CATEGORY	EXAMPLES
Obstructive pathophysiology—airway disease	Asthma Chronic obstructive pulmonary disease (COPD) Bronchiectasis Bronchiolitis
Restrictive pathophysiology—parenchymal disease	Idiopathic pulmonary fibrosis (IPF) Asbestosis Desquamative interstitial pneumonitis (DIP) Sarcoidosis
Restrictive pathophysiology—neuromuscular weakness	Amyotrophic lateral sclerosis (ALS) Guillain-Barré syndrome Myasthenia gravis
Restrictive pathophysiology—chest wall/pleural disease	Kyphoscoliosis Ankylosing spondylitis Chronic pleural effusions
Pulmonary vascular disease	Pulmonary embolism Pulmonary arterial hypertension (PAH) Pulmonary venoocclusive disease Vasculitis
Malignancy	Bronchogenic carcinoma (non-small-cell and small-cell lung cancer) Metastatic disease
Infectious diseases	Pneumonia Bronchitis Tracheitis

Disorders can also be grouped according to gas exchange abnormalities, including hypoxemia, hypercarbia, or combined impairment; however, many respiratory disorders do not manifest as gas exchange abnormalities.

As with the evaluation of most patients, the approach to a patient with a respiratory system disorder begins with a thorough history and a focused physical examination. Many patients will subsequently undergo pulmonary function testing, chest imaging, blood and sputum analysis, a variety of serologic or microbiologic studies, and