Abdominal pain

If any of the following RED FLAG presentations:
- Patient > 55 with abdominal / back pain
- Young women with abdominal pain
- History of trauma
- Patient post surgical procedure
- Associated history of collapse / confusion
- Diabetic ketoacidosis
- ?Atypical presentation MI / pneumonia

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

Alert senior Dr & move to resus

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