

Physician Name: _____

Circle either Pacer or ICD, the Manufacturer, site of observation, and write the pacing mode.

1. Pacer ICD Medtron Bost Sci St Jude Biotronik OR EP Pacing Mode _____
2. Pacer ICD Medtron Bost Sci St Jude Biotronik OR EP Pacing Mode _____
3. Pacer ICD Medtron Bost Sci St Jude Biotronik OR EP Pacing Mode _____
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