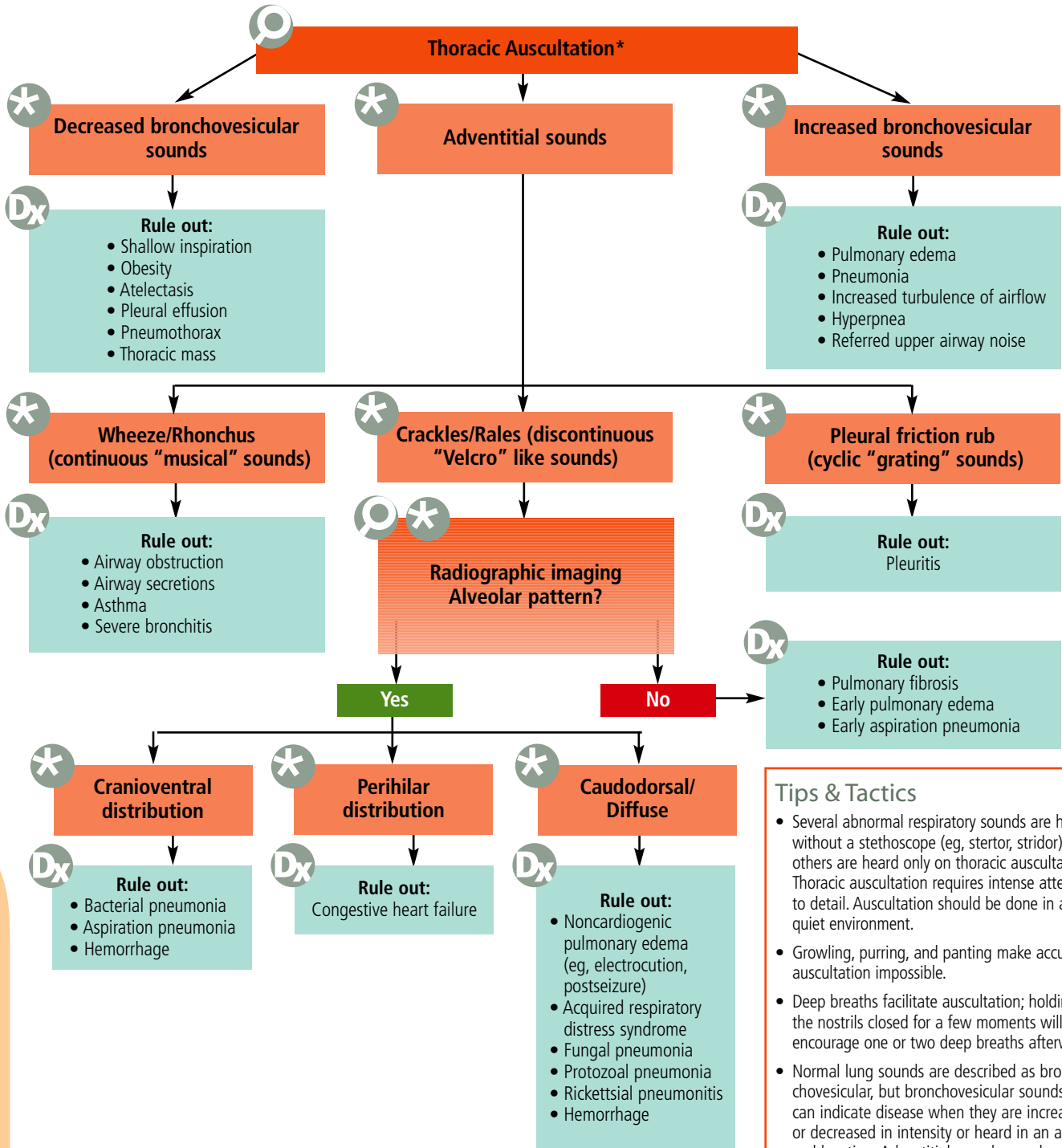


diagnostic tree

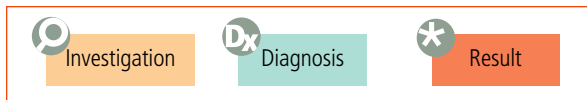
Abnormal Respiratory Sounds

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Abnormal Respiratory Sounds



*Abnormal sounds on auscultation can occur alone or in combination; they may also be heard throughout the thorax or only in some areas.



Tips & Tactics

- Several abnormal respiratory sounds are heard without a stethoscope (eg, stertor, stridor), but others are heard only on thoracic auscultation. Thoracic auscultation requires intense attention to detail. Auscultation should be done in a quiet environment.
- Growling, purring, and panting make accurate auscultation impossible.
- Deep breaths facilitate auscultation; holding the nostrils closed for a few moments will encourage one or two deep breaths afterward.
- Normal lung sounds are described as bronchovesicular, but bronchovesicular sounds can indicate disease when they are increased or decreased in intensity or heard in an abnormal location. Adventitial sounds are always abnormal.
- Adventitial sounds or altered bronchovesicular sounds can occur alone or in combination.
- Crackles are usually best heard on inspiration; inducing a cough may facilitate auscultation when the cough subsides.