Chronic Respiratory Conditions – Possible Signs

NB: signs are on side of lesion unless otherwise stated

**Pulmonary fibrosis**
- Oxygen therapy
- Dry cough
- Tachypnoea
- Reduced expansion
- Fine end-inspiratory crepitations

*Signs of aetiology:* hand deformity (RA), clubbing (idiopathic pulmonary fibrosis), sclerodactaly/teleangectasia/microstomia (systemic sclerosis), butterfly rash (SLE), lupus pernio (sarcoid), radiation burns, kyphosis (ankylosing spondylitis)

*Signs of complications:* cushingoid/bruising (steroid use), loud P2/RV heave (pulmonary hypertension)

**COPD**
- Bedside inhalers/nebulisers
- Accessory muscle use
- Nicotine stains
- Tachypnoea
- Lip pursing
- Reduced cricosternal distance (<3 fingers)
- Tracheal tug
- Indrawing of lower intercostal muscles on inspiration
- Hyper-resonance (with obliterated cardiac and hepatic dullness)
- Quite breath sounds/wheeze/prolonged expiratory phase

*Signs of complications:* cushingoid/bruising (steroid use), loud P2/RV heave (pulmonary hypertension)

**Pleural effusion**
- Reduced expansion
- Stony dull percussion note
- Reduced breath sounds
- Reduced tactile fremitus and vocal resonance

*Signs of aetiology:* hand deformity (RA), clubbing (mesothelioma/bronchogenic CA), butterfly rash (SLE), lymphadenopathy (malignancy), radiation marks, signs of chronic liver disease (cirrhosis), pulmonary/peripheral oedema (heart failure)

**Bronchiectasis**
- Productive cough
- Inspiratory clicks
- Clubbing
- Coarse, late expiratory crepitations

*Signs of aetiology:* young and thin (CF), curved yellow nails and lymphedema (yellow nail syndrome), lymphadenopathy (malignancy), dextrocardia (Kartagener’s syndrome)

**Kyphoscoliosis**
- Increased thoracic forward curvature or lateral curvature of the spine
- Reduced spine flexion/extension
- Rib hump
- Reduced chest expansion

**Lung cancer**
- Cachexia
- Clubbing
- Nicotine stains
- Hard irregular lymphadenopathy
- Radiation burns

*Signs of complications:* pain and swelling of wrists (Hypertrophic pulmonary arthropathy), ptosis/meiosis/anhidrosis (Horner’s syndrome)

**Lung transplant**
- Mid-sternotomy/thoracotomy scar

*Signs of aetiology:* signs of COPD, clubbing (CF/IPF)

*Signs of complications:* cushingoid/bruising (steroid use)

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### Examination findings in common respiratory conditions

<table>
<thead>
<tr>
<th></th>
<th>Pneumothorax</th>
<th>Pneumonia</th>
<th>Pleural effusion</th>
<th>Collapse</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Trachea displacement</strong></td>
<td>Away</td>
<td>None</td>
<td>Away (if large)</td>
<td>Towards collapse</td>
</tr>
<tr>
<td><strong>Expansion</strong></td>
<td></td>
<td></td>
<td></td>
<td>All reduced ipsilaterally</td>
</tr>
<tr>
<td><strong>Percussion resonance</strong></td>
<td>Increased</td>
<td>Decreased</td>
<td>&quot;Stony-dull&quot;</td>
<td>Decreased</td>
</tr>
<tr>
<td><strong>Breath sounds</strong></td>
<td>Reduced/absent</td>
<td>Bronchial breathing + coarse crepitations</td>
<td>Reduced/absent</td>
<td>Reduced/absent</td>
</tr>
</tbody>
</table>

- **Peripheral cyanosis**
- **Nail clubbing**
- **Tar staining**
- **Horner’s syndrome:** ptosis, miosis, anhidrosis
- **Pectus excavatum:** sunken chest. May be congenital or develop at puberty
- **Pectus carinatum:** protrusion of sternum. May be congenital, post-surgical or develop at puberty

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