



Newly Diagnosed or Suspected Atrial Fibrillation or Atrial Flutter

Baseline Patient Assessment

- Heart failure - Orthopnea, Edema, Paroxysmal Nocturnal Dyspnea
- Chest pain
- Poor perfusion - lightheadedness, hypotension
- Stroke Symptoms
- Exercise tolerance

Diagnostics

- ECG
- BMP, CBC, TSH

Atrial fibrillation/flutter confirmed on ECG

Disposition

ED

- New onset heart failure in association with rapid atrial fibrillation
- Chest pain or hypotension
- Resting rate greater than 120 BPM

Cardiology

- All patients with newly diagnosed atrial fibrillation

Electrophysiology

- Patients with atrial flutter
- Patients younger than age 65 with atrial fibrillation

Treatment

Rate Control

For atrial fibrillation with resting heart rate greater than 100 BPM or symptoms of dyspnea with exertion suggestive of rapid atrial fibrillation.

Anticoagulation

All patients without contraindications. In general, bridging therapy with LMWH not recommended.

Initial regimen

- Metoprolol Tartarate 25mg BID
- Metoprolol Succinate 25mg QD
- Diltiazem 24Hr 180 mg QD if contraindications to beta-blocker and normal EF

Initial regimen

- Direct oral anticoagulants (DOACs) Apixaban, Rivaroxaban, Dabigatran or Edoxaban
- Warfarin, particularly in the presence of renal dysfunction or if cost is an issue.