

Lung Sound Assessments

Client Information:

Name:

Date of Birth:

Gender:

Address:

Phone Number:

Email Address:

Date of Consultation:

Assessment Details

Chief Complaint/Reason for Assessment:	
Medical History:	
Pre-existing respiratory conditions (if any):	
Relevant past medical history (e.g., pneumonia, chronic obstructive pulmonary disease, asthma):	
Current medications:	
Allergies:	
Smoking history (if applicable):	
Occupational exposure (if applicable):	
Recent respiratory infections or illnesses:	
Other relevant medical history:	

Assessment Findings

General Observations:	
Patient's overall appearance (e.g., consciousness, distress, cyanosis):	
Respiratory rate and pattern:	
Use of accessory muscles:	
Positioning (e.g., tripod position, orthopnea):	
Cough (productive or non-productive):	
Presence of respiratory distress or discomfort:	
Other notable observations:	

Lung Sounds

Auscultation sites:	
Anterior (include specific anatomical landmarks):	
Posterior (include specific anatomical landmarks):	
Additional sites (if applicable):	

Auscultation technique

Use of diaphragm or bell of the stethoscope:	
Instructing the patient to breathe through the mouth:	
Requesting the patient to take deep breaths and hold as needed:	
Note if lung sounds were assessed during inspiration, expiration, or both:	

Lung Sound Assessment

Vesicular breath sounds:	
Location:	
Characteristics:	
Bilateral symmetry:	
Additional notes (e.g., decreased, increased, or absent vesicular sounds):	

Bronchial breath sounds

Location:	
Characteristics:	
Bilateral symmetry:	

Additional notes (e.g., increased bronchial sounds, bronchophony, egophony):	
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Bronchovesicular breath sounds

Location:	
Characteristics:	
Bilateral symmetry:	
Additional notes (e.g., increased or decreased bronchovesicular sounds):	

Adventitious lung sounds

Crackles:	
Location:	
Timing (early inspiratory, late inspiratory, expiratory):	
Characteristics (fine, coarse, or both):	
Bilateral symmetry:	
Additional notes (e.g., crackles cleared with coughing or postural changes):	

Wheezes

Location:	
Timing (inspiratory, expiratory, or both):	

Characteristics (high-pitched, low-pitched, or both):	
Bilateral symmetry:	
Additional notes (e.g., wheezes heard only during forced expiration):	

Rhonchi

Location:	
Timing (inspiratory, expiratory, or both):	
Characteristics:	
Bilateral symmetry:	
Additional notes (e.g., cleared with coughing or suctioning):	

Pleural friction rub

Location:	
Timing (inspiratory, expiratory, or both):	
Characteristics:	
Bilateral symmetry:	
Additional notes (e.g., heard only in certain positions):	

Summary and Interpretation

Summary of lung sound assessment findings:
Impression/Interpretation (e.g., normal, abnormal, suggestive of specific pathology):
Differential diagnoses (if applicable):
Recommendations for further evaluation or management:

Healthcare Provider

Name:	
Credentials:	
Date and time of assessment:	
Signature:	