



Cardiac Screen Ltd  
The Medical Specialists

**CARDIAC SCREEN LTD**  
Provider of  
**Cardiology, Gynaecology,  
Psychiatry, Ultrasounds and  
all blood tests services**

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**PACEMAKER / ICD FOLLOW – UP**

**PATIENT NAME:** \_\_\_\_\_ **CONSULTANT:** \_\_\_\_\_  
**GENERATOR:** \_\_\_\_\_ **IMPLANT DATE:** \_\_\_\_\_  
**ATRIAL LEAD:** \_\_\_\_\_ **IMPLANT DATE:** \_\_\_\_\_  
**DEFIBRILLATOR LEAD:** \_\_\_\_\_ **IMPLANT DATE:** \_\_\_\_\_  
**DATE OF CHECK:** \_\_\_\_\_ **NEXT FOLLOW-UP:** \_\_\_\_\_  
**REASON FOR CHECK:** \_\_\_\_\_

**PACING AND SENSING THRESHOLD:**

THRESHOLDS	PULSE AMPLITUDE	PULSE DURATION	P/R WAVE SENSITIVITY
ATRIAL		-----	
VENTRICULAR		-----	

**BATTERY AND LEAD STATUS**

BATTERY STATUS	BATTERY MONITORING	BATTERY CHARGING	AICD Device Data	LEAD IMPEDANCE	PACING POLARITY
			Shock Imp. Ohms Energy: joules Charge time: secs	VENT: ohms ATRIAL: ohms	VENT: BIPOLAR ATRIAL: BIPOLAR

**BRADY SETTINGS**

MODE	LOWER RATE	HYSTERSIS /UPPER RATE	PULSE AMPLITUDE	PULSE DURATION	AV DELAY
DDDR	PPM	PPM	ATRIAL: V VENT: V	ATRIAL:mS VENT: mS	PACED: Dynamic

**CONCLUSION:**