



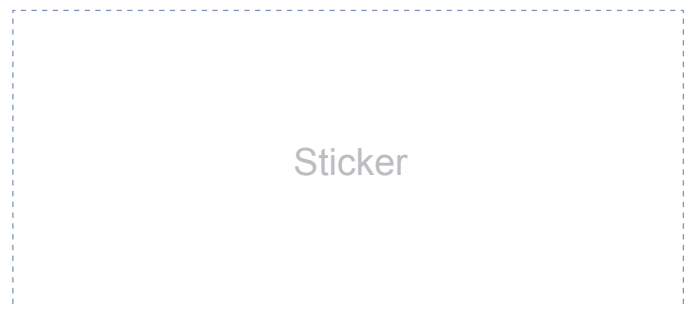
Subcutaneous Implantable Cardioverter Defibrillator (S-ICD)

Reviewed: April 2026
Next review: April 2027
Version 5

Important contact numbers

Arrhythmia Nurse: 07970187324
Coronary Care Unit: 0141 951 5202
Ward 2 East: 0141 951 5250

Follow-up Centre



About this leaflet

The purpose of this leaflet is to provide information about your Subcutaneous Implantable Cardioverter Defibrillator (S-ICD) and what you can expect from your treatment.

Why is a S-ICD implanted?

An S-ICD is implanted to treat fast or abnormal heart rhythms (tachyarrhythmia) which can cause symptoms such as light headedness, palpitations and loss of consciousness.

In some cases, these fast/abnormal heart rhythms can be life threatening.

There are 2 groups of patients who may have an S-ICD implanted:

- Primary prevention or Prophylactic: If you have not experienced a tachyarrhythmia but are at risk of having one in the future due to an existing medical condition (such as cardiomyopathy or a heart attack from a myocardial infarction).
- Secondary prevention: If you have experienced a tachyarrhythmia requiring medical attention, you may be at risk of having another episode in the future.

How does a S-ICD work?

The S-ICD continuously monitors your heart rate. If your heart rhythm changes to a fast/abnormal heart rhythm the device would detect this and treat it appropriately.

The way in which the device will do this:

- **Shock Therapy:**

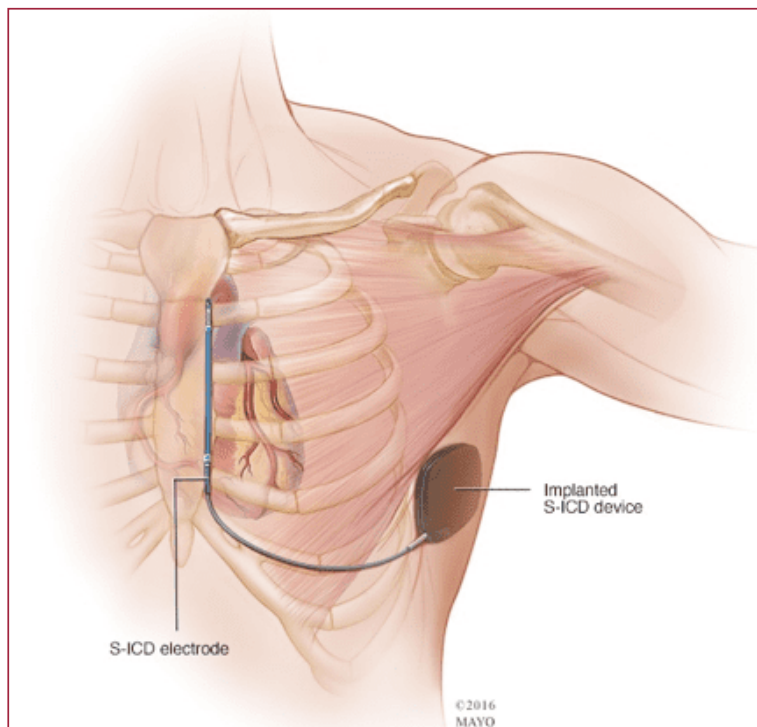
The device will deliver a shock to re-set your heart's rhythm. Many patients describe the feeling as like a kick or jolt in the chest. This pain will only last for a few seconds.

- Sometimes, after shock therapy the S-ICD may pace your heart for up to 30 seconds.

After you have your S-ICD implanted

Wound Care:

- Leave your wound site covered for first 2 days after your procedure.
- On the third day, remove your dressing and shower or bathe as normal, allowing clean water to run over your wound and pat it dry with a clean towel.
- Do not rub the area with soap, perfumed products, or a towel. If your wound site appears to be healing with no signs of fluid or discharge then leave it exposed; there is no need for further dressing. Continue this routine daily until wound is completely healed.
- To prevent infection, make sure you wash daily, using a clean towel at all times and wearing clean clothes.



If you think you have an infection at your wound site, contact your Device Follow-up Centre or NHS 24 if out of office hours (telephone number 111).

Signs of infection include:

- Heat or redness at site.
- Pus or discharge.
- Swelling.
- Smell.
- Increased pain.

You will be advised about your medication prior to being discharged from the ward.

S-ICD follow up

Your first follow up appointment will take place approximately 6 weeks after your implant and you will have regular follow up appointments at 3 months and 6 months. The Cardiology Department at your follow up hospital will keep you informed of your future appointments.

If you do not receive an appointment letter, it is important to contact the Cardiology Department at your follow up hospital.

It is important that you attend your appointments as this will allow the team to check your device, lead function and its battery.

There may be an option for monitoring your device from home. This may be through a box that sits at your bedside. This will be discussed at your follow up clinic.

S-ICD battery

The battery in your S-ICD will normally last about 7.5 years. As you get nearer to having this replaced, you will need to attend the Cardiology Department at your local hospital more frequently.

Having the battery replaced requires a theatre procedure similar to your initial implant. Normally the same scar site is used, but the procedure can be much quicker, unless there is an issue with the lead.

What to do if you receive therapy from your device

If you receive 1 shock from your device you do not need immediate medical attention. You should let the Cardiology Department at your follow up hospital know as soon as possible so that they can arrange to see you to assess the event.

If you receive multiple shocks over a short period of time, or feel unwell after therapy is delivered, you should call 999 immediately. This is an emergency requiring urgent medical attention. Several shocks can mean the device is struggling to treat an arrhythmia or there is a problem with the device.

Driving

Primary prevention (prophylactic / have not experienced any arrhythmia): The Driver and Vehicle Licensing Agency states that **you must not drive for 1 month following the event**. You must also notify the DVLA.

Secondary prevention (you have previously experienced an arrhythmia): The Driver and Vehicle Licensing Agency states that **you must not drive for 6 months**. You must inform both the DVLA and your car insurance provider.

You can find the form which must be completed at the website below:

www.gov.uk/defibrillators-and-driving

Note:

If you receive appropriate and necessary therapy from your device at any stage you will not be able to drive for another 6 months.

If the therapy delivered is deemed inappropriate by the Cardiology Department at your follow up centre you will be unable to drive for 1 month.

If you continue to drive after being advised not to drive your insurance will be deemed invalid.

Further information on DVLA and medical conditions can be found using the web address below.

www.gov.uk/health-conditions-and-driving

Safety information

Most household appliances are safe to use with your S-ICD. Mobile phones should not be stored close to your implant. All power tools should also be kept at arms' length.

You cannot undergo a Magnetic Resonance Imaging (MRI) scan unless you have been fitted with an MRI compatible device. If you are referred for an MRI scan, the doctor performing the scan (the radiologist) will need to check with your cardiologist / cardiac physiologist whether your device is 'MRI safe' or not. Even if the device is MRI safe, there are still precautions which may need to be taken.

S-ICDs can be sensitive to strong electromagnetic interference (EMI). If your employment requires you to be close to large industrial generators or other sources of EMI, you may need to take extra precautions. You should discuss any issues or concerns with your employer before you return to work.

As a rule, if you begin to feel unwell using any equipment, stop and remove yourself from the area. If you have any questions or concerns about safety of equipment, please contact the Cardiology Department at your local hospital for advice.

S-ICD ID card

You will be provided with an S-ICD identification card which includes your personal information, along with details of the device, lead you have implanted, implanting physician and your hospital. You should keep your ID card on you at all times as you may be required to provide it at any doctor/dentist/hospital appointments.

Travelling

When travelling ensure you:

- take your ID card with you;
- inform your travel insurance provider that you have a S-ICD; and
- obtain information on the nearest hospital to your destination.

Airport security

You will need to show your ID card when going through airport security so that staff know you have an S-ICD and can make a decision on whether to search you by hand rather than using the security gate/metal detectors.

If you are asked to walk through metal detectors it is safe to do so but your device may set off the alarms.

