



Implantable cardiac device wound care instructions



This leaflet provides instructions for patients who have had one of the following devices fitted:

- a permanent pacemaker
- a cardiac resynchronisation pacemaker
- an implantable cardioverter defibrillator
- a resynchronisation cardioverter defibrillator
- a loop recorder implant.

It is very important to look after the wound while it heals in order to prevent any infection getting into the skin around the device.

If there are any signs of swelling, oozing of blood or fluid from the wound, redness, extreme sensitivity, unexplained fever, or if the wound feels hot to touch, contact the arrhythmia nurse specialists immediately.

Contact numbers for help and advice (answerphone)

Wound issues

Arrhythmia nurse specialists: **0117 342 6635**

Device issues

Cardiac physiologists: **0117 342 6515**

Monday to Friday, 9am to 5pm.

Out of hours: please leave a message and we will call you the next working day. If it is urgent, seek advice from your GP or the NHS 111 service.

Information and advice

Mild soreness or discomfort (especially on movement) are expected, and are not usually anything to worry about.

The wound will be closed with either self-dissolving vicryl sutures, blue prolene sutures, or Dermaflex 'glue'. Blue prolene sutures need to be removed by your practice or district nurse after seven days.

If you have a dressing over the wound, leave it on for five days after implant, then remove the dressing and expose the wound to air for a further two days.

If you have paper steri-strips over the wound, allow them to come off naturally. Do not try to pull them off yourself. If they are still there after five weeks, remove them.

Avoid getting the wound wet for a total of seven days. You may then shower, but dry by dabbing only; do not rub or scratch the incision or any scab.

If your wound is closed with Dermaflex glue, no dressing is required. Keep the wound dry. Do not apply any creams. Do not scratch or pick at the wound. Protect the wound from prolonged sunlight exposure. The glue will rub off between five and 10 days after the procedure.

In order to prevent dislodging the leads (the wires that have been threaded down into the heart), remember not to raise your arm above shoulder height, or reach behind your back, until you have had your first outpatient device check. This does not apply to loop recorders, as they do not have any wires into the heart.

A bruise around the wound and chest area is expected, and can take a few weeks to disappear completely.

Please note that if for any reason you would value a second opinion concerning your diagnosis or treatment, you are entirely within your rights to request this.

The first step would usually be to discuss this with the doctor or other lead clinician who is responsible for your care.

Smoking is the primary cause of preventable illness and premature death. For support in stopping smoking contact **Smokefree Bristol** on **0117 922 2255**.

As well as providing clinical care, our Trust has an important role in research. This allows us to discover new and improved ways of treating patients.

While under our care, you may be invited to take part in research. To find out more please visit:
www.uhbristol.nhs.uk/research-innovation
or call the research and innovation team on
0117 342 0233.

For access to other patient leaflets and information please go to the following address:

www.uhbristol.nhs.uk/patients-and-visitors/information-for-patients/

Hospital switchboard: 0117 923 0000



Minicom: 0117 934 9869



www.uhbristol.nhs.uk



For an interpreter or signer please contact the telephone number on your appointment letter.



For this leaflet in large print, audio or PDF format, please call the patient information service:



0117 342 3728 / 3725

