CONGENITAL CARDIOLOGY TODAY
Timely News & Information for Congenital/Structural Cardiologists & Cardiothoracic Surgeons Worldwide

North American Edition
Vol. 22 - Issue 11

November 2024

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Matters Of The Heart And Mind: Teamwork

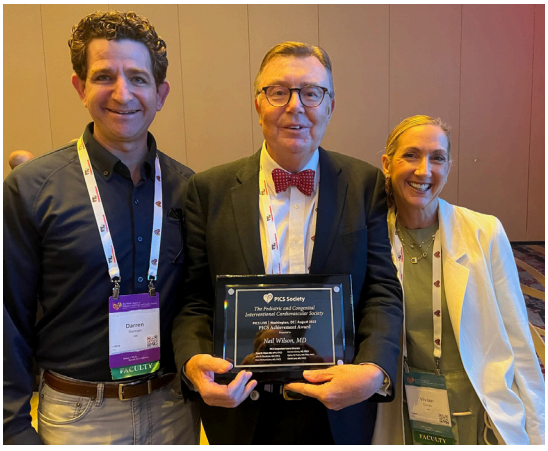
Neil Wilson, MBBS, DCH, FRCPCH, FSCAI

Editor's Introduction

I am delighted to introduce this month's lead article by Dr. Neil Wilson. Neil is well known in the pediatric cardiology community. He retired recently after a long and distinguished career as a general cardiologist and a pioneering interventionalist in the United Kingdom and the United States. He is loved and admired by his patients, trainees and peers for his profound humanity and dedication, as well as for his characteristic wit and good humor.

We are fortunate that Neil continues to share his experience and wisdom through periodic *Matters of the Heart and Mind* columns in *Congenital Cardiology Today*. Like the bard in *Chaucer's Canterbury Tales*, he tells stories about what we encounter on our journeys as pediatric cardiologists and caregivers, highlighting complex and difficult situations, deep feelings, and profound truths.

– John Moore, MD, Medical Editor



Dr. Neil Wilson, at PICS Live 2023 in Washington, DC, won the PICS Society's Achievement Award, posing with Drs. Darren Berman and Vivian Dimas

Matters Of The Heart And Mind: Teamwork

You are unlikely to have been to Liverpool, just because, why would you travel there? What does it have to do with paediatric cardiology? This is not a travelogue feature but a testament to great teamwork on several fronts. You have certainly heard of The Beatles, they were a great team. You have almost certainly heard of the Liverpool Football Club. They are a great soccer team. My perception is that for some reason they are very popular in the USA and continents beyond. Ask Dan McLennan. You will probably not have paid much attention to paediatric cardiology and congenital surgery in Liverpool, unless you happen to have worked there or had friends and colleagues who have. Well, you should have. Great work was done there.

My paediatric cardiology career started in Liverpool at The Royal Liverpool Children's Hospital on Myrtle Street, right on the edge of Toxteth. Then it was a troubled suburb--high unemployment, poverty, crime. I might one day tell the story of Dr.

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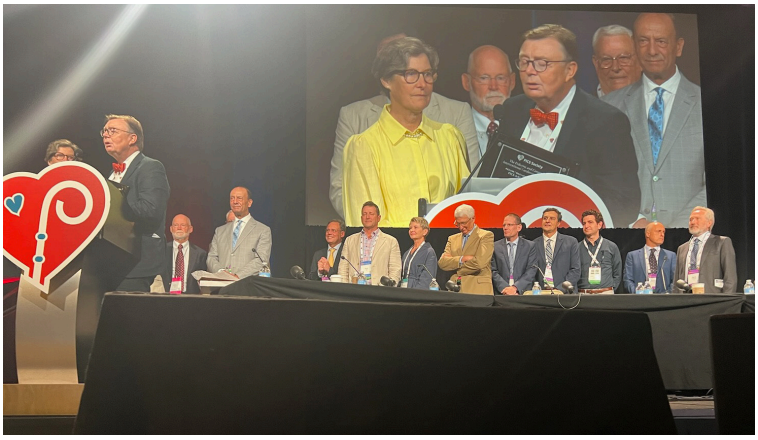


Dr. Neil Wilson giving his acceptance speech at PICS Live 2023

Bob Arnold, a star consultant paediatric cardiologist at the hospital, who had his car stolen twice in one day from the consultant's car park. Second time, it was found burnt out on a tract of derelict land. The hospital was very small. I guess probably no more than 70 beds, but it did house almost the entire complement of paediatric cardiology facilities for the North West of England. We served a referral population of six – seven million. One cardiac surgeon, three consultant (attending) cardiologists. One echo machine, one cath lab. Superb nursing staff. One senior registrar (senior fellow), one registrar (mid fellowship) and one senior house officer (me, rookie). There was not much senior about my job, but it was fantastically enjoyable despite the alternate nights and weekend resident call commitment. It was exhausting but I loved every minute of the experience the business brought.

Cardiac Intensivists did not exist in Liverpool in those days so it was Coxing and Boxing (look it up) between Roger Massey, the registrar, and me. Roger was much more experienced in paediatrics and cardiology, he looked after me well. He always seemed quite pleased when his call came round. This, he later confessed, was that his young twin babies had an aversion to nocturnal sleep and he reckoned he got more sleep in the hospital than at home! We both enjoyed the unstinting help of an anaesthesiology registrar, Dave Hallworth. Dave was calm, incredibly competent and had a knack for appearing on your shoulder in the ward or CICU when you had been called because a patient had 'gone off.' In the heat of an emergency 'Whispering Dave' was invaluable help. Later in our careers we worked together in Glasgow where his modus operandi above saved many lives and kept my heart rate at acceptable levels during many interventional cases in the cath lab.

I guess it is almost exactly 44 years since I worked at Myrtle Street. I had been in post about a month. Everything I knew about Congenital Heart Disease could have been listed on the back of a postage stamp and leave plenty of room for the address. Despite my ignorance, I was quite good at doing as I was told, and of course, I needed plenty of that. At about six o'clock one Friday evening, David Dickinson, the Senior Registrar, pages me (yes, in those days) and tells me there's an admission coming from a hospital near Manchester (another good soccer team), "Sounds like total veins." At 8:15pm a newborn baby arrives. He is a 37-weeker weighing 1.8kg and in obvious respiratory distress with saturations in the mid 80s. His chest X Ray was one of those where it was almost impossible to discern the cardiac silhouette from the lungs.

I was working on IV access… successfully, when a minute or two later in walks David pushing the echo machine. In those days the echo machines were about the size of four supermarket trolleys stacked together. The wheels were about the size of a toddler's stroller. With great expertise the machine was positioned and within five minutes David says "Yep, it is total veins, infracardiac, needs surgery. Neil, get the lines in and bloods off, I'll page you with some instructions." Total veins. Of course he meant total anomalous pulmonary venous drainage TAPVD. TAPVC, if you like, but I prefer drainage to connection, whatever Professor Anderson says.

Bloods off, umbilical lines in. Good pressures, saturations steady. Whispering Dave H appears, right on cue as always, makes a comment about me having got the umbilical artery and vein lines in and makes some allusion to 'monkey and a typewriter.' I take that as a compliment. Arterial gases are good. At about 9:15pm my pager goes. It's Senior Registrar David Dickinson, as promised. There is a terrific lively party noise in the background. "Neil, that baby's going to theatre (OR) at five o'clock, just make sure the pump bloods are ready." David can read my body language telephonically as I am wondering why five o'clock in the morning. "Yes, it's because Dr. Jackson Rees 'Jack' (Anaesthesiologist pioneer supremo RIP) has tickets for the members enclosure at Haydock Park Racecourse tomorrow and doesn't want to be late. The team are all happy with it." I did not really appreciate that gesture at the time. It seemed a perfectly good reason. What is more, I might get a decent night's sleep before the baby is back out of theatre. I did not – a couple of IV resitings on CICU and a baby whose cardiac output needed a bit of encouragement. Usual sort of stuff.

Nevertheless, I did get a good breakfast and as I walked into CICU at eight o'clock the baby was being wheeled in back from the OR. On a ventilator, pink, I can see urine filling his urinary catheter. Peripheral temperature is good. There is a 'warm' atmosphere in the room. The team are asking Jack for tips for the day's racing. All had gone really well. They are lifting the baby onto the incubator. Jackson Rees says, "Thanks for the arterial line Neil, saved me a bit of time." David Hamilton (RIP), the nicest, calmest modest surgeon you will ever have met, stands by taking off his mask and surgical cap. He says nothing, then, "Thanks, Neil, just let me know if you have any problems, Francesco (the surgical fellow) is

CAREER OPPORTUNITY

UNIVERSITY OF ILLINOIS CHICAGO

Assistant / Associate / Professor of Clinical Pediatric Cardiology

Peoria, Illinois

The Department of Pediatrics of the University of Illinois College of Medicine Peoria (UICOMP) seeks Pediatric Interventional Cardiology candidates for a pediatric cardiology faculty position. This cardiologist will work primarily at OSF Healthcare Children's Hospital of Illinois. The candidate must hold an MD/DO degree (or equivalent), be board-certified or board-eligible in pediatric cardiology, and hold or be eligible for an Illinois physician license. Candidates must have completed residency & fellowship training. Additional training and/or extensive experience in pediatric and congenital interventional catheterization is required.

The candidate will join a well-established team of 10 pediatric cardiologists, 2 pediatric cardiovascular surgeons, and 5 advanced practice providers. Professional efforts will be bolstered by state-of-the-art facilities. Excellent collaboration exists among pediatric subspecialists, radiologists, as well as adult cardiology colleagues. UICOMP supports a thriving education program with medical students, residents, and fellows.

Clinical activities will include cardiac catheterization lab, outpatient clinics, and inpatient rotation. Occasional travel to outreach clinics located in surrounding community cities is required. Cardiac catheterization and Inpatient care are provided at OSF Healthcare Children's Hospital of Illinois (CHOI). Clinical activities of this faculty member will be at the full-time assistant/associate/professor rank based on the experience of the candidate.

Malpractice insurance is provided by the University of Illinois system and an excellent benefits package available including vacation time, sick time, CME, health & life insurance and retirement plan.

Position Summary: The Department of Pediatrics of the University of Illinois College of Medicine at Peoria (UICOMP) seeks an Interventional Pediatric Cardiologist to join the pediatric cardiology faculty.

Duties & Responsibilities

- Patient care duties including inpatient, outpatient, and cardiac catheterization lab
- Satellite clinics in the region
- On-call duties for pediatric & congenital cardiology and cardiac catheterization lab
- Teaching of medical students, residents, and fellows
- Academic efforts including original research and QI
- Perform other related duties and participate in special projects as assigned.

Minimum Qualifications

- MD/DO or foreign equivalent
- Eligible for licensure in Illinois
- BC/BE in Pediatric Cardiology
- 3 years pediatric residency/3years pediatric cardiology fellowship or equivalent
- Significant experience or formal training in Interventional Cardiology

About University of Illinois College of Medicine, Peoria (UICOMP) Department of Pediatrics and OSF Healthcare Children's Hospital of Illinois: UICOMP is one of the three regional campuses of the University of Illinois College of Medicine, one of the largest public medical schools in the country. UICOMP's educational programs include 244 medical students and 300 residents/fellows in 21 different post graduate programs. The Department of Pediatrics is one of the largest departments at UICOMP. In collaboration with the OSF HealthCare Children's Hospital of Illinois, the Department has 19 divisions and over 145 faculty members providing general pediatrics and subspecialty services to the pediatric population in Central Illinois. The current research infrastructure within the Department includes an office of research, a dedicated biostatistician and an internal research funding mechanism to support our faculty.

About Children's Hospital of Illinois: The primary teaching hospital of UICOMP is Children's Hospital of Illinois, a tertiary care facility serving a 37-county region with a population base of over two million. Children's Hospital of Illinois provides comprehensive services to children, including Quaternary Care NICU and a state-designated Pediatric Critical Care Center. Children's Hospital of Illinois is a major medical facility with 136 beds and a 32-bed critical care unit and the only Level 1 trauma center in Illinois outside of Chicago. There are existing resources through UICOMP and Children's Hospital of Illinois for seeding research funding, quality and outcomes focused academic work and innovation in health education.

About Peoria, IL: One of the oldest communities in Illinois with a population of 111,021 Peoria is equal distance from Chicago and St. Louis. Here we have an enviable standard of living, exciting venues within a 15-20 minute drive from our homes, safe streets, quality and quantity shopping, our own symphony, our own ballet, Broadway Theater League, museums, art guilds, first-class medical facilities, the nation's oldest community theater and oldest Santa Claus parade.

Our vibrant riverfront showcases a multitude of festivals and celebrations that light up the summer nights much like our extraordinary Fourth of July Sky Concert fireworks show that draws well over 100,000 annually. Residents are flocking to live in the refurbished warehouses and lofts on Water Street that produce the perfect lifestyle for a 24/7 city.

We have many global businesses that allow Peoria to play all over the world through their products and services. Peoria has begun to diversify its economy with infotech industries as well. Thus our business community attracts some of the brightest graduates throughout the nation.

To apply, please visit this job listing on the UIC Job Board at, https://uic.csod.com/ux/ats/careersite/1/home/requisition/12013?c=uic
Scroll towards the bottom of the page and click, "Apply Now"
You may be redirected to log into, or to create a new account.
For fullest consideration please apply by 10/17/2024.

going to hang around until lunchtime." He did not say it, but it was an understood fact that Mr. Hamilton (yes, Mr, another British anachronism) played golf on Saturday morning and everyone in the team tried their very best not to call. Not least of all if you did need him you had to call Hoylake Golf Club who then had to send out a pro in a cart to get him back to the clubhouse to take the call. These days, of course, the surgeon would have a mobile phone. But then, a single-handed surgeon had to be cut some slack for goodness sake. I never did have to call him but there were others higher up the food chain who might have.

The baby's progress was amazing. The immediate post op chest x ray looked virtually normal. Lung fields perhaps slightly hazy. Heart size normal. On Saturday evening, Dr Jackson Rees appears popping his head through the CICU door, the smell of cigarette smoke accompanying him and his cigarette held low out of Sister's (Head nurse) view. "Everything OK? Where's Dave?" Upon which Whispering Dave appears five seconds behind him. Dave extubated him on the Sunday morning. I can't remember exactly but I think he went back to the referring hospital on Tuesday. Obstructed TAPVD, 1.8kg baby in and out in four days. And remember, that was 44 years ago. Great teamwork. Most of us are human so I doubt if I have always been the great team worker but believe me, I have tried. I did buy surgeons coffee now and then. Do you?

P.S. I forgot to mention… The party noise in the background when David Dickinson paged me was a leaving party in the hospital for the Cardiac OR Head Nurse. Do not ask any more questions…

NEIL WILSON, MBBS, DCH, FRCPCH, FSCAI

Formerly Professor of Pediatrics
University of Colorado School of Medicine
Formerly Director Cardiac Catheter Laboratory Children's Hospital Colorado
Colorado, USA
Neilwilson1955@icloud.com

CAREER OPPORTUNITIES

Children's Hospital Colorado

Affiliated with University of Colorado Anschutz Medical Campus

Follow Your Heart at Children's Hospital Colorado

The Children's Hospital Colorado Heart Institute's goal is simple: to improve the quality of life for all patients with congenital and childhood heart conditions. We do this by bringing together multidisciplinary experts, innovative research and advanced procedures. Join us in this work to help us make a meaningful difference for children and families through expert and compassionate care.

700+
Heart surgeries performed annually

90+
Cardiologists and advanced practice providers

20+
Outreach locations, spanning four states and 1000+ miles

OPEN POSITIONS

Medical Director, Cardiovascular Imaging

The Medical Director of Cardiovascular Imaging will provide overarching leadership for all noninvasive cardiovascular imaging activities. This position will be empowered to promote advancements in cardiac imaging techniques, provide mentorship and career development for faculty, and promote the education and training of fellows.

About our program:

- Imaging team that includes 14 faculty and 28 sonographers and technicians
- Advanced fellowship in cardiac imaging and cardiac echo research with core laboratory capability
- High-volume, multimodality imaging program (25,000+ echos, 1,700+ fetal echos and 600+ cardiac MRIs performed annually)
- Robust telehealth capabilities across referral region
- Faculty with expertise and research interests in 3D echo, strain imaging, cross-sectional imaging (including fetal cardiac MRI) and intracardiac echo

Medical Director, Single Ventricle Program

The inaugural Medical Director of the Single Ventricle Program will provide leadership of established single ventricle outpatient clinics and will be encouraged to develop a vision for how to optimize and advance the inpatient transition of single ventricle patients across all surgical stages.

About our program:

- Team includes six physicians, two advanced practice providers and a dedicated nurse coordinator
- Tied for the most Norwood procedures in the country in 2023
- Home to Complex Congenital Heart Disease Clinic for interstage patients with a home-monitoring program and Single Ventricle Continuity Clinic for patients stage 2 and beyond
- Fontan Multidisciplinary Clinic that includes expertise in pediatric and adult congenital heart disease cardiology, hepatology, pulmonology, neuropsychology and nutrition
- 96.6% Norwood survival

Medical Director, Fetal Cardiology

The Medical Director of Fetal Cardiology will provide critical leadership of strategic planning efforts and advancing medical education, research and quality improvement initiatives in both the Heart Institute and the Colorado Fetal Care Center.

About our program:

- Fetal cardiology team includes four cardiologists, two sonographers and a dedicated nurse coordinator
- 240+ deliveries with 105 attributed to cardiac abnormalities
- High-volume fetal echo telehealth program
- Membership in the Fetal Heart Society
- Regional referral center for fetoscopic laser photocoagulation treatment in twin-twin transfusion syndrome, fetal arrhythmias, heart block, cardiomyopathies, complex congenital heart disease and more

Medical Director, Heart Institute Quality And Safety

The Medical Director of Quality and Patient Safety will provide overall leadership of quality improvement and patient safety initiatives in the Heart Institute. This strategic leadership role will collaborate with the Chief of Cardiology, Cardiovascular Surgery and hospital and quality/safety nursing leadership to create sustainable plans for inpatient and outpatient teams in clinical effectiveness and patient and team member safety.

About our program:

- Robust partnerships with the cardiothoracic surgical team
- Monthly, multidisciplinary morbidity and mortality conferences
- ELSO Platinum Center of Excellence and only ECMO program in the region
- Core site for the Pediatric Heart Network, together with Washington University

To apply, please contact:

SHELLEY MIYAMOTO, MD
Co-Director, Heart Institute, Children's Hospital Colorado
Chair, Pediatric Cardiology, University of Colorado School of Medicine
Shelley.Miyamoto@childrenscolorado.org

A Promising New Option to Prevent Thromboembolism in Pediatric Heart Disease

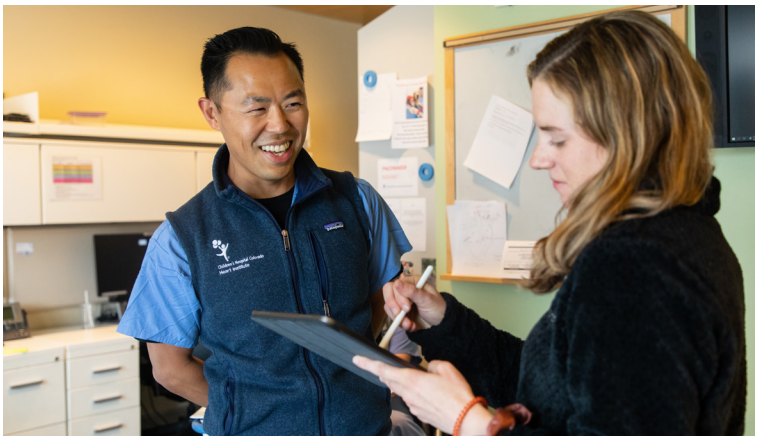
John S. Kim, MD

Key Takeaways

- This study reported results of a multinational Phase 2 trial on the safety of apixaban, a direct oral anticoagulant, for children with congenital or acquired heart disease.
- Compared to standard treatments that require frequent laboratory testing and/or daily injections, apixaban was found safe and effective for preventing thromboembolism in these patients.
- Neither of the treatment groups experienced any thromboembolic events, and there were few incidents of major or clinically relevant non-major bleeding.
- While more research is needed on long-term outcomes, findings support using apixaban in this population as a safe and well-tolerated alternative to the standard treatment.

"Direct oral anticoagulants do not require injections or frequent lab tests, so apixaban is a potential game changer for these patients."

– John S. Kim, MD



John S. Kim, MD

Research Study Background

Children with certain types of Congenital or Acquired Heart Disease, including Single Ventricle Disease and Kawasaki Disease, are at high risk for thromboembolism. Prophylaxis with a vitamin K antagonist (VKA), such as warfarin, or low-molecular-weight heparin (LMWH) is the current standard of care for these patients. Neither therapy is ideal for children. VKAs have many drug interactions and require dietary restrictions and frequent lab testing. LMWHs must be injected twice daily and also require frequent lab testing. Apixaban, part of a new class of anticoagulant drugs called direct oral anticoagulants (DOACs) found to be safe and effective in adults, has potential as an alternative to VKA and LMWH for preventing thromboembolism in children. This phase 2, open-label, multinational trial was the first to assess the safety and efficacy of apixaban in children with heart disease, as well as evaluate the pharmacokinetics and pharmacodynamics of age-appropriate pediatric formulations of the drug. Children's Hospital Colorado was one of the participating sites, led by a pediatric cardiologist who developed the hospital's multidisciplinary Cardiac Antithrombosis Management Program and Cardiac Thrombosis Clinic.

The trial included patients as young as 28 days old and up to 18 years old. After recruitment and enrollment, participants were randomized 2:1; the majority took daily weight-based doses of apixaban, and the rest proceeded with the standard of care. Participants had a broad range of diagnoses including single ventricle disease (74%), Kawasaki disease (14%) and other heart disease (12%).

The mean duration of drug exposure was 330.6 days for all participants, and adherence to both treatments was high. There were few incidences of major or clinically-relevant, nonmajor bleeding, occurring in one patient taking apixaban and three patients receiving the standard of care. The rate of all bleeding events, including minor bleeding events like nosebleeds, was similar between the two treatment groups at 37%. The incidence of adverse events was no different between both groups (20.6% with apixaban vs. 21.0% with the standard of care). There were no thromboembolic events

CAREER OPPORTUNITY

The Congenital Heart Collaborative

University Hospitals
Rainbow Babies & Children's
Nationwide Children's Hospital

Advanced Imager – Pediatric Cardiology

The **Congenital Heart Collaborative (TCHC)**, an affiliation between **University Hospitals Rainbow Babies & Children's Hospital** (Cleveland, OH) and **Nationwide Children's Hospital** (NCH, Columbus, OH) heart programs, seeks candidates in **Pediatric Cardiology** for an **Advanced Imaging** faculty position in our expanding group at **UH Rainbow Babies & Children's Hospital**.

The successful candidate will join a group of physicians that model teamwork, collaboration and dedication to their patients and partners and be a part of an innovative clinical and educational program, representing the section in the community, nationally, and internationally. The Section consists of ten board-certified pediatric cardiologists including interventionalists, an electrophysiologist, advanced imaging cardiologists, fetal cardiologists, 2 general cardiologists, and 2 cardiovascular surgeons. Our growing fetal program performs over 1,000 fetal echocardiograms a year and has launched a highly successful fetal intervention team in conjunction with our maternal fetal medicine colleagues. The advanced imaging capabilities include echocardiography (trans-thoracic, trans-esophageal, fetal and 3D), cardiac MRI and CTA, cardiac stress MRI, fetal cardiac MRI, and 3D modeling/ printing. This position is to replace a vacancy created by a relocating faculty member. The candidate will have opportunities to participate in quality improvement initiatives, clinical research, and education of medical students, residents, and fellows, and clinical time devoted to advanced imaging, and outpatient and inpatient care inclusive of fetal echocardiography.

Qualified applicants must have an MD, DO or MD/PhD degree, be BE/BC in Pediatric Cardiology and experience training in echocardiography (transthoracic, trans-esophageal and fetal), and cardiac MRI/ CT and Echocardiography reads and interpretations. The rank and appointment will be commensurate with the candidate's credentials and experience. The successful candidate will be well-supported at a world-class children's hospital that has over 60 years of experience in the care of pediatric and ACHD patients; an outstanding educational and research enterprise at Case Western Reserve University School of Medicine, and an internationally recognized program partner with the NCH Heart Center. TCHC is a dedicated service line with a common executive administration and functions as one program on two campuses with the commitment to expand access to high-quality comprehensive cardiac care along with a scholarly and educational mission. TCHC provides excellent comprehensive cardiothoracic surgical, interventional, electro-physiologic, and non-invasive services.

Please send letter and curriculum vitae to:
Harinder Singh, MD
Section Chief, Pediatric Cardiology
Rainbow Babies & Children's Hospital
harinder.singh@uhhospitals.org

In employment, as in education, Case Western Reserve University is committed to equal opportunity and diversity. Women, veterans, members of underrepresented minority groups and individuals with disabilities are encouraged to apply.

Among the nation's leading academic medical centers, University Hospitals Case Medical Center is the primary affiliate of Case Western Reserve University School of Medicine, a nationally recognized leader in medical research and education.

University Hospitals Case Medical Center
Cleveland | Ohio

Rainbow Babies & Children's Hospital

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When your child needs a hospital, everything matters.℠

detected by imaging or clinical diagnosis in either treatment group, consistent with adult trial results. The levels of apixaban in children at steady state were also comparable to the adults. Importantly, quality of life surveys conducted during the study suggested child-reported lower anxiety when taking apixaban compared to VKAs or LMWHs.

Clinical Implications

Study findings support the use of apixaban for chronic thromboprophylaxis in children with heart disease as a safe and well-tolerated alternative to VKAs and LMWHs. Comparable conclusions were reported in a recent meta-analysis of patients with Fontan circulation, as well as other pediatric studies of DOACs in children with venous thromboembolism.

A limitation of the trial is that newborns were not included since DOACs were not frequently used in this group when it was designed. Future research should prioritize investigating diverse long-term outcomes linked with DOACs.

To read the full study, visit:
https://www.childrenscolorado.org/advances-answers/recent-articles/apixaban-for-pediatric-heart-disease/

JOHN S. KIM, MD

Cardiologist and Intensivist,
Cardiac ICU and Heart Institute
Children's Hospital Colorado
Associate Professor,
Pediatrics-Cardiology
University of Colorado School of Medicine
Aurora, Colorado, USA

CAREER OPPORTUNITY

PERMANENTE MEDICINE®

Southern California
Permanente Medical Group

Pediatric Cardiologist

Fontana (San Bernardino County) & Riverside (Inland Empire), California

PSLF Eligible

Southern California Permanente Medical Group (SCPMG) is actively recruiting a Pediatric Cardiologist to join our **Kaiser Permanente** group in **Fontana (San Bernardino County)** and **Riverside (Inland Empire)**.

This is an excellent opportunity to join an established Pediatric Cardiology clinical practice comprised of ambulatory clinic, fetal/transthoracic echo performance/interpretation, inpatient consultations/rounding(limited) and virtual medicine. Pediatric Cardiology at Southern California Permanente Medical Group currently consists of 11 full-time and 1 per diem part-time Pediatric Cardiologists across the Southern California region.

Position highlights:

- Outpatient consultation and follow-up care
- Inpatient consultation and rounding - limited
- Perform Fetal and Transthoracic echo
- Provide virtual medical care
- Physician-physician advice via telephone and electronic advice communication tools
- Shared call schedule with other Kaiser Permanente pediatric cardiology physicians
- Opportunity for mentorship and clinical teaching of Kaiser Permanente School of Medicine students
- Bimonthly Regional Cardiac conference and discussion

SCPMG is proud to offer its physicians:

- An organization that serves the 4.9 million Kaiser Permanente members throughout Southern California for more than 70 years
- Excellent salary, comprehensive benefits, and partnership eligibility after 3 years
- Comprehensive administrative support
- A fully integrated electronic medical record system (EPIC) and AI technology support for clinical documentation

Kaiser Permanente Fontana Medical Center is a member of the Children's Hospital Association and is 1 of 3 tertiary medical centers in the Kaiser Permanente Pediatric Care (KPPC) network. Kaiser Permanente Riverside Medical Center is a moderate sized, 224-bed medical center with a very robust pediatric and maternal health center within the KPPC network. At Fontana and Riverside, we serve as the primary centers of care for the diverse pediatric population in San Bernardino County. Our inpatient services include pediatric hospitalists, NICU, PICU (Fontana only) and emergency department. We anticipate 3 days/week of on location work at Riverside and 2 days/week of on location work in Fontana. Call duties are to be shared among 3 total cardiologists covering Riverside and Fontana Medical Centers. We place great emphasis on fostering a strong culture of collaboration and support among pediatric medical and surgical specialties not only between Fontana and Riverside areas but also across the Kaiser Permanente Southern California region. Our main Cardiac facility within Kaiser Permanente and location of our interventional catheterization lab is at our Los Angeles Medical Center with whom we have ready access and collaboration. Finally, we play an active role in training the next generation of physicians both in teaching resident physicians and as a designated clerkship site for the Kaiser Permanente Bernard J. Tyson School of Medicine.

Interested applicants can find more details and apply at:
https://southerncalifornia.permanente.org/jobs/title/peds-cardiology-san-bernardino-county-riverside-in-fontana-ca/63998

For questions or additional information, please contact:
Glenn Gallo, 877-608-0044 or Glenn.Gallo@kp.org. We are an AAP/EEO employer.

Salary range for full-time/part-time openings is $258,875.00 - $386,219.00. Potential premium earnings are up to $28,032.00. Salaries are inclusive of incentives depending on skills and competencies and geographic location. Potential premium earnings are based on location. Annual Salary is determined by longevity with the Group and full time equivalent (FTE) work schedule/effort.

Congenital Cardiology Today Recognized by PICS Society with Distinguished Partnership Award

Kate Baldwin, Publisher & Editor-in-Chief

All of us at Congenital Cardiology Today (CCT) are extremely honored to have been recognized by The PICS Society at their annual conference in San Diego in early September for our 21-years of contributions to the field of Congenital Cardiology. We could not have grown and flourished as we have without the continuous support of practicing doctors and industry. Our goal has always been to meet the communication needs of this sub-specialty.

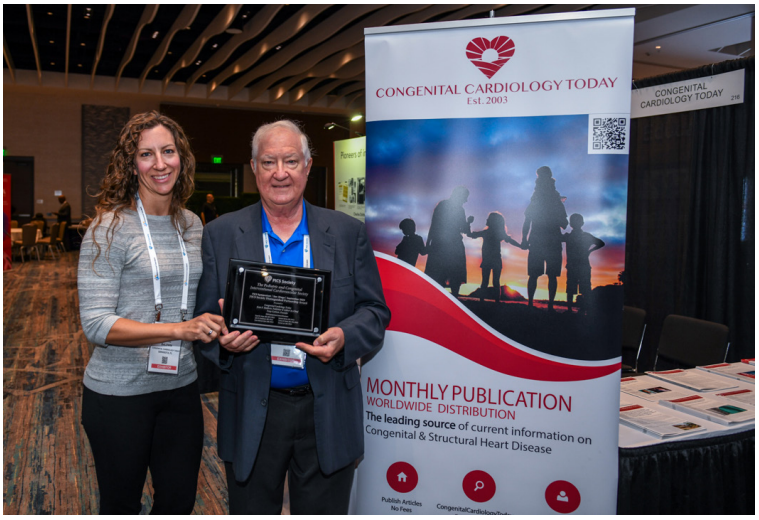
CCT has come a long way since 2003. It was originally conceived on the side-lines of the youth soccer fields in Potomac, Maryland USA in the late 1980s. With little kids running around the soccer fields, two dads had several casual conversations about "what they did." One was a Pediatric Cardiologist, and the other was an experienced sales and marketing executive specializing in high-tech custom publishing. It took a while to get into what Pediatric Cardiology was all about, how it was a small specialty serving a relatively unique patient population but needs lots of technologies to do so. Details about technical journals and newsletters also arose from those talks: targeting technical audiences, monthly publications with short times to print, timely articles written by experts, news items of unique interest to our target audience, etc. As soccer season ended, the two dads, Dr. John Moore and Tony Carlson, concluded that Pediatric Cardiology would benefit from a monthly publication.

Tony enlisted Richard Koulbanis, a colleague in the publishing business, and launched Pediatric Cardiology Today at PICS 2003. We provided a monthly newsletter that was readily available to focus solely on Pediatric Cardiologists treating children with Congenital Heart Disease (CHD). By 2005, we recognized the need to include adult interventionalists as the sub-specialty grew and patients grew up! Our publication also grew and became Congenital Cardiology Today. We expanded our editorial to include Pediatric and Adult Cardiologists as well as Interventional Cardiologists focused on Congenital and Structural Heart Disease. In 2008, we started producing an annual Program Directory of Congenital and Pediatric Cardiac Care Providers throughout North America.

As we attended various cardiology-focused conferences, many cardiologists from Europe and other parts of the world asked if CCT was published outside of North America. In response to those requests, CCT started publishing a monthly International Edition in 2005 that now serves Europe, Latin/South America, Asia and the Middle East. CCT now has over 3,500 subscribed readers from around the world.

Our mission continues to be forward thinking as we continue to partner with you. Know we are here because you provide us with articles, insights, verbalization of your needs, industry support, your readership, and of course, your friendship.

We appreciate and respect this important partnership. Thank you one and all!



Tony Carlson, Founder & Senior Editor, and Kate Baldwin, Editor-in-Chief, at PICS in 2024 after accepting the PICS Society Distinguished Partnership award

Tony Carlson, Founder & Senior Editor, at PICS in 2003 launching the publication Pediatric Cardiology Today

CAREER OPPORTUNITY

Creating a healthier future requires the brightest minds today.

Now hiring an invasive and/or non-invasive electrophysiologist

Nemours Children's Cardiac Center is seeking an electrophysiologist to join our comprehensive pediatric and adult congenital cardiac center renowned for its excellence in patient and family centered care and quality outcomes. We welcome candidates with varying levels of experience.

About Us

- **Integrated Care Practice:** Our team includes cardiothoracic surgeons, cardiac anesthesiologists, intensivists and cardiologists. We have Magnet-designated cardiac nursing staff and dedicated ancillary support.
- **Expanding Facilities:** Our center features state-of-the-art cardiac operating rooms, catheterization labs and a cardiac peri-operative recovery suite.
- **National Collaboration:** Participate in national registries and research networks.

Electrophysiology Services

- Comprehensive services including catheter ablation, electrophysiology studies and device implantation.
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- Care for arrhythmias from fetal life through adulthood.

Clinical Responsibilities

- Perform and supervise invasive electrophysiology procedures.
- Maintain an outpatient cardiology practice.
- Provide inpatient arrhythmia consultation.
- Read ECGs and ambulatory cardiac monitoring studies.

We Offer

- Competitive salary, annual incentives for clinical activity, academic accomplishments and quality improvement.
- Comprehensive health, life, dental and vision insurance.
- Mortgage assistance, relocation packages and a 403B with employer match.
- Eligibility for Public Service Loan Forgiveness.

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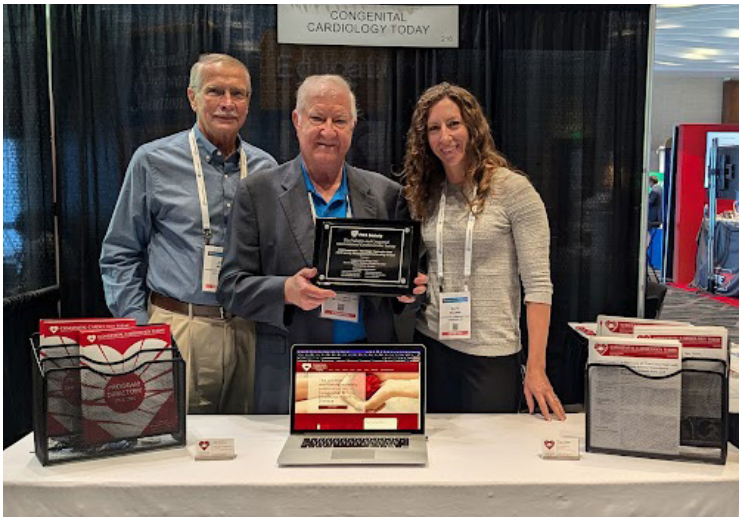
For confidential consideration, send your CV and cover letter to Physician Recruiter **Angelique Walbroel, CPRP** at Angelique.Walbroel@nemours.org.

Learn More: Scan the QR code below or visit www.Nemours.org.

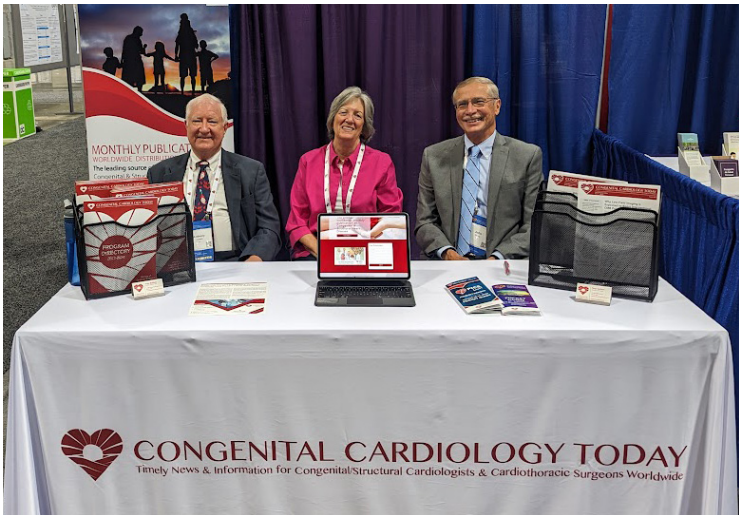
About Wilmington

Wilmington offers urban sophistication and suburban comfort with excellent schools, museums, theaters and restaurants. Notable attractions include the Hagley Museum and Library and the Nemours Estate, adjacent to the hospital.

Wilmington is also conveniently close to Philadelphia and Delaware beaches, providing ample recreational opportunities.



Dr. John Moore, Co-Founder & Medical Editor, Tony Carlson, Founder & Senior Editor, and Kate Baldwin, Editor-in-Chief, at PICS 2024



Tony Carlson, Loraine Watts, Staff Editor, and Dr. John Moore at The World Congress in 2023

Richard Koulbanis, Editor-in-Chief Emeritus, at PICS in 2003 launching the publication Pediatric Cardiology Today

Hope for Newborns with Heart Disease

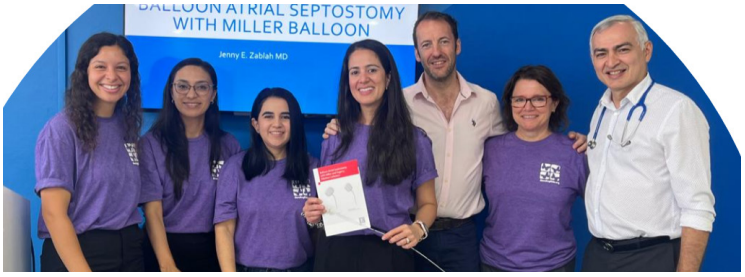
Mending Kids made a special mission to El Salvador with the support of Edwards Lifesciences Foundation and Drs. Jenny Zablah and Gareth Morgan from the Children's Hospital Colorado.

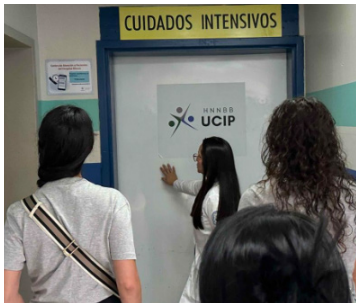
Together, we trained local cardiologists and frontline doctors on performing atrial septostomy—a life-saving procedure critical for newborns suffering from Transposition of the Great Arteries (TGA). We also invited two Guatemalan cardiologists who serve children in hospitals far from their capital, where they previously had no options to help newborns with TGA. Many of these babies wouldn't survive the long journey to receive care. What's remarkable about this procedure is that it's done bedside in the NICU, without the need for a cath lab or general anesthesia. While not a cure for TGA, it buys the child time to receive life-saving surgical care.

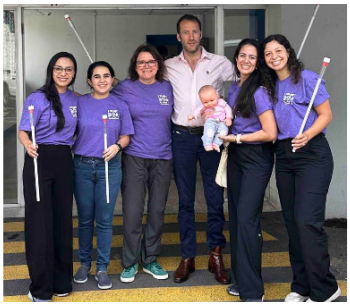
Including Guatemalan doctors was part of our effort to expand the footprint of this knowledge exchange beyond El Salvador. Recently, Edwards redesigned the specialized balloon required for the procedure, making this training possible. We will expand this program to two more countries in the next few months, ensuring that even more lives can be saved. This investment in the future is evergreen—the impact will continue for years to come.

Thank you to Edwards Lifesciences Foundation, Dr. Zablah, Dr. Morgan, and all the dedicated doctors working to bring hope, love, and mending to these communities.

MENDING KIDS







CAREER OPPORTUNITY

Cincinnati Children's
changing the outcome together

Imaging Faculty Positions

Assistant / Associate / Professor

The Heart Institute (HI) at Cincinnati Children's is actively seeking applications for multiple imaging faculty positions at the assistant, associate, or professor level.

Clinical Faculty position(s) will have a clinical focus as part of the non-invasive imaging subsection, primarily involving echocardiography. Fetal echocardiography responsibilities are available if desired.

The Academic Imaging Faculty position is an excellent opportunity for an individual with a strong background in imaging research to enhance the academic output and reputation of the imaging subsection. Leadership opportunities are available for qualified candidates within the Cardiovascular Imaging Research Lab (CIRL).

The Heart Institute (HI) is an internationally recognized center for **Pediatric and Adult Congenital Cardiac Care** and clinical and basic science research. It includes Congenital Heart Disease, Cardiothoracic Surgery, and Molecular Cardiovascular Biology divisions. The institute provides a full range of Pediatric Cardiac services within a not-for-profit tertiary care medical center and offers training for Pediatric Cardiology and sub-specialty fellows. Academic appointments are made through the Department of Pediatrics at the University of Cincinnati College of Medicine.

The Echo lab at our facility consists of 14 imaging faculty and 25 cardiac sonographers. They perform over 16,000 transthoracic and 400 transesophageal echocardiograms every year. In addition, 5 imaging faculty members with expertise in CT/MRI interpret approximately 1,000 scans annually. Our fetal lab has 3 dedicated fetal sonographers who conduct over 2,500 fetal echocardiograms yearly. Our facilities are equipped with state-of-the-art reading rooms and technology for advanced imaging techniques.

Submit questions about any of these opportunities to:
Dr. Garick Hill
Garick.Hill@cchmc.org

To Join the Team!
Email a cover letter of interest and CV to:
Debbie Mancini
Deborah.Mancini@cchmc.org

Cincinnati Children's is proud to be an Equal Opportunity Employer that values and treasures Diversity, Equity, and Inclusion. We are committed to creating an environment of dignity and respect for all our employees, patients, and families. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age, genetic information, national origin, sexual orientation, gender identity, disability, or protected veteran status. EEO/AA/M/F/Veteran/Disability

Study Reveals Key Genetic Markers for Early Onset Bicuspid Aortic Valve Complications

Genetic variants linked to a rare form of Bicuspid Aortic Valve Disease that affects young adults and can lead to dangerous and potentially life-threatening aortic complications have been identified by researchers at UTHealth Houston.

The study was published in the *American Journal of Human Genetics*.

"We previously found that young individuals who present due to early onset thoracic aortic dissections are more likely to have bicuspid aortic valves and more likely to have rare variants in bicuspid aortic valve-associated genes. When we observed that bicuspid aortic valve is kind of a risk marker for this group with bad outcomes, we specifically wanted to see whether young individuals who present clinically due to problems related to bicuspid aortic valve disease may also have rare genetic variants that predict complications such as needing valve surgery."

– Siddharth Prakash, MD, PhD, Co-Principal Investigator of the study and Associate Professor of Medical Genetics and Cardiovascular Medicine in the Department of Internal Medicine at McGovern Medical School at UTHealth Houston

About one in 100 people are born with a bicuspid aortic valve, making it the most common cause of Congenital Heart Disease.

The comparison between the rare subgroup of early onset bicuspid aortic valve to the common population of the disease allowed researchers to determine which group of patients will benefit from genetic testing, thus enabling earlier, more aggressive treatment. According to researchers, patients with bicuspid aortic valve disease often wait too long to be seen, leading to more severe cardiovascular symptoms, such as heart failure and even sudden death.

A bicuspid aortic valve is a congenital heart defect where the value has two flaps, or cusps, instead of three, so the valve does not open and close properly with each heartbeat. This can lead to complications such as blocked, reduced, or backward blood flow through the heart chambers, causing shortness of breath, chest pain, fainting, and difficulty exercising. In more severe cases, the disease can lead to an aortic dissection, or tear in the aorta, a life-threatening condition.

Researchers studied individuals who presented with specific complications of the disease before age 30 or who were immediate relatives to someone with early onset bicuspid aortic valve disease. Early onset symptoms of the disease were defined as moderate or severe aortic stenosis or aortic regurgitation, a large thoracic aortic aneurysm, needing to have aortic surgery, or aortic dissection.

Researchers aimed to identify genetic variants that may lead to an increased risk of the disease in young adults. "The average person in this study was affected in their 20s and had relatives with the disease, so we traced the onset of the disease in the families and we reported rare genetic variants that segregated with the disease in these participants and their relatives," Prakash said.

Prakash and his team analyzed whole-exome sequencing data, sourced from 215 families from over 20 institutions to identify the rare genetic variants known to cause Congenital Heart Disease in early onset bicuspid aortic valve disease in this rare subgroup. They compared those findings to the more common population of patients with later-onset bicuspid aortic valve disease.

The identified genes included genes that cause isolated nonsyndromic bicuspid aortic valve, as well as other types of congenital heart disease that are associated with bicuspid aortic valve or related congenital malformations. Researchers found damaging variants of genes with moderate or strong evidence to cause developmental cardiac phenotypes in 107, or 50%, of affected families in the study.

"We showed that the older patients with bicuspid aortic valves are unlikely to benefit from genetic testing because they are unlikely to have these kinds of genetic variants," Prakash said. "It's important for people to realize, as we saw in this study, that a lot of people with bicuspid aortic valves have affected relatives. In the future, family members may be tested for genetic variants that cause bicuspid aortic valve complications, and people who have these genetic variants could be treated early to prevent future complications from developing."

The research was funded by the National Institutes of Health (R01HL137028, R21HL150383, R01HL114823, and R21HL150373). The University of Washington Center for Rare Disease Research provided sequencing and data analysis, funded by the National Human Genome Research Institute, grants U01 HG011744 and UM1 HG006493.

Dianna M. Milewicz, MD, PhD, Professor of Medical Genetics, President George Bush Chair in Cardiovascular Medicine, and Director of the Division of Medical Genetics at McGovern Medical School at UTHealth Houston, was a co-principal investigator on this study.

First author of the study was Sara Mansoorshahi, BA, McGovern Medical School. Additional authors included Dongchuan Guo, PhD, Professor of Medical Genetics at McGovern Medical School; Dawn S. Hui, MD, The University of Texas Health Science Center at San Antonio; Shaine A. Morris, MD, MPH, Baylor College of Medicine; Angela Yetman, MD, University of Nebraska Medical Center; Malenka M. Bissel, MD, DPhil, University of Leeds; Yuli Y. Kim, MD, Hospital of the University of Pennsylvania and the Children's Hospital of Philadelphia; Hector I. Michelena, MD, Mayo Clinic; Anthony Caffarelli, MD, Stanford University; Maria G. Andreassi, PhD, and Ilena Foffa, PhD, Institute of Physiology in Pisa, Italy; Rodolpho Citro, MD, PhD, Responsible Research Hospital University of Molise, Campobasso, Italy; Margot De Marco, PhD, University of Salerno, Baronissi, Italy; Justin T. Tretter, MD, Cleveland Clinic; Simon C. Body, MD, MPH, Boston University; Jessica X. Chong, PhD and Michael J. Bamshad, MD, University of Washington.

CAREER OPPORTUNITY

Yale University
School of Medicine

Assistant / Associate Professor
Adult Congenital Heart Disease

The Department of Pediatrics, Section of Pediatric Cardiology at the Yale School of Medicine is recruiting an individual with expertise in Adult Congenital Heart Disease to join our established ACHD program as an Assistant or Associate Professor in the Academic Clinician track, depending on interest and background.

The Yale Adult Congenital Heart Disease Program is one of the approximately 50 programs in the country accredited through the Adult Congenital Heart Association as a comprehensive care program. Our program is integrated into the Yale-New Haven Children's Heart Center and combines the resources of the Children's Hospital with the larger Yale-New Haven Health system to provide the full range of medical, surgical, and catheter-based therapies for adults with congenital heart disease including advanced heart failure management and cardiac transplantation. This integrated program currently has four ACHD board certified physicians; plans for initiation of an ACHD fellowship have been approved but not yet implemented.

The successful candidate will work with the ACHD program's Medical Director to further expand outpatient and inpatient services. Clinical duties will include consultative and direct management of ACHD patients in the cardiac intensive care unit and general cardiac units at the main Yale-New Haven Hospital campus as well as outpatient consultation and management in New Haven and at satellite locations throughout CT. If interested, there are also opportunities for in-patient and out-patient pediatric cardiac care. Active participation in the education of medical students, residents, and adult and pediatric cardiology fellows is expect.

Board certification or eligibility Adult Congenital Heart Disease is required. Ideal candidates will have demonstrated interest and abilities in clinical care, education, and scholarship, and will have excellent interpersonal skills and ability to function in teams.

The candidate will receive a competitive salary with incentive compensation in addition to a comprehensive benefits package. This is an excellent opportunity to practice academic ACHD medicine in beautiful coastal Connecticut while also joining a world-class academic medical cent.

Interested applicants should submit Curriculum Vitae, Cover Letter and three Letters of Reference to:

apply.interfolio.com/147264

The position will remain open until filled.

Yale University is an equal opportunity, affirmative action employer.
Women, minorities, persons with disabilities and protected veterans are encouraged to apply.

Research Reveals 36% Higher Heart Defect Risk in IVF Babies

The risk of being born with a major heart defect is 36% higher in babies who were conceived after assisted reproductive technology, such as in vitro fertilization (IVF), according to results of a very large study published in the European Heart Journal today (Friday).

Researchers say the finding is important since congenital heart defects are the most common form of birth defects, and some of them are associated with life threatening complications.

The study also shows that the increase in risk is particularly associated with multiple births which are more common in assisted reproduction.

The study was led by Professor Ulla-Britt Wennerholm from the University of Gothenburg in Sweden. She said: "Previous research shows that there are increased risks for babies conceived with the help of assisted reproductive technology. These include preterm birth and low birth weight. We wanted to investigate whether the risk of heart defects was higher for babies born following assisted reproduction."

The research included all liveborn children born in Denmark between 1994 and 2014, all children born in Finland between 1990 and 2014, those born in Norway between 1984 and 2015 and those born in Sweden from 1987 to 2015; more than 7.7 million in total.

Researchers compared data on babies born following assisted reproduction, including IVF, intracytoplasmic sperm injection (ICSI) and embryo freezing, with data on babies conceived naturally.

They assessed how many liveborn children in each group were diagnosed with a major heart defect or with a serious heart defect either in the womb or in the first year of life. They took into account other factors that can increase the risk of congenital heart defects, such as: child's year of birth, country of birth, mother's age at delivery, if the mother smoked during pregnancy, or if the mother had diabetes or heart defects.

This showed that heart defects were around 36% more common in babies born after assisted reproduction, compared to babies conceived without such treatment (absolute risk 1.84% versus 1.15%). This risk was similar regardless of the type of assisted reproduction used (IVF or ICSI, fresh or frozen embryos). However, the risk was greater for multiple births following assisted reproduction compared to singleton births following assisted reproduction (2.47% versus 1.62%).

In an accompanying editorial Dr. Nathalie Auger from University of Montreal Hospital Research Centre in Canada and colleagues said: "Assisted reproductive technology is a popular intervention in reproductive medicine, with these procedures accounting for 2% to 8% of births depending on the country. While most neonates born after assisted reproductive technology are healthy, these procedures are not without risks.

"In one of the largest studies to date, the researchers found that assisted reproductive technology was associated with the risk of major heart defects diagnosed prenatally or up to one year of age."

"Patients who use assisted reproductive technology tend to differ from the general population. These patients may have underlying morbidities that affect both fertility and the risk of heart defects."

MaineHealth

Pediatric Cardiologist
Advanced Imaging with Cross-Sectional Focus

The Division of Pediatric Cardiology at MaineHealth Maine Medical Center is seeking a pediatric cardiologist with a subspecialty focus in cross-sectional imaging to join their group.

The Congenital Heart Program at Maine Medical Center provides comprehensive services including congenital heart surgery, interventional cardiology and invasive electrophysiology. Maine Medical Center has provided surgical care in the state for over 25 years and congenital interventional services for over 20 years. The Congenital Heart Program currently participates in STS, PC4, PAC3, CNOC, VPS, and IMPACT registries. Integrated across both the Pediatric and Cardiovascular Services Lines at the Barbara Bush Children's Hospital and Maine Medical Center, the Congenital Heart Program provides cohesive care across disciplines and collaborates closely with both pediatric and adult subspecialists.

This position offers:

- Responsibility in both inpatient and outpatient general pediatric cardiology attending services.
- Oversight of a growing cross sectional imaging program.
- Research, administrative, and educational time depending on the candidate, their experience, and their career goals.
- Complex, comprehensive care in a small group setting
- Competitive compensation package including relocation assistance, CME expense reimbursement, and malpractice insurance.

Qualifications:

- MD/DO from an accredited medical school.
- Board Certification/Board Eligible in Pediatric Cardiology.
- Preference will be given to candidates with strong imaging skills and ability to oversee and grow cardiac MRI and CT program.
- Should be comfortable in all aspects of general pediatric cardiology including performing TTE.

Interested candidates may submit a CV and cover letter to:
Gina Mallozzi, Physician Recruiter
gina.mallozzi@mainehealth.org

Portland, Maine, situated on the Maine coast, Portland offers the best of urban sophistication combined with small-town friendliness. The area provides four season recreational opportunities, such as skiing, hiking, sailing, and miles of beautiful beaches. Just two hours north of Boston, this is an exceptionally diverse and vibrant community.

MaineHealth is a not-for-profit integrated health system whose vision is, "Working together so our communities are the healthiest in America." MaineHealth consists of nine local health systems, a comprehensive behavioral health care network, diagnostic services, home health agencies, and 1,700 employed clinicians working together through the MaineHealth Medical Group. With approximately 22,000 care team members, MaineHealth provides preventive care, diagnosis and treatment to 1.1 million residents in Maine and New Hampshire. MaineHealth offers a Total Rewards package that includes comprehensive and competitive benefits, along with programs and resources to meet the diverse needs of our workforce.

To learn more about our system please visit **www.mainehealth.org** and our benefits page.

New Registry Offers Insights into Quality of Life for Adults with Congenital Heart Disease

For the first time, adults living with congenital heart disease (CHD) now have valuable insights into their long-term quality of life through data from the Congenital Heart Initiative (CHI). CHI is the nation's first and largest patient-focused registry for adults with CHD and released its first study involving over 4,500 participants from all 50 states.

This research, published in JAMA Network Open, marks a significant step forward in making better information available for the 1.5 million adults in the United States who were born with CHD.

Studies like this, that leverage actual patient voices and experiences, help us get a better sense of how to advise, support and treat people with CHD as they age. Also, researchers get a clearer picture of the questions that need to be answered to make sure they have the best quality of life possible."

– Anitha John, MD, PhD, Director of the Washington Adult Congenital Heart program at Children's National Hospital and Senior Author of the study

The study also demonstrates two of the most successful models of current promising trends in clinical research:

- The power of patient engagement throughout the research process, including design and implementation.
- The impact of team science, highlighting the benefits of partnerships between patients, researchers and clinicians.

Key highlights include:

- Many participants (88%) reported having one or more additional health issues (comorbidities).
- 33% had arrhythmias (irregular heartbeat).
- 35% had mood disorders, including depression or anxiety.
- Quality of life is good or better for 84% of people who completed quality of life reporting measures, regardless of the type of congenital heart condition.
- People with more complex congenital conditions were less likely to meet physical activity recommendations; an important finding with immediate impact.

Treatments for children born with congenital heart disease have improved so significantly in the last two decades that life expectancy continues to increase as well.

"There are now more adults living with congenital heart disease than there are children with CHD," says Scott Leezer, patient co-principal investigator for the Congenital Heart Initiative registry and co-author of the study. "However, a significant gap remains in what we know about the adult CHD population. As an adult CHD patient, I was excited to contribute to creating this registry, bringing more answers to people like me who want to know how our unique hearts impact our bodies and quality of life over time."

The authors note that the study's findings and the registry data currently have a few limitations. First, the registry only contains patient-reported outcomes and no clinical data. The first sub-study of the CHI, the CHI-RON study, addresses this challenge by incorporating additional data sources for a subset of consenting CHI participants.

Additionally, recall bias, underlying neurocognitive challenges and survey fatigue, may have limited participation in the CHI to a smaller subset of adults with CHD. Efforts are underway to develop methods for people with congenital heart disease who have neurodevelopmental deficits or other disabilities to engage in the registry. The CHI is temporarily closed to new registrants as the study team redesigns the study to better align with the needs of the community.

"We are grateful for everyone who joined this registry, answered survey questions and shared their experiences," says Thomas Carton, Ph.D., chief data officer at Louisiana Public Health Institute and study co-author. "The CHI registry is a big step forward for adults with CHD, but also can serve as a model for how to bring together physicians, researchers and patients as active participants in care, research and advocacy."

As the registry grows in the future, it will focus on increasing diversity of participants, developing additional partnerships with other organizations, continued innovation in data usage and improved community engagement, all with the goal of guiding future research that will ultimately improve quality of life for all adults with CHD.

CAREER OPPORTUNITY

Driscoll Children's Hospital

NEW Pediatric Cardiologist

Laredo, Texas

The Driscoll Health System is seeking an additional BE or BC Pediatric Cardiologist to join our team in Laredo, Texas. This position will work to provide the highest standard of care for its patients in both outpatient and inpatient settings.

Driscoll Children's Hospital is advancing a comprehensive Heart Center to meet the healthcare needs of congenital heart patients in Texas. Successful applicants will enjoy a competitive compensation package including coverage of all overhead expenses (including malpractice), medical, dental, vision, disability, life insurance, excellent retirement plans, paid vacation, paid holidays, and paid CME.

Driscoll Children's Hospital has two free-standing children's hospitals in Texas with clinics in Laredo and throughout South Texas. The Driscoll Pediatric Cardiology Clinic will bring comprehensive and advanced care to patients and offer a full spectrum of services for children with congenital heart disease and other rare cardiac conditions. The Heart Center at Driscoll Children's Hospital offers families access to a wide range of heart specialties and services, including pediatric cardiology, pediatric cardiac surgery, pediatric cardiac anesthesia, pediatric cardiac intensive care, pediatric electrophysiology, cardiac catheterization, cardiac cross-sectional imaging, fetal imaging and other cutting-edge medical services and technologies.

Driscoll is the premier healthcare provider for kids in South Texas. We are a nonprofit healthcare system that has served communities in the Lone Star State since 1953. Today, Driscoll is the largest and fastest-growing healthcare system in the region, offering care at Driscoll Children's Hospital in Corpus Christi and specialty centers and clinics across South Texas. Recently, we opened Driscoll Children's Hospital Rio Grande Valley, providing more access to care for kids in the region.

About Driscoll Children's Hospital
Driscoll Children's Hospital is a 191-bed pediatric tertiary care center with more than 30 medical and surgical specialties offering care throughout South Texas, including Corpus Christi, the Rio Grande Valley, Victoria, and Laredo. Through the vision and generosity of its founder, Clara Driscoll, Driscoll Children's Hospital opened in 1953, becoming the first, and remains the only, free-standing children's hospital in South Texas. In 2019, Driscoll had over 141,000 patient visits, including over 46,000 patients seen at South Texas' first emergency room created exclusively for children.

About Laredo, Texas
Laredo, Texas, located on the banks of the Rio Grande, is a vibrant city known for its rich history, cultural diversity, and strategic importance as a border city. As the largest inland port in the United States, Laredo plays a crucial role in international trade, serving as a gateway between the U.S. and Mexico. The city's economy is bolstered by its thriving trade industry, logistics, and transportation sectors. The city is also home to numerous historical sites, including the Republic of the Rio Grande Museum and the San Agustin Cathedral, which reflect its storied past.

The local cuisine is a delightful mix of Tex-Mex flavors, featuring dishes like breakfast tacos, enchiladas, and authentic barbacoa. Laredo's culinary scene offers a taste of its cultural heritage, drawing residents and visitors alike to its many restaurants and food festivals.

Outdoor enthusiasts can explore the beautiful landscapes surrounding Laredo, including the nearby Lake Casa Blanca and the scenic Rio Grande. The area is ideal for activities such as fishing, hiking, and birdwatching, making it a great destination for nature lovers.

With its unique blend of cultures, strong economic presence, and vibrant community, Laredo, Texas, is a city that celebrates its heritage while looking towards a promising future. Cost of living is low, and NO STATE INCOME TAX.

Apply Today!
CPSST.Recruitment@dchstx.org
361.694.5906

NOVEMBER

07TH-10TH

Great Wall International Congress of Cardiology 2024
Beijing, China
http://www.gw-icc.com/en

08TH-09TH

2nd International Pediatric Cardio-Oncology Conference
Cincinnati, Ohio, USA
https://www.cincyhearteducationseries.org/cardio-onc

DECEMBER

01ST-05TH

RSNA 2024
Chicago, Illinois, USA
https://www.rsna.org/annual-meeting

05TH-07TH

International Aortic Symposium
Orlando, Florida, USA
https://floridaaorta.cme.ufl.edu/

JANUARY

22ND-24TH

CSI America
Orlando, Florida, USA
https://www.csi-congress.org/america

Program Directory
2024-2025

Published Mid-August

Directory of Congenital & Pediatric Cardiac Care Providers in North America

Each program's contact information for Chief of Pediatric Cardiology & Fellowship Director

Lists each program's Pediatric Cardiologists & Cardiothoracic Surgeons

Lists Pediatric Cardiology Fellowships

Distributed to Division Chiefs by mail

Electronic version available on CCT's website:
CongenitalCardiologyToday.com/Program-Directory

Need to update your listing?
Contact Kate Baldwin
kate.f.baldwin@gmail.com

Phoenix Children's

Adult Congenital Heart Disease (ACHD) Cardiologist Opportunity

Join our dynamic team at Phoenix Children's and make a difference in the lives of ACHD patients. We are seeking a dedicated and passionate ACHD cardiologist to add to our growing program.

Responsibilities

- Provide high-quality outpatient and inpatient care to ACHD patients.
- Collaborate with multidisciplinary teams to develop individualized treatment plans.
- Engage in teaching medical students, residents, pediatric cardiology and adult cardiovascular disease fellows.
- Contribute to research initiatives.
- Participate in statewide and nationwide ACHD advocacy efforts.

Facility and Program Information

Phoenix Children's Center for Heart Care houses the largest ACHD program in Arizona and the state's only ACHA Accredited Comprehensive Care Center. Our program boasts 24 cardiologists, 13 cardiac intensivists, 3 cardiovascular surgeons, and 24 advanced practice providers. We offer ambulatory cardiac services across the Phoenix metropolitan area and have outreach clinics in greater Arizona. Phoenix Children's is one of the nation's largest pediatric health systems and a premier destination for pediatric care in the Southwest. Inpatient ACHD care takes place at Phoenix Children's and at our adult partner hospital, Dignity-St. Joseph's Hospital and Medical Center, a large academic medical center that includes the world-renowned Norton Thoracic and Barrow Neurologic Institutes. The successful candidate will play a pivotal role working alongside the Heart Center teams at both institutions.

Community Information

Phoenix is the 5th largest city in the United States, known for its year-round temperate climate and abundant sunshine. With access to ocean and mountain attractions, it's consistently ranked among the Best Places to live in the United States.

Qualifications

- M.D. or equivalent degree.
- Board certified/eligible in Pediatric Cardiology by the American Board of Pediatrics.
- Board certified/eligible in Adult Congenital Heart Disease by the American Board of Internal Medicine.
- Eligible for medical licensure in the State of Arizona.

Affiliation and Academic Appointments

Phoenix Children's Hospital is affiliated with the University of Arizona College of Medicine-Phoenix. ACHD cardiologists will hold academic appointments within the divisions of Child Health and Internal Medicine.

At Phoenix Children's, our commitment to excellence extends beyond clinical care to include education, research, and advocacy. Join our supportive and collaborative team where healthcare professionals can thrive and make a meaningful impact on the lives of patients and families.

This position offers competitive compensation, excellent benefits, including employer retirement contribution, generous vacation/meeting time, CME funds, health and dental benefits, disability, and life insurance.

For questions and inquiries, please contact:

David Blaha
Physician Talent Acquisition Partner
dblaha@phoenixchildrens.com

Phoenix Children's

Pediatric Cardiologist
Heart Transplant and Advanced Heart Failure

Phoenix Children's - Division of Cardiology, is actively seeking up to 3 full-time faculty to join the Advanced Heart Failure – Cardiac Transplant Team at the level of Instructor, Assistant, or Associate Professor of Clinical Pediatrics and Child Health. There is an opportunity for the right candidate to join as or develop into the role of Director of Mechanical Circulatory Support depending on experience. The program performs an average of 12-15 heart transplants annually, follows heart failure patients in both the inpatient and outpatient setting and supports a mechanical circulatory support program offering the full range of pediatric and adult devices. Applicants must have an M.D. or equivalent degree, be board certified or board eligible in Pediatric Cardiology by the American Board of Pediatrics and eligible for medical licensure in the State of Arizona. Candidates will have already completed an ACGME accredited 3-year fellowship in Pediatric Cardiology, with additional 1-2 years of advanced subspecialty training in pediatric advanced heart failure including management of cardiac transplant patients and mechanical circulatory support. This position is not currently accepting J1 visa candidates.

Candidates should demonstrate a rigorous academic focus preferably in clinical and/or translational research, however, basic science opportunities are also available. Academic clinical faculty appointments will be facilitated at the University of Arizona College of Medicine – Phoenix and Tucson, Creighton University School of Medicine, and Mayo Clinic School of Medicine – Scottsdale. Additional research collaborations exist with the Translational Genomics Research Institute (tGen) and the Arizona State University, Department of Bioengineering.

The Division of Cardiology currently hosts a fellowship training program in general pediatric cardiology with 9 fellows distributed over 3 years. The Phoenix Children's Center for Heart Care also hosts subspecialty fellowships in pediatric cardiac critical care, advanced cardiac imaging, and interventional cardiac catheterization. The inpatient service includes a 48-bed CV intensive care unit and transition care unit. Patient care is interdisciplinary involving transplant cardiology, cardiovascular surgery, and dedicated cardiac NP and PA providers. The provision of both workplace based and didactic teaching to fellows, residents, medical students, and nurses is an expectation in this role. The successful candidate(s) will join our program with 24 cardiologists, 13 cardiac intensivists, 3 cardiovascular surgeons, and 25 advanced practice providers. Inpatient pediatric cardiac care is centered at the Phoenix Children's Hospital while adult congenital inpatient care and procedures are also provided at St. Joseph's Hospital and Medical Center. Ambulatory cardiac services are centered at the Center for Heart Care – Thomas Campus and satellite offices are located throughout the Phoenix metropolitan area. Additional general cardiology outreach offices are in Tucson, Prescott, and Yuma AZ.

The Phoenix metropolitan area is the 5th largest metropolitan area in the United States with a population of ~1.6M and an estimated pediatric population of 1M in Maricopa county alone. Phoenix Children's is one of the largest freestanding children's hospitals in the nation with 433 licensed beds and a faculty of over 1200 employed / affiliated physicians. Phoenix is consistently ranked among the Best Places to live in the United States and boasts over 300 sunny days per year and convenient access to ocean and mountain attractions.

Interested candidates should send a curriculum vitae with a cover letter of introduction to:

David Blaha
Physician Talent Acquisition Partner
dblaha@phoenixchildrens.com

Interested candidates can also contact the program director directly:
Steve Zangwill, MD
szangwill@phoenixchildrens.com

More THAN A Hospital | Akron Children's Hospital

Pediatric Cardiologist Opportunity
Northeast Ohio

Ohio-based Akron Children's Hospital seeks a Pediatric Clinical Cardiologist to join its expanding Heart Center. Akron Children's Hospital is the largest pediatric healthcare system in Northeast Ohio and is ranked among the best children's hospitals.

This integrated healthcare delivery system includes:

- Two free-standing pediatric hospitals
- More than 800 providers, who manage over 1.1 million patient visits annually
- A network of more than 50 primary and specialty care locations
- Robust research and innovation endeavors

The successful candidate will join a well-established group, expanding the services of the Heart Center team. Our team includes 16 pediatric cardiologists, 7 advanced practice providers and 2 cardiothoracic surgeons who provide a complete spectrum of coordinated, compassionate, cardiac care to over 10,000 patients annually. Services include advanced diagnostics, complex surgical procedures, an adult congenital heart disease program, a fetal imaging program and a cardiac MRI program.

This position offers opportunities for:

- Partnership with an established team of Cardiologists affording exceptional work-life balance
- Active involvement in medical student and resident education; academic appointment at Northeast Ohio Medical University is available and commensurate with experience
- An attractive compensation plan that includes bonus compensation

Requirements include board eligibility/certification in Pediatric Cardiology and the ability to obtain an active medical license in the state of Ohio.

Akron Children's Hospital is set in the beautiful Cuyahoga Valley, just minutes south of Cleveland. From major league attractions to small-town appeal, Northeast Ohio has something for everyone. The area is rich in history and cultural diversity, and provides a stimulating blend of outstanding educational, cultural and recreational resources. This four-season community offers outdoor enthusiasts more than 40,000 acres of parks for year-round enjoyment. Northeast Ohio has become a premier destination to work, live, play, shop and dine.

Interested candidates may contact Jane Hensley, Physician Recruiter at 330-543-3015 or jhensley@akronchildrens.org. To learn more, visit our website at www.akronchildrens.org.

One Perkins Square | Akron, OH 44308 | akronchildrens.org

More THAN A Hospital | Akron Children's Hospital

Adult Congenital Cardiologist Opportunity
Northeast Ohio

Ohio-based Akron Children's Hospital seeks an additional ***Adult Congenital Cardiologist*** to join its expanding Heart Center. Akron Children's Hospital is the largest pediatric healthcare system in Northeast Ohio and is ranked among the best children's hospitals.

This integrated healthcare delivery system includes:

- Two free-standing pediatric hospitals
- More than 800 providers, who manage over 1.1 million patient visits annually
- A network of more than 50 primary and specialty care locations
- Robust research and innovation endeavors

The successful candidate will join a well-established group, expanding the services of the Heart Center team, and will treat ACHD patients. Our team includes 16 pediatric cardiologists, 7 advanced practice providers and 2 cardiothoracic surgeons who provide a complete spectrum of coordinated, compassionate, cardiac care to over 10,000 patients annually. Services include: advanced diagnostics, complex surgical procedures, an adult congenital heart disease program, a fetal imaging program and a cardiac MRI program.

This position offers opportunities for:

- Partnership with an established team of Cardiologists affording exceptional work-life balance
- Active involvement in medical student and resident education; academic appointment at Northeast Ohio Medical University is available and commensurate with experience
- An attractive compensation plan that includes bonus compensation

Requirements include board eligibility/certification in Adult Congenital Heart Disease and the ability to obtain an active medical license in the state of Ohio.

Akron Children's Hospital is set in the beautiful Cuyahoga Valley, just minutes south of Cleveland. From major league attractions to small-town appeal, the greater Akron area has something for everyone. The area is rich in history and cultural diversity, and provides a stimulating blend of outstanding educational, cultural and recreational resources. This four-season community offers outdoor enthusiasts more than 40,000 acres of parks for year-round enjoyment. Northeast Ohio has become a premier destination to work, live, play, shop and dine.

Interested candidates may contact Jane Hensley, Physician Recruiter at 330-543-3015 or jhensley@akronchildrens.org. To learn more, visit our website at www.akronchildrens.org.

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