York and Scarborough Teaching Hospitals
NHS Foundation Trust

Elective Cardioversion

Information for patients, relatives and carers

ⓘ For more information, please contact:
Arrhythmia and DC Cardioversion
Nurse Specialist
York Hospital, Wigginton Road, York, YO31 8HE
Telephone: 07393 266767
(answer phone out of hours)
Email: yhs-tr.yorkdccvservice@nhs.net

Out of hours:
Coronary Care Unit – 01904 726030

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What is a cardioversion?

A cardioversion is a treatment used to correct certain abnormal heart rhythms, including:

- Atrial fibrillation
- Atrial flutter

During a cardioversion, a controlled electric shock is given to your chest. This helps your heart return to a normal, steady rhythm.

You will have a short general anaesthetic, which means you will be asleep and will not be aware of the procedure.

The shock does not stop and restart your heart. Instead, it resets the heart's electrical activity so it can beat normally again.

Will it hurt?

No. You will be asleep during the procedure and will not feel anything.
Afterwards, you may notice:

- Mild soreness on your chest
- Slight redness where the pads were placed

If needed, you can take paracetamol as instructed on the packet (if not taking other paracetamol containing medications or are allergic) or a soothing, non-fragranced cream.

Benefits of cardioversion

If successful, cardioversion may improve symptoms such as:

- Palpitations
- Breathlessness
- Tiredness

Your heart rhythm may feel steadier, and you may find daily activities easier.
Your doctor may review or adjust your medications after the procedure.

Risks of cardioversion

Cardioversion is considered a safe procedure. Serious problems are uncommon. You will be cared for by a trained and experienced team.

Stroke (less than 1 in 500)

A small number of people may develop a blood clot that could cause a stroke.
This is why it is very important to take your blood thinning medication (anticoagulant) exactly as prescribed.

Risks from general anaesthetic (less than one in several thousand)

These risks are very rare. Further information is available in the Trust leaflet:
“What you need to know when coming into hospital for surgery.”

Skin reaction (10–15 in 100 people)

Mild redness or soreness may occur and usually settles within 48 hours.

Cardioversion may not work (around 10 in 100 people)

Sometimes the heart does not return to a normal rhythm, or it returns to an irregular rhythm soon after. Your cardiologist will discuss next steps if this happens.

Slow heart rate or low blood pressure (around 2 in 100 people)

This may require fluids or medication. Very rarely, a pacemaker may be needed, which could mean a longer hospital stay.
Please speak to the team if you have any concerns.

Are there any alternatives?

The main alternative is medication to control your heart rate and rhythm.
Your cardiologist will discuss the options with you and advise on the best treatment for your individual situation.

Where will my cardioversion take place?

Your cardioversion will take place on the Day Unit at York Hospital (Junction 5, Level 1).

Staff involved in your care may include:

- Cardiology nurses
- An anaesthetist and assistant
- Trained medical staff
- Students observing as part of their training (you may opt out)

Most people go home the same day.
Waiting and recovery areas are mixed sex, with access to single-sex toilets and private changing facilities.

Before coming into hospital

If you take warfarin

You must have a weekly INR test for four weeks before your procedure. If your INR is not in the safe range, your cardioversion may need to be postponed.

If you take another blood thinner

Examples include:

- Rivaroxaban
- Apixaban
- Edoxaban
- Dabigatran

Do not miss any doses for at least four weeks before your cardioversion.

If this happens, contact:

Arrhythmia and DC Cardioversion Nurse Specialist
Telephone: 07393 266767
Email: yhs-tr.yorkdccvservice@nhs.net

If you have diabetes

You will receive individual advice about adjusting your medication. This will be discussed with you before admission.

If you take digoxin

Do not take digoxin:

- The day before your cardioversion
- The day of your cardioversion

If you take GLP-1 medications (for weight loss or diabetes)

Examples of these drugs are, Ozempic, Wegovy, Rybelsus, Mounjaro, Saxanda ect,

You will receive personalised advice on when to stop taking these prior to your cardioversion. This is usually four weeks to reduce complications from the anaesthetic.

Other medicines

Take your usual morning medicines unless told otherwise.

Chest hair

Please shave your chest (above the belly button) the day before your procedure.
If you are unable to do this, the nursing staff can help on the day.

Showering and skin and nail care

Please take a shower or bath and use simple soap the night before or morning of the procedure. Please do not use and moisturising body washes or creams as these can prevent the sticky pads for sicking to your skin properly.

Please remove nail polish from your fingernails.

Eating and drinking (fasting instructions)

If your procedure is in the afternoon:

- Have a light breakfast before 8am (toast or cereal only)
- You may have clear fluids until 12 noon (water, black tea or coffee)

Do not have milk, fizzy drinks, or chewing gum.
Fasting is important for your safety.
If these instructions are not followed, your procedure may be cancelled.

What Should I Bring?

- All medications (in original boxes)
- Dressing gown
- Slip-on shoes
- Something to read or do
- Overnight bag (in case you need to stay)

What happens on the day?

A nurse will:

- Welcome you
- Check your heart rhythm, pulse and blood pressure
- Take blood tests
- Insert a drip
- Explain the procedure

You will be asked to sign a consent form. This part of your visit usually takes around two hours.

During the procedure

You will be asleep for only a few minutes.
Equipment used includes:

- Heart monitor
- Defibrillator
- Blood pressure monitor
- Anaesthetic equipment

Recovery and going home

Once fully awake, you can eat and drink.
Most people go home around three hours after the procedure.

Discharge is usually between 5:30pm and 7:30pm.
For the first 24 hours you must:

- Have a responsible adult stay with you
- Not drive
- Avoid important decisions or operating machinery

You will need a lift home.

Follow up

You will have a follow-up clinic appointment in around three months, where your medications will be reviewed.

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact: Claire Gray, Arrhythmia and DC Cardioversion Nurse Specialist, telephone 07393 266767 (answer phone out of hours) or email yhs-tr.yorkdccvservice@nhs.net.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website: www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/

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