



PHC & VCH CARDIOLOGY REFERRAL



Cardiology Referral

REFERRING PROVIDER:

GP NP ED Specialist (specify): Date: Name: MSP Number: Location: Phone: Fax:

PATIENT INFORMATION:

Name: Address: PHN: DOB: Gender: Male Female Other Email: Home phone number: Alternate phone number: Language(s) spoken: Interpreter Required: Outpatient Inpatient - site:

REFER TO: Specialty Clinic (specify) For Vancouver see page 3. For North Shore & Richmond see page 4 Specific Cardiologist: Fax directly to requested cardiologist

SEVERITY OF SYMPTOMS: Severe Moderate Mild Asymptomatic URGENCY: Emergent Urgent Semi-Urgent Elective Has this patient been seen by a Cardiologist before? Name: Date: Is this a Re-referral?

REASON FOR REFERRAL:

Please include recent relevant medical history, medication records, investigations and lab results. SEE ATTACHED: Consult Notes Medication List Lab Results Allergies/Drug Intolerances

Table with columns: PREVIOUS INVESTIGATIONS, Done, Date, Attached, Not Done, Comments. Rows include Chest X-ray, ECG, Exercise Tolerance Test, Holter Monitor, Cardiac Echo, Coronary Angiogram, Cardiac CT/MRI, MIBI, and Other Cardiac Tests.

This referral will be triaged by cardiology staff. For prompt booking, please ensure all sections are fully completed.

ACKNOWLEDGEMENT OF REFERRAL (to be completed within 5 business days) Our office will make an appointment with your patient within the next (days or weeks) Your patient is booked to see a specialist on: Date: Time: We will notify your patient of the above appointment Please notify your patient of the above appointment We require the following additional information before we can book an appointment for this patient:



* 6 2 8 3 *

INSTRUCTIONS: ONLY FAX THE 1st PAGE

Page 2, 3, and 4 are to guide selection of the most appropriate program / service. Page 2 provides an overview of where services are located in our region; Page 3 and 4 provide clinic descriptions and contact details.

| SPECIALTY CLINICS | Hospital | | | | | |
|---|------------|-------------------|----------|---------------------|---------|----------|
| | St. Paul's | Vancouver General | Richmond | Lions Gate/ Coastal | | |
| | | | | North Shore | Sechelt | Squamish |
| Atrial Fibrillation (AFC) | ✓ | ✓ | | | | |
| Heart Failure (Regional Triage) | ✓ | ✓ | | ✓ | | |
| Cardiac Rehabilitation (Healthy Heart)* <i>*If RN referral for inpatient, please specify site and unit in location field, instead of referral provider</i> | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Urgent / Stat / Rapid / Chest Pain | ✓ | ✓ | ✓ | ✓ | | |
| Heart Rhythm Device (HRD) | ✓ | ✓ | | | | |
| Heart Rhythm Clinic (HRC) | ✓ | ✓ | | | | |
| Pacific Adult Congenital Heart (V-PACH) | ✓ | | | | | |
| Heritable Aortopathies (HAC) | ✓ | | | | | |
| Cardiac Obstetrics (COB) | ✓ | | | | | |
| Thoracic Aortic Disease Program | | ✓ | | | | |
| Cardio Risk / Prevention / Lipid | ✓ | ✓ | | | | |
| Cardio-Oncology | | ✓ | | | | |
| Pre-Heart Transplant | ✓ | | | | | |
| Women's Heart Health | | ✓ | | | | |
| BC Inherited Arrhythmia (BCIAP) | ✓ | | | | | |
| Sports Cardiology | | ✓ | | ✓ | | |
| Pulmonary Hypertension | | ✓ | | | | |

PHC & VCH CARDIOLOGY REFERRAL


Cardiology Referral

| SPECIALTY CLINIC DESCRIPTIONS - Vancouver | Location | Telephone | FAX |
|--|----------------------|--------------------|--------------|
| Atrial Fibrillation (AFC) New or previous diagnosis of Atrial Fib or flutter for specialist opinion/management, including ablation. Multidisciplinary approach & teaching. ECG documented AF required. After optimization of treatment (~ 6 months), patients are returned to usual GP/specialist for follow-up. | SPH | 604-806-9475 | 604-806-9476 |
| | VGH | 604-875-5264 | 604-875-5806 |
| Heart Failure (Regional Triage) Referrals for new diagnosis or suspected heart failure will be centrally triaged/assigned to the most appropriate site. Multidisciplinary care includes patient education and optimization of therapy. On achieving optimal therapy (approximately 6 months), patients are returned GP/referring provider. Appropriate referrals will have at least 1 of the following indications: - a positive BNP/NT-proBNP (less than 3 months), - a positive Echo, - a Consult Note, or a Discharge summary (of less than 1 year) | SPH & VGH | 604-806-9901 | 604-675-2639 |
| Cardiac Rehabilitation (Healthy Heart) 6-month program of exercise, education and counseling for patients with cardiovascular disease, including acute coronary syndrome, PCI, CABG, arrhythmias, valve disease, heart failure, and heart transplant. Also for PVD, diabetes, CKD, and metabolic syndrome. Program fees may apply. Virtual program is an option. | SPH | 604-806-9270 | 604-602-8665 |
| | VGH | 604-875-5389 | 604-875-5794 |
| Urgent / STAT / Chest Pain General cardiology referrals for patients requiring expedited consultation at the discretion of the referring physician. Limited capacity - please identify referrals carefully. Goal is visit in 2 to 4 weeks. | SPH | 604-296-0655 | 604-689-4219 |
| | VGH | 604-875-4800 opt.6 | 778-504-9745 |
| Heart Rhythm Device (HRD) For ongoing management of patients with existing implant devices (e.g. pacemakers, loop recorders, and/or cardioverter-defibrillators). | SPH | 604-806-8267 | 604-675-2647 |
| | VGH | 604-875-4244 | 604-875-5827 |
| Heart Rhythm Clinic (HRC) For management of patients with cardiac arrhythmia, syncope and/or appropriateness for implantation of heart rhythm devices or invasive ablation procedures. | SPH | 604-806-8267 | 604-806-8723 |
| | VGH | 604-875-5069 | 604-875-5874 |
| Pacific Adult Congenital Heart (V-PACH) Assessment and cardiac management for adults with congenital heart disease. | SPH | 604-806-8520 | 604-806-8800 |
| Heritable Aortopathies (HAC) Comprehensive, multisystem assessment genetic disorders that effect the aorta. (e.g. Loey Dietz, Marfan Syndrome). | | | 604-602-8644 |
| Cardiac Obstetrics (COB) Pre-pregnancy counseling and cardiac care to women with congenital/ acquired heart disease at risk of developing heart complications during pregnancy. Please include number of weeks pregnant. | | | 604-602-8643 |
| Thoracic Aortic Disease Program A multi-disciplinary (cardiac surgery, vascular surgery, cardiology, and interventional radiology) clinic for assessment and management of patients with diseases of the thoracic aorta. Includes assessment, investigation, treatment and long term management. | VGH | 604-875-4553 | 778-504-9744 |
| Cardio Risk / Prevention / Lipid Multidisciplinary assessment and management (nurse educator, dietitian, physician) of cardiovascular risk, inherited or other dyslipidemia, statin intolerance, known CVD, personal or family history of premature vascular disease, pre-diabetes, and smoking cessation. | SPH | 604-806-8591 | 604-806-8590 |
| | VGH | 604-875-5092 | 604-875-5761 |
| Cardio-Oncology CV toxicity of cancer treatment; known or suspected CV disease in cancer patients/survivors; CV risk modification related to current or previous oncology treatment. | VGH | 604-875-5264 | 778-504-9784 |

Continued on next page, including North Shore & Richmond clinics.



Place Patient Form Label Here

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Cardiology Referral

| SPECIALTY CLINIC DESCRIPTIONS – Vancouver (continued) | Location | Telephone | FAX |
|--|----------|-------------------------|--------------|
| Pre-Heart Transplant Severe heart failure optimized on therapy for patients under the age of 70 who require assessment for heart transplant candidacy. | SPH | 604-806-8602 | 604-675-2660 |
| Women's Heart Health Management of chest pain and other CV symptoms in women, as well as those with prior myocardial infarction and/or undiagnosed / non-obstructive CAD. | VGH | 604-875-4223 | 778-504-9785 |
| BC Inherited Arrhythmia Program (BCIAP) Multidisciplinary screen, evaluation, genetic counseling for patients/families affected or at risk for an inherited arrhythmia, sudden unexplained cardiac arrest/death or sudden infant death synd. | SPH | 604-682-2344 ext. 66766 | 604-806-9474 |
| Sports Cardiology Evaluation and consultation of patients who are high-level athletes or who engage in competitive recreational sports, and who are having symptoms of possible cardiac concern. | VGH | 604-822-1751 | 604-822-7625 |
| Pulmonary Hypertension Multidisciplinary management of patients with known or suspected pulmonary hypertension or pulmonary vascular disease. | VGH | 604-875-4323 | 604-875-4210 |
| Inherited Cardiomyopathy Clinic Combines the expertise of specialists in cardiology and genetics, to identify, screen and manage patients and families affected by heritable cardiomyopathies | VGH | 604-875-5264 | 778-504-9777 |

| SPECIALTY CLINIC DESCRIPTIONS – North Shore | Location | Telephone | FAX |
|--|-------------|--|--|
| Cardiac Rehabilitation (Healthy Heart) A program for people who are recovering from cardiac-related interventions or who are trying to prevent cardiac or other chronic disease. Patient sees a multi-disciplinary team, includes physician oversight and an exercise / activity program. Virtual options may exist. <ul style="list-style-type: none"> • North Shore – Refer all post-OHS or STEMI patients to Cardiac Home Follow-up Program as first step towards cardiac rehabilitation. • Powell River - No program exists. Consider referral to virtual CR at VGH or SPH | Squamish | 604-892-2293 | 604-892-2327 |
| | Sechelt | 604-885-7103 | 833-619-1083 |
| | North Shore | 604-904-0810 (If OHS/STEMI: 604-961-8222) | 604-904-0812 (If OHS/STEMI: 604-984-3829) |
| Rapid Access/Urgent Care Expedited investigations and assessment by a cardiologist for patients requiring an urgent cardiac opinion. Includes patients recently discharged from the Emergency Department or seen by their family physicians with undifferentiated chest pain, dyspnea, palpitations, syncope or pre-syncope, new arrhythmia, valvular diagnosis, murmur or ECG abnormalities. | LGH | 604-980-1031 | 604-980-1032 |
| Heart Failure Assessment and management of patients with suspected or confirmed heart failure, with normal or reduced ejection fraction. Frequent visits to optimize lifestyle, medical and device therapy, and multidisciplinary patient education. Nurse practitioner and cardiologist involved. | LGH | 604-980-1031 | 604-980-1032 |
| Sports Cardiology Assessment of athletes, recreational to professional, with symptoms of possible cardiac origin, or screening for potential cardiovascular disorders that may impair participation or affect safety. | LGH | 604-980-1031 | 604-980-1032 |

| SPECIALTY CLINIC DESCRIPTIONS – Richmond | Location | Telephone | FAX |
|---|----------|--------------|--------------|
| Healthy Heart Program The Healthy Heart Program consists of exercise and education lectures. The goal of this 8 week program is for participants to identify cardiac risk factors; it is an avenue to a heart healthy life. | GWC | 604-204-2007 | 604-244-5454 |
| Rapid Access Chest Pain Clinic Patients with chest pain will be assessed by general internists for medical consultations and treadmill stress tests within 2 weeks of referral. For urgent cases, patients will be seen in 3 to 5 working days. | RH | 604-244-5388 | 604-244-5274 |

Change requests to this form can be emailed to CardiacRCP@vch.ca