

Duke PE and CTEPH Program

One of the nation's top comprehensive CTEPH programs for 10+ years



High-volume program for PEA and BPA approaches, performing over 500 PEA surgeries



Full spectrum of care options, and access to clinical trials

Overview

Duke Health offers a comprehensive program for pulmonary embolism (PE) and chronic thromboembolic pulmonary hypertension (CTEPH). Nearly half of patients are symptomatic after an acute PE, which is referred to as the post-PE syndrome. The most concerning sequela of PE is CTEPH, a rare and progressive disease that can lead to life-threatening heart failure.

For more than a decade, Duke's PE and CTEPH program has offered targeted care for patients with chronic thromboembolic disease following unresolved pulmonary embolism. Both chronic thromboembolic disease (CTED) and CTEPH may require care at a specialty center.

Care for patients with CTEPH, often misdiagnosed or mistaken for and treated as common pulmonary hypertension, requires a distinct multi-faceted approach. Our multidisciplinary team brings together experts in pulmonary medicine, cardiovascular medicine, interventional cardiology, and cardiothoracic surgery with treatment options for patients.

Why Refer to Duke

Duke provides comprehensive medical, interventional, and surgical care for CTEPH. As a high-volume center, patients benefit from a full spectrum of diagnostics, treatments, and access to cutting-edge clinical trials. Duke is among the few U.S. centers offering highly specialized CTEPH therapies, including:

- Pulmonary endarterectomy (PEA), also called pulmonary thromboendarterectomy (PTE), a complex surgery designed to remove chronic blood clots from the pulmonary arteries to restore normal blood flow to the lungs, improve symptoms, and prevent heart failure. PEA is the best option for improving survival for patients who are candidates for it.
- Balloon Pulmonary Angioplasty (BPA), a minimally-invasive procedure using small balloons to break up scar tissue and chronic blood clots by strategically inflating the balloon against the artery walls. This procedure is a promising alternative for patients who are not candidates for PEA.
- Medical management for patients who are not surgical candidates includes specific medical therapies and lifelong anticoagulation.

Earlier Interventions Benefit Patients

Treatment delays can correlate to higher mortality rates for patients with this potentially curable disease – left untreated, approximately 90% of patients with CTEPH have a life expectancy of one to three years. Duke offers advanced treatment options and surgical interventions to improve outcomes for patients.



To refer a patient, log in to Duke MedLink call 919-684-9254, or fax to 919-681-0339.

Duke PE and CTEPH Referrals

Please fax the completed referral form to 919-681-0339 or use electronic referral through Epic / MedLink*. Please include all pertinent clinic notes, procedure and imaging reports. Once received, a scheduler will contact your patient to schedule an appointment. We appreciate your referral.

Patient Information Patient Name: Date of Birth: Address: ______ State: ______ Zip: _____ Home Phone: Cell Phone: Work Phone: _____ Email Address: ____ ______ Interpreter? Yes □ No □ Special Needs? Yes □ No □ Language: Phone: Insurance Plan: Group #: Policy ID: ___ Subscriber Name: Subscriber DOB: Referral or Pre-Cert Number: CHF (1) Physician Information Referring Physician: Date of Referral: Practice / Group Name: _____ State: _____ Zip: _____ Provider Phone: Fax: Office Point of Contact: **Appointment Information** Reason for Referral: Completed Patient Studies: check all that apply ☐ Echocardiogram ☐ Pulmonary Angiogram ☐ Right-Heart Catheterization (RHC) ☐ Ventilation-Perfusion (VQ) scan Appointment Need: ☐ Next Available ☐ Within 4-6 Weeks Please send office notes, imaging reports and CD's (including VQ scan, CT/CTA, X-ray, RHC/PAgram, Echo), and PFTs to: USPS: DUMC Attn: Nancy Terry FedEx/UPS: DUMC



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