Guide: Catheter Ablation FAQs

Ablation is a cardiac procedure that is performed to correct atrial fibrillation (AFib). This heart rhythm problem can have different causes and results in a rapid heartbeat. Left untreated, AFib can increase the risk of heart failure, stroke and other serious cardiac conditions.

A catheter ablation sends radiofrequency waves to a targeted part of your heart tissues. These waves produce heat to scar the part of your heart that is causing the abnormal electrical impulses. This guide provides guidance and answers to some of the most frequently asked questions about the procedure.

Pre-Procedural Questions

1. How do I choose a doctor for the procedure?

Your ablation should be performed by a specialist with both experience and expertise in the field. Look for a Cardiologist who is board certified in cardiovascular diseases and cardiac electrophysiology. A doctor with thousands of ablation surgeries and years of experience along with a singular devotion to effectively managing heart rhythm disorders ensures that they have the knowledge and skill level that is needed to successfully address your AFib.

2. What do I need to do to prepare for the catheter ablation?

Your medical team will tell you which medications you should take or avoid on the day of the surgery. Once you arrive, you'll have the opportunity to ask any additional questions.
3. Should someone accompany me the day of the procedure?

You will not be able to drive for at least 24 hours after the catheter ablation so you'll need someone to accompany you to the procedure.

Questions about Cardiac Ablation

1. What kind of anesthesia is used?

Ablation is a minimally-invasive cardiac procedure. In many cases, sedation is used. Some patients might be placed under general anesthesia, depending on their particular circumstances.

2. How long does the procedure take?

The typical catheter ablation takes about three to four hours. This time frame includes the time the medical staff needs to prepare you for the procedure as well as to remove the catheters afterward. It does not, however, include your recovery time. Plan for an additional four to six hours for recovery to ensure that bleeding isn't an issue and that your vital signs are stable.

3. What is fluoroscopy?

Fluoroscopy imaging is used by the cardiac physician to assist in guiding the catheter and visualize its placement in real time. Using fluoroscopy helps ensure accuracy and is considered standard best practice for catheter ablation because it uses less radiation than other techniques.
Questions After the Cardiac Ablation

1. How long will I be in the hospital?

Nearly all ablation procedures result in at least an overnight stay at the hospital.

2. Are there any restrictions on my behavior after the procedure?

You'll need to follow several restrictions on your activity including not pushing, lifting or pulling anything that weighs more than 10 pounds for at least three days. You also won't be able to drive for 24 hours following the procedure. Even though you may be cleared for exercise a few days afterward, you might tire more easily and quickly than before your ablation.

3. What can I expect as I recover?

Patients react differently to anesthesia so you might feel groggy for a few hours or even a few days afterward. Pain, bruising and discomfort at the catheter insertion site for a few days is common, as is mild to moderate chest pain and digestive irregularities such as acid reflux.

4. Will I still need to take my AFib medication?

After your ablation, you may still need to take your AFib medication. It's common for the resting heartbeat of patients to increase by as much as 20 beats each minute. Regulating your heartbeat is still vitally important as is preventing blood clots. At your follow-up visit, your medication needs will be addressed.

Call our office today to speak with a care coordinator: (941) 484-6758