



# VIRANI PROVINCIAL ADULT CONGENITAL HEART PROGRAM REFERRAL



Cardiology Referral

Date of Referral: \_\_\_\_\_

**\*\*FOR URGENT REQUESTS, please contact physician on call (604-682-2344)**

PATIENT INFORMATION		
Name: (last, first)		Telephone: Home: _____ Work: _____ Cell: _____
Former name/maiden name:		
Address:		
City:	Postal Code:	Email: _____
DOB: (dd/mm/yyyy)	PHN:	
Alternative contact: (name)		<input type="checkbox"/> Interpreter required Language: _____
Relationship to patient:	Telephone:	
REASON FOR REFERRAL		
<input type="checkbox"/> Assume care & management of confirmed Congenital Heart Disease <input type="checkbox"/> Assessment of suspected Congenital Heart Disease <input type="checkbox"/> Other: _____ <input type="checkbox"/> Request for cooperative/shared care with: _____		<b>Priority:</b> <input type="checkbox"/> Urgent (within 2 weeks) <input type="checkbox"/> Regular (within 3 months) <input type="checkbox"/> Transition: within _____ months
REFERRING CLINICIAN		
Name:	Specialty:	MSP number:
Address:		
Telephone:	Fax:	
PRIMARY CARE PROVIDER		
Name:	MSP number:	
Address:		
Telephone:	Fax:	
COMPLETED TESTS and ASSESSMENTS (please indicate below all available documents and attach/send copies):		
<b>**Please see next page for requested consults and reports.</b> To assist with triage by VPACH staff and prompt appointment booking, please ensure all sections are complete and available documents are included.		
OTHER RELEVANT INFORMATION		
<b>MEDICATIONS:</b> _____ <b>ALLERGIES:</b> _____ <b>OTHER:</b> _____		

**PLEASE FAX INFORMATION TO: Virani Provincial Adult Congenital Heart (VPACH) Program**  
**Fax: 604-806-8800**

**St. Paul's Hospital:** Room 5051 - 1081 Burrard Street, Vancouver, BC V6Z 1Y6  
 Telephone: 604-806-8520  
 Email: [pach@providencehealth.bc.ca](mailto:pach@providencehealth.bc.ca)

	Done and Included	Done and Available in Cerner or Care Connect	Not done or not available
Completed VPACH Referral form			
Last consult letter or referral letter			
<u>All</u> cardiac surgery operative reports			
Past records relating to congenital heart condition diagnosis			
Transition Documentation & Flowsheets			
Medical Genetic consults			
Genetic Testing results			
Developmental/cognitive assessments			
Most recent blood work results			
Liver imaging reports and consults			
Most recent cardiac diagnostics: Electrocardiogram			
Holter monitor report			
Exercise Testing Result			
Most recent cardiac imaging results: Echocardiogram report			
Magnetic Resonance Imaging			
Cardiac CT			
MIBI			
Other:			

**\*\* not done or not available indicates that test/imaging results have not been completed or are not available in provincial records (e.g. records have been destroyed or procedure completed in another country and records are not accessible)**