**Acute Heart Failure / MCS Referral form**

**For urgent referrals contact oncall Consultant Transplant Surgeon via Switchboard 0141 951 5000**

**Email completed form to receiving clinician and cc:** [transplantcoordinators@gjnh.scot.nhs.uk](mailto:transplantcoordinators@gjnh.scot.nhs.uk)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **S** | Date / time |  | | | Consultant | |  | | | | |
| Hospital |  | | | Specialty | |  | | | | |
| Location |  | | | Contact | |  | | | | |
| Patient |  | | | CHI | |  | | | | |
| Age |  | Height |  | Weight | |  | | BMI |  | |
| HPC | | | | | | | | | | |
| **B** | PMHx | | | | DHx | | | | | | |
| Smoking | | | | Allergies | | | | | | |
| Alcohol | | | | Illicit Drugs | | | | | | |
| **A** | CV support | | HR |  | Hb |  | | Urea | | |  |
| Eg Adren 4/50 5ml/h | | BP |  | WCC |  | | Creat | | |  |
|  | | CVP |  | Plt |  | | Bil | | |  |
|  | | CI |  | PT |  | | ALT | | |  |
|  | | lactate |  | PTT |  | | ALP | | |  |
| Respiratory support | | RR |  | Fib |  | | Albumin | | |  |
| Eg FiO2 0.6 | | SpO2 |  | H+/BE |  | | CRP | | |  |
|  | | pPeak |  | Echo |  | | | | | |
| Renal | | UO |  |
| Micro | | temp |  | CXR |  | | | | | |
| Neuro | | GCS |  | Other |  | | | | | |
| **R** | To be completed by receiving clinician and returned to referring team | | | | | | | | | | |
| Recommendation to referring team | | | | Local team members informed | | | | | | |
| ICU-ICU discussion | | |  | HF Cardiologist | | | | | |  |
| Transfer GJNH | | |  | Transplant surgeon | | | | | |  |
| Re-referral if indicated (below) | | |  | Intensivist | | | | | |  |
| No further f/u | | |  | Nursing staff | | | | | |  |
| Comments | | | | | | | | | | |
| Receiving Clinician (contact) | | |  | | | | | | | |

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| **Indications for referral for mechanical circulatory support** | y/n |
| Refractory Cardiogenic shock – IABP/ escalating inotropes |  |
| Refractory arrhythmia |  |
| Refractory CPR |  |
| Cardiogenic shock + high risk pathology eg LMS occlusion |  |

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| **Contraindications, risk factors and co-morbidities relevant to cardiac transplantation** | y/n |
| Cardio-renal syndrome and other causes of renal dysfunction |  |
| Liver dysfunction |  |
| Pulmonary hypertension caused by heart failure and other factors |  |
| Age (since older age is associated with comorbidities) |  |
| Previous cardiac surgery |  |
| Diabetes mellitus |  |
| Obesity |  |
| Vascular disease |  |
| Infection that is resistant to treatment |  |
| Pulmonary embolism |  |
| Immunosuppression |  |
| Current or previous malignancy |  |
| Autoimmune disease |  |
| Social factors |  |
| Substance use and alcohol abuse |  |
| Smoking |  |
| Non adherence to treatment despite support |  |
| Mental capacity that despite support will result in a poor outcome |  |
| Mental illness despite full assessment and treatment |  |
| Other co-morbidity |  |

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| **Specific contraindications to mechanical circulatory support** | y/n |
| Age>65y |  |
| Comorbidity affecting quality of life or limiting life expectancy |  |
| Ongoing CPR>60min prior to establishing full flow |  |
| Irreversible neurological injury |  |
| Established multiorgan failure |  |
| Severe AI |  |
| Aortic dissection |  |
| Contraindication to anticoagulation |  |