



Heart
Rhythm
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POST PROCEDURE PATIENT DISCHARGE INSTRUCTIONS **Radiofrequency Ablation**

What to Expect after your Ablation Procedure:

During the first 48 hours after an ablation, some patients experience:

- Mild Chest Discomfort – for a week or so, due to post procedure inflammation. The pain will often worsen with a deep breath or when leaning forward. It should resolve within a week.
- Mild shortness of breath with activity
- Mild to moderate fatigue – this may last 1–3 weeks
- Soreness and bruising in the groin area. This bruising may extend down past the knee as time passes. This bruising will go away slowly over a few weeks.

During the first month after an ablation, some patients may experience:

- Palpitations, fast heart rates, or episodes of atrial fibrillation or flutter. This is normal first 4 weeks during the “healing phase”, and some patients may require medications or cardioversion (shocks) to maintain a normal rhythm (in the case of atrial fibrillation or atrial flutter ablations).
- Recurrence of the arrhythmia during this time is not an indicator of the failure of the ablation.
- Should you have a recurrence of your arrhythmia but are otherwise doing well then this is not an emergency. Please do not call the after-hours covering physician but call our office during regular business hours to have your doctor decide what, if anything, need be done.

Care of your Puncture Site:

- Depending on your ablation, you might have one or two sets of puncture sites one on each side of the groin, or maybe on one side.
- Please keep this area clean. You may shower when you get home and remove the band aides. DO NOT go in a tub bath, pool, ocean, or lake until completely healed in 7 days.
- Avoid any lotions, powder or creams to the puncture sites.
- You may notice a lump at the puncture site smaller than the size of a quarter. This is normal.

Activity Restrictions:

- First two days post ablation, you should take it easy.
- Do not drive for 2 days post ablation
- Do not lift, pull or push anything greater than 5–10 pounds for 7 days
- You may resume normal activity after 1 week, but avoid strenuous activities for 2 weeks

CALL THE DOCTOR IMMEDIATELY IF YOU HAVE ANY OF THE FOLLOWING:

- Signs of infection, such as fever over 100 degrees F within the first 3 weeks post procedure, drainage from the puncture sites, redness, swelling, severe pain or if the puncture sites are hot to touch.
- Any lumps larger than the size of a quarter near the puncture sites, increasing more painful or seem to be throbbing.
- Severe chest pain with deep breath or when leaning forward, or shortness of breath.
- Slurred speech, difficulties swallowing, loss of sensation, decreased strength in hands or legs or any other stroke like symptoms.
- Severe chest pain or difficulty breathing

Medications:

Your discharge medication may include but are not limited to the following:

- Anticoagulant (blood thinner) therapy to prevent stroke from atrial fibrillation – including perhaps one of the following Eliquis, Pradaxa, Xarelto, or Coumadin
 - If you are on Coumadin, you will need your blood checked weekly for the first couple of weeks after the procedure to confirm your INR range 2.0–3.0 for stroke prevention
- Anti-arrhythmic medication may also be initiated or continued to help your heart heal from the ablation.
- Carafate (sucralfate) 1 gm tablet by mouth twice a day
- Protonix (pantoprazole) 40 mg tablets by mouth once daily

** Carafate and Protonix need to be taken for 6 weeks post ablation. This is routine post-ablation prophylactic anti-ulcer therapy given to all of our patients**

FOLLOW –UP

You will return for a follow up doctor visit in two weeks. If you did not receive an appointment, please call the office at the number listed.

Please leave a message if your call is not an emergency. On weekends you can still reach us through the call operator. For emergencies, please call 911.

Thank you for entrusting us with your care