تجميعة لكل الاعمراض
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cvs examination
دعواتكم ربي يصلح
الحال ويسهل علينا
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1. Infective Endocarditis (IE)

- Hands:

Splinter hemorrhages
Janeway lesions (painless macules on palms/soles)
Osler's nodes (painful nodules on fingertips)

Clubbing

- Skin: Petechial rash (may mimic meningococcal rash)
- Eyes: Roth's spots (retinal hemorrhage with pale center)
- Systemic: Fever, hematuria, proteinuria (urinalysis)
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2. Familial Hypercholesterolemia

- Hands: Tendon xanthomata (yellow nodules over extensor tendons)
- Face/Eyes: Xanthelasma (eyelids), corneal arcus
- Risk: Premature CAD, MI

3. Congenital Heart Disease

- Signs: Clubbing, cyanosis (esp. central cyanosis: lips, tongue)
- Associated syndromes: Marfan's (aortic dissection risk), Down's, Turner's
- Murmurs: Depending on defect (e.g., ASD → fixed splitting of S2, VSD → pansystolic murmur, PDA → continuous machinery murmur)

4. Aortic Stenosis (AS)

- Pulse: Slow-rising (anacrotic pulse)
- Thrill: Palpable at right upper sternal border
- Apex beat: Forceful, sustained (LV hypertrophy)
- Murmur: Harsh ejection systolic, radiates to carotids, ejection click
- S2: Loud or soft depending on severity
- Symptoms: Syncope, angina, dyspnea (classic triad)

5. Aortic Regurgitation (AR)

- Pulse: Collapsing (water hammer), wide pulse pressure
- Apex beat: Displaced, diffuse, hyperdynamic
- Murmur: Early diastolic, best at Erb's area, at end-expiration
- Extra: Austin Flint murmur (mid-diastolic rumble at apex due to regurgitant jet)

6. Mitral Stenosis (MS)

- Apex beat: Tapping character (palpable S1)
- Murmur: Mid-diastolic rumbling, loud S1 + opening snap
- Position: Best heard in left lateral decubitus
- Complication: Pulmonary hypertension, atrial fibrillation

7. Mitral Regurgitation (MR)

- Murmur: Pansystolic, blowing, radiates to axilla
- Extra sound: S3 due to volume overload
- Pulse: May be normal, often irregular if AF present
- Thrill: May be palpable at apex

8. Hypertension (HTN)

- BP: ≥140/90 mmHg on ≥2 occasions
- Eye: Hypertensive retinopathy (fundoscopy)
- Urine: Proteinuria
- Complications: LV hypertrophy, stroke, CKD
- Types:

Primary (95%) → idiopathic

Secondary (5%) → renal, endocrine, vascular causes

9. Heart Failure (HF)

- Hands/skin: Cold extremities, prolonged capillary refill
- JVP: Elevated
- Pulse: Pulsus alternans (alternating strong/weak beats)
- Heart sounds: S3 gallop rhythm (LV failure)
- Murmurs: Secondary due to valve regurgitation (MR, TR)

10. Cardiac Tamponade

- Pulse: Pulsus paradoxus (>10 mmHg fall in systolic BP with inspiration)
- JVP: Elevated, non-collapsing
- Heart sounds: Muffled
- Symptoms: Beck's triad (low BP, muffled HS, raised JVP)

11. Constrictive Pericarditis

- JVP: Elevated, with Kussmaul's sign (paradoxical rise with inspiration)
- Pulses: May show pulsus paradoxus
- Heart sounds: Pericardial knock possible

12. Atrial Fibrillation (AF)

- Pulse: Irregularly irregular
- Pulse deficit: Apical > radial pulse
- Complications: Stroke, heart failure, palpitations
- Cause of murmur: Can be secondary to mitral valve disease

13. Hypertrophic Cardiomyopathy (HOCM)

- Apex beat: Double impulse
- Murmur: Harsh systolic, increases with Valsalva, decreases with squatting (opposite to AS)
- Symptoms: Syncope, sudden death (esp. in athletes)

14. Postural Hypotension

- Definition: Drop in systolic BP >20 mmHg on standing
- Pulse: Reflex tachycardia
- Symptoms: Dizziness, syncope

15. Pulmonary Hypertension

- JVP: Elevated
- Heave: RV heave (palpable parasternal lift)
- Murmur: Loud P2, possible TR murmur

16. Patent Ductus Arteriosus (PDA)

- Murmur: Continuous "machinery" murmur, best at left upper sternal border, radiates to back/scapula
- Pulse: Collapsing, wide pulse pressure
- Complication: Eisenmenger's if untreated

17. Ventricular Septal Defect (VSD)

- Murmur: Harsh pansystolic murmur, best at lower left sternal edge
- Thrill: Often palpable
- Complication: Eisenmenger's (if large, long-standing)

18. Atrial Septal Defect (ASD)

- Heart sound: Fixed splitting of S2
- Murmur: Ejection systolic at pulmonary area (↑ flow)
- JVP: May be elevated if RV failure develops

19. Hyperthyroidism (as CVS cause)

- Pulse: Collapsing pulse (high-output state)
- Heart sounds: May cause tachyarrhythmias (AF common)
- Signs: Sweaty hands, tremor

20. Pericarditis

- Heart sound: Pericardial friction rub (scratching, triphasic)
- Symptoms: Chest pain, relieved by sitting forward
- Complication: Constrictive pericarditis, tamponade