# ACC/ACHD guidelines for adults with specific congenital heart defects

## Simple congenital heart defects

These patients can usually be cared for in the general community:

- Native disease
- · Isolated congenital aortic valve disease
- Isolated congenital mitral valve disease (e.g., except parachute valve, cleft leaflet)
- Small atrial septal defect
- Isolated small ventricular septal defect (no associated lesions)
- Mild pulmonary stenosis
- Small patent ductus arteriosus
- Repaired conditions
- · Previously ligated or occluded ductus arteriosus
- Repaired secundum or sinus venosus atrial septal defect without residua
- Repaired ventricular septal defect without residua

## Moderately complex congenital heart defects

These patients should be seen periodically at regional adult congenital heart disease centers:

- Aorto-left ventricular fistulas
- Anomalous pulmonary venous drainage, partial or total
- Atrioventricular septal defects (partial or complete)
- · Coarctation of the aorta
- Ebstein's anomaly
- Infundibular right ventricular outflow obstruction of significance
- Ostium primum atrial septal defect
- Patent ductus arteriosus (not closed)
- Pulmonary valve regurgitation (moderate to severe)
- Pulmonary valve stenosis (moderate to severe)
- Sinus of Valsalva fistula/aneurysm
- Sinus venosus atrial septal defect
- Subvalvular AS or SupraAS (except HOCM)
- Tetralogy of Fallot
- Ventricular septal defect with:
- Absent valve or valves
- Aortic regurgitation
- Coarctation of the aorta

# About OHSU Knight Cardiovascular Institute

The OHSU Knight Cardiovascular Institute was established through a visionary \$125 million philanthropic investment from Nike co-founder and chairman Phil Knight and his wife, Penny. It is the largest gift ever recorded to advance cardiovascular health in the United States. The Knight Cardiovascular Institute is an integrated center of translational research, clinical care, education and disease prevention, which is dedicated to becoming the world's best at translating research into clinical innovations to benefit patients by attacking heart disease from every angle, before conception and throughout a person's lifetime. If you have any questions or would like a consult with our team, please feel free to call us at 800 245-6478.

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- Mitral disease
- Right ventricular outflow tract obstruction
- Straddling tricuspid/mitral valve
- Subaortic stenosis

# **Complex congenital heart defects**

These patients should be seen regularly at adult congenital heart disease centers:

- Conduits, valved or nonvalved
- Cyanotic congenital heart (all forms)
- Double-outlet ventricle
- Eisenmenger syndrome
- Fontan procedure
- Mitral atresia
- Single ventricle (also called double inlet or outlet, common, or primitive)
- Pulmonary atresia (all forms)
- Pulmonary vascular obstructive disease
- Transposition of the great arteries
- Tricuspid atresia
- Truncus arteriosus/hemitruncus
- Other abnormalities of atrioventricular or ventriculoarterial connection not included above (i.e., crisscross heart, isomerism, heterotaxy syndromes, ventricular inversion)

From the ACC/AHA 2008 Guidelines for the Management of Adults With Congenital Heart Disease.

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