

Living With Your Implantable Cardioverter Defibrillator (ICD)

Living With Your ICD

How does my heart beat?

- The heart has an electrical system that controls how fast it beats. A normal heartbeat starts from the top part of your heart (atria) and spreads to the bottom part of your heart (ventricles). This lets the heart fill with blood. The blood is then sent out to your body.
- If your heartbeat starts from the bottom of your heart, your heart pumps less blood to your body. This can make you feel dizzy or faint (pass out).

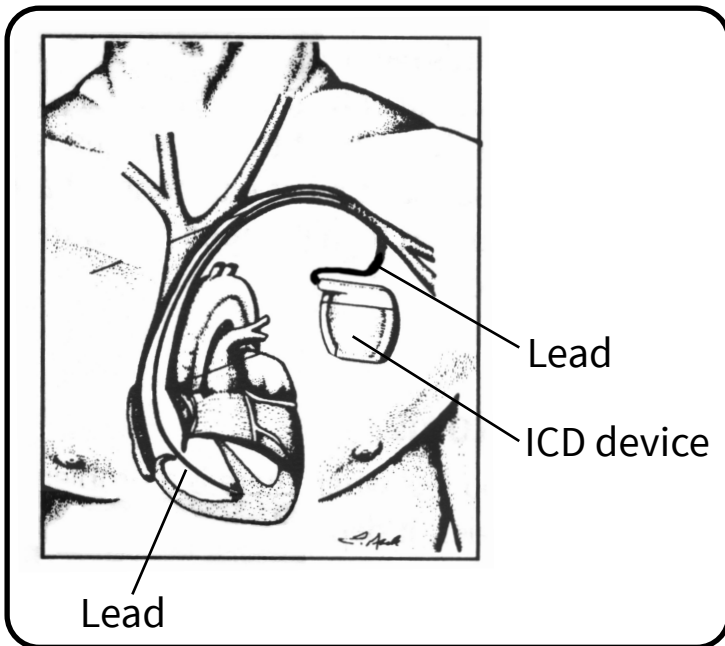
What happens if I have problems with my heartbeat?

Common symptoms of a dangerously fast heartbeat:

- › Fainting
- › Light-headedness
- › Dizziness
- › Weakness
- › A “fluttering” feeling in your chest

What is an ICD?

- An ICD finds and corrects dangerous fast heart rates that start in the bottom of your heart. The device is also a pacemaker, which can treat slow heart rates. You will need surgery to have the device placed in your body.
- A thin, insulated wire called a lead (“leed”) is placed in a vein and passed into your heart. It is placed in the right ventricle (lower right chamber of your heart). Sometimes a lead is placed in the upper chamber as well. The lead is attached to the ICD device. These leads sense your heart rate and rhythm and correct them.



- A battery is sealed inside the device. The battery will last about 5 years depending on how much it is used. When the battery is low, you will need a new device. You will probably not need a new lead when the device is changed.
- **An ICD works to:**
 - › Sense a dangerously fast heart rate and rhythm
 - › Correct this rate and rhythm
 - › Store information about a period of abnormal heart rhythm
 - › Slow the pace of certain fast heart rates
 - › Pace for a slow heart rate
- Your heart rhythm determines what type of treatment your device gives you. The device senses when your heart is beating dangerously fast or slow. Treatment then returns the heart to a normal rate.

Treatment types

- Your cardiologist (heart doctor) decides how fast your heart has to beat before it gets treatment from your device.

Pacing

- This could feel like a brief fluttering in your chest. You may not feel this treatment at all.

Shock therapy

- You may need a shock if you have a dangerously fast heart rate. This treatment could feel like an uncomfortable thump in your chest.

After your procedure



- An electrocardiogram (ECG or EKG) and a chest X-ray will be done.
- A nurse will check your bandage.
- You will be able to eat and drink as usual.
- You may have swelling and tenderness around the incision (cut) for a few days. Ask for pain medication, if needed.

Care after sedation

- Sedation is medication given through your an intravenous (I.V.) tube inserted (put in) into a vein in your arm using a needle. This medication will help you feel comfortable and relaxed during the procedure.
- You may not remember parts of your procedure because of this medication.

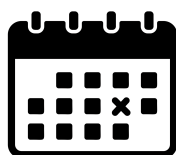
- After you receive sedation, you must follow these instructions:
 - › **A responsible adult should drive you home and stay with you overnight.**

For 24 hours (1 day) after your procedure:

- **Do not** drive a car or bicycle. The health care team will tell you how long to wait before driving a car after your procedure. It may be longer than 24 hours (1 day).
- **Do not** operate heavy machinery. The health care team will tell you how long to wait before operating heavy machinery after your procedure. It may be longer than 24 hours.
- **Do not** drink alcohol.
- **Do not** make any important decisions (like signing a contract, making a big purchase, or agreeing to an important commitment).

Follow-up

- Plans will be made for you to visit the Pacemaker Clinic for follow-up.



- In the Clinic, a special machine called a programmer will check your ICD. This does not hurt. A programming head, which looks like a large bar of soap, will be placed on your chest. This is attached to a computer so we can see how your device is working.
- Your device will be checked 2 times a year in the Clinic or through a home monitoring device.

At home

What should I do if I get a shock from my ICD?

You may never get a shock from your device, but if you do, you should:

- › rest by lying or sitting down right away.
- › call the Clinic as soon as possible to tell them that you have received a shock. The device will need to be checked in the Clinic. The clinic is open Monday to Friday, from 8 a.m. to 4 p.m.

Go to the nearest Emergency Department right away if you:

- › get a shock outside of Clinic hours and you are not feeling well.
- › have more than one shock.

Do not drive yourself.

- We recommend that you follow up with your primary health care provider (family doctor or nurse practitioner) 5 to 7 days after your procedure.
- If you have questions after your procedure, please call your primary health care provider.

Care of your incision

- Leave your dressing on until you see your primary health care provider. They may remove your dressing at your follow-up appointment, 5 to 7 days after your procedure.
- If you have Steri-Strips™ (strong pieces of tape) under the dressing, leave them in place on your skin. They will fall off in 7 to 10 days.
- **Do not** shower until the incision is well healed.
- You may have pain at the incision site.
An over-the-counter pain medication like acetaminophen (Tylenol®) may help.
 - › If you have any questions about what pain medication is right for you, ask your pharmacist.

Check your incision every day for signs of infection until it is healed. Call your primary health care provider if you have any of these symptoms of infection:

- › Swelling at the insertion site that gets bigger
- › Redness or warmth at the insertion site
- › Severe (very bad) pain
- › More pain that happens suddenly
- › Fever (temperature above 38 °C or 100.4 °F)
- › Chills
- › Yellow drainage or fluid from the insertion site

If you cannot reach your primary health provider, call 811 to talk to a registered nurse 24 hours a day, 7 days a week.

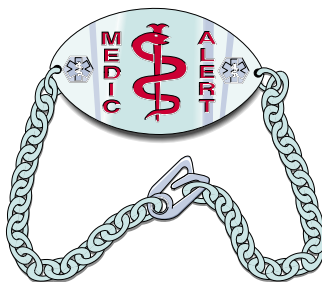
If it is an emergency, go to the nearest Emergency Department or call 911 right away.

Electrical equipment

- Household appliances, including microwaves, are safe to use.
- Keep all electrical appliances and power tools properly grounded and in good repair. This includes gardening tools, and workshop and office equipment.
- Tell your dentist and/or your other health care providers that you have an ICD device.
- **Do not lean over a running engine.** Some equipment or large motors may affect the way the device works. This may make you feel dizzy or faint. The device will work normally when you move away from the equipment.
- You may use a smart phone if you:
 - › keep it at least 6 inches away from your ICD device.
 - › **do not** carry it in a pocket over your ICD device.
- Walk normally through theft detectors at store entrances and airport screening detectors. Your device may set off the alarm, but it will keep working normally. Show your identity (I.D.) card for your device and **ask for a pat down search. Ask that they do not use a hand-held sensor.**

I.D. card and MedicAlert®

- You will be given a temporary I.D. card before you leave the hospital. It will list your device type and when you got it.
- Within a couple of months, the company that made the device will mail you a permanent I.D. card. This information will help if you have to see a doctor who does not know you.
- Ask for a MedicAlert® bracelet application before you leave the hospital.
Wear a MedicAlert® bracelet at all times.



Activities

For the next 6 weeks:

- **Do not** make any sudden, jerky movements that cause your arm on the same side as your ICD device to pull away from your body (like when a leash pulls on your arm while walking a dog).
- **Do not** put direct pressure on your device.
- **Do not** reach your arm on the same side as your ICD over your head.

Before you leave the hospital, your nurse will talk with you about any other limits to your activity.

Call 911 if you have any of these symptoms:

- › Feeling faint
- › Dizziness
- › Heart fluttering
- › Heart racing

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here:
www.nshealth.ca/patient-education-resources

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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