island health

BC's HEART FAILURE NETWORK
Quality care for quality life.

Name:
PHN:
DOB:
MRN:

Heart Function Clinic Referral Form

Referral Date: _____

☐ **Victoria Heart Function Clinic**
Cardiology
Phone: 250-519-1601
Fax: 250-370-8267

☐ **Nanaimo Heart Function Clinic**
Cardiology/Internal Medicine
Phone: 250-740-6926
Fax: 250-716-1852

☐ **Campbell River Heart Function Clinic**
Internal Medicine
Phone: 250-286-7153
Fax: 250-286-7103

Referring Provider		**MSP #**	**Patient Name**		
Phone #			**Patient Address**		
Fax #			**City**	**Phone Number**	
Family Practitioner			**Province**	**Postal Code**	

REASON FOR REFERRAL

	Category	Target	Clinical Scenarios
❑	URGENT	2 weeks	• Progressively worsening heart failure • Post hospitalization heart failure • Post MI heart failure • New diagnosis of heart failure & unstable
❑	Semi-urgent	4 weeks	• New diagnosis of heart failure and stable • Heart failure with symptoms, but not decompensated
❑	Scheduled	6 weeks	• Chronic heart failure
❑	Scheduled	12 weeks	• Asymptomatic heart failure

CARE REQUESTED

(please select all that may apply)

- ❑ Heart failure education
- ❑ Diagnosis and Investigations
- ❑ Treatment initiation and/or recommendations
- ❑ Complex disease management
- ❑ Take Heart exercise program

SOURCE OF REFERRAL

☐ Family Practitioner ☐ Specialist ☐ NP
☐ Emergency ☐ In-patient discharge

EXTENT OF THE TRANSFER OF CARE

(please select one option below)

- ❑ Shared care until stable, then return care
- ❑ Heart Function Clinic to manage until stable, then return care
- ❑ Heart Function Clinic to advise only

SPECIFIC QUESTION REFERRING PROVIDER WOULD LIKE ANSWERED

Mandatory supporting documents:

- ❑ Current Medication list and allergies
- ❑ Drug intolerances
- ❑ Patient history including co-morbidities
- ❑ Code Status
  ☐ Full code ☐ Do not resuscitate
- ❑ Other consultant's letters relevant to the patient's assessment and management

Supporting documents, if available:

- ❑ Previous cardiac investigations **outside of Island Health** (Echo,MUGA, MIBI, heart catheterization, device information)
- ❑ Lab results **not** available in Island Health system (including electrolytes, creatinine, eGFR, TSH, cholesterol, fasting glucose, HbA1c, NT-pro BNP or BNP, liver function tests, uric acid

To expedite care, PLEASE ensure ALL aspects of this form are completed.