch and Visit Exhibits**
Newport Ballroom East

Valvular Heart Disease: Follow the Guidelines Part 2

Moderators: *G. Aurigemma, N. Quader*
Newport Ballroom West

1:00 PM **Constrictive Pericarditis: How to Assess**
S. Nagueh

1:20 PM **Prosthetic Valves: What Do the New Guidelines Say?**

N. Quader

1:40 PM **Cardiomyopathies: Multi-Modality Imaging**

M. Martinez

2:00 PM **Valvular Heart Disease: The Important Contributions of CT and MRI**

N. Quader

2:20 PM **Break and Visit Exhibits**
Newport Ballroom East

2:40 PM **Intraoperative TEE: When Called to the OR**

G. Aurigemma

3:00 PM **Case Studies: 3D TEE: How We Do It In Our Lab**

L. Sugeng, E. Kruse

3:30 PM **Debate ICE Support**

Moderator: M. Umland

PRO: Support from Echo Lab Personnel

R. Jain

CON: Against Support from Echo Lab

M. Saric

Rebuttal

R. Jain, M. Saric

4:00 PM **General Session Adjourn**

Workshops – Optional Small Group Sessions

4:15 PM **TEE Simulation: How to Get Those Hard-to-Get Views**
M. Martinez, M. Saric, V. Sorrell, L. Sugeng
Cape Cod A&B

SCAN WITH ME: How to Acquire and Display Key Views (TTE)

M. Bond, C. Carlson, E. Kruse, M. Schweitzer
Newport Ballroom West

ICE Simulators: How to Get the Echo Views

R. Jain

Cape Cod C

5:30PM **Adjourn**

Monday, April 7, 2025

7:00 AM **Breakfast and Visit Exhibits**
Newport Ballroom Lobby and Newport East

Echocardiographic Potpourri
Moderator: *M. Saric*
Newport Ballroom West

7:30 AM **Assist Devices: How to Assess and Interpret Pre- and Post-Procedure**
M. Saric

7:55 AM **Ultrasound Enhancing Agents: How Can We Obtain the Best Images?**
E. Kruse

8:20 AM **CAD and Infarction Complications: Case Based**
V. Sorrell

8:50 AM **Diseases of the Aorta**
M. Martinez

9:20 AM **ACHD: What to Know**
M. Saric

9:45 AM **Question and Answer**
All Session Presenters

10:00 AM **Break and Visit Exhibits**
Newport Ballroom East

10:25 AM **Hypertrophic Cardiomyopathy and Treatment**
M. Martinez

10:50 AM **Amyloid Heart Disease and Hypertrophic Cardiomyopathy Mimickers: A Multimodality Approach**
V. Sorrell

11:10 AM **Chest Pain Guidelines: Role of Echo, Stress, and CT**
M. Saric

11:25 AM **Computer Based Cases: Cardiomyopathies**
C. Carlson, M. Martinez

12:15 PM **Question and Answer**
All Session Presenters

12:30 PM **Lunch and Visit Exhibits**
Newport Ballroom East

Cases, Cases, and Cases
Moderators: *V. Sorrell, M. Umland*
Newport Ballroom West

1:30 PM **Most Interesting Cases: Attendees Bring Your Cases to Share**
Panel to Review Case Submissions

1:55 PM **Read with the Experts Part II: Best Case Examples... Remember These!**
Moderator: M. Umland
Presenters: M. Bond, C. Carlson, E. Kruse
Panel: G. Aurigemma, R. Jain, M. Martinez, V. Sorrell

2:30 PM **Last Call for Questions**
All Faculty

3:00 PM **Adjourn**



Exhibit Information

Exhibits are located in the Newport Ballroom East during the dates and hours listed below:

Saturday, April 5..... 6:30 AM – 2:30 PM

Sunday, April 6 6:30 AM – 2:40 PM

Monday, April 7 7:00 AM – 1:30 PM

Exhibitor Descriptions



LIFE FROM INSIDE

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 United States
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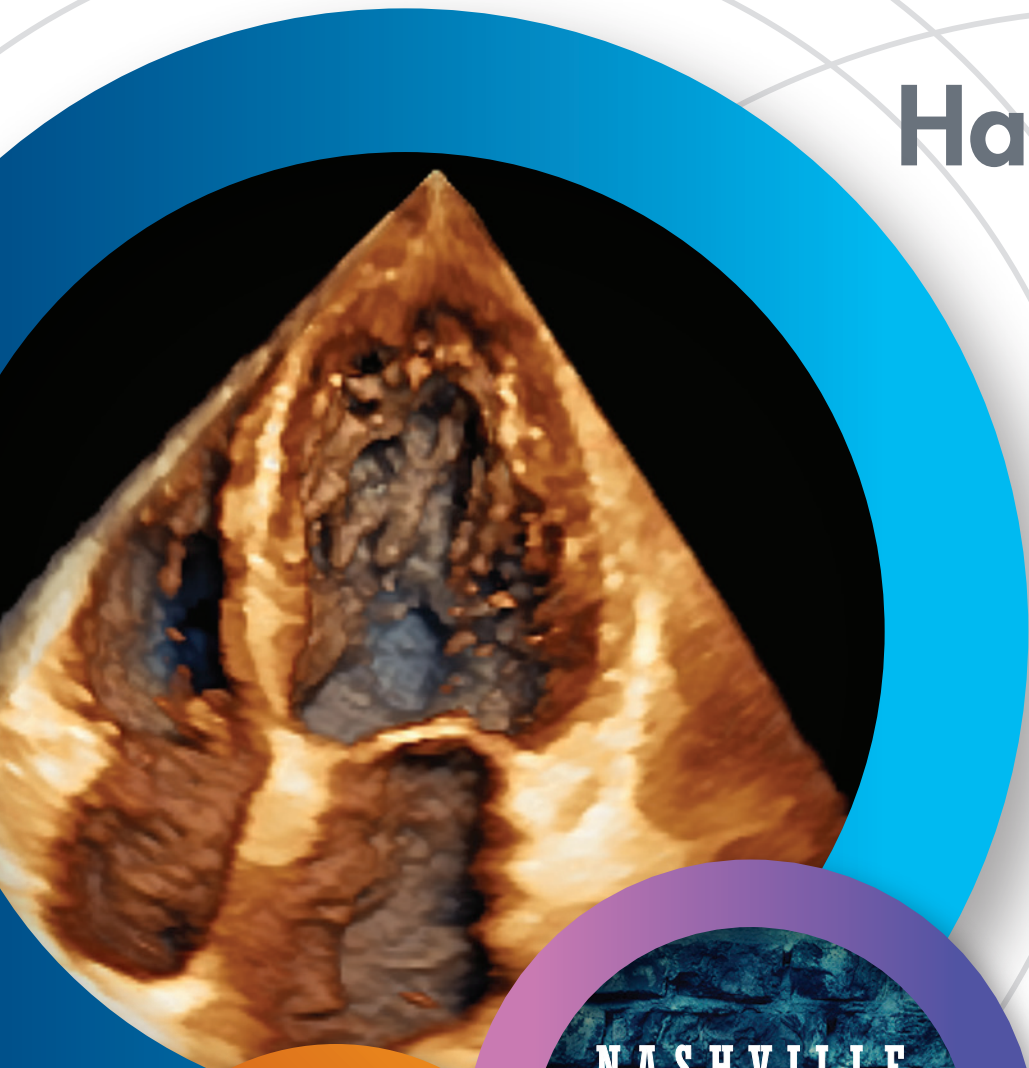
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Fax: 1-919-882-9900

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