



Patient & Family Guide  
2018

# Catheter Ablation

Aussi disponible en français :  
*Ablation par cathéter* (FF85-1914)



[www.nshealth.ca](http://www.nshealth.ca)

# Catheter Ablation

This pamphlet will help you and your family learn what to expect before, during, and after your catheter ablation. Your nurses and doctors will answer any questions you may have. Please write your questions below.

**Bring this pamphlet with you when you come to the hospital.**

**Questions:**

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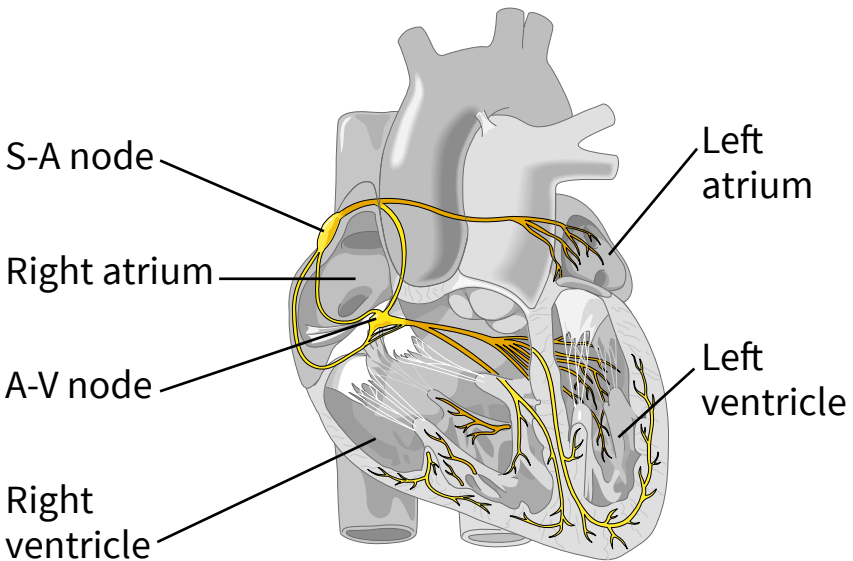
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## What is catheter ablation?

Catheter ablation is a treatment for certain heart rhythm problems. A special kind of energy is used to burn or destroy the heart tissue that is causing the problem. This tissue will no longer be able to start an electrical impulse.

## How does the heart work?

The heart is a muscle. It is divided into 2 upper parts called the right atrium and left atrium, and 2 lower parts called the right and left ventricles. The right side of the heart pumps blood from the body to the lungs to get oxygen. The left side pumps oxygen-rich blood to all parts of the body.



Your heart has an electrical system that controls the pumping. It has its own pacemaker in the right atrium. This is called the S-A node (sinoatrial node). The S-A node sets your heart rate. It sends an electrical impulse that travels down through the A-V (atrioventricular) node to the ventricles. This makes the ventricles contract (squeeze together) and pump blood.

## **Heart rhythm problems**

Many different kinds of heart rhythm problems can be treated with catheter ablation. You and your doctor will talk about your rhythm problem.

**What are your questions? Please ask.  
We are here to help you.**

**In Nova Scotia you can call 811 to talk with  
a registered nurse about your health care  
questions 24/7.**

## Hospital admission

- Leave all jewelry (including your wedding ring) and money at home. The hospital is not responsible for the loss of valuables.
- Wear your MedicAlert® bracelet, if you have one.
- Bring **all** of your medications in their original bottles with you. This includes over-the-counter and herbal medications.
- Your doctor may ask you to stop taking the medication you use to treat your heart rhythm problem. Blood thinners or medications that prevent your blood from clotting (such as warfarin, Eliquis®, Pradaxa®, or Xarelto®) **may** also need to be stopped. **Do not stop taking your medications unless your doctor tells you to do so.** Your nurse or doctor will tell you what pills you may take.
- You will have an ECG (electrocardiogram, an electrical tracing of your heart) and blood tests.
- The nurse will shave both of your groins. Men should also expect shaving of their chest and parts of their upper back, as needed. This is because large sticky monitoring patches will be placed on your chest and upper back.
- Before the ablation, a doctor or nurse will examine you. They will explain the procedure to you and your family. If you have concerns, be sure to ask questions before you sign the consent form.

# What are the possible risks of catheter ablation?

Your doctor will talk with you about the risks.

- It is not uncommon to develop a very fast or irregular heart rate which needs an electrical shock to bring it back to normal. This may be needed during your ablation.
- You might need a permanent pacemaker. This depends on the kind of ablation you need.
- The ablation might not work and you might need to have it done again.
- You might bleed from the area where the tubes were placed, or have damage to the blood vessels. Surgery is rarely needed to repair damaged blood vessels.
- You might develop a blood clot. This is why it is important for some patients to take ASA (Aspirin®) or other medications to prevent clotting, such as warfarin, Eliquis®, Pradaxa®, or Xarelto®.
- Infection is very rare.
- A stroke, heart attack, or partly-collapsed lung is very rare.

## How do I get ready for catheter ablation?

- Make arrangements for a responsible adult to pick you up on the unit, drive you home, and stay with you the night after your procedure.
- Do not eat or drink after midnight on the day of your procedure.
- Some catheter ablations take 1 to 2 hours, but some may take up to 6 to 8 hours. Tell your family not to worry if the procedure takes longer than expected.
- You will be told which pills you can take with sips of water.
- In the morning, take a shower.
- You do not need to remove your dentures, hearing aids, or glasses.
- You may bring a pillow from home with you. This may help to make the procedure more comfortable.
- You will be asked to change into a hospital gown.
- Just before you go for the procedure, **empty your bladder (pee)**.
- Staff will take you to the Electrophysiology (EP) Lab on a stretcher.

## In the EP Lab

- You will lie on your back on a narrow table.
- A nurse will place sticky patches (electrodes) on your chest and back to monitor your heartbeat.
- A cuff will be placed on your arm to monitor your blood pressure.
- An intravenous (IV) line may be started in a vein in your hand or arm before or during the procedure. Medications and fluids can be given through this tube.
- You will get medication through your IV line for discomfort and to help you relax during the procedure. A nurse will clean the skin of your groin(s) with a special cleansing solution. They will cover you with towels and sheets.
- Usually, the doctor will use a vein(s) in one or both groins. Rarely, an artery will be used.
- Your skin will be frozen with medication. This may burn or sting for a short time.
- When your skin is frozen, 2 or 3 small catheters (tubes) will be placed into the vein or artery and passed through to your heart.



- The doctor will place the tip of one tube on the spot in your heart that is causing the rhythm problem. It may take a long time for the doctor to find the right spot. You may feel like your heart is skipping beats as the tubes are placed. You may also feel the symptoms that caused you to seek treatment, such as pounding heart, light-headedness, dizziness, shortness of breath, or pressure in your chest. **Tell the doctor or nurse if you feel any of these.**
- A small amount of energy will be sent down the tube to burn the spot. This may need to be done a few times. You may feel some discomfort inside your chest for a few seconds.
- It is important that you try not to move or change position during the ablation. If you are uncomfortable or have pain, tell the staff and they will give you medication to make you comfortable.
- The doctor will check that the ablation was successful. You will stay on the table and be monitored during this time. When the doctor is sure that the ablation has worked, the tubes will be taken out. The nurse will place firm pressure on the puncture site for a few minutes and then cover it with a small bandage.

## After catheter ablation

- You will be taken to your room on a stretcher.
- Your nurse will check your blood pressure and pulse, and the bandage for bleeding.
- If the doctor used a vein in your leg, you must lie in bed for at least 3 hours. You will need to keep your leg straight so that it does not bleed.
- Arteries take longer to heal than veins. If the doctor used an artery in your leg, you must lie in bed for up to 6 hours. You will need to keep your leg straight so that it does not bleed. The pulse in your foot will also be checked.
- You can eat and drink.
- You may have an ECG to check your heart rhythm.
- Your nurse will tell you when you are able to get up. They will help you to sit on the side of the bed for a few minutes before you stand up. Tell the nurse if you are dizzy or have any discomfort.

# Going home

## Care after sedation

- Sedation is treatment given to relax you and help with pain during a procedure.
- After sedation medication you may be drowsy and may not remember parts of your procedure.
- The effects of sedation should not last for more than 24 hours (1 day).
- For 24 hours after your procedure:
  - › do not make important decisions
  - › do not sign legal documents or make large purchases
  - › do not drink alcohol
- **Do not drive for 48 hours (2 days) after your procedure.** Talk with your heart doctor or nurse practitioner about when you can drive again.
- A responsible adult must meet you on the unit, drive you home, and stay overnight with you.

## **When will I be discharged from the hospital?**

- After checking your test results, the doctor will tell you when you can go home. You may need to return to the same hospital in a couple of months for followup.
- If you live far from the hospital where you had your procedure, your family doctor or heart doctor may be able to see you for followup.

## **When can I take a bath?**

- You may shower the morning after your procedure. Do not point the water right at the puncture site.
- **Do not** take a tub bath or swim in a pool for 48 hours after your procedure.

## **When can I take off my bandage?**

- You may take off your bandage on the evening after your procedure.

## **When can I return to work?**

- Talk with your doctor about returning to work. The kind of work you do will determine when you can return to work.

## What activities can I do?

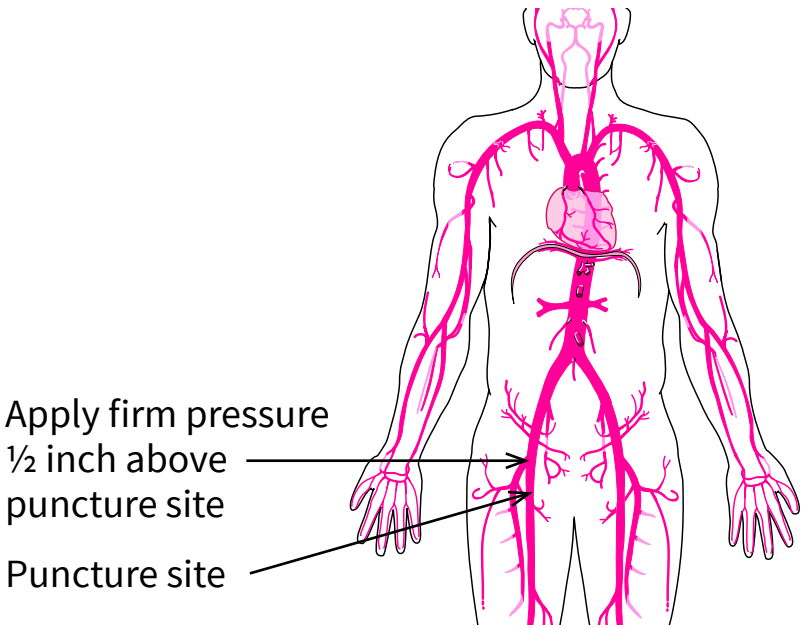
- **Do not** bend, squat, or lift anything heavier than 10 pounds for at least 3 to 5 days.
- **Do not** do any sports, such as jogging or tennis, for 3 days after your ablation.
- Climb stairs slowly for the first 3 days.
- Do not walk fast for 3 days.

## What should I do if I have bleeding from the puncture site?

- Apply gentle pressure to the puncture site when you laugh, cough, sneeze, urinate (pee), or move your bowels (poop) for 2 days after your procedure. This will prevent bleeding.
- Blood may flow from the puncture site or stay under the skin as a firm lump.
  - › if you have bleeding or notice a lump that gets bigger while in hospital, apply firm pressure (see diagram on next page). Return to bed and ring for a nurse.
  - › if bleeding happens after discharge, lie on your back and firm apply pressure until the bleeding stops or the lump softens and gets smaller.
- Pressure should always be applied with your hand about ½ an inch **above** the puncture site (see picture on the next page).

You may need someone to help you with this. **If the lump does not soften after 5 minutes of applying pressure, have it checked by your family doctor the next day.**

**If you are not able to stop the bleeding or the lump continues to get bigger, call 911 to take you to the nearest Emergency Department.**



## **Should I drink more fluids?**

Drink plenty of fluids for 24 hours after your procedure to prevent dehydration (drying effect), unless you can't because of another health condition. Try to drink water or juice. Avoid caffeine as it may make you pee more often.

## **Will my medications change after catheter ablation?**

- Your medications may change after your ablation. Your heart doctor will talk with you about this before you leave the hospital.
- To prevent blood clots, your doctor may recommend that you take ASA (Aspirin®) or stronger blood thinners every day for 2 to 6 months.

**What are your questions?**

**Please ask. We are here to help you.**

## **Contact your family doctor right away if these problems come back:**

- Dizziness or shortness of breath.
- Racing heart.
- Symptoms you had before your ablation:
  - › you may feel extra beats, skipped beats, or as though your heart is going to race, but then it doesn't
  - › extra beats may cause your heart to race if you had a short circuit. If the procedure was successful, you should not have any more sustained (ongoing) heart racing
  - › it can be normal to have extra beats

## **Contact your family doctor if you have:**

- › swelling in your legs
- › bleeding, pus, or redness at the puncture site(s)
- › a firm lump at the puncture site(s) that does not soften after applying pressure for 5 minutes
- › fever or chills
- › trouble breathing



## **Go to the nearest Emergency Department if you:**

- Have intense (very bad) pain at the puncture site.
- Notice a change in the colour of your leg (such as turning white, blue, or purple).
- Have a large bruise at the puncture site.
- Have swelling at the puncture site that gets bigger even after applying pressure.
- Are not able to stop the bleeding at the puncture site.
- Have a lot of chest pain or trouble breathing.

If you have questions or concerns about your catheter ablation, please call your family doctor or your heart doctor.

**Bring this pamphlet with you when you see your family doctor after discharge.**



### **Looking for more health information?**

Find this pamphlet and all our patient resources here: <http://library.nshealth.ca/PatientGuides>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

*Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.*

*Please do not use perfumed products. Thank you!*

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If you have any questions, please ask your health care provider.

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The information in this pamphlet is to be updated every 3 years or as needed.