

Heart Transplant Program
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Nashville, TN 37232-4745
615-936-3500 ph
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VANDERBILT HEART TRANSPLANT PROGRAM REFERRAL FORM

Thank you for your referral. We request the following information as soon as possible in order to schedule an appointment:

- Patient demographics/insurance verification
 - CD of latest Cath Film (mailed to address above)
 - Referring physician name, address, phone, cell phone & fax
 - Medical history and physical, including height and weight
 - Most recent clinic note, laboratory results and current medication list
 - ICD interrogation device check within last year
 - If patient has a pacemaker please include documents
 - Echocardiogram report and cardiac catheterization report
 - When available---Chest X-Ray, EKG, Functional/viability studies
- If you would like to transfer a patient hospital-to-hospital, call our 24-7 Access Center at 866-896-1278 or 615-343-9188. Our access staff will contact the physician on call for Heart Failure to discuss your patient.
 - If you have a patient who currently has a Mechanical Assist Device, or that you believe needs a Mechanical Assist Device, please call 615-343-9378 and fax records to 615-875-4904
 - Criteria for inclusion and exclusion of patients for heart transplantation is enclosed.
 - ****Vanderbilt offers appointments in Knoxville for evaluations and follow-up appointments related to pre and post cardiac transplantation and mechanical assist device placement.****

Indications for Heart Transplantation

- Objective evidence of advanced physical limitation due to documented heart or heart-lung disease
- Cardiopulmonary stress testing showing $VO_2 \text{ max} \leq 14 \text{ ml/kg/min}$ with an $RQ > 1.05$
- Intractable or severe angina not amenable to percutaneous or surgical revascularization
- Intractable recurrent ventricular arrhythmia not amenable to advanced therapies

Contraindications for Heart Transplantation

- Age > 70 years
- Irreversible pulmonary HTN: $PVR > 4$ Woods units or Transpulmonary Gradient > 20
- Refusal of blood product transfusion
- Detectable HIT antibody with confirmed SRA heparin allergy
- PVD when its presence limits rehabilitation and revascularization is not a viable option
- Clinically severe symptomatic cerebrovascular disease
- Active systemic infection
- Systemic illness with a life expectancy < 2 years despite heart transplant
- Current or recent history of acute diverticulitis
- Active peptic ulcer disease
- History of neoplasms: The specific amount of time to wait to transplant after neoplasm remission will depend on the risk of tumor recurrence
- Diabetes with end-organ damage
- Irreversible renal ($eGFR < 30 \text{ ml/min}$) or hepatic dysfunction (Bilirubin > 2.5mg/dl)
- Morbid obesity (BMI > 35 kg/m²) or cachexia (BMI < 18 or Pre-albumin < 15)
- Recent or unresolved pulmonary infarction
- Demonstration of an inability to comply with drug therapy on multiple occasions
- Active mental illness or psychosocial instability
- Active drug, tobacco, or alcohol abuse

Please FAX completed form with your identifying cover sheet to 615-936-3829