

Thoracic Auscultation



Descriptive Term	Respiratory Acoustic Qualities	Causes	Timing
rales (crackles)	short, snapping, discontinuous sounds described as coarse or fine	chronic bronchitis, pulmonary edema, CHF	inspiration
wheezes (rhonchi)	high or low pitched, continuous musical or whistling noise	tracheal collapse, disease that cause bronchoconstriction (asthma, smoke inhalation)	more pronounced during expiration
stertor	“snoring” sound, low pitched, harsh discontinuous crackling sounds	brachycephalic breeds, upper airway diseases	inspiration & expiration
stridor	high pitched, squeaking or whistling	laryngeal or tracheal disease	inspiration
muffled	minimal to no sound, indistinguishable sound	pleural effusion	inspiration & expiration
bronchovesicular sounds	Increased air movement	normal during work, early pulmonary disease such as bronchitis	inspiration & expiration

Thoracic Percussion			
Acoustic characteristic	Air (trapped)	Air containing tissue	Solid tissue
Pitch	Low	Low	High
Intensity	Loud, clear	Moderate, clear	Soft, dull
Duration	Long	Long	Short

