

Taunton and Somerset NHS Trust (logo)		Guideline (Cardiology)	
Title: Guidelines for BHF Arrhythmia Nurse Specialists ICD Clinic			
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Policy Lead: Dr S Walker			
Ratified by: Cardiology MDT		Active date: February 2011	
Ratification date:		Review date: February 2012	
Applies to: All patients attending BHF Arrhythmia Nurse Specialists pre ICD implant clinic		Exclusions: Patients not requiring ICD/CRTD	
Purpose: To ensure patients assessed needs are met in accordance with the National Service Framework for Coronary Heart Disease Chapter 8			

1.0 Aims

- 1.1 To ensure the patient has an understanding of their condition and clinical indication for ICD and CRT implant.
- 1.2 To facilitate informed consent
- 1.3 To ensure all patients (and family / significant other) understands ICD's, lifestyle implications of living with ICD and returning to activities / work and driving.
- 1.4 That they have sufficient support networks / information to meet their needs or are referred as necessary / given contact details for further support.

2.0 Objective

- 2.0 Assessment of required knowledge and understanding of their medical condition, ICD and 'living with ICD'
- 2.1 Assessment of support needs
- 2.2 Assessment of activity / exercise, return to work / previous activities
- 2.3 Give advice re activity/exercise, return to work / previous activities
- 2.4 Relevant education and information resources given out.
- 2.5 Review of HAD score
- 2.6 Onward referral to other members of the multi disciplinary team / support charity
- 2.7 A review of patient's lifestyle and activities to facilitate decision regarding physician choice of appropriate device and follow up facilities.
- 2.8 Discussion and education regarding remote monitoring when appropriate.

3.0 Personnel

- 3.1 The Clinic will be undertaken by
- 3.2 BHF Arrhythmia Nurse Specialists Janice Bailey and Jacqui Kemp

4.0 Location

- 4.1 Cardiology Outpatients Department, Level 2 Duchess Building, MPH
- 4.2 Clinic will be held on Friday afternoons.

5.0 Patient Group

- 5.1 Patients referred for ICD or CRTD implant by Consultant Cardiologist will be seen before POAC and implant.

6.0 Booking

6.1 Patients pre procedure will be booked into clinic by Annette Paramore or her team following receipt of purple referral form for implant. They may be suspended from the waiting list for implant if they are not considered psychologically or physically well enough to proceed.

7.0 Equipment and Set – Up

7.1 Patient's medical notes

7.2 Copy of clinic list

7.3 HAD score sheet

7.4 Healthy lifestyle information

7.5 Relevant charity leaflets – BHF, SADS UK, Arrhythmia Alliance, industry leaflets

7.6 MPH ICD booklet

7.7 DVLA information

7.8 Health and travel Insurance information

8.0 Administration

8.1 Patient's notes will be requested and taken to clinic by the arrhythmia nurses admin assistant, or cath lab admin team in her absence.

9.0 Nursing

9.1 For patients pre implant records will be recorded in the patients' medical notes.

9.2 The patient will be referred on for further support if the Nurse feels it necessary, referrals may be made to: Cardiology Consultant, Cardiac Rehab, Physiologist, manufacturing rep, support group / charity, BHF Heart Failure Nurses or GP.

10.0 Anxiety and Depression

10.1 Nurses will HAD score patients who are identified to be anxious or depressed, record in notes and make onward referral as necessary.

HAD score 0 – 7

No treatment

HAD score 8-10

Discuss results with patient, open conversation re worries / pacing goal setting

HAD score >11

Discuss results with patient, open conversation re worries / pacing goal setting/ and invite patient to make an appointment with GP

12.0 Exercise

12.1 Ascertain current activity / exercise level.

12.2 Is this level of activity / exercise satisfactory to patient / family / for health?

12.3 Offer appropriate advice regarding : realistic levels of activity / exercise depending on fitness ,cause of arrhythmia and other co-morbidities, increasing levels of activity / exercise, training issues (i.e. heart rate and warming up) , different sports, pacing and goal setting

13.0 Driving

- 13.1 Ascertain relevance for patient
- 13.2 Advise re DVLA regulations
- 13.3 Give copy of relevant information if required
- 13.4 Provide patient with support with completing DVLA medical forms if required.

14.0 Medication

- 14.1 Check medication with patient
- 14.2 Review medication – discuss with Consultant Cardiologist / GP if any problems.
- 14.3 Ensure understanding of medication, including common side effects, contraindications, offer relevant advice.

15.0 Return to Work

- 15.1 Discuss type of work and plan to return or alternative actions if unable to return to previous employment (pacing and goal setting if appropriate)
- 15.2 Liaise with employers if necessary
- 15.3 Provide information / contact details regarding benefits and other employment issues

16.0 Information Given

- 16.1 Assess knowledge and interest in developing understanding / gaps in knowledge
- 16.2 Offer appropriate advice and back up with relevant literature / websites
- 16.3 Record what information has been given
- 16.4 Offer details of support group and place on database to receive newsletters

17.0 Miscellaneous

- 17.1 The clinic will be cancelled if both the BHF Arrhythmia Nurses are away unexpectedly. The patients will be contacted by the Arrhythmia nurses admin assistant or one of the admin team to re-book.
- 17.2 The clinic will not be booked if BHF Arrhythmia Nurses are on planned leave (annual leave or study leave or BHF Business, for example)

18.0 Referral Criteria

18.1 Consultant Cardiologist

- Patient unfit for procedure (medical or psychological)
- Patient declining procedure
- Discrepancies with medication (cardiac drugs)
- Complex symptom management
- Urgent medication side effects
- Related medical problems i.e. respiratory

18.3 Primary Care

GP - HAD score >11

- GP -discrepancies with medication (non cardiac drugs)
- GP -non cardiac medical problems (except respiratory)
- GP -non urgent medication side effects (non cardiac drugs)
- GP - hypertension

- PN – lifestyle issues i.e. smoking cessation , weight control , travel vaccinations,

18.4 Cardiac Rehabilitation

- Patients referred on a case by case basis, by direct contact with Cardiac Rehabilitation Nurse Specialists
- Problems with returning to exercise (i.e. lack of confidence)
- Problem with joining a gym

18.5 Manufacturing Rep

- Needs further input re workplace activities
- Needs further technical info

18.6 Support Group / Charity

- Feels anxious , isolated , lacking in support
- Needs further information

18.7 BHF Heart Failure Nurses

- Patients to be discussed on a case by case basis, but will remain under the overall care of the Arrhythmia Nurse
- Diagnosis of heart failure
- lack of symptom control
- Lack of understanding re diagnosis, medication, treatment, lifestyle issues.

Points 18.4 to 18.7 may be addressed at the post ICD clinic if not relevant to the patients care or concerns at this time.