



Duke Pediatric Intestine Transplant

One of the few programs nationally to offer intestine and multivisceral transplant in children and adolescents



The only pediatric intestine transplant program in the region (North Carolina, South Carolina, Virginia, Kentucky, and Tennessee).



Comprehensive program to address medical, surgical, lifestyle, and nutritional needs of patients

Overview

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 Health is among a small number of U.S. hospitals with experienced transplant surgeons who perform intestinal transplants on children.

We offer comprehensive evaluation and treatments for patients who require intervention from gastrointestinal disorders and intestinal failure caused by conditions including, but not limited to:

- Short bowel syndrome
- Congenital intestinal disorders, including intestinal atresia or gastroschisis
- Dysmotility disorders such as pseudo-obstruction
- Trauma
- Complications of inflammatory bowel disease

To refer a patient, log in to Duke MedLink, fax to 919-681-7930, or call 919-613-7777.

Why Refer to Duke

- Duke is among the few active intestinal programs in the United States, and the only program in OPTN 11 (North Carolina, South Carolina, Virginia, Kentucky, and Tennessee)
- Our team consists of a diverse group of health care professionals, including physicians, advanced practice providers, social workers, pharmacists, dietitians, and medical psychologists.
- Duke's program is led by experts in gastroenterology, transplant surgery, 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
- Premier destination for multi-organ transplant procedures as part of our high-volume, comprehensive transplant center.



DukeHealth

Duke Pediatric Intestine Transplant



Duke Pediatric Intestine Transplant Specialists

Duke has special expertise in intestinal transplant, including:

- Intestinal and multivisceral transplants for infants, small children, and adolescents
- Treatment for children with complex conditions, who have been declined for an intestinal transplant at other hospitals
- Management of patients with short bowel syndrome and intestinal failure

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
- Investigating 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 coordinator and a doctor are on call 24 hours a day, 365 days a year for urgent concerns.

Location

Duke Children's Hospital and Health Center
4th Floor | 2301 Erwin Rd. Durham, NC 27710
Phone: 919-613-7777
Fax: 919-681-7930
On-call Physician: 919-684-8111

Our Care Team Members

Pediatric Abdominal Transplant Coordinator:

Casey David, RN
Phone: 919-668-2466

Nurse Practitioner

Katheleen Eklund, APRN, CPNP-PC

Hepatologists:

Gillian Noel, MD
Medical Director, Intestinal Transplant
Mansi Amin, MD
Amrita Salunke, MBBS

Surgeons:

Debra Sudan, MD
Surgical Director, Abdominal Transplant
Deepak Vikraman, MD
Surgical Director, Pediatric Abdominal Transplant
Andrew Barbas, MD
Meera Gupta, MD
Stuart Knechtle, MD
Kadiyala Ravindra, MBBS
Aparna S. Rege, MD

Find the most up-to-date list of providers at DukeHealth.org/Transplant

Duke Pediatric Intestine Transplant Referral Form

Please fax the completed referral form to
919-681-7930 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? Y ☐ N ☐ 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 ultra-sound, 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.