



# NONTRAUMATIC ABDOMINAL PAIN



## Escambia County, Florida - ALS/BLS Medical Protocol

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This protocol should be used for patients that complain of abdominal pain without a history of trauma.

Assessment should include specific questions pertaining to the GI/GU systems.

### **Abdominal physical assessment includes:**

Ask patient to point to area of pain (palpate this area last).

Gently palpate for tenderness, rebound tenderness, distension, rigidity, guarding, and pulsatile masses. Also palpate flank for CVA tenderness.

### **Abdominal history includes:**

Hx of pain (OPQRST).

Hx of nausea/vomiting (color, bloody, coffee grounds).

Hx of bowel movement (last BM, diarrhea, bloody, tarry).

Hx of urine output (painful, dark, bloody).

Hx of abdominal surgery.

Hx of acute onset of back pain.

SAMPLE (attention to last meal).

Additional questions should be asked of the female patient regarding OB/GYN history (see [OB/GYN Emergencies](#)).

**All female patients of childbearing age complaining of abdominal pain should be considered to have an ectopic pregnancy (even if vaginal bleeding is absent) until proven otherwise.**

An acute abdomen can be caused by: appendicitis, cholecystitis, cystitis -UTI (bladder inflammation), duodenal ulcer, diverticulitis, abdominal aortic aneurysm, kidney infection - UTI (urinary tract infection), kidney stone, pelvic inflammatory disease - PID (female), pancreatitis, and other conditions. (see [Abdominal Pain Differential](#)).



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Charles Neal, D.O. Medical Director



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### Supportive Care

1. [Medical Supportive Care Protocol.](#)

### ALS Level 1

1. If hypotensive (systolic BP <90 mmHg), administer fluid challenge of Normal Saline 250-500 ml.

### ALS Level 2 (*Physician Authorization Required*)

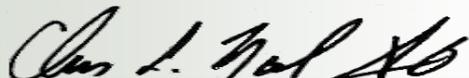
None



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