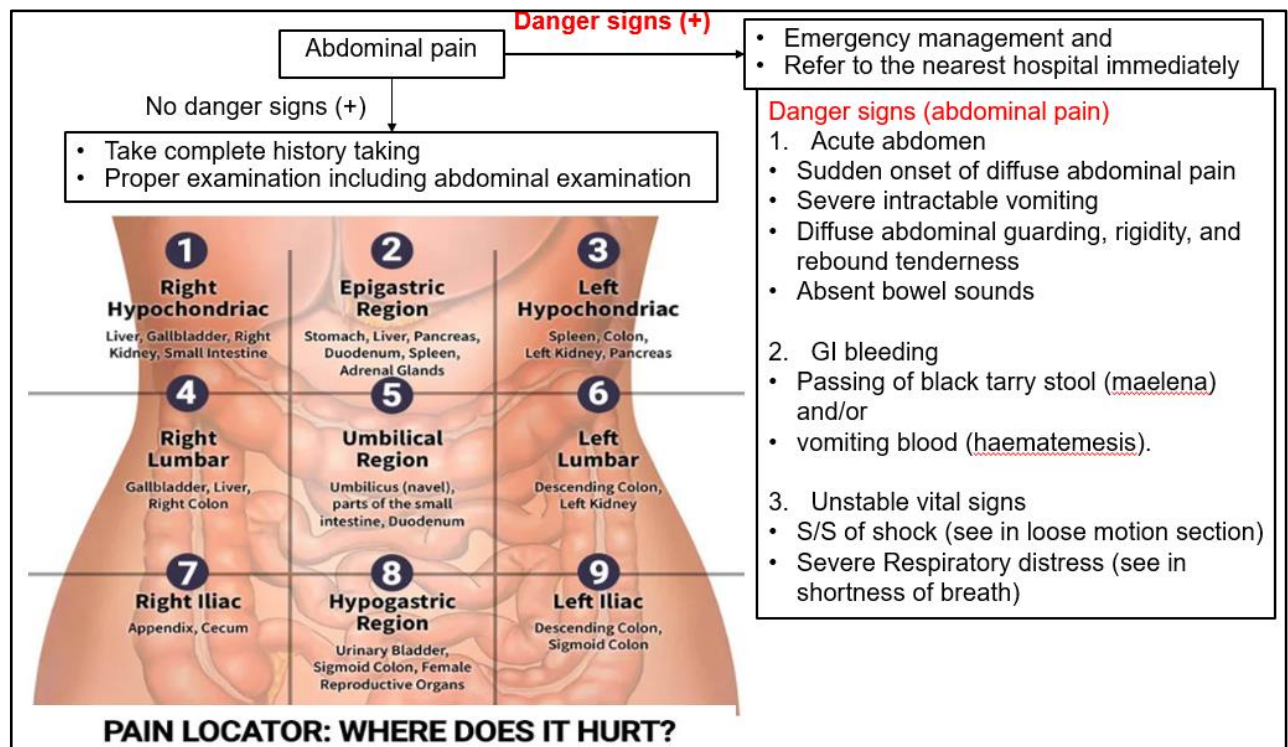


Management of abdominal pain



History taking in abdominal pain

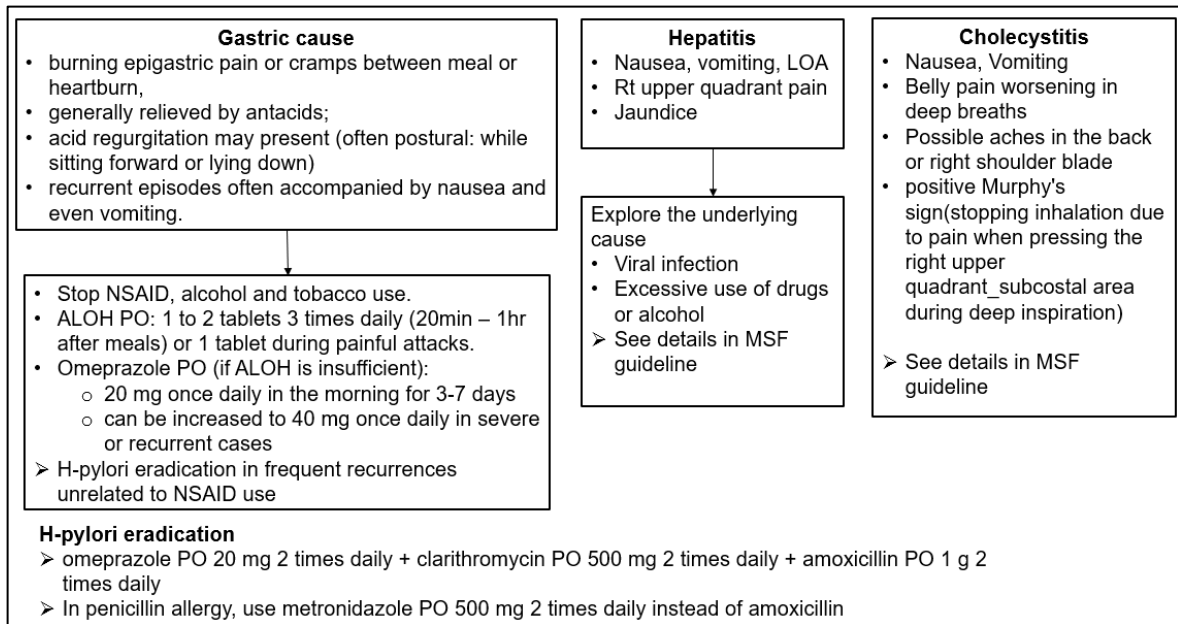
- Location, Timing: Is the pain continuous or intermittent? Severity: Rate on a 1–10 scale
- Onset:
 - Sudden onset (seconds) suggests perforation, rupture, or embolism.
 - Rapid onset (minutes) suggests inflammation (e.g., cholecystitis, appendicitis).
- Character: Sharp/stabbing (peritoneal irritation), crampy/colicky (obstruction), or burning (GERD, peptic ulcer).
- Radiation: Back (pancreatitis), shoulder (diaphragmatic irritation), groin (renal stone).

- Associated Symptoms: Nausea, vomiting (before or after pain?), diarrhea, constipation (obstruction), fever (infection), hematuria, and vaginal bleeding.
- Exacerbating Factors: Does food (e.g., cholecystitis, gastritis), movement, or changing positions help?
- Previous Similar Pain, Past Surgical/Medical History:
- Medication History: Recent NSAID use (ulcers), antibiotics (C. difficile), or blood thinners.
- Gynecological/Sexual History: Last menstrual period (r/o ectopic pregnancy) and risk for Pelvic Inflammatory Disease (PID).
- Social History: Alcohol usage (pancreatitis, liver disease) and smoking.

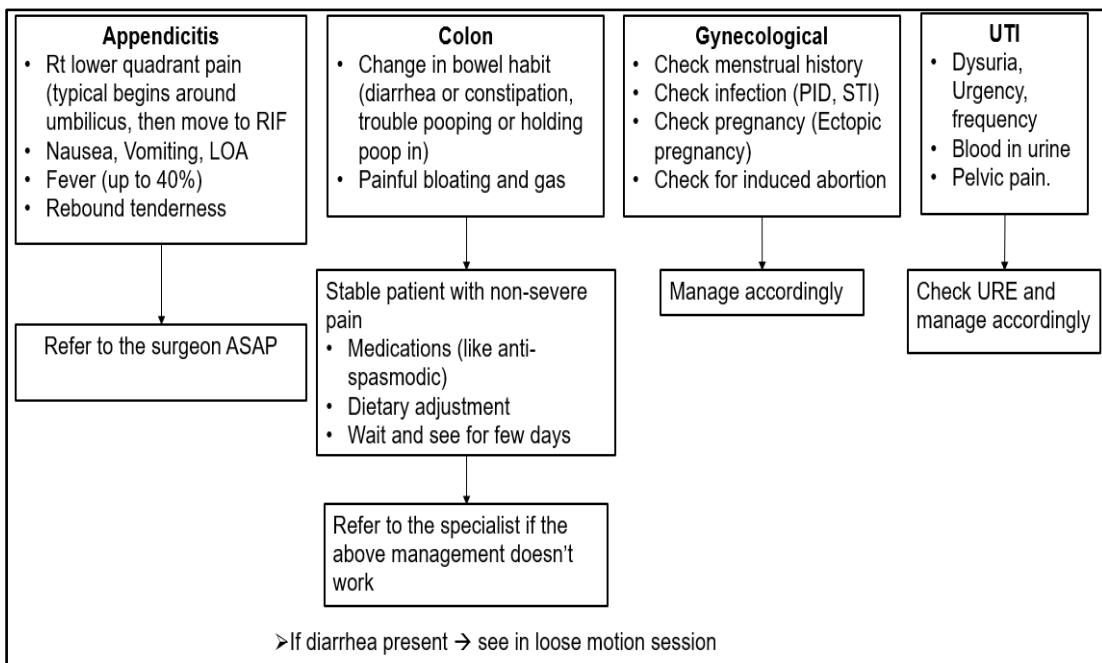
Abdominal examination

Inspection:	Look for abdominal distension, scars (surgical), rashes, lesions, striae (stretch marks), visible pulsations, or abnormal shapes.
Auscultation:	To be performed before palpation: Listen for bowel sounds (gurgling)
Palpation:	• Light: Gently examine all four quadrants for tenderness, guarding, or superficial masses. • Deep: identify organomegaly (liver, spleen, kidneys) or deep masses. • Rebound Tenderness: Press deeply and release suddenly to detect peritoneal irritation.
Percussion:	to detect ascites (Shifting Dullness) and to assess organ size
Special Tests:	Murphy's Sign to assess for acute cholecystitis (gallbladder inflammation).

Management of upper abdominal pain



Lower abdominal pain



Management of Renal Colic

- Pain occurs when a stone blocks the urinary tract.
- Intense flank pain on the affected side between lower ribs and hip.
- can radiate to the back, groin or lower belly (abdomen).
- may have a dull pain that doesn't stop or sharp pain off and on.
- can come in waves (can last for 20 - 60 mins, can be longer in severe cases)
- Other associated symptoms
 - Dysuria, Hematuria, Crystals in urine
 - Cloudy urine, Stinky pee (a strong, foul, or fishy odor)
 - Change in urine output, Fever, Chills



- Consider UTI (check URE)
- Provide analgesics
- Ask for KUB XR if you suspect renal or urinary stone
- Drink more water and cut soda.
- Reduce the salt and limit animal protein
- Reduce the intake of high oxalate foods, like nuts and spinach.
- Don't restrict calcium in your diet.