



## Referral Criteria for Transcatheter Aortic Valve Implantation (TAVI) Clinic

TAVI is an accepted treatment for severe aortic valve stenosis in patients that are felt not to be candidates for surgical aortic valve replacement (SAVR) or in patients that are felt to be high risk for SAVR. The definition of risk is based on surgical derived calculators such as the EUROSCORE II and the STS score.

Currently, the TAVI program is actively accepting referrals for assessment. The patients that have been accepted for TAVI have demonstrated enough robustness to manage independently in an outpatient setting, with or without family or home care support.

The following patients are felt to be **appropriate** for referral to the TAVI Clinic:

- Age  $\geq$  80 should be referred to the TAVI clinic (these patients may still be offered SAVR after assessment)
- Other age groups if the patient is felt to be at high risk for SAVR
- Significant co-morbidities that can affect surgical risk and recovery
  - Prior cerebrovascular disease, severe chronic obstructive pulmonary disease (COPD), advanced liver disease (Child-Pugh of B or C), or advanced renal disease (CrCl  $<$ 50cc/min)
- Evidence of a "porcelain" aorta on chest imaging, prior bypass grafting, hostile mediastinum (e.g. prior sternotomy). This may apply to younger patients
- Mild to moderate levels of frailty (Clinical Frailty Scores 3-6)
- Previously turned down for conventional SAVR by a cardiac surgeon

The following patients are **not appropriate** for referral to the TAVI Clinic:

- Currently admitted with **no expected reasonable discharge** to the community
- Expected survival less than 12 months from non-cardiac conditions
- Advanced or metastatic malignancy
- Severe levels of frailty (Clinical frailty scale score of 7 or higher)
- Moderate to severe dementia (MMSE $<$ 20/30 or MOCA $<$ 18/30)

Patients accepted for potential TAVI will require work-up and this is usually performed as an outpatient.

### In Hospital Patients

For patients that are currently admitted to an inpatient unit, the TAVI team is able to consult on the patients once they have been rehabilitated and discharged to the community. The patients are NOT expected to remain in hospital for any related work-up. In fact, this is discouraged as a trial of independent outpatient functioning is required before acceptance for TAVI.

For referral to the TAVI Clinic please complete the **WRHA Cardiac Surgery Referral Form** and fax to 204-231-5493. For inquiries please call 204-258-1852.

For questions related to the TAVI Program please contact Denise Poettcker (TAVI Access Nurse) at 204-330-1314.

TAVI Team

St. Boniface General Hospital

January 6, 2016