

CARDIOVERSION

WHAT IS CARDIOVERSION?

During cardioversion, an electrical shock converts an irregular heartbeat or rapid heart rhythm (arrhythmia) to a normal heart rhythm. The physician uses a cardioverter machine to “shock” the heart muscle in order to return it to a normal rhythm.

Cardioversion is used in the treatment of a number of rapid or irregular heart rhythms, most commonly atrial fibrillation and atrial flutter.

WHY IS CARDIOVERSION NEEDED?

Cardioversion restores the heart rate and rhythm to normal so that the heart can pump properly. When a heart rhythm is irregular, the following symptoms may occur:

- A sensation of fluttering or pounding of the heart
- Shortness of breath
- Discomfort in the chest area
- Lightheadedness or intense fatigue

The symptoms are a signal that the heart is not delivering adequate blood throughout the body. If these symptoms are ignored, more serious problems, such as a heart attack or stroke may occur. Your physician can explain the risks and benefits of cardioversion.

WHERE DOES THE PROCEDURE TAKE PLACE?

The cardioversion procedure takes place in an outpatient setting at St. David's Medical Center.



Cardioversion is a very quick procedure, taking only a few minutes; however, you should plan to stay at the hospital four to six hours, including preparation and recovery.

BEFORE THE PROCEDURE

You will be given an instruction sheet that describes how you may prepare.

SHOULD I TAKE MEDICATIONS?

On the day of the cardioversion, please take all medications as prescribed unless you have been given other instructions. If you must take medications on the morning of the procedure, please take with only small sips of water. Those patients with diabetes should ask the nurse how to adjust medications prior to the procedure.

CAN I EAT PRIOR TO THE PROCEDURE?

You may eat a normal meal the evening before your procedure. You are instructed not to eat, drink, or chew anything after midnight the night before the cardioversion. This includes gum, mints, water, etc. If you must take

medications, take them with only small sips of water. Do not swallow any water when you brush your teeth.

WHAT SHOULD I WEAR TO THE HOSPITAL?

- Wear comfortable, easy-to-fold clothing when you arrive at the hospital. You will change into a hospital gown for the cardioversion.

MISCELLANEOUS DIRECTIONS

- Please remove nail polish.
- Do not use deodorant, powder, cream or lotion on your back or chest, as this may interfere with the adhesive pads that are placed onto you during the procedure.
- Please leave all jewelry (including wedding rings), watches and other valuables at home.

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WHAT ITEMS SHOULD I BRING TO THE HOSPITAL?

- Complete list of all medications (including herbal preparations) that you take
- One-day supply of prescription medications
- Responsible adult friend or family member who can drive you home

WHAT HAPPENS AFTER I CHECK IN AT THE HOSPITAL?

A nurse will assist you as you get ready for the procedure. You will be provided with a hospital gown. While you are lying down on a bed, your nurse will start an IV in your arm or hand. Two types of pads will be placed with adhesives onto your chest, and maybe onto your back. Men may have chest or back hair shaved.

DURING THE PROCEDURE

Will my heart rate and breathing be monitored?

Your heart rate, breathing, oxygen levels and blood pressure are monitored throughout the procedure. Other monitoring devices are described below:

Cardioverter: provides heart rate information; your physician can pace your heart rate if it is too slow or deliver electrical energy if it is too rapid (attached to you via adhesive).

Electrocardiogram or EKG: provides information regarding electrical impulses traveling throughout your heart (attached to you via adhesive).

Oxygen monitor: Monitors the oxygen level of your blood (attached via clip to the finger)

WILL I BE AWAKE?

You will not be awake during the procedure; a medicine administered through your IV will cause you to fall asleep.

WHAT OCCURS DURING CARIOVERSION?

As you sleep, your physician uses the cardioverter machine (defibrillator) to deliver energy to your heart through cardioversion patches. A shock occurs, which converts the abnormal heart rhythm to normal. This procedure is very quick. It may need to be repeated to effectively restore a normal heart rhythm.

Some individuals require an invasive imaging exam called a transesophageal echocardiogram (TEE) prior to cardioversion in order to determine if a blood clot is present. A thin tube with a camera located at its tip is swallowed, enabling physicians to obtain a closer view of the heart.

HOW LONG DOES CARIOVERSION TAKE?

Cardioversion is a very quick procedure, taking only a few minutes; however, you should plan to stay at the hospital four to six hours, including preparation and recovery.

AFTER THE PROCEDURE

What occurs following cardioversion?

When you are completely awake following cardioversion, the physician will speak with you regarding the success of the procedure. Your physician will also discuss medications, other treatments you may wish to consider, as well as follow-up exams. Before you go home, please ask the physician if you should continue to take medications that were previously prescribed.

In the recovery area, you will be offered food and beverages; your family may visit at this time.

How will I feel following cardioversion?

You may notice tenderness on the chest wall for a few days. Hydrocortisone cream may relieve skin discomfort in the area where cardioversion pads were placed. During the first few days after the procedure, you may feel tenderness on your chest wall where the cardioversion pads were placed. Your physician will advise you regarding over-the-counter pain medications. If you experience prolonged or excessive pain, please check with your physician. Because of the sedation during cardioversion, you may be drowsy afterward. You should not drive or operate machinery until the day following cardioversion.

The doctor will tell you what over-the-counter medications you can take for pain relief. Please tell your doctor or nurse if your symptoms are prolonged or severe.