Abdominal pain is considered to be the foremost reason for the rush of patients in emergency department, and it covers a range of 5 to 10% of the total admits in ED departments. It is the diagnostic challenge for emergency physicians because it's causes vary ,ranging from benign to life threatening. The common causes include gastro-intestinal, gynecological issues and so on. Despite detailed review, one fourth of patients were usually left with a non-specific cause, but with recent x - ray imaging breakthroughs, that number has significantly reduced. [3] The older individuals have anomalous briefings, with pain lasting longer at the time of diagnosis. Related features such as vomiting, tachycardia etc were the diagnostic, whereas other features were not.

It is critical for emergency physicians to know and understand how to recommended a person with a "acute abdomen" who require emergency reconstructive surgery. The 4 cornerstone C's of ED care for an acute abdomen should be

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1. Caution
2. Consultation
3. Careful Investigation
4. Close Observation

