Our patient is in Intensive Care following an elective AVR.

**Indications for Pacing**

- ECG on monitor:
  - Bradycardia
  - Pauses
  - Asystole

- Effect of rhythm:
  - Low cardiac output
  - Reduced renal function
  - Symptoms

**Post-operative Pacing**

- external pads
- transvenous endocardial wire
- epicardial wires

**Pacemaker Functions**

- Stimulate
- Sense
**Ventricular Pacing**
- loss of atrial kick
- cannon a waves
- raised R and L atrial pressure
- raised ANP and BNP
- peripheral resistance unresponsive
- VA retrograde conduction
- depolarisation starts in RV

**Pacemaker Code**
1. Paced chamber
2. Sensed chamber
3. Mode of response
4. Programmable functions
5. Antitachydyrsrhythmia functions

**Modes of Pacing**
- **Fixed rate**
  - AOO atrial pacing
  - VOO ventricular pacing

- **On Demand**
  - AAI atrial output inhibited by sensed atrial signals
  - VVI ventricular output inhibited by sensed ventricular signals
Sensitivity programmed too high –
Unable to ‘see’ intrinsic signal
UNDERSENSING

Sensitivity programmed too low –
Able to ‘see’ P wave, R wave, T wave intrinsic signal
OVERSENSING

Mode switch DDD to VVI

Modes of Pacing
Dual chamber pacing
D pacing in RA and RV
D sensing in RA and RV
D Triggering or Inhibiting

The Set-Up