2 Cardiac Arrhythmias

Patient name: _____   **Admission:** _____

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I. The client/caregiver can define cardiac arrhythmia (dysrhythmia).

A. The heart has its own conduction system that produces the rate and rhythm of each heart beat.
B. When this conduction system is not working properly, the result is an abnormally slow or rapid heart rate that does not function in the usual manner.
C. Some arrhythmias do not need treatment, whereas other can quickly lead to life-threatening situations.

II. The client/caregiver can define normal cardiac rhythm.

A. A normal heart rate is between 60 and 100 beats per minute.
B. Each impulse or beat occurs in an even, regular rate.

III. The client/caregiver can discuss possible predisposing factors for arrhythmias.

A. Myocardial ischemia related to coronary artery disease
B. Congestive heart failure
C. Pain
D. Anxiety and stress
E. Endocrine disorders
F. Electrolyte imbalances
G. Valvular heart disease
H. Side effects of medications

IV. The client/caregiver can be knowledgeable of methods of treatment for dysrhythmias.

A. Drug therapy
B. Elective electrical cardioversion is used with non–life-threatening dysrhythmias. It is a nonemergency procedure done by a physician usually as an outpatient status.
C. Defibrillation. This treatment is used only in a life-threatening situation.
D. Automatic implanted cardiac defibrillator (AICD) is an internal electrical device used for clients with life-threatening dysrhythmias. This client has had previous episodes of cardiac arrest and survived but is still at risk for sudden cardiac death.
E. Pacemaker. They treat clients with abnormally slow heart rhythms and can be temporarily used or surgically implanted for permanent use. Permanent pacemakers function either on demand or at a fixed-rate pacer. The demand pacer will activate if pulse rate falls below a set rate per minute. The fixed-rate is preset when inserted to a specific rate (use the pacemaker teaching guide).

V. The client/caregiver can list educational topics and skills needed for post-hospital care.

A. Knowledge of how to monitor blood pressure and the rate and rhythm of pulse.
B. Awareness of how to secure emergency help. Call 911. Have telephone numbers of physician and brief history including medication available for first responders.
C. Have home emergency alert system for client who lives alone.
D. Be able to evaluate for symptoms of distress other than change in pulse rate:
   • Shortness of breath
   • Lightheadedness
   • Sweating
   • Chest pain
   • Palpitations
   • Skin becomes pale and cool
   • Disoriented or confused mental state
E. Ensure understanding and compliance of medication prescribed.
F. Understanding of need for follow-up care by physician and/or any appointments for testing.
G. Wear medical alert identification for disease and any use of pacemaker or AICD.

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H. Ensure understanding of any implanted pacemaker or AICD maintenance (use the pacemaker teaching guide).

VI. **The client/caregiver can list possible complications of dysrhythmias.**

A. Myocardial infarction.
B. Cardiac arrest leading to sudden death.

RESOURCES
National Heart, Lung, and Blood Institute (NHLBI)
www.nhlbi.nih.gov

Support groups such as Mended Hearts
www.mendedhearts.org

American Heart Association
www.americanheart.org

Advance directives (American Medical Association)
www.medem.com/index.cfm

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