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QUESTIONS FOR DOCTOR

Atrial Fibrillation, Stroke Risk and Treatment Options Discussion Guide

Use this list to help you prepare the questions you want to ask your doctor at your next appointment.

Atrial Fibrillation (AF) and Stroke Risk?

- What is atrial fibrillation?
- What's caused it in my case – why have I got it?
- Why does atrial fibrillation increase my risk of stroke?
- Given the risk of stroke, is there anything I should avoid doing, for example

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  (name activity you enjoy or are worried about such as sports, gardening, flying)

- What else can I do to protect my heart and reduce my risk of stroke?
- What kind of atrial fibrillation do I have? (paroxysmal, persistent, or permanent)
- What can I do to avoid triggering an episode of atrial fibrillation?
- What should I do when I have an episode of atrial fibrillation?
- What should I tell my family/partner about my condition?
- What should they watch out for in terms of stroke symptoms?
- Do I need to have any tests to find out more about my condition?
- Will I ever be free of atrial fibrillation and get my normal life back again?
- Is atrial fibrillation hereditary – might my children be at risk?

Drug Treatments

- What medication are you prescribing for my condition?
- How does it work and what are the possible side effects?
- How do these drugs impact the activities I can do?
- Will they stop the episodes of atrial fibrillation occurring?
- Can I ever come off the drugs completely?

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Other Treatments

- What are the alternatives to medication?
- Am I a good candidate for any non-drug treatments, such as:
  - Pulmonary vein isolation (PVI) with cardiac ablation?
  - Left atrial appendage closure?

Cardiac Ablation (If applicable)

- Where would I have the procedure done?
- How long would I need to wait before I can have the procedure?
- Would I need more tests beforehand?
- How would I need to prepare for the procedure?
- How does the ablation work to treat my atrial fibrillation?
- How long does the procedure take?
- How long would I need to be in hospital?
- Is the procedure painful?
- When would I be able to go back to work/normal activities?
- What are the risks and side effects?
- What is the success rate? Will my symptoms be completely gone?
- Does the procedure need to be repeated or does the result last for ever?
- Is there anything else I need to know about the procedure?
- I understand that pulsed field ablation (e.g. with FARAPULSETM) is a new form of cardiac ablation that may offer certain benefits over thermal ablation methods.
- Would I be eligible to receive PFA?

More Questions for Your Doctor

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Remember to take this guide with you when you see your doctor!

This material is for informational purposes only and not meant for medical diagnosis. This information does not constitute medical or legal advice, and Boston Scientific makes no representation regarding the medical benefits included in this information. Boston Scientific strongly recommends that you consult with your physician on all matters pertaining to your health.

Not all types of atrial fibrillation are suitable for treatment with cardiac ablation or with the FARAPULSE™ Pulsed Field Ablation System. Your doctor will be able to advise you if it could be a suitable treatment for you according to diagnostic and treatment guidelines. As with any medical procedure, there are risks involved with pulsed field ablation with the FARAPULSE™ PFA System. FARAPULSE™ Pulsed Field Ablation System.

The FARAPULSE Pulsed Field Ablation (PFA) System is intended for the isolation of the pulmonary veins in the treatment of paroxysmal atrial fibrillation by rendering targeted cardiac tissue electrically non-conductive to prevent cardiac arrhythmia initiation or maintenance. With all medical procedures there are risks associated with the use of the device. The risks include but are not limited to pain or discomfort, electric shock, hypotension, infection/inflammation, allergic reaction, anesthesia risk, radiation injury/tissue burn, heart failure, renal failure, respiratory distress, arrhythmia, nerve injury (such as phrenic nerve or vagal nerve), gastrointestinal disorders, vessel trauma, cardiac trauma (such as perforation), injury related to adjacent structures (esophageal injury, atrio-esophageal fistula, pulmonary injury), pulmonary vein stenosis, surgical and access complications, muscle spasm, injury due to blood clot or air bubbles in the lungs or other organs, heart attack, TIA, stroke, and/or damage to red blood cells. In rare cases, cardiac arrest or death may occur. Be sure to talk with your doctor so that you thoroughly understand all of the risks and benefits associated with the implantation and use of the device.

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