Cardioversion

What is a cardioversion?

When the heart has an abnormal rhythm, electric energy can be used to try to restore a normal rhythm. The energy is delivered in the form of an electric shock to the outside of the chest. The name for this procedure is cardioversion (car-dee-oh-VER-zhun).

Why you need this procedure

Your heart is beating in an irregular rhythm. You may have atrial (AY-tree-ol) flutter, or you may have atrial fibrillation (fib-ril-LAY-shin). An irregular rhythm may prevent your heart from pumping as well as it should. Normal rhythm is called "sinus rhythm." To restore normal rhythm to your heart, you have been scheduled for a cardioversion.

Who does the procedure

A doctor who is trained to treat heart problems — a cardiologist (car-dee-ALL-uh-jist) — will do the procedure. A nurse will be in the room to watch your overall condition. An anesthesiologist or nurse anesthetist may also assist with the procedure.

How to prepare

Listed below are general guidelines to prepare for the procedure. Your doctor, nurse, or testing center may give you more instructions.

- Do not eat or drink anything after midnight the day of your test.
- Ask your doctor or testing center which medicines to take before the cardioversion.
- If your doctor or testing center tells you to take your routine medicine, take it **only** with small sips of water.

Please bring these items:

- A list of food or medicine allergies
- A list of all your medicines and the dosages
- Your insurance cards

Before the procedure

You may have the procedure as an outpatient. If so, you will be told before the day of the procedure where to report. Your hospital may call this area the "same day" unit or "medical procedure" unit. A nurse will welcome you and explain the procedure to you. You will be asked to sign an informed consent.

Next you will put on a hospital gown. You'll be asked to remove dentures, contact lenses or eyeglasses, and jewelry. It is best to leave your valuables at home. To help you relax, you will be given medicine intravenously (IV). A thin tube called an IV catheter will be placed in a vein in your arm to give you the medicine.

You then will be taken to the room where the procedure will be performed. It may be a cardiac cath lab, recovery room, or PACU (post-anesthesia care unit). You will be connected to a heart monitor and blood pressure cuff. A small device will be put on your finger to measure the amount of oxygen in your blood. The device is called a pulse oximeter (ox-IM-ih-ter). You will breathe oxygen through a mask on your face or a soft plastic tube under your nose.

During the procedure

Two large, sticky patches will be put on your chest and back. The patches connect to a machine that will deliver the electric energy. This machine is a defibrillator (de-FIB-ril-lay-ter). You'll receive medicine to make you relax and sleep, so you will feel nothing.

The doctor will give you a quick electric shock through the patches on your chest and back. The aim of the shock is to reset your heart rhythm to normal. You may need more shocks at higher energy levels to correct your irregular heartbeat. Each shock takes less than 1 second. The entire procedure lasts about 1/2 hour.

After the procedure

You will stay in the hospital unit where the procedure was done until you become alert. This usually takes about 1/2 hour. Your nurse will check your heart rate, heart rhythm, and blood pressure often. If you feel any of the following, tell your nurse **right away**:

- Fast heart beat (palpitations)
- Chest pain
- Numbness or weakness
- Dizziness
- Shortness of breath
- Other reactions

Tell your nurse if the skin on your chest or back is sore. He or she will provide care for the problem. The doctor will talk to you about the results of the procedure before you go home. Most outpatients go home the day of their procedure. Some patients are kept in the hospital overnight for heart monitoring.

What to do at home

After you go home, it is **important** to keep all your follow-up appointments. You will learn to check your pulse daily. A nurse will teach you how to do this. To check your pulse:

- 1. Find the pulse located at your wrist, just below the palm. This is your radial pulse.
- 2. Lay 2 fingers (never a thumb) on your pulse.
- 3. Count the beats of your pulse for 1 full minute.

If your pulse has any irregular rhythm, tell your doctor right away.

Your doctor may prescribe new medicine for you after a cardioversion. Your nurse will explain how to take your medicine. It's **important** to take your medicine exactly as you are told.

Cardioversion does not always restore normal heart rhythm. A number of medicines are available to regulate heart rhythm. If your heart rhythm is still irregular, your doctor can prescribe medicines that will work for you.

When to call the doctor

If you have any of the following, call your doctor right away:

- Irregular pulse
- Fast heart beat (palpitations)
- Chest pains
- Numbness or weakness
- Dizziness
- Shortness of breath
- Other reactions