

Respiratory Exam Cheat Sheet by Siffi (Siffi) via cheatography.com/122609/cs/29793/

Observation

General obs: Shortness of breath, colour, dentition, wheeze, stridor, repiratory rate

Face: Horner's syndrome (pancoast tumour), cynanosis of the lips/tongue (central cyanosis), pursed lips (COPD), signs of anaemia (Glossitis of the tongue, pale conjunctiva, angular stomatitis at the corners of the mouth

Hands: Cyanosis, clubbing, signs of anaemia (spooning of the nails, pale palmar creases), nicotine stains

Chest: Scarring , barrel chest, caving chest, pigeon chest

Respiratory rate (RR): measures severity of breathlessness

- Measure movements of the chest
- Normal = 12-18 breaths per minute
- Can be raised due to breathlessness, COPD, infection, anxiety

Palpation

- Tracheal deviation/apex beat deviation for mediastinal shift
- Chest expansion
- Lymph node & Thyroid exam
- Percussion of the lungs along rib interspaces and clavicles
- Pneumothorax = hyperresonant sound,
- Pneumonia = solid areas
- Fluid = dull sound
- Auscultation

Horner's syndrome



- Disruption of the sympathetic nerves supplying the eye
- Ipsilateral Miosis (small pupil), Ptosis (drooping eyelid), Anhydrosis (No sweating), Enopthalmos (Sunken eyes)
- Apical lung tumour/infection

Anaemia



- Signs of anaemia
- Left to right: Spooning of the nails, Glossitis, Angular stomatitis

Cyanosis



- Cyanosis of the tongue and fingers

Clubbing



Clubbing of the fingers and test for clubbing

- The finger would not be able to do the test or have no diamond sign(Schamnroth's window)

Causes:

- Bronchial Cancer
- Chronic Suppurative lung disease such as:

Bronchiectasis

Empyema (abscess of the lung)

TB .

Cystic Fibrosis

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Chest Shapes



- 1 = Barrel chest COPD
- 2 = Pidgeon Chest/Pectus carinatum poorly controlled severe childhood asthma
- 3 = Accessory muscles of respiration COPD
- 4 = Pectus Excavatum = depression of the sternum

Percussion/Ascultation



- Where to tap or listen to the chest

Breath Sounds

- Vesicular Breathing: Normal breathing
- Inspiration longer than expiration
- No pause between inspiration/expiration
- Bronchial Breathing: Consolidation/collapsed/compressed lung (effusion)
- Inspiration equally long as expiration
- Pause between inspiration/expiration much harsher sounds
- Wheezes: Arises from the bronchi (usually expiratory)
- Long and uninterrupted
- Can be low/high pitched
- Caused by partial obstruction (Asthma, COPD, Tumour)
- Crackles: Arises from the alveoli/bronchi
- Discontinuous, bubbling
- Best heard at the start of inspiration (harsh/fine)
- Due to fluid/secretions (Pulmonary oedema/pneumonia (like a crisp packet being rustled)
- Stridor: Arise from the Larynx/trachea (usually inspiratory)
- Partial/large airway obstruction (tumour, swelling of mucosa)
- Friction Rub: Arise from the pleura
- Creaking/rubbing
- Unchanged by coughing
- Pleurisy (pneumonia/pulmonary embolism)



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