



Rx FOR SUCCESS

Atrioventricular Blocks (AV Blocks)

The heart has an electrical system through which impulses travel, causing the orderly contraction of heart muscle. There are uniquely different forms of heart blocks, with AV Blocks being different from the Bundle Branch Blocks discussed in *Rx for Success* on Bundle Branch Block. AV Blocks can be First Degree, Second Degree, or Third Degree depending on the level of severity of the conduction delay.

Delays in conduction through the heart may be congenital (as in congenital lupus) or acquired. Common causes of acquired AV block are coronary artery disease (CAD), medication toxicity, rheumatic heart disease, heart surgery, and aging of the conduction system. Also, extremely fit (athletic) hearts can show mild forms of block (first degree and Mobitz I), which are of little concern.

Heart blocks of all types are identified via an electrocardiogram (ECG). AV blocks are specifically identified via the measure of the P-R interval. The P-R interval is the time it takes for the electrical impulse to travel from the SA (sinoatrial) node where the impulse originates to the AV (atrioventricular) node. A normal P-R interval is 0.12 to 0.20 seconds.

Prolongation of the P-R interval of more than 0.20 seconds is called a First Degree AV Block. There are two types of Second Degree AV Blocks. In Mobitz Type I (also known as the Wenckebach Phenomenon), the P-R interval actually increases with each heart beat until one of the impulses completely fails to conduct to the ventricles. In Mobitz Type II, the P-R interval remains constant but with occasional missed/failed impulses.

Third Degree Heart Block occurs if all impulses from the AV node are blocked so that the atria and the ventricles beat independently of one another.

Stokes-Adams attack is a complication that may occur in Mobitz Type II Second Degree Heart Blocks and Third Degree Heart Blocks. It is syncope (fainting) due to a slow pulse in combination with the missed impulses. Pacemakers are often required when this combination exists.

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This material is intended for insurance informational purposes only and is not personal medical advice for clients. Rates and availability will vary based on the satisfaction of our underwriting criteria. Underwriting rules are subject to change at our discretion. This marketing material is subject to an expiration date, and use of this material must be discontinued as of the expiration date.

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Underwriting consideration absent other significant impairment

FIRST DEGREE AV BLOCK	
P-R interval 0.20 to 0.29 seconds	Non-rated
P-R interval 0.30 to 0.39 seconds	Table B * **
P-R interval 0.40 seconds and over	Table C * **
SECOND DEGREE AV BLOCK OF MOBITZ I (WENCKEBACH)	
Heart rate >40, no symptoms (dizziness, chest pain, syncope)	Non-rated
Heart rate <40 or symptomatic rate for cause only	Postpone for evaluation, then rate for cause only
Second Degree AV Block of Mobitz II and Third Degree AV block (complete heart block and AV dissociation)	Postpone for evaluation
MOBITZ II AND THIRD DEGREE AV BLOCK AFTER EVALUATION AND TREATMENT	
Resolved (as in medication toxicity)	Non-rated
Resolved after acute myocardial infarction (heart attack)	Rate for Coronary Artery Disease
Congenital heart block or treated with pacemaker	Rate under pacemaker schedule (See <i>Rx for Success</i> on Pacemaker)
Unresolved	Usually decline
History of cardiomyopathy, valve disease, congestive heart failure, congenital heart disease (other than congenital heart block) or complications	Decline
Stokes-Adams attacks, no pacemaker	Decline

* One table credit may be given if normal treadmill available or for two years of stability.

** If an evaluation has been done, rate for cause only.

To get an idea of how a client with Atrioventricular Blocks (AV Blocks) would be viewed in the underwriting process, use the Ask "Rx"pert Underwriter on the next page for an informal quote.

Ask "Rx"pert Underwriter (Ask Our Expert)

After reading the *Rx for Success* on AV Blocks, use this Ask "Rx"pert Underwriter for an informal quote.

Producer _____ Phone _____ Fax _____
 Client _____ Age/DOB _____ Sex _____

If your client is known to have a history of AV Blocks, please answer the following:

1. Please list date of diagnosis.

2. The AV Block has been diagnosed as:

- | | |
|---|---|
| <input type="checkbox"/> First Degree block, PR < .30 seconds | <input type="checkbox"/> Second Degree, Mobitz I |
| <input type="checkbox"/> First Degree block, PR .30-.39 seconds | <input type="checkbox"/> Second Degree, Mobitz II |
| <input type="checkbox"/> First Degree block, PR .40+ seconds | <input type="checkbox"/> Third Degree block |

3. Please note usual resting heart rate.

4. Have any of the following occurred (Check all that apply)?

- | | |
|---|---|
| <input type="checkbox"/> Pacemaker inserted | <input type="checkbox"/> Congestive heart failure |
| <input type="checkbox"/> Stokes-Adams attack | <input type="checkbox"/> Valvular heart disease |
| <input type="checkbox"/> History of cardiomyopathy | <input type="checkbox"/> Congenital heart disease |
| <input type="checkbox"/> History of coronary artery disease | |

5. Is your client on any medications?

- Yes. Please give details. _____
- No

6. Has your client smoked cigarettes in the last 12 months?

- Yes. Please give details. _____
- No

7. Does your client have any other major health problems (e.g., cancer, etc.)?

- Yes. Please give details. _____
- No