



# Indications for EP Referral

## Catheter Ablation

### **ATRIAL FIBRILLATION**

- Symptomatic paroxysmal or persistent atrial fibrillation, failed  $\geq 1$  antiarrhythmic medication
- 

### **AV JUNCTION ABLATION AND PERMANENT PACEMAKER**

- Symptomatic chronic atrial fibrillation, failed rate control therapy, ventricular rate  $> 100$ bpm
- 

### **PAROXYSMAL SUPRAVENTRICULAR TACHYCARDIA**

- Symptomatic to avoid medication
  - Symptomatic and patient desires ablation
- 

### **ATRIAL FLUTTER**

- Symptomatic, failed CV medication
  - Symptomatic and patient desires ablation to avoid chronic antiarrhythmics and to avoid anticoagulation
  - First time episode associated with heart failure, syncope, or hemodynamic instability
- 

### **VENTRICULAR TACHYCARDIA**

- Symptomatic, structurally normal heart
  - Frequent ICD shocks, cardiomyopathy
-



# Indications for EP Referral

## Implantable Device Therapy

### **IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR (ICD):**

#### **Secondary Prevention**

- Sustained VT or resuscitation from Cardiac Arrest

#### **Primary Prevention**

- EF  $\leq$  35%, NYHA Class II-III CHF, Ischemic/ Non-ischemic
- 

### **CARDIAC RESYNCHRONIZATION THERAPY FOR ADVANCED HEART FAILURE (BI-V ICD OR BI-V PACER)**

- EF  $\leq$  35%, NYHA Class III-IV CHF on optimal drug therapy\*, QRS  $>$ 120ms
- 

*For questions or consults please contact:*

**Timothy Johnson, M.D., FACC**

**Charles William Tate III, M.D.**

2121 East Harmony

Suites 100 & 200

Fort Collins, Colorado 80528

(970) 221-1000

[www.heartcenteroftherockies.com](http://www.heartcenteroftherockies.com)

---