

PATIENT GUIDE TO AN ELECTRICAL CARADIOVERSION AND/OR TRANSEOPHAGEAL ECHOCARDIOGRAM

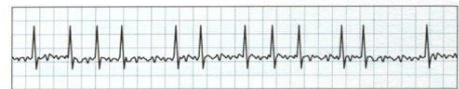
Procedure: _____ Date: _____
 Arrival Time: _____ Physician Performing: _____

What is an electrical cardioversion?

An electrical cardioversion is a short procedure where an electrical shock is delivered to the heart through patches on your chest to attempt to convert an abnormal heart rhythm back to a normal sinus rhythm.



ECG tracing of a normal heart rhythm.



In atrial fibrillation, the tracing shows tiny, irregular "fibrillation" waves between heartbeats. The rhythm is irregular and erratic.

What is a transeophageal echocardiogram?

A transeophageal echocardiogram is a procedure to check for blood clots in your heart. You will be given medication that numbs the back of your throat and a flexible tube with a transducer attached is guided down your throat and into your esophagus.



The day before your cardioversion/tee

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

Please arrange for transportation home as you will not be allowed to drive for the remainder of the day; failure to do so will result in cancellation of your procedure. You must have an adult accompany you home since you will receive anesthesia.

The day of your electrical cardioversion/tee

Please take all of your medications the morning of your procedure with sips of water **except**:

Special medication instructions: _____

continued on back

Where do I check in?

Please arrive on time to check in at hospital registration (by café coffee) located in the first floor hospital lobby. The entrance is located off of Division Street by the stop and go lights.

What to expect

We will provide you with a hospital gown and ask that you undress from the waist up. A nurse will review your past medical history and confirm your current daily medications (please bring a written list of all your current medications). The cardiovascular lab will also obtain an electricalcardiogram (EKG), start an IV and draw blood for labs. An anesthesiologist will meet with you prior to your procedure and go over your medical history and medications. Just prior to starting the procedure, many electrodes will be connected to your chest along with two large adhesive pads that will be applied to your back and the left side of your chest.

The procedure

You will be given short acting anesthesia and IV fluids. You will begin to get sleepy; once you are asleep (but still breathing on your own), the procedure will be performed. A nurse, anesthesiologist and cardiologist are present throughout the procedure to monitor your breathing, blood pressure and heart rhythm. The chest pads are connected to an external defibrillator by a cable. The defibrillator allows our team to continuously monitor your heart rhythm and deliver an electrical shock to attempt to restore your heart's rhythm back to normal. The physician will charge the defibrillator to a specified energy level and then deliver the shock by pressing a button on the defibrillator. The shock is transmitted through pads on the chest where the energy is delivered to the heart muscle. Additional shocks at higher energy levels may be delivered to attempt to restore normal sinus rhythm if the first shock is unsuccessful. You will be asleep during the procedure and will not feel the electrical shocks.

Once the cardioversion is finished

Once the procedure is finished, the anesthesia will start to wear off. You will become aware of your surroundings and you will not remember being shocked due to the amnesia effects of the sedation medication. You will be required to stay at the hospital for a minimum of one hour recovery to monitor your vital signs. After your vital signs are stable you will be allowed to get dressed and you will be provided with written instructions for home. An additional EKG will be performed before you can leave.

After your procedure, if you have any uncontrolled pain, nausea/vomiting, or signs of infection, call the Cardiology department at (920) 926-8230 between 8 a.m. and 4 p.m. If it is after hours, go directly to the emergency department.