

# DISEASE SPECIFIC REFERRAL GUIDELINES

## General Considerations

- Age assessment on individual basis
- High Body Mass Index - ex BMI >30 and low body weight are risk factors for poor transplant outcomes
- Encourage diet, exercise, and pulmonary rehab early while waiting for transplant evaluation
- Consider nutritional evaluation

## COPD

### Guideline for Referral:

- BODE index > 5

### Guidelines for Transplant:

- BODE Index of 7-10 or at least one of the following:
  - History of Hospitalization for exacerbation associated with acute hypercapnia
  - Pulmonary HTN or cor-pulmonale or both despite oxygen therapy
  - FEV1<20% and DLCO <20% or homogenous distribution of emphysema

*\* Currently enrolling for non-invasive lung reduction trials*

## Idiopathic Pulmonary Fibrosis

### Guidelines for Referral:

- Histologic or radiographic evidence of UIP
- Histologic evidence of fibrotic NSIP

### Guidelines for Transplant:

- Histologic or radiographic evidence of UIP
  - DLCO <39%
  - 10% or greater decrement in FVC during 6 month of follow-up
  - Decrease in pulse oximetry <88% during 6 minute walk test
  - Honeycombing on HRCT (fibrosis score>2)
- Histologic evidence of fibrotic NSIP
  - DLCO <35%
  - A > 10% or greater decrement in FVC or 15% decrease DLCO during 6 months of follow-up

*\*Recommend early referral for all fibrosis patients even if criterion not met as disease course is not always predictable.*

## Cystic Fibrosis

### Guidelines for Referral:

- FEV1<30% or rapidly declining lung function if FEV >30% (esp females)
- Exacerbation of pulmonary disease requiring ICU stay
- Increased frequency of exacerbations requiring antibiotic therapy
- Refractory and recurrent pneumothorax
- Recurrent hemoptysis not controlled by embolization

### Guidelines for Transplant:

- Oxygen-dependent Respiratory Failure
- Hypercapnia
- Pulmonary Hypertension

## Idiopathic Pulmonary Arterial Hypertension

### Guideline for Referral:

- NYHA functional class III or IV irrespective of ongoing therapy
- Rapidly progressive disease

### Guidelines for Transplant:

- Persistent NYHA Class III or IV on maximal medical therapy
- Low (350m) or declining 6 minute walk test
- Failing therapy with IV epoprostenol
- Cardiac Index of < 2L/min/m<sup>2</sup>
- Right atrial pressure >15 mmHg

## Sarcoidosis

### Guideline for Referral:

- NYHA functional Class III and IV

### Guidelines for Transplant:

- NYHA functional Class III or IV and any of the following:
  - Hypoxemia at Rest
  - Pulmonary Hypertension
  - Elevated Right Atrial Pressure >15 mm Hg

**REFERENCES:** Kreider, M., et al. (2011). "Candidate selection, timing of listing, and choice of procedure for lung transplantation." Clin Chest Med 32(2): 199-211.

Kreider, M. and R. M. Kotloff (2009). "Selection of candidates for lung transplantation." Proc Am Thorac Soc 6(1): 20-27.