

### **Bundle Branch Block (BBB)**

The heart has an electrical system that conducts the impulses necessary for the orderly contraction of heart muscle. If the system is slow to conduct or does not conduct at all, a person is said to have a heart block. Bundle branch blocks (BBB) are one type of heart block and occur in less than 1% of the population. The right and left bundles are a group of conducting fibers that supply the electrical impulses to the ventricle (main pumping chamber of the heart) causing both the left and right ventricles to contract together. If a person has BBB, the right and left ventricles do not contract together and this abnormality will be visible on the electrocardiogram (ECG). There are many causes of BBB, but the most common one is coronary artery disease (50%). Other causes include cardiomyopathy, hypertension, tumors, fibrosis (scarring) of the conduction fibers, congenital lesions, trauma, and aortic stenosis. However, BBB can also occur in a heart that has no obvious abnormalities. There are several types of BBB as listed below. The rating depends on the type of BBB present, age when diagnosed, and stability of the condition.

If your client is known to have a bundle branch block (BBB) on their electrocardiogram (ECG), please answer the following:

1. Please check type of BBB present: _ CLBBB _ CRBBB _ LAHB or LPHB _ IRBBB _ Bifascicular block	
2. How long has this abnormality been present?	(years)
3. Has there been any recent change in the ECG?  If yes, please give details	

4. Please check if your client has had any of the following (check all that apply):

_ chest pain or coronary artery d	isease
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- \_ cardiomyopathy
- \_ high blood pressure
- \_ congenital heart disease
- \_ valvular heart disease

#### 5. Have any cardiac studies been completed?

- a. exercise treadmill or thallium: \_ no \_ yes \_ normal or \_abnormal
- b. resting or exercise echocardiogram:  $\_$  no  $\_$  yes  $\_$  normal or  $\_$  abnormal

c. other:

\_\_\_\_\_

#### 6. Is your client on any medications?

If yes, please give details

# 7. Has your client smoked cigarettes or any other form of tobacco in the last 5 years?

If yes give details?

## 8. Does your client have any other major health problems (exheart disease, etc.)?

If yes, please give details

