Standard of Care for
The Patient with a Temporary Pacemaker

Objectives:
1. To maintain an adequate cardiac output.
2. To achieve comfort.
3. To decrease anxiety.
4. To teach awareness of needs/limitations.

Process Standards:
1. Patients undergoing external pacing (i.e. transcutaneous, transvenous, or pericardial) shall be admitted to the ICU until underlying process resolves or long term pacing capabilities has been established and external device has been removed.
2. Blood pressure and respirations will be monitored hourly.
3. Heart rate will be monitored continuously via Cardiac monitor.
4. Temperature will be monitored every 4 hours.
5. Pacemaker settings will be set per milliamps, rate, mode and sensitivity. These settings will be documented at the beginning of every shift and when changes are made.
6. When external pacing is performed the quick pace cassette, cable and electrodes will be inspected for proper connection and function. When Transvenous pacing is performed pacemaker generator, cable and electrodes will be inspected for proper connection and function.
   a. Assessment for battery life, lead connection, and electrical interference may prevent malfunction.
7. Documentation of pacemaker (100% capture) and usage will be documented in the baseline assessment and with any change from norm via nurse’s notes and rhythm strips.
8. Any failure to capture or sense will be documented and MD will be notified.
9. The nurse shall assess the dressing over the insertion site every shift.
10. Dressings shall be changed at least every 96 hours and documented on the flowsheet.
11. The dressing change will consist of removing old dressing, cleaning site with chlorohexidine, inspecting the site for any signs of infection, replacing with sterile dressing and occlusive dressing.
12. If the site shows any signs of infection the nurse will inform the physician so an new line can be placed the infected line removed.
13. The patient will be assessed for pain or anxiety and documented with any occurrence. Pain and anxiety will be addressed appropriately with the use of teaching and or proper medication. The nurse will then document the effect of the interventions used. Pain, sedation, or anti-anxiety medications will be given per MD order.
14. The patient/family will be instructed on:
   a. Purpose and need for the pacemaker.
   b. Limitations of movement.
   c. Potential hazards or complication.
Outcome Standards:
1. The patient will be free from pain or anxiety.
2. Effective cardiac output for the patient will be maintained through 100% capture of the pacemaker.
3. Patient/family will verbalize understanding of procedure and limitations.

Reference: