

**Patient Cardioversion | Procedure Information**

Patient Name: \_\_\_\_\_

Pre-Operation Information

Pre-Operation Date: \_\_\_\_\_ Time: \_\_\_\_\_  AM  PM

Location

\_\_\_\_\_

Address

Parking Information

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

On the Day of Your Procedure

- ◆ **DO NOT** eat or drink for 12 hours before your cardioversion.
- ◆ Take your regular medication in the morning as you normally would with a small sip of water unless directed otherwise by your doctor.

Other Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Information on Cardioversion

Your doctor has recommended that you have a cardioversion procedure because you have a Cardiac Arrhythmia or Atrial Fibrillation (AF). AF causes irregular - usually fast - heart rhythm. The purpose of the procedure is to convert your heart rhythm from Atrial Fibrillation to Sinus Rhythm (your heart's normal rhythm).

### What is Atrial Fibrillation?

Atrial Fibrillation is a heart rhythm disturbance that occurs when there is an abnormality in the atrial chambers or SA node. Although it is rare in younger people, the chance of having it greatly increases after age 60. Between the ages of 60 - 65, 4 out of 100 will have Atrial Fibrillation. In people over 65 years, the chance of having Atrial Fibrillation increases to 10 in 100. There are many causes, including: valvular disease, coronary artery disease, lung disease, thyroid disease, and major surgical procedures. About 15% of patients with Atrial Fibrillation have no known cause. Symptoms of arrhythmia include: dizziness, fainting, palpitations and a fluttering feeling in the chest.

Having a stroke is the number one danger in patients with Atrial Fibrillation. Because of the irregular rhythm, the heart does not pump effectively. This can cause blood to pool in the heart and form clots. These clots can travel through the bloodstream and cut off or decrease circulation in the blood vessels, when this occurs in the brain, the result is a stroke.

In addition, long-term Atrial Fibrillation may result in stretching or elongating of the heart muscle, causing the heart to pump less effectively and decreasing the amount of blood going to all parts of the body.

### Treatment

Your cardiologist studies heart rhythms, identifies arrhythmias and pinpoints their origin in the heart. In treating Atrial Fibrillation, your cardiologist tries to eliminate the cause, restoring a regular heart rate and controlling rapid heart rates or maintaining a regular rate. Common treatment options include:

- ◆ Antiarrhythmic medications
- ◆ Blood thinners
- ◆ Cardioversion

In some cases, it is impossible to restore a normal heart rhythm to a patient with Atrial Fibrillation despite vigorous treatment. Every patient is unique and a variety of circumstances will determine the success of the treatment.

### Medication

Antiarrhythmic medications are usually prescribed to control your heart rate. To reduce the possibility of a stroke, your medication will include blood-thinning drugs.

## **Pre-Procedure Instructions**

### **What happens during the procedure?**

Cardioversion is usually performed on an outpatient basis at a hospital. Admission to the hospital is generally not required.

- ◆ You will be lying in a bed during and after the procedure.
- ◆ Small electrodes will be placed on your chest to monitor your heart rhythm.
- ◆ An intravenous line will be placed in your arm to allow the anesthesiologist to give you medication to make you sleepy.
- ◆ You will be given Oxygen, either through a mask or through a soft plastic tube in your nose.
- ◆ Your doctor will administer a brief low-dose electric shock through the pads on your chest and back. You will be asleep during this time and will not feel any pain.
- ◆ Your heart rhythm will be monitored to ensure that normal rhythm has been restored.

### **What happens after the procedure?**

During this time you may sit, walk, and have some food or drink as soon as you are fully alert.

- ◆ For a day or two after the procedure, the skin on your chest may feel a little sore, like mild sunburn. Your doctor may prescribe a cream or lotion for this, if needed.
- ◆ Once you are home, you may resume your normal activities.
- ◆ Continue to take all of your medications as prescribed until you see your doctor.
- ◆ Make sure to keep the follow-up visit with your doctor 1 week after your procedure.
- ◆ If your irregular heartbeat returns - or you feel skipped beats, a rapid heartbeat, or tightness in your chest, call your doctor.