

Cardiology services

Having an electrophysiology study and ablation

Information for patients, relatives and carers

Contact details

Booking Team: **020 3313 1661** or email: ICHC-tr.cathlabs@nhs.net

Cardiac Day Ward: **020 3313 1663** or **020 3313 4034**

**Due to Covid 19, visiting restrictions remain in place to keep everyone safe. Please visit our website for more details <https://www.imperial.nhs.uk> > patients and visitors > visiting.

Pre-assessment Care Team: **0203 313 3412**

Transport booking team: **033 0678 1245** (Monday to Friday: 08.00–20.00, Saturday and Sunday: 10.00–13.00)

Above contacts are available Monday to Friday 09.00 – 17.00.

For out of hours, please contact NHS **111** for advice and health information.

What is an electrophysiology study (EPS)?

An electrophysiology study is a procedure that involves placing catheters at your heart muscle to study the electrical signals of your heart. An external heart simulator will be used to take over your heart electrical conduction temporarily to bring on any abnormal rhythm (such as fast heart rate) that you may have. This provides more detailed information the cardiologist needs about your existing heart condition.

An EPS and / or ablation procedure can take between 1 to 3 hours. You will be able to go home on the same day. In some complex cases, you may be needed to stay overnight in hospital for observation.

As part of NHS safety measures in response to Covid 19, there are restrictions in place when visiting our hospital. Please visit our website for more details <https://www.imperial.nhs.uk> > patients and visitors > visiting. Your friends/relatives can phone up the cardiac day ward to find out how you are doing and what time you will be discharged.

What is an ablation?

An ablation is a minimally invasive procedure performed to get rid of the extra electrical connection in your heart that causes your abnormal heart rhythm. It involves placing a special ablation catheter on

the abnormal heart tissue and works by tissue heating / or super cooling to inactivate or cordon off the affected area.

Why has an EPS and ablation been recommended for me?

You have had or are at greater risk of having fast heart rhythm. This procedure can be life-saving because it prevents fast heart rates from occurring.

In addition, this procedure can improve some arrhythmia symptoms such as fainting spells or palpitations and help you to enjoy a more active lifestyle.

Are there any alternatives to an EPS and ablation?

An EPS and/or ablation will only be requested by your doctor if they feel that this is the best way to find out more information and to treat your heart condition.

Other alternative is not to have the procedure and continue using medications to manage your heart condition and symptoms.

What are the risks and complications involved in having an EPS and / or ablation?

The risks involved in having any ablation procedure vary from patient to patient depending on your medical history. The cardiologist will discuss the risks in more detail with you on the day of your procedure and you will be asked to sign a consent form.

Complications may include:

- bleeding or bruising in the groin
- risk of affecting your heart's normal conduction which may lead to you needing to have a device fitted (i.e pacemaker)
- blood clots formation and possible stroke
- build-up of fluid around the heart

Making arrangements before having my EPS and / or ablation

Before your procedure, you will need to attend a nurse-led pre-assessment clinic as the next step in your care pathway. Currently, this pre-assessment service will be either a telephone or face to face appointment. For further enquiries, please contact the pre-assessment care team at 0203 313 3412.

It is important that you **arrange for a relative or a friend to take you home** after your procedure by car/taxi. You will not be able to drive or use public transport (on your own). **Your relative or friend will need to stay with you overnight or you may choose to stay with them for the night.**

If you do not have anyone to take you home or stay with you after your procedure, you **must** contact the booking team to **arrange a new date** or **pre-arrange an overnight hospital stay**. If you do not do this, we may have to cancel your procedure on the day.

If you are pregnant or think you may be pregnant, you must contact your cardiologist for appropriate advice about your treatment.

If you have had diarrhoea or vomiting, a cough, cold or skin infection with or without a fever during the 3 days before your procedure, please contact the booking team.

Plan your hospital journey beforehand. Wear a face mask (if possible) while travelling using public transport, hospital transport, a family car or a taxi. Please note that Hammersmith Hospital has a small number of general and disabled car parking spaces. Please visit our website for more details <https://www.imperial.nhs.uk> > our hospitals > hammersmith > parking.

What if I cannot keep my appointment?

If you cannot attend your appointment, please contact the booking team immediately. This allows us to agree a new appointment date and time with you and offer your original appointment to another patient. We will always aim to re-schedule your procedure appointment to the next available date.

If you are running late on the day of admission, please contact the cardiac day ward to notify them your estimated arrival time.

What happens if I need transport or an overnight stay?

In line with Department of Health guidelines, we provide a non-emergency transport service for patients whose clinical condition or mobility makes it very difficult for them to attend hospital without transport assistance. Please visit our website for more details <https://www.imperial.nhs.uk> > patients and visitors > help and support > patient transport.

Short stay studio flats are available for you and your visitors. We have purpose-built accommodation next to Hammersmith Hospital on Du Cane road. For further enquiries, please contact 020 3313 4873 or email imperial.accommodation@nhs.net for more information. Note that your relative or friend will need to stay with you overnight after your procedure.

How should I prepare for my EPS and / or ablation?

In response to Covid 19, we are taking every precaution to protect our patients and staff. We ask all patients and their carers to familiarise themselves with our new procedures for coming into hospital. Once you arrived at the hospital, please follow physical distancing rules (keep a two-metre distance from others), wear a face mask and practise good hand hygiene. Please visit our website for latest information on coronavirus infection prevention and control measures in place across our hospitals <https://www.imperial.nhs.uk> > patients and visitors > patients > coronavirus latest information.

Before coming to the hospital to attend your procedure, it is important to shower or bath. Please ensure any nail polish is removed and avoid applying heavy makeup. As monitoring equipment will be placed on your chest, it is advised not to apply moisturising skin lotion on your chest or on the procedure insertion site - groin. To minimise the risk of infection, you may prefer to shave or remove any hairs from the chest and groin areas (if possible) on your own. If not, this can be done for you on the day of the procedure.

Please only bring essential items and avoid wearing jewellery or other valuables. Bring a dressing gown, loose clothing, and comfortable footwear such as a pair of slippers for ease. As you may be in the hospital for around 4 to 6 hours, we suggest bringing something to read or listen to with a headset or earphones while you wait.

It is important that you do not eat and drink before your procedure to reduce the risk of food and drinks going into your lungs:

- **no food or milky/flavoured drinks for 6 hours** before your procedure.
- **only Plain (non-flavoured) Water** is allowed **until 2 hours** before your procedure.

For more details on how to prepare for your planned procedure, please visit our website <https://www.imperial.nhs.uk> >patients and visitors > patients > planned procedures and surgery.

Medication

The pre-assessment care team and your doctor will have advised and discussed with you about stopping any medications before your procedure. Please bring all your medications that you are currently taking with you when attending your procedure.

If you have any drug allergy, please ensure that you inform the team.

If you have asthma, please bring your inhaler medication with you.

If you are taking warfarin:

- if you have had a stroke, mechanical heart valve, pulmonary embolus (clot in the lung) or have chronic thromboembolic pulmonary hypertension, continue your warfarin and aim for an INR of around 2.5 for a week before your procedure. Your anticoagulation clinic will be able to assist you
- if you do not have any of above, please stop warfarin 2 days before your procedure unless otherwise advised by your cardiologist
- it is very important that you bring your yellow book of INR records with you

If you are taking rivaroxaban (Xarelto), apixaban (Eliquis), edoxaban (Lixiana) or dabigatran (Pradaxa):

- please stop taking the medication 1 day before your procedure unless otherwise advised by your cardiologist. *(For example, if your procedure is scheduled for Monday morning, the last dose of anticoagulation medication should be taken on the Sunday morning, leaving at least 24h duration free of the anticoagulant prior to the procedure. If you usually take your anticoagulation medication in the evening, then the last dose should be taken on the Saturday evening prior to the procedure).*

If you are taking clopidogrel, prasugrel or ticagrelor:

- if you have had a coronary artery stent within the last 6 months, please continue taking the tablets and inform the pre-assessment care team.
- if you haven't had a stent within the last 6 months, please stop taking the tablets 1 week before your procedure

If you are taking Aspirin

- please do not take on the morning of your procedure

If you are taking the following medications:

- anti-arrhythmics (e.g. flecainide, sotalol, dronedarone, propafenone, disopyramide)
- beta blockers (e.g. bisoprolol, atenolol, nebivolol, propranolol, nadolol)
- calcium channel blockers (e.g. diltiazem, verapamil)

Please stop these medications 5 days before your procedure. You should, however, continue taking digoxin and amiodarone.

If you are taking medications that are not listed above, please call pre-assessment care team for more advice.

What happens on the day of my appointment?

Please arrive at the hospital at the time stated in your admission letter. Note that this will not be the actual time of your procedure.

You will need to go to the cardiac day ward that is located beside the heart attack centre on the first floor of Block A, above the outpatients department. Please check in at the reception desk. Visit our website for our internal site map <https://www.imperial.nhs.uk> >our hospitals > hammersmith > hospital map.

A bed space will be allocated to you where blood samples will be taken, and your medical history discussed. The cardiologist will explain the risks and benefits of the procedure to you. Once you have understood these and agree to go ahead with the procedure, you will be asked to sign a consent form.

You will then change into a hospital gown and a member of staff will escort you to the procedure room. We will ask you to lie on the x-ray table and connect you to the monitoring equipment. We will clean your groin area with antiseptic fluid and cover it with a sterile sheet.

The procedure

You will be under local sedation (comfortably awake or lightly sleeping) during the procedure. In some cases, the ablation procedure can be performed under full general anaesthesia (completely asleep).

This will depend on several factors, including the nature of your fast heart rhythm episodes and will be discussed with you before your procedure.

The cardiologist will inject local anaesthetic, which may cause some stinging initially, to numb the area. This stinging sensation will only last for a short period of time. When the insertion site is numb, the cardiologist will proceed to place catheters into your heart with x-ray imaging.

Once the catheters are in the correct positions, electrical signals will be recorded and analysed. Different electrical stimulation protocols will be used to study your heart conduction system and to bring on any fast heart rhythm that you may have.

It is normal to feel some skipped heart beats or fast heart rate during the procedure. This sensation will stop when the electrical stimulation stops. After recording all the detailed information, the cardiologist needs about your existing condition, an ablation will be performed to treat the abnormal conduction of your heart. However, there can be circumstances where an ablation is not required. In such cases, the cardiologist will explain to you in details after your procedure.

Once the procedure is done, the cardiologist will remove all the catheters from the insertion site and the nurse will stop the bleeding by pressing down on a dressing covering the site for about 10 to 15 minutes.

You will be taken back to the recovery ward for observation. You will need to lie flat for at least 1 hour to prevent any bleeding from the groin. Afterwards, you will be asked to sit in a chair and/or mobilise (move around).

What happens after the procedure?

It is normal to feel some slight discomfort around your insertion site. You should keep an eye out for unusual pain, bleeding and abnormal discoloration. It is important to keep it clean and dry. If it becomes sore and swollen or there is excess discharge or oozing, please contact the cardiac day ward.

For out of hours, please go to your nearest urgent treatment centre: <https://www.imperial.nhs.uk> > our services > accident and emergency > urgent treatment centres.

You will not routinely require any new medications following your procedure. Any medications prescribed for you as a result of the procedure will be supplied by the hospital.

At home

You may be able to return to work after a week, however, it is advisable to avoid any strenuous exercise or activities.

Before you leave hospital, the doctor or nursing team will be able to provide information about showering/bathing and when you can return to work or get back to your normal routine.

Driving - when to notify the Driving and Vehicle Licensing Agency (DVLA)

For successful catheter ablation, the DVLA driving recommendations are:

Group 1 licences (car, motorcycle): You do not need to notify DVLA and must not drive for 2 days after your procedure. You can start driving again after 2 days if there is no disqualifying condition.

Group 2 licences (lorries, buses): You do not need to notify DVLA and must not drive for at least 2 weeks after the procedure. You can start driving again after 2 weeks if there is no disqualifying condition.

For further information, please visit the DVLA website <https://www.gov.uk/guidance/cardiovascular-disorders-assessing-fitness-to-drive>



Or scan

Is it safe to travel?

If there have been no complications, you will be able to travel 2 weeks after your procedure, however, please speak to your doctor before making travel arrangements and always ensure that you have adequate travel insurance.

Useful links:

British Heart Foundation - <https://www.bhf.org.uk/>

Heart Arrhythmia Alliance - <https://www.heartrhythmalliance.org>

How do I make a comment about my visit?

We aim to provide the best possible care and would like to hear about your experience of our services. By telling us about your experiences and raising any concerns you may have, it helps us to make improvements.

Please visit our website for more information <https://www.imperial.nhs.uk> > patients and visitors > help and support > your feedback.

If you have any general queries or would like to raise a concern, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) **020 3312 7777** (10.00 – 16.00, Monday to Friday). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

If, despite our best efforts, we are not able to resolve your concerns informally with the staff caring for you or via PALS, you have the choice to make a formal complaint.

To make a complaint please email our complaints office at: ICHC-tr.Complaints@nhs.net or send a letter addressed to:

Complaints department
Fourth floor
Salton House
St Mary's Hospital
Praed Street
London W2 1NY

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages.

Please email the communications team: imperial.communications@nhs.net

Wi-Fi

Wi-Fi is available at our Trust. For more information visit our website: <https://www.imperial.nhs.uk> > our locations > hammersmith > our facilities.

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Published: May 2022
Review date: May 2025
Reference no: 1342
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