

Cardiac Electrophysiological Study (EPS) and Catheter Ablation Precautions

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■ Before the Examination

- Fill out the examination consent form.
- Prepare the skin: Shave both inguinal areas.
- NPO (nothing by mouth).
- Change into surgical attire.
- Intravenous drip: Insert IV needles into both hands.
- Measurement of blood circulation in the lower limbs, marking dorsalis pedis artery's location and intensity.

■ During the Examination

- Local or general anesthesia may be performed based on different conditions and situations.
- Common puncture sites include the inguinal veins, both femoral and jugular.

- Electrode catheters are threaded through blood vessels, guided by X-ray to the heart's position, and connected to a monitor to display cardiac electrical signals for recording and analysis.
- The examination and treatment process takes approximately 3-4 hours, involving electrical stimulation and medication to induce and assess arrhythmias. Any discomfort such as chest pain, dizziness, or difficulty breathing should be promptly communicated to healthcare staff.

■ After the Examination

- If the catheter is inserted through the inguinal area, a sandbag or pressure bandage will be applied to control bleeding.
- Bed rest lying flat for 8 hours, with no bending of the inguinal area, sitting up, or getting out of bed until the end of the lying flat period.
- During the 8-hour rest, a bedpan or urinal should be used for urination, avoiding getting out of bed to

prevent bleeding. If unable to urinate, inform the nursing staff for assistance, avoiding forceful efforts. If necessary, a urinary catheter may be inserted.

- Once the 8-hour rest is completed, normal eating can resume, with caution to avoid choking.
- Healthcare personnel will regularly measure blood pressure, pulse, and observe the wound's condition.
- The following day, nursing staff will change the dressing, and for the next 3 days, the wound should not be wet.
- If any discomfort is noticed, notify healthcare staff immediately.

■ Discharge Care Instructions

- After discharge, return to the hospital promptly if experiencing chest pain, respiratory discomfort, palpitations, or dizziness.
- Typically, a follow-up appointment is scheduled one week after discharge, followed by regular follow-ups every 1-3 months.

- Avoid strenuous exercise or heavy lifting within 1-2 weeks after the ablation procedure to prevent complications related to bleeding if the procedure was uncomplicated.

The information provided is for reference only. Please discuss your clinical status with your physician.

If you have any questions, please contact :

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AA200.575.2023.12 初訂