

## ELMHURST OUTPATIENT SURGERY CENTER

<b>POLICY/PROCEDURE:</b>	<b>Policy for Management of AICD (with Pacemaker)</b>	<b>EFFECTIVE DATE:</b>	<b>09/14/2007</b>
<b>SECTION:</b>	<b>Perioperative</b>	<b>LAST REVISION:</b>	<b>02/17/2010</b>  <b>5/30/2012 Reviewed: 2/08/2013</b>

### OBJECTIVE

To establish an appropriate process to manage AICD (with pacemaker) patients during surgical procedures.

### PLAN COMPONENTS

- **General information:** Cardiac patients may be dependent on the proper function of an AICD to sustain their lives. Understanding what types of AICD's exist, how they function and the precautions that must be taken when caring for patients with AICD is critical.

Not all pacemakers switch to a continuous asynchronous mode when a magnet is placed. Below are some ways these devices can respond to a magnet:

- ✓ Asynchronous pacing without rate responsiveness, using fixed parameters (most common).
- ✓ No change in rhythm or rate.
- ✓ Asynchronous pacing for 10-64 beats, then reversion to program mode and values.
- ✓ Continuous or transient loss of pacing.
- ✓ An AICD may be inactivated while the magnet is on or it may simply disable sensing, thereby inhibiting therapy (some CPI models).

- **Pre-operative guidelines:**

- ✓ All patients with an AICD (with pacemaker) must have an assessment performed within 90 days of the surgery date.
- ✓ Document the type and manufacturer of the AICD.
- ✓ Document the reason for the AICD in order to determine if device should be turned off.
- ✓ Determine if electrocautery will be used during surgical procedure.
- ✓ Review case with anesthesia and/or surgeon to determine if the AICD must be turned off. Note that if electrocautery will be used then the device **must** be turned off. If the AICD must be turned off, contact the manufacturer.

- **Intra-operative guidelines:** During surgery, patient must be under continuous monitoring.

- **Post-operative guidelines:**

- ✓ Patient must be continuously monitored until the AICD is returned to pre-op status.
- ✓ Patient must be monitored for any cardiac abnormalities until discharge.
- ✓ If cautery or magnet used during procedure, a printout should be placed in chart showing AICD is working properly prior to the patient's discharge.

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### **AUTHORITY AND RESPONSIBILITY**

The Director of Clinical Services, in conjunction with all Managers/Directors/Coordinators, is responsible for enforcing this policy.

### **EVALUATION AND IMPROVEMENT**

The evaluation and effectiveness of this policy is conducted by the Director of Clinical Services and reported to the PCC, CRC and Board of Managers as appropriate. Included in the evaluation are recommendations for changes based on trends, incidents, exposures, best practices, regulatory standards or the results of new scientific research. The CRC or Board of Managers may also provide direction on additional measures they wish the Director of Clinical Services to implement in order to ensure the objectives of the policy are met.

### **REFERENCES**

American Society of Anesthesiologists