Cardioversion

What is Cardioversion?

The purpose of cardioversion is to change or convert an abnormal heart rhythm back to normal. Cardioversion applies an electrical shock through the skin to the heart. The electrical shock used is very low energy so it should not harm your heart.

Cardioversion may be used when the heart rhythm is too fast or irregular. Some rhythm problems that cardioversion may help include atrial fibrillation, atrial flutter, ventricular tachycardia and supraventricular tachycardia. Medicines are also used to treat these rhythm problems. When medicines do not work, then cardioversion may be tried.

What can I expect before the procedure?

If you do not have an intravenous line (IV), one will be started before the procedure. An IV is put into your vein so the doctors can give medicines during the procedure. You will not be allowed to eat or drink anything for 6 hours before the procedure, except to take your medicines. You will be asked to remove your jewelry and dentures. It is a good idea to go the bathroom before the procedure is started.
Safety and Risks

Doctors and cardiology technicians will be by your side throughout the procedure. A technician will check your blood pressure, breathing and heart rhythm during the procedure.

Although this is a safe procedure, there is a small chance of a problem occurring. These risks include:

- Your heart rhythm may stay in the irregular or fast heart rate it was in before the procedure
- You may develop skin irritation or a small burn on your chest
- A blood clot may be dislodged causing breathing problems or a stroke
- Death

Please ask your doctor or nurse about anything you do not understand. We want you to be as informed as possible about this procedure.

During the Procedure

You will have the procedure done in your room or in a procedure room. You will be asked to lie on your back in your bed or on a cart. A heart monitor, blood pressure cuff, oxygen monitor and an IV will be attached.

You will be given some medicine that will make you sleep during the cardioversion. Gel pads will be put on your chest to pass the electricity through. This decreases the risk of getting a burn on your chest. After you are asleep, the doctor will use a special machine to deliver the shock to your heart. This shock is a small amount of electricity that goes through your skin to the heart. If your rhythm does not become normal after one shock, the amount of electricity will be increased. This is repeated until a normal rhythm returns or the maximum amount of electricity is used.

Care After Cardioversion

After your procedure, you will return to the recovery area. While in the recovery area, the nurses will continue to monitor your blood
pressure, heart rate and rhythm, and breathing for the next hour or until you are fully awake. It is normal for you to feel drowsy at this time due to the medicines you were given for the procedure. You may also feel some discomfort on your chest where the pads were placed. When you are fully awake, you will be offered ice chips and water. If you are an outpatient, the physician who did your procedure will come to the recovery area and talk with you and your family about medicine changes, home care and follow up care. You will then be able to get out of bed, walk in the hall and be discharged to go home.

**Home Care**

After you are discharged to home, you may:

- Start your regular diet
- Resume your normal activity
- Follow up with your family doctor
- Put hydrocortisone cream to the sore area on your chest, as needed

- **Talk to your doctor or others on your health care team if you have questions. You may request more written information from the Library for Health Information at (614) 293-3707 or email: health-info@osu.edu.**