MGH DACCPM Perioperative EP Training Interrogation Document	ate/Time:	
Device Type: Pacer BiV Pacer(CRT-P) ICD BiV ICD(CRT-D)	mpant Date:	
Device Manufacturer: Medtron St Jude Boston Scient Biotronik M	1odel #	
O Events or Alerts:		
O Battery Life: years remaining Last Charge Time:	_	
O Pacing percentages: AS VS% AP VS% AS VP% AP VP%	Total VP%	
O Pacer Mode: LRL: MTR MSR:	RV/LV (delay):	
O Pacer Settings: PAV ms SAV ms PVARP ms PVAB r	ms VRPms PAVBms	
O Mode Switch ON OFF Activation rate: Mode: Paced	Rate:	
O ICD Settings: VF detect rate Therapy		
FVT detect rate Therapy		
VT detect rate Therapy		
O Define Magnet Response: Pacer: ICD:		
O Pacer Dependence: Underlying Rhythm—by EKG		
Lead Tests Impedance P/R-wave Amp. Sens. Setting Capture Thresh Prog. Output		
RA LeadohmsmVmV ASV @ms	V @ms A	
RV LeadohmsmVmV ASV @ms	V @ms_A	
LV leadohmsmVV @ms	V @ms	
HV lead(s)ohms AS—Auto Sense	e A—Auto Capture	
O Assess Special Settings: check box if present		
<ul> <li>Rate Response Mode—what type of sensor (accelerometer, minute vent</li> <li>Sleep or Rest Mode or Night Rate or Hysteresis (specific settings):</li> <li>Auto Drop Rate:</li> <li>MVP, RHYTHMIQ, VIP, IRS (minimizing ventricular pacing programs):</li> </ul>	:., CLS):	
O Assessment:		
O Changes Made: Pacing Mode/Rate:		
ICD Anti-tachy Functions:		
O Final Review of Settings: Output > Thresholds by 2X, Sensitivity < P-wave and R-wave Amplitudes 2X		
O Post Op Requirements: Reset Settings Full Interrogation N	lone unless intraop issue	
O Complete EP Report form and place programmer report into paper chart		
Physician Signature:		
MGH DACCPM Perioperative Electrophysiology Service		

Post Op Assessment:		
Intraop Problems: None Yes:		
Lead tests performed: Yes Not indicated		
Lead Tests Impedance P/R-wave Amp. Sens. Setting Capture Thresh Prog. Output		
RA LeadohmsmVmV ASV @msV @ms A		
RV Lead        ohms        mV        mV         AS        V@ms        V@ms         A		
LV leadohmsmVV @msV @ms		
HV lead(s)ohms AS—Auto Sense A—Auto Capture		
Baseline Settings Resumed? Pacemaker:		
ICD:		
Any additional follow up required?		
Physician Signature: Date/Time:		
Interrogation Process:		
1. Obtain prior Pacer/ICD report if available		
2. Place programmer's EKG leads on the patient and preferably have patient monitored		
<ol> <li>Start programmer session</li> <li>Print Baseline Settings</li> </ol>		
5. Interrogation		
a. Events or Alarms		
b. Review general device settings and lead measurements (today's and trends)		
c. Record the required settings on the EP Training Document		
d. Determine and record patient's underlying rhythm		
e. Measure and record lead impedances		
f. Measure and record sensed P waves and R waves if applicable		
g. Measure and record atrial and ventricular (RV and or LV) capture thresholds		
<ul> <li>h. Search for Special Settings (e.g., Rate Response Mode or Sleep Mode)</li> <li>i. Make any indicated device changes</li> </ul>		
j. Print Final Report and test results		
<ul> <li>k. Complete MGH EP Lab document and place Yellow Copy into chart along with interrogation reports generated by the programm</li> </ul>	er	
I. Enter the patient info into our EP Management Log Book		
Contact Information		
MGH EP Tech/RN MGH paging system "PPM"		
Stan Grinberg     617-850-5212     MGH EP Fellow     6-9292 page EP fellow		
Rob Collins         508-245-9410         EP Lab         6-5036		
Tech Support (ICDs)         800-723-4636         Scott Streckenbach         617-233-7564           Tech Support (Pacers)         800-505-4636         Scott Streckenbach         617-233-7564		
St Jude		
Melissa Bromby 617-512-1144		
Jessie Chou 617-947-2608		
Tech Support 800-722-3774 Boston Scient		
Brian Dillon 617-620-0155		

MGH DACCPM Perioperative Electrophysiology Service

800-227-3422

617-513-6100

617-455-1574 617-538-7903

800-284-6689

Tech Support <u>Biotronik</u> Brian Stahl

Tech Support

Angela Moynihan Andrew Peebles