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| **WA RHEUMATIC HEART DISEASE REGISTER AND CONTROL PROGRAM** |
| Acute rheumatic fever (ARF) and rheumatic heart disease (RHD) are notifiable conditions in WA. Report all **confirmed and suspected** cases by faxing or emailing this form and supporting documentation to:-WA RHD Register & Control Program**EMAIL** RHDRegister@health.wa.gov.au or **FAX** 08 6553 0899**PHONE** 1300 622 745  |

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| **PATIENT DETAILS** |
| Surname: |  |  |
| Given name/s: |  |  |
| UMRN: |  |  |
| Date of birth: |  |  |
| Full address: |  |
| Phone/Mobile: |  |
| Ethnicity: [ ]  Aboriginal [ ]  Aboriginal & Torres Strait Islander [ ]  Torres Strait Islander Other (specify): |
| Sex: [ ]  M [ ]  F [ ]  Transgender |
| Is the patient pregnant?: [ ]  No [ ]  Yes (please refer to RHD guidelines) [ ]  EDD:  |
| Is the patient a transfer? [ ]  No [ ]  Yes [ ]  Interstate [ ]  International Transferred from:  |
| **If patient is under 18 years of age, please provide parent/guardian details** |
| Surname: | Given Name/s: |
| Full Address: |
| Phone/Mobile: | Relationship to patient: |  |
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| **NOTIFIER DETAILS** | Date of Notification: |
| Full Name:  | Telephone: |
| Hospital/Clinic Name: | Full Address: |
| **PATIENT’S USUAL HEALTH CARE PROVIDER** |
| Full Name:  | Telephone: |
| Hospital/Clinic Name: | Full Address: |
| Comments: |  |
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| **MANIFESTATIONS (tick all that are applicable) APPLYING THE AUSTRALIAN MODIFIED JONES CRITERIA** |
| **HIGH-RISK GROUPS** | **LOW-RISK GROUPS** |
| **MAJOR** | **MAJOR** |
| [ ]  Clinical carditis | [ ]  Subclinical carditis (lesions on echo) | [ ]  Clinical carditis | [ ]  Subclinical carditis (lesions on echo) |
| [ ]  Polyarthritis | [ ]  Aseptic monoarthritis | [ ]  Polyarthralgia | [ ]  Polyarthritis |
| [ ]  Sydenham chorea | [ ]  Sydenham chorea |
| [ ]  Erythema marginatum | [ ]  Erythema marginatum  |
| [ ]  Subcutaneous nodules | [ ]  Subcutaneous nodules |

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| **MANIFESTATIONS Cont.** |
| **HIGH-RISK GROUPS** | **LOW-RISK GROUPS** |
| **MINOR** | **MINOR** |
| [ ]  Fever ≥38°C |  | [ ]  Fever ≥38.5°C |  |
| [ ]  Monoarthralgia  |  | [ ]  Polyarthralgia | [ ] Aseptic monoarthritis |
| [ ]  ESR ≥30 mm/hr or CRP ≥30 mg/L |  | [ ]  ESR ≥60 mm/hr or CRP ≥30 mg/L |
| [ ]  Prolonged P-R interval on ECG |  | [ ]  Prolonged P-R interval on ECG |  |

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| **SUPPORTING LABORATORY EVIDENCE** |
| Positive culture (Streptococcus)  | Site: | Date: |  |
| Anti-DNase B titre (U/ml) | Result: | Date: |  |
| ASOT (U/ml) | Result: | Date: |  |
| Highest CRP (mg/L) | Result: | Date: |  |
| Highest ESR (mm/hr) | Result: | Date: |  |

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| **CURRENT EPISODE DIAGNOSIS (refer to Australian modified Jones criteria for diagnosing ARF)** |

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| [ ]  Definite | [ ] Probable | [ ]  Possible | [ ]  Recurrence | [ ]  Unknown |

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| **Date of onset:** **Date of diagnosis:** |  | Date of 1st episode: |  |

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| **CURRENT EPISODE MANAGEMENT PROVIDED BY HEALTH CARE PROVIDER (HCP)** |
| Benzathine benzylpenicillin G or 10 days of oral prophylaxis given? | [ ]  No  | [ ]  Yes  |  |
|  | HCP:  | Date |  |
| Laboratory bloods done? | [ ]  No  | [ ]  Yes  |  |
|  | HCP:  | Date |  |
| ECHO Performed? | [ ]  No  | [ ]  Yes  |  |
|  | HCP:  | Date |  |
| Was the patient hospitalised due to the current episode of ARF? | [ ]  No  | [ ]  Yes  |  |
|  | Hospital:  | Date |  |
| COMMENTS: |  |
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| **RHEUMATIC HEART DISEASE (RHD)** |
| RHD Status | [ ]  RHD presentDate diagnosed: | [ ]  RHD absent | [ ]  Echo not performed |
| Severity of RHD (if known) |  |  |  |
| [ ]  Priority 1 (severe) | [ ]  Priority 2 (moderate) | [ ]  Priority 3 (mild) | [ ]  Priority 4 |
| COMMENTS: |  |

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| **CLINICAL DECLARATION** |
| Name of person notifying the Register: | Position: |
| Signature: | Date: |

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| **LINKS FOR CLINICAL RESOURCES** |
| The Australian RHD Guideline resource book, online education modules promotional resources: [www.rhdaustralia.org.au](http://www.rhdaustralia.org.au)The statutory notification information and ARF /RHD notification form: <https://ww2.health.wa.gov.au/Articles/U_Z/WA-rheumatic-heart-disease-register>  |

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| **PATIENT RESOURCES** |
| Patient education on ARF/RHD: [www.healthywa.wa.gov.au](http://www.healthywa.wa.gov.au) |

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| **AUSTRALIAN MODIFIED JONES CRITERIA FOR DIAGNOSING ARF** |
| **Definite initial episode of ARF** = * 2 major manifestations plus evidence of preceding Group A Streptococcus **OR**
* 1 major and 2 minor manifestations plus evidence of preceding Group A Streptococcus

**Definite recurrent episode of ARF (in a patient with a documented history of ARF or RHD)** = * 2 major manifestations plus evidence of preceding Group A Streptococcus **OR**
* 1 major and 2 minor manifestations plus evidence of preceding Group A Streptococcus **OR**
* 3 minor manifestations plus evidence of preceding Group A Streptococcus

**Probable or possible ARF (initial or recurrent)** = A clinical presentation in which ARF is considered a likely diagnosis but falls short in meeting the criteria by either:* one major or one minor manifestation **OR**
* no evidence of preceding Group A Streptococcus (streptococcal titres within normal limits or titres not measured)
* **Probable-**  ARF is still considered the most likely diagnosis
* **Possible**- ARF is considered uncertain but cannot be ruled out
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| **UPPER LIMITS OF NORMAL FOR P-R INTERVAL ON ECG** |
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| **Age Group (Years)** | **Seconds** |
| 3-11 | 0.16 |
| 12-16 | 0.18 |
| 17+ | 0.20 |

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| **UPPER LIMITS OF NORMAL (ULN) FOR SERUM STREPTOCOCCAL ANTIBODY TITRES IN CHILDREN AND ADULTS** |
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| **Age Group** | **ULN (U/mL)** |
| **(Years)** | **ASO titre** | **Anti-DNase B titre** |
| 1-4 | 170 | 366 |
| 5-14 | 276 | 499 |
| 15-24 | 238 | 473 |
| 25-34 | 177 | 390 |
| ≥35 | 127 | 265 |

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