

My hospital stay for an ablation procedure

Patient Information



What will I experience during my hospital stay?

Hospital admission

Most patients are admitted on the day of the procedure. On arrival the admission staff will check your admission documents and you'll then meet your healthcare team.

Procedure

You will be taken to the catheter lab where your procedure will be performed. Afterwards, you will be taken to the recovery unit and then to the ward.

Meet Your Healthcare Team

Electrophysiologist

Electrophysiologists are specialist doctors who focus on your heart's electrical system and on diagnosing and treating irregular heartbeats or arrhythmias. Electrophysiologists are qualified to perform special tests of your heart's electrical system, such as an electrophysiology study or an ablation.

Cardiac Physiologist

Cardiac physiologists carry out cardiac tests, such as echocardiograms, ECGs and blood pressure measurements. They may also work in the catheter lab assisting the Electrophysiologist.

Anaesthetists

Anaesthetists are specialist doctors who will manage pain during and immediately after surgery. This means providing the most appropriate anaesthetic and prescribing pain relief medication after the procedure.

Nursing Staff

Following your procedure, you will be assigned a bed in the cardiovascular ward under the care nurses who specialise in cardiology.

General Practitioner (GP)

GPs have overall responsibility for providing your long-term care. They will refer you to Consultant Physician and help prepare for your procedure. Your GP will continue to support you when discharged.

What should I do to prepare for the procedure?

You will meet with the Electrophysiologist prior to your ablation procedure. When you talk with your doctor, be sure to mention all prescription and over-the-counter medications (including vitamins, supplements or herbs) you are taking. The doctor will also want to know if you are allergic to any medications.



Will I need to fast before the procedure?

Make sure you also follow the doctor's special instructions regarding eating or drinking before the procedure. Typically, you will not be able to eat or drink anything after midnight the night before the procedure, unless instructed otherwise by your doctor.

What happens just before the procedure?

The hospital staff will prepare you for the catheter ablation. This will include preparing the area of skin where the catheters will be inserted. If there is any hair in that area, it may be shaved. A needle will also be inserted into a vein in your arm (an IV) so that medications can be administered during the procedure. This may include a mild sedative to relax you. You will then be moved to the catheter lab, where the procedure is performed.

What will happen during the procedure?

Most often, patients are awake during the procedure, although medications may be given to help you relax. The healthcare team that will take care of you during the procedure will typically include the Electrophysiologist, an anaesthetist, a physiologist, nurses and technicians. One of the team members will constantly monitor your progress throughout the entire procedure. A small needle will be used to make way for the catheters to enter through your vein or artery usually in your groin or neck and you will receive a local anaesthetic in that area. Catheters are then inserted and guided to the heart with the help of X-ray monitors and usually a 3-D monitoring system. The procedure is typically not painful, although you may initially feel some pressure at the catheter insertion site.

Depending on the length of the procedure, a urinary catheter may be inserted to drain your bladder.



Mapping and ablation

Cardiac ablation is a non-surgical procedure that involves two key stages: mapping and ablation.

Mapping

First, a 'map' of your heart is created using catheters to identify the location of the abnormal electrical signal that is causing your arrhythmia. The catheters are thin, bendable tubes that are introduced via your vascular system. The mapping catheter has a tiny electromagnetic sensor in its tip that communicates with a 3D electro-anatomical mapping and ablation system to create an image of your heart.

The resulting map gives your Electrophysiologist detailed information about how your heart looks and where the electrical circuit is broken.

Ablation

Once your Electrophysiologist has created a 3D map of your heart, the catheter is maneuvered to the areas identified by the map. The Electrophysiologist then uses the catheter to neutralize these small parts of your heart tissue that generate and conduct abnormal electrical activity. Ablation therapy creates scars that block the the faulty electrical impulses that cause your irregular heart rhythm.

The catheter ablation procedure, including the Electrophysiologist study and mapping, may take several hours.

How will the doctor monitor my arrhythmia during the procedure?

During the procedure you will be monitored using specialized equipment, including an electrocardiogram (ECG) to record your heartbeat.

What can I expect when the procedure is complete?

When the procedure has been completed, the catheters and the sheaths will be removed from your groin. The nurse will apply a dressing or a pressure bandage around the groin and you will be helped into bed.

On return to the ward, you should remain lying down. After 4-6 hours, the dressing/pressure bandage will be removed and you may get out of bed after your groin has been checked by a doctor. The nurse will regularly check your blood pressure and an ECG may be performed for monitoring purposes.

Recovery after an ablation procedure

You will most likely stay in bed for several hours, or possibly overnight, after the procedure for observation and return home the following day.

You should make arrangements for a friend or family membership to collect you from hospital. Due to the wound in your groin, you will not be able to drive a car for around a week. Once home, it is recommended to rest and recover for two weeks following the procedure. This means avoid lifting heavy weights and exercising. After two weeks, you can resume your normal daily activities.



My checklist

ACTION		WHEN?
<input type="checkbox"/>	I have understood the reason for, the purpose of and the possible risks of the course around the ablation	During my outpatient visit with my Electrophysiologist
<input type="checkbox"/>	I have received a prescription for blood thinning medication or I already take these	During my outpatient visit with my Electrophysiologist
<input type="checkbox"/>	A CT or MRI scan of the heart was performed prior to the ablation	Prior to hospitalization
<input type="checkbox"/>	I have followed my doctor's instructions about my anti-arrhythmia and blood thinning medications	One week prior to ablation
<input type="checkbox"/>	I know when I should stop eating and drinking prior to my ablation procedure	Day of hospitalization
<input type="checkbox"/>	I will bring a current list of medication	Day of hospitalization

Patient Information:

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2. What is Atrial Fibrillation?
3. Preparing for my first arrhythmia consultation
4. What is an ablation procedure?
- 5. My hospital stay for an ablation procedure**
6. My recovery after an ablation procedure

For more PATIENT RESOURCES related to Atrial Fibrillation, please visit
[GETSMARTABOUTAFIB.EU](https://www.getsmartaboutafib.eu)



As with any medical treatment, individual results may vary. Only a Cardiologist or Electrophysiologist can determine whether ablation is an appropriate course of treatment. There are potential risks including bleeding, swelling or bruising at the catheter insertion site, and infection. More serious complications are rare, which can include damage to the heart or blood vessels; blood clots (which may lead to stroke); heart attack, or death. These risks need to be discussed with your doctor and recovery takes time.

This document is published by Johnson & Johnson NV.

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