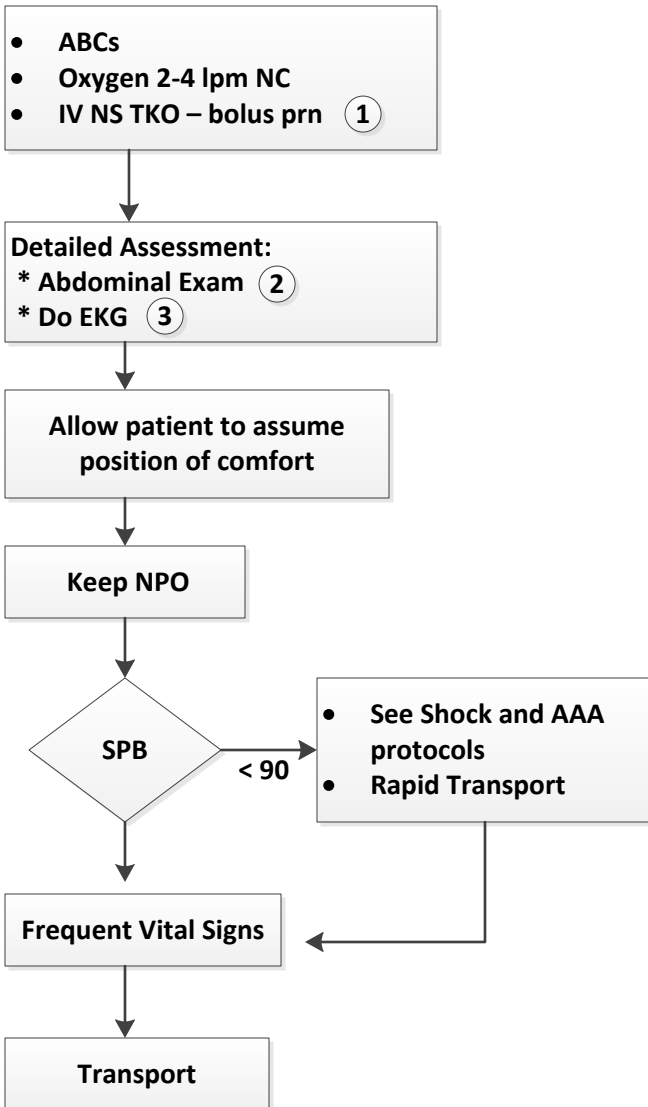


Abdominal Pain: not related to pregnancy or trauma



Abdominal Pain Differential

Right Upper Quadrant Pain:

1. Cholecystitis
2. Cholelithiasis
3. Hepatitis
4. Liver abscess or Tumor

Epigastric Pain:

1. Gastric or duodenal ulcer (perforated or not)
2. Pancreatitis
3. Aortic aneurysm
4. Myocardial Infarction

Left Upper Quadrant Pain:

1. Splenic infarct
2. Ruptured spleen
3. Pancreatitis

Flank Pain:

1. Pyelonephritis
2. Ureterolithiasis
3. Retrocecal appendicitis
4. Retroperitoneal bleeding

Lower Abdominal Pain:

1. Aortic Aneurysm
2. Appendicitis
3. Diverticulitis
4. Disease of female reproductive organs
5. Perforation of bowel (fecal peritonitis)

Crampy, variably located pain:

1. Gastroenteritis
2. Intestinal obstruction
3. Inflammatory bowel disease
4. Ischemic colitis and visceral angina

Diffuse, steady pain:

1. Peritonitis
2. Nonsurgical causes of abdominal pain

1. Consider pain medications and anti-emetics.
2. Abdominal Exam: Note pain (nature, duration, intensity on scale of 1-10), radiation. Auscultate bowels tones. Observe for pulsatile abdominal mass, always palpate with care. Check for rebound tenderness, distention. History : previous episodes, last meal current medications, last menstrual period, possibility of pregnancy.
3. Be aware that ischemic cardiac pain can present as abdominal pain especially in older patients.