

SYMPTOMS: Abdominal pain or discomfort related to a non-traumatic cause including rebound tenderness, guarding, abdominal distension, abdominal tympany to percussion, tenderness focal to a specific abdominal quadrant, presence of “pulsing” abdominal mass, absence of or significant inequality of femoral or distal arterial pulses in lower extremities, hyper or hypothermia, rectal bleeding hematemesis (blood in emesis), or vaginal bleeding.

Exclusion: Abdominal pain due to trauma.
Abdominal pain due to or related to pregnancy.

Assessment, Treatment and Interventions

ALL LEVELS

1. Manage the airway per airway management guideline.
2. Primary survey. Identify potential life-threatening causes of abdominal pain (see note below).
3. Obtain and monitor vital signs including pulse, respiratory rate, and blood pressure.

EMR-O; EMT-R

4. Monitor vital signs; obtain SpO₂.
5. Administer oxygen as appropriate with a target of an SpO₂ greater than 93% saturation.
6. Conduct secondary survey including palpating the four quadrants for tenderness. Document general location and what makes it feel better/worse.
7. Assist patient to position of comfort.
8. Evaluate and manage pain per [Pain Management guideline \[M-11\]](#).
9. Evaluate and manage nausea and vomiting per [Nausea and Vomiting guideline \[M-10\]](#).
10. Continue ongoing assessment for potential life-threatening causes of abdominal pain.

AEMT-R

11. Obtain vascular access as necessary.

NOTE:

- Life-threatening causes of abdominal pain:
 - Ischemic, necrotic, or perforated bowel.
 - Severe tenderness
 - Abdominal pain with motion or “jiggling” of the abdomen
 - Fever
 - Bloody stool
 - Nausea and vomiting
 - Possible absence of passage of stool or gas
 - Abdominal distention with possible tympany to percussion
 - Dissecting or ruptured abdominal aortic aneurysm (AAA)
 - Unequal femoral or distal lower extremity pulses
 - “Pulsing” abdominal mass
 - Associated back pain and/or chest pain
 - Known history of abdominal aortic aneurysm
 - Ruptured ectopic pregnancy
 - Vaginal bleeding
 - Recently diagnosed pregnancy
 - Recent missed period/menstrual cycle in women of childbearing age

- Appendicitis
 - Focal right lower quadrant tenderness, possible with rebound and guarding
 - Right lower quadrant tenderness noted during palpation of the left lower quadrant (positive Rovsing's sign)
 - Peri-umbilical or diffuse abdominal tenderness with palpation or "jiggling" of the abdomen/pelvis
 - Fever
 - Nausea, vomiting
 - Lack of appetite
- Acute Cholecystitis (inflammation of gallbladder)
 - Right upper quadrant or epigastric tenderness
 - Fever
 - Nausea and vomiting
 - Possible history of gallstones
- Pyelonephritis (inflammation of kidney)
 - Fever
 - Nausea, vomiting
 - Urinary frequency/urgency
 - Dysuria (painful/difficult urination)
 - Hematuria (blood in urine)
 - Back/flank pain
 - Costovertebral angle tenderness to percussion (space between 12th rib and vertebrae over the kidney)
- Non-life-threatening causes of abdominal pain
 - Kidney stone
 - Unilateral flank pain
 - Nausea, vomiting
 - Possible hematuria (blood in urine)