

Pre-Implant

Demographics

Height:* in cm ST =

Weight:* lbs kgs ST =

Blood type:*

Medical Support Status

Current device strategy:*

Specify:*

Transplant Eligibility Issues or
Contraindications to
Transplant - check all that
apply*

- Advanced age
- Fixed pulmonary hypertension
- Patient refuses transplant
- Contraindication to immunotherapy
- Frailty
- Malnutrition/cachexia
- Large BMI
- Musculoskeletal limitations
- History of solid organ cancer
- History of lymphoma, leukemia
- Major stroke
- Renal dysfunction
- Pulmonary disease
- Severe diabetes
- Peripheral vascular disease
- Other comorbidity
- Risk of recurrent infection
- Pulmonary hypertension
- Recent pulmonary embolus
- Allosensitization
- Heparin-induced thrombocytopenia
- Current infection
- Limited cognition/understanding
- Limited social support
- Illicit drug use
- Alcohol abuse
- Still smoking
- Severe depression
- Other major psychiatric diagnosis
- Repeated non-compliance
- Multiple sternotomies
- Mediastinal radiation
- Thoracic aortic disease
- Other, specify
- None

Other, specify:*

Enter List Date:* mm/dd/yyyy ST=

Implant decision date:* mm/dd/yyyy ST=

Time since first cardiac diagnosis:*

Primary cardiac diagnosis:*

Dilated Myopathy Specify:*

Restrictive Myopathy Specify:*

Select all that apply:*

- Complete AV Septal Defect
- Congenitally Corrected Transposition
- Ebstein's Anomaly
- Hypoplastic Left Heart
- Left Heart Valvar/Structural Hypoplasia
- Pulmonary Atresia with IVS
- Single Ventricle
- TF/TOF variant
- Transposition of the Great Arteries
- Truncus Arteriosus
- VSD/ASD
- VSD/ASD Other, specify
- Kawasaki Disease
- Other, specify
- Unknown

Specify: *

VSD/ASD Specify: *

Secondary cardiac diagnosis (check all that apply):*

- Cancer
- Congenital Heart Disease
- Coronary Artery Disease
- Dilated Myopathy: Adriamycin
- Dilated Myopathy: Alcoholic
- Dilated Myopathy: Familial
- Dilated Myopathy: Idiopathic
- Dilated Myopathy: Ischemic
- Dilated Myopathy: Myocarditis
- Dilated Myopathy: Other Specify
- Dilated Myopathy: Post partum
- Dilated Myopathy: Viral
- Hypertrophic cardiomyopathy
- Restrictive Myopathy: Amyloidosis
- Restrictive Myopathy: Endocardial Fibrosis
- Restrictive Myopathy: Idiopathic
- Restrictive Myopathy: Other specify
- Restrictive Myopathy: Sarcoidosis
- Restrictive Myopathy: Sec to Radiat/Chem
- Valvular Heart Disease
- Unknown
- None

Dilated Myopathy Specify:*

Restrictive Myopathy Specify:

*

Known cardiac biopsy:*

Specify:*

Previous cardiac operation (check all that apply):*

None
CABG
Aortic Valve replacement / repair
Mitral valve replacement / repair
Congenital card surg
LVAD
RVAD
TAH
Other, specify

Specify:*

If congenital cardiac surg then check all that apply:*

Norwood Stage I
PA Banding
TOF/DORV/RVOTO Repair
VSD Repair
Transposition of the Great Vessels Repair
Truncus Arteriosus Repair
Valve Replacement of Repair for Outflow Obstruction
AP Shunt
ASD Repair
Complete AV Septal Defect Repair
Congenitally Corrected Transposition Repair
Damus Kaye Stansel (DKS)
Estey's Anomaly Repair
Fontan
Glenn, Bi-directional
Glenn, Classical
Previous heart transplant
ECMO
Previous mechanical support, specify
Other, specify

Previous mechanical support, specify :*

Specify:*

Reason for admission:*

Current ICD device in place:*

YES NO UNK

Events this hospitalization (Preimplant) (check all that apply):*

Cardiac arrest
Dialysis
Intubation
Major MI
Cardiac surgery
Positive blood cultures
Other surgical procedures
Major infections
Unknown
None

Infection type*

Location of infection:*

Other, specify:*

IV inotrope therapy immediately prior to implant:*

YES	NO	UNK
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IV inotrope therapy agents (check all that apply):*

- Dobutamine
- Dopamine
- Milrinone
- Levosimendan
- Epinephrine
- Norepinephrine
- Isoproterenol
- Other, specify
- Unknown

Specify:*

Additional support interventions within 24 hours of implant (check all that apply):*

- IABP
- Other VAD
- Dialysis
- Ultrafiltration
- Ventilator
- Feeding tube
- ECMO
- None

INTERMACS Patient Profile*

1 "Critical cardiogenic shock" describes a patient who is "crashing and burning", in which a patient has life-threatening hypotension and rapidly escalating inotropic pressor support (see the Site Users' Guide, Section II. 2.4 Pre-Implant Form, INTERMACS Patient Profiles for more details)

2 "Progressive decline" describes a patient who has been demonstrated "dependent" on inotropic support but nonetheless shows signs of continuing deterioration (see the Site Users' Guide, Section II. 2.4 Pre-Implant Form, INTERMACS Patient Profiles for more details)

3 "Stable but inotrope dependent" describes a patient who is clinically stable on mild-moderate doses of intravenous inotropes (or has a temporary circulatory support device) after repeated documentation of failure to wean without symptoms (see the Site Users' Guide, Section II. 2.4 Pre-Implant Form, INTERMACS Patient Profiles for more details)

4 "Resting symptoms" describes a patient who is at home on oral therapy but frequently has symptoms of congestion at rest or with ADL. (see the Site Users' Guide, Section II. 2.4 Pre-Implant Form, INTERMACS Patient Profiles for more details)

5 "Exertion Intolerant" describes a patient who is comfortable at rest but unable to engage in any activity, living predominantly within the house or household (see the Site Users' Guide, Section II. 2.4 Pre-Implant Form, INTERMACS Patient Profiles for more details)

6 "Exertion Limited" also describes a patient who is comfortable at rest without evidence of fluid overload, but who is able to do some mild activity (see the Site Users' Guide, Section II. 2.4 Pre-Implant Form, INTERMACS Patient Profiles for more details)

7 "Advanced NYHA Class 3" describes a patient who is clinically stable with a reasonable level of comfortable activity, despite history of previous decompensation that is not recent (see the Site Users' Guide, Section II. 2.4 Pre-Implant Form, INTERMACS Patient Profiles for more details)

Modifier 'A' - Arrhythmia*

YES	NO	UNK
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Modifier 'TCS' - Temporary Circulatory Support*

YES	NO	UNK
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Modifier 'FF' - Frequent Flyer (if usually at home)*

YES	NO	UNK
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Modifier 'FF' - Frequent Flyer*

YES	NO	UNK
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Co-morbidities

Diabetes:*	YES	NO	UNK	
Insulin-dependent:*	YES	NO	UNK	
Cardiac rhythm:*				
Other, specify:*				
COPD:*				
Symptomatic peripheral vascular disease:*	YES	NO	UNK	
Connective tissue or inflammatory rheumatologic disease:*	YES	NO	UNK	
Hx of Hepatitis A:*	YES	NO	UNK	
Hx of Hepatitis B:*	YES	NO	UNK	
Hx of Hepatitis C:*	YES	NO	UNK	
Peripheral myopathy:*	YES	NO	UNK	
	Definition: skeletal muscle biopsy abnormality or skeletal muscle weakness by physical exam.			
Protein losing enteropathy:*	YES	NO	UNK	
	Definition: Elevated alpha-1-antitrysin or iv albumin replacement for > 14 days.			
Protein losing enteropathy (check all that apply):*				Elevated alpha 1 antitrysin Albumin iv requirement Clinical diagnosis Unknown
Carotid artery disease:*	YES	NO	UNK	
	Definition: Having signs or symptoms of carotid artery disease or >50% narrowing of carotid.			
History of neurological event:*				
Cancer other than local skin cancer:*	YES	NO	UNK	
Type of cancer:*				
Other, specify:*				
Any active treatment at time of implant for cancer other than local skin cancer:*	YES	NO	UNK	
Smoking history:*				
# pack years:*				ST =
History of previous alcohol abuse:*	YES	NO	UNK	
Current alcohol use:*				
Drug abuse:*				
Cardiac research trial - device (other than an MCSD):*	YES	NO	UNK	
Type of device:*				
Cardiac research trial - drug:*	YES	NO	UNK	
Type of drug:*				
Transfusion history:*	YES	NO	UNK	

General Hemodynamics

Heart rate:*		beats per min	ST=
Systolic BP:*		mm Hg	ST=
Diastolic BP:*		mm Hg	ST=

Volume Status (peripheral edema):*

Ascites:*	YES	NO	UNK
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ECG rhythm (cardiac rhythm):*

Specify:*

Echo Hemodynamics

Were Echo Hemodynamics performed at pre-implant interval?*	YES	NO	UNK
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LVSF:*		units	ST=
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Mitral regurgitation:*

Tricuspid regurgitation:*

Aortic regurgitation:*

LVEF:*

LVEDD:*		cm	ST=
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RVEF:*

Swan Hemodynamics

Is swan in place at pre-implant interval?*	YES	NO	UNK
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Shunt Ratio (QpQs):*		beats per min	ST=
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Pulmonary artery systolic pressure:*		mm Hg	ST=
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Pulmonary artery diastolic pressure*		mm Hg	ST=
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RA Pressure:*		mm Hg	ST=
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Pulmonary artery wedge pressure:*		mm Hg	ST=
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Cardiac output:*		liters min	ST=
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Medications

Angiotensin receptor blocker drug:*

Amiodarone:*

ACE inhibitors:*

Beta-blockers:*

Aldosterone antagonist:*

Loop diuretics:*

Warfarin (coumadin):*

Anteplatelet therapy drug:*

Neseritide:*	YES	NO	UNK
Nitric oxide:*	YES	NO	UNK
Outpatient (prior to admission) Inotrope Infusion (check all that apply)*	None		
	Dopamine		
	Dobutamine		
	Milrinone		
	Isoproterenol		
	Epinephrine		
	Norepinephrine		
	Levosimendan		
	Unknown		

Laboratory

Sodium:*	mmol/L	ST=
Potassium:*	mEq/L	ST=
Blood urea nitrogen:*	mg/dL	ST=
Creatinine:*	mg/dL	ST=
SGPT/ALT:*	u/L	ST=
SGOT/AST:*	u/L	ST=
Total bilirubin:*	mg/dL	ST=
Albumin:*	g/dL	ST=
Pre-albumin:*	mg/dL	ST=
Cholesterol:*	mg/dL	ST=
<i>If value is outside given range please see 'status' drop down field</i>		
Brain natriuretic peptide BNP:*	pg/ml	ST=
<i>If value is outside given range please see 'status' drop down field</i>		
NT pro brain natriuretic peptide Pro-BNP:*	pg/ml	ST=
White blood cell count:*	K/uL	ST=
Hemoglobin:*	mg/dL	ST=
Platelet:*	K/uL	ST=
INR:*	international units	ST=
CRP (C Reactive Protein):*	mg/L	ST=
Protein C:*	%	ST=
Protein S:*	%	ST=
Anti-phospholipid (IgG):*	gplu/ml	ST=

Medical Condition

NYHA class:*

Ross Classification of Congestive
Heart Failure (patient < 6 yrs of
age):*

Ross class II: *	Mild tachypnea with feeds in infant Mild diaphoresis with feeds in infant Dyspnea on exercise in older children Unknown
Ross class III: *	Marked tachypnea with exertion or with feeding Marked diaphoresis with exertion or with feeding Unknown
Ross class IV: *	Tachypnea Retractions Grunting Diaphoresis Unknown

Exercise Function

6 minute walk: *	feet	ST=
VO2 Max: *	mL/min	ST=
R Value at peak: *	%	ST=

Quality of Life

Did the patient complete a EuroQol form: *	YES	NO	UNK
Mobility: *			
Self care: *			
Usual Activities (e.g. work, study, housework, family or leisure activities)*			
Pain/discomfort:			
Anxiety/depression: *			
Your own health state today (0-100). 0=worst, 100=best: *			ST=
Have you experienced serious illness? *	YES	NO	UNK
Has your family experienced serious illness? *	YES	NO	UNK
Have you experienced serious illness in caring for others? *	YES	NO	UNK
Age in years: *			ST=
Sex: *	Male	Female	Unknown
Are you: *			
Do you now, or did you ever, work in health or social services: *	YES	NO	UNK
In what capacity: *			
Which of the following best describes your main activity: *			
Other, specify: *			
What is the highest level of education you have			

completed:*

Zip code (if known):

ST=

Reason (as stated by patient)
why the EUROqoL was not
completed:*

Other, specify*

Reason (as stated by
coordinator) why the
EUROqoL was not completed:*

Other, specify*

Trailmaking Data

Status:*

Time:*

sec