



Patient identification label

BIVENTRICULAR PACEMAKER CONSENT

Your Doctor has recommended that you have a biventricular pacemaker inserted. This type of pacemaker is indicated for you because of the severity of your heart failure (NYHA III / IV) and its effect on how well your heart contracts and relaxes. A biventricular pacemaker is very similar to a standard pacemaker except it has an additional lead that is placed in the coronary sinus to help improve the pumping action of your heart and the symptoms that you are currently experiencing.

The Doctor will inject local anaesthetic into the chest wall. A small pocket will be made under the skin and the electrodes (wires) are introduced into the right side of the heart via a vein. The electrodes are then positioned under x-ray. One is placed in the right atrium, another in the right ventricle and the third is placed in the coronary sinus. Gaining access to the coronary sinus can be difficult so the procedure time can be prolonged. The function of the electrodes is tested and when a satisfactory position is obtained the biventricular pacemaker generator is attached. The skin is sealed with dissolvable sutures (stitches) and a dressing is applied.

Before and following the procedure the Cardiologist implanting the biventricular pacemaker and the pacemaker technician will speak to you and give you information on your pacemaker and instructions on taking care of your wound. In addition you will also be given a course of antibiotics and some tablets to take for the discomfort. It is imperative that you inform the nursing and medical staff if you have had a previous allergic reaction to any antibiotics.

In the majority of cases the pacemaker procedure is relatively simple and free of complications but there are certain risks involved that you need to be informed of. The coronary sinus is unable to be found due to natural differences in a number of people (1 in 45). There is a small risk of infection (1 in 400), pneumothorax (collapsed lung) (1 in 50), haematoma (1 in 100) or lead migration / displacement (1 in 50).

These procedural risks will vary between individuals and depend on pre-existing risk factors and medical conditions so please discuss these issues with your Doctor if you are concerned. Your Cardiologist believes that the benefit of the procedure outweighs the risks outlined.

For this procedure we may have supplier representatives present to assist during the procedure.

CONSENT

I have read the above information and had the opportunity to ask questions and I am happy with the response. I hereby give my consent to undergo insertion of a biventricular pacemaker.

Patient / Guardian: _____ Signature _____ Print Name _____ /_____/_____
Date
Doctor: _____ Signature _____ Print Name _____
Interpreter: _____ Signature _____ Print Name _____

FURTHER PATIENT DECLARATION

I have received a copy of the "Outcome Data Information Sheet" and I have read and understood my Rights and Responsibilities.

Patient / Guardian: _____ Signature _____ Print Name _____ /_____/_____
Date