

Eastbourne District General Hospital

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FOI REF: 24/121

7th March 2024

FREEDOM OF INFORMATION ACT

I am responding to your request for information under the Freedom of Information Act.

The answers to your specific questions are detailed within the attached document.

If I can be of any further assistance, please do not hesitate to contact me.

Should you be dissatisfied with the Trust's response to your request, you have the right to request an internal review. Please write to the Freedom of Information Department (eshtr.foi@nhs.net), quoting the above reference, within 40 working days. The Trust is not obliged to accept an internal review after this date.

Should you still be dissatisfied with your FOI request, you have the right of complaint to the Information Commissioner at the following address:

The Information Commissioner's Office Wycliffe House Water Lane Wilmslow Cheshire SK9 5AF

Telephone: 0303 123 1113

Yours sincerely

Freedom of Information Department esh-tr.foi@nhs.net

Investigation into postmortem cardiac device interrogation

Request for Information

To garner a comprehensive understanding of the practices and data surrounding patients with cardiac devices, we kindly request the following information:

Q1	How many patients pass through your morgue each year?	Approximately 3000 per year.
Q2	Approximately what proportion of these have a cardiac implantable device in situ? (PPM, ICD, ILR)	Approximately 10%-15%.
Q3	Does the hospital morgue also take deaths from the community, or is it for inpatients only?	Mortuaries have admissions from both hospital and community.
Q4	Is there a cardiac physiology department on site at your hospital?	Yes.
Q5	If a patient has a cardiac device in situ, is it routine practice for a device check to be undertaken after death?	No
Q6a	If yes, is the information regarding rhythm/therapies at the time of death routinely added to the patient's notes/hospital record?	Not applicable.
Q6b	If yes, is the information regarding rhythm/therapies at the time of death routinely passed on to the clinical team?	Not applicable.
Q7	If no and this is not routine practice, are there ever exceptions to this, i.e., occasions where a post-death device check is requested by the clinical team?	Yes.
Q8	If yes, please elaborate (for example, how often or under what circumstances this occurs).	In exceptional circumstances, e.g., if a patient with a history of arrhythmia, in order to determine if an arrhythmia was the primary cause of death.