Background

Cardiac devices can help monitor or control heart irregularities or rhythm disorders. A cardiac device is considered when the heart’s electrical system is not functioning properly and usual treatments like medications and lifestyle changes have not been effective.

Cardiac devices differ based on their use, function and placement. Some options are permanent implantable devices while others are portable temporary monitors. A cardiologist will be part of the child’s treatment plan regardless of type. Most cardiac devices implanted under the skin are surgically placed in the upper chest just under the clavicle. In infants and children, cardiac devices can also be placed in the abdomen as the abdominal fat can protect the device and wires from everyday activity and possible injury.

Cardiac devices used to **monitor** heart irregularities or rhythm disorders include portable and implanted monitors. A portable monitor (e.g., Holter) is a small device that connects to electrodes placed on the chest. An implanted monitor (e.g., Loop) can be used to remotely monitor a person with unexplained fainting spells or certain types of irregular heartbeat. It can record continuously for up to three years.

Cardiac devices used to **treat** heart irregularities or rhythm disorders include an implanted cardioverter defibrillator, implanted pacemaker and ventricular assist device. An implanted cardioverter defibrillator (ICD) is a small defibrillator device to treat patients who have, or are at risk of, developing abnormally fast heart rhythms that can lead to cardiac arrest. An ICD monitor continuously monitors heart rhythm for 24 hours and sends a small electric signal to deliver a shock when fast heart rhythms are detected. An ICD can also treat slow heart rhythms. An implanted pacemaker is a small battery powered device used to treat patients with irregular or abnormally slow rhythms. A pacemaker produces an electrical signal that stimulates the heart and causes it to beat. A ventricular assist device (VAD) is used to help children with acute heart failure while awaiting a heart transplant. A VAD is a surgically implanted pump that supports the left ventricle, right ventricle, or both to pump blood to the body. An external driveline exits the body with a VAD through the abdomen and attaches to a battery pack worn by the child.

Top Takeaways for School Considerations

Cardiac devices can be used to monitor or treat heart irregularities or rhythm disorders. Devices may be portable or surgically implanted and may require use of external electrodes or wires.

Any potentially life-threatening cardiac medical emergency can develop in individuals with a history of cardiac disorder. Staff should be prepared with CPR and AED training.

Some electromagnetic fields may potentially affect certain cardiac devices. Any applicable electrical, magnet, or cell phone limitations specific to device should be communicated to staff.

A student’s activity level is usually not restricted as the type of device could be measuring or responding to the student’s routine level of activity.

The student may need to record their activities throughout the day. Noting periods of physical activity and rest may be important for the healthcare provider.
Considerations for the Individualized Healthcare Plan (IHP)

• Nursing diagnosis of risk for ineffective peripheral tissue perfusion and risk for decreased cardiac tissue perfusion
• Current diagnosed health condition including date of diagnosis, progress of disease process and other chronic health conditions
• Current medication and treatment orders (consider schedule, equipment needs and side effects)
• Nutrition interventions and equipment needs (consider fluid intake goal to avoid dehydration causing arrhythmias)
• Assessment of implanted medical device (consider location, date of surgical placement, and device specific information)
• Activity, positioning, transferring (consider precautions and/or restrictions)
• Equipment troubleshooting (consider equipment/device user manual, battery, charger)
• Consider emergency care plan(s) (ECP) and emergency evacuation plan(s) (EEP) as related to medical needs in the school setting, and staff education/training, as appropriate

Discussion Starters for Educational Team

1. Has the school staff been trained to implement the student-specific emergency plan?
2. Would the student benefit from evaluations or assessments in any of the following areas: physical therapy, occupational therapy, speech and language therapy, assistive technology, adapted physical education, functional behavior, psychology, hearing and vision?
3. Would the student benefit from additional academic support and/or modified education (e.g., copies of notes, extra time, reduced workload, simplified instructions, alternative formats for presentation of material, 504/IEP)?
4. Would schedule flexibility support the student?
5. Can rest breaks, safe spaces or reduced stimulation times be built into the student's schedule?

Resources

Children’s Hospital of Philadelphia About Pediatric Pacemakers & Implantable Cardioverter Defibrillators (ICD) chop.edu/treatments/pacemakers-and-implantable-cardioverter-defibrillators-icds/about

Johns Hopkins Medicine: Loop Recorder Information hopkinsmedicine.org/health/treatment-tests-and-therapies/loop-recorder-implantation

Medtronic: Answers to Questions about Implantable Cardiac Devices Electromagnetic Compatibility Guide hopkinsmedicine.org/health/treatment-tests-and-therapies/loop-recorder-implantation

Sudden Arrhythmia Death Syndromes Foundation (SADS): Information for School Health Professionals sads.org/Awareness/School-Nurses#Care_Plans

Scan QR code or visit KennedyKrieger.org/Redirect for more information.