



What is a Direct Current Cardioversion (DCR)?

Cardioversion procedure helps to correct irregular heart rhythms (arrhythmias). A Direct Current Cardioversion (DCR), is a procedure in which a very brief electrical current is delivered to the heart to restore normal rhythm.

Why do I need Direct Current Cardioversion?

There are two common types of arrhythmias, atrial fibrillation and atrial flutter. In both types, the upper chambers of your heart (atria) beat very fast. Less commonly, your lower chambers of your heart (ventricles) may also beat very fast. The aim of the cardioversion is to electrically reset the hearts abnormal rhythm.

When your heart beats too fast, it can't pump enough blood to the rest of your body. As a result you may feel symptoms like:

- Dizziness or blackouts
- Shortness of breath
- Tiredness
- Chest pain

If you have arrhythmias, your doctor will probably give you medication as a first step. Not all arrhythmias can be corrected with medication alone.

How do I prepare for Direct Current Cardioversion?

As this procedure is undertaken in hospital you will need to complete your admission paperwork, which the Nepean Cardiology staff will provide to you, and return to the admitting hospital at least three days prior to your admission date. This paperwork can be submitted online for if you'd prefer, the link for hospital online admissions can be found on our website – nepeancardiology.com.au > for patients > hospital admissions.

You will need to fast for six hours prior to the admission time however any medication you need to continue to take can be taken with a sip of water.

Medications, including **Warfarin and other blood thinner** medications, should be taken with a sip of water only - **DO NOT STOP** taking blood thinners unless your cardiologists specifically advises you to.

You will be required to stay between 2 - 4 hours following your procedure. You may feel sleepy after the procedure. Please make sure you have someone with you who can drive you home afterwards as you will not be allowed to drive yourself or catch a taxi alone. You should not drive for 24 hours after the procedure as the effects of the sedation may persist for many hours.



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What should I expect on the day of my Direct Current Cardioversion?

Once admitted to hospital, you will be asked to remove any jewelry and put a hospital gown on. A doctor will then give you a brief examination, and answer any questions that you may have.

When it is time for your procedure, a nurse will take you to the Cath lab, where the Doctor and other members of the medical team will be ready and waiting for you. You will lie on a table and the medical team will place two patches (**electrodes**), one on your chest and one on your back. The electrodes will be connected to a cardioversion machine, known as a **defibrillator**. The Cath lab is equipped with various monitors so that your team can follow how your heart is doing throughout the procedure.

Next, your medical team will administer a light sedative through an intravenous (IV) line in your arm. You will go to sleep almost immediately and will be completely unaware of the procedure. The IV line may also be used to administer other medications needed during the procedure.

Once the electrodes are in place and you are asleep, the defibrillator will be used to deliver a small shock to your heart. This shock is what “resets” your heartbeat to normal sinus rhythm.

What happens afterwards?

When your cardioversion is finished, you’ll be closely watched by your medical team for several hours. As you’ll have been asleep during the procedure, you’ll probably feel drowsy for a little while afterwards. Some patients have sensitive skin at the site where the sticky pads are placed for the cardioversion.

Remember, always follow your post-treatment instructions. This will include not driving or operating heavy machinery for 24 hours after your procedure, and taking some medication to reduce blood clots and keep your heart rhythm normal.

After your cardioversion, your doctor will make a follow-up appointment with you to discuss your ongoing treatment and put a suitable management plan into place.

Are there any risks?

A cardioversion is usually a safe procedure and serious problems are unlikely. There is a small risk of blood clots that may travel from your heart to your body. Your medical team will be aware of this, and they’ll give you blood thinning medication to help prevent this from happening. You should discuss with your Doctor any questions or concerns that you may have.