



Northumbria Healthcare
NHS Foundation Trust

Pacemaker and implantable defibrillator information following your implant

Issued by cardiology

Post procedure

- After the procedure you will be given a sling to wear. Try to keep this on for 48 hours.
- After 48 hours you can begin to move your arm but try to take it easy until you are seen again in clinic, which will be in around 4 - 6 weeks. We ask you not to move your arm above shoulder height and to avoid sports such as golf, tennis, swimming or exercise involving weights in this time.

Please note, this limited arm movement is not applicable to generator replacement procedures.

We will arrange a follow up 4 - 6 week appointment at your nearest hospital either Wansbeck, North Tyneside or Hexham.

Wound care

- The ward staff may remove your dressing and spray it with a special liquid dressing (called opsite) or they may give you a supply of special dressings to take away.
- You can have a shower but avoid directing the showerhead directly over the wound until it is fully healed.
- Your stitches are dissolvable so you will not need to return to hospital to have them removed.

If the wound changes and starts to become very red, hot or oozy please let your GP or the department know straight away.

Identification card

- After your implant you should receive a device ID card. This card contains all the details about your implantable device including the, manufacturer and model. Unfortunately, sometimes this may not be possible at the time of implant and if this is the case please remind the staff at the 4 - 6 week checks and they will provide you with one.
- It is important to try and keep this ID card with you as much as possible. It is particularly useful if you are admitted into hospital or go to A&E. It allows staff to quickly identify what equipment they will need to check your device and alter it if needed.
- This card is also important for getting you through airport security and certain security check points that use metal detectors (see magnets section for more info).

Advice regarding risks with implantable devices

It is important to try and avoid coming into contact with magnetic fields as they can interfere with your device. Examples of things to avoid are:

- **Airport security**

You are **NOT** to go through the metal detector in airport security. Present your ID card to staff and explain you have a device. The staff can then take appropriate measures. They can still use the hand wand, X ray scanner or pat you down by hand.

- **Induction hob**

The advice with induction hobs are to turn sideways so your device is as far away as possible and stay at arm's length.

- **Electric chainsaws and power tools**

Certain power tools/ gardening tools have the potential to interfere with your device. If you must use the equipment please contact the department so we can get manufacturers specific advice and guidance to the equipment.

- **Welding equipment**

We strongly advise avoiding the use of any welding equipment. However, if you have to use welding equipment (as part of your job) then contact the department for further advice or guidance, we can contact your specific manufacturer for exact details.

- **Mobile phones**

Mobile phones are fine to own and use. Try to use the opposite ear to your pacemaker and do not store in a breast pocket of a shirt next to the device. A trouser pocket or bag is fine.

If you are using any machinery/devices and begin to feel unwell you must stop immediately and try to move away. Please inform the department if this happens.

Driving implications

Please read this section very carefully as only some sections will apply to you, if you are still unsure please ask a member of staff to clarify.

Assuming you have no other disqualifying medical factors, the bans are generally as follows.

Pacemaker

- **New implant**

Unless told otherwise you are banned from driving for at least 7 days post implant. You **MUST** inform both your insurance company and the DVLA about your device prior to driving again. If you hold a bus or lorry license this may be longer. Please see latest restriction at: <https://www.gov.uk/guidance/cardiovascular-disorders-assessing-fitness-to-drive#pacemaker-implant--including-box-change>

- **If you have a box change** (new battery)

There is no need to inform the DVLA and Driving may resume after one week provided there is no other disqualifying condition.

- **If you have a lead revision** (lead change or reposition)

There is a 7 day driving ban. You **MUST** inform the DVLA and insurance before driving again.

Implantable Cardioverter - Defibrillator (ICD)

- **New implant, if you have experienced a documented ventricular arrhythmia NOT resulting in incapacity (have not blacked out).**

Driving may resume after one month providing certain criteria are met. If all of the criteria are not met the ban will be 6 months (more details on DVLA website referenced below). You MUST inform the DVLA and your insurance company prior to driving again.

- **New implant, If you HAVE had a documented ventricular arrhythmia resulting in incapacity (have blacked out).**

There is a 6 month driving ban post implant. You MUST inform the DVLA and your insurance company before driving again.

- **New implant, Prophylactic ICD** (If you have been completely asymptomatic and the ICD has been implanted as a precaution). One month driving ban, must inform DVLA and insurance before driving again.

- **ICD lead revision** (lead change or reposition)

The ban is one month post procedure and need not notify the DVLA.

- **ICD box change** (new battery)

The ban is 7 days post procedure and you need not notify DVLA.

When you contact the DVLA they will also give you information about your ban and you must fill in a medical questionnaire.

In future if you do blackout or receive any shocks from your device you are not to drive again before speaking to the department and the DVLA.

More info can be found on:

<https://www.gov.uk/government/publications/assessing-fitness-to-drive-a-guide-for-medical-professionals>

All info correct as of 28/10/2019 but to be reviewed in October 2020.

Home monitors

We are now rolling out a home monitoring service for most devices. As a trust, we advise using home monitors however they are optional for you to use and if you do not wish to have one please let us know.

The idea behind home monitoring is to keep a closer check on your implanted device remotely.

When your device automatically connects to the monitor automatically, the home monitors take a download of all the information recorded by your device.

The home monitor will then automatically send us the download via the internet. We view this information every weekday morning, so any problems should be seen a lot sooner than just relying on clinic visits.

Under some circumstances, we may ask you to make a 'manual transmission'. A member of staff will ring you and you will be asked to be next to your home monitor and follow the instructions given.

Please note we use the websites owned by the manufacturers of your device to provide this service. Therefore, if you wish to be home monitored it would be necessary to store some of your details on this secure website outside of the NHS. We will require a consent form before you can take the home monitor. These websites cannot sell your data or ring you with unsolicited calls.

If we do need ring you about something it will come through on a withheld number so try to answer if you can, we will state who we are straight away.

The different types of home monitors we use

SJM MERLIN transmitter

- Plug the dongle into the side black flap.
- Plug the power into a normal standard power socket.
- Press the white button to 'wake up' the device.
- Press it again and the monitor will start beeping.
- Stay next to the monitor as it goes through each step, once the stars light up and the monitor is set up.
- Please leave the monitor plugged in all of the time and within about 2 metres of your bed.



Biotronik cardio messenger

- Remove the monitor from the packaging.
- The plug will be set up with an EU end, so slide the EU connector off the plug and replace with the spare UK connector.
- Plug the power cable into the monitor and into a standard power socket.
- The device should turn on and say 'OK' on the front.
- We advise to leave the monitor plugged in within about 2 metres of your bed.



Boston scientific latitude communicator

- Remove monitor and power cable from packaging.
- Plug the power cable into the monitor and into a standard power socket.
- All icons on the front should illuminate briefly then go off.
- An orange light will start to flash underneath the heart symbol button. Wait until it stops.
- The heart symbol itself will begin to flash white.
- Press the heart symbol button.
- Sit next to the monitor as it goes through its start-up process, the symbols will illuminate left to right.
- Once the doctor symbol on the right of the heart symbol illuminates the process is complete and you can move away.
- Leave the monitor plugged in within about 2metres of your bed



MyCareLink patient monitor

- This is used for loop recorder patients.
- Place on your bedside table and plug into the mains.
- Press the grey button next to the screen.
- This will trigger some screen prompts showing you the process of completing the initial set up.
- It will ask you to pick up the remote and hold it over the device in your chest.
- Wait until the green bar on the screen completes loading.
- Put the remote back in the holder.
- Wait until the next green bar is loaded and a green tick will show once complete.
- Your monitor is now set up.



Frequently asked questions

- **What is the therapy like?**

Some abnormal heart rhythms (arrhythmias) can be corrected easily with a series of small electrical pulses. Most people do not notice this kind of therapy. Stopping other, very fast, life-threatening arrhythmias may require a large pulse of energy known as a shock. A shock has been described by some ICD patients as a swift thump or blow to the chest. How strong the thump feels depends on how an individual body reacts to it.

- **How often does the ICD deliver therapy?**

It varies widely from patient to patient, depending upon each individual's heart condition. It would be unusual for a patient to expect frequent painful therapy.

- **Can I die with an ICD implanted?**

Yes. An ICD can only help restore a normal rhythm in a heart that has the ability to respond to treatment. When our bodies begin to die, our heart muscle becomes weak and tired. This makes our hearts less able to respond to the electrical impulses and shocks the ICD may deliver. If our illness means we create an end-of-life plan, it may be appropriate to further discuss the role of your ICD.

- **Do I still need medication now I have an ICD?**

Yes, anti-arrhythmia medication and the ICD will work together to make your fast heart rates occur less frequently or easier to stop.

- **When do I know when the battery runs down?**

Batteries are expected to last between five to ten years. If you regularly attend your clinic appointments the physiologist will monitor the battery voltage and other data very closely and will be able to assess when you are ready for the ICD to be changed.

- **I think my ICD vibrated/made a noise, what do I do?**

Some ICDs have a built-in 'Patient notifier' which vibrates or makes a sound under certain circumstances. If this happens, contact the cardiac rhythm management department as soon as possible.

- **My illness has changed my life. How do I cope with it?**

There are many people who are able to talk to you to help managing this period in your life. Sometimes talking to a close family member or trusted friend can help. Healthcare professionals can also help or guide you in the right direction.

Telephone numbers

Any questions?

**Please contact the Cardiac Rhythm Management Team:
0191 293 4383**

Alternatively: 0191 293 2720 North Tyneside General Hospital
01670 529 794 Wansbeck General Hospital

If no one is able to answer the phone please leave your name, state what type of device you have (pacemaker/ICD/Loop Recorder) and the best phone number to contact you on.

We will ring you back as soon as possible but please note if you ring outside of office hours we may not receive your message until the next working day (Monday to Friday from 8.30am to 4.30pm).

If you have a medical emergency e.g. receiving multiple shocks or blacking out please go straight to A&E with your ID card.

Additional information can be found at

British Heart Foundation: <https://www.bhf.org.uk/>

Arrhythmia Alliance: <http://www.heartrhythmalliance.org/aa/uk>

DVLA Guidelines:

<https://www.gov.uk/government/publications/assessing-fitness-to-drive-a-guide-for-medical-professionals>

Alternative Formats

If you would like a copy of this information in large print, another language, audio tape or other format please call the Contact Centre on 03 44 811 8118.

Other sources of information

NHS 111

NHS Choices

www.nhs.uk/pages/homepage.aspx

NICE (National Institute for Health and Clinical Excellence)

www.nice.org.uk

Patient Advice and Liaison Service (PALS)

Freephone: 0800 032 0202

Text: 07815 500015

Email: northoftynepals@nhct.nhs.uk

Northumbria Healthcare NHS Foundation Trust

General Enquiries 03 44 811 8111

www.northumbria.nhs.uk

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