

## Management

### Primary Care

- diagnosis and immediate management of AF
- referral of patients for cardiac assessment
- managing and monitoring patients after cardiac assessment
- anticipating relevant drug interactions (e.g. warfarin and amiodarone)

### Specialist management

- cardioversion
- initiation of some drugs e.g. amiodarone, specialist anti-arrhythmics
- decisions on antiplatelet/anticoagulant medication (i.e. aspirin vs warfarin)

## When to refer

### Emergency [liaise with on-call specialist or refer to A&E]

- very symptomatic and in need of urgent rate control
- people with acute AF and severe hypotension, acute heart failure, or unstable angina, who do not respond promptly to medical management may require immediate cardioversion

### Urgent out-patient referral [refer direct, copy to CAS]

- patients with recent/acute-onset AF for assessment for conversion

### Refer to CAS

- if aetiology of AF unclear
- further assessment needed (e.g. suspected valvular disease or heart failure)
- syncopal attacks
- if echocardiography is required or cardiology opinion