




Implantable cardiac loop recorders in the setting of a daily hospital: opportunities and challenges

 **Andrea Pleša ***,
 **Nikolina Jurković
Dubravčić,**
 **Renee Mixich,**
 **Senka Pejković**

Dubrava University Hospital,
Zagreb, Croatia

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***ADDRESS FOR CORRESPONDENCE:** Andrea Pleša, Klinička bolnica Dubrava, Av. Gojka Šuška 6, HR-10000 Zagreb, Croatia. / Phone: +385-95-5221-047 / E-mail: andrea.plesa1@gmail.com

ORCID: Andrea Pleša, <https://orcid.org/0009-0008-2593-7808> • Nikolina Jurković Dubravčić, <https://orcid.org/0000-0002-9754-8712>
Renee Mixich, <https://orcid.org/0000-0002-0991-7515> • Senka Pejković, <https://orcid.org/0000-0002-7557-9358>

The implantation of implantable loop recorders (ILR) in the context of a cardiac day hospital offers numerous benefits, particularly in terms of more efficient resource utilization. Traditionally performed in invasive labs, transitioning this minimally invasive procedure to day hospitals alleviates the burden on invasive labs and reduces the need for patient hospitalization. This leads to faster recovery and a lower risk of hospital-acquired infections. Nurses play a critical role in this process, with responsibilities ranging from organizing the procedure and educating patients to preparing for the intervention and providing postoperative care. Nurses need to possess specific skills, including knowledge of implantation techniques, managing postoperative complications such as hematomas or device dislocations, and communication skills to effectively inform patients about their recovery and device usage. According to available research, the inclusion of nurses in the ILR implantation process has shown excellent results. Programs led by nurses have demonstrated success rates comparable to those in invasive labs, with fewer complications and quicker patient recovery. In conclusion, ILR implantation through day hospitals require a high level of organization and expertise, particularly among nurses. They must be equipped with specific knowledge and skills to ensure safe and effective care for patients.¹⁻³

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LITERATURE

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