



## GUIDELINES FOR REFERRAL

### Ventricular Assist Device (VAD) and/or Heart Transplantation\*

**Note:** Candidacy for heart transplantation not required for consideration of VAD therapy. VAD therapy is also available for Destination Indication (permanent use).

#### Patients should have:

- At least Class III Heart Failure symptoms
- LVEF  $\leq 35\%$  (This guideline is not necessary for patients with diastolic heart failure secondary and preserved left ventricular function that is due to restrictive cardiomyopathies; e.g. hypertrophic cardiomyopathy or congenital heart defects)

#### And, any of the following criteria:

- Early End Stage Organ Dysfunction
  - CrCl  $\leq 45$ cc/min
- Hemodynamic Instability
  - Ventricular Arrhythmias
  - Hypotension
  - Low cardiac output
- Hospitalization for Heart Failure in the past 6 months
- Intolerance/ withdrawal of evidence-based heart failure oral agents
- Non-responsive to CRT/BiV pacing
- Being considered for or currently on Inotropes
- Cardiac cachexia
- Diuretic Dose:
  - Furosemide  $\geq 160$ mg /day
  - Torsemide  $\geq 80$  mg/day
  - Bumetanide  $\geq 4$  mg/day
- Seattle Heart Failure Score  $\geq 1.5$  or 1 year mortality estimate  $> 15\%$
- Peak exercise oxygen consumption  $\leq 55\%$  of predicted or absolute number  $\leq 14$  (for women) or  $\leq 16$  (for men) ml/kg/min
- 6 Minute Walk Test distance of  $\leq 350$  meters

(\*Not responding to Standard Medical Therapy)



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### **Ventricular Assist Device (VAD) and/or Heart Transplantation\***

#### **Recommended Testing Prior to Evaluation (within 3 months):**

- Echocardiogram
- Right Heart Catheterization if available
- Chemistries and Complete Blood Count
- Chest radiograph
- ECG
- Pulmonary Function Test
- Ankle-Brachial Index Test
- Carotid Duplex Scan
- Abdominal ultrasound to evaluate for AAA and hepatic disease
- Non Contrast CT scan of the thorax if history of prior cardiac surgery

#### **FOR PATIENT REFERRAL:**

- MLINE 800-962-3555 (physician to physician)
- New Patient Scheduling (Monday - Friday 8:00am – 5:00pm)  
Call: 734-647-7321 (choose Option 2, followed by Option 1)
- Or, complete: "Michigan Medicine Outpatient Consult Request Form"  
Fax: 734-647-4285

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**We follow a Shared Care Model and may collaborate with you regarding ongoing management of your patient.**