WHAT IS A CARDIOVERSION?
A cardioversion is a procedure that restores a normal pattern or rhythm to a heart that is beating irregularly. The doctor may suggest cardioversion after trying to correct an abnormal heart rate or rhythm with medication. During a cardioversion, a controlled electric current is passed through the chest. The brief “shock” stops the irregular heart rhythm and allows the normal rhythm to take over. Prior to the cardioversion, you will be given medication to make you sleepy so you don’t feel the shock. You will be monitored for at least one hour after the procedure, and if everything is stable, you then will be able to go home.

PREPARING FOR YOUR CARDIOVERSION
• Prior to the test date, within one day, you will need an EKG. Also, a prothrombin time and international normalized ratio (PT/INR) must be drawn and needs to be therapeutic before the procedure can take place.
• A recent office note, within two weeks to one month, will need to be sent to the hospital prior to the start of the procedure.
• You will need to be at the hospital 1½ hours prior to the start of the procedure.
• Do not eat or drink anything for eight hours prior to the procedure.
• Take your medications as directed with small sips of water.
• Bring your current medications with you to the hospital.

WHAT HAPPENS DURING THE CARDIOVERSION?
• Before the procedure, you will be given an explanation of the test and then asked to sign a consent form.
• Electrodes will be placed on your chest and connected by wires to the monitor, which allows for a continuous readout of your heart rhythm. We also will be able to tell if you are still in the irregular rhythm.
• A nurse will insert an intravenous catheter into your hand or arm.
• Your blood pressure and oxygen levels will be monitored throughout the test.
• You will have more electrodes placed on you from the defibrillator unit and pads that will be placed on the front of your chest and your back for the cardioversion.
• Prior to the start of the test, the anesthesiologist will give you anesthesia to put you to sleep. This is a short-acting drug and will last only 10 to 30 minutes.
WHAT HAPPENS DURING THE CARDIOVERSION? (CONT.)

• Once you are asleep, the physician will determine the amount of energy to use to try to get you back to a regular rhythm. This procedure will attempt to restore a normal heartbeat by transmitting a brief electric shock through the chest to the heart. This shock may need to be repeated more than once, sometimes up to three times. If by then it still does not bring you into a regular rhythm, the procedure is stopped.

• The procedure lasts about 30 minutes.

POST-PROCEDURE INSTRUCTIONS

• It usually takes approximately 30 minutes for you to be fully awake.

• You will be monitored for at least one hour after the procedure to make sure you remain in a regular rhythm and your vital signs are stable.

• Once everything is stable and after you have spoken with the physician, you may be discharged from the hospital, usually two hours after the procedure.

• You will need someone to drive you home after the procedure.

• You may have some soreness on your chest or some reddened areas. That is normal, and you may apply some lotion to those areas to help them heal.

WHEN WILL I KNOW THE RESULTS OF MY CARDIOVERSION?

• As soon as you wake up from the anesthesia, the physician will talk with you about what the plan of care will be after the procedure and if there will be any medication changes.

• The physician ordering the test and family doctor will receive a report of the test.
INFORMATION FOR YOUR CARDIOVERSION
PERFORMED BY LOUIE COULIS, MD, FACC

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• Prior to the test date, within one day, you will need an EKG, potassium level and a digoxin level if you are taking digoxin or Lanoxin. (The digoxin level must be drawn at least six to 12 hours after you have taken the medication). Also, a prothrombin time and international normalized ratio (PT/INR) must be drawn and needs to be therapeutic before the procedure can take place.

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• You will need to be at the hospital 1½ hours prior to the start of the procedure.

• Do not eat or drink anything for eight hours prior to the procedure.

• Take your medications as directed with small sips of water, except for digoxin or Lanoxin. Do not take this medication on the day of the procedure.

• Bring your current medications with you to the hospital.

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