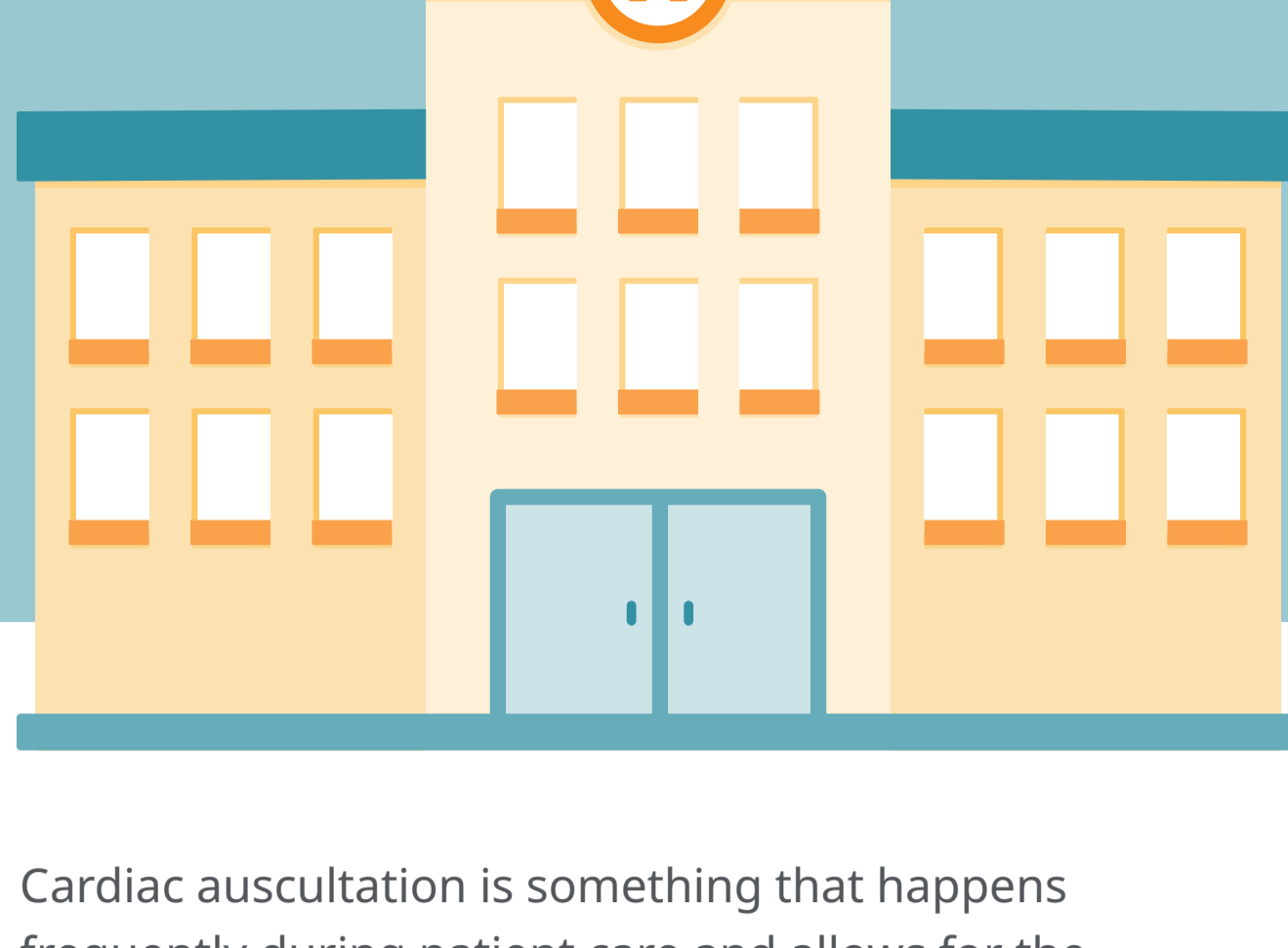


Auscultating Heart Sounds in Adults

✔ Are Your Nurses Checking all the Boxes?



Cardiac auscultation is something that happens frequently during patient care and allows for the identification of abnormal heart sounds that alert the clinician to the possibility of a cardiac abnormality.

Because of its regularity of occurrence and importance to providing exceptional patient care, this is a skill that all nurses should keep sharp.

Check out the *Dynamic Health*™ competency checklist below to see if your nurses are checking all the boxes when it comes to auscultating heart sounds in adults.



PRE-PROCEDURE STEPS

- 1. Review the facility/unit-specific protocol for cardiac auscultation, noting if there are unit-specific guidelines for how frequently the cardiac assessment should be conducted
- 2. Review the treating clinician's orders
- 3. Review the patient's medical history/medical record
- 4. Follow standard pre-procedure steps
- 5. Verify that the environment is quiet enough to properly hear heart sounds
- 6. Close the door, turn off the television, or silence nearby equipment, if necessary



PROCEDURE STEPS

- Assist the patient into a sitting, supine, or left lateral position. Verify that the patient should be sitting or lying quietly and breathing normally. More about patient positioning
- Auscultate heart sounds in a systematic fashion, beginning at the aortic landmark and moving across and down the chest through the pulmonic, tricuspid, and mitral areas
- Listen for S1 at each auscultation point
- Listen for S2 at each auscultation point. Note whether the sound splits during inspiration and appears as a single sound during expiration
- Assess the heart rhythm by auscultating the apical pulse
- Locate the point of maximal impulse (PMI) by palpating to the fifth intercostal space at the left midclavicular line and place the diaphragm of the stethoscope over this area
- Identify the "lub-dub" sounds of S1 and S2 and count each "lub-dub" as one beat
- Count the apical pulse for one minute
- Note whether the rhythm is regular or irregular
- Compare the apical and radial pulses if the heart rate is irregular
- Have a second nurse palpate the patient's radial pulse simultaneously while auscultating the apical pulse for a full minute
- Compare the beats per minute for each site to determine if the patient has a pulse deficit
- Listen for S3
- Listen for S4
- Listen for a murmur at each auscultation point
- Identify the area of the chest where the murmur is heard most clearly, if a murmur is present
- Discern whether the sound occurs during systole (after S1) or diastole (after S2) and if it is holosystolic or holodiastolic
- Note the sound quality of the murmur, such as whooshing, rumbling, blowing, machine-like, scratchy, or musical
- Palpate over the murmur to assess for a thrill
- Grade the intensity of the murmur according to Levine's system
- Take note of the characteristics of the murmur
- Listen for other abnormal sounds, including for clicks or friction rubs. Note the sound's quality, location, and timing
- Assist the patient into a comfortable position in a bed or chair



POST-PROCEDURE STEPS

- 1. Follow standard post-procedure steps
- 2. Clean and disinfect the stethoscope using a disinfectant pad
- 3. Notify the treating clinician of abnormal findings and/or significant changes from previous cardiac assessments so that the treatment plan can be established or modified
- 4. Reassess the patient according to facility protocol, usually once every nursing shift
- 5. Facilitate completion of an electrocardiogram or echocardiogram and/or request referral to a cardiologist for further evaluation, if a cardiac abnormality is suspected

Like what you saw?

There's more where this came from. *Dynamic Health*, an innovative new evidence-based tool, offers thousands of actionable clinical skills and accompanying competency checklists to help nurses and allied health professionals master critical skills. Users will find current, relevant, evidence-based information on core nursing competencies, transcultural care, patient training, occupational therapy, speech therapy, nutrition and dietetics, social work and so much more.

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