

ADVANCED HEART FAILURE

Highlights clinical indicators of progression to help identify patients who may benefit from further evaluation beyond routine management.

Patient with Known Heart Failure

- HFrEF or HFpEF
- Pulmonary Hypertension
- Hypertrophic Cardiomyopathy
- Persistent symptoms despite ongoing management
- ≥ 1 Heart Failure hospitalization
- Cardiac Sarcoidosis
- Cardiac Amyloidosis



Are ANY of the following present?

Symptoms / Functional Status

- NYHA Class III-IV symptoms despite optimized therapy
- Progressive dyspnea, fatigue, or exercise intolerance

Tolerance of Therapy

- Worsening renal function with HF management
- Inability to tolerate evidence-based HF medications

Utilization / Decompensation

- ≥ 1 heart failure hospitalization within the past year
- Recurrent emergency department visits for HF

Clinical Trajectory

- Escalating diuretic requirements
- Signs of end-organ dysfunction

YES ↓

NO

Continue guideline-directed management and reassess with changes in symptoms or clinical status

Refer to the Advanced Heart Failure Center

- Additional Services:
 - IV Diuretics
 - Clinical Trials
 - Implantable electronic devices for symptom monitoring
- Consideration of advanced therapies:
 - IV Inotropes
 - LVAD
 - Heart transplant
- Multidisciplinary Team Members: HF Cardiologists, Nurses, Social Worker, Pharmacists, Palliative Care, Dietician



Epic Users

Place referral to Advanced Heart Failure
REF130 for ambulatory | CON202 for inpatient

Include primary concern, recent testing and urgency

Non-Epic

Call **(859)301-0124**

Intake and coordination support available

Referral supports longitudinal planning and shared decision-making; it does not obligate progression to advanced heart failure therapies. This algorithm is intended as a clinical reference and does not replace clinical judgment or established guidelines.