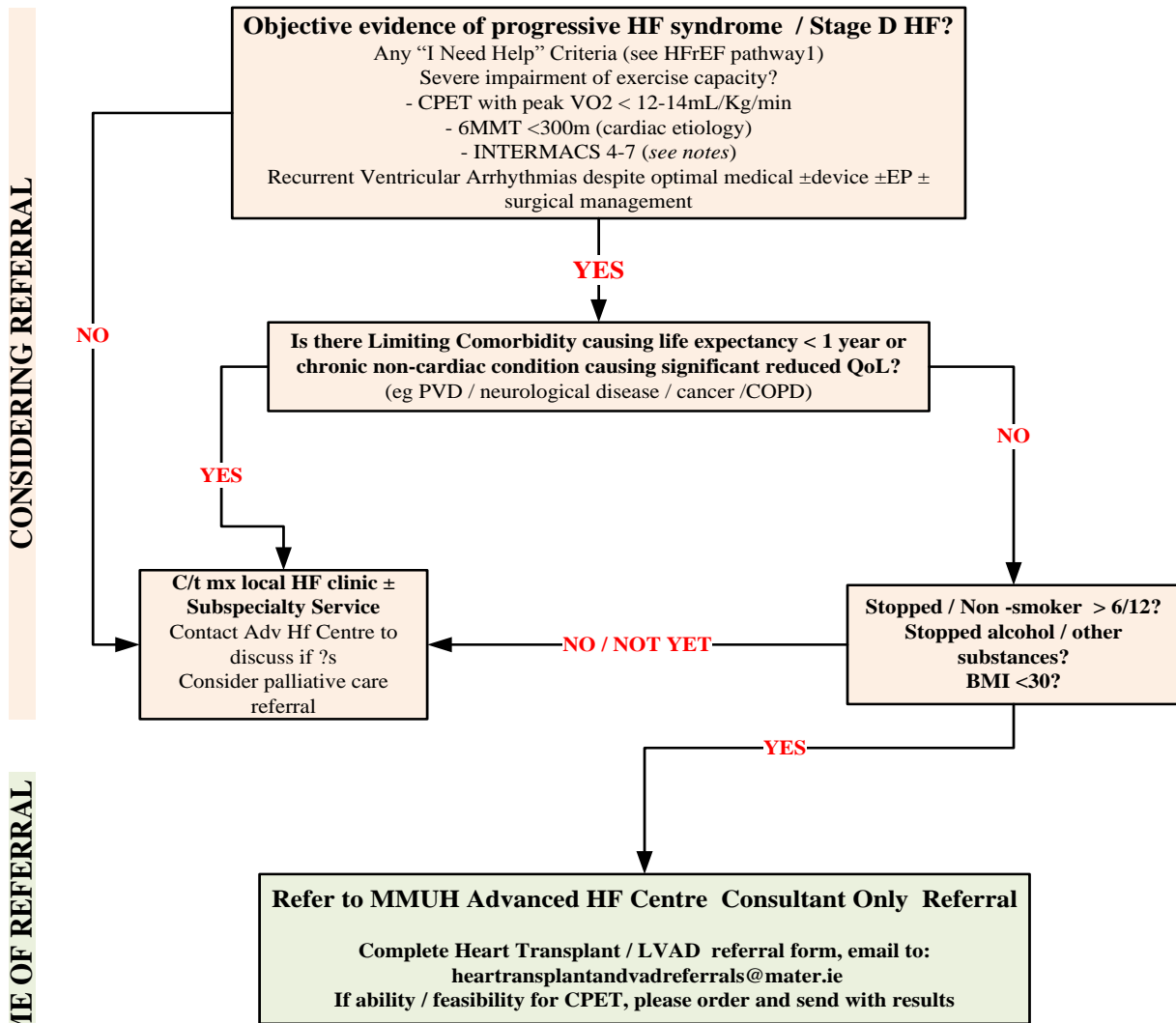




**Non / HFrEF /  
Less Common Cardiomyopathy( age ≤ 65 years)  
Out Patient Referral**

**Preserved EF / Non-DCM phenotypes including:**  
Hypertrophic\* or Restrictive Cardiomyopathy\*\*  
Valvular Cardiomyopathy\*\*\*  
Adult Congenital Heart Disease associated HF Radiation and / or chemotherapy-induced  
Familial Arrhythmogenic Cardiomyopathies\*\*\*\*



**FOOTNOTES**

\* Some metabolic/mitochondrial or familial cardiomyopathies may also present as a hypertrophic cardiomyopathy ie non-sarcomeric – these also come in here, don't mean classic "HOCM" only.

\*\* For restrictive cases, in this age group, most common familial. Important: please rule out amyloid (early TTR or AL) prior using serum free light chain ratio (in addition to any cardiac imaging) PRIOR to referral

\*\*\* Valvular if no valve-based surgical or percutaneous options remaining

\*\*\*\* May have preserved EF but scar burden/association with refractory ventricular arrhythmias limiting life expectancy or causing significant functional limitations

**Other Notes:**  
INTERMACS: 7 scale classification of stage D HF. 4-7 describe various levels of severe exertion limitation: 4 = symptoms at rest/inability to exercise, 5/6 symptoms on very minimal exertion, 7 "advanced Class III" symptoms – the old "3b"