

Abdominal pain

If any of the following RED FLAG presentations:

- Patient > 55 with abdominal / back pain ?AAA
- Young women with abdominal pain ?Ectopic pregnancy
- History of trauma
- Patient post surgical procedure
- Associated history of collapse/ confusion
- Diabetic ketoacidosis
- ?Atypical presentation MI / pneumonia

Alert senior Dr &
move to resus

- 1) Fully undress, apply a gown and wrist band
- 2) Record vital Signs: BP, HR, RR, SpO₂, Temp, GCS, BM
Commence Observation Chart and Early Warning Score - follow ED Escalation Plan
- 3) If upper abdominal pain - perform ECG + Doctor review
- 4) Perform pain score, give analgesia as needed
NOTE - record any pre-hospital analgesia/antiemetic given
- 5) Perform Urinalysis (+ MSU if positive for leucocytes or nitrites)
Do Urinary BHCG if female - inform doctor if positive
- 6) If history suggestive of renal colic (severe, unilateral loin to groin pain, unable to lie still) - seek Senior Doctor to consider for early CTKUB
- 7) If signs of severe sepsis discuss with Senior Doctor - give antibiotics early and consider transfer to resus
- 8) Take bloods: FBC, UE. Perform a VBG if EWS>4
If upper abdominal pain add LFTs, lipase (NOT amylase)
If signs of sepsis add Blood cultures
If woman of child-bearing age Serum BHCG
Cannulate and complete VIPS if signs of sepsis, needing morphine or IV fluids
- 9) Order old notes if previous or regular attender

Any tasks NOT completed within IAU should be handed over verbally to the team and placed on NURSE ORDERS

