

Summary of Requirements for Alternate Training Pathway for ICD and CRT Implantations*

For the non-electrophysiologist who is already experienced in pacemaker implantation and wishes to independently implant prophylactic (primary prevention) ICD and CRT devices; the Heart Rhythm Society strongly recommends:

- **Documentation of current experience: 35 pacemaker implantations per year** (of which at least 75% should be new “full-system” implants) **and 100 implantations over the prior 3 years**
- **Proctored ICD implantation experience:**
 - **10 implantations**
 - **5 revisions:** revisions should include upgrades, lead extraction and replacement, pulse generator change and new lead insertion
- **Proctored CRT implantation experience:**
 - **2 procedures observed**
 - **5 implantations**
- **Completion of an Heart Rhythm Society sponsored or endorsed ICD/CRT didactic course and passage of the NASPExAM** (<http://www.ibhre.org>) **for the physician within the last ten years, which included ICD knowledge testing**
- **Monitoring of patient outcomes and complication rates:** to be kept by the implanter and made available to their respective hospital credentialing committee
- **Established patient follow-up:** follow-up should include device interrogation and reprogramming, including evaluation of pacing thresholds, lead impedances, sensing and rate cut-offs for defibrillation therapy
- **Maintenance of competence**
 - **10 ICD and CRT procedures per year**
 - **20 patients per year in follow-up**

The alternate training pathway sunsets/expires in October 2008 (“3 years from the date of the Addendum’s publication in the journal Heart Rhythm”). After October 2008, non-electrophysiologists wishing to implant ICD/CRT devices should be trained under the most recent training standards found in the American College of Cardiology/Heart Rhythm Society COre CArdiology Training Symposium (COCATS) Task Force 6 - Training in Specialized Electrophysiology, Cardiac Pacing, and Arrhythmia Management.

* Source: Major highlights of the 2004 Clinical Competency Statement and 2005 Addendum are shown; please consult full text of both publications. 2004 Heart Rhythm Society Clinical Competency Statement and the 2005 Addendum on Training Pathways for Implantation of Cardioverter Defibrillators and Cardiac Resynchronization Devices. Heart Rhythm (2004) 3, 371-375; Heart Rhythm (2005) 2(10), 1161-1163.