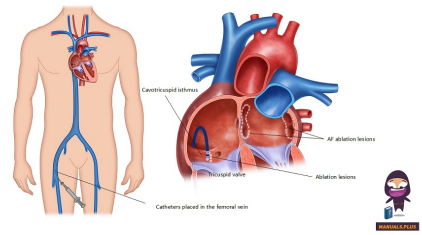


UWHealth **Atrial** **Flutter** **Ablation** **Procedure**



UWHealth Atrial Flutter Ablation Procedure Instructions

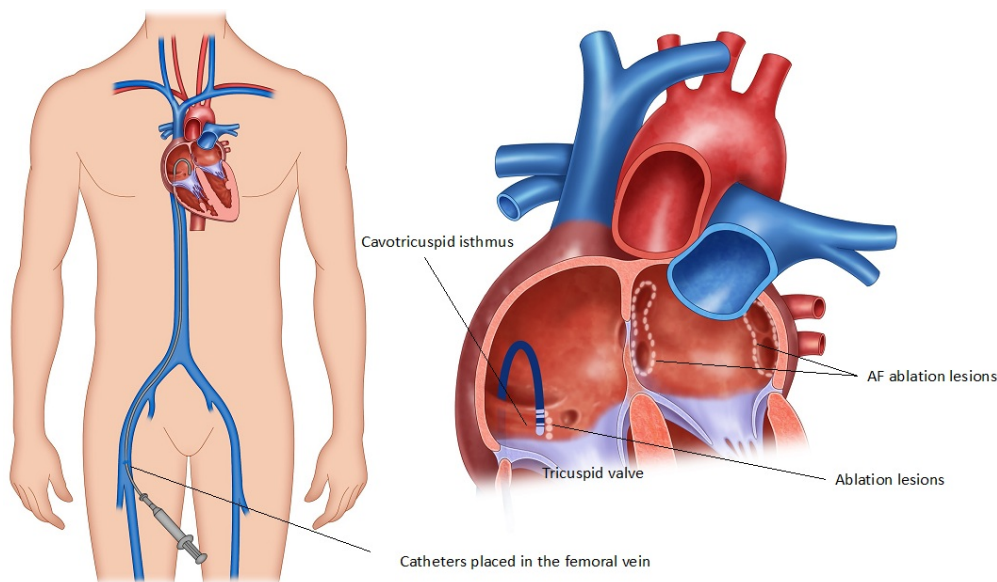
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UWHealth

UWHealth Atrial Flutter Ablation Procedure



Product Information

Specifications

- **Product Name:** Atrial Flutter Ablation Procedure
- **Function:** Treat abnormal heart rhythm through ablation
- **Components:** Thin, flexible catheters, sensors, heat and/or cold energy

Product Usage Instructions

• Atrial Flutter Ablation Procedure Overview

Atrial flutter is an abnormal heart rhythm that can be treated with the ablation procedure. The procedure aims to stop, block, or disrupt the irregular electrical signals in the heart.

• How Ablation Works

During the procedure, catheters are inserted into a blood vessel and placed in the heart to record electrical activity. A 3D map of the heart is created to locate abnormal tissue, and ablation is used to create tiny scars to block irregular rhythms.

• After Procedure Care

After the procedure, rest in the recovery area for a few hours. Use ice or warm packs on the site, keep it clean and dry, and monitor for any signs of infection. Follow instructions for site care and consult your healthcare team for any concerns.

• Going Home Instructions

You may go home the same day or stay overnight. Follow heart-healthy diet recommendations and discharge instructions provided by your healthcare team. Have someone drive you home if discharged the same day.

FAQ (Frequently Asked Questions)

• Q: How long does the ablation procedure typically take?

A: The length of the procedure depends on the type of irregular rhythm being treated and its location. Your healthcare provider can provide more specific information based on your case.

• Q: What should I do if I experience increasing pain at the puncture site?

A: If you have any new or increasing pain at the site, it is important to inform your healthcare team immediately for proper evaluation and management.

Introduction

Atrial flutter is an abnormal heart rhythm or arrhythmia. This starts in the upper chambers of your heart (right and/or left atrium). When you have atrial flutter, the heart is not working as well as it should. This abnormal electrical signal can cause your heart to beat in a fast and consistent pattern. When the heart beats too fast, the heart chambers cannot fill with blood fast enough or empty blood into the bottom chambers. Atrial flutter can cause symptoms that can be treated with medicine and/or ablation.

Types of Atrial Flutter

There are different types of atrial flutter. Your provider may be able to tell you the type based on your EKG (if captured).

- **Typical (most common):** Abnormal electrical signals follow a counterclockwise pattern in your top right chamber.
- **Reverse typical:** Abnormal electrical signals move in a clockwise direction in your top right chamber.
- **Atypical (not common unless you've had surgery or ablations before):** Abnormal electrical signals can happen in the left and/or right top chamber.

Ablation

An ablation is a procedure used to try to treat an abnormal heart rhythm. An ablation can stop, block, or disrupt the electrical signal. This will reduce the chance the rhythm will happen again. The procedure length depends on the type of irregular rhythm being treated and where it is located.

How Ablation Works

During the procedure, one or more thin, flexible tubes (called catheters) will be inserted into a blood vessel and then placed in the heart. Sensors on the catheter record the heart's electrical activity. This can help locate the area of the flutter. You may be exposed to some Xray (fluoroscopy) during the procedure. With the catheter, a 3D picture or map of your heart is created. This shows areas of normal and abnormal tissue in the heart. Once the correct area is found, ablation will be used to treat the flutter.

Types of Ablation

Ablation uses heat and/or cold energy to create tiny scars in the heart to block the irregular rhythm. The types of ablation are :

- **Radiofrequency:** Heat/burning is used for the ablation.
- **Cryotherapy:** Cooling/freezing is used for the ablation.

For certain patients, freezing therapy may be safer than heat. In some cases, both ablation types may need to be used during your procedure.

After Your Procedure

You will rest in the recovery area for a few hours. Depending on your recovery, you may go home or stay at the hospital.

After your procedure, you may have:

- Soreness or tenderness at the sites that may last 1 week.
- Bruising at the site may take 2-3 weeks to go away.
- A small lump (dime to quarter size) at the site which may last up to 6 weeks.

Pain Control

- You may take a mild pain reliever such as acetaminophen (Tylenol®). Ask your care team if you can use ibuprofen (Motrin®) or other NSAID medicines as these can increase your risk of bleeding (especially if you are on a blood thinner).
- You may place an ice pack or warm pack over the site for 20 minutes every 2 hours. If the sites are wet from the pack, remove it, and gently wipe the area.

Care of the Puncture Site(s)

You must take care of your sites to prevent an infection. Keep the sites clean and dry for 24 hours. You may remove the dressing(s) and shower after 24 hours. Remove the dressing over the site before taking a shower. To care for the puncture site:

1. Gently clean the site for 3 days with soap and water. Pat dry and leave open to air.
2. Keep the site dry.
3. Inspect the site daily for redness, swelling, or drainage.

You may feel a small lump (dime to quarter size) under the skin. Most of the time, this goes away within 6 weeks. In some cases, it can persist if scar tissue forms. Please let your team know if you have any new or increasing pain at the site.

Activity

- Avoid strenuous activity. Do not lift anything over 10 pounds for 7 days.
- Do not soak in a bathtub, or hot tub or go into a swimming pool, lake, or river until the site is completely healed.
- After 7 days, you may resume normal activity.
- Do not drive for 24 hours, unless told otherwise.
- Do not make any important decisions until the next day.

Going Home

- You may go home the same day or stay in the hospital overnight. We will review discharge instructions with you.
- If you go home the same day, someone should drive you home and stay with you overnight.

Heart Healthy Diet

Include heart-healthy foods in your diet, such as vegetables, fruits, nuts, beans, lean meat, fish, and whole grains. Limit sodium, alcohol, and sugar.

Lifestyle Changes

- Do not smoke.

- Be active. Try for at least 30 minutes of activity on most days of the week. Talk to your provider about what type and level of exercise is safe for you.
- Maintain a healthy weight. Lose weight if you need to.
- Manage health problems such as high blood pressure, sleep apnea, high cholesterol, and diabetes.

Medicines

You will receive instructions about your medicines.. If you take or are prescribed a blood thinner, take this and do not skip any doses. Many patients will keep taking a blood thinner after the procedure.If you take Coumadin (warfarin), you will need to have a PT/INR level checked. You may need the dose adjusted. This will be done within 3-5 days of discharge.

Follow Up Visits

This will be arranged after your procedure. After the ablation, you may be asked to wear a heart monitor to look at your heart rhythm.

Return To Work

Talk to your clinician about when it is safe to return to work.

Get Emergency Help

When to Get Emergency Help

Call 911 or go to the nearest emergency room if you have:

- Trouble swallowing, or you are coughing up or vomiting blood.
- Severe swelling.
- New numbness, weakness, or coldness in your extremities (arms, hands, fingers, legs, feet, toes).
- Skin turning blue.
- Sudden bleeding or swelling at the puncture site(s). If this occurs, apply direct pressure. If the bleeding does not stop after 10 minutes of placing constant pressure on the site, call 911. Keep pressure on the site until help arrives.
- **Signs of stroke:**
 - Sudden face drooping, arm or leg numbness weakness, confusion.
 - Trouble seeing, trouble speaking, trouble walking, or severe headache.

When to Call

Call if you have:

- Chest pain or new back pain
- Increased shortness of breath
- Signs of infection around the puncture site, such as:
 - Redness
 - Warmth
 - Swelling
 - Drainage
- A fever over 101.5°F
- Trouble urinating
- A sudden increase in weight overnight (more than 3 pounds), or over a few days, as this could be a sign of fluid

retention

- Been prescribed a blood thinner and have questions or concerns about stopping this.


Who To Call

- UW Health Heart and Vascular Clinic Monday-Friday, 8:00 am to 4:30 pm [608-263-1530](tel:6082631530)
- The toll-free number is 1-[800-323-8942](tel:8003238942).

After hours, nights, weekends, and holidays this number will give you the paging operator. Ask for the Cardiology Fellow on call. Give your full name and phone number with the area code. A clinician will call you back.

Your healthcare team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your healthcare team when using this information. If you have an emergency, please call 911. Copyright © 8/2024. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#8359.

Documents / Resources

	<p>UWHealth Atrial Flutter Ablation Procedure [pdf] Instructions Atrial Flutter Ablation Procedure, Flutter Ablation Procedure, Ablation Procedure, Procedure</p>
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References

- [User Manual](#)

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