



Referral for Review of Long Term Amiodarone Prescribing

We have become aware that there are patients in the county on long term amiodarone treatment who are not under cardiology follow up. NICE Clinical Guideline on Atrial Fibrillation: Management (CG180) states that amiodarone should not be used long term for rate control in atrial fibrillation (AF) and that where used for rhythm control before or after electrical cardioversion it should only be for up to 12 months. We have agreed a pathway to ensure that all patients on amiodarone have appropriate cardiology follow up. Please ensure that suitable patients are referred using the following pathway.

GP/Practice Pharmacist Identifies patient on Amiodarone >12 months



- ✓ Identify reason for Amiodarone- AF/PAF/AT/VT
- ✓ Check if decision to be on permanent amiodarone – letter from consultant
- ✓ Check if the patient already has a cardiology appointment
- ✓ Ensure Thyroid Function Tests (TFTs) in last 6 months
- ✓ Ensure Liver Function Tests (LFTs) in last 6 months
- ✓ Check heart rate and ECG (1 or 6 lead ECG is sufficient) –
Check for any Adverse Drug Reactions (ADR) including
 - Abnormal TFTs
 - Symptoms of thyroid dysfunction (hyper or hypo thyroidism)
 - Abnormal LFTs
 - Shortness of breath or other symptoms of lung disease



If a patient does not have a cardiology appointment in the next 6 months or has ADRs -refer to the virtual clinic

For KGH email Dr Thomas Key (cardiology registrar)

thomas.key@nhs.net

For NGH email Rebecca Coleman (specialist cardiology nurse)

rebecca.coleman16@nhs.net

Ensure the following information is provided with the referral

- Thyroid Function Tests in last 6 months
- Liver Function Tests in last 6 months
- ECG 1 or 6 lead
- Why the referral is being requested

The clinic will advise the GP accordingly and an appointment will only be offered if the above tests and results are available.

This edition is also available on the Primary Care Portal