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| **TAVI Workup Summary for**  **Structural Heart MDT** | | | A close up of a logo  Description automatically generated |
| **Referral Date: 22/07/2025** | | | **Structural Physician:**  Dr Hansen |
| Name: Thomas Dunbar  3/20 Charles Street Freshwater NSW 2096 | | | Referrer: Dr Natasha Huon |
| DOB: 23-01-1938 | | | Contact Details: 0447 281 456 |
| MRN: ME00467507  RNSH: | | | Email: |
| Age: 87 | | | Weight: 66kg  Height: 1.69m |
| **Past Medical History** | | | **Medications** |
| * Severe symptomatic AS & moderate-to-severe MR. * Coronary artery disease. * Stent thrombosis in October 2024 post total knee   replacement.   * Heart failure, reduced ejection fraction with LVEF of 20-25% * BiV ICD upgrade in 2025. * CKD eGFR of 45 and creatinine of 135-140. * Prev pleural effusion drained. * Aphasia. | | | Ramipril 1.25 nocte  Rosuvastatin 40mg dly  Spironolactone 12.5mg daily  Pantoprazole |
| Allergies: |
| **Social History** | | | **Functional Status & Symptom Burden** |
| Lives with wife  iADLs  Passed driving test but not currently driving due to heart. | | | NYHA: III  ED admission 31/07/25 |
| **Echo 24/07/25 Dr Choong:** | | | |
| |  |  | | --- | --- | | LV EF: 20% | AVA: cm2 | | Peak Gradient: 24 | AR: Trivial | | Mean Gradient: 13 | SVI: 24 | | Peak AV: 246 cm/s | MR: Moderate | | Comments: Markedly thickened and calcified aortic leaflets. Functionally bicuspid aortic valve with fusion of the left and non-coronary leaflets. Markedly reduced valve opening on 2D. Doppler data as in table above.  Findings consistent with low flow, low gradient severe stenosis with poor LV ejection fraction.  Pseudostenosis unlikely given the marked calcification of the leaflets with extensive fusion of the left and non-coronary leaflets. | | | | | |
| **Angio 25/07/2025:** | | | **ECG:** |
| CTO of non-dominant RCA. Mild residual disease with no instent restenosis. | | | AV dual-paced rhythm |
| **CT TAVI:** | | | |
|  | | | **Access:**  **Valve choice:**  **Incidental findings:** |
| **MOCA / Clinical Frailty Score** | | | **Bloods:** |
| MOCA:  Frailty score: 4 |  |  | Hb: 139  Plts: 271  Urea: 11.2  Cre: 125  eGFR: 45  Albumin: 41  Hematocrit 0.43  WBC Count 7.3  Platelet Count 271 |
| **Aged Care:** | | | **Cardiothoracic Surgeon:** |
| Word-finding difficulties but nil self-reported or observed cognitive. Risk of periop delirium given prev delirium when unwell.  Would be appropriate for TAVI from Geris POV. | | |  |

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| **Structural Heart Multidisciplinary Team Meeting** | |
| **Date:** | |
| **Attendees**: | |
| **Essential criteria** |  |
| **Feasibility** |  |
| **Frailty / comorbidities** | . |
| **Lifetime planning** |  |
| **Special considerations** |  |
| **Outcome:** | |