# **After Your Procedure**

# Your Hospital Stay

For the first 24 hours after the procedure you may be in a high-dependency unit for close observation. On the second day you could be moved to a regular room on the cardiac floor. Your health care providers will monitor your recovery and you may stay in the hospital for about 2-3 days or until your heart medicines and blood thinner are regulated. The health care providers will then prepare you for discharge home. (The drain in your chest will be removed prior to discharge.)

# **Post-Procedure Medications**

You will receive all medication instructions before you leave the hospital.

# Leaving the Hospital

For your safety, someone must drive you home from the hospital. During your ride home, either by car or plane, please stand up or stretch your legs a few minutes every hour. Plan to rest when you arrive home.

# At Home

# Wound Care

Keep the groin, neck and chest sites clean and dry. You may shower to ensure you keep any incision site clean, and then dry the area. Do not take a bath, swim, or soak in water for 2 weeks—until incisions are healed. No dressing or bandages are needed.

# Activity

For the first 6 weeks after the procedure, avoid any strenuous activity. That includes pushing, pulling, or lifting anything over 10 pounds. After that time, you can begin resuming your normal activities. It's best for you to walk 2-3 times a day when you are home. Please be aware that it may take you 2 weeks to resume all of your normal activities. In addition, do not drive a car while you are taking any pain medication.

# Heart Rhythm

You may notice skipped heartbeats, palpitations, or short episodes of atrial fibrillation during the first few months after the procedure. These symptoms are common due to inflammation (swelling) of the heart tissue. After your heart has healed, these abnormal heartbeats should subside.

# **Common Symptoms**

The most common symptoms in the first few days after the procedure are chest discomfort and fluid retention. These are not unexpected.

Chest discomfort is due to inflammation from your procedure. Check with your healthcare provider to find out if you should take medication for the discomfort.

Fluid retention may be caused by the IV fluids you received during your procedure. This can occur even though you received a diuretic drug and potassium, just after the procedure, to help your body remove excess fluid.

You should call your health care team if you experience any of the following symptoms of fluid retention:

- Swelling of feet, ankles, and abdomen
- Shortness of breath at rest or when lying flat
- Weight gain of more than 2 pounds in one day

You may not notice fluid retention until about 24 hours after your procedure. In addition, you may be given a prescription for medication to use at home if you develop fluid retention.



#### **Other Symptoms You Should Report**

It's possible that after the Hybrid AF Procedure you may notice the following symptoms:

- Shortness of breath that may be worse when you lie down
- Chest fullness or pressure
- Nausea
- Abdominal fullness
- Difficulty swallowing
- Persistent cough, especially coughing up blood
- Vomiting of blood
- Sudden swelling or pain in the groin are
- Increased pain, swelling or foul discharge from the abdominal surgical site
- Worsening chest pain

If you were to experience these symptoms, please contact your doctor or seek medical attention.

In addition to the above symptoms, please let your doctor know if you have:

- A low-grade temperature
- Redness, swelling, or drainage at the procedure site
- Any difficulty or pain when swallowing

#### **Follow-Up Testing**

After the procedure, your physicians will discuss the results of the procedure with you and will schedule follow-up appointments. Those appointments may include other diagnostic tests, for example an echocardiogram that takes moving images of your heart through your chest wall.

This material is intended to provide general information, including opinions and recommendations, contained herein for educational purposes only. Such information is not intended to be a substitute for professional medical advice, diagnosis or treatment. The material is not intended to direct clinical care in any specific circumstance. The judgment regarding a particular clinical procedure or treatment plan must be made by a qualified physician in light of the clinical data presented by the patient, the diagnostic and treatment options available. Please review the Instructions for use for a complete listing of indications, contraindications, warnings, precautions and potential adverse events prior to using these devices.

Individual results may vary. Please consult with your physician regarding your condition and appropriate medical treatment. The devices are used to form scars in the heart tissue. Possible problems during the procedure may result in the formation of unwanted scar tissue, damage to nerve and blood vessels, heart rhythm disorder, blood clots, pooling of fluid in the sca around the heart and tissue tearing or puncture

EU Indications: The EPi-Sense<sup>®</sup> Guided Coagulation System with VisiTrax<sup>®</sup> is intended for the coagulation of cardiac tissue using radiofrequency (RF) energy during cardiac surgery for the treatment of arrhythmias including Atrial Fibrillation (AFIB) or Atrial Flutter (AFL)

Contraindications include patients with Barrett's Esophagitis, left atrial thrombus, a systemic infection, active endocarditis, or a localized infection at the surgical site at the time of surgery. Reported adverse events associated with epicardial ablation procedure may include, but are not limited to, the following: pericardial effusion, excessive bleeding, Pericarditis, phrenic nerve injury, stroke/TIA/neurologic complication. Please review the Instructions for Use for a complete listing of contraindications, warnings, precautions and potential adverse events located at the following AtriCure web address: https://europe.atricure.com/healthcare-professionals/product-labeling

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