

# JBI RECOMMENDED PRACTICE

## **Atrial Fibrillation: Patient Education**

#### Search date

31/05/2025

#### **Publication date**

24/07/2025

#### **Equipment**

- Patient education materials (eg, educational pamphlets, booklets or multimedia educational resources)
- Self-management support tools (eg, self-monitoring diaries, mobile health applications on digital devices).

#### **Recommended Practice**

#### **Purpose**

Structured, tailored, and individualized education plays a critical role in improving health care outcomes
for patients with atrial fibrillation (AF). By focusing on key areas such as self-management, medication
adherence and lifestyle modification, education empowers patients to take an active role in their care,
enhances their understanding of the condition, and supports long-term disease management.

#### Special considerations

- Tailor educational materials and delivery methods to the patient's health literacy, needs, values and preferences.
- Involve bilingual health educators to support patients from culturally and linguistically diverse (CALD)
   communities. If bilingual educators are unavailable, use a qualified interpreter.
- Educational interventions alone may not be sufficient to ensure medication adherence and lifestyle changes. These efforts should be supplemented with additional strategies to support self-management.

#### **Procedure**

- 1. Provide ongoing patient education throughout all phases of AF management, particularly at the time of diagnosis, based on individual patient needs and aligned with clinical guidelines.
- 2. Perform a comprehensive patient assessment to understand care needs and develop individualized education plans.
- 3. Ensure healthcare providers delivering education have sufficient knowledge and experience in AF management. Involve multidisciplinary team members, when appropriate, to address various aspects of AF management.
- 4. Adopt a family-centered approach by involving family members and informal caregivers in education.
- 5. Deliver education through one-on-one consultations or group sessions that encourage peer support and integrate educational materials and self-management tools.
- 6. Focus on key areas during education, including prescribed treatments (why they are prescribed and how they work), recognizing symptoms, understanding modifiable risk factors for AF, engaging in selfmanagement activities, responding during an AF episode, and knowing when to seek medical assistance.
- 7. Include education on psychological support, cognitive behavioral therapy, or other interventions based on

the patient's psychosocial needs.

- 8. Provide education within a patient-centered and integrated management framework, or as part of cardiac or stroke rehabilitation programs.
- Evaluate the effectiveness of patient education during follow-up visits, identifying knowledge gaps and providing clarification as needed.

#### **Supporting Evidence Summaries**

• JBI-ES-2822-4-Atrial Fibrillation: Patient Education

#### **Archived Publications**

1. JBI-RP-5183-1 (Published at 27 March 2023)

### Occupational Health and Safety Considerations





Author(s) potential or perceived conflicts of interest are collected and managed in line with the International Committee of Medical Journal Editors (ICMJE) standards.

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For details on the method for development see Munn Z, Lockwood C, Moola S. The development and use of evidence summaries for point of care information systems: A streamlined rapid review approach. Worldviews Evid Based Nurs. 2015;12(3):131-8.

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