

Cardiology – Cardioverter Defibrillator

Introduction

The COVID-19 pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you are able to support yourself while waiting to attend the hospital. The guidance has been written by clinicians who are responsible for your care.

When you are waiting for further treatment it can sometimes feel like a long wait. The information and advice here is aimed at helping you manage that wait so you arrive for your appointment in the best possible physical and mental health.

The NHS has limited resources which means that we are unable to treat you as quickly as we would like. Each healthcare provider has to consider the type of help you need, how quickly you need treatment, the best course of action to help you and when and where you can be seen.

The process of sorting patients based on their individual needs is called prioritisation. The system of prioritisation is applied consistently across the NHS to help us to decide the order in which patients receive their treatment. This is essential to ensure that we provide care based on need. The system means that care is delivered in the fairest way possible.

Once a referral has been made from primary care to secondary care, the specialist team conduct assessments and then agree with you on the right course of action. At this stage, the urgency will be assessed. If you have a long-term health condition, for example, you may need treatment faster than someone without.

Guidance for Patients

Cardiology Elective Procedures including Echocardiogram, Coronary Angiography, Percutaneous Coronary Intervention (PCI), Permanent Pacemaker Insertion, Cardiac CT Scan (CTCA), Implantable Cardioverter Defibrillation (ICD), Cardiac Re-synchronisation Therapy with Defibrillator (CRT-D), Coronary Sinus Reducer Implant (CSR), Elective Cardioversion and Box Change.

1. Keeping physically active
2. Losing weight - if you are overweight, weight loss can often improve your symptoms

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3. Monitoring your blood pressure. Blood pressure monitors are available to purchase and are generally reliable. Keep a record of your blood pressures and discuss with your GP if they are regularly over 140/85
4. Wearable heart rate monitors can be useful for patients with palpitations or dizzy spells e.g apple watch, fitbit etc

For further information, please visit www.dchft.nhs.uk/patients-and-visitors for patient information leaflets.

What should I do if my health is deteriorating?

If your symptoms are becoming more frequent or coming on more often contact your GP in the first instance as they may be able to increase your medication to control your symptoms while you are waiting for an appointment. The GP can also contact the Cardiology department directly and discuss your case and expedite your appointment if clinically appropriate.

Urgent Health Advice

For urgent health advice about physical or mental health, when it's not an emergency, please call 111 from any landline or mobile phone. You can also visit www.nhs.uk. The NHS 111 service is available 24 hours a day, seven days a week.

Life Threatening Emergencies

For something life threatening – severe bleeding, breathing difficulties or chest pains – please dial 999.

Contact Us

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