



UNC Liver Center
Hepatology and Liver Transplant New Referral Form
Phone: (919) 966-2516

Please fax completed referral form to (984) 974-3414

In lieu of this form, we also accept electronic referrals through Epic and UNC CareLink (Amb Referral to Transplant Hepatology)

Consider referring for a liver transplant evaluation any patient with:

- Decompensated cirrhosis (history of variceal hemorrhage, hepatic encephalopathy, or ascites) and MELD 3.0 \geq 15 (\geq 11 if they have a potential living donor), or
- Hepatocellular carcinoma

Patient Information:

Last Name: _____ First Name: _____
Date of Birth: _____ UNC MRN (if known): _____
Address: _____
City, State, Zip: _____
Phone: _____
Language: _____ Interpreter Needed? ☐ Yes ☐ No

Referring Provider Information:

Name: _____
Practice Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____

Diagnosis/Reason for Referral: _____

Is this referral for a liver transplant evaluation? ☐ Yes ☐ No
Does this patient have a potential living donor? ☐ Yes ☐ No ☐ Unknown
When was the patient's last drink of alcohol? _____

Note: UNC does not have a minimum required duration of sobriety to consider liver transplantation. Patients with recent alcohol use are considered on a case-by-case basis.

Clinic location preference: Location is not guaranteed and is based on availability and patient's clinical needs

☐ Chapel Hill ☐ Rex/Raleigh ☐ Wilmington ☐ Greenville ☐ Blue Ridge/Morganton

Please include the following information:

- Face sheet with patient demographics and insurance information
- Most recent clinic note
- Lab results within 90 days, including CMP, CBC, INR
- Liver imaging within the last 12 months (US, CT, MRI)
- Most recent EGD, if available
- Any liver biopsy results, if available

Note: Scheduling for liver transplant evaluations can be expedited if a recent multiphase CT or MRI of the abdomen is available prior to referral

For transplant recipients who were transplanted at another center, please include the following records:

- Face sheet with patient demographics and insurance information
- Last clinic note from the patient's transplant program
- Current medication list
- Vaccination record
- Transplant operative report
- Discharge summary from transplant hospitalization
- Explant pathology report
- Pathology reports from any posttransplant liver biopsies
- Recent liver imaging (US, CT, MRI)
- ERCP reports

UNC HEPATOLOGISTS

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