

ACHA ACHD PROGRAM CRITERIA  
Comprehensive Care Center

- A. ACHD Cardiologist
- B. ACHD Medical Program Director
- C. Advanced Practice Nurse/Physician Assistant
- D. Registered Nurse
- E. Cardiothoracic Surgery and Cardiothoracic Intensive Care Unit
- F. Heart Failure, Heart Transplant, Heart/Lung Transplantation
- G. Interventional Cardiac Catheterization
- H. Interventional Electrophysiology
- I. Inpatient Services
- J. Outpatient Services
- K. Transitional Services
- L. Patient-Centered Care
- M. Echocardiography
- N. Cardiac Magnetic Resonance Imaging
- O. Cardiac Computed Tomography
- P. Pulmonary Arterial Hypertension
- Q. Exercise Testing and Cardiac Rehabilitation
- R. Reproductive Services
- S. Psychology and Social Work

Key:

Must have documentation at the time of official application for the ACHA ACHD Accreditation Program.

Up to 2.5 years to establish, planning in place at the time of official application for the ACHA ACHD Accreditation Program.

Document requires signature.

ACHA ACHD Comprehensive Care Center			ACHA ACHD Care Center		
A	ACHD Cardiologist(s)		AA	ACHD Cardiologist(s)	
A1	Minimum two ACHD Cardiologists (including ACHD Medical Program Director).		AA1	Minimum one ACHD Cardiologist.	
A2	Must be board certified or board eligible in pediatric or internal medicine cardiology.		AA2	Policy/plan for ACHD Cardiologist backup and/or assistance.	
A3	<p>Must meet one of the following:</p> <p><b>1)</b> ABIM ACHD Board Eligible or Certified</p> <p><b>2)</b> ACHD board certified by an international board certification process recognized by the country’s governing body (documentation required)</p> <p><b>3)</b> Those who are not eligible by traditional ABIM ACHD Certification pathway (international cardiology training) are required to:</p> <p style="padding-left: 20px;">a) Contact the ABIM and determine if they are eligible to sit for the ABIM ACHD Board Certification. If they are eligible they should pursue ABIM ACHD Board Certification pathway. This may include completing general cardiovascular and ACHD board certification exams.</p> <p style="padding-left: 20px;">b) If they are not eligible (documentation from ABIM required) then the cardiologist will be accepted as an ACHD cardiologist for Program Accreditation if they meet the ABIM Practice Pathway requirements (<a href="#">click here</a>). After 2019 when the practice pathway ends, only options 1, 2, 3a are available.</p>		AA3	<p>Must meet one of the following:</p> <p><b>1)</b> ABIM ACHD Board Eligible or Certified</p> <p><b>2)</b> ACHD board certified by an international board certification process recognized by the country’s governing body (documentation required)</p> <p><b>3)</b> Those who are not eligible by traditional ABIM ACHD Certification pathway (international cardiology training) are required to:</p> <p style="padding-left: 20px;">a) Contact the ABIM and determine if they are eligible to sit for the ABIM ACHD Board Certification. If they are eligible they should pursue ABIM ACHD Board Certification pathway. This may include completing general cardiovascular and ACHD board certification exams.</p> <p style="padding-left: 20px;">b) If they are not eligible (documentation from ABIM required) then the cardiologist will be accepted as an ACHD cardiologist for Program Accreditation if they meet the ABIM Practice Pathway requirements (<a href="#">click here</a>). After 2019 when the practice pathway ends, only options 1, 2, 3a are available.</p>	
A4	*Requires Advanced Cardiovascular Life Support certification. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.		AA4	*Requires Advanced Cardiovascular Life Support certification. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.	

A5	<p>An ACHD Cardiologist should demonstrate active and ongoing involvement as an ACHD professional in some meaningful combination (more than one element) of:</p> <ol style="list-style-type: none"> <li>1) [1] education of professionals interested in learning more about the ACHD field;</li> <li>2) [2] the publication of substantive scientific manuscripts on CHD topics that adds to the value of the ACHD program and the ACHD community;</li> <li>3) [3] participation in CME ACHD education (per ABIM ACHD certification requirements);</li> <li>4) [4] time spent in the service of CHD/ACHD organizations.</li> </ol>		AA5	<p>An ACHD Cardiologist should demonstrate active and ongoing involvement as an ACHD professional in some meaningful combination (more than one element) of:</p> <ol style="list-style-type: none"> <li>1) [1] education of professionals interested in learning more about the ACHD field;</li> <li>2) [2] ] the publication of substantive scientific manuscripts on CHD topics that adds to the value of the ACHD program and the ACHD community;</li> <li>3) [3] participation in CME ACHD education (per ABIM ACHD certification requirements);</li> <li>4) [4] time spent in the service of CHD/ACHD organizations.</li> </ol>	
<b>B</b>	<b>ACHD Medical Program Director</b>		<b>BB</b>	<b>ACHD Medical Program Director</b>	
B1	An ACHD Medical Program Director must fulfill the requirements of the ACHD Cardiologist.		BB1	An ACHD Medical Program Director must fulfill the requirements of the ACHD Cardiologist.	
B2	An ACHD Medical Program Director must be recognized as the medical leader of his/her ACHD program (i.e. letter from Division Chief that supports/confirms their position as the leader of the ACHD program).		BB2	An ACHD Medical Program Director must be recognized as the medical leader of his/her ACHD program (i.e. letter from Division Chief that supports/confirms their position as the leader of the ACHD program).	
B3	An ACHD Medical Program Director is required to attend at least one ACHA National Conference at least once every five years. If the Director is unable to attend, a dedicated ACHD team member must attend.		BB3	An ACHD Medical Program Director is required to attend at least one ACHA National Conference at least once every five years. If the Director is unable to attend, a dedicated ACHD team member must attend.	
<b>C</b>	<b>Advanced Practice Nurse/Physician Assistant</b>		<b>CC</b>	<b>Advanced Practice Nurse/Physician Assistant</b>	
C1	At least 1 FTE dedicated to a board certified Advanced Practice Nurse or Physician Assistant.		CC1	At least 1 FTE dedicated to a board certified Advanced Practice Nurse or Physician Assistant.	

	<p>If a program does not have APPs, must meet the following:</p> <p><b>1)</b> The ACHD program would need to demonstrate the hospital and in particular, the heart center, does not hire APPs as part of their care team (e.g. the heart failure, EP, CT surgical programs).</p> <p><b>2)</b> The ACHD program would be required to have an additional ACHD cardiologist (3 ACHD cardiologists).</p> <p><b>3)</b> The ACHD Program would need to assume the role and work of the APP and demonstrate how this is appropriately covered.</p>			<p>If a program does not have APPs, must meet the following:</p> <p><b>1)</b> The ACHD program would need to demonstrate the hospital and in particular, the heart center, does not hire APPs as part of their care team (e.g. the heart failure, EP, CT surgical programs).</p> <p><b>2)</b> The ACHD program would be required to have an additional ACHD cardiologist (3 ACHD cardiologists).</p> <p><b>3)</b> The ACHD Program would need to assume the role and work of the APP and demonstrate how this is appropriately covered.</p>	
C2	<p>*Requires Advanced Cardiovascular Life Support certification. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.</p>		CC2	<p>* Requires Advanced Cardiovascular Life Support certification. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	
C3	<p>Advance Practice Nurse or Physician Assistant should demonstrate active and ongoing involvement as an ACHD professional in some meaningful combination (more than one element) of:</p> <p>1) [1] education of professionals interested in learning more about the ACHD field;</p> <p>2) [2] the publication of scientific manuscripts on CHD topics;</p> <p>3) [3] participation in CME ACHD education;</p> <p>4) [4] time spent in the service of CHD/ACHD organizations.</p>		CC3	<p>Advance Practice Nurse or Physician Assistant should demonstrate active and ongoing involvement as an ACHD professional in some meaningful combination (more than one element) of:</p> <p>1) [1] education of professionals interested in learning more about the ACHD field;</p> <p>2) [2] the publication of scientific manuscripts on CHD topics;</p> <p>3) [3] participation in CME ACHD education;</p> <p>4) [4] time spent in the service of CHD/ACHD organizations.</p>	
D	<b>Registered Nurse</b>		DD	<b>Registered Nurse</b>	
D1	1 FTE dedicated Registered Nurse		DD1	1 FTE (may be divided by 2 providers, including APN/PA).	
D2	<p>*Requires Advanced Cardiovascular Life Support certification. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.</p>		DD2	<p>*Requires Advanced Cardiovascular Life Support certification. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	

D3	Registered Nurse should demonstrate active and ongoing involvement as an ACHD professional in some meaningful combination (more than one element) of:		DD3	Registered Nurse should demonstrate active and ongoing involvement as an ACHD professional in some meaningful combination (more than one element) of:
1)	[1] education of professionals interested in learning more about the ACHD field;		1)	[1] education of professionals interested in learning more about the ACHD field;
2)	[2] the publication of scientific manuscripts on CHD topics;		2)	[2] the publication of scientific manuscripts on CHD topics;
3)	[3] participation in CME ACHD education;		3)	[3] participation in CME ACHD education;
4)	[4] time spent in the service of CHD/ACHD organizations.		4)	[4] time spent in the service of CHD/ACHD organizations.
E	<b>Cardiothoracic Surgery and Cardiothoracic Intensive Care Unit</b>		EE	<b>Cardiothoracic Surgery and Cardiothoracic Intensive Care Unit</b>
E1	ACHD Surgical Director must be board certified as a congenital heart surgeon by American Board of Thoracic Surgery.		EE1	Policy/plan for referral of surgical cases to an ACHA ACHD Comprehensive Care Center.  This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
E2	*Requires Advanced Cardiovascular Life Support certification. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.		EE2	ACHD surgery may be performed at an ACHA ACHD Care Center if they meet the requirements of an ACHA ACHD Comprehensive Care Center ACHD surgical program (see ACHA ACHD Comprehensive Care Center requirements*).
E3	Pre-/peri-/post-operative consultation, care and diagnostics should involve CHD trained/experienced personnel*			

E4	A minimum of two CHD Surgeons. If only 1 CHD Surgeon, clear policy/plan that 24/7 CHD surgical expertise for care and consultation is available.				
	<p><b>Must meet one of the following:</b></p> <p><b>1)</b> Board certified in CHD CT Surgery, <b>or</b></p> <p><b>2)</b> Board Certified in Cardiothoracic Surgery and have extensive experience and expertise in ACHD cardiothoracic surgery. This statement must be documented and provided by a Board Certified CHD Surgeon, the director of CT surgery or if it is the same surgeon, this should be provided by the Chair of Surgery (or equivalent).</p>				
E5	Designated ACHD Surgeon responsible for quality assessment/improvement.				
E6	Every ACHD surgical patient should be pre-reviewed by a multidisciplinary conference including ACHD physicians, ACHD surgeon, cardiac anesthesia with expertise in hemodynamics and physiology of ACHD patients, cardiac ICU, and preferably interventional catheterization, EP, and imaging specialists unless acuity precludes conference and thus, less formal discussion is held. Documentation stating the discussion and conclusions/recommendations placed in the patient chart.				
E7	On-site mechanical circulatory support policy/plan in place for transfer to transplant facility that is also an ACHA-accredited program. Process must involve consultation with ACHD surgeon and ACHD provider team.				
E8 a.	CHD Surgery includes, but is not limited to:				

b.	<p>a. Congenital cardiac disease diagnosed, operated or intervened in childhood or adulthood.</p> <p>b. Heart surgery for the natural history or sequelae of congenital cardiac disease.</p>				
<p>*CTICU staff, including physicians and nurses, should undergo ongoing ACHD education. Please see Inpatient Criteria #4</p>					
F	<p><b>Heart Failure, Heart Transplant, Heart/Lung Transplant</b></p>		FF	<p><b>Heart Failure, Heart Transplant, Heart/Lung Transplant</b></p>	
F1	<p>At least one designated board certified or board eligible Heart failure cardiologist to collaborate with the ACHD team.</p>		FF1	<p>Any patient with HF and ACHD at an ACHA ACHD Care Center should be evaluated by an ACHD cardiologist.</p>	
F2	<p>Process/plan for evaluation of advanced heart failure in ACHD patient must involve consultation with ACHD team.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>		FF2	<p>At least one designated board certified or board eligible Heart Failure cardiologist to collaborate with the ACHD team.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	
F3	<p>On-site mechanical circulatory or policy/plan, heart and heart/lung transplantation or policy/plan for transfer to a transplant facility that is also an ACHD accredited program. Process must involve consultation with ACHD surgeon and ACHD provider team.</p>		FF3	<p>Any ACHD patient with advanced heart failure for whom mechanical support and/or transplant is a consideration;</p> <p>a) a. Should be discussed with an ACHD cardiologist, HF specialist, transplant surgeon and CHD surgeon, and</p> <p>b) b. If indicated, referred to an appropriate ACHD transplant center</p>	
F4	<p>ACHD patients with advanced heart failure should have access to the same ancillary services that are available to adult acquired heart failure patients.</p>				
G	<p><b>Interventional Cardiac Catheterization</b></p>		GG	<p><b>Interventional Cardiac Catheterization</b></p>	

<p>G1</p> <p>a)</p> <p>b)</p>	<p>Diagnostic and interventional ACHD procedures should only be performed by pediatric or adult (IM) invasive cardiologist who:</p> <p>a. Have experience in the evaluation and treatment of ACHD patients, and</p> <p>b. Collaborates with the ACHD physician and team for pre-procedure evaluation and peri-procedure consultation.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>		<p>GG1</p>	<p>Policy/plan for referral of cardiac catheterization cases to an ACHA ACHD Comprehensive Care Center.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	
<p>G2</p>	<p>24/7 coverage of invasive cardiologist (defined above) in collaboration with ACHD team.</p>		<p>GG2</p> <p>a)</p> <p>1)</p> <p>2)</p> <p>b)</p> <p>c)</p>	<p>Cardiac catheterizations may be performed at an ACHA ACHD Care Center under the following conditions:</p> <p>a. Diagnostic and interventional ACHD procedures should only be performed by pediatric or adult (IM) invasive cardiologists who:</p> <p>1. Have experience in the evaluation and treatment of ACHD patients, and</p> <p>2. Collaborate with the ACHD physician and team for pre-procedure evaluation and peri-procedure consultation.</p> <p>b. Diagnostic ACHD catheterization procedures can be performed by a pediatric or adult (IM) invasive cardiologist.*</p> <p>c. Interventional ACHD catheterization procedures can be performed by a pediatric or adult (IM) invasive cardiologist, if a policy/plan for appropriate onsite CHD surgical backup is available.</p>	
<p>G3</p>	<p>24/7 surgical availability (see CT surgery criteria)</p>		<p>*in patients unlikely to undergo intervention</p>		
<p>G4</p>	<p>24/7 emergency access to operating room.</p>				
<p>G5</p>	<p>Access and availability CT surgery, open chest resuscitation, ECMO.</p>				



H	Interventional Electrophysiology	HH	Interventional Electrophysiology
H1	<p>An electrophysiologist (pediatric or internal medicine/adult) who cares for ACHD patients should have experience and expertise in implantable device evaluation, programming, arrhythmia management and the identification and management of device complications and malfunction.</p> <p>Interventional Electrophysiology (EP) procedures (EPS, ablations, devices) should be performed by an electrophysiologist (pediatric or internal medicine/adult) specialist who:</p> <ol style="list-style-type: none"> <li>a. Demonstrates competency in the evaluation and treatment of ACHD patients, and</li> <li>b. Collaborates with the ACHD team for pre-procedure evaluation and peri-procedure consultation.</li> </ol> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	HH1	<p>Policy/plan for referral of ACHD EP cases to an ACHA ACHD Comprehensive Care Center.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>
H2	<p>A plan for 24/7 ACHD EP coverage in collaboration with the ACHD team.</p>	HH2	<p>ACHD EP procedures may be performed at an ACHA ACHD Care Center under the following conditions:</p> <ol style="list-style-type: none"> <li>a) <ul style="list-style-type: none"> <li>• An electrophysiologist (pediatric or internal medicine/adult) who cares for ACHD patients should have experience and expertise in implantable device evaluation, programming, arrhythmia management and the identification and management of device complications and malfunction.</li> </ul> </li> <li>1) <ul style="list-style-type: none"> <li>• Interventional Electrophysiology (EP) procedures (EPS, ablations, devices) should be performed by an electrophysiologist (pediatric or internal medicine/adult) specialist who:</li> </ul> </li> <li>2) <ul style="list-style-type: none"> <li>• Interventional Electrophysiology (EP) procedures (EPS, ablations, devices) should be performed by an electrophysiologist (pediatric or internal medicine/adult) specialist who:</li> </ul> </li> <li>b) <ul style="list-style-type: none"> <li>• Interventional Electrophysiology (EP) procedures (EPS, ablations, devices) should be performed by an electrophysiologist (pediatric or internal medicine/adult) specialist who:</li> </ul> </li> </ol>

			c)	<ol style="list-style-type: none"> <li>1. Demonstrates competency in the evaluation and treatment of ACHD patients, and</li> <li>2. Collaborates with the ACHD team for pre-procedure evaluation and peri-procedure consultation. Have experience in the evaluation and treatment of ACHD patients, and</li> <li>3. Diagnostic ACHD EP procedures can be performed by a pediatric or adult (IM) electrophysiologist*</li> <li>4. Interventional ACHD EP and device extraction procedures can be performed by a pediatric or adult (IM) electrophysiologist, if a plan/policy for appropriate onsite CHD surgical backup is available.</li> </ol>	
H3	24/7 ACHD surgical availability including Mechanical Circulatory Support.		*in patients unlikely to undergo intervention		
H4	24/7 emergency access to operating room.				
H5	Availability and access to ACHD CT surgery, open chest resuscitation, ECMO, IABP.				
<b>I</b>	<b>Inpatient Services</b>		<b>II</b>	<b>Inpatient Services</b>	
I1	<p>Policy/plan for ACHD consultation within 24 hours of admission to the hospital for all ACHD patients (≥18 years of age).</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>		II1	<p>Policy/plan for ACHD consultation within 24 hours of admission to the hospital for all ACHD patients (≥18 years of age).</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	
I2	Access to ACHD imaging, invasive cardiac procedures, CT surgery while inpatient.		II2	Policy/plan for transfer to an ACHA ACHD Comprehensive Care Center if management/treatment is beyond the scope of what is available at an ACHA ACHD Care Center.	
I3	Policy/plan should be available to ensure care is provided in the pediatric or adult hospital appropriate for the patient’s medical issues, regardless of age.		II3	Access to internal medicine/subspecialist for consultation.	

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I4	Policy/plan for ongoing ACHD education of inpatient nursing staff.		II4	Policy/plan should be available to ensure care is provided in the pediatric or adult hospital appropriate for the patient’s medical issues, regardless of age.
	This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.			This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
I5	Emergency procedures, protocols and staff education in place to treat critically-ill ACHD patients and/or transfer to adult facility when appropriate.		II5	Emergency procedures, protocols and staff education in place to treat critically ill ACHD patients and/or transfer to adult facility when appropriate.
I6	Policy/plan for 24/7 access to general internal medicine and adult subspecialists either by in-house consultation or transfer to adult facility. Subspecialists including, but not limited to: IM consult, intensivist, pulmonologist, nephrologist, hematologist, neurologist, gastroenterologist, OB/GYN, Infectious disease, and general surgery.		II6	24/7 ACHD call schedule.
	This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.			This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
I7	24/7 ACHD call schedule.		II7	Designated ACHD team member responsible for quality assessment/improvement.
I8	Designated ACHD team member responsible for quality assessment/improvement.			

J	Outpatient Services		JJ	Outpatient Services	
J1	Outpatient care provided by ACHD cardiologists or APN/PA.		JJ1	Outpatient care provided by ACHD cardiologists or APN/PA.	
J2	Outpatient clinic has documentation of policy/plan for cardiopulmonary resuscitation of adults.  This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.		JJ2	Outpatient clinic has documentation of policy/plan for cardiopulmonary resuscitation of adults.  This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.	
J3	Contact information for patient referral on clinic listing in ACHA directory and institutional ACHD program website.		JJ3	Contact information for patient referral on clinic listing in ACHA directory and institutional ACHD program web page.	
J4	Availability of initial appointment within 4 weeks for new patients.		JJ4	Availability of an initial appointment within 4 weeks for new patients.	
J5	Urgent patients evaluated by the ACHD team within 48 hours.		JJ5	Urgent patients evaluated by the ACHD team within 48 hours.	
J6	Documentation of communication with patient’s physicians and providers.		JJ6	Documentation of communication with patient’s physicians and providers.	
J7	Established relationships with adult subspecialty providers as needed.		JJ7	Established relationships with adult subspecialty providers as needed.	
J8	Policy/plan to promote establishment of medical home for ACHD patients.  This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.		JJ8	Policy/plan to promote establishment of medical home for ACHD patients.  This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.	
J9	ACHD team meets regularly for patient case conference and review.		JJ9	ACHD team meets regularly for patient case conference and review.	
J10	Policy/plan for advance care planning*		JJ10	Policy/plan for advance care planning*	

	This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.			This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
J11	A process to provide ongoing patient education and patient education material. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.		JJ11	A process to provide ongoing patient education and patient education material. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
J12	A verifiable database (e.g. method of documentation) of ACHD patients and services.		JJ12	A verifiable database (e.g. method of documentation) of ACHD patients and services.
J13	Appropriate physical facilities and equipment for adult patients.		JJ13	Appropriate physical facilities and equipment for adult patients.
J14	Policy/Plan for ongoing ACHD education of nursing staff in outpatient clinic. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.		JJ14	Policy/Plan for ongoing ACHD education of nursing staff in outpatient clinic. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
J15	Designated ACHD team member responsible for quality assessment/improvement.		JJ15	Designated ACHD team member responsible for quality assessment/improvement.
*Advance care planning: Documentation of preference for any future medical care in the event that the patient is unable to speak for themselves and identification of a substitute decision maker.		*Advance care planning: Documentation of preference for any future medical care in the event that the patient is unable to speak for themselves and identification of a substitute decision maker.		
<b>K</b>	<b>Transitional Services</b>	<b>KK</b>	<b>Transitional Services</b>	
K1	Policy/plan to provide transition education for patients and providers.	KK1	Policy/plan to provide transition education for patients and providers.	

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K2	Policy/plan for planned patient transfer from pediatric to ACHD care.		KK2	Policy/plan for planned patient transfer from pediatric to ACHD care.	
	<ul style="list-style-type: none"> <li>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</li> </ul>			This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.	
K3	Collaboration with pediatric cardiology providers to support, as needed, for ongoing discussion regarding the patients and referrals.		KK3	Collaboration with pediatric cardiology providers to support, as needed, for ongoing discussion regarding the patients and referrals.	
<b>L</b>	<b>Patient-Centered Care</b>		<b>LL</b>	<b>Patient-Centered Care</b>	
L1	Integrate patient-centered care (PCC)* into the program mission statement.		LL1	Integrate patient-centered care (PCC)* into the program mission statement.	
L2	<p>Have policies and procedures to promote PCC.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>		LL2	<p>Have policies and procedures to promote PCC.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	
L3	Designate one ACHD team member responsible for PCC assessment, improvement and sustainment.		LL3	Designate one ACHD team member responsible for PCC assessment, improvement and sustainment.	
L4	Have team members participate in training programs/educational sessions designed to promote PCC.		LL4	Have team members participate in training programs/educational sessions designed to promote PCC.	
L5	Demonstrate ongoing liaison with patients and their families by establishing a Patient and Family Advisory Council (PFAC) or having a written strategy to create a PFAC.		LL5	Demonstrate ongoing liaison with patients and their families by establishing a Patient and Family Advisory Council (PFAC) or having a written strategy to create a PFAC.	

L6	Use a structured tool to collect patient feedback on their experience and satisfaction, and include a strategy for incorporating this feedback for improving quality care.		LL6	Use a structured tool to collect patient feedback on their experience and satisfaction, and include a strategy for incorporating this feedback for improving quality care.	
L7	Have a written strategy for healthcare providers to partner with, educate and engage patients/families in all stages of care delivery.		LL7	Have a written strategy for healthcare providers to partner with, educate and engage patients/families in all stages of care delivery.	
*Care that is respectful and responsive with the needs of the patient.			*Care that is respectful and responsive with the needs of the patient.		
M	<b>Echocardiography</b>		MM	<b>Echocardiography</b>	
M1	Access to 24/7 echocardiography (echo).		MM1	Access to 24/7 echocardiography (echo).	
M2	At least 1 CHD sonographer * on staff to establish protocols and oversee quality of imaging.		MM2	At least 1 CHD sonographer * on staff to establish protocols and oversee quality of imaging.	
M3	At least one echocardiographer on staff experienced in CHD, who is responsible for written protocols.**		MM3	At least one echocardiographer on staff experienced in CHD, who is responsible for written protocols.**	
M4	Echo program meets with ACHD program at least once a year to review performance and quality.		MM4	Echo program meets with ACHD program at least once a year to review performance and quality.	
M5	Designated ACHD team member responsible for quality assessment/improvement.		MM5	Designated ACHD team member responsible for quality assessment/improvement.	
<p>*Sonographer – <b>Meet the following:</b></p> <p><b>1)</b> Certification as required by the hospital and echo lab. Either American Registry of Radiologic Technologists (ARRT) or American Registry for Diagnostic Medical Sonography (ARDMS) which includes registered diagnostic cardiac sonographer (RDSCS).</p> <p><b>2)</b> At least 1 sonographer in the adult echo lab certified in pediatrics/CHD.</p> <p>** May include education relating to acquired heart disease/ongoing training.</p>			<p>*Sonographer – <b>Meet the following:</b></p> <p><b>1)</b> Certification as required by the hospital and echo lab. Either American Registry of Radiologic Technologists (ARRT) or American Registry for Diagnostic Medical Sonography (ARDMS) which includes registered diagnostic cardiac sonographer (RDSCS).</p> <p><b>2)</b> At least 1 sonographer in the adult echo lab certified in pediatrics/CHD.</p> <p>** May include education relating to acquired heart disease/ongoing training.</p>		

<b>N</b>		<b>Cardiac Magnetic Resonance Imaging</b>		<b>NN</b>		<b>Cardiac Magnetic Resonance Imaging</b>	
N1	Access to Cardiac Magnetic Resonance Imaging (MRI).			NN1	Access to Cardiac Magnetic Resonance Imaging (MRI).		
N2	Designated radiologist(s) and/or cardiologist(s) experienced in CHD that meets the qualifications of the American College of Radiology (ACR) Practice Guideline for Performing and Interpreting Cardiac Magnetic Resonance Imaging (MRI) (Level 3 certified).			NN2	Designated radiologist(s) and/or cardiologist(s) experienced in CHD that meets the qualifications of the American College of Radiology (ACR) Practice Guideline for Performing and Interpreting Cardiac Magnetic Resonance Imaging (MRI) (Level 3 certified).		
N3	MRI Program meets with ACHD program at least once a year to review performance and quality.			NN3	MRI Program meets with ACHD program at least once a year to review performance and quality.		
N4	Designated ACHD team member responsible for quality assessment/improvement.			NN4	Designated ACHD team member responsible for quality assessment/improvement.		
<b>O</b>		<b>Cardiac Computed Tomography</b>		<b>OO</b>		<b>Cardiac Computed Tomography</b>	
O1	Access to cardiac Computer Tomography (CT) Scan.			OO1	Access to cardiac Computer Tomography (CT) Scan.		
O2	Designated radiologist and/or cardiologist(s) experienced in CHD that meet the qualifications of the American College of Radiology (ACR) Practice Guideline for Performing and Interpreting Cardiac CT (Level 2 certified).			OO2	Designated radiologist and/or cardiologist(s) experienced in CHD that meet the qualifications of the American College of Radiology (ACR) Practice Guideline for Performing and Interpreting Cardiac CT (Level 2 certified).		
O3	CT program meets with ACHD program at least once a year to review performance and quality.			OO3	CT program meets with ACHD program at least once a year to review performance and quality.		
O4	Designated ACHD team member responsible for quality assessment/improvement.			OO4	Designated ACHD team member responsible for quality assessment/improvement.		
<b>P</b>		<b>Pulmonary Arterial Hypertension</b>		<b>PP</b>		<b>Pulmonary Arterial Hypertension</b>	
P1	Onsite availability of PAH consultation for ACHD patients.			PP1	Policy/plan for access to PAH consultation for ACHD patients.		



P2	Designated ACHD team member responsible for quality assessment/improvement, including at least once a year meeting to review performance and quality.	PP2	Designated ACHD team member responsible for quality assessment/improvement, including at least once a year meeting to review performance and quality.
<b>Q</b>	<b>Exercise Testing and Cardiac Rehabilitation</b>	<b>QQ</b>	<b>Exercise Testing and Cardiac Rehabilitation</b>
Q1	Access and onsite availability to the following equipment and testing: a) a. Exercise test b) b. Metabolic cardio-pulmonary testing c) c. Stress imaging (nuclear, MRI, echo) d) d. Standardized Six minute walk test	QQ1	Access and onsite availability to the following equipment and testing: a) a. Exercise test b) b. Metabolic cardio-pulmonary testing c) c. Stress imaging (nuclear, MRI, echo) d) d. Standardized Six minute walk test
Q2	Access and availability to cardiopulmonary rehabilitation programs.	QQ2	Access and availability to cardiopulmonary rehabilitation programs.
Q3	ACHD team available for collaboration with medical staff performing and interpreting exercise testing and cardiopulmonary rehab.	QQ3	ACHD team available for collaboration with medical staff performing and interpreting exercise testing and cardiopulmonary rehab.
Q4	*Requires Advanced Cardiovascular Life Support certification for supervision provider. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.	QQ4	*Requires Advanced Cardiovascular Life Support certification for supervision provider. For the specific requirements, please reference <a href="#">the table of addendums</a> at the end of this document.
Q5	Designated ACHD team member responsible for quality assessment/improvement.	QQ5	Designated ACHD team member responsible for quality assessment/improvement.
<b>R</b>	<b>Reproductive Services</b>	<b>RR</b>	<b>Reproductive Services</b>
R1	Policy/plan that encourages all female ACHD patients to have gynecological care. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.	RR1	Policy/plan that encourages all female ACHD patients to have gynecological care. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
R2	Policy/plan for discussion with patients of appropriate birth control methods and sexual function as it relates to CHD.	RR2	Policy/plan for discussion with patients of appropriate birth control methods and sexual function as it relates to CHD.

	This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.			This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
R3	Policy/plan for discussion with all female CHD patients to provide pre-pregnancy counseling and family planning. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.		RR3	Policy/plan for discussion with all female CHD patients to provide pre-pregnancy counseling and advice regarding family planning. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
R4	Policy/plan for discussion of sexual counseling regarding sexual dysfunction. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.		RR4	Policy/plan for discussion of sexual counseling regarding sexual dysfunction. This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.
R5 a)  b)	Documented availability of high-risk obstetric care: a. ACHD providers articulate and document a plan for delivery in collaboration with maternal/fetal medicine and anesthesiology. b. ACHD providers must have consulting privileges in the ACHD program's OB unit.		RR5 a)  b)  c) d)	1. Policy/plan for high-risk obstetric care: a. ACHD providers articulate and document a plan for delivery in collaboration with maternal/fetal medicine and anesthesiology. b. ACHD providers must have an established relationship with high-risk OB and ideally privileges in the hospital.  c. Access to fetal cardiac evaluation. d. Recognize when to refer to an ACHA ACHD Comprehensive Care Center ACHD OB unit.
R6	Access to genetic counseling.		RR6	Access to genetic counseling.
R7	Designated ACHD team member responsible for quality assessment/improvement.		RR7	Designated ACHD team member responsible for quality assessment/improvement.

ACHA ACHD Comprehensive Care Center		ACHA ACHD Care Center	
S	Psychology and Social Work	SS	Psychology and Social Work
S1	.5 FTE dedicated to Licensed Social Worker. If .5 FTE not present, a policy/plan for providing coverage by a provider with ACHD experience.	SS1	Policy/plan for providing coverage by a Licensed Social Worker/care manager with ACHD knowledge.
S2	<p>Policy/plan for referral to mental health services.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>	SS2	<p>Policy/plan for referral to mental health services.</p> <p>This uploaded policy/procedure document requires signatures from all individuals listed. For the specific signatures required, please reference <a href="#">the table of addendums</a> at the end of this document.</p>

Table of Addendums	
*ACLS Certification	<p><b>Must meet one of the following:</b></p> <p><b>1)</b> ACHD Providers: All ACHD providers must have ACLS Certification if they work in a pediatric hospital or outpatient clinic (including outreach clinics) as part of the ACHD program. If the ACHD providers only work in adult facilities and are not ACLS certified and not required by the hospital/facility to be certified, the program must demonstrate an ACLS code team is certified.</p> <p><b>2)</b> Non-ACHD Providers caring for ACHD patients (e.g. inpatient and outpatient setting; nurses, EP docs, interventionalist). Either all of those caring for ACHD patients are ACLS certified OR if a hospital system doesn't require ACLS Certification but cares for adult patients, must demonstrate the code team is ACLS certified.</p> <p><b>3)</b> Appropriate ACLS equipment is available at all sites where ACHD patients receive care.</p>
Signatures – EE1 (Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – F2/FF2 (Comprehensive Care Center & Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Chief of Cardiology</li> <li>• Chief of Pediatric Cardiology</li> <li>• Director of Heart Failure/Txpl (Internal Medicine)</li> <li>• Director of Heart Failure/Txpl (Pediatrics)</li> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – G1/GG1 (Comprehensive Care Center & Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Director of Pediatric Cardiology</li> <li>• Director of Cardiology</li> <li>• Director Cardiac Catheterization Lab (Pediatric Cardiology)</li> <li>• Director of Cardiac Catheterization (Internal Medicine)</li> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – H1 & HH1 (Comprehensive Care Center & Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Director of Pediatric Cardiology</li> <li>• Director of EP (pediatric cardiology)</li> <li>• Director of Cardiology</li> <li>• Medical Program Director of ACHD</li> </ul>

Signatures – I1& II1 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – I3 & II3 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – I4 (Comprehensive Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> <li>• Director of Nursing (or equivalent)</li> </ul>
Signatures – II4 (Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – I6 & II6 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – J2 & JJ2 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – J8 & JJ8 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – J10 & JJ10	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>

(Comprehensive Care Center & Care Center)	
Signatures – J11 & JJ11 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – J14 & JJ14 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – K1 & KK1 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> <li>• Transition Nurse Coordinator</li> <li>• Chief of Pediatric Cardiology</li> </ul>
Signatures – K2 & KK2 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> <li>• Transition Nurse Coordinator</li> <li>• Chief of Pediatric Cardiology</li> </ul>
Signatures – L2 & LL2 (Comprehensive Care Center & Care Center)	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>
Signatures – R1 & RR1	Signatures Required: <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>

(Comprehensive Care Center & Care Center)	<ul style="list-style-type: none"> <li>• Head of Maternal Fetal Medicine (MFM)</li> </ul>
Signatures – R2 & RR2 (Comprehensive Care Center & Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> <li>• Head of Maternal Fetal Medicine (MFM)</li> </ul>
Signatures – R3 & RR3 (Comprehensive Care Center & Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> <li>• Head of Maternal Fetal Medicine (MFM)</li> </ul>
Signatures – R4 & RR4 (Comprehensive Care Center & Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> <li>• Head of Maternal Fetal Medicine (MFM)</li> </ul>
Signatures – S2 & SS2 (Comprehensive Care Center & Care Center)	<p>Signatures Required:</p> <ul style="list-style-type: none"> <li>• Medical Program Director of ACHD</li> </ul>

List of Acronyms In alphabetical order	
ABIM	American Board of Internal Medicine
ACHA	Adult Congenital Heart Association

ACHD	Adult Congenital Heart Disease
ACR	American College of Radiology
APN	Advanced Practice Nurse
CHD	Congenital Heart Disease/Congenital Heart Defect
CME	Continuing Medical Education
CT	Cardiothoracic/Computer Tomography Scan
CTICU	Cardiothoracic Intensive Care Unit
Echo	Echocardiogram
ECMO	Extracorporeal Membrane Oxygenation
EP	Electrophysiologist
EPS	Electrophysiology Study
FTE	Full Time Employee
HF	Heart Failure
IABP	Intra-Aortic Balloon Pump
IM	Internal Medicine
MRI	Magnetic Resonance Imaging
OB/GYN	Obstetrics and Gynecology
PA	Physician's Assistant
PCC	Patient Centered Care
PFAC	Patient Family Advisory Council