



Atrial Fibrillation Ablation: Discharge Instructions

1. In the first two days post-ablation you should take it easy. No heavy lifting or heavy exertion
2. Your groin will generally have two access site points. Some minor bruising is common at each site with minor soreness as if you had banged the area. Bruising may occasionally be seen to extend down the leg. This is normal as is an occasional small quarter sized bump in the area. If larger swelling or more significant pain occurs at the area, please contact the office
3. You may have some minor chest pain for the next week or so. The pain will often worsen with a deep breath or when leaning forward. This is pericardial chest pain from the ablation and is generally not of concern. It should resolve within a week although it might increase for a day or so after the ablation.
4. If you develop unexplained fevers exceeding 100 degrees anytime within the first 3 weeks post-ablation, you need to contact the office. Low grade fevers of around 99 degrees are common in the first day or so post-ablation.
5. You will need to be on Pradaxa, Xarelto or Eliquis for at least two months
6. You will be on an antiarrhythmic for at least three months.
7. All other medications will generally remain the same.
8. Atrial fibrillation can reoccur in all patients who undergo this ablation for up to 4 weeks post-ablation. The ablation itself can cause inflammation (pericarditis) in the atria and this can cause atrial fibrillation. Some patients will actually experience an increased density of atrial arrhythmia early after ablation. Approximately 1/3 of patients will have this early reoccurrence of atrial fibrillation. Medications should be continued and your heart rate controlled. Nothing else need be done initially except waiting as in many cases these episodes of atrial fibrillation will prove self limited.
10. In approximately 30% of patients, post-ablation arrhythmias do not resolve with waiting. In these patients, a repeat ablation could be considered after a period of waiting
11. Please be certain to make a follow-up appointment in 2-3 weeks. In subsequent follow up a monitor will be used to check for recurrent fibrillation.