Dear Colleague;

I am honored and pleased to serve as the fourth President of the International Society for Minimally Invasive Cardiac Surgery. Formed in 1997 to enhance, promote, and support research and education in minimally invasive cardiac surgery, the Society has grown and achieved significant recognition within the cardiothoracic community. ISMICS is taking the leadership role in sharing the direction of new and less invasive techniques in cardiac surgery on a global basis. We continue to promote cooperation with such organizations as STS, AATS, and EACTS, and we continue to foster a unique partnership with industry. It is an exciting time for our specialty and our Society. ISMICS provides an ideal academic platform for the young scientific investigator to present their experimental or clinical studies.

ISMICS is not only focusing on minimally invasive techniques in coronary surgery, but rather includes any new and interesting technology presented on the whole spectrum of cardiac surgery. This includes new techniques in valve surgery, arrhythmia therapy with particular focus on atrial ablation and surgical treatment of heart failure. Also experimental and first clinical studies in new strategies, such as angiogenesis treatment and cell transplantation, belong to the Society’s interest.

In addition, ISMICS wants to provide additional training opportunities for residents and surgeons, such as postgraduate courses and live surgical teleconferences. The whole training and education process of a modern cardiac surgeon needs to be continually refined to ensure it includes virtual training, teaching in endoscopy or experience with robotic telemanipulation systems.

Final plans are being made for the upcoming 5th Annual Meeting in New York City on June 20 – 23, 2002. The Program Committee, chaired by Dr. Hani Shennib

(continued on page 3)
From the Board in 2001

Highlights of the Board of Directors Meeting and the Annual Business Meeting
June 27, 2001 and June 30, 2001 / Munich, Germany

MEMBERSHIP STATISTICS
Current membership as of June 19, 2001, is made up of 556 Active Members and two Honorary members for a total of 558 members.

FROM THE TREASURER
Financial statements for the period January 1, 2001, through May 31, 2001 reflect the strong financial position of the Society.

REPORT OF THE SECRETARY
Dr. Shennib reported on the highlights from the January and June Board meetings:

- ISMICS has joined CTSNet, the largest cardiothoracic internet community in the world. ISMICS used its electronic abstract submission to facilitate the Annual Meeting abstract submission process.
- ISMICS negotiated a three-year contract with The Heart Surgery Forum. Oral or Poster Presenters are encouraged to submit a manuscript to The Heart Surgery Forum.
- The ISMICS newsletter will be published twice a year to keep ISMICS members informed of Society activities. Future newsletters will be distributed electronically and will be available on the website.
- ISMICS has begun a comprehensive review and restructuring of all standing Committees with the intent of making all Committees more active and involving more members. Beginning in January 2002, ISMICS Committees will have at least two regular face-to-face meetings per year, one held in conjunction with the Society’s Annual Meeting and one held in January. ISMICS is currently considering the appointments for the website, an Editorial Review Committee, an Advisory Board to the Board of Directors and the appointment of a Society Historian.
- ISMICS has signed a contract with the management company - PR/RI, which became effective on September 1, 2000. PR/RI now handles all of the administrative responsibilities of ISMICS, including the Board of Directors, Committees, Membership, the database and all financial services.
- The Society continues to increase dialogue with STS, AATS, and EACTS.
- ISMICS continues its unique partnership with industry, including hosting a first of its kind, corporate advisory dinner among the Board of Directors and industry.

FROM THE NOMINATING COMMITTEE
Dr. Mack presented the report.

<table>
<thead>
<tr>
<th>Position</th>
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<tr>
<td>President</td>
<td>Hermann Reichenspurner</td>
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<tr>
<td>Past President</td>
<td>Michael J. Mack</td>
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<tr>
<td>President-Elect</td>
<td>W. Randolph Chitwood</td>
</tr>
<tr>
<td>Secretary (3-year)</td>
<td>Hani Shennib</td>
</tr>
<tr>
<td>Treasurer (until 2003)</td>
<td>Steven R. Gundry</td>
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<td>Senior Advisor (2-year)</td>
<td>Kit Arom</td>
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<td>European Director (3-year term)</td>
<td>Anthony DeSouza</td>
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<td>North American Director (3-year term)</td>
<td>Randall Wolf</td>
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<tr>
<td>non-European and non-North American Director (3-year term)</td>
<td>Eugene Sim</td>
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<tr>
<td>Program Co-Chairs for 2002 (1-year term)</td>
<td>Hani Shennib</td>
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<tr>
<td></td>
<td>Valavanur A. Subramanian</td>
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NEW BUSINESS
Dr. Mack opened the floor up for general discussion from the membership. Dr. Mack remarked that ISMICS has made great strides in the past year in terms of growth and in recognition within the cardiothoracic community. However, the Society’s leadership realizes that this is just the beginning, and that in order to continue to grow ISMICS needs to be sensitive to the needs of the membership. Dr. Mack asked the membership to please share any thoughts, suggestions, opinions or ideas that they may have on the Society. The membership addressed specific issues relating to the number of papers accepted for presentation at the Annual Meeting, and suggested perhaps the Annual Meeting needed better scheduling. It was noted that there were inefficiencies in the audio-visual and poor transitions from one paper discussion to another. In addition, the membership suggested that the Program Committee further evaluate the oral presentation of posters. Finally, the membership encouraged future open discussions about Society issues.

Dr. Mack thanked the membership and assured them that the Board will consider all of the ideas and opinions at the next regularly scheduled meeting, which will be held at the time of the EACTS meeting in September in Lisbon, Portugal. In the meantime, members are encouraged to contact the President, President-Elect or the Secretary. Dr. Mack assured the audience that every effort would be to incorporate member ideas in the upcoming meeting agenda.
From the President  (continued from page one)

and Dr. Valavanur Subramanian, have completed the selection of abstracts and the final program will be available in the near future on the ISMICS website: www.ismics.org. This year for the first time a special, live telesurgical postgraduate course will be offered. At the main scientific meeting, the topics included are Beating Heart Surgery, Robotics, Atrial Ablation, Heart Failure, and New Operative Techniques from the Experts. There will be an excellent distribution of abstract presentations and invited lectures. Some of the highlights are specific symposia (e.g. on new anastomotic devices) and exciting scientific debates. The ISMICS Annual Scientific Meeting has become the international benchmark for the introduction and critical, peer review of new technology in heart surgery and I urge all members and those who want to become members to attend.

The meeting will be held at the New York Marriott Marquis in Times Square located in the heart of New York’s Theater District. All of New York City’s excitement and attractions are close by or just a cab ride away. In addition to the interesting scientific program, the chair of the Local Arrangements Committee has also planned an exciting social agenda to incorporate all that the “Big Apple” has to offer.

We are looking forward to an expansion of our current membership and I encourage any interested persons to contact myself or the executive staff office by e-mail at ismics@prri.com or by phone at 978-526-8330. I am truly looking forward to welcoming all of you at our annual meeting in the exciting city of New York.

Sincerely,
Hermann Reichenspurner, M.D., Ph.D.
President ISMICS

2001 ANNUAL MEETING Award Winners

PRESIDENT’S AWARD - BEST ORAL ABSTRACT PRESENTATION
David Adams, M.D., Boston, Massachusetts

HONORABLE MENTION - BEST ORAL ABSTRACT PRESENTATION - BASIC SCIENCE
Daniel Burkhoff, M.D., New York, New York

HONORABLE MENTION - BEST ORAL ABSTRACT PRESENTATION - CLINICAL
Sunil M. Prasad, M.D., St. Louis, Missouri

YOUNG INVESTIGATOR’S AWARD
Stephen Thelitz, M.D., Columbus, Ohio
Jacqueline Wunderlich, M.D., Columbus, Ohio

BEST USE OF AUDIO-VISUAL AIDS
W. Douglas Boyd, M.D., London, Ontario, Canada

BEST MODERATED POSTER
Fraser D. Rubens, M.D., Ottawa, ON, Canada
Marc Ruel, M.D., Ottawa, ON, Canada

HONORABLE MENTION - BEST MODERATED POSTER
M.P. Buijsrogge, M.D., Utrecht, The Netherlands

Thank you
The International Society for Minimally Invasive Cardiac Surgery wishes to thank the following companies for their support of the 2001 Annual Meeting:
Edwards Life Sciences
Genzyme
Guidant Europe
Medtronic Europe
Medtronic, Inc.
Novadaq Technologies
Percardia
St. Jude Medical

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John Pym, MD
Thomas A. Vassiliades, MD
Marco Zenati, MD

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Michael J. Mack, MD
Patrick Nataf, MD

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Joseph F. Sabik, III, MD
Craig Smith, MD
Ludwig K. vonSegesser, MD
Fifth Annual Meeting of the
INTERNATIONAL SOCIETY FOR MINIMALLY INVASIVE CARDIAC SURGERY

June 20-23, 2002 / Marriott Marquis, New York, New York

Preliminary Program Highlights

THURSDAY, JUNE 20, 2002

1:00 – 5:00
LIVE CASES from Lenox Hill Hospital
Minimally Invasive Left Ventricular Aneurysm Repair – Left Thoracotomy
Valvanur A. Subramanian, M.D.

Lateral MidcAB, Proximal Aortic Vein Graft Connector
James D. Fonger, M.D.

Trans-Abdominal Robotics, Bilateral CABG
Didior F. Loulmet, M.D.

Subclavian MIDCAB to Ramus Intermedius with Endoradial Vein Harvesting
Mark W. Connolly, M.D.

Interim Presentation: Neurological Injury: Pump, Clamp and no Touch - What Makes the Difference?
Antonio M. Calafiore, M.D.

6:00 – 7:30
Industry Sponsored Symposium

FRIDAY, JUNE 21, 2002

8:00 – 10:00
Featured Abstracts: Coronary Outcomes
Moderators: Valvanur A. Subramanian, M.D.
Joseph F. Sabik, III, M.D.

10:15 – 12:00
Heart Failure
Moderators: Bruno Reichart, M.D.
Michel Carrier, M.D.

10:15 – 10:30
New Techniques for Ventricular Remodeling
Hermann Reichenspurner, M.D., Ph.D.

10:45
Biventricular Pacing for Congestive Heart Failure: Early Experience in Epicardial Lead Placement vs. Coronary Sinus Placement
Kara J. Quan, M.D.

11:00
Ventricular Assist Devices – Impact of the REMATCH Trial
Eric A. Rose, M.D.

11:30
Guest Speaker - Jeff Gold, M.D.
September 11th – Ground Zero: A Physician’s Perspective

12:00 – 1:30
Lunch Symposium

SATURDAY, JUNE 22, 2002

8:00 – 10:00
Featured Abstracts: Innovative Coronary Techniques
Moderators: Gideon Uretzky, M.D.
Marco Zenati, M.D.

10:15 – 11:30
Featured Abstracts: Valve and Aortic Surgery
Moderators: Stephen B. Colvin, M.D.
Edward B. Diethrich, M.D.

11:15– 12:00
Guest Speaker – Amy Waldman
New York Times Correspondent
A Nation Challenged: Diaries of Reporters in Afghanistan - Fear, Numbness and Spectacle

12:00 – 1:30
Lunch Symposium

1:30 – 2:30
Forum Abstracts: Basic Science
Moderators: Paul F. Grundeman, M.D.
Francis G. Duhaylongsod, M.D.

2:30 – 3:25
Forum Abstracts: Arrhythmia
Moderators: Randall K. Wolf, M.D.
Robert G. Metheny, M.D.

3:25 – 3:50
Implications of New Technology on Training of Cardiac Surgeons – Is a Change Needed?
William A. Baumgartner, M.D.
THANK YOU

As of March 29, 2002, the following companies are providing sponsorship support of the Fifth Annual Scientific Meeting:

- Medtronic
- Guidant
- Genzyme BioSurgery
- St. Jude Medical
- Ethicon
- Computer Motion
- CardioVentions
- Percardia
- Bayer
- Coalescent Surgical
- Edwards Lifesciences
- Intuitive Surgical
- JOMED

In addition, ISMICS thanks the following companies* for their support as exhibitors:

- AFX, Inc.
- Applied Medical
- Boston Scientific / EP Technologies
- CardioVations, a division of ETHICON
- Coalescent Surgical, Inc.
- Fehling Surgical Instruments, Inc.
- Geister Medizintechnik GmbH
- GUIDANT
- Haemoscope Corporation
- HeartStent Corporation
- Intuitive Surgical, Inc.
- LIDCO Limited
- Medivance®
- Medtronic, Inc.
- Novadaq Technologies
- Scanlan International, Inc.
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- W.B. Saunders, Mosby, Churchill, Livingstone

*current as of March 29, 2002

For additional information, please contact:

International Society for Minimally Invasive Cardiac Surgery
13 Elm Street, Manchester, MA 01944
Phone: (978) 526-8330 / Fax: (978) 526-4018
E-Mail: ismics@prri.com
www.ismics.org
What is ISMICS and Why Does it Exist?

“The only thing constant is change. ...and the nature of change is exponential. For people who find change something they are not content with, I could image that being a real problem. The collective effect of change is large and generally positive.”


The International Society for Minimally Invasive Cardiac Surgery was formally founded in 1997. It was the coalescence of early meetings in the field of minimally invasive cardiac surgery and was founded to provide a forum for new ideas in the emerging field of minimally invasive cardiac surgery. These concepts and experiences were largely in the early stages of development, and innovative—but were not necessarily ready for “primetime”

The past year has been an eventful one for ISMICS. The Society elected new management PRRI. ISMICS became a member of CTSNet (www.ctsnet.org), with a direct link to ISMICS from the CTSNet website. We signed a new 5-year contract with Heart Surgery Forum as the official journal of ISMICS. Membership ranks swelled to its current 558 members.

As I conclude my year of President at ISMICS, I feel privileged to have served its membership. At the end of my career, when I will reflect upon the highlights, I feel confident that I will view the year I spent as President of ISMICS as one of the accomplishments of which I am most proud.

The year began with ISMICS in an identity crisis with the question being asked: “What is that “raison d’etre” for ISMICS?” Why does ISMICS need to still exist? The main body of work in the field, beating heart surgery, was being rapidly assimilated into mainstream cardiac surgery. The programs of the established societies were now replete with presentations of minimally invasive surgery. Wasn’t ISMICS job now complete? To answer this question, one needs to look to the field of technology in a work called The Innovators Dilemma by Clayton M. Christensen. He describes the evolution that occurs when innovative companies become successful and mainstream. The tendency is to lose the creative spirit that originally gave birth to the innovation. One must always seek to recapture that creative spirit and continue the innovation. Innovation in cardiac surgery does not begin and end with beating heart surgery; there is fertile field for continued innovation in which ISMICS should serve as the “incubator” of new ideas.

Closer to home is the paradigm shift in coronary revascularization by catheter-based therapy. The original introduction of coronary balloon angioplasty by Greuntzig in 1979 was clearly disruptive technology. But in the 22 years since, the sustaining technology of guiding catheters, steerable wires, low profile delivery, and exchange systems, closure devices, stents, IVUS, antiplatelet therapy, 2b3a agents, brachytherapy and drug eluting stents have significantly improved the original value of Greuntzig’s disruption.

One can view beating heart surgery as disruptive. But it is the sustaining technology that will ultimately create the value to beating heart surgery. Sustaining technology such as stabilizers, now in their 2nd and 3rd generation, carbon dioxide blowers, shunts, pericardial stay-sutures, suction exposure devices, anastomotic connectors and possibly robotics. We are really only 5 years into the evolution of beating heart surgery and sustaining technology and techniques will ultimately make the procedure more patient friendly, more surgeon friendly and therefore of value. That sustaining technology should be developed by the members of ISMICS.

One should also realize that in the field of minimally invasive cardiac surgery the “low hanging fruit” has already been picked. However there is a lot of other fruit ripe for picking, but “higher up” on the cardiac surgery tree. Those areas include new treatments for atrial fibrillation, gene therapy delivery, congestive heart failure management, percutaneous valve surgery, muscle and stem cell transplantation, tissue engineered valves and conduits, distal anastomotic connectors, artificial small vessel conduits and image-guided surgery.

Despite what the catheter-based intervention world may believe, this is not the beginning of the end of cardiac surgery, but the end of a new beginning. The mandate for the members of ISMICS is to continue to innovate, continue to incubate, continue to change and to cause change. In order to effect these changes, the members should be cognizant of the drivers of adoption:

- Validation of clinical outcomes
- New technology to create ease of use
- Training and education in new technology and techniques.

Members of ISMICS should focus on these three areas to enhance the value of technology and techniques already incubated and should look to the “new” new thing so that ISMICS can fulfill its role as the “incubator of cardiac surgery”.

Excerpts from the Presidential Address given by Michael Mack, M.D. at the 4th Annual Meeting of ISMICS
A Glimpse into the Future?

Hermann Reichenspurner, M.D., President
Michael J. Mack, M.D., Past President

During the 4th Annual Meeting of the International Society for Minimally Invasive Cardiac Surgery (ISMICS), the Board of Directors hosted a dinner for industry sponsors of the meeting. The purpose and focus of the evening was to conduct a forum to elicit ways in which surgeons and industry could better “partner” together in the development of new technology and techniques in surgery. The specific agenda was to determine how ISMICS could help foster this relationship. The dialogue was open, frank and meaningful. Recurring themes from the evening included: medical meetings; industry not feeling like true partners; and the need for ISMICS to increase its membership and registrants to the annual meeting.

As part of the evening, participants were asked to answer the following question. “In your opinion, predict the three ‘hottest’ areas and the three ‘coldest’ areas in cardiac surgery in the next 3-5 years.” The results are as follows:

<table>
<thead>
<tr>
<th>WHAT’S “Hot”</th>
<th>WHAT’S “Not”</th>
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<tr>
<td>1. The facilitated anastomosis</td>
<td>1. Robotics</td>
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<td>2. New treatments for congestive heart failure</td>
<td>2. On pump/sternotomy CABG</td>
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<td>3. New treatments for atrial fibrillation</td>
<td>3. Vein grafts</td>
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<td>5. Other areas with 1-2 votes included</td>
<td>5. Transmyocardial laser Revascularization</td>
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<td>b. Valve fasteners</td>
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<td>c. Destination therapy</td>
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<td>d. Percutaneously deployable valves</td>
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<td>e. Prosthetic valves</td>
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<td>f. Biventricular assistance for limited access surgery</td>
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<td>g. Tissue engineering</td>
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<td>h. Image guided surgery</td>
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<td>i. Arterial grafting</td>
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<td>j. Hybrid procedures</td>
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<td>k. Development of small vessel conduit</td>
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<td>l. Information technology</td>
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<td>m. Perfusion refinements</td>
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<td>n. Stroke prevention (embolic devices)</td>
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<td>7. Open mitral valve surgery</td>
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<td>8. Atrial fibrillation treatment</td>
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<td>9. Limited access surgery</td>
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<td></td>
<td>i. Glues and adhesives</td>
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<td>j. Anastomotic devices</td>
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<td>k. Xenotransplantation</td>
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<td>l. Angiogenesis</td>
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<td>m. Cardiac surgery</td>
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<td>n. Gene therapy</td>
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<td>o. Total artificial heart</td>
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<td>p. Tissue engineered valves</td>
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<td>q. Alternative revascularization techniques</td>
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<td>r. Heart center in every town</td>
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<td>v. Mechanical valves</td>
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WELCOME NEW MEMBERS

Masoud A. Alzeerah, MD, Amarillo, Texas
Michael Argenziano, MD, New York, New York
Rosalind Bacon, MD, London, England
Thomas Beaver, MD, Gainesville, Florida
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Ralph de la Torre, MD, Boston, Massachusetts

Membership in ISMICS

ISMICS is the worldwide organization dedicated to advancing minimally invasive surgical techniques. Any surgeon or physician engaged in, or interested in minimally invasive cardiac surgery, is encouraged to apply for membership. Members of ISMICS receive a subscription to the print and electronic versions of Heart Surgery Forum, reduced registration fees to Scientific Sessions and the Annual Meeting, and are eligible to participate as a discussant or moderator at meetings, and serve on ISMICS Committees.

Please contact the ISMICS Administrative office for additional information or an application:
International Society for Minimally Invasive Cardiac Surgery
13 Elm Street, Manchester, MA 01944
Phone: (978) 526-8330 / Fax: (978) 526-4018
E-Mail: ismics@prri.com / www.ismics.org
The International Society for Minimally Invasive Cardiac Surgery (ISMICS) was formed in 1997 to enhance, promote, and support research and education in and related to the field of minimally invasive cardiac surgery. The Fifth Annual Scientific Meeting of the International Society for Minimally Invasive Cardiac Surgery (ISMICS) will provide an open forum for new discoveries and emerging techniques in cardiac surgery. The ISMICS Annual Scientific Meeting has become the international benchmark for the introduction of and critical, peer review of new technology in heart surgery.

**Preliminary Topics**
- Beating Heart Surgery
- Robotics
- Atrial Fibrillation
- Heart Failure
- Operative Techniques from the Experts
- Basic Science
- New Techniques in Valve Surgery
- Interventional Vascular Surgery
- Anastomotic Devices

**Who Should Attend?**
- Cardiac and Thoracic Surgeons
- Anesthesiologists
- Interventional Cardiologists
- Surgical Assistants and Perfusionists
- Cardiothoracic Nurses

For more information about ISMICS, we invite you to visit our Web site at http://www.ismics.org