



ICNC8
29 April – 2 May 2007
PRAGUE – CZECH REPUBLIC

Please return this form by 31 January 2007 to:
 Chelsea Thomas / ESC Scientific Programmes
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SCIENTIFIC SESSION FORM	
<input type="checkbox"/> Lunch Satellite Symposium N°	<input type="checkbox"/> Evening Satellite Symposium N°

Please use the session number in all correspondence.

Session Title:

Please add full name of acronyms and abbreviations. NO PRODUCT NAMES or BRAND NAMES are allowed.

Organised by:	Duration: 90 minutes
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Name of the company to be printed in all Programmes

Primary Topic:	Please choose a topic number from the Topic list at ICNC8 in order to have you session and presentations indexed in the Final Programme (e.g 01.00 Acute ischaemia/injury imaging.) Please find the Topic list attached at the end of this form.
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***CHAIRPERSONS: Please refer to regulations at the end of this form**
***Chairpersons confirmations are needed to validate the scientific programme.**

1. CHAIRPERSON

Title: Dr.	Family name:	First name:
Dept/Inst./Company:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

2. CHAIRPERSON

Title: Dr.	Family name:	First name:
Dept/Inst./Company:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

PRESENTATIONS, TOPIC, DURATION and SPEAKERS: Please refer to regulations at the end of this form

1. PRESENTATION / SPEAKER

Topic:	Title:	Duration:
Title: Dr.	Family name:	First name:

Dept/Inst./Company:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

2. PRESENTATION / SPEAKER

Topic:	Title:	Duration:
Title: Dr.	Family name:	First name:
Dept/Inst./Company:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

3. PRESENTATION / SPEAKER

Topic:	Title:	Duration:
Title: Dr.	Family name:	First name:
Dept/Inst./Company:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

4. PRESENTATION / SPEAKER

Topic:	Title:	Duration:
Title: Dr.	Family name:	First name:
Dept/Inst./Company:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

5. PRESENTATION / SPEAKER

Topic:	Title:	Duration:
Title: Dr.	Family name:	First name:
Dept/Inst./Company:		
Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

6. PRESENTATION / SPEAKER

Topic:	Title:	Duration:
Title: Dr.	Family name:	First name:
Dept/Inst./Company:		

Address:		
Postal code:	City:	Country:
Tel:	Fax:	E-mail:

Topic List ICNC 8

Clinical General

- 1 Acute ischaemia/injury imaging**
- 2 Attenuation correction-clinical**
- 3 Comparative techniques - clinical**
- 4 Congestive heart failure**
- 5 Free fatty acid imaging**
- 6 Myocardial viability and hibernation**
- 7 Pacemakers, ICD**
- 8 Percutaneous coronary intervention**
- 9 Perfusion imaging methods and protocols**
- 10 Stress techniques**
- 11 Image patterns, artifact**
- 12 Transplant**
- 13 Ventricular function clinical**
- 14 Exercise ECG**
- 15 Other clinical general**
- 16 Myocarditis**
- 17 Neurohumoral imaging**

Clinical Outcome

- 18 Acute ischaemic syndromes**
- 19 Arrhythmias and sudden death**
- 20 CAD and Diabetes, Renal Disease, Gender, Risk factors**
- 21 Cost effectiveness and health economics**
- 22 Diagnosis of CAD**
- 23 Risk assessment and outcome in CAD**
- 24 Risk assessment before non-cardiac surgery**
- 25 Quality Assurance, Guidelines**
- 26 Result of therapy**

Experimental

- 27 Kinetics and radiochemistry**
- 28 Microvascular heart disease**
- 29 Molecular imaging**
- 30 Myocardial perfusion and coronary flow**
- 31 New radiopharmaceuticals**

Instrumentation

- Instrumentation, software and image processing**
- 32 RNA (gated, first-pass) for LV and RV**
- 33 SPECT gated and regional wall motion**
- 34 Phantom studies**
- 35 Other instrumentation**

PET and CT

- 37 PET imaging receptors, other**
- 38 PET imaging perfusion**
- 39 PET imaging metabolism**

CHAIRPERSONS:

- Two "chairpersons" per session are mandatory.
 - Must be available until the end of the session.
 - One of the two Chairpersons can give a presentation.
 - Cannot chair or speak another session at the same time.
 - At least one Chairperson should have expert knowledge about the topic.
 - Both Chairpersons should be fluent in English.
 - Please mention the **First names and Last names** of the chairpersons as well as their city and country as follows: *A.N. Oter (Berlin, Germany)*, but be sure to give their full titles, first and last names, phone, fax numbers and email address. First names are used to match people when checking.
- If name and addresses are not given, no checking (for example, for simultaneous sessions) will be done and index entries may be wrong or missing.

PRESENTATIONS:

- Please add full name of acronyms and abbreviations.
- **NO PRODUCT NAMES or BRAND NAMES are allowed.**
- **These should include any scheduled discussions, panels, closing remarks etc.**
- **There must be at least one "presentation"**

TOPIC:

- If not present, the "primary topic" will be used.
 - The primary topic is the topic (eg 01 Acute ischaemia/injury imaging) under which you want the session indexed. It is also the default category for any presentations without a category.
- It is used by the Scientific Committee when analysing the results of the previous congress or planning the next one. Please be sure to use the new category list 2007.

DURATION:

- Normally 90-minute
- Lunch time Satellite Sessions: Companies organising Satellite Sessions during the lunch time will be allowed to enter in the lecture rooms at 12:35 after the scientific session and have to leave the lecture rooms at 13:50 in order to let the ESC staff prepare the following scientific sessions.
- Suggested format:

Lunchtime session (75 minutes):

- 4 or 5 speakers:
 - A 15-minute presentation each,
 - Or a 10-minute presentation each followed by a 5-minute discussion each

Evening session (90-minutes):

- 4 speakers:
 - A 17-minute presentation each followed by a 5-minute discussion each
 - Or a 10-minute presentation each followed by a 5-minute discussion each
 - + A 30-minute general discussion (round table/forum)
- 5 speakers:
 - 13-minute presentation each followed by a 5-minute discussion each

SPEAKERS:

- Please do not forget the **First name & Last name** and address of each speaker. The institution will not be printed in the programme.
- Must be available until the end of the session.
- Cannot speak twice in the same session.
- Cannot speak another session at the same time.
- No more than half of the speakers should come from the same country.
- Should be fluent in English.

When sending us the Satellite Session forms, you confirm that you have received the prior approval of faculties for providing us the above data.

Unless otherwise informed, the ESC may send information about its activities from time to time.

The ESC undertakes to respect the confidentiality of personal data according to the Law on data processing and Civil Liberties 78-17 of 6 January 1978, including the absolute right to access, amend and oppose any use of this personal data by contacting in writing the ESC National Society and Member Relations Department at the address mentioned below:

THE EUROPEAN HEART HOUSE

2035 Route des Colles
Les Templiers – BP 17906903 Sophia Antipolis
France

