



University Hospitals Bristol
NHS Foundation Trust

Patient Information Service
Bristol Heart Institute (Zone C)

Patient guide to elective day case cardioversion



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Cardioversion

What is it and how is it performed?

Cardioversion aims to correct your irregular or abnormal heart rhythm by delivering a small amount of energy across your heart muscle through two electrical pads attached to the chest wall.

You will need to be admitted to hospital for half a day in order to undergo this procedure. However in some circumstances you may need to stay in hospital overnight. This will be discussed with you by your consultant or at the pre-operative assessment appointment.

You will need to be collected from hospital by car and have someone to stay overnight with you, as you will require a very short anaesthetic for this procedure.

Why do I need to have it done?

You may have been suffering from palpitations or an irregular heart rate for some time. Your doctor may have prescribed a course of anti-arrhythmia tablets e.g. amiodarone, digoxin or verapamil. However, if this has not helped then further treatment may be needed.

Before your admission

You will have been seen by a cardiologist in the outpatient department or during a hospital admission. The decision to proceed to cardioversion as an appropriate form of treatment will have been discussed.

You will need to attend the pre-operative assessment clinic approximately one to two weeks before the date of your procedure. It is important that you bring details of any medication that you take, your past medical history and a list of recent blood clotting time (INR) test results (if you are taking warfarin) to this appointment.

The pre-assessment appointment

The pre-operative assessment team will assess your health and fitness for an anaesthetic. An electrocardiogram (ECG) and blood tests will be performed. Other tests may be performed at the discretion of the team, for example, a chest X-ray.

The pre-operative assessment team will discuss the procedure and aftercare with you. A member of the cardiology team will also be available if further advice is required.

Prior to the procedure

If you are taking warfarin it is important that a blood test to check your INR is performed three days prior to the procedure. This can be performed at your local GP practice or at the hospital. It is important that the INR is between two and three for four weeks prior to the cardioversion for the procedure to take place.

On the day of the procedure

As you will be having the procedure performed under general anaesthetic, you should not eat solid food for six hours before the procedure. You may drink clear fluids (water, black tea or coffee) up to two hours before the procedure.

If you are taking a medication called digoxin you should not take it on the day of the procedure.

If you are diabetic you will be instructed as to what to do with any diabetic medication at the pre-operative assessment appointment.

You should keep taking any other medication on the day of your cardioversion unless you are told to do otherwise.

You will be seen by a doctor from the cardiology team prior to the procedure. The procedure will be explained and any questions you may have can be addressed at this point.

Checks before your procedure

You will be asked to sign a consent form which will detail the benefits and any risks of the cardioversion. This is to show that you agree to have the procedure performed.

You will meet the anaesthetist who will explain the process of anaesthesia and answer any questions you may have.

Just before the procedure you will be attached to a cardiac monitor (so that your heart rate can be recorded); your blood pressure and rate of breathing will also be recorded.

A small plastic needle will be put into the back of your hand which will be used to give you the anaesthetic.

You will be under anaesthetic for approximately five minutes. The procedure takes place during this time.

After cardioversion

After the procedure you will wake up, usually lying on your side, with an oxygen mask covering your nose and mouth.

You will be able to eat and drink when you feel able to.

An ECG or heart tracing will be performed.

Once you are fully awake the nurse will then decide when you can go home.

You will have a six-week follow-up appointment at the Bristol Heart Institute (BHI) with the arrhythmia specialist nurse. A letter will be sent in the post to confirm the date of this appointment.

The doctor will tell you if you can stop any tablets. Otherwise they should be continued until you are seen in the outpatient clinic.

You will be given a discharge letter to take to your GP practice. This will explain any changes that may have been made to your care following the procedure.

After your general anaesthetic you are not permitted to drive or operate machinery for 48 hours.

Following your cardioversion, it would be best to rest for the remainder of the day and depending on the nature of your work, possibly take the next two days off work.

Work

You should feel you are back to normal and able to concentrate before you do return to work.

Rest and activity

Most people feel rather tired when they get home. Don't feel frustrated if you tire easily.

Only do as much as you feel able to do and gradually increase your activity until you feel you are back to normal.

If you have any further questions or need additional information, please contact:

Pre-assessment team and to report blood results:

Tel: 0117 342 7502

Arrhythmia specialist nurse team:

Tel: 0117 342 6635

Waiting list co-ordinators:

Ismay Lefanu-Collins: 0117 342 6558

Agata Anders: 0117 342 6559

Notes and queries

Please note that if for any reason you would value a second opinion concerning your diagnosis or treatment, you are entirely within your rights to request this.

The first step would usually be to discuss this with the doctor or other lead clinician who is responsible for your care.

Smoking is the primary cause of preventable illness and premature death. For support in stopping smoking contact **Smokefree Bristol** on **0117 922 2255**.

As well as providing clinical care, our Trust has an important role in research. This allows us to discover new and improved ways of treating patients.

While under our care, you may be invited to take part in research. To find out more please visit:
www.uhbristol.nhs.uk/research-innovation
or call the research and innovation team on
0117 342 0233.

For access to other patient leaflets and information please go to the following address:

www.uhbristol.nhs.uk/patients-and-visitors/information-for-patients/

Hospital Switchboard: 0117 923 0000

Minicom: 0117 934 9869

www.uhbristol.nhs.uk



For an Interpreter or Signer please contact the telephone number on your appointment letter.



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