

RS examination

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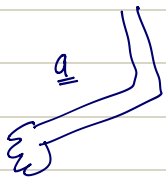
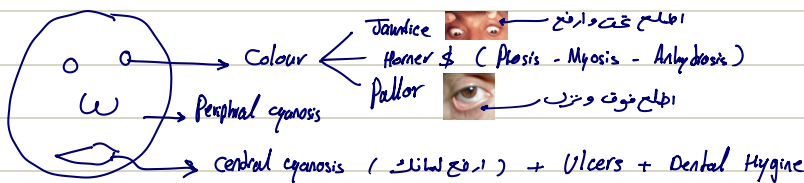
- 1- Introduce + explain + permission
- 2- chaperon
- 3- well led + warm + Private
- 4- Hand Hygiene + warm Hands + equipment + Right side to Patient + OO contact
- 5- Exposure + Position (Upright Umbilicus + semi sitting 45° Degree) ← RS

الزاحي
شواحات
طالب الفحص

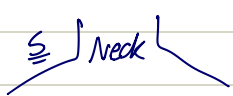
⇒ General RS

1. Alert + Conscious + Oriented to (Place + Time + Person)
2. NO Pain + NO Sign of RS distress (Tripod - Tachypnic - Pinched Lip)
3. Lines + O₂ devices (O₂ mask, Face mask, Cannula,)
4. NO abnormal sounds (Wheeze, Stridor)

Vital signs (BP, Pulse oximeter, HR, RR rate, Temperature, BMI)



Capillary refill (within 2 sec, 5s) → yellow Nail + Clubbing (4) → Tremor (Flapping, Fine)



NO Scars, masses, Dilated veins.

then JVP + lymph nodes

* اسم شيء اذا طلبوا A) كارتيم تنحب lateral و B) (التيه ارفع ايديك لو بيدك) لتبين انك بتفحص lateral / كلف لك 7

A chest

B chest

Inspection (foot of bed) :-

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1. Symmetrical Bilateral chest movement with breathing
2. Normal Pattern of breathing Abdo - thoraco
3. Normal shape A-P < lateral ⇒ elliptical
4. Deformities (Pectus carinatum - Pectus excavatum - Barrel chest)
5. Accessory Muscle Use (Trapezius, Pectoralis major, Serratus, Sternocleidomastoid, Intercostal)

1. Symmetrical Bilateral chest movement with breathing
2. Normal Pattern of breathing Abdo - thoraco
3. Normal shape A-P < lateral ⇒ oval - elliptical
4. Deformities (Scoliosis - Kyphosis - Barrel chest)
5. Accessory Muscle Use (Trapezius, Pectoralis major, Serratus, Sternocleidomastoid, Intercostal)

Inspection (Right side to Patient) :-

8 قس ال lateral

Inspection (Right side to Patient) :-

7. NO Scars, swelling, Superficial Nodules, Dilated veins, N Hair distribution

Palpation :- (Only superficial) + Right sided

Metastinum → Thorax ال ترتيب من ال

→ Upper mediastinum

- Tracheal deviation 
- Tracheal tug  (by inspection)
- Cricosternal distance 

التعليق ⇒ Trachea is centrally located / OR NO Deviation

التعليق ⇒ NO Tracheal tug

التعليق ⇒ Cricosternal distance is about 4-5 cm

→ Lower mediastinum

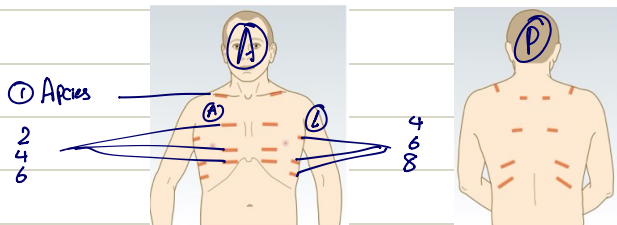
- Apex beat  → Angle of Louis → left 2nd Intercostal space → 5th Intercostal midClavicular
- gentle tapping ← جلات اصابع عتريتا
- التعليق ⇒ Gently tapping Apex beat on 5th Intercostal midClavicular line

heave NOT normal → Right ventricular heave  → left Parasternal + Palm مفتوحة وقت ال + اذا موجود قس بالني يمشي خلف

التعليق ⇒ NO Right ventricular heave

↓
Pulmonary HTN, Cor pulmonale → بتشوهها

Thorax



طبعاً بين يار (الزمن بالزمن)



التعليق ⇒ NO Superficial masses, NO subcutaneous emphysema, Tenderness

و ال لاه 8 قس ال lateral

→ TVF by 2 fingers + say 44 + 8 قس ال + 8 قس ال

التعليق ⇒ NO increased / decreased TVF - Symmetrical Bilateral TVF

→ Chest expansion in 2 places ① < blow the nipple
(وجه بين لحتي نوي (جوي 6م))

1 place ② 6-8th rib level

التعليق ⇒ symmetrical Bilateral chest expansion of about 5cm (2.5 for each)

Percussion → hyperextension for fingers + 2fab

التعليق ⇒ Bilateral symmetrical resonant percussion all over the chest

هم و انت تفحص خلفه يمين ايه (لفاف)

Auscultation →

↑ كبط الساعة على نفس امكانت الصورة

→ Breathing sound

كبطه على ما ابط الساعة فيه نفس من ثق

التعلیق → Bilateral symmetrical good air entry with Bilateral symmetrical Vesicular Breathing
No added sound (Wheeze, Crackles) + Inspiratory phase is longer than expiratory
(عديم تكلمها علامه على نفس عليها كالبط)

→ Vocal resonance

كبط ما ابط الساعة ابطه

التعلیق → symmetrical Bilateral vocal resonance

→ Whispering

كبط ما ابط الساعة ابطه

التعلیق → NO Whispering Pectoriloquy

→ Egophony

كبط ما ابط الساعة ابطه

→ in consolidation become A

التعلیق → NO egophony

بالا فين نكي ⇒ I would like to complete my exam by examination

- ① lower limb & sacral pitting edema
- ② The Abdomen for hepatosplenomegaly
- ③ The lower limb for sign of DVT

