

Cardioversion

Electrical Cardioversion involves delivery of a direct-current electrical shock to the heart that is set to be synchronized or coordinated with the natural electrical activity of the ventricle, or the bottom chamber of the heart.

Before the Procedure:

Your practitioner will usually ask you to start anticoagulation medication, or blood thinner, for at least four weeks before a cardioversion is attempted. You will be asked to have blood work checked weekly. The blood test is called a PT/INR, which shows how much your blood has thinned. Because the atria (top chambers) are quivering and beating/squeezing properly, there is an increased possibility that you might develop clots in that chamber. The thinner your blood is, the less likely you are to develop clots. Once you have had three weeks of adequately thin blood, you will be scheduled for the cardioversion test. In some cases, your doctor might determine that you need the cardioversion test right away and will order a Transesophageal Echocardiogram (TEE).

You will be asked to have no food or drink (including water) after midnight the night before the procedure. Ask your physician for instructions regarding which medications to take.

During the procedure:

Your test will take place in a procedure room where the physician will talk with you about the risks of the procedure, answer your questions and then ask you to sign a consent form. You will change into a hospital gown. The nurses will place an intravenous catheter (IV) in your arm so that you can receive fluid or medication through your vein. The cardiology nurses will place electrode patches on your chest and connect these to machines that will monitor your heart rhythm. You will receive sedation medication, which will make you sleepy, through your IV. Large patches will be placed on your chest to prepare for the cardioversion procedure. An anesthesia department team member will administer medication to put you into a deep sleep state before the cardioversion procedure. The electrical energy will be passed through the large patches on your chest to cardiovert your heart or put you back into a normal rhythm. This usually takes only a few seconds. You will not feel this. The large patches help to prevent your skin from getting irritated by the electrical current.

After the procedure:

Once your heart has been converted back to a normal rhythm, you will be allowed to wake up from the anesthesia. You will be monitored during your recovery time. Typically, after a few hours most patients are ready to go home. You will need someone to drive you home from the hospital. You may be tired for a day or so, but can return to normal activities fairly quickly.

Call the Cardiology Department at 561-263-4486, if you have any questions regarding your Cardioversion procedure.