

About cardioversion

Other formats

If you need this information in another format such as audio CD, Braille, large print, high contrast, British Sign Language or translated into another language, please contact the PALS desk on 01271 314090 or at rduh.pals-northern@nhs.net.

What is cardioversion?

Cardioversion is a procedure to try to make your heart return to a normal rhythm. It involves the delivery of an electrical charge to the heart through 'defib pads' placed on the chest.

Why is cardioversion needed?

- You may have been suffering from palpitations or an irregular heartbeat that may have made you feel unwell.
- You may have been on medication to try to correct the problem but this has not worked.
- Your symptoms may be becoming worse.

Arrangements before admission

If you are taking warfarin you should arrange to start having weekly INR tests at your GP surgery. If you are taking Rivaroxaban, Apixaban, Dabigatran or Edoxaban, take this as prescribed, without missing any doses prior to the cardioversion. If you miss any doses, the procedure will need to be rebooked.

Two days before your cardioversion date, you must arrange with your GP or health centre to have blood taken to test urea and electrolytes (U&Es). **Blood labels will be sent to you in the post, and you must take these labels with you.** This is very important as it allows us to check the results are satisfactory.

If there is a problem with the results, we will let you know before you come into hospital.

You will not be allowed to drive home, so it is important to arrange for someone to collect you from the Unit, usually at about 4 hours after admission.

It is inadvisable to be on your own during the night after the procedure. This is because you may still be slightly drowsy from the anaesthetic. **If you live alone, please arrange for someone to stay with you.**

Special preparations

You will be having a short general anaesthetic. You may have food up to 5 hours before the admission (for example, if you are coming in at 12.30pm, you can eat up to 7.30am), and you may continue to have clear fluids (no milk or carbonated beverages) up until 1 hour prior to your admission.

Please take your medication as normal on the day of admission. However, if you are diabetic, *you should not take your diabetic medication* on the morning of the procedure. For further advice, please contact the Diabetes Nurse on 01271 349105.

Jewellery, including body piercings, must be removed.

What to bring

You will not need nightwear but please:

- Wear light clothing, which allows easy access to the chest.
- Bring any medications you normally take.

On arrival

You will be introduced to the nurse who will be caring for you during your stay.

You will have your temperature, pulse and blood pressure checked and another heart tracing (ECG) will be taken to see if your heart is still in an abnormal rhythm.

The nurse will ask some questions about your personal details and if you have had any previous experience of general anaesthetic. Please feel free to ask any questions or discuss any worries you may have.

The doctor will explain the procedure and ask you to sign a consent form. The anaesthetist will review your medical history and may ask you some questions.

What happens next?

A small needle will be put into a vein for the anaesthetic to be given and you will be attached to a cardiac (heart) monitor. You will lie on a trolley and oxygen will be given through a mask which will cover your nose and mouth. Two large sticky de-fib pads will be placed on your chest.

The anaesthetist will give the anaesthetic, you will gently go to sleep and the procedure will be carried out.

What happens afterwards?

You will wake up naturally from your anaesthetic. You will probably be on your side with the oxygen mask still in place. Your blood pressure and pulse will be checked regularly until you are fully awake.

You will gradually be allowed to sit up and we will give you something to eat and drink, although you may feel nauseated after the anaesthetic.

A further ECG will be taken to record the result of the cardioversion.

After effects

You may experience some mild burning of the skin where the pads were attached. You may apply some cream such as after-sun lotion or aloe vera gel for this to help healing.

Possible complications

There is an extremely small risk of the heart rhythm becoming even more abnormal as a result of cardioversion. However, this would be detected during the procedure and corrected at the time.

It is important that you are aware that all general anaesthetics carry risks, for example of blood clots or chest infections. However, these are very rare.

Possible complications can be explained by your doctor or nurse.

Going home

When you have been up and around without any problems, you will be allowed home. We will tell you if the procedure was successful or not.

You will be given a copy of the letter that is sent to your GP. You will be reviewed in the Arrhythmia outpatient clinic in approximately 4 to 6 weeks after your cardioversion.

At home

Rest for the remainder of the day and take the next day off work.

Continue to take your usual medications unless your consultant or GP advises you otherwise.

You should continue to have your INR tests (if on warfarin) at your GP surgery until you are seen in the outpatient clinic.

After a general anaesthetic, for your safety for the next 24 hours, you are advised **not to**:

- Operate machinery
- Drink alcohol
- Boil a kettle
- Sign a cheque or other documents

You should also avoid using heat if possible i.e. cooking.

Do not drive for 24 hours.

Further information

If you have any queries or concerns about your cardioversion, please do not hesitate to contact Arrhythmia Service on **01271 311633**.

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email rduh.pals-northern@nhs.net. You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

Have your say

Royal Devon University Healthcare NHS Foundation Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

Tell us about your experience of our services. Share your feedback on the Care Opinion website www.careopinion.org.uk.

Royal Devon University Healthcare NHS Foundation Trust
Raleigh Park, Barnstaple
Devon EX31 4JB
Tel. 01271 322577
www.royaldevon.nhs.uk

© Royal Devon University Healthcare NHS Foundation Trust
This leaflet was designed by the Communications Department.
www.royaldevon.nhs.uk/get-in-touch