

What is an Ablation?

What is an Ablation and why is this test ordered?

The normal beating pattern of the heart is controlled by an electrical system. A smooth, constant flow of electricity spreads from the top of the heart to the bottom to make your heart contract and pump blood. Any problem or disruption with this electrical system can cause an irregular heartbeat, or arrhythmia. Your physician has ordered an ablation to correct an arrhythmia caused by the electrical system in your heart. This procedure may or may not be done with an Electrophysiology Study (EP Study). The EP Study helps the physician to locate the electrical problem.

How long will this test take?

The ablation procedure usually takes about two hours, but some may take more time. Your doctor will discuss the details of your case with you before your catheter ablation. Additional time is needed for the pre-procedure set up and recovery time.

Is there any special preparation prior to the procedure?

If you are having this test done as an outpatient, you must arrange to have someone beside yourself drive you home.

Your cardiologist will order an electrocardiogram (ECG), a test to show the pattern of electrical activity through the heart. A device called a Holter Monitor may also be ordered. This device records heartbeats for 24 hours.

Your cardiologist may order labwork prior to the procedure.

If you are a diabetic or take blood thinners, you may need to adjust your medication dosage before your study. Contact your cardiologist.

Do not eat or drink 6-8 hours before the procedure. Take all of your regular medications before your study unless directed otherwise by your doctor.

Bring a current list of your medications with you. Wear comfortable clothing that is easy to change in and out of. Leave valuables at home such as jewelry, money, checkbook and credit cards.

What can I expect on the day of the procedure?

- Once you have arrived at the Patient Care Area, a nurse will greet you and escort you to a private section to prepare you for the procedure. You will be asked to change into a hospital gown.
- A Nurse Practitioner or the Electrophysiologist will conduct a brief medical history, including the medications you are currently taking. The Electrophysiologist will also discuss informed consent.
- You will be connected to monitoring equipment including a blood pressure cuff, a finger clip to monitor your blood oxygen level and a heart monitor.
- An intravenous line will be started.
- The area where the catheters are to be inserted will be shaved. This is most commonly the groin.
- You will be brought to the lab and assisted onto the procedural table. You will need to lay flat, with 1-2 pillows under your head.
- The room may feel cool and you will see a lot of equipment including the x-ray tube, computer monitors and a sterile table.
- The staff will introduce themselves. There will be a Circulating Nurse whose job is to take care of you during the

procedure. The Doctor will be in a sterile gown, gloves and mask. Two or three additional people will be in the room putting information into computers.

- A sterile drape will be placed over you and your gown will be removed (the metal snaps interfere with the x-ray). If you desire, warm blankets will be placed over you. Your privacy is important to us and you will not be exposed.
- Most procedures are done with light sedation. It is important that you are able to talk to your nurse, and on occasion answer questions the Doctor may ask.
- At the start of the procedure, the skin in the area of the insertion site is numbed. An introducer sheath (a special tube) is inserted into a site in the groin. The sheath remains in place during the entire procedure.
- Different catheters will be placed through the introducer sheath and threaded to the heart. You will not feel the passage of these catheters. You may feel a sensation of pressure at the sheath insertion site.
- Special electrodes at the tips of the catheters help to locate the direction of the arrhythmia in the heart. Energy is then sent through the catheter to disable or stop the arrhythmia.
- During the study, the heart may be stimulated to beat at different rates. You may feel your heart beat faster, or it may even go into your abnormal rhythm. If an abnormal heartbeat does occur, the rhythm can be regulated back to normal.
- Also during the study the doctor may give you medication and monitor your response to the medicine.
- When the ablation is complete, the catheters are removed. Pressure is applied to the insertion site (s) for 10-20 minutes.

What do I expect after my procedure?

At the conclusion of the procedure, the doctor will go over the results with you. You will spend between 2-6 hours on bedrest after the procedure. The nurses in the Patient Care Area will review post procedure care with you. Your medications will be reviewed and you will have a signed copy of instructions to follow upon discharge. Some patients may stay in the hospital overnight.

After you get home, your doctor will want you to make a follow up appointment.

If you have further questions, call your cardiologist or Danbury Hospital Invasive Cardiology at 739-7436.

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