

## SCAI 2025 Early Career Research Grant Application

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**Application Number:** 

Date Received:

### **TITLE OF PROJECT**

## **SELECT 2025 GRANT and RELEVANT RESEARCH TOPIC:**

SCAI/ABBOTT ECRG (\$50,000 Grant)

Research on one of the following topics:

Factors impacting outcomes in patients with chronic limb threatening ischemia (CLTI) treated with drugeluting resorbable scaffolds (e.g. patient level variables, focal or complete scaffolding, intravascular imaging, pre- and post-procedure variables, etc.)

Strategies and treatment outcomes for intravascular imaging and vessel preparation, including orbital atherectomy, in the treatment of infrapopliteal lesions in patients with CLTI with drug-eluting resorbable scaffolds

Factors contributing to the disparities in below-the-knee CLTI treatment choice and care, including with drugeluting resorbable scaffolds

## SCAI/EDWARDS LIFESCIENCES ECRG (\$70,000 Grant)

Research on one of the following topics related to Transcatheter Aortic Valve Replacement (TAVR):

Disparities in treatment (e.g., by gender, race, ethnicity, age, geography, etc.) and potential solutions Factors contributing to the underdiagnosis of aortic stenosis and potential solutions to address them.

Recent treatment and outcome trends per national or international registry data, administrative data, clinical trial data or institutional databases and how to leverage these to inform best clinical practices.

## SCAI/MEDTRONIC ECRG (\$45,000 Grant)

Research on one of the following topics:

ST- and non-ST-elevation myocardial infarction (STEMI and NSTEMI): Treatment of non-culprit lesions and associated outcomes

Multi-vessel disease: Imaging techniques and associated outcomes

Coronary bifurcation lesions: Imaging techniques and associated outcomes (e.g., IVUS, OCT, FFR)

Coronary bifurcation lesions: Stenting techniques and associated outcomes (e.g., provisional vs. two- stent, DK crush)

In-stent restenosis (ISR): Predictors, prevalence, treatment and associated outcomes

Real-world prevalence and outcomes of renal denervation

EMR-based recruitment models for patient identification for guideline-recommended interventions or clinical trials

## SCAI/SHOCKWAVE MEDICAL ECRG (\$50,000 Grant)

Research on one of the following topics:

National trends, local/regional variation, and disparities in utilization of calcium modifying devices for infrapopliteal peripheral artery disease

Contemporary trends and outcomes with below-the-ankle (BTA) calcium modification interventions, including intravascular lithotripsy

The role of calcium modification, including intravascular lithotripsy, in chronic limb threatening ischemia (CLTI) to optimize revascularization and wound healing outcomes



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PRINCIPAL INVESTIGATOR		
NAME (Last, First, Middle)	DEGREES	
POSITION TITLE	INSTITUTION MAILING ADDRESS (Street, City, State, Zip Code, Country [if not USA])	
INSTITUTION		
DEPARTMENT		
TELEPHONE	E-MAIL ADDRESS	
GRANT ELIGIBILITY		
Year Fellowship Completed:	Current SCAI member: Yes No	
CO-INVESTIGATORS (Name, Title, Institution, Email Address)		
1.		
2.		
3.		
DATA SOURCE:  NCDR Truveta CMS Other:  If proposing to use National Cardiovascular Data Registry (NCDR) data, complete and submit Externally-Funded RPA Form to ncdrresearch@acc.org with subject line:  New [Insert Registry Name] Externally- Funded Research Award: SCAI/[PI Last Name].  For Source of Funding, state: Application to be submitted for SCAI Grant (deadline: Jan 21, 2025)		
APPLICANT ORGANIZATION IF AWARD IS MADE	ADMINISTRATIVE OFFICIAL TO BE NOTIFIED IF	
Legal Name:	AWARD IS MADE	
Address:	Name:	
	Title:	
	Tel:	
	Email:	
PRINCIPAL INVESTIGATOR ASSURANCE: I certify that the statements herein are true, complete and accurate to the best of my knowledge. I agree to accept responsibility for the scientific conduct of the project and to comply with the grant conditions if a grant is awarded as a result of this application. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to	SIGNATURE OF PI  DATE:	
criminal, civil, or administrative penalties.		