

*If you have
any questions
or concerns,
please ask
your physician
or nurse.*

Cardioversion

A cardioversion is a procedure to change or convert an irregular heartbeat to a normal regular rhythm. This information will help you understand how your heart works and what to expect before, during and after cardioversion.

The heart

The heart is a muscular organ about the size of a closed fist. It pumps oxygen-rich blood to the body. For the heart to work, it needs a “spark plug” or electrical impulse to start a heartbeat. It gets this impulse or signal from special tissue (sinus node) in the heart. The electrical impulse causes the heart muscle to contract. The heart’s electrical system and muscle work together to pump blood effectively. Usually, the heart beats regularly. Sometimes, the heart beats irregularly. An irregular heartbeat can happen after a heart attack or heart surgery. It can also happen with heart valve disease or other diseases not related to the heart.

Atrial fibrillation

Atrial fibrillation (AFib) is 1 cause of an irregular heartbeat. Some people with AFib have no symptoms. Others may feel palpitations (fast heartbeat), shortness of breath, weakness or tiredness during episodes of AFib.

Your physician may first use medications to change your AFib to a regular rhythm. If medications do not work, they may use electrical cardioversion. This procedure uses small amounts of electrical current to restore the heart to a normal, regular rhythm. The physician uses a defibrillator machine to deliver the electrical current through patches or paddles they place on the chest.

Before the procedure

To prepare for the procedure, you may have blood tests and an electrocardiogram (ECG). The physician or nurse practitioner (NP) doing the cardioversion will explain the procedure and its benefits and risks. They will answer your questions and ask you to sign a written consent form. An anesthesiologist will tell you about the medications they will use to relax you during the procedure.

The night before the procedure, do not eat or drink anything after midnight. You may take any medications ordered by your physician with small sips of water.

Before the cardioversion, a nurse will place an IV (into the vein) line in your hand or arm. The care team will use the IV to give you medications and fluids. You will have a cuff on your arm to check your blood pressure. You will have small patches on your chest connected to a monitor to check your heart rhythm. We will ask you to remove eyeglasses, dentures or partial plates (if you have them), and to empty your bladder.

During the procedure

The care team will do the procedure in the electrophysiology lab (EP Lab). They will connect you to another heart monitor and put 2 larger pads on your chest. These patches connect to a cardioversion/defibrillator machine that supplies the electrical current. You will have an oxygen mask over your nose and mouth as the anesthesiologist gives you IV medication to relax you. Once you feel relaxed and are asleep, the physician or NP will give you a small shock with the defibrillator. They may need to give you 1 or more shocks to convert your heart to a normal rhythm. The care team will wake you up when the procedure is over. The procedure lasts less than 1 hour. You will probably not be aware of the procedure or remember what happened.

After the procedure

After the cardioversion, the nurse will check your blood pressure, heart rate and heart rhythm often. You will need to stay in bed for 1 to 2 hours, depending on your physician's orders. Once you are fully awake and able to easily swallow water, you may resume your regular diet. We will monitor your heart rate and get an ECG. You may have some redness, pain, skin irritation or itching after we remove the pads from your chest. We can use a cream to help the discomfort.

Discharge guidelines

Do not drive for 24 hours after the procedure. There are no other activity restrictions. Your physician will discuss any needed medications and follow-up visits.

Contact your physician with any questions or concerns.