Before and After Your Cardioversion
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Preparing for your cardioversion

Your doctor has recommended cardioversion to treat your heart rhythm problem. This booklet will give you some information about your care before and after this procedure. We hope you find it helpful.

You will be booked for a cardioversion as an outpatient. A cardiology booking clerk will call you to give you the date, time, and place of your cardioversion.

A responsible adult must come with you to take you home after your cardioversion. He or she must stay with you for 24 hours.

Your cardioversion will be cancelled if you do not have a responsible adult with you.
Understanding how your heart beats

The heart has an electrical system that controls how fast or slow your heart beats. A normal heartbeat starts from the top part of your heart (the atria) and spreads to the bottom part of your heart (the ventricles). This action allows the heart to fill with blood. The blood is then sent out to your body.

When your heart beats too fast or irregularly, the heart may not be able to fill with blood properly. When this happens, you may have some of these symptoms:

› Fainting
› Light-headedness
› Dizziness
› Weakness
› A “fluttering” feeling in your chest
› Shortness of breath

Sometimes, medicine can help a fast or irregular heartbeat. However, your heart problem is not being controlled by medication. Your cardiologist has recommended a cardioversion to try to fix your heart rhythm problem.
During your cardioversion, an electrical shock is given to your heart. This may help your heart go back to a normal rhythm.

Sometimes, this procedure does not fix a fast or irregular heart rate. If it does not fix your heart rhythm problem, your cardiologist will talk to you about ways to treat this.

Getting ready at home

• Do not eat or drink after midnight on the night before your procedure.

• Do not drink alcohol for 48 hours (2 days) before your cardioversion.

• Do not smoke after your evening meal the night before your cardioversion or the morning of the procedure. Smoking can cause more fluid buildup in your lungs, and you may have problems with your breathing.
The day of your cardioversion

- If you are type I diabetic, you should take half of your usual morning insulin dose the morning of the procedure.

- If you are type II diabetic, DO NOT take your insulin or oral diabetes medicine in the morning.

- Do not take any oral medicine for diabetes.

- You should take your heart and stomach medicines including blood thinners with a sip of water on the morning of the procedure, unless your doctor gave you different directions about this.

- Please bring your medicines in their original labelled bottles and your MSI card (provincial medical card).

- You may wear your dentures to the hospital. Please tell your nurse if you have dentures, permanent bridges, caps, crowns, or loose teeth.
• Bring a case to keep your glasses in.

• If you wear contact lenses, it is best to wear glasses the day of the cardioversion. If this is not possible, tell your nurse that you are wearing contact lenses because they must be taken out before your procedure.

• If you wear a hearing aid, bring it with you. Depending on your hearing loss, you may be able to wear your hearing aid during the procedure.

• Do not bring large amounts of money or any jewelry to the hospital. Please leave all valuables at home (such as jewelry, credit cards, cheque book). The hospital is not responsible for lost items.
What happens when I get to the hospital?
• Please give yourself enough time to find parking at the hospital.
• Go to the Cardiac Pre-assessment Clinic in room 6015 on the 6th floor of the Halifax Infirmary. The cardiac booking clerk will let you know what time to arrive at the Pre-assessment Clinic.
• You will be signed in by the unit clerk when you get to room 6015.
• You will then go to the Coronary Care Unit (CCU) on 6.4. You must check in with the unit clerk in CCU when you get there.
• There may be a 30-45 minute wait after you are checked in. The cardioversion is done in an inpatient room in the CCU. An inpatient room will be waiting for you; however the staff might not have it ready for you when you arrive. You will get an update when you check in with the unit clerk in the CCU to let you know when the room is ready.
• You will change into a hospital gown in the inpatient room.
• Your things will stay with you in the inpatient room.
• The nurse will take a brief admission history. This includes checking your blood pressure, pulse, and temperature, and going over your medicines with you.
What happens during a cardioversion?

- The procedure is done in an inpatient room in the CCU.
- The nurse will get you ready for the procedure. This will include placing you on a heart monitor, leaving a blood pressure cuff on your arm, and monitoring your oxygen level through a small clip placed on one finger. The nurse will insert an intravenous (IV) to give you medicine to make you relaxed and sleepy during the cardioversion. Two large sticky pads will be placed on your chest.
- You will see your cardiologist and go over the consent information for the procedure.
- There will be a nurse and 2 doctors (your cardiologist and an anesthetist) in the room during the procedure.
- The anesthetist (doctor who gives you medicine to make you relaxed and sleepy) will ask a few questions about your health.
- You will get sedation medicine before the procedure to make you comfortable, relaxed, and sleepy.
- After you are relaxed and sleepy, an electrical shock will be given to regulate your heartbeat.
Recovering from your cardioversion

• You will stay in the same room until you are fully awake.

• Your heart and other vital signs will be checked closely.

• The nurse will check your breathing, blood pressure, and pulse regularly.

• A routine electrocardiogram (ECG) will be done.

• A nurse will check your chest area where the pads were placed as the skin may be red and sore.

• Your IV will be taken out.

• You will get ready to go home.

• You will get instructions for when you leave the hospital and we will answer any questions you might have.

• You will be asked to rest quietly until the next morning.

• You will need someone to stay with you for 24 hours.
• Do not drive a car, or bicycle, or take the bus alone.

• Do not climb anything.

• Do not cook any meals for yourself.

• Do not operate any machinery.

• Do not drink alcohol for 24 hours.

• Do not sign any legal documents or important papers for 24 hours.

• You may eat and drink when you feel able. Start with clear juices, tea, clear soups, crackers, or toast.

• Before you leave the hospital, your doctor may talk to you and your family about:
  › Any changes in your medications.
  › Any special skin care needed where the pads were placed.
  › Any special instructions for after your procedure.
  › Your followup appointment.