

LVAD-HEARTMATE II

1. **Contact 24 hour mechanical heart specialist: (509) 481-7996 or (509) 474-7326.** If no answer, contact Sacred Heart Medical Center Operator (509-474-3131), who will locate the call person.

2. Emergency Scenarios

Scenario	Response
LVAD Failure – Continuous Alarm (Red Heart)	LVAD may have stopped: The patient's own heart is intact and may provide minimal cardiac output while the LVAD is stopped. Initiate appropriate therapy to stabilize patient. Fully monitor patient during transport. Call Mechanical Heart Specialist (24/7) at (509) 481-7996 for instructions on changing to the patient's backup Controller.
LVAD Working – “Reduced Flow Rate” Alarm – ECG Abnormal	The HeartMate II LVAD is dependent on right ventricular function. With arrhythmia, decreased function of right ventricle will affect LVAD flows. The LVAD may be able to maintain flow high enough to keep patient from going into shock. If patient has rapid ventricular arrhythmia or ventricular fibrillation, counter shock both stable and unstable patients and administer large amounts of IV fluids.
LVAD Working – “Reduced Flow Rate” Alarm – ECG Normal	Suspected internal bleeding (hypovolemia). If patient is symptomatic, initiate appropriate therapy to stabilize patient including volume replacement.

3. Large bore peripheral venous access should be established on patient.
4. Patient may not have a palpable pulse or measurable blood pressure even when the pump is providing adequate circulation.
5. Perform routine CODE procedure, including cardiac compressions, if indicated.
6. Patient's Controller (small box attached to percutaneous driveline) will display alarm lights. Patient (or companion) will bring extra batteries before transporting. Do not disconnect controller from patient unless instructed by mechanical heart specialist.