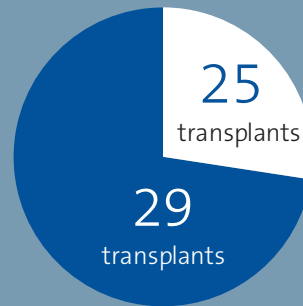


# Duke Intestine Transplant Program



## Transplant Volumes to Date

**54** intestine transplants since the program was established in 2009



■ Pediatric ■ Adult

## Overview

Duke offers comprehensive evaluation and care for patients who need an intestine transplant.

An intestine transplant can be a lifesaving option when disease or trauma prevents nutrients from moving through the intestines and being absorbed by the body.

Duke's program is led by experts in gastroenterology and transplant medicine, some of whom hold leadership positions in important national and international transplant societies such as the International Rehabilitation and Transplant Association, the American Society of Transplantation, and the American Society of Transplant Surgeons. Our team consists of a diverse group of health care professionals, including physicians, advanced practice providers, social workers, pharmacists, dietitians, and medical psychologists.

## Why Refer to Duke

- We are the only intestine program in the region (North Carolina, South Carolina, Virginia, Kentucky, and Tennessee.)
- We are among fewer than 20 active programs in the U.S.





## Your Patients Will Have Access To:



### Intestine Transplant Specialists

Our gastroenterologists and surgeons have special expertise in performing intestine transplants, as well as:

- Management of patients with short bowel syndrome
- New techniques and therapies that help set national guidelines
- Multi-visceral transplants that include the small bowel, liver, and pancreas

### Clinical Trials

We screen every patient to see if they qualify for clinical trials that will give them access to novel therapies, including those:

- Designed to improve nutrient absorption in patients with intestinal failure
- Looking at ways to reduce transplant rejection



### Support Services



We provide patients and their caregivers emotional support and the opportunity to ask questions. We share information about medications, nutrition, exercise, and the psychological and emotional effects of the transplant journey.

## Our Care Team Members

### Hepatologists

M. Cristina Segovia, MD  
*Medical Director, Intestinal Transplant*

Carla Brady, MD

Beth Floyd, MD

Stephanie Garbarino, MD

Matthew Kappus, MD

Lindsay King, MD, MPH

Omobonike Oloruntoba, MD

Kara Wegermann, MD

### Surgeons

Debra Sudan, MD

*Surgical Director, Abdominal Transplant Surgery*

Andrew Barbas, MD

Bradley Collins, MD

Lisa McElroy, MD, MS

Kadiyala Ravindra, MBBS

Aparna S. Rege, MD

Deepak Vikraman, MD

### Transplant Coordinator

Julia Kyer, RN

## Location

**Duke Liver/Intestine Transplant Clinic**  
40 Duke Medicine Circle | Clinic 2B/2C  
Durham, NC 27710

**Phone** 919-613-7777

**Fax** 919-681-7930

**On-call Physician** 919-684-8111

**Referral Coordinator** 919-684-3570

Find the most up-to-date list of providers at [DukeHealth.org/Transplant](https://DukeHealth.org/Transplant)

# Duke Intestine Transplant Referral Form

Please fax the completed referral form to 919-668-3897 or use electronic referral through Epic / MedLink. Once received, a scheduler will contact your patient to schedule an appointment. We appreciate your referral.

USPS  
Box 102347  
Durham, NC 27710

FedEx/UPS  
330 Trent Dr.  
Room 133  
Hanes House  
Durham, NC 27710

Phone 919-613-7777  
Toll-free 800-249-5864  
Fax 919-668-3897

## Patient Demographic Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Race: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_ Alternative Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Does Patient Need an Interpreter? Y N Language: \_\_\_\_\_

## Physician Information

Referring Physician: \_\_\_\_\_ Primary Care Physician: \_\_\_\_\_  
Practice/Group Name: \_\_\_\_\_ Practice/Group Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Office Phone: \_\_\_\_\_  
Office Fax: \_\_\_\_\_ Office Fax: \_\_\_\_\_  
Referring Physician Cell Phone: \_\_\_\_\_ Referring Physician E-mail: \_\_\_\_\_  
Name of Person Completing This Form: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Communication Preference: Email  Fax  Epic  Medlink

## Primary Insurance Information (attach copy of both sides of card)

Company: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Group Number: \_\_\_\_\_  
Policyholder's Name: \_\_\_\_\_ Policyholder's DOB: \_\_\_\_\_  
Insurance Phone Number: \_\_\_\_\_ Referral or Pre-Cert Number: \_\_\_\_\_  
Behavioral Health Insurance? Y N Company: \_\_\_\_\_ Policy ID: \_\_\_\_\_

## Secondary Insurance Information (attach copy of both sides of card)

Company: \_\_\_\_\_ Policy ID: \_\_\_\_\_ Group Number: \_\_\_\_\_  
Policyholder's Name: \_\_\_\_\_ Policyholder's DOB: \_\_\_\_\_  
Insurance Phone Number: \_\_\_\_\_ Referral or Pre-Cert Number: \_\_\_\_\_

## Patient General Clinical Information

Seen at Duke University Hospital? Yes No If yes, date of last visit: \_\_\_\_\_  
Patient Height: \_\_\_\_\_ Patient Weight: \_\_\_\_\_ Duke Medical Record Number: \_\_\_\_\_

## Clinical Information Requested to Schedule Appointment

- Most recent clinical summary and current medications, treatment plans, and past medical history or typed consult letter including patient's clinical summary and pertinent medical history.
- Lab results within 60 days including total bilirubin, prothrombin time with INR, and chemistry panel including creatinine and sodium.
- Abdominal imaging reports (Doppler ultrasound, CT, MRI) within last 12 months
- Procedural reports including liver biopsy pathology, endoscopy, or colonoscopy most recent completed, if available
- For patients with substance abuse history\*:
  - Summary of alcohol and/or substance abuse
  - Date of abstinence
  - Date rehabilitation counseling initiated
  - Documentation of three random screens

\* Items may be included in dictated summary or letter.

**Note:** Patients with NC Medicaid primary insurance must meet eligibility in accordance with NC Medicaid. This must be completed by the referring MD. Please contact the referral transplant coordinator for testing requirement details.