

Pamela S. Douglas, M.D., F.A.C.C., ACC President

ACC.06 is a fabulous update for clinical practitioners, as well as for clinical scientists. It is a time when new knowledge gets presented. We also have new this year in addition to the large mega clinical trials that everybody is used to, new hypothesis-generating trials, so new emerging trials, which makes it even more exciting. It's a time when you can get a summary of things that are going on in your field, a review, but also you can find out what really tomorrow news is going to be.

The College has undertaken a complete re-examination of its annual meeting and one of the recommendations was to make it more user friendly by having more sessions on Saturday and Sunday and ending earlier so there is less time away from busy practices and busy work life. So we're starting the sessions on Saturday afternoon this year with an all new 90-minute presidential plenary leading into a reception in the exhibit hall and we are opening the exhibit hall early on Sat. And we are going to end at the close of business on Tuesday so people can get home and still have most of their work week.

We are very excited to be going back to Atlanta this year. Atlanta is one of our favorite venues because the convention center is well laid out for us and it's a good size for us and it's particularly suited this year to be able to do i2, the Innovations in Intervention Summit, as well as ACC.06. It's downtown which means it's close to hotels and restaurants with a lot of walking distance for everybody to enjoy the city but also enjoy the meeting. Atlanta is a city that's easy to get to. It's close to most of the country in its location and has easy international connections as well as domestic. And let's face it, it's just an exciting city. It's got a brand new aquarium that's the largest in the world. So, come and enjoy Atlanta.

ACC is launching a brand new meeting this year in conjunction with its annual scientific sessions. It's the Innovations in Intervention Summit and the promise of this meeting is Knowledge, Innovation and Networking or KIN and we will bring you all three of these critically important components to an outstanding meeting experience at Innovations in Intervention Summit.

William W. O'Neill, M.D., F.A.C.C., Co-chair, Innovations in Intervention: i2 Summit 2006

Innovations in Intervention or i2 Summit really is a new brand that we are putting on to this meeting which shows the members that right from the beginning we're starting anew, we're going to be fresh, we're going to be innovative, we're going to provide the latest in technical advances, the latest in educational tools to really bring the science and technology of interventional cardiology to the practitioner. We're targeting both practicing interventional cardiologists as well as nursing staff and hospital adjunct staff. It's very important that for all of us to understand that this is a team so we want the physicians, but also we want their assistants there because it is as a team that we are going to be working together to provide optimal care for the patients.

Robert A. Harrington, M.D., F.A.C.C., Co-chair, ACC.06

The meeting itself is really designed around the communities of cardiology to recognize them as individual groups but then to also bring them together. So what we are going to do at the meeting to celebrate the community is to arrange the content by therapeutic area so there will be sessions devoted to heart failure, sessions devoted to arrhythmia, sessions devoted to imaging.

And we'll try to locate those geographically within the convention center so that people who are predominately interested in imaging will be able to see content, attend educational sessions and at the same time, be located near their colleagues who are also attending other sessions in that area. At ACC.06 we'll have community rooms in vascular hypertension and prevention, ones in congestive heart failure, arrhythmia, imaging. There will also be community rooms dedicated to the Fellows in Training and the Cardiac Care Associates, but at the same time, we want the fellows and the Cardiac Care Associates to go to the other rooms, to be able to partake of that community as well as socialize with their peers in their domains

One of the things we've done this year is to recognize that imaging in particular is such an important part of our subspecialty and that it shouldn't be viewed in isolation. We shouldn't have separate imaging sessions for nuclear, echo, CT, MRI. Really, as practitioners, we are interested in how you bring all those modalities together to take care of individual patients, to address individual patient issues. And so for the first time we'll have an Integrated Imaging Spotlight where the experts in all of those imaging areas will come together to present, to discuss what are the best imaging modalities for individual patient cases, for individual diseases, to begin to help the practitioner think through "how is it that I use some of these modalities in my practice?"