

Acute Non-Traumatic Abdominal Pain

Could Die in the ED

1. Ruptured Abdominal Aortic Aneurysm
2. Ruptured Ectopic Pregnancy
3. Myocardial Infarction

Other Surgical Emergencies

1. Acute appendicitis
2. Mesenteric Ischemia
3. Cholecystitis
4. Ruptured Peptic Ulcer
5. Small Bowel Obstruction
6. Intraabdominal Abscess
7. Diverticulitis
8. Ovarian torsion
9. Testicular torsion
10. Incarcerated or strangulated hernia
11. Perforated viscus
12. Psoas abscess

Other Causes of Abdominal Pain

That frequently require hospitalization

1. Pancreatitis
2. Spontaneous bacterial peritonitis
3. Pneumonia
4. Abdominal aortic dissection
5. Diabetic Ketoacidosis
6. Inflammatory bowel disease flare-up
7. Tubo-ovarian abscess
8. Pelvic inflammatory disease
9. Renal abscess
10. Pyelonephritis
11. Mesenteric vein thrombosis
12. Splenic infarction
13. Hepatic Abscess
14. Sickle cell disease crisis
15. Ascending cholangitis
16. Metastatic disease
17. Retroperitoneal bleed
18. Ischemic colitis
19. Adrenal Crisis
20. Vasculitis (Henoch-Shonlein Purpura)
21. Gastroparesis
22. Intussusception

Other Causes of Abdominal Pain

that frequently do not require hospitalization

1. urolithiasis
2. constipation
3. viral gastroenteritis
4. gastroesophageal reflux disease
5. Round ligament pain
6. Hepatitis
7. Dehydration

8. UTI

9. Urinary retention

Evaluation

1. CBC with differential
2. Electrolytes
3. Serum glucose
4. Renal functions
5. Liver enzymes
6. Urinalysis
7. Pregnancy test
8. INR
9. CT abdomen – ureteral stone protocol
10. CT abdomen – appendicitis protocol
11. CT abdomen – vascular protocol
12. US abdomen – cholecystitis
13. Trans-vaginal ultrasound
14. Amylase
15. Lipase
16. Lactic Acid
17. FAST examination
18. Arterial or Venous blood gas
19. Chest x-ray
20. KUB and upright abdominal films
21. Testicular Ultrasound

Warning Signs of Severe Disease

1. Elderly
2. Syncope or near syncope
3. Fever
4. Diaphoresis
5. Steroids
6. DM
7. Peritoneal inflammation signs

Summary Points

1. CT is your friend
2. Evaluations are extensive
3. Consider extra-abdominal causes
4. 43% of elderly have real disease
5. Assume the patient is pregnant
6. Consider AAA if > 50 years
7. Mesenteric ischemia if heart disease
8. Steroids & antibiotics mask pain
9. “Classic” appendicitis is infrequent
10. Don’t discharge with pain & tenderness
11. Control symptoms during work-up
12. Beware of “constipation” as a diagnosis
13. Beware of “AGE” as a diagnosis
14. IVF frequently help abdominal pain
15. Beware of renal colic in the elderly
16. Abdominal pain – uncertain cause, non-surgical abdomen is the most common diagnosis