Minutes of the Fall Meeting of the Pediatric and Congenital Electrophysiology Society Held November 14, 2006 at the Hyatt Regency, Chicago

The meeting was called to order by Dr. John Triedman, President at 7:05 AM

- 1. There were 33 members present for the meeting. Following a "Welcome" from Dr. Triedman, the rationale for the name change from "pediatric Electrophysiology Society" to Pediatric and Congenital Electrophysiology Society (a/k/a PACES) was introduced. There has been significant interest in participation from parties not "traditionally" involved in the group such as HRS as well as adult trained cardiologists involved in the care of adults with congenital heart disease who have arrhythmias. The organization will keep it's original domain/website address www.pediatricepsociety.org.
- 2. The members were then apprised of the reason for proposing a breakfast meeting at the American Heart Association meeting as opposed to an evening dinner meeting like that held in Dallas last year at the HRS meeting. Interest in the fall meeting has been roughly estimated to be about 10% of the membership and thus, in order to finance and effectively program such an event, it was felt by the Executive Committee that the focus of the organization should be at the spring HRS meeting where the majority of membership routinely attends. The fall meeting, which will continue to be held at the AHA, will be focused on planning activities, nonacademic Society business and contact of the Executive Committee with the membership. We will discuss this further at the upcoming spring meeting at HRS and, if agreeable to the membership, will continue in this manner.
- 3. Dr. Triedman announced that we will be soliciting the membership by email in the coming weeks for nominations for the Treasurer position in the Society. Dr. Triedman's term as president will expire this spring and Dr. Van Hare will assume that role. Dr. Friedman will assume the position as vice-president and Dr. Saul as Secretary. The term for each of these roles is two years. Dr. Triedman will assume a position on the Executive Council as immediate past-president. The slate will likely include 3 or 4 candidates and voting, as in the past, will be done on-line. Candidates should be aware of the nomination and willing to submit a personal statement outlining their qualifications and interest in the leadership position that will be a 10-year commitment (including the position on the Executive Council as immediate past-president). The commitment includes availability for phone conferences 4-6 times per year plus attendance at one of the two meetings. A discussion then ensued concerning the optimal time commitment for each position and Dr. Deal, past-president of the Society, noted that a 2 year term allows for enough time to accomplish goals set by the membership but that a one year term is insufficient.
- 4. The Treasurer's report was summarized by Dr. Triedman. Available funds currently are about \$10,500 with about 1/3 from membership dues. The later have increased with the addition of on-line payment and the rest of the funds come from industry support (Full Report to follow in an Addendum).

- 5. Activities for HRS: A group is working on the afternoon and evening meeting at Denver Children's Hospital on the topic of Sudden Cardiac Death in the Young. The Tuesday afternoon event, as proposed by Dr. Stu Berger, will be an Official Satellite Event of the HRS meeting and will be a ticketed event. Wednesday will not be a flexible Mini-Course day but will consist of 2 conferences, the agendas of which are being worked on by Ron Kanter and Robert Campbell. The evening meeting will again be a mixed social and academic affair with an adult trained cardiologist speaker addressing the group on sudden death and ventricular dysfunction.
- 6. Fellowship Award- Dr. Triedman has received a verbal commitment from Biosense Webster, Inc. for an academic prize for fellows or young faculty presenting original research that has been presented at the HRS or at another meeting in the previous calendar year that has not been published in manuscript form as of the time of the presentation. The prize will be on the order of \$2,000.
- 7. Inter-organization Interaction: There has been recent communication with ACC about the lack of formal involvement of a pediatric cardiologist on the ACC EP Committee and this is being addressed with the addition of a qualified candidate for this coming year. There is also a pediatric cardiologist now involved with writing questions for the IHBRE examination (the successor of the NASPExam). In addition, Dr. Van Hare is working with Mark Carlson in addressing the issue involved with implantation of ICDs. This will now incorporate the opinions of the pediatric EP community. PACES will investigate the AHA and ACC committee structure to make sure that going forward, there is adequate representation of the pediatric cardiologists on all of the appropriate committees.
- 8. Dr. Wayne Franklin addressed the issue of drafting a response to the ACC/AHA/ACP Clinical Competency Statement, which does not deal with clinical competency in caring for children nor does it address the issue of adults with congenital heart disease. The option of bringing this to the attention of the AAP was discussed as relates to the unintentional exclusion of our group in framing Competency Statements. It was left that the Executive Committee will discuss with Dr. Franklin how to best approach these groups so that we are not excluded in the future and how we can redress the problem with some type of published statement from PACES.
- 9. Update on Clinical Activities: Dr. Elizabeth Stephenson addressed the group on behalf of Principal Investigator Dr. Shu Sanatani regarding the current Canadian government supported study on the use of digoxin in the treatment of infant SVT. This is a double blind study comparing digoxin and propranolol in control of SVT in newborns that is currently underway in three institutions with another 7 in the IRB process. In addition to Dr. Sanatani, Dr. Elizabeth Stevenson from Toronto Sick Kids can be contacted if you are interested in participating. The goal is to enroll between 200-300 patients over a 2-3 year timeframe. Another study is a survey by Dr. Frank Zimmerman concerning reproductive issue in adult patients with CHD. He plans on presenting the data at HRS and the due date for abstracts has now moved to January 3, 2007. This survey will be available on the Pediatric

and Congenital EP Society website (www.pediatricepsociety.org), and members are encouraged to complete it.

10. As there was no New Business, the meeting was adjourned at 8:35 AM.

Submitted by Dr. Richard Friedman 27 November 2006