



Electrical Cardioversion for Atrial Fibrillation Patient Information

What is electrical cardioversion?

- Electrical cardioversion is an electric shock delivered through the chest to the heart.
- The shock tries to reset the heart back to normal rhythm.
- Electrical cardioversion is also known as "direct-current" or DC cardioversion.
- Cardioversion works 90% of the time. If your symptoms come back your doctor will discuss some options with you.

Why do I need a cardioversion?

- If you have atrial fibrillation or atrial flutter your heart might beat too fast and might be irregular. This might make you feel short of breath, tired, or lightheaded.
- Cardioversion helps people to have normal/regular heartbeats again.

What is a TOE (Transesophageal Echocardiogram) and do I need one?

- The procedure lets your doctor check if there is a clot in your heart.
- Many cardioversion patients will need a TOE.
- Your doctor will tell you if you need a TOE before your cardioversion.

What should I do before a cardioversion?

- You need to take special medication to thin your blood before the cardioversion. These medications are called anticoagulants. You will need to take the anticoagulants for at least four weeks before the cardioversion. Your doctor will prescribe these medications for you.
- If you are on Warfarin® we will tell you about any tests you need before the cardioversion.
- If you have a TOE you might not need four weeks of anticoagulants.
- You will need to stop eating six hours before the procedure.
- You can drink water until two hours before the procedure.
- The day before the procedure we will tell you what time to stop eating and drinking.
- Arrange for a family member or friend to pick you up from hospital.



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What happens during a cardioversion?

- We will put two sticky pads onto your chest.
- The pads are connected with a cable to an external defibrillator. The defibrillator lets us watch your heart rhythm and to deliver the electric shock.
- There will be a doctor, nurse, and an anaesthetist there for your procedure. They will monitor your breathing, blood pressure and heart rhythm.
- We will give you anaesthetic (put you to sleep) so you don't feel the shocks.
- The doctor will give you the electric shock through the defibrillator.
- The procedure takes about 30 minutes.

What happens after the cardioversion?

- You will generally wake quickly and not remember the shocks.
- Your skin can be a bit itchy/sore from the pads.
- About two hours after the procedure you can go home.
- A friend or adult family member will need to take you home.
- Don't drive or return to work for the rest of the day.
- You will need to take anticoagulants for at least four weeks after the cardioversion.
- You should only stop your anticoagulants when your doctor tells you to.
- If you run out of tablets you need to ask your doctor for repeat scripts.
- **It is very important you take your anticoagulants. The anticoagulants reduce the chance of having a stroke.**

Related Policies/Procedures

- Cardioversion of Atrial Fibrillation/Atrial Flutter Policy
- Electrical Cardioversion of Atrial Fibrillation/Flutter Protocol for Recovery Area

Further information:

www.heartfoundation.org.au

Contact: