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會訊



7月12日 夏季會 Post-EuroPCR 2025 Highlights Symposium 合影

2025年8月

臺灣介入性心臟血管醫學會(TSCI)

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臺灣介入性心臟血管醫學會會訊(第一百零六期, August, 2025)

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致各位親愛的介入心臟血管醫學會會員:

承蒙高理事長的邀請,讓我有幸接任「編輯暨數位委員會」主委一職。在這一年多的時間裡,在理事長及各位先進的支持下,委員會的工作得以順利推展,謹在此與大家分享這段時間的努力與成果。

編輯暨數位委員會的核心任務,是確保學會的學術期刊 Journal of Taiwan Society of Cardiovascular Interventions 能如期出刊,並維持編輯與審稿的品質。這是一份責任重大的



工作,需要仰賴眾多編委與審稿專家的無私奉獻。在大家的協力下,我們成功完成 每年兩期、共四期期刊的出版,從創刊迄今累積刊登文章共超過152篇,包括41篇 Original Article,32篇 Review Article,以及79篇 Case Report,平均每篇均經過嚴謹 的審稿流程。今年度更主動邀請在年會與夏季會獲獎的精采介入案例,撰寫成案例報 告刊登於期刊,讓更多會員能透過期刊持續學習,進一步交流臨床經驗並獲得啟發。 值得一提的是,在這幾年的努力下,期刊已於2024年一月份,正式獲得醫策會「教 學醫院評鑑學術性期刊」的認定,之後會員刊登在期刊的文章,就可以用於醫院評鑑 了。這不僅象徵學術品質的保證,也是全體會員共同的榮耀。

此外,這一屆在高理事長的發想下,我們從原本的期刊出版任務之外,更進一步 積極拓展數位平台的應用,成立臉書社團作為會員案例分享與交流的園地。自開放以 來,已有超過528名會員加入,累積分享超過53個臨床案例,其中包含許多困難且 富啟發性的案例。社團的活絡運作,讓年輕醫師能快速獲得臨床啟發,並促進不同世 代醫師之間的專業互動與連結,逐步形成學會內部寶貴的數位知識庫。

回顧這段歷程,雖然前後兩任任期即將屆滿,但我深感收穫良多。這不僅是一份 挑戰,更是一段寶貴的成長經驗。我要誠摯感謝理事長的信任、秘書處的協助,以及 所有參與編輯、審稿與社群經營的同仁與會員。因為大家的支持,編輯暨數位委員會 才能在學術出版與數位交流上不斷邁進。

展望未來,編輯暨數位委員會將持續強化學術期刊的品質與能見度,並拓展數位平台的應用深度,期望能結合傳統出版與新媒體力量,打造兼具學術價值與臨床實用性的資源,服務更多會員。敬祝

各位會員身心安康、工作順利。

編輯暨數位委員會主委 呈字燈

會務活動-入會申請書

臺灣介入性心臟血管醫學會 入會申請表

日

填表日期: 年 月 名 性 別 □男 □女 貼相片處 身分證 英文姓名 (實貼一張) 號碼 省(市) 出生日期 年 月 日 出生地 縣(市) 最高學歷 學校 科系(所) 單位/職務 現任醫院 O: 户籍地址 電 H: 話 M:1. □同戶籍地址 通訊地址 必 □通訊地址 填 E-mail(必填) Fax: (a)______ 期間: ___ 年 ___ 月至 ___ 年 ___ 月 (1) 醫院:_____ 醫師主管姓名: 列印後主管簽名:_____ 介入性 醫師主管姓名:_____ 列印後主管簽名:_____ 工作經歷 列印後主管簽名:_____ 醫師主管姓名: 名:____ 名:____ 推薦會員 推薦會員 (1)(2) 列印後簽名:_____ 列印後簽名:_____ □ 同意入會 審查結果 □普通會員 □ 不同意入會 □ 準會員 (此欄由審 員 會員證 □ 名譽會員 查人員填 號碼 類 審查人員: □ 贊助會員 寫)

本人茲遵照 貴會章程之規定,申請加入 貴會為會員,遵守 貴會一切章程、簡則、決議等,謹此檢具各項證件,敬希 鑒核准予入會。

此致 臺灣介入性心臟血管醫學會

申請人: (簽章)

中華民國 年 月 日

繳驗資料:

- □1. 入會申請表一份(共兩面)
- □2. 本人二吋照片共三張
- □3. 身分證正反面影本一份
- □4. 最高學歷畢業證書影本一份
- □5. 醫師會員 -- 心臟專科醫師證書影本一份(若無,請附醫師證書影本一份) 醫事會員 -- 師級醫事人員資格證書(護理師或放射師或醫檢師)影本一份
- □6. 服務(在職)證明正本一份

注意事項

- 一、準會員申覆為普通會員:
 - 1. 請在入會申請表左上角自行加註「準會員申覆普通會員」字樣。
 - 2. 證明從事介入性心臟血管醫學實務工作滿一年,須由現職主管簽章。
- 二、列印入會申請表格,填寫完整後,將紙本資料備齊全,郵寄至學會進行審查。
- 三、介入性工作經歷
 - 1. 醫師準會員指真正從事介入性工作日起算,醫師普通會員指取得心臟專科證書起算。
 - 2. 醫事人員指真正從事介入相關工作日起算。
- 四、醫師申請入會之兩位推薦會員,必須為本會之普通會員。
- 五、介入性工作經歷須由現職之醫師主管在「最近一年介入性工作經歷」欄位親自簽名。

臺灣介入性心臟血管醫學會 秘書處

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臺灣介入性心臟血管醫學會 第十屆第八次學術委員會會議記錄

一、時 間:114年8月25日(星期一)PM6:30 實體+線上

二、地 點:臺灣介入性心臟血管醫學會會議室

三、出席人員:【主 委】張其任

【副主委】許榮城

【委 員】<u>方修御、王宇澄、宋思賢、李政翰、曹承榮、郭風裕、黃慶昌、</u> 董穎璋、劉尊睿、蔡政廷、盧澤民、曹殿萍

四、請假人員:【委 員】邱正安、顧博明、黃啓宏

五、列席人員:【理事長】高憲立

【秘書長】陳盈憲

【青年委員會主委】蔡依霖

【秘 書】賴瑋儀、藍翊、劉子瑄、黃玉卉

* 下底線者為線上參加

六、報告事項:

七、議程:

提案一:討論 TTT 2026 各時段之節目表。

※決議:1. 請許榮城副主委及宋思賢委員協助規劃 Live Demo Mini Lecture 講師。

- 2. Keynote Speech 新增 Mitral 相關講題, Gary 的講題請他自訂,並請主委規 劃 Keynote Speech 講師。
- 3. 鑒於 TTT@TCTAP2025 無 TCTAP 端的 Faculty, 下次 TTT@TCTAP Joint Session 時建議 TCTAP 邀請及規劃 TCTAP 端的 Faculty Members。
- 4. Cross-Strait 以 Online 為主,也可以請邱正安醫師、王志鴻醫師及吳炯仁醫師建議名單,再請曹殿萍委員協助規劃。
- 5. ENCORE SEOUL@TTT 提醒 TTT 端的講師題目不要重複。
- 6. 預計9月底完成所有節目表。

提案二:外賓邀請(含廠商推薦)名單確認。

※決議:1. 四位廠商推薦外賓同意列為大會外賓,再請主委指派大會任務。
Patrick Serruys, Yoshinobu Onuma, Tsung-Ying Tsai, Yoshihisa Shimada

2. 秘書處再將外賓名單 (William F. Fearon, Giulio Guagliumi) 提供給雅培及波科。

第十屆第八次學術委員會會議

- 3. 可取代 TCT@TTT Highlights 的課程為 Highlight of Important International Conferences (ACC, EuroPCR, TCT, ESC), 請參加的台灣醫師分享,或是 Highlights of Late Breaking Trial 2025.
- 4. 秘書處寫信給 TCT 詢問是否有意願繼續合作以及擬定合約。

提案三:討論下次開會日期。

說明:調查10月13及14日。

八、臨時動議

九、散會

第十屆第五次调邊伽管介入委員會會議

社團法人臺灣介入性心臟血管醫學會第十屆第五次週邊血管介入委員會會議記錄

一、時 間:114年8月26日(星期二)18:30

二、地 點:學會會議室+線上視訊 Google Meet

三、出席人員:【主 委】陳俊吉

【委員】吳敘平、李任光、李政翰、林岳鴻、張嘉修、徐仁德、許栢超、

蔡明龍、薛書凱、鍾伯欣

四、請假人員:徐中和、梁懷文、黃玄禮、吳承學、謝慕揚、王奇彥

五、列席人員:楊淵博醫師

【秘書長】陳盈憲

【秘 書】賴瑋儀、劉子瑄、藍翊、許亞芸

* 下底線者為線上參加

六、報告事項

下半年度週邊介入相關繼續教育課程如下:

NO.	時間	主題	規劃委員(稱謂省略)
1	114.11.01	Peripheral Live Demonstration 2025 (彰基)	王奇彦、楊淵博
2	115.01.10-11	TTT2026	張嘉修

七、議程:

提案一:討論 11 月 1 日 Peripheral Live Demonstration 2025 節目表。

說明:1、由王奇彥委員及楊淵博醫師共同規劃。

2、秘書處將於 9/4 會同轉播商至彰化基督教醫院進行第一次場勘。

※決議:初步節目表確認完成,請楊醫師於9月初前提供完整節目表,秘書處將進行邀約作業。

提案二:確認 TTT2026 週邊時段節目表。

說明:由張嘉修委員協助規劃,節目表已轉交至學術委員會,詳見附件一。

※決議:節目表確認完成,TTT2026 當天請同一時段的 Moderator 及 Panelists 一起至台上。

八、臨時動議:下次會議暫訂於11月中,討論冠狀動脈藥物塗層球囊(DCB)一案。

九、散會

第十屆第五次週邊伽管介入委員會會議

附件一

Sunday, Jan. 11 (W7) 15:20 - 16:50

ROOM 301

Peripheral Symposium

Time	Speaker	Lecture Title	Moderator
15:20		Opening Remarks	
15:25	Hsuan-Li Huang (黃玄禮)	The Art of Recanalization – Emerging Strategies of SFA Calcified Occlusion (Can New Devices be a Game Changer?)	Chun-Chi Chen (陳俊吉)
15:40	Jen-Kuang Lee (李任光)	Bypass Surgery or Drug Stent? – Modern Management of BTK Lesions in CLTI (Can LIFE-BTK be applied to Real Life now?)	Shen Sun (孫 坤)
15:55	PANEL DISCUSSION	Panelists Ying-Sheng Li (李應陞)、Ming-Lung Tsai (蔡明龍) Bor-Hsin Jong (鍾伯欣)、Huai-Wen Liang (梁懷文)	
16:05	Chun-Yu Lin (林俊宇)	The Art of Occlusion – Expanding Horizons in Embolization Therapy (Up to Date! the Devices and Novel indications)	Chung-Ho Hsu (徐中和)
16:20	Chia-Hsiu Chang (張嘉修)	Consensus or Controversies? – Latest Evidence and Dispute of Venous Stenting (Up to Date! Inflow types and Stage evaluation)	Po-Chao Hsu (許栢超)
16:35	PANEL DISCUSSION	Tai-Wei ('hen (陣 素 位)、Hsu-Ping Wu (乌 鈴 平)	
16:45		Closing Remarks	Chun-Chi Chen (陳俊吉)

~ Registration & Exhibition ~



~ PCI for Patients with Prior TAVI ~























∼ Case Competition **∼**



∼ Case Competition **∼**



∼ Case Competition **∼**













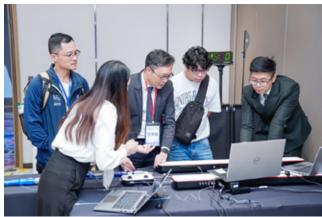




∼ Hands-On Training: TAVI and Engaging the Coronary Artery in Post-TAVI Anatomy ∼













~ PCI for Calcified Left Main Lesion ~



















∼ Luncheon Symposium ∼



























~ Post-EuroPCR 2025 Highlights Symposium ~





















~ KSIC@TSCI ~















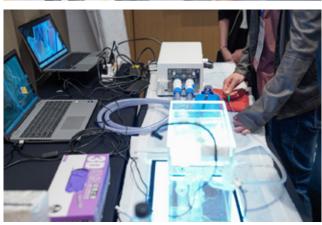


∼ MV-TEER Workshop ∼









\sim PCI for Coronary Artery with Anomalous Origin \sim

















~ Modern Varicose Vein Management: Integrated Strategies from Diagnosis to Intervention ∼













~ Nurse/Technician Symposium ~



~ APCASH@TSCI ~



~ Tricuspid Regurgitation Management: A Dialogue Between Scalpel and Catheter in the Contemporary Era ∼





















活動集錦 - 7月17-19日 CVIT























活動集錦 -8月02日Beyond the Coronaries: Specialized Interventional Techniques for Rare Cardiovascular Conditions



活動集錦 -8月02日Beyond the Coronaries: Specialized Interventional Techniques for Rare Cardiovascular Conditions















活動集錦 -8月16日2025 Rotablation Atherectomy Training and Certification Course





























INFORMATION FOR AUTHORS

Scope

Journal of Taiwan Society of Cardiovascular Interventions (J Taiwan Soc Cardiovasc Intervent) is an official Journal of Taiwan Society of Cardiovascular Interventions. It is a peer reviewed journal and aims to publish highest quality material, both clinical and scientific, on all aspects of Cardiovascular Interventions. It is published on a basis of 6 months.

Article Categories

Reviews, Original Articles, Brief articles including images, Case Reports, Letters to the Editor, Editorial Comments. Please look into each category for specific requirements and manuscript preparation.

Manuscript Preparation: General Guidelines

Taiwan Society of Cardiovascular Interventions reserves copyright and renewal on all material published. Permission is required from the copyright holder if an author chooses to include in their submission to *Journal of Taiwan Society of Cardiovascular* Interventions any tables, illustrations or other images that have been previously published elsewhere. Copy of the letter of permission should be included with the manuscript at the time of submission.

Manuscripts should conform to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (*N Engl J Med* 1997;336:309-15). Text should be double-spaced throughout. The Title page, Abstract, Body Text, Acknowledgments, References, Legends, Tables and Figures should appear in that order on separate sheets of paper. Define all abbreviations at first appearance, and avoid their use in the title and abstract. Use generic names of drugs.

Covering Letter

The main author should write a covering letter requesting the publication of the manuscript and assuring that the other authors have read the manuscript and agree to its submission. The editorial board reserves the right to confirm this in case it needs to.

Title Page

The title page should include a Title, full names and affiliations of all authors, and an address, telephone number, facsimile number and E-mail address for correspondence. Acknowledgment of grant support should be cited. A short Running Title (40 characters or less) should be provided.

Abstract

A concise description (not more than 250 words) of the Purpose, Methods, Results, and Conclusions is required. Give 3-6 key words for indexing.

Body Text

The text of Original Articles should be divided into Introduction, Materials and Methods, Results and Discussion sections. Other article types may use other formats as described in specefic guidelines against each category of manuscript below. Acknowledgments are typed at the end of the text before references.

References

References are cited numerically in the text and in superscript. They should be numbered consecutively in the order in which they appear. References should quote the last name followed by the initials of the author(s). For less than four authors provide all names; for more than four, list the first three authors' names followed by "et al.". List specific page numbers for all book references. Refer to Index Medicus for journal titles and abbreviations. Examples are provided below. Authors are responsible for the accuracy of the citation information that they submit.

Journals

- 1. Xu J, Cui G, Esmailian F, et al. Atrial extracellular matrix remodeling and the maintenance of atrial fibrillation. *Circulation* 2004;109:363-8.
- 2. Boos CJ, Lip GY. Targeting the renin-angiotensin-aldosterone system in atrial fibrillation: from pathophysiology to clinical trials. *J Hum Hypertens* 2005;19:855-9.

Books

- 1. Gotto AJ, Farmer JA. Risk factors for coronary artery disease. In: Braunwald E, Ed. *Heart Disease: A Textbook of Cardiovascular Medicine.* 3rd ed. Philadelphia: Saunders, 1988:1153-90.
- 2. Levinsky NG. Fluid and electrolytes. In: Thorn GW, Adams RD, Braunwald E, et al, Eds. *Harrison's Principles of Internal Medicine*. 8th ed. New York: McGraw-Hill, 1977:364-75.

Tables

All tables should be cited, by number, in the text. It should be typed double spaced, give a title to each table and describe all abreviations or any added relevant information as a footnote. Type each table on a separate page.

Figures & Illustrations

Number figures in the order in which they appear in the text. Figure legends should correspond to figure/illustration numbers and appear on a separate sheet of paper. Prepare your figures according to your mode of submission:

e-mail Submission: Figures should be submitted in high-resolution TIF format, or alternatively in GIF, JPEG/JPG, or EPS format. The figures should be placed in separate files, named only with the figure numbers (e.g. "Figure1.tif".)

Regular Mail: Photographs and drawings should be unmounted, glossy prints, $5" \times 7"$ in size. Three sets of each illustration must be submitted in a separate envelope. Label the back of each figure with the title of the article and an arrow indicating the top of the figure.

Manuscript Preparation: Specific Guidelines

Review Articles. These are scholarly, comprehensive reviews whose aims are to summarize and critically evaluate research in the field and to identify future implications. Unsolicited reviews may be submitted to the editor-in-chief and will be subject to approval by the editorial board. Instructions for Title page, Abstract, References, Tables and Illustrations/figures remains the same. The text can follow independent pattern as per the authors desire, subject to approval of the editorial board.

Original Articles. Clinical human studies and experimental studies will appear in this category. It should not exceed 6,000 words including references and figure legends. It should conform the general pattern of submission i.e., Title page, Abstract, Body Text, References, Tables and Illustrations/figures.

Brief Articles including images. These will present brief clinical, technical, or preliminary experimental results or cardiovascular intervention related images and should not exceed 3,000 words. It should conform the general pattern of submission i.e., Title page, Abstract (< 200 words), Body Text, References, Tables and Illustrations/figures.

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