

Implantable Loop Recorder (ILR)

An information guide



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What is an ILR?

An ILR also known as a LINQ is an implantable medical device that continually monitors your heart rate & rhythm. It represents a breakthrough in the diagnosis of unexplained fainting or blackouts and irregular heart rhythms. The ILR can determine if fainting is related to a heart rhythm problem which occurs in up to 80% of patients. The device is inserted just under the skin, during a short outpatient procedure. It is important to remember that your ILR is a diagnostic tool and will not provide any therapy during symptoms.

Why have an Implantable Loop Recorder?

An ILR is a long term monitoring device that is used for patients with infrequent symptomatic episodes. It is also used when short term ambulatory monitoring or other tests haven't been able to explain the cause of presenting symptoms or a diagnosis hasn't been met. The benefit of capturing your heart rate and rhythm (known as an electrocardiogram or ECG) before, during & after enables your Doctor to confirm or rule out if an abnormal heart rhythm is the cause, leading to a correct diagnosis and treatment more quickly.

How does it Work?

An ILR continually records and deletes the ECG seen on a loop. For infrequent symptoms or irregular heart rhythms that haven't yet been explained it allows for automatic and patient activation of symptoms which prompts the ILR to record the ECG. Any recording the ILR makes either via patient activation or automatic shows before, during and after the event and can be reviewed by the doctor. This allows the doctor to rule out if an abnormal heart rhythm has occurred more definitively than other tests.

How long will I need it?

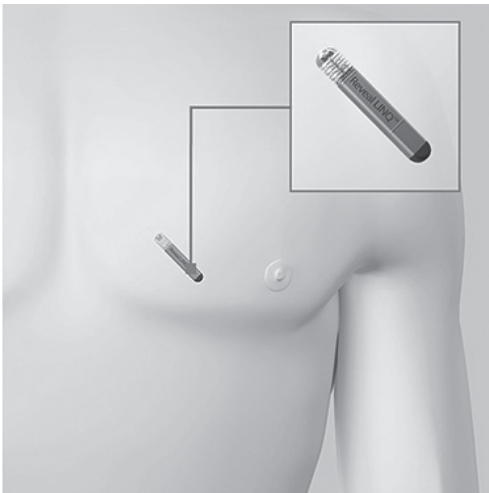
The ILR can remain in place for up to 3 years although this depends on the frequency of your symptoms. However, once your Doctor has sufficient information the device can be removed. This will involve another very simple operation and appropriate treatment given.

What does the implant involve?

The insertion of the ILR will be done as a day case. No sedation is required. The recorder is a small device and is inserted beneath the skin in the left upper chest area over the pectoral muscle after local anaesthetic has been used to numb this area of your skin.

The procedure takes approximately 10 to 15 minutes. Once the device has been positioned under the skin, the wound will be closed with sealant glue.

The procedure involves a small risk of bleeding, bruising, a possible reaction to the local anaesthetic or infection to the device site. Your Doctor/Implanter or Cardiac Physiologist will discuss this with you and will ask you to sign a form to obtain your consent for the procedure.



How to Use the External Hand Held Patient Activator



1. Record Symptom Button

Patient presses button to record ECG when symptomatic

2. Searching

Flashes blue indication the patient should hold the Patient Assistant over the Reveal LINQ

3. Success Light

Illuminates green when the symptom is successfully marked

4. Connection Slot

Allows patient to attach the Patient Assistant to a key chain, lanyard, or other personal item helping ensure you have the activator with you 24/7.

Please document why you used the patient activator as this information can be used after the ECG has been reviewed at the hospital.

How to use CARELINK patient monitor



Your CARELINK monitor is a wireless device that uses mobile phone signal to enable it to communicate remotely with your healthcare worker. Once home please plug in your CARELINK monitor, ideally in your bedroom and follow the visual prompts displayed on the screen.

For any automatic recordings the device records itself it will remotely transmit these to the hospital usually around Midnight - 2am. For patient activated recordings using your patient activator when symptomatic you can transmit the information using your home monitor to our systems in the hospital. This can be done at any time of the day but you must wait a minimum of 10 minutes after activation to send a download to ensure we receive the full recording. Again follow the easy steps displayed on the monitor's screen.

Your ECG (heart rhythm traces) will be viewed and if necessary shown to the Consultant looking after your care.

At times, it may be necessary to attend the Cardiac Investigations Department. We will inform you of this either by telephone call or letter to your home address.

What happens before I go home?

Before discharge you will be shown and explained how to use the patient external hand held activator to record a symptomatic event and also how to use the wireless CARELINK monitor to transmit the information to the hospital from the comfort of your home.

You will be given an easy to follow leaflet with information, contact names and numbers. When all the explanations are completed and you feel fit, you will be discharged from the department.

You will be given an ID card which includes your LINQ details and should be carried with you at all times. If you are admitted to another hospital this card should be shown to the healthcare professional looking after you. Please also note that the ILR LINQ is MRI safe and should not prevent you having an MRI scan.

The Cardiac Physiologist will be able answer any questions you may have on the day following the implant of the ILR.

If you have any further queries you can contact Cardiorespiratory department, Monday – Friday from 8am – 5pm on 0161 778 2028

Any medication queries before your procedure contact Pre Op Nurses Monday – Friday from 8am – 5pm on 0161 778 4191

Device follow-up schedule

Four to six weeks post implant you will have an appointment to come to the Cardiac Investigations Department for a site check and initial appointment to check your ILR by the Cardiac Physiologists.

Following this initial face to face appointment of your ILR, subsequent checks will primarily be done from the comfort of your own home using the wireless home monitor.

These transmissions will be either:

1 – Automatic transmission (usually sent at night while you sleep) and the transmission will send if any information is collected in the automatic device memory. These transmissions are routine for all patients, however we therefore recommend that your home monitor is plugged in at all times.

2 – Manual transmissions, to send information once you have used your patient activator (maximum 3 times).

Our clinic will routinely schedule your Home monitor transmission to occur approximately every 3 months (as well as sending downloads when you have symptoms) and you will be seen face to face in our clinic every 6 -12 months.

If English is not your first language and you need help, please contact the Interpretation and Translation Service

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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Dacă engleza nu este prima ta limbă și ai nevoie de ajutor, te rugăm să contactezi Serviciul de interpretare și traducere

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For advice on stopping smoking contact the Specialist Stop Smoking Service on 01706 517 522

For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897

For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service

The Northern Care Alliance NHS Group (NCA) is one of the largest NHS organisations in the country, employing 17,000 staff and providing a range of hospital and community healthcare services to around 1 million people across Salford, Oldham, Bury, Rochdale and surrounding areas. Our Care Organisations are responsible for providing our services, delivering safe, high quality and reliable care to the local communities they serve.

The NCA brings together Salford Royal NHS Foundation Trust and the hospitals and community services of The Royal Oldham Hospital, Fairfield General Hospital in Bury, and Rochdale Infirmary (currently part of The Pennine Acute Hospitals NHS Trust).

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