

36TH CARDIOVASCULAR NURSING & NURSE PRACTITIONERS MEETING

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Cardioversion: Keys to a safe and successful cardioversion

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The objectives of the study is to understand cardioversion and difference between cardioversion and defibrillation, pre and post procedure safety checks, AHA guidelines for anticoagulation therapy, keys to safe and successful cardioversion and precautions to be considered for patients with devices. Cardioversion is a frequently performed procedure to terminate atrial arrhythmias commonly atrial fibrillation and atrial flutter, to relieve symptoms and improve cardiac performance. In simple terms, an electrical shock is delivered to patient's chest wall during cardioversion to restore the heart back to normal sinus rhythm. It involves the delivery of high energy shock through the chest wall muscles to the heart to interrupt abnormal electrical currents to restore it to normal sinus rhythm. Prior to performing this procedure, there are several safety checks undertaken in terms of anticoagulation. There is a 48 hours safety window for cardioversion without appropriate anticoagulation and the need for continuation of appropriate anticoagulation for 4-6 weeks after cardioversion. The AHA guidelines for a safe and successful cardioversion will be discussed in this presentation.

Biography

Rose P Bagh has been a Nurse and a Nurse Practitioner combined for over 25 years. She has lived and worked in three different countries for extended periods of time in her life. She currently work as an NP in the Cardiology Electrophysiology unit at the UT Southwestern Medical Center and Clements University Hospital in Dallas. She also work on a PRN basis in the ER department at Parkland Hospital in Dallas. Concurrently, she is a part-time student in the Doctor of Nursing Practice program at Texas Woman's University, Dallas

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