A Guide to Your Implantable Loop Recorder (ILR)

Please bring this book with you on the day of your procedure
Welcome ......................................................................................................................................... 3
Implantable Loop Recorders ..................................................................................................... 4
Preparing for Your ILR ................................................................................................................ 5
Answers to Frequently Asked Questions ............................................................................. 8
Care after Placement of Your ILR ........................................................................................... 10
Checking Your ILR ...................................................................................................................... 12
Driving Directions Ross Heart Hospital ................................................................................ 14
Parking Directions Ross Heart Hospital .................................................................................. 15

For more information about what to expect before and after surgery, watch videos from the Device Clinic at http://go.osu.edu/deviceinfo.

Talk to your doctor or health care team if you have any questions about your care.
For more health information, go to patienteducation.osumc.edu or contact the Library for Health Information at 614-293-3707 or health-info@osu.edu.

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Welcome

Electrophysiology (EP) focuses on the electrical system of the heart. Your EP healthcare team is dedicated to providing you with personalized care, while they work with you and your family to find the cause of your heart rhythm symptoms.

To find out what kind of problem you may have, your doctor is recommending a recording device, called an implantable loop recorder or ILR. The device is implanted during minor surgery, which takes about 30 minutes.

The device is about the size of a small paper clip and is placed just under the skin over the heart. The device has a battery that lasts up to 3 years.

The ILR works like an electrocardiogram (ECG or EKG) to monitor your heart rhythm. It records the heart rhythm when you have your symptoms, such as fainting, palpitations, a very fast or slow heartbeat, or hidden rhythms that can cause strokes.

Your EP healthcare team will use the findings from your ILR to discuss treatment options with you and your family.

Contact information
Ross Heart Hospital
Cardiac Device Clinic
452 West 10th Avenue
Suite 1052
Columbus, OH 43210

Hours of operation:
Monday - Friday
8:00 am to 4:30 pm
Closed weekends and all major holidays

Phone numbers:
Main: 614-293-8916
Toll-free: 1-877-478-2478
Fax: 614-366-1315

Electrophysiology (EP) operating room at Richard M. Ross Heart Hospital
An implantable loop recorder or ILR is a small device that monitors your heart rhythm and records abnormal rhythms. During surgery, the ILR is inserted just beneath the skin in the chest wall over your heart.

If the ILR shows that your symptoms are heart rhythm related, your doctor will discuss treatment options with you and your family.

An ILR can monitor your heart for up to 3 years.

**An ILR is often used for these conditions**

- Syncope - also known as fainting or passing out
- Palpitations
- Ventricular tachycardia - a fast and potentially life-threatening heart rhythm from the bottom chambers of the heart
- Stroke or stroke-like symptoms - with no known cause
- Irregular heart rhythm - called atrial fibrillation or atrial flutter

Your doctor may use the ILR device to monitor your heart’s rhythm for other conditions.

**What to expect during surgery**

- Your doctor will numb the area where he or she will put the ILR, so you don’t feel any pain. Your doctor may also give you antibiotics to prevent infection.
- A small incision is made in your skin, and then the ILR is inserted.
- When the ILR is in place, your doctor will test it to make sure it works well, and then sew up the incision.

**What to expect after surgery**

- You will be discharged home the day of surgery.
- Although it is not necessary to have an adult drive you home after surgery, it is recommended.
- Read “Care after Placement of Your ILR” later in this book for more information on how to care for your ILR after surgery.
Preparing for Your ILR

Surgery date: _________________________ Check in time: ______________ 

On the day of your surgery, please:

• **Report to the Ross Heart Hospital**, located at 452 West 10th Avenue, Columbus, Ohio 43210

• **Arrive at your check-in time**, so we can prepare you for your surgery. This time is often 2 hours before the start of your surgery.

• **Register in the main lobby.**

Valet parking is available, or you may park in the SafeAuto Hospitals Garage, which is attached to the hospital. The garage’s address is 1585 Westpark Street, Columbus, OH 43210. Please read pages 15 to 18 for more information about parking.

One week before surgery

• **For one week before your surgery, do not shave near the site where you will have your surgery.** Shaving with a razor can irritate your skin and make it easier to develop an infection. If needed, the hair on the site where you will have surgery will be trimmed with electric clippers before your surgery begins.

24 hours before surgery

• Do not smoke or use tobacco products for 24 hours before your surgery.

The evening before surgery

• Shower with CHG soap. Read, *Cleaning your skin with CHG soap*, on the next page for instructions on how to prepare your skin for surgery.

The morning of surgery

• You may eat a light breakfast.
• Take all of your morning medicines.
• Shower again with CHG soap.
• Bring all of your medicines in their bottles to the hospital with you.
Cleaning your skin with CHG soap

**Take 2 showers using a special soap called CHG** (4% chlorhexidine gluconate). It is sold in most pharmacies under the brand name of Hibiclens. Wash from your **neck to your waist** with this soap the **night before your surgery** and then again the **morning of your surgery**. Use 4 ounces (½ cup) of CHG soap each time you shower.

**Follow these steps for using CHG soap**

1. Wash your hair as usual with your regular shampoo and then wash your body with regular soap. Rinse well.

2. Wet a clean washcloth. Turn off the shower.

3. Apply some CHG soap to the wet washcloth.

4. Use the washcloth to wash your whole body from the neck down. Keep adding more CHG and continue to wash for 5 minutes.

5. Turn on the shower water and rinse your whole body well.

6. Pat yourself dry with a clean towel.

7. Put on clean clothes.

8. **Note:** On the **morning of surgery** when you finish showering, **do NOT** put on hair or skin care products, deodorant or make-up. **Do NOT** wear jewelry to the hospital or surgery center.
If you are not able to shower

If you do not have a shower or you are not able to get into a shower, do a sponge bath each time that you clean your skin with CHG soap.

1. First, bathe with a clean washcloth, water, and regular soap. Rinse well with clean water.
2. Then, get another clean washcloth and wet it with clean water.
3. Apply some CHG soap to the wet washcloth.
4. Use the washcloth to wash from your neck to your waist. Keep adding more CHG and continue to wash for 5 minutes.
5. Rinse well with another clean washcloth and clean water.
6. Pat yourself dry with a clean towel.
7. Put on clean clothes.

Other instructions

- If you are pregnant, think you may be pregnant, or if you are breastfeeding, please tell your healthcare provider right away.
- You will be discharged home the day of your surgery.

If you need to change your surgery date, please call Scheduling at 1-888-293-7677.
If you have any questions, please call the nurse at ________________________.
Answers to Frequently Asked Questions

Q. How does the Device Clinic get the information from my ILR?
A. After your device is implanted, you will receive home equipment that allows you to send information about your ILR to the Device Clinic from home. These are called remote checks.

Plug in your home equipment into a power outlet next to your bed or where you sleep at night. The home equipment “talks” to your device every night if you sleep by the monitor. It sends the Device Clinic any alerts that it has recorded in the morning.

Once a month or at the request of the Device Clinic staff, you will be asked to send a full download from your ILR using your home equipment.

Q. When will I be contacted about the results of my remote checks?
A. We are not able to contact everyone about the results of their remote checks due to our high volume of patients. If we find new abnormal results or need further information from you, you will be contacted to discuss these findings. Please feel free to contact the Device Clinic about your results at any time. One of our nurses would be happy to review the findings with you over the phone.

Q. Should I send a remote check every time I have a symptom or on a more frequent basis than once a month?
A. No. Only send in a remote check from your device on prescheduled dates or if you are asked to do so by one of the Device Clinic nurses.

Q. Is a person monitoring my device 24 hours a day, 7 days a week?
A. No. The monitoring that is done is NOT like the monitoring that is done in the hospital. Your ILR is always monitoring your heart’s rhythm. However, the information is not checked by Device Clinic staff in real time. The information that your device records is used to identify any episodes that occur and to study long-term trends of your heart rhythm.

ILR monitoring (remote checks) should never be substituted for calling 911 or going to your closest emergency department if you feel poorly.
Q. Can I have an MRI?
A. Yes. You can have an MRI with an ILR. Please let the Device Clinic know ahead of time when you are having the scan. We may ask you to send in a remote transmission before and after the MRI.

Q. Is there anything in my daily routine that I should change after ILR placement?
A. Most people with an ILR can do their normal activities. After the implant site has healed, you can swim, bathe, and exercise with the device without fear of harming it. Always follow any restrictions set by your doctor or other members of your healthcare team.

Q. Are there any household appliances that I should avoid?
A. No. There are no household appliances that will negatively impact your device.

Q. Can I go through metal detectors like at the airport or government buildings?
A. Yes. Sometimes the ILR device will trip the alarm. If this occurs, tell the security personnel that you have an implantable device. They will do a hand held scanner search. The security check should not interfere with the operation of your device. Keep your device ID card with you for situations like this.

Q. What is the CPT code that my insurance company is asking me for?
A. Some insurance companies need a special code to pre-certify the implant procedure and the follow-up device checks, either at the clinic (in-office checks) or at home (remote checks). These are the CPT codes that they need:

<table>
<thead>
<tr>
<th>Procedure</th>
<th>CPT Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insertion of the ILR</td>
<td>33282</td>
</tr>
<tr>
<td>Clinic in-office checks</td>
<td>93285</td>
</tr>
<tr>
<td>Home remote checks</td>
<td>93298 + 93299</td>
</tr>
</tbody>
</table>
Care after Placement of Your ILR

Follow these and other instructions given to you by your healthcare team for your care at home after placement of your ILR.

Call the Device Clinic at 614-293-8916 or 877-478-2478 if you have questions about these instructions.

Your incision care

• The ILR may bulge slightly under the skin.
• Itching is a normal part of the healing process. Try not to rub or scratch the incision site.
• Keep your incision clean and dry.
• Wash your hands well with warm water and soap for at least 15 seconds before or after touching your dressing or incision.
• Check your site each day and call the Device Clinic if you have:
  ‣ Increased drainage or bleeding at the site
  ‣ An incision that opens
  ‣ Redness, swelling, or warmth at the site
  ‣ A pimple that develops at the incision
  ‣ A fever greater than 101 degrees F or 38.3 degrees C
• For the first 48 hours after surgery:
  ‣ Leave the dressing on for 48 hours after surgery.
  ‣ You may take a sponge bath. Do not shower or bathe until 5 days after your surgery.
  ‣ Wash your hands with soap and water for 15 seconds if you need to touch the dressing.
• Remove the outer dressing of tape and gauze after 48 hours, on ____________________.
  ‣ Wash your hands well before and after removing the dressing.
  ‣ Do not remove the narrow pieces of tape, called steri-strips, that go across the incision. They support the outer layer of skin while it is healing.
• After 5 days, on ____________________, you may shower or bathe.
  ‣ Shower or take a bath, letting the water gently run over the incision. Do not let the shower water directly hit the incision, and do not soak the incision under water in a bath.
  ‣ Do not rub or scrub the incision site while the steri-strips are in place.
  ‣ Gently pat the incision site dry with a clean towel. You do not need to put another dressing on the site.
  ‣ Avoid soaking the incision site under water in a bath tub, hot tub, or swimming pool until the site is healed, often about 14 days after surgery.

Follow these and other instructions given to you by your healthcare team for your care at home after placement of your ILR.
• **Leave the steri-strips in place.** The steri-strips may start to loosen and come off on their own in 5 to 7 days.

• Wash your hands well with soap and water for 15 seconds and then **remove any steri-strips from the incision site that still remain:**
  ‣ After 10 days, on _________________.
  ‣ After 14 days, if you take prednisone, steroids, or an immunosuppressant.

**Driving restrictions**

• If you have passed out, **do not** drive for 3 months after your last episode. If you have questions about this restriction, please call your healthcare provider’s office.

**Restarting your medicines**

• Take all of your usual medicines as scheduled after the procedure unless you were given other instructions.

**Pain relief**

• Take acetaminophen (brand name Tylenol Regular or Extra Strength) to relieve tenderness at the incision site. Follow package instructions for dosage.

• **Do not** take ibuprofen (brand names Advil and Motrin) and naproxen (brand name Aleve) unless approved for use by your healthcare provider.

**Call the Device Clinic at 614-293-8916 or 877-478-2478 if you have:**

• Increased drainage or bleeding at the site
• An incision that opens
• Redness, swelling, or warmth at the site
• A pimple that develops at the incision
• A fever greater than 101 degrees F or 38.3 degrees C
Checking Your ILR

After placement, your ILR will need to be checked to ensure it is working well. This check is also known as device interrogation and can be done by in-office checks and by remote checks with home equipment.

First office visit

Your first office visit will be 4 to 6 weeks from your implant date. Always bring a list of your medicines to your in-office check. The Device Clinic nurse will use a special device, called a programmer, to check your ILR. It will check:

- The condition of the battery
- Stored information about your heart rhythm

Typically you will have just one in-office check during the life of your ILR. All other checks will be done using your home equipment.

If you have an appointment with an electrophysiology (EP) provider, he or she may want an in-office check that same day to provide him or her with the most up-to-date information.

Remote (at home) checks

Your next ILR check will be done using the home equipment that is given to you at discharge. Each manufacturer has special equipment. You will be shown how to use the equipment after your ILR is implanted. Most patients keep this equipment plugged in by their beds.

Remote checks are done once a month, usually on a Sunday, unless you are directed otherwise by a Device Clinic nurse. You will receive an automated reminder phone call 3 days before your scheduled remote check.

Remote check guidelines

Your home equipment sends data from your ILR using a standard phone line or cellular connection to a secured server that is accessed only by Device Clinic staff. All data will be reviewed by a nurse and an electrophysiology (EP) provider.

Please read and follow these guidelines for using your home equipment.

Contact Information

It is your responsibility to make sure that we have your most current mailing address and phone numbers in order for us to be able to reach you to discuss the findings of your remote checks. Please contact us if you change home telephone carriers as this may impact your remote check abilities.
Scheduling Your Checks
Currently, you have _____ ILR checks per year with Ohio State. This schedule may be adjusted based on your care needs.

All device checks will be prescheduled appointments. You will receive an automated reminder phone call 3 days before your scheduled remote check. You will be contacted with an appointment. You are responsible for sending your monthly test using your home equipment. Failure to keep your remote check appointments will result in removal from the remote service, and you will be asked to have all of your device care done in the office.

Questions or problems with your remote check can be directed to the Device Clinic at 614-293-8916 or 1-877-478-2478, extension 4, Monday through Friday, 8:00 am to 4:30 pm. If we cannot resolve your issue, you will be asked to contact your device manufacturer for help.

REMINDER: Please don’t do a remote check unless you are scheduled or have talked to the Device Clinic and have been instructed to send a remote check. Unauthorized transmissions may result in a delay of treatment or unviewed data.

Traveling
If you are going out of town, you can take your home equipment with you and send your ILR data at your scheduled time. You can use your equipment within the continental United States, Alaska, Hawaii, and other areas in the world, such as Canada, Mexico, and Europe.

Emergencies
Seek medical help right away or call 911 if you are not feeling well. Please be aware that we are not a 24-hour emergency service.

Clinical Review of Data
Your ILR data will be sent to a secure server where our clinic staff can view it using a password protected website on the Internet. The data will be reviewed promptly by a nurse and an EP healthcare provider. Unscheduled checks will be reviewed within 7 to 10 days.

Insurance and Co-pays
The device data that we review from your remote check is charged like an in-office appointment. Therefore, your insurance company will be billed for review of your data. You will be responsible for any amount not paid by your insurance provider. If you have sent an unscheduled check, and your insurance carrier denies the claim, you will be responsible for the bill.

Questions
If you have any questions about your home equipment, these guidelines, or heart health issues, please call the Device Clinic during business hours at 614-293-8916 or 1-877-478-2478, We are not a 24-hour emergency service.

Patient acknowledgement and agreement
I have read and I understand the remote check guidelines. I had an opportunity to ask questions about anything that I did not understand. Satisfactory answers were provided to my questions. I agree to follow the guidelines.

______________________________
Print patient / legal representative name

______________________________
Patient / legal representative signature

______________________________
Date
Driving Directions
Ross Heart Hospital

From the North (Sandusky, Delaware and Cleveland)
Take any major highway to Interstate 270
Take Interstate 270 to State Route 315 S
Take State Route 315 S to the King/Kinnear exit
Turn left onto Kinnear Road (Kinnear turns into Olentangy River Road)
Take Olentangy River Road to King Avenue
Turn left onto King Avenue
Turn left onto Cannon Drive
Turn right onto Medical Center Drive
See “Parking Directions - Continued”

From the South (Circleville, Chillicothe and Cincinnati)
Take any major highway to Interstate 71 N
Take Interstate 71 N to State Route 315 N
Take State Route 315 N to the Medical Center Dr/ King Ave exit
Continue straight onto Medical Center Drive
See “Parking Directions - Continued”

From the East (Newark, Zanesville and Pittsburgh)
Take any major highway to Interstate 70 W
Take Interstate 70 W to State Route 315 N
Take State Route 315 N to the Medical Center Dr/ King Ave exit
Continue straight onto Medical Center Drive
See “Parking Directions - Continued”

From the West (Springfield, Dayton and Indianapolis)
Take any major highway to Interstate 70 E
Take Interstate 70 E to State Route 315 N
Take State Route 315 N to the Medical Center Dr/ King Ave exit
Continue straight onto Medical Center Drive
See “Parking Directions - Continued”

For directions assistance call
614-293-8000
wexnermedical.osu.edu

There are construction projects occurring at and around Ohio State’s Wexner Medical Center. Please go to wexnermedical.osu.edu for traffic updates.

June 2019
Parking Directions
Ross Heart Hospital

Patient Valet

Continued: Take Medical Center Drive past the intersection of Medical Center and 9th Avenue. Continue straight to the front of University Hospital (Rhodes Hall) or Ross Heart Hospital. Pull into Patient Valet on your right.

SAFEAUTO Garage

Continued: From Medical Center Drive, turn left onto Westpark Street. The SAFEAUTO Garage is located on the left and is connected to the medical center by a walkway bridge on the second floor.