

Preparing for a Cardioversion

- ♥ You should not eat or drink anything, after midnight, the day of your procedure.
- ♥ You should not take any medications the morning of your procedure, unless your physician has told you otherwise.
- ♥ Bring a list of all your medications with you to your procedure.
- ♥ The day of your cardioversion, do not use any lotions, ointments, or powder to your chest until after your procedure.
- ♥ You will not be able to drive yourself home after receiving the sedation; therefore you should arrange a ride home after your procedure.
- ♥ You should not drive, operate heavy machinery or make important decisions the day of your procedure, due to the possibility of lingering sedation.
- ♥ After your procedure, you'll be asked to take your medicines as usual, and allowed to eat and drink once you are fully awake.
- ♥ You will be asked to return to our office, approximately a week after your cardioversion, for an EKG and blood pressure check.



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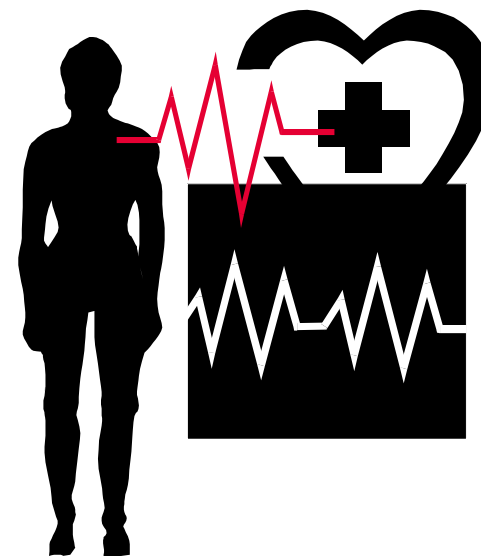
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HELENA CARDIOLOGY CLINIC

A PATIENT'S GUIDE TO CARDIOVERSION



What is Cardioversion?

Cardioversion is the process of restoring the heart's normal rhythm from an abnormal rhythm. Elective cardioversion is usually done to treat atrial fibrillation or atrial flutter, a heart rhythm disturbance in the upper chambers (atria) of the heart.

Why Do I Need a Cardioversion?

Normally, the heartbeat originates in the upper right chamber (right atrium) of the heart in an area containing specialized "pacemaker" cells. When these cells fire, they send an organized electrical signal throughout the heart which results in a coordinated, rhythmic heartbeat. In patients with atrial fibrillation, instead of the normal organized electrical activity, the atria quiver (fibrillate). This can result in a less efficient blood pumping and often causes and irregular or fast heartbeats. Some patients have no symptoms, others may feel a rapid heartbeat, shortness of breath, fatigue, or notice swelling in their extremities.

Depending on your symptoms, your medical history, and how long you have been in this irregular rhythm, your physician may recommend you undergo a cardioversion to restore your heart to a normal rhythm.

How is a Cardioversion Done?

Electrical cardioversion, also known as direct-current or DC cardioversion, is a procedure where a synchronized electrical current (shock) is delivered through the chest wall to the heart through special electrodes or paddles that are applied to the skin of the chest. The purpose of cardioversion is to interrupt the abnormal electrical circuits and restore a normal heartbeat. The delivered shock causes all the heart cells to contract at the same time, thereby terminating the abnormal electrical rhythm, without damaging the heart.

Electrical cardioversion may be performed in the hospital setting or a special procedure room in a cardiologist's office. Your breathing, blood pressure, and heart rhythm will be carefully monitored. Special cardioversion pads are placed on your chest and connected to an external defibrillator by cables. The defibrillator allows your medical team to monitor your heart's rhythm and provides the necessary energy to restore your heart rhythm back to normal.

Sedation is often administered intravenously (IV) to keep the patient comfortable and still. After you are sedated, the physician delivers the appropriate energy needed to restore your heart rhythm. Rarely, minor skin irritation can occur at the side of the cardioversion pads. Patients generally wake up quickly without any recollection of the shocks because of the sedation. Patients are advised not to drive home or make important decisions for the rest of the day because of the mild, lingering effects of sedation. Patients will generally be able to go home with a family member an hour after the procedure. Cardioversion can be repeated for patients who relapse into an abnormal rhythm.



Reminder!!

1. **Do Not** eat or drink anything after midnight prior to your cardioversion.
2. **Do Not** take any medications the day of your cardioversion.
3. You will need someone to drive you home, after your cardioversion.