

Hybrid AF™ Therapy: Post-Op Patient Instruction

After Your Procedure

Your Hospital Stay

For the first 24 hours after the procedure you will be in the Intensive Care Unit (ICU) for close observation. On the second day you will be moved to a regular room on the cardiac floor. You will stay in the hospital for about 2-3 days or until your heart medicines and blood thinner are regulated. The health care providers will monitor your recovery and 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. If you live more than 2 hours away or if you have flown to the hospital, you should stay in a hotel the first night after discharge. This is just for your comfort. 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

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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 area
- 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 Monitoring

You may receive a heart monitor, and your health care providers will have instructed you on its use. This monitor will be delivered to your home, and it will closely track your heart rhythm. You will send in weekly transmissions of your heart rhythm. You might also be asked to send a transmission if you are having symptoms such as palpitations or arrhythmias.

Follow-Up Testing

You should have a follow-up appointment with your surgeon 2-3 weeks after the procedure. You'll then have an appointment with your cardiologist 6-8 weeks after your procedure. Those appointments may include other diagnostic tests, for example an echocardiogram that takes moving images of your heart through your chest wall.

Finding Out Your Results

After the procedure, the doctor will discuss the results of the procedure with you and your family. The ultimate result of your procedure will be known several months later, when your doctor reviews your ongoing heart rhythm at scheduled office visits.

Epi-Sense Coagulation System/Epi-Sense ST™ Coagulation Device

Indications for Use: The system is intended to treat advanced atrial fibrillation (AF) defined as continuous AF that has lasted more than 12 months when accompanied by treatment with a catheter used during a hybrid procedure. Eligible patients should be either nonresponsive or intolerant of certain antiarrhythmic medications as well as the expected benefits of rhythm control outweigh the procedural risks. **Contraindications** This system is not intended to treat 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. **Risks:** Ask your doctor or Health Care Provider to review the known and possible risks associated with your treatment. Examples of possible risks include (but are not limited to) excessive bleeding, stroke, infection, and phrenic nerve injury. For more information about Hybrid Therapy, visit <https://www.hybridaftherapy.com/>

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