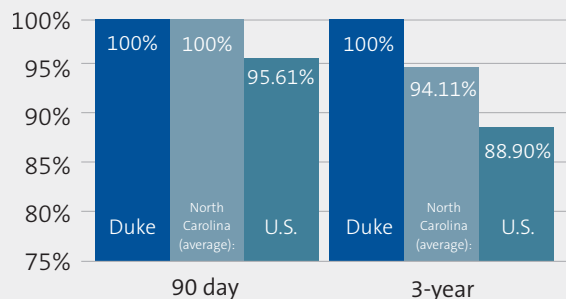


Duke Pediatric Heart Transplant Program



Patient Survival Rates*

Better than N.C. and U.S. Average



* Data from srtr.org as of 1/9/24 for pediatric 1-year survival with functioning graft.

Time to Transplant*

Shorter wait time than national median



* Data from srtr.org as of 1/9/24 for median wait time for combined adult and pediatric heart transplants.

Heart Transplant Volumes

#1 program by total volume in the U.S.**

** As reported by the Organ Procurement and Transplantation Network (OPTN) for combined adult and pediatric heart transplants.



Why Refer to Duke

You can refer your pediatric patients when they may benefit from our programs, which include:

Specialized Pediatric Heart Care

- Achieved some of the highest patient survival rates in the U.S.
- Performed more than 400 pediatric heart operations annually for advanced, complex cases.
- Pioneered new surgical techniques that lower risk and ensure heart surgery is better tolerated by newborns and infants, including
 - Leader in pediatric Donation After Circulatory Death (DCD) heart transplants in U.S., and continue to be one of the only pediatric centers nationally.
 - Performed the world's first combination heart transplant and allogeneic processed thymus tissue implantation on a 6-month old baby. The procedure could lower the risk of organ rejection.
 - Performed the world's first partial heart transplant, using living-tissue that will grow along with the pediatric patient and reduce the need for surgical procedures.

Heart Transplant Program

- In 2023, Duke completed 161 heart transplants – the most in our program's history or any transplant program in the U.S. in one year. We joined an elite group of only five transplant centers to transplant more than 2,000 hearts – including the only center in the Southeast.
- Duke is an innovator in expanding the donor pool, as the nation's leading center for DCD heart transplant patient enrollment. We were the first program to offer adult and pediatric DCD heart transplant in the U.S.
- Duke offers a full spectrum of mechanical circulatory support to keep patients safe on the wait list, including endovascular therapies such as Impella, implantable devices such as Heartmate 3, and extracorporeal ventricular assist devices for all sizes and anatomy
- Our program offers one of the shortest average wait times on the east coast.

Adult Congenital Program

- Fully-integrated adult congenital program which creates a seamless clinical transition for pediatric patients who require adult care, including those born with single ventricles, palliated with Fontan surgery.

Overview

We offer comprehensive evaluation and care to your pediatric patients with congenital heart defects. Our experienced team works with you and other Duke specialists to diagnose and manage care, including surgery and transplant when necessary.

Duke's heart transplant program is pioneering new approaches and techniques to expand the donor pool and reduce wait times.

Duke Heart Transplant Program

Your Patients Will Have Access To:



Dedicated Care Coordinators

Our care coordinators and social workers help your patients navigate every aspect of their care, including appointment scheduling, insurance coverage, and access to support resources.



Clinical Trials

We screen every patient for clinical trial eligibility to give your patients access to novel therapies.

Qualified Donors

We offer deceased and are a leader in DCD heart transplantation and participate in national registries for benchmarking quality.



Our Care Team Members

Pediatric Cardiologists

Michael Carboni, MD
Medical Director

Erin Shea, MD

Pediatric Surgeons

Joseph Turek, MD, PhD, MBA
Surgical Director

Ziv Beckerman, MD

Joseph Brian Clark, MD

Doug Overbey, MD, MPH

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

Location

Duke Children's Hospital & Health Center
2301 Erwin Rd.
Durham, NC 27710

Contact

Phone 919-613-7777

Toll-free 800-249-5864

Fax 919-681-8860

On-call Physician 919-684-8111

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

Duke Heart Transplant Referral Form

Please fax the completed referral form to 919-681-8860 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 Drive, Room 138
Hanes House
Durham, NC 27710

Phone 919-613-7777
Toll-free 800-249-5864
Fax 919-681-8860

Patient Demographic Information

Name: _____ Veteran? Y N
Address: _____ Marital Status: _____
City: _____ State: _____ Zip: _____
Social Security Number: _____ Date of Birth: _____ Gender: _____ Race: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____ E-mail: _____
Emergency Contact: _____ Phone: _____ Relationship: _____
Language: _____ Interpreter? Y N Special Needs? Y N
Employer: _____

Physician Information

Referring Physician: _____ Primary Care Physician: _____
Practice/Group Name: _____ Practice/Group Name: _____
Address: _____ Address: _____
City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____
Phone: _____ Phone: _____
Fax: _____ Fax: _____
E-mail: _____ E-mail: _____
Name of Person Completing This Form _____

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

Patient Height: _____ Patient Weight: _____ Date: _____
Seen at Duke University Hospital? Y N If yes, date of last visit: _____
Duke Medical Record Number: _____ Smoking Cessation Date: _____
Oxygen Use at Rest: _____ at Exertion: _____

Requested Referral Information

- Any pertinent medical records
- Most recent history and physical (clinic notes)
- Operative reports from any thoracic surgeries
- Recent chest x-ray report
- Reports of previous cardiac catheterization, stress test, and/or echocardiogram