

EP News: Triageing AF Patients for Optimal Care

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Atrial fibrillation (AF) is a major public health concern that affects millions of people worldwide. AF is associated with increasing health care costs and a higher risk of stroke with increasing comorbidities and age. Despite well-written guidelines for AF care, standardized management is lacking. Therein lies an opportunity to create AF centers of excellence (AF CoEs) with a patient-centered integrated focus and approach that can benefit patients and health care providers (physicians, nurse practitioners, physician assistants, nurses, pharmacists and technologists) alike.

One of the most promising opportunities for AF quality improvement lies in triaging patients with AF. As patients develop new-onset AF or are found to have AF with more insidious episodes associated with heart failure, appropriate triage can lead to decreased emergency department (ED) visits, avoided hospitalizations, and overall improvement in patient satisfaction.

AF events when symptomatic are usually associated with fear and anxiety, prompting often avoidable ED visits. Direct phone consultation with an experienced AF caregiver can allow for quick triage based on symptoms and vitals. Wearable technologies, implantable loop recorders, and remote patient monitoring provide an abundance of data that are readily accessible to the triaging provider without the need to leave their homes.

Integrating advanced practice practitioners (APPs) into the triaging process for patients with AF can help enhance access to electrophysiology (EP) expertise and relieve the burden on EP physicians. APPs are highly skilled and knowledgeable health care providers who can play a crucial role in managing patients with AF. Evidence demonstrates that patients seen by an APP had quicker access to EP consultations, catheter ablation, and better outcomes postablation (Robinson et al, *Heart Rhythm* 2022;3:639, PMID 36589916). Additional data highlighted the positive effects of a nurse practitioner–led clinic for patients with AF (Meyer et al, *J Am Assoc Nurse Pract* 2022;34:1139, PMID 36191325). The results showed that early access to EP expertise can prevent unnecessary ED visits and hospitalizations, emphasizing the significance of early identification and management, especially for those with new-onset AF.

Pathway development, practice standardization, and community education are essential parts of the process. Pathway develop-

ment and practice standardization ensure that patients receive the same high-quality care across all care settings. There are previously published ED pathways that have been evaluated and determined to be safe and effective for AF management in the ED (Gehi et al, *Circ Cardiovasc Qual Outcomes* 2018;11:e004129, PMID 29330141). Standardization of care for patients in primary care, perioperative areas, ED, and hospital floors allows for meaningful management and follow-up.

Adequate triage of patients with AF requires access and availability. Built-in clinic time for same-day appointments and for early follow-up after ED discharge or hospital discharge is essential. Early access to cardioversion is another critical part of AF management. For patients, a short time to diagnosis, management, and restoration of sinus rhythm leads to markedly improved quality of life and reduced fears of recurrent AF events.

Following acute AF management, these patients should be integrated into an established program for longitudinal care. This will require collaboration across the health care continuum. By working together, APPs and electrophysiologists can provide a coordinated and effective approach to AF management, ensuring patients receive the best care possible. APPs can provide patients with AF with the necessary education and support to manage their condition effectively. They can also play a crucial role in monitoring patients' AF progression and coordinating care with other health care providers to promote wellness and lifestyle modification.

Adequate triage of patients with AF requires a specialized team with dedicated resources. AF CoEs offer a patient-centered, integrated, and team-based approach to AF management. The Heart Rhythm Society white paper on AF CoEs published in 2020 (Piccini et al, *Heart Rhythm* 2020;17:1804, PMID 32387248) outlines 7 core principles for AF CoEs' design and implementation, including patient-centered care, cost-effectiveness, quality outcomes, integrated care, and a commitment to quality improvement.

In conclusion, adequate triage of patients with AF is essential for optimal management of this complex condition. The nurse practitioner–led clinic model, integrated with APPs and specialized nursing staff, offers a promising solution to address AF management challenges. Building in early access to EP expertise, a short time to diagnosis, management, and restoration of sinus rhythm can lead to markedly improved quality of life and reduced fears of recurrent AF events. By working together, health care providers can provide a coordinated and effective approach to AF management, ensuring patients receive the best care possible.

Funding Sources: The authors have no funding sources to disclose.

Disclosures: The authors have no conflicts of interest to disclose. **Address reprint requests and correspondence:** Ms Anne Marie Smith, Heart Rhythm Society, Washington, District of Columbia. E-mail address: amsmith@hrsonline.org.