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**NEW ICD/CRT IMPLANTATION GUIDELINES
FOR NON-ELECTROPHYSIOLOGISTS**

Quality of Patient Care is Top Concern of Heart Rhythm Society

Washington, DC, July 15, 2004—The Heart Rhythm Society today issued new guidelines on training requirements for a subgroup of non-electrophysiologists who wish to implant implantable cardioverter defibrillator (ICD) and cardiac resynchronization therapy (CRT) devices.

This action and these guidelines were created to safeguard the growing number of patients who will benefit from these devices, and prevent non-electrophysiologists with minimal pacemaker experience and inadequate training in ICD and CRT device therapies from gaining local hospital approval to implant ICD and CRT devices. An electrophysiologist, or heart rhythm specialist, is a cardiologist who has devoted an additional year of training to ICD and CRT device implants and to the diagnosis and treatment of abnormal heart rhythms.

Recently published trials demonstrating the efficacy of primary prevention ICDs and CRT devices have increased physician and public awareness of the importance of both therapies. This increased awareness, combined with the observation that not all patients who meet standard indications for ICDs are actually receiving devices, indicates that device implantations will increase dramatically.

“It is the responsibility of our professional Society to develop training guidelines to ensure the safe care of patients receiving these devices,” said Stephen C. Hammill, MD, president of the Heart Rhythm Society. “We cannot ignore the issue and allow uncontrolled expansion of device implantation by individuals with insufficient training.”

The Heart Rhythm Society expects that non-electrophysiologists meeting the definition of high-volume implanters (see definition below) of standard pacemakers who wish to implant ICD and CRT devices must acquire the additional training mandated by the guidelines. Fulfillment of the guidelines must be demonstrated prior to starting unsupervised ICD and/or CRT implantations. Demonstration of compliance with the new guidelines will require submission of the following to the hospital credentialing body:

- Letter and documentation of current experience and privileges, which would include 35 pacemaker implantations per year and 100 implantations over the prior three years.
- Certification of an endorsed CME program that the individual has completed and associated testing and/or successful passing of NASPEXAM.

- Letter from an appropriate proctor documenting successful completion of 10 ICD implantations, 5 ICD revisions, and 5 CRT implantations.
- Letter documenting the follow-up plan and a corresponding or co-signed letter from the electrophysiologist with whom the individual will be collaborating.

Hammill also noted that these guidelines do not replace existing guidelines for physicians in training who want to be credentialed to implant pacemakers, ICD, and CRT devices at the end of fellowship training.

The guidelines are available on the Heart Rhythm Society web site, www.HRSonline.org, and will be published in *Heart Rhythm*, the Society's official journal, this Fall.

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The Heart Rhythm Society is the international leader in science, education, and advocacy for cardiac arrhythmia professionals and patients, and the primary information resource on heart rhythm disorders. Its mission is to improve the care of patients by promoting research, education and optimal health care policies and standards. The Society was incorporated in 1979, and has a membership of over 3,500 physicians and associated professionals in over 65 countries around the world. It has offices in Washington, DC and Natick, MA.