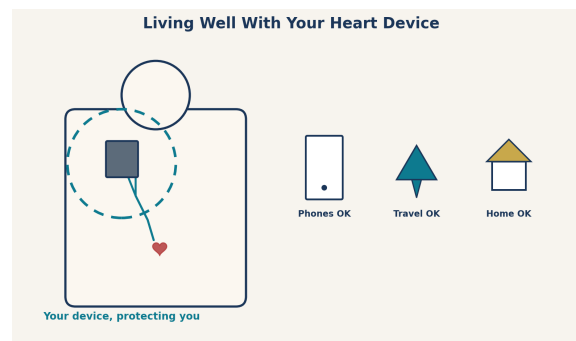


Living With a Pacemaker or ICD

The first weeks, everyday electronics, travel, ICD shocks, and living confidently

Your device is built to fade into the background - here is how to live well with it.



Online: <https://go.riasalimd.com/pacemaker-icd-living-guide>

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Names & Terms You Will Hear

Term	Meaning
Pacemaker	A small device under the skin near your collarbone that keeps your heart from beating too slowly.
ICD (implantable cardioverter-defibrillator)	A device that watches for a dangerous fast rhythm and can give a shock to reset the heart. It can also pace.
Generator	The small metal part placed under the skin. It holds the battery and the 'brain' of the device.
Leads	Thin wires that run from the generator to the heart. In the first weeks they need time to settle in place.
Device ID card	A wallet card that lists your device brand, model, and clinic. Carry it always and show it at airports and to doctors.
Remote monitoring	A bedside monitor that sends your device data to your care team from home, so problems are caught early.
Electromagnetic interference (EMI)	Strong magnetic or electrical fields that can briefly confuse a device. Most everyday electronics do not cause it.
ICD shock	A quick jolt the ICD gives to stop a deadly fast rhythm. People often describe it as a sudden kick in the chest.
Generator change	A short, minor procedure to swap the device when the battery runs low. The leads usually stay in place.
Device clinic	The team that checks your device in person and through remote monitoring, and adjusts its settings.

Two things to carry from day one. First, keep your **device ID card** in your wallet and a photo of it on your phone - show it at airports and to every doctor and dentist. Second, in the first 4 to 6 weeks, do not raise the arm on the device side above your shoulder and do not lift anything heavy, so the leads can settle. New to the device itself? See our [Pacemakers and ICDs guide](#).



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Living With a Pacemaker or ICD?

- This guide is about LIFE with a pacemaker or ICD - not how the device works. For how it works, see our device-basics guide below.
- In the first weeks the focus is healing: caring for the wound, going easy on the arm on the device side, and watching for infection.
- Most everyday electronics are completely safe. Cell phones, microwaves, and home appliances do not harm your device.
- A few things need a little distance: strong magnets, magnetic phone cases, and wired headphones should stay about 6 inches from the device.
- You can travel, fly, and walk through airport security - just carry your device ID card and tell the screener you have a device.
- If you have an ICD, it is there to save your life. Knowing what a shock feels like and what to do takes away most of the worry.
- Your device sends data to your care team from home through remote monitoring, and the battery lasts years before a small change is needed.



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The First Weeks - Healing, Your Arm, and Watching the Wound

- Keep the incision clean and dry. Do not soak it in a bath, pool, or hot tub until your team says it is fully healed.
- For the first 4 to 6 weeks, do not raise the arm on the device side above your shoulder, and do not lift anything heavy. This lets the leads settle in place.
- Still move the hand, wrist, and elbow gently each day so the shoulder does not get stiff - just keep the arm low.
- A small bump under the skin is the device. Some bruising, soreness, or mild swelling at the site is normal at first.
- Call us for signs of infection: spreading redness, swelling, warmth, drainage, or a fever. Catching it early matters.
- Call us right away if the wound splits open, bleeds, or if the device feels like it is pushing through the skin.
- Ease back into activity with short walks. Your team will tell you when you can return to full lifting and exercise.



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Why It Matters

- Knowing what is truly safe lets you put the worry down and get back to normal life - which is the whole point of the device.
- Most fears about phones, microwaves, and airports come from old myths. The real precautions are few, simple, and easy to follow.
- Going easy on the arm for the first few weeks lets the leads settle, so the device works well for years to come.
- Catching a wound infection early - by knowing the signs - keeps a small problem from becoming a serious one.
- Having a clear plan for an ICD shock means you act calmly and correctly in the moment, instead of freezing or panicking.
- Telling every doctor and dentist about your device keeps you safe during MRIs, surgery, and dental work.

Electronics and Magnets: Safe to Use vs Keep Your Distance

Safe to use as normal

- + Cell phones and tablets
- + Microwave ovens
- + TVs, computers, Wi-Fi
- + Kitchen and home appliances
- + Bluetooth earbuds and speakers
- + Walking through airport security

Keep about 6 inches away

- + Strong magnets of any kind
- + Magnetic phone cases and clips
- + Wired headphones on your chest
- + Phone in the chest pocket over it
- + Heavy industrial magnets / motors
- + Arc welding and big power tools

Most electronics are completely safe. Only a few magnet-heavy items need about 6 inches of distance from the device.



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Risk Factors

Some patients are more likely to develop this condition. Knowing your risk helps your care team take extra precautions.

Risk Factor	Why It Increases Risk
Lifting or reaching too soon	Raising the arm above the shoulder or lifting heavy loads in the first 4 to 6 weeks can move a lead before it settles.
Strong magnets and certain devices	Strong magnets, magnetic phone cases, and wired headphones held against the device can briefly confuse it if kept too close.
Heavy industrial fields	Arc welding, large industrial magnets, and powerful motors make strong fields that everyday home electronics do not.
Wound infection	Any incision can get infected. Redness, swelling, warmth, drainage, or fever at the site needs prompt attention.
Medical procedures without warning	MRI, surgical cautery, and some therapies need device precautions - so every team must know you have a device.
Skipping follow-up	Missing device checks or unplugging the home monitor means a problem - or a low battery - could go unnoticed.



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Everyday Situations: Safe, Take Care, or Avoid

Situation	What to do
Cell phone or tablet	Safe. Use the ear opposite your device; keep it out of the chest pocket over the device.
Microwave and home appliances	Safe to use as normal when they are in good working order.
Bluetooth earbuds and speakers	Safe. They do not need to be held against your chest.
Wired headphones and magnetic phone cases	Take care: keep them at least 6 inches from the device; do not drape them over it.
Airport security	Walk through is fine. Tell the screener, carry your ID card, and you may ask for a hand search.
MRI, surgery, dental work	Tell the team first. Special steps may be needed; call us before the procedure.
Strong magnets, arc welding, big industrial motors	Avoid close contact. These make strong fields that home electronics do not.



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Electronics, Magnets, Airports, and Medical Procedures

- The myth: phones, microwaves, and appliances are dangerous. The truth: they are safe. Use the phone on the opposite ear and keep it out of the chest pocket over the device.
- The real precaution is magnets. Keep strong magnets, magnetic phone cases, and wired headphones at least 6 inches from the device - do not drape headphones across your chest.
- Bluetooth earbuds and speakers are fine, because they do not sit against the device.
- Avoid heavy industrial magnetic and electrical fields and arc welding. These make far stronger fields than anything in a normal home.
- At the airport, you can walk through security. Tell the screener you have a heart device, carry your ID card, and you may ask for a hand search instead of lingering in the field.
- Tell every doctor and dentist about your device. MRI, surgical electrocautery, and some therapies need special steps - your ID card helps each team plan.
- For imaging, see our [MRI Safety With Cardiac Devices guide](#), and for trips see our [Travel and Your Heart guide](#).



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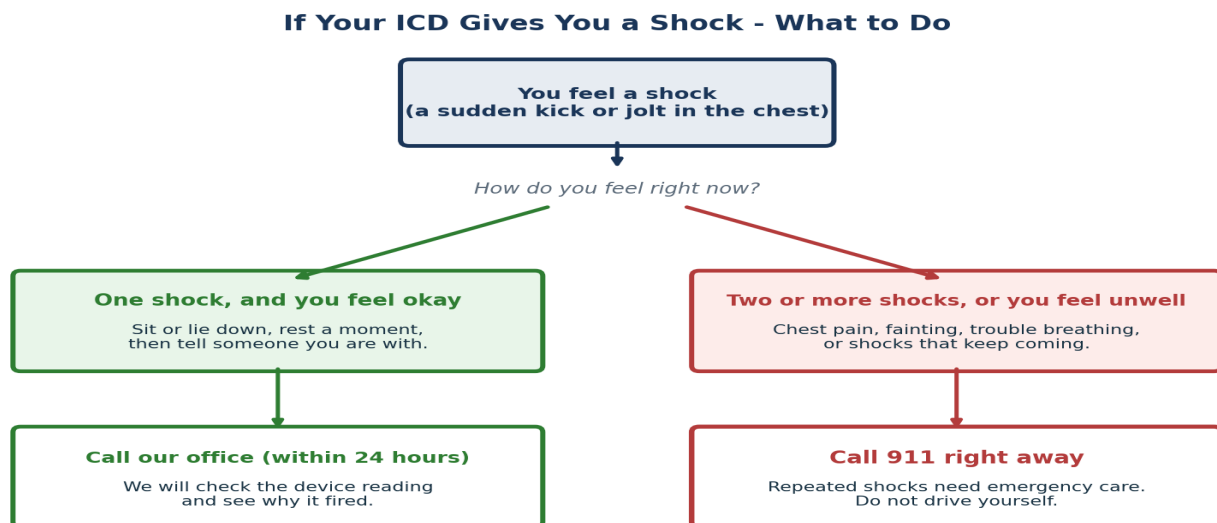
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Treatment Options

- First weeks: keep the wound clean and dry, do not soak it, and watch for redness, swelling, drainage, or fever.
- First 4 to 6 weeks: do not raise the arm on the device side above your shoulder, and do not lift anything heavy, so the leads can settle.
- Everyday life: use phones, microwaves, and home appliances normally - just keep the phone off the chest pocket over the device.
- Keep strong magnets, magnetic phone cases, and wired headphones at least 6 inches from the generator.
- Travel: carry your device ID card, tell the airport screener, and you may ask for a hand search instead of lingering in the field.
- Tell every doctor and dentist you have a device - some equipment, MRI, and electrocautery need special steps.
- Keep your remote monitor plugged in, attend your device checks, and call us after any ICD shock.



A simple plan for an ICD shock. One shock and you feel fine: call the office. Repeated shocks or you feel unwell: call 911.



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Tell every doctor and dentist you have a device. Some equipment needs special steps: an **MRI** is only done with the right device and a planned protocol; **electrocautery** during surgery and a few therapies need precautions. Showing your ID card lets each team keep you safe. For imaging, see our [MRI Safety With Cardiac Devices guide](#).



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Comfort Measures at Home (No Medication Needed)

These simple steps support healing and ease symptoms. Use them alongside any medication your doctor prescribes.

- Ease back into activity. Short walks help healing. Your team will tell you when you can return to full exercise and lifting.
- Support the arm on the device side for comfort in the first week, but still move the hand, wrist, and elbow gently to avoid stiffness.
- Carry your device ID card in your wallet and keep a photo of it on your phone, so it is always with you.
- If you have an ICD, talk about it. Feeling anxious after a shock - or just having the device - is common, and support truly helps.
- Bring family in. Someone who knows your shock plan can help you stay calm and act correctly if it ever happens.
- Wear a seatbelt. A soft pad or a folded cloth over the strap can ease pressure on a tender device site at first.

Remote Monitoring and Battery Life



Keep the bedside monitor plugged in. Most checks happen without you doing a thing.



When the battery runs low, the generator (not the leads) is swapped in a short, minor procedure.

Your device reports to your care team from home, and the battery lasts years before a small generator change.



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ICD Shocks, Remote Monitoring, and Living Confidently

- A shock from an ICD is quick - most people feel a sudden kick or jolt in the chest. It means the device did its job and stopped a dangerous rhythm.
- One shock and you feel fine: sit down, rest a moment, and call our office, ideally within 24 hours, so we can check the device reading.
- Two or more shocks, or one shock and you feel unwell - chest pain, fainting, or trouble breathing - call 911 right away. Do not drive yourself.
- If someone is touching you when the ICD fires, they may feel a small, harmless tingle. It will not hurt them.
- Feeling anxious after a shock, or just having the device, is common. Talking with your team, your family, or a support group helps most people feel steady again.
- Your device sends data to your care team from home. Keep the bedside monitor plugged in, and most checks happen without you doing anything.
- The battery lasts about 7 to 15 years. When it runs low, only the generator is swapped in a short, minor procedure - the leads usually stay in place.
- Want to go deeper on the ICD and CRT-D itself? See our [ICD and CRT-D guide](#).



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Risks, Benefits, and Alternatives

Every choice has trade-offs. Use this table to start the shared decision conversation.

Option	Risks	Benefits	Alternatives
Going easy on the arm for 4-6 weeks	Some short-term limits on reaching overhead and heavy lifting on the device side.	Lets the leads settle firmly so the device works reliably for years.	There is no good shortcut here - the settling time protects the leads.
Keeping magnets and a few devices 6 inches away	A small habit to remember - opposite ear for the phone, no magnetic case over the device.	Prevents the rare, brief interference that strong magnets can cause.	Bluetooth earbuds, which do not need to be held against the chest.
Telling every doctor and dentist about your device	A moment of explaining, and showing your ID card, before procedures.	Keeps you safe during MRI, surgery, electrocautery, and some therapies.	An MRI-conditional device plus a planned protocol - see our device-MRI guide.
Remote monitoring from home	A bedside monitor to keep plugged in, and occasional data sends.	Catches device or rhythm problems early, often without an extra visit.	In-clinic checks only, if home monitoring is not possible for you.



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Common Misconceptions

Myth	Reality
My cell phone will damage my device.	Phones are safe to use. Just hold the phone to the ear on the opposite side from your device, and do not carry it in a chest pocket right over the device.
A microwave oven will stop my pacemaker.	This is an old myth from decades ago. Modern devices are shielded, and a microwave in good repair does not interfere with your device.
I can never go through airport security again.	You can walk through airport security. Tell the screener you have a heart device, carry your ID card, and you may ask for a hand search instead of standing in the field.
Headphones and magnetic phone cases are harmless near my device.	Most headphones and magnetic cases contain magnets. Keep them at least 6 inches from the device - do not drape headphones over your chest or clip a magnetic case against it.
If my ICD shocks me, I am dying.	A shock usually means the device just did its job and stopped a dangerous rhythm. Most people feel a sudden kick, then feel okay. One shock and feeling fine means call the office, not panic.
Someone touching me during a shock could be hurt.	If a person is touching you when the ICD fires, they may feel a small, harmless tingle. It will not hurt them.
Once it is in, I never need it checked again.	Your device needs lifelong follow-up. Remote monitoring from home plus periodic clinic checks keep it working and catch a low battery in time.
The battery dying means another big surgery.	When the battery runs low, only the generator is swapped, in a short minor procedure. The leads usually stay right where they are.



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Possible Complications

Knowing what can go wrong helps you spot problems early. Most complications are uncommon, especially with treatment.

Where / What	What Can Happen
Wound infection at the device site	An incision can get infected. Watch for spreading redness, swelling, warmth, drainage, or fever, and call us early - a device infection is treatable but serious if ignored.
Lead movement in the first weeks	Before the leads settle, reaching overhead or heavy lifting can shift a lead. Going easy on the arm on the device side for 4 to 6 weeks prevents this.
Brief electromagnetic interference	A strong magnet or industrial field held too close can briefly confuse a device. It is rare with everyday electronics and resolves when you step away.
Unneeded ICD shocks	Sometimes an ICD fires when it does not need to, often from a fast but not dangerous rhythm. Repeated shocks need urgent care and usually a settings change.
Anxiety after a shock	Feeling shaken, worried, or low after a shock is common and understandable. Talking with your team, your family, or a support group helps most people feel steady again.
Pocket or skin problems over time	Now and then the device site can become sore, swollen, or thin-skinned. Tell us about any change so it can be checked before it becomes a problem.



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Points to Know

If you remember nothing else, remember these key points.

- First 4 to 6 weeks: no lifting the arm on the device side above the shoulder, and no heavy lifting, so the leads can settle.
- Watch the wound: redness, swelling, warmth, drainage, or fever means call us.
- Phones, microwaves, and home appliances are safe. Use the phone on the opposite ear and keep it out of the chest pocket.
- Keep strong magnets, magnetic phone cases, and wired headphones at least 6 inches from the device.
- Airports are fine: tell the screener, carry your ID card, and you may ask for a hand search.
- ICD shock: one shock and you feel fine, call the office; two or more shocks, or you feel unwell, call 911.
- Tell every doctor and dentist you have a device - MRI, surgery, and some therapies need special steps.
- Keep the home monitor plugged in, attend your checks, and carry your device ID card always.



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When to Call Us - and When to Call 911

If you are not sure, call. We would rather hear from you twice than miss a real problem.

- Two or more ICD shocks in a row, or one shock and you feel unwell - chest pain, fainting, or trouble breathing - call 911.
- One ICD shock and you feel fine afterward - call our office, ideally within 24 hours, so we can check the device.
- Signs of wound infection - spreading redness, swelling, warmth, drainage, or fever - call us the same day.
- The device site that splits open, bleeds, or where the device feels like it is poking through the skin - call us right away.
- A new fluttering, pounding, or very fast or slow heartbeat, or feeling faint or dizzy - call us within 24 hours.
- Before any MRI, surgery, dental work, or new therapy - call us so we can plan the right device precautions.
- If your home monitor shows an alert, beeps, or will not connect - call the device clinic.
- Twitching of the chest or belly muscles in time with your heartbeat - call us; the device may need a quick adjustment.

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Travel and driving. You can fly and travel - carry your device ID card and pack enough medicine. For the trip itself, see our [Travel and Your Heart guide](#). Driving rules depend on your device and whether you have had a shock, so ask your care team and see our [Driving and Your Heart guide](#) before you get back behind the wheel.



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Trusted Resources

The links below are the trusted resources Dr. Ali used to write this guide and that he recommends you visit for more information. Each is a clickable link in the digital version and a Short.io tracked URL on the printed version.

- [AHA - Devices That May Interfere With ICDs and Pacemakers](#) - The plain-language source for the 6-inch rule and what is safe to use.
- [FDA - Magnets in Phones and Smart Watches and Implanted Devices](#) - Why to keep magnetic phones, cases, and watches at least 6 inches away.
- [Cleveland Clinic - Living With a Device](#) - What to do after an ICD shock, remote monitoring, and daily living.
- [Mayo Clinic - Implantable Cardioverter-Defibrillators \(ICDs\)](#) - Living with an ICD, interference precautions, and airport security.
- [Dr. Ali - Pacemakers and ICDs Guide](#) - Our companion guide on what the device is and how it works.
- [Dr. Ali - MRI Safety With Cardiac Devices](#) - Our companion guide on getting an MRI safely when you have a device.



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Sources Used to Build This Guide

Every recommendation in this guide is grounded in one or more of the studies, guidelines, or trusted resources below. Short links are tracked so Dr. Ali can see which references patients are reading; nothing personally identifying is captured.

- [2018 ACC/AHA/HRS Guideline on the Evaluation and Management of Patients With Bradycardia and Cardiac Conduction Delay \(Kusumoto et al.\)](#) [Guideline]
Indications and longitudinal management of pacemakers, including device follow-up, remote monitoring, and lead/generator considerations
- [Personal and Public Safety Issues Related to Arrhythmias - AHA/HRS Scientific Statement](#) [Guideline]
Driving, activity, and electromagnetic-interference guidance for patients living with ICDs
- [AHA - Devices That May Interfere With ICDs and Pacemakers](#) [Patient-Education]
The 6-inch rule for cell phones, magnets, and headphones; opposite-ear/pocket guidance; appliances and airport security; what is safe vs what to keep away
- [FDA - Magnets in Cell Phones and Smart Watches May Affect Pacemakers and Other Implanted Medical Devices](#) [Regulatory]
FDA recommendation to keep magnet-bearing consumer electronics (phones, smart watches, magnetic cases) at least 6 inches from an implanted device
- [AHA - Living With Your Implantable Cardioverter Defibrillator \(ICD\)](#) [Patient-Education]
What an ICD shock feels like, the emotional side after a shock, support, and confident daily living with a defibrillator
- [AHA - Devices for Arrhythmia](#) [Patient-Education]
Plain-language daily-living guidance: device ID cards, MRI-conditional devices, telling doctors and dentists, and follow-up
- [Cleveland Clinic - Living With a Device \(Arrhythmia Devices\)](#) [Patient-Education]
What to do after an ICD shock (one shock + feel fine: call within 24 hours; unwell or repeated shocks: call 911), remote monitoring schedule, and the tingle a bystander may feel
- [Cleveland Clinic - Discharge Instructions After an ICD Implant](#) [Patient-Education]
First-weeks wound care, arm-above-the-shoulder and heavy-lifting limits while leads settle, and signs of wound infection to report
- [Cleveland Clinic - Permanent Pacemaker](#) [Patient-Education]
Battery life and generator-change procedure, remote home monitoring, and everyday electronics and appliance reassurance
- [Mayo Clinic - Implantable Cardioverter-Defibrillators \(ICDs\)](#) [Patient-Education]
Living with an ICD, electromagnetic interference precautions, airport security and the device ID card, and follow-up
- [TSA - Travelers With Disabilities and Medical Conditions \(Implanted Devices\)](#) [Regulatory]
Airport screening for implanted-device patients: notify the officer, carry the device ID card, and the option to request a pat-down instead of lingering in the screening field
- [HRS - Expert Consensus Statement on Remote Interrogation and Monitoring for CIEDs](#) [Guideline]
Remote monitoring of pacemakers and ICDs from home, keeping the bedside monitor plugged in, and the cadence of device-clinic checks



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About This Guide

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Reviewer note: Reviewed against the AHA 'Devices That May Interfere With ICDs and Pacemakers' page, the Cleveland Clinic 'Living With a Device' page, and the Mayo Clinic ICD page. Ours adds: a safe-to-use vs keep-6-inches-away electronics-and-magnets panel, a clear what-to-do-after-an-ICD-shock flowchart (one shock and fine = call the office; repeated or unwell = 911), a situation-by-situation safety table, first-weeks wound-and-arm guidance, a remote-monitoring and battery-life diagram, and the emotional side of shocks - with cross-links to our device-basics, ICD/CRT-D, device-MRI-safety, driving, and travel guides.

Disclaimer

This guide is for educational purposes only and does not replace medical advice from your physician. Recommendations may not apply to every patient. Always follow the specific instructions of Dr. Ali and your care team. In an emergency call 911 or go to the nearest emergency department.



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