



PHC & VCH CARDIOLOGY REFERRAL



Cardiology Referral

REFERRING PROVIDER:						
☐ GP ☐ NP ☐ ED ☐ Specialist (spec	cify):			_ Date:		
Name:	MSP Number:					
			Phone: Fax:			
PATIENT INFORMATION:						
Name:						
Address:						
				 3ender: □ N	Male	
					none number:	
Consent to email patient Yes No			_			
Language(s) spoken:			Ir	nterpreter Re	equired: No Yes	
Outpatient Inpatient – site:						
REFER TO: Specialty Clinic (specify)				For Vancouver	r see page 3. For North Shore & Richmond see page 4	
(Choose one) Specific Cardiologist:				Fax directly to	requested cardiologist	
SEVERITY OF SYMPTOMS: Severe	Moderate	Mild Asyn	nptomatic			
URGENCY: Emergent (Immedia	te to 24 hours) Call	l Cardiology	or send to ED		
★If unsure of urgency,	•	weeks) Reason:				
call the RACE line at Expedited (
604-696-2131 ☐ First Availa	ble					
Has this patient been seen by a Cardiologist b	before? [☐ No ☐ Yes				
Name:	_				Is this a Re-referral? No Yes	
REASON FOR REFERRAL:						
Please include recent relevant medical history, medication records, investigations and lab res	sults.	T	La	onsult Notes ab Results	Allergies/Drug Intolerances	
PREVIOUS INVESTIGATIONS:	Done	Date	Attached	Not Done	Comments	
Chest X-ray	- - - - - - - - - - - - - -	 	<u> </u>	<u> </u>		
ECG (for AF patients ECG must show AF) Exercise Tolerance Test		 	<u> </u>	<u> </u>		
Holter Monitor	┝╬┦	 	 			
Cardiac Echo	片	 	+ -			
Coronary Angiogram	 		+ -			
Cardiac CT/MRI						
MIBI (Myocardial Perfusion Imaging)						
Other Cardiac Tests						
	_					
This referral will be triaged by car	diology	staff. For pron	npt bookin	ıg, please e	ensure all sections are fully completed.	
Our office will make an appointment with your	patient w			•	(days or weeks)	
Your patient is booked to see a specialist on: Date: Time:						
☐ We will notify your patient of the abo ☐ We require the following additional i						



Cardiology Referral

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.

	Hospital					
CRECIAL TV OLINIOS	2 "	Vancouver General	Richmond	Lions Gate/ Coastal		
SPECIALTY CLINICS	St. Paul's			North Shore	Sechelt	Squamish
Atrial Fibrillation (AFC)	✓	✓				
Heart Failure (Regional Triage)	✓	✓		✓		
Cardiac Rehabilitation (Healthy Heart)* *If RN referral for inpatient, please specify site and unit in location field, instead of referral provider	✓	✓	~	✓	✓	√
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.		604-806-9475	604-806-9476
		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 must have at least 1 of the following indications: Reduced left ventricular ejection fraction (HFrEF) less than 50% on echocardiogram (within the last year). Abnormal echocardiogram with preserved left ventricular ejection fraction (HFpEF) greater than or equal to 50% (within the last year) AND abnormal BNP/NT proBNP (within the last 3 months). A clinical diagnosis of heart failure AND abnormal BNP/NT proBNP (within the last 3 months). 	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	SPH	604-806-9270	604-602-8665
transplant. Also for PVD, diabetes, CKD, and metabolic syndrome. Program fees may apply. Virtual program is an option.	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,	SPH	604-806-8267	604-675-2647
and/or cardioverter-defibrillators).	VGH	604-875-4244	604-875-5827
Heart Rhythm Clinic (HRC) For management of patients with cardiac arrhythmia, syncope and/or appropriateness for implantation	SPH	604-806-8267	604-806-8723
of heart rhythm devices or invasive ablation procedures.	VGH	604-875-5069	604-875-5874
Pacific Adult Congenital Heart (V-PACH) Assessment and cardiac management for adults with congenital heart disease. Heritable Aortopathies (HAC) Comprehensive, multisystem assessment genetic disorders that effect the aorta. (e.g. Loey Dietz, Marfan Syndrome). 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.	SPH	604-806-8520	604-806-8800 604-602-8644 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	604-875-5806





PHC & VCH CARDIOLOGY REFERRAL



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	604-875-5504
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

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	Squamish	604-892-2293	604-892-2327
cardiac or other chronic disease. Patient sees a multi-disciplinary team, includes physician oversight and an exercise / activity program. Virtual options may exist.	Sechelt	604-885-7103	833-619-1083
North Shore – Refer all post-OHS or STEMI patients to Cardiac Home Follow-up Program as first	North Shore	604-904-0810	604-904-0812
step towards cardiac rehabilitation.		(If OHS/STEMI: 604-961-8222)	(If OHS/STEMI: 604-984-3829)
Powell River - No program exists. Consider referral to virtual CR at VGH or SPH			
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