

Curious to know more about what a typical catheter ablation procedure is like? If their physician determined catheter ablation is the best treatment option for them, use this guide as a resource to better understand what to expect the day of their procedure.

BEFORE THE PROCEDURE

- After determining catheter ablation is the best treatment option for their Atrial Fibrillation (AFib) through discussion with their physician, they'll get their procedure scheduled. They will receive a list of instructions from their physician, which may include instruction as to what medications to continue to take or stop taking (like anti-arrhythmic drugs), how to fast appropriately before their procedure and more. Their physician may also have them come in beforehand to have separate imaging done in order for them to see their heart's anatomy before their procedure.
- The day of their procedure, they will get checked-in at the hospital and complete any required
 paperwork. Once admitted, they'll be taken to a holding area where they will get bloodwork done
 to ensure all levels are good. Their anesthesiologist will talk to them beforehand about the type of
 anesthesia they will receive.
- Once the EP lab is ready for them, they will take them into the procedure room where they'll be
 greeted by the nurses and lab staff. There will be several patches placed on their chest and back. This
 is to monitor their vitals throughout, and some of these patches are used to navigate their heart. This
 is completely normal and will ensure the procedure goes smoothly.
- In most cases, they will be given sedation just prior to the start of their procedure.
- At this point, their physician may do a transesophageal echocardiogram (TEE) procedure to ensure they have no blood clots before beginning the ablation procedure.

DURING THE PROCEDURE

- A small incision will be made in the upper thigh where their physician will insert a small, thin tube, also known as a sheath, into the blood vessel. Their doctor will then gently guide a thin, flexible catheter into their vessel (using the sheath as a guide) to access their heart.
- After accessing their heart, their physician will use a mapping catheter to create a 3D model of their heart and record its electrical activity. Their physician will analyze the signals and information to determine the best treatment strategy for them.
- Next, their physician will use a special type of catheter called an ablation catheter-which transmits radiofrequency or (RF) energy into the heart-to block irregular signals that cause AFib.
- Their physician will continue treating these irregular signals until a normal heart rhythm is restored.
- At the end of your procedure, their physician will perform some additional tests to ensure effective treatment delivery.
- They may get an additional device implanted that will continuously record their heartbeat and remotely report results back to their physician to monitor procedure success.
- Have patience with procedure length. It might be longer than expected or might start later than expected.

AFTER THE PROCEDURE

- They will be taken back to their room for recovery and receive a visit from their physician who will check on them and provide specific instructions to follow.
- Expect to stay in the hospital overnight for monitoring and safety precautions.
- Ensure you have a transportation plan after the procedure since the patient likely will not be allowed to drive.
- There may be some restriction on activities for about a week after their procedure. Follow all guidance from their physician accordingly.
- Typically, they'll have a follow-up appointment within the next few weeks. Make sure they keep all scheduled appointments after their procedure.

Always consult your doctor with questions about AFib, symptoms, or best treatment options.

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