

McLaren Print System Order

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User: Jennifer Barnes
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Ship Location: McLaren Thumb Region
1100 S. Van Dyke Rd
Bad Axe, MI 48413

Form
Quantity: 100
Paragon Dept No: 22655
Dept Name: CVL
Company Number:

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Item Number: MHCC-17472
Item Description: ICD INDICATION Form
Revision Date: 01/2025
Print: 2 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Poster:
Misc Info: DS, Black



ICD INDICATION FORM

INSTRUCTIONS: Review and complete all applicable section(s) as follows:

- Initial ICD implant: Sections A, B, E, or F
- Initial CRT implant: Section C, in addition to A, B, E or F
- Replacement ICD: Section D

This form must be fully completed & delivered to subsidiary Cath Lab Scheduling/Boarding before the procedure will be scheduled.

A. Indications for implanting cardiac defibrillators for sustained ventricular tachycardia (VT) or cardiac arrest due to ventricular fibrillation (VF): Complete the applicable indication box (1 or 2)	
1. <input type="checkbox"/> Documented sustained VT, either spontaneous or induced by EP Study, not associated with AMI or a transient or reversible cause. If induced, date of Electrophysiology Study (EP) _____	
2. <input type="checkbox"/> Documented episode of cardiac arrest due to VF, not due to a transient or reversible cause	
B. Indications for implanting cardiac defibrillators (ICD): Complete the applicable indications box (3, 3.4, or 5)	
1. Patient must meet all the following criteria: <ul style="list-style-type: none">• A formal shared decision-making encounter has occurred between the patient and a qualified provider using an evidence-based decision tool for ICDs, and• Clinically stable (e.g., not in shock, from any etiology) and• Left ventricular ejection fraction (LVEF) must be measured by echocardiography, radionuclide (nuclear medicine) imaging, cardiac MRI, or catheter angiography.	
2. Must NOT have any of the following: <ul style="list-style-type: none">• Significant, irreversible brain damage; or• Any disease, other than cardiac disease (e.g., cancer, renal failure, liver failure) associated with a likelihood of survival less than 1 year; or• Supraventricular tachycardia such as atrial fibrillation with a poorly controlled ventricular rate; or• Clinical symptoms and findings that would make them a candidate for coronary revascularization; or• Had an acute MI within the past 42 days (see Exception below); or• Had a CABG or PCI with angioplasty and/or stenting within the past 3 months (see Exception below).	
Exception to waiting periods for patients with a CABG or PCI with angioplasty and/or stenting within past 3 months, or an EP within past 42 days: <ul style="list-style-type: none">• Cardiac Pacemakers: Patients who meet all CMS coverage criteria for a cardiac pacemaker and ICD criteria for an ICD may receive the combined devices in one procedure if time pacemaker is already indicated.	
3. Patient receives ICD replacement if required due to the end of battery life, EP, or device-related malfunction.	
2. <input type="checkbox"/> MI more than 42 days prior. Date of MI _____ and LVEF is \geq 30%. EP _____ % EP date obtained _____ and Patient does not have NYHA Class IV heart failure (specify NYHA Class _____) and Type of heart failure: <input type="checkbox"/> acute systolic <input type="checkbox"/> chronic systolic <input type="checkbox"/> acute on chronic systolic <input type="checkbox"/> acute combined systolic and diastolic <input type="checkbox"/> chronic combined systolic and diastolic <input type="checkbox"/> acute on chronic combined systolic and diastolic, and Patient meets all criteria listed above in B1, including the formal shared decision-making encounter	
3. <input type="checkbox"/> Non-invasive direct cardiomyography but no personal hx of sustained VT or cardiac arrest due to VT, and NYHA Class I or II heart failure (specify NYHA Class _____) and Type of heart failure: <input type="checkbox"/> acute systolic <input type="checkbox"/> chronic systolic <input type="checkbox"/> acute on chronic systolic <input type="checkbox"/> acute combined systolic and diastolic <input type="checkbox"/> chronic combined systolic and diastolic <input type="checkbox"/> acute on chronic combined systolic and diastolic, and Left ventricular ejection fraction (LVEF) is \geq 30%. EP date obtained _____ (must be within 12 months) EP _____ % obtained by <input type="checkbox"/> Cath <input type="checkbox"/> Echo <input type="checkbox"/> MUGA <input type="checkbox"/> Cardiac MRI, and Patient meets all criteria listed above in B1, including the formal shared decision-making encounter	

Spec Info: Original Poster Size

ICD INDICATION FORM



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