

Catheter ablation for atrial fibrillation

What to expect for your procedure

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



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Before the procedure

- After determining with your physician that catheter ablation is the best treatment option for your Atrial Fibrillation (AFib), you'll get your procedure scheduled.
- There are several kinds of ablation procedures. The most common are: Pulsed Field Ablation (PFA), Radio Frequency (RF) and Cryo. Each kind of ablation uses a different kind of energy to reduce and prevent continued rhythm disturbance. Ask your physician what kind of ablation is best for your treatment.
- You will receive a list of instructions from your physician, which may include instruction as to what medications to continue or stop taking (like anti-arrhythmic drugs), fasting before your procedure and more.
- Your physician may also have you come in beforehand to have a separate imaging procedure done in order for you to see your heart's anatomy before your procedure.
- The day of your procedure, you will get checked-in at the hospital and complete any required paperwork.
- Ask your physician or their office staff to complete the section below for your post procedure instructions.
- Once admitted, you'll be taken to a holding area where you will get bloodwork done to ensure all levels are healthy. Your anesthesiologist will visit with you to discuss the anesthesia you will receive.
- Once the EP lab is ready for you, they will take you into the procedure room where you'll be greeted by the nurses and lab staff.
- There will be several patches placed on your chest and back. This is to monitor your vitals throughout, and some of these patches are used to navigate your heart. This is completely normal and will ensure the procedure goes smoothly.
- Expect to have many different people coming in and out of the holding room to help prepare for the procedure.
- In most cases, you will be given sedation just prior to the start of your procedure.
- At this point, your physician may do a transesophageal echocardiogram (TEE) procedure to ensure you have no blood clots before beginning the ablation procedure.

During the procedure

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

- You will be taken back to your room for recovery and receive a visit from your physician who will check on you 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 you likely will not be allowed to drive.
- There may be some restriction on activities for about a week after your procedure. Follow all guidance from your physician accordingly.
- Typically, you'll have a follow-up appointment within the next few weeks. Make sure you keep all scheduled appointments after your procedure.

Physician email and number:

Email: _____

Phone Number: _____



The first week following your ablation procedure weigh yourself every day. If you gain _____ pounds or more during the first week after your ablation or if you are swollen or short of breath, call your physician's office immediately.



Check your blood pressure once a day after you have been sitting in a chair for 5 minutes and you have taken your medications per your physician's instructions. If your blood pressure is high, or if it is too low call your physician's office.

If your heart rate is over _____ bpm or under _____ bpm and you have symptoms from the low heart rate (dizzy, lightheaded, weakness, fatigue) call your physician's office.



Check your EKG through compatible wearable technology such as the Apple Watch and integrate the data to the AFibLife™ APP. If your watch or other home EKG device shows Afib, in conclusive, unclassified or high heart rate please send tracing to your physician's office via:



Blood pressure chart

	Systolic/top number	Diastolic/bottom number
Normal		
Elevated		
High		
Low		

Ask you nurse or physician to complete the following information on your behalf for post procedure care.

Remember you may go in and out of AFib after an ablation for up to 90 days. If you are not going back into rhythm on your own you should notify your physician by day _____ of continuous AFib.

If you have chest pain when you breathe in, chest pain when you are laying down, or if your chest is tight and you feel like you can't take a deep breath in contact your physician's office immediately.

Blood thinners

Start taking your medications as directed by your physician.

Notes:

Download the smartphone app built for AFib patients today!



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

For more resources,
visit www.afanswers.com

These materials are not intended to replace your doctor's advice or information. For any questions or concerns you may have regarding the medical procedures, devices and/or your personal health, please discuss these with your physician.

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