

Which of the following findings during chest auscultation would be considered abnormal and warrant further evaluation?

Answers: A - D

- A** Absence of adventitious sounds over the posterior chest
- B** Bronchovesicular breath sounds heard between the scapulae
- C** Bronchial breath sounds heard over the lateral lower lung fields
- D** Vesicular breath sounds heard over the lung periphery

Correct answer: C

Explanation:

- Normal breath sounds:
 - Vesicular over most peripheral lung fields (option D).
 - Bronchovesicular between the scapulae/posteriorly and around the sternum anteriorly (option B).
 - Absence of adventitious sounds (crackles, wheezes, rhonchi) is normal (option A).
- Abnormal:
 - Bronchial breath sounds should be heard only over the trachea/manubrium. Hearing bronchial sounds over the lateral lower lung fields suggests consolidation or atelectasis and warrants further evaluation (option C).

Which of the following best reflects appropriate clinical practice when conducting a comprehensive HEENT assessment and associated health history?

Answers: A - D

- A** Limit questions about tobacco and drug use unless the patient presents with throat pain or hoarseness
- B** Use the OLD CARTS mnemonic when the patient reports visual disturbances
- C** Perform the examination in a top-to-bottom sequence, using inspection, palpation, and auscultation as appropriate
- D** Begin by percussing the sinuses to assess for tenderness or fluid

Correct answer: C

Step-by-step reasoning:

- **A:** Incorrect. Tobacco, alcohol, and other substance use should be asked of all patients in a comprehensive HEENT history because they are major risk factors (e.g., oral/pharyngeal cancer), not only when throat symptoms are present.
- **B:** Reasonable practice—OLDCARTS is appropriate for symptom analysis—but it is narrow and applies only when a symptom (e.g., visual change) is reported.
- **C:** Correct. A comprehensive HEENT exam should proceed systematically from top to bottom (head to neck) using appropriate techniques—inspection first, then palpation, with percussion and auscultation as indicated (e.g., sinuses, thyroid, carotids).
- **D:** Incorrect. The exam should begin with inspection, not percussion; sinus percussion is done later and only if indicated.