

Having an implantable loop recorder (ILR) implant

Information for patients, relatives and carers

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Introduction

This patient information gives general advice about having an Implantable Loop Recorder (ILR) implant. It does not replace advice from a healthcare professional. It is intended to let you know why an ILR might have been recommended, as well as outlining the benefits and risks, how to prepare for your appointment, what the procedure itself involves and what the aftercare will be. This has been written to help you understand each stage so that you know what to expect and hopefully feel more comfortable about your procedure.

Your doctor/clinician has recommended the implantation of an ILR. This small device records your heart's electrical activity over months or years to help diagnose unexplained symptoms. Most commonly this is done to assess one or more of the below⁽¹⁾:

- ◇ Syncope (sin-co-pee) - which is a medical term for blackouts.
- ◇ Palpitation (an awareness of the heart beating fast, slow, or irregularly).
- ◇ The presence of an irregular heart rhythm in an unexplained stroke.

If it is not clear to you why your doctor has recommended this, you are encouraged to contact them to discuss this further, prior to attending your appointment - your referring doctor/clinician will not be available on the day, though there will be an appropriately trained clinician present with whom to discuss the procedure itself.

What is an ILR?

An ILR is a miniature heart monitor that sits just under the skin of your chest, to the left of the breastbone. It continuously monitors your heart rate and rhythm and automatically stores any abnormal patterns, such as very slow or very fast rhythms. It can also be activated manually if you experience any symptoms (for example, dizziness, blackout or palpitation).

Scan this QR code to be directed to a patient information video about ILRs:



https://youtu.be/11MNU_yfS6E?si=7xHj24OiRmEz6tOc

Device used in our service:

Medtronic LINQ II.

Size: Smaller than an AAA battery
(45mm x 7mm).

Battery life: Up to 4 to 5 years⁽²⁾.

Communication: Sends data wirelessly
to your healthcare team via home transmission
or smartphone app⁽³⁾.



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Why do I need one?

It is suspected that your symptoms may be due to an abnormal heart rhythm (arrhythmia). As these episodes can be unpredictable and/or infrequent, an ECG or a short-term monitor such as a 24-hour holter monitor may not capture evidence of this⁽³⁾. An ILR allows for long-term continuous monitoring to guide treatment decisions.

What are the benefits?⁽⁴⁾

- ◇ An ILR allows continuous, automatic heart rhythm monitoring without the need for frequent hospital visits.
- ◇ Implanting the device is minimally invasive, performed under local anaesthetic in about 15 minutes⁽⁵⁾.
- ◇ It provides clinical information to help target your treatment more precisely.
- ◇ It can be easily removed if no longer required or desired.

What do I need to know before the procedure?

- ◇ You should eat and drink normally on the day of your procedure. If you are particularly prone to fainting - when you have your blood taken etc - you are advised to drink plenty of fluid and make sure you eat before attending⁽⁶⁾.
- ◇ Take your medications as usual - this includes blood thinning drugs (anticoagulation or antiplatelets)⁽⁷⁾.
- ◇ Wear loose, comfortable clothing.
- ◇ Bring a list of your medications and allergies.

- ◇ Please inform a team member on the day if you have had any heart valve surgery in the past.
- ◇ Please inform the team if you are pregnant, have any bleeding disorders, or any other specific concerns or needs that you believe to be relevant.
- ◇ The procedure is carried out in our cardiac catheter laboratory as a day-case, with the appointment usually taking around 30 minutes including the pre and post procedural care.
- ◇ If you feel unwell in the days leading up to the procedure (vomiting, diarrhoea, cough, cold or flu-like symptoms, with or without a fever), you should contact the cardiology booking team before attending, or the cardiac catheter lab, if on the day of the procedure.
- ◇ If you have large breast size (cup size over C), a sports (or other sufficiently supportive) bra is recommended for 7 days following the procedure to reduce wound traction and ensure that the wound has the opportunity to properly heal.
- ◇ We recommend that you arrive in plenty of time for your appointment. Information about parking (including how to use your blue badge for free parking) can be found on our website: <https://www.ulh.nhs.uk/hospitals/lincoln-county/parking/> or scan the QR code below:



- ◇ Call **0300 300 3434** if you believe you are eligible for patient transport.

What are the potential risks and complications?⁽³⁾

- ◇ Infection - this is **rare** (less than 1% risk) and may need antibiotics, and in some cases device removal.
- ◇ Haematoma (a collection of blood under the skin) - this is also **rare** (less than 1% risk).
- ◇ Bruising or discomfort - this is common and will settle within days. You can take simple over-the-counter pain killers such as Paracetamol and Ibuprofen⁽⁶⁾.
- ◇ Device migration or erosion - this is **rare**, but if this occurs the device may need to be repositioned (removed and re-implanted).

- ◇ Skin reaction - this is uncommon.
- ◇ Scarring - there will be a scar, but it will be minimal.
- ◇ Mild sensitivity around the implant site - this is common and may last for a few weeks.

What happens in the procedure?

If you have had heart valve surgery or intervention in the past, then you will receive a single dose of an intravenous antibiotic before the procedure, to reduce the risk of infection on your heart valve (known as endocarditis)⁽⁶⁾.

- ◇ Preparation - you will lie on your back either on a trolley or a special procedure table. Your chest will be fully exposed, before the left side is cleaned with surgical cleaning solution. A sterile drape will then be placed over the chest, which will partially obscure your face.
- ◇ Anaesthetic - local anaesthetic is injected to numb the skin. Time will be allowed for this to be effective, and you will not be rushed. You will remain awake throughout.
- ◇ Insertion - a small cut (around 1cm) is made and the device is inserted under the skin using a special applicator. You may be aware of some pressure or pushing but should not feel any pain.
- ◇ Closure - the cut is closed with skin glue and covered with a water-proof clear dressing, which remains in place for 7 days.

What happens after the procedure?

- ◇ You will be seen by one of our cardiac physiology team who will connect to the device wirelessly and turn it on. Setting up remote monitoring at home, or via the smartphone app will be discussed.
- ◇ You will be able to go home at this point.
- ◇ You may feel some mild tenderness at the implant site for a few days - you can take painkillers such as paracetamol or ibuprofen as needed⁽⁶⁾.
- ◇ Keep the dressing dry for 48 hours; after that you can shower normally (avoid fully submerging whilst the dressing remains in place for 7 days).
- ◇ Avoid strenuous activity, stretching, or heavy lifting for 3 to 5 days.
- ◇ If you have large breast size (cup size over C), a sports (or other sufficiently supportive) bra is recommended for 7 days following the procedure to reduce wound traction and ensure that the wound has the opportunity to properly heal.

- ◇ There is no specific restriction on when you can return to work⁽⁶⁾.
- ◇ Avoid tight clothing or pressure directly over the implant site until healed.
- ◇ The wound should be fully healed within 7 days and then you can remove the dressing.

Remote monitoring

- ◇ Your ILR transmits data automatically via Medtronic's *MyCareLink* Heart system.
- ◇ Data will be reviewed periodically, and you will be contacted if there is any abnormal rhythm detected. Please note that this is not a 24/7 monitoring service. As always, in an emergency you should seek urgent medical attention.
- ◇ If you experience symptoms, you should use your patient activator or app to bookmark these episodes. Activators are not used in all cases, depending on the reason for your implant.

Living with your ILR

- ◇ Most people do not feel and are unaware of the presence of the device once healed.
- ◇ You can go through airport security as normal (present your device card if needed)⁽⁹⁾.
- ◇ MRI scans are safe⁽²⁾, but it is recommended to inform MRI staff, nonetheless.
- ◇ You can still safely use electrical items/devices such as mobile phones.
- ◇ The device does not deliver shocks or otherwise deliver treatment; it only records the heart rate and rhythm.

When to seek medical advice

You should present to your local urgent treatment centre (UTC) or emergency department if you experience:

- ◇ Redness, swelling, or pus from the wound.
- ◇ Feeling unwell with a fever (temperature).
- ◇ Sudden pain or protrusion from the implant site.
- ◇ Palpitation, blackout/fainting or new symptoms after your implant.

When will I be followed up/when will the device be removed?

- ◇ Routine remote reviews of the ILR data are carried out automatically, throughout the 4-to-5-year battery life.
- ◇ The device can be removed under local anaesthetic (explanted) if:
 - The diagnosis has been made (arrhythmia has been found or disproven).
 - Monitoring is no longer required.
 - The battery is depleted.
 - You decide you no longer want the device, for any reason.

If you are unable to keep your appointment

Please contact the booking team immediately, if it becomes apparent that you cannot attend your appointment. This allows us to:

- ◇ Organise a new appointment with you, rather than simply remove you from the waiting list for failing to attend without explanation.
- ◇ Offer another patient your appointment to use our time efficiently and keep our waiting lists down.

If you are running late on the day, please contact the cardiac catheter lab on **01522 582 648** to notify them of your arrival time.

Frequently asked questions

Will I feel the device?

Usually not. Some patients notice a small bump under the skin, but this will not impact your day-to-day life.

Can I shower, bathe or swim after?

Shower, yes - provided you keep the dressing in place, you can shower after 48 hours.

Swimming/bathing, no, not straight away - avoid soaking the wound until fully healed (7 days), at which time the dressing can be removed.

Will it affect or be affected by other electronic devices?

No - the ILR only monitors your heart rhythm and does not interfere or interact with other equipment.

Can I drive after?

There are no restrictions on driving related to the procedure itself, but there may be restrictions on the basis of your symptoms⁽¹⁰⁾ - blackouts, for example. Your doctor/clinician should advise you regarding this, and advice regarding this falls outside the scope of your ILR appointment. Further information can be found on the DVLA website: <https://www.gov.uk/driving-medical-conditions/> or scan the QR code below:



Can I travel after?

You will be safe to travel after your procedure. However, you should check with your doctor/clinician before making travel arrangements and ensure you have adequate travel insurance.

If you have any questions or concerns about your implant procedure not covered in this patient information, there will be an opportunity to discuss these on the day.

For any questions about your diagnosis or clinical management, you are encouraged to contact your doctor/clinician to discuss this separately, as they will not be available on the day.

Please keep this document so that after you have been to visit us for your ILR implant, you can scan the QR code below with your device and complete a very short patient feedback questionnaire.



https://docs.google.com/forms/d/e/1FAIpQLSd75dStaoYRB0giFtOhg6LO3rceV6TxAckT8DmVmSDE_ofWTw/viewform?usp=sharing&oid=104476154605656483068

We greatly value your feedback. We will use this information to adapt our services to better address your concerns and align with your needs and expectations. Thank you!

Contacts

Monday to Friday 9.00am to 5.00pm unless otherwise stated

Cardiology booking team (about your appointment): **01522 597 716 and 573 575**

or email: **ulth.cardiology.tcilincoln@nhs.net**

Cardiology secretaries (general queries): **01522 597 875** (Lincoln)

01522 446 282 (Pilgrim)

Cardiac catheter laboratory: (on the day) **01522 582 648**

Cardiac physiology team: **01476 464 160** - Lincoln and
Grantham areas

01205 446 565 - Boston area

Medtronic 'Be Connected': **00800 266 632 82**

(Monday to Friday 8.00am to 4.00pm, free of charge)

Patient transport: **0300 300 3434**

(7 days a week)

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