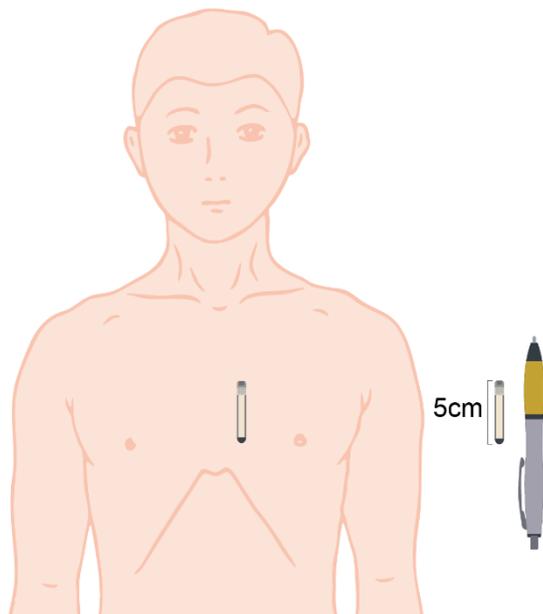


Living with an implantable loop recorder: information for children and young people

An implantable loop recorder is a small device implanted under the skin on your chest that records the electrical signal from your heart. This information sheet from Great Ormond Street Hospital (GOSH) explains about the implantable loop recorder, why you might need one and how it is inserted. It also explains what to expect when you go home.

An implantable loop recorder is a small device, which is implanted under the skin on your chest. It records the electrical signals in your heart so that when the recording is downloaded, your doctor will be able to see how your heart has been working.



Why do I need one?

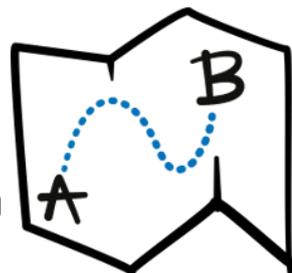
Your doctor will have suggested an implantable loop recorder because you have had some unexplained symptoms, such as heart racing, fainting or collapses. It may also be that your team think that monitoring your heart on a longer basis might be helpful.

Using this recorder we can understand if you are having any heart rhythm changes that need treatment or can explain your symptoms. This is especially helpful if your symptoms are very irregular and wearing even a long term two-week ECG monitor hasn't worked.

The loop recorder can stay in place for up to three years. Once the doctors know what is causing your symptoms, they may decide to start treatment, replace or remove the loop recorder.

How does it work?

Your loop recorder monitors your heart rhythm all the time and will automatically send information to the hospital should it see very fast, slow or irregular beats. This is through a monitor which is left in your house, close to where you sleep. You can also send two to four recordings a day when



you feel symptoms by pressing a button on a remote which we will explain how to use at the hospital.

What happens when I have an implantable loop recorder fitted?

You will have your loop recorder fitted in a small procedure either using local anaesthetic and medicine for pain or under general anaesthetic.

Your doctor will explain all about the procedure and ask you and your parents to sign a form giving permission for the procedure to happen – this called the consent form.

During the procedure, the doctor will put the recorder under the skin on your chest and check that it is working properly.

What happens afterwards?

If you had a general anaesthetic, you'll start to wake up in the recovery room a short time after the operation. Your parents can be there if you want. Once you're a bit awake, you'll come back to the ward to wake up fully. If you had the procedure under sedation, you will go back to the ward to allow the medication to wear off.

The operation site will be closed with stitches under the skin which dissolve over time, Steri-Strips® (strong sticky plasters) and wound glue, all of which is covered with a small dressing. Your chest might feel sore from the operation, but the nurses will give you medicine to get rid of any pain.

Going home

You will be able to go home when the doctor is happy that your recorder is working correctly and you are starting to feel better. Most young people go home the same day.

Your chest may still feel a bit sore when you get home, but this goes away in a few days. If it hurts, you can take pain relief medication.

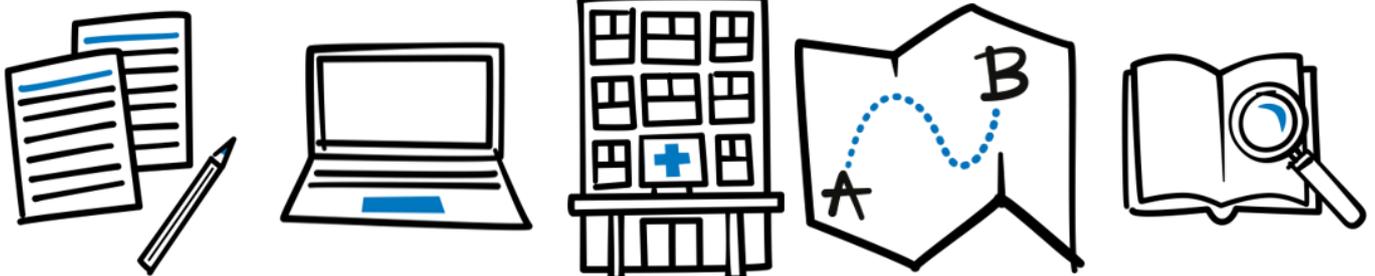
You should keep the dressing dry for five days and then take it off. Try not to soak the wound after you take the dressing off and avoid scrubbing or soaking the wound. The glue will appear dry and clear – it is a bit like a scab so do not pick or fiddle with it.

The Steri-Strips® will start to come off in a couple of days. If any are still stuck a week after the procedure, you can peel them off gently. You can go back to having a normal bath or shower a week afterwards if the scar has healed.

The operation site will be swollen and a bit red and it might also be bruised. Gradually, this will go down over the next three or four weeks. Once the swelling has improved, you might be able to feel or see the outline of your recorder, but this is normal. As you know it is there, you might feel or see it more than other people, who probably won't even notice.

The scar will get less red over the next few months, and eventually fade to a pale line. It can help to gently massage a simple fragrance-free moisturiser into the scar to make it less noticeable. You can start to do this when the scar has completely healed – about 10 weeks after the procedure.

Your follow up appointment will be planned and your wound will be reviewed at this time.



Looking after your operation site

- Keep your dressing on for the first five days, you can take it off after this.
- Check your operation site every day
 - Does it look red?
 - Does it look angry and inflamed?
 - Is it open?
 - Is it oozing, yellow or green?
- If you answer 'yes' to any of these questions, visit your family doctor (GP) to have it checked and let your Clinical Nurse Specialist know.
- Telephone your Clinical Nurse Specialist if you have any questions about your wound or the device. Out of hours (nights or weekends), you can call Bear Ward.
- Remember that your recorder site is slightly swollen and the scar is new – both will look better over time.

- As this is inserted superficially under the skin you do not need any additional treatment with antibiotics when you visit the dentist unless you have been advised otherwise by your cardiologist.
- Please let your cardiology team know if you are going for a general anaesthetic.

Precautions

- Do not keep your mobile phone in your breast pocket or bag shoulder strap
- Avoid sports and strenuous activity for first seven days, but you can do light activity and return to school two days after procedure.
- Avoid contact sports until your wound is fully healed. You may find it more comfortable to apply some extra padding or protection on the skin over the site.
- Try to avoid being hit in the chest. It should not damage your loop recorder but it could be uncomfortable. Telephone your Clinical Nurse Specialist if it happens.

Your identification (ID) card

- Photocopy your ID card and keep a copy in your bag, at home, and at school.
- Always carry your ID card with you
- Always have your patient activator with you

What do I do when I travel?

- You can take your monitor with you it works abroad! Just remember to place it close to where you sleep, like you would at home.

Washing

- Do not have a shower – have a shallow bath instead for five days while the dressing is on
- Wash your hair over the sink for the first week
- Once it has healed, you can wash your operation site gently with water, but pat it dry rather than rubbing it.

Can I go through airport security?

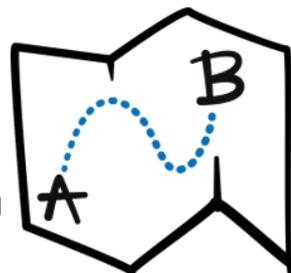
- Yes, you should have no trouble. Just bring your device card for airport security

Can I go through an MRI scanner?

- You should not have an MRI scan for six weeks after your procedure, following this you can have an MRI scan but just need to let the MRI team know you have a loop device in and show them your device card.

Visits to the doctor and dentist

- Remember to tell your doctor and dentist that you have loop recorder each time you visit.



I am having problems with my device, where can I get help?

- You can refer to the information booklet that comes with your device about any troubleshooting, or alternatively you can contact our team on (EP email) for further support.

to four episodes (depending on the length of episode); therefore, it is important to download the information and transfer it to us as soon as possible.

Please also keep a written record of your symptoms. For example, please include the date, time, duration and a brief description of the symptoms you are experiencing and email this to gosh.pacing@gosh.nhs.uk.

What to do if you think you have had symptoms

It's important to download your recorder soon after having symptoms. The device can only record two

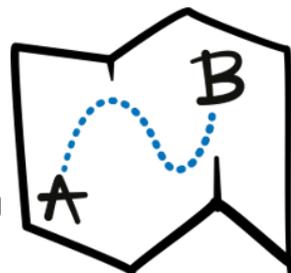
Further information and support

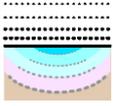
- Please call the Arrhythmia Service on 020 7405 9200 ext 5298 or 020 7813 8568 during office hours or the ECG team on ext 1011. In the evenings and at weekends, call Bear Ward on 020 7829 8829.

You can also email the Arrhythmia Clinical Nurse Specialists at gosh-tr.ecg@gosh.nhs.net, [the pacing team at gosh.pacing@gosh.nhs.uk](mailto:the.pacing.team@gosh.pacing@gosh.nhs.uk) or via MyGOSH once you have registered. More information is available at www.gosh.nhs.uk/your-hospital-visit/mygosh

Having a heart recorder device

	If you have heart flutters, feel dizzy or faint, it might be caused by your heart but it might not.
	Having a heart recorder device put under the skin on your chest can help the doctors work out what is making you feel like this.
	The device is about the size of half an ice lolly stick. It records what happens to your heart when you have these symptoms.
	You will need to have the device put in during a short operation.
	You can have a general anaesthetic for the operation. This means you will not feel anything or know what is happening.





You could choose to be awake for the operation. The doctors would make your chest numb so you don't feel anything.



You might feel a bit sick or dizzy after an anaesthetic. This will not last long. You can go home when you are feeling better.



Your chest might feel a bit sore. You can take some pain medicine to help.



There will be a dressing on your chest. You can take this off 5 days after the operation.



You can have a shower when you have taken off the dressing. Do not wash your chest for a few days to let it get better.



Try to spend the next few days quietly at home. You need time to get better after the operation.



You can start sports and games one week later. Try to avoid being knocked in your chest. It may hurt.



Do not put your mobile phone in a pocket near your chest.



Your nurse will phone you about a week after the operation. They will ask how you are feeling.



You will need to come back to hospital for a check-up a few weeks later.



Please ask us if you have any questions.

