

# Abdominal Pain

## History

- Age
- **SAMPLE** to include surgical history
- Medications
- Onset
- Palliation / Provocation
- Quality (crampy, constant, sharp, dull, etc.)
- Region / Radiation / Referred
- Severity (0-10)
- Time (duration / repetition)
- Fever
- Last meal eaten
- Last bowel movement / emesis
- Menstrual history (pregnancy)

## Signs and Symptoms

- Pain (location / migration)
- Tenderness (Palpate/Auscultate/ Percuss)
- Nausea/Vomiting
- Diarrhea
- Dysuria
- Constipation
- Vaginal bleeding / discharge
- Pregnancy

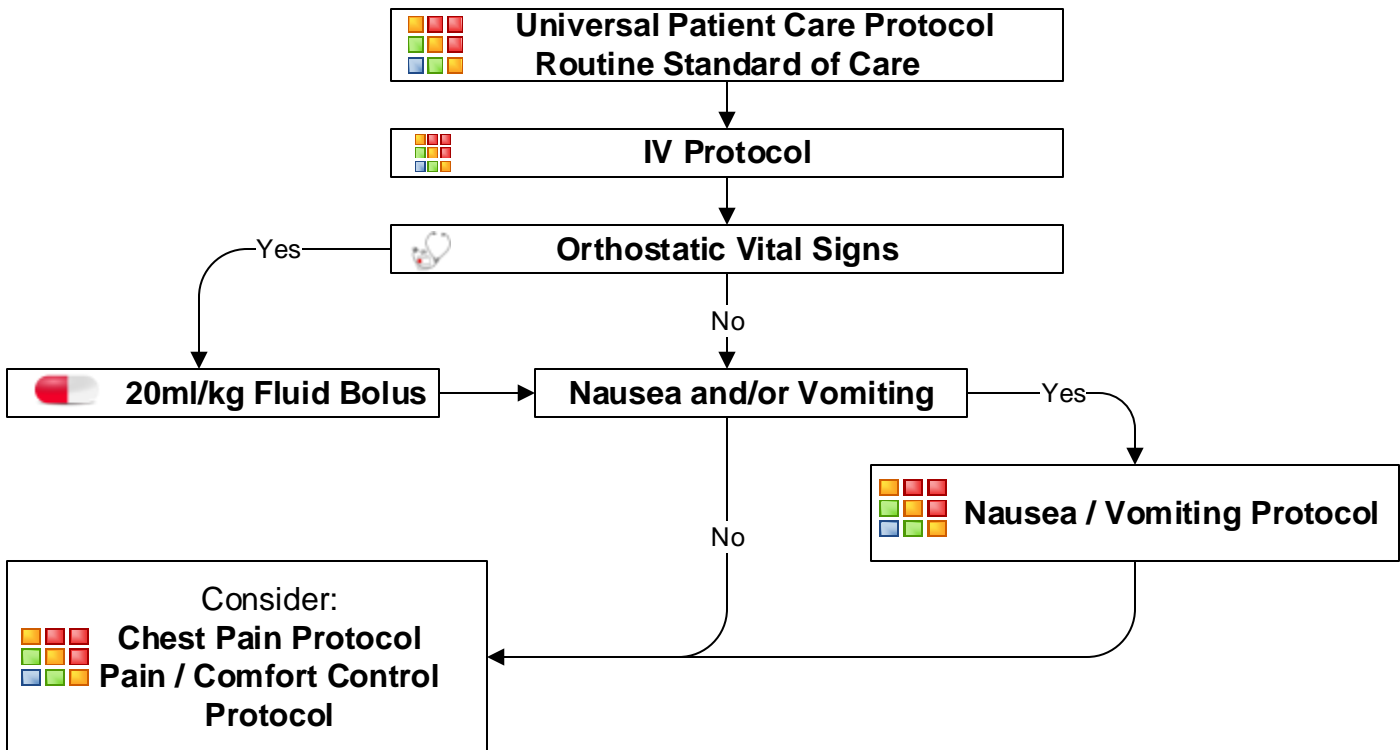
### Associated symptoms:

#### (Helpful to localize source)

Fever, headache, weakness, malaise, myalgias, cough, headache, mental status changes, rash

## Differential

- Pneumonia or Pulmonary embolus
- Liver (hepatitis, CHF)
- Peptic ulcer disease / Gastritis
- Gallbladder
- Myocardial infarction
- Pancreatitis
- Kidney stone
- Abdominal aneurysm
- Appendicitis
- Pelvic (PID, Ectopic pregnancy, Ovarian cyst)
- Spleen enlargement
- Bowel obstruction
- Gastroenteritis (infectious)



Medical Protocols

## Pearls

- Recommended Exam: Mental Status, Skin, HEENT, Neck, Heart, Lung, Abdomen, Back, Extremities, Neuro
- Document the mental status and vital signs prior to administration of anti-emetics
- Abdominal pain in women of childbearing age should be treated as an ectopic pregnancy until proven otherwise.
- **Flight Considerations:** NG tube placement and decreasing altitude is recommended for patients experiencing increasing abdominal girth, belching, or pain due to expanding gas
- The diagnosis of abdominal aneurysm should be considered with abdominal pain in patients over 50.
- The use of metoclopramide (Reglan) may worsen diarrhea and should be avoided in patients with this symptom.