Echocardiography provides excellent structural and functional information relating to cardiac activity. The echocardiogram allows important management decisions to be made and to facilitate this we have developed the Direct Access Echocardiogram Service

**Clinical Indications**

The 2 main indications for echocardiography are the assessment of left ventricular function and the assessment of murmurs of uncertain significance. The service can also be used for the assessment of patients who have an incidental finding of atrial fibrillation. If there is a clinical suggestion that there has been a recent onset of arrhythmia or if there are new symptoms, then consider referral to AF clinic for possible cardioversion. Please also see AF guideline.

**Referral and Feedback**

Referral can be made by request to one of the cardiologists or by using the Direct Access Echo Clinic proforma (see attached). Occasionally consultants will redirect referrals to standard outpatient clinics if it seems unlikely that the clinical problem can be resolved with echocardiography alone.

For patients with suspected heart failure – please refer to the Heart Failure Guideline.

All patients attending the Direct Access Echo Clinic will have a 12 lead ECG and a full echocardiogram performed or supervised by British Society of Echocardiography accredited technicians. One of the cardiology consultants reviews the technician’s report and generates a letter to the referring GP. The letter will take account of the clinical information available, the ECG and echocardiogram. Clinical advice will be offered where appropriate allowing for the fact that the patient has not been seen by the consultant.

**Further Management**

A number of the echocardiograms performed in the Direct Access Clinic will be normal and no further cardiological involvement will be required. For detailed information about specific conditions please refer to the relevant guidelines.

Patients will need appropriate education and introduction of appropriate therapy. This will normally require an assessment in the outpatient clinic.

- For heart failure, confirmed on echocardiography, a cause should be determined.
- For valvular disorders, symptomatic patients should be seen for formal cardiological assessment.

Asymptomatic patients may need serial echocardiography normally on a yearly basis. However the frequency of follow up depends on the nature of the valve lesion and co-morbidity.

**References:**

Management of chronic heart failure in adults in primary and secondary care. Clinical Guideline 5. NICE

**Author:**

Dr Conrad Murphy, Consultant Cardiologist, St Richard’s Hospital, Western Sussex Hospitals NHS Trust.

**Others Involved:**

Dr Colin Reid, Dr Yuk-ki Wong, Consultant Cardiologists, Western Sussex hospitals NHS Trust. Local Referral and Management Guidelines Committee.

**Published:**

01/06  

**Review Due:**

04/14
REFERRAL TO
Direct Access Echo Service

Patient Details
Name: ___________________________ Date of Birth: ___________________________
Sex: M/F
Address: ___________________________ NHS Number: ___________________________
Hospital Number: ___________________________
Daytime Telephone: ___________________________ Please indicate by ticking the appropriate
Work Telephone ___________________________ box(es) which number(s) the patient can
Mobile Telephone: ___________________________ be contacted on during normal office hours.

GP Details
GP Name: ___________________________ Telephone Number: ___________________________
Practice: ___________________________ Fax Number: ___________________________
Date of Referral: ___________________________

Social circumstances
Lives alone ☐ Is a carer for someone ☐ Has a care package ☐

Reason for Referral (please circle)
Assessment of possible Heart Failure ☐ ☐ ☐
Assessment of Heart Murmur ☐ ☐ ☐
Incidental Finding of Atrial Fibrillation ☐ ☐ ☐

History

Previous History

Medication

Further relevant information including
ECG findings

Please fax this form to: The Cardiac Department 01243 831612