

HISTORY

HPC

- Duration symptoms
- Speed of onset: Sudden / Gradual
- Pain location: see abdomen / pathology figure
- Pain referral: Shoulder / Back
- Pain nature: Constant / Colicky
- Bowel activity: BO / Passing flatus / Frequency
- Stool type: Hard stool / Diarrhoea / Mucus / Blood
- GU symptoms: Dysuria / Discharge / Swelling
- Nausea / Vomiting: Biliary / Haematemesis / Dyspepsia
- Fevers
- Respiratory: SOB / Productive cough

PMH

- IBD
- IBS
- GI Ulcers
- Renal calculi
- Gallstones
- Diverticular disease

DH

- Opioids
- Contraception
- NSAIDS / Steroids

SH / FH

- Smoking status: Non / Current / Ex
- Pregnancy risk: LMP
- Sexual history: GU symptoms / STI risk
- FH: Inflammatory bowel disease
- Alcohol history

EXAMINATION

GENERAL OBSERVATIONS

- Distressed / Pain
- Distended abdomen
- Patient Jaundiced

AIRWAY

- Ensure airway patent

BREATHING

- Physical Observation: FiO₂ / RR / SaO₂
- Auscultation: Wheeze / Crackles / Air entry / Silent Chest
- Percussion: Dull / Hyperresonance
- Sputum: Yellow-Green
- Haemoptysis

CIRCULATION

- Physical Observation: HR / BP
- Fluid input-output: Fluid balance
- CRT: Central / Peripheral
- Mucus membranes: Moist / Dry

DISABILITY

- Physical Observation: Temp
- GCS
- BM: Hyperglycaemic + ketotic

EXPOSURE

- Palpation: Pain / Guarding / Peritonitic / Rebound / Masses / Organomegaly / 'Fullness' / Pulsatile
 - see abdomen / pathology figure
- Hernia: Reducible / Tender / Erythema
- Auscultation bowel sounds: Present / Absent / Tinkling
- PR: Faecal impaction / Empty rectum / Malena
- Testicles: Swelling / Tenderness / Raised

INVESTIGATIONS

BLOODS

- FBC / U&E / CRP
- LFT / BONE / Amylase / Lipase
- Clotting / Group and Save
- +/- Serum ketones if raised CBG
- +/- beta HCG if suspected pregnancy

VBG

- pH
- Lactate
- Blood glucose

ECG

- Rate
- Rhythm: Arrhythmia
- Ischaemia: ST segment / T wave inversion / New LBBB

URINALYSIS

- Blood
- Leukocytes
- Nitrites
- Pregnancy

MICRO

- Blood Cultures: If Temp > 38°C
- Urine culture: If +ve urinalysis

ERECT CXR

- Basal consolidation
- Effusion
- Basal collapse
- Pneumoperitoneum

AXR

- Faecal loading
- Dilated bowel loops
- Volvulus
- Pneumoperitoneum / Rigler's sign
- Pneumobilia

CT ABDO/PELVIS

- Bowel obstruction
- Masses
- Appendicitis
- Colitis

DISCUSS WITH SENIOR

CT KUB

- Hydronephrosis
- Obstructing renal calculi
- Kidney / Ureter / Bladder mass

DISCUSS WITH SENIOR

TESTICULAR ULTRASOUND

- Testicular torsion

DISCUSS WITH SENIOR

CT ABDO ANGIOGRAM

- AAA

DISCUSS WITH SENIOR

POTENTIAL DIFFERENTIALS

BASAL PNEUMONIA

GI PATHOLOGY -SEE BELOW-

DKA

GU PATHOLOGY -SEE BELOW-

ECTOPIC PREGNANCY -SEE BELOW-

AAA DISSECTION -SEE BELOW-

LYMPHOMA

RIGHT HYPOCHONDRIUM

ACUTE CHOLECYSTITIS

CHOLANGITIS

LUNG PATHOLOGY

EPIGASTRIC

ACUTE PANCREATITIS

PEPTIC ULCER

GORD

LEFT HYPOCHONDRIUM

SPLEEN PATHOLOGY

RIGHT FLANK

RENAL CALCULI

PYELONEPHRITIS

UMBILICAL

APPENDICITIS (EARLY)

HERNIA

MECKELS

MESENTERIC ADENITIS

AAA DISSECTION

LEFT FLANK

RENAL CALCULI

PYELONEPHRITIS

APPENDICITIS

HERNIA

OVARIAN CYST

ECTOPIC PREGNANCY

RIGHT ILIAC

APPENDICITIS

IBD

HERNIAS

OVARIAN CYST

ECTOPIC PREGNANCY

HYPOGASTRIC

URINARY RETENTION

TESTICULAR TORSION

UTI

LEFT ILIAC

DIVERTICULITIS

IBD

HERNIAS

OVARIAN CYST

ECTOPIC PREGNANCY