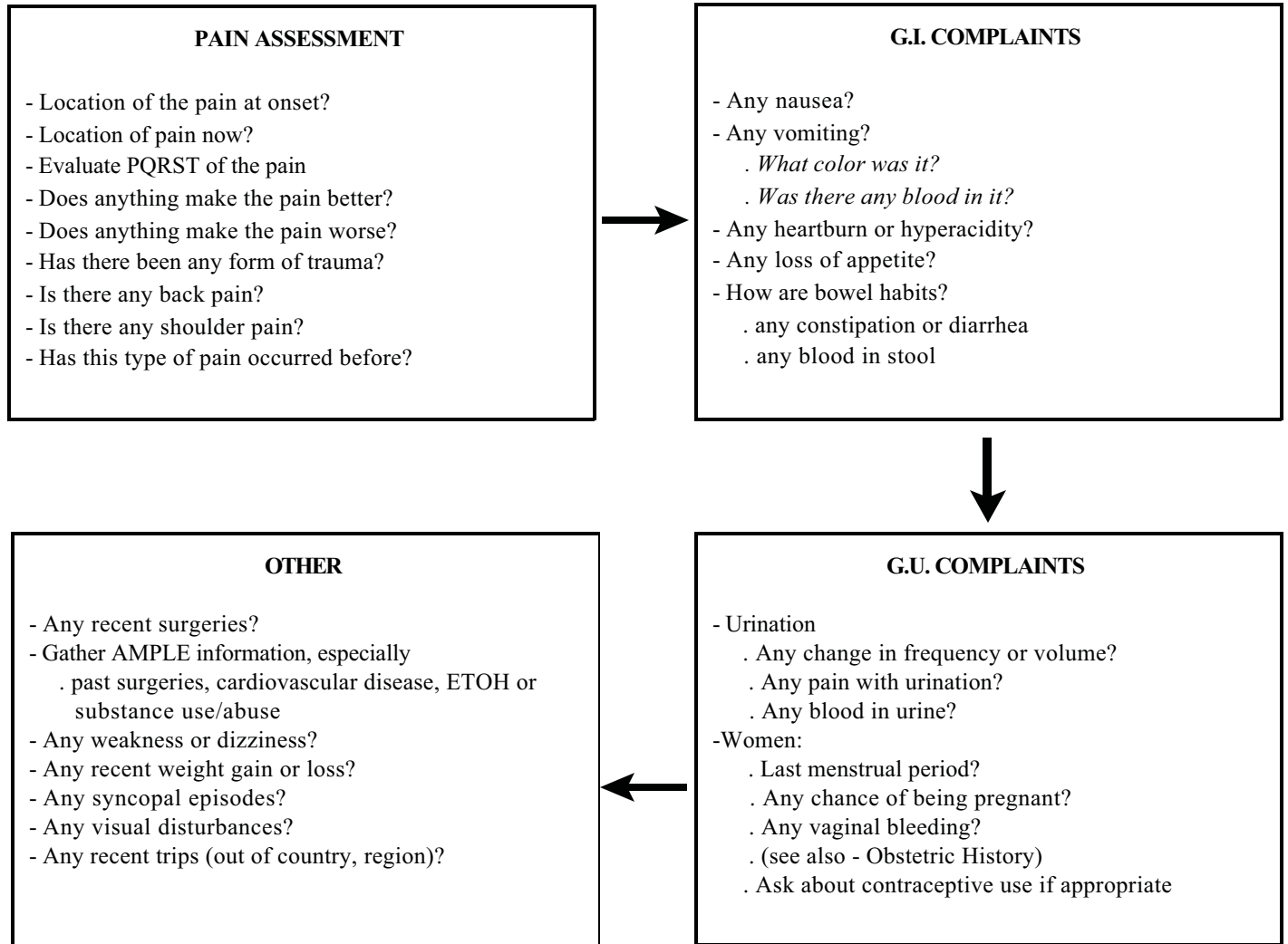


# ABDOMINAL PAIN

Like other complaints, a good history is necessary when dealing with a patient with abdominal pain. Not only does it help to alert you in identifying life threatening conditions, it gives the physician a head start in making a diagnosis or preparing for a serious (or potentially serious) patient. There are many things that can cause pain in the abdomen and the history is only one tool in making a diagnosis. It is wise then to keep an open mind and consider carefully the differential diagnosis. The most important thing to remember is that you should be alert to significant findings from the history as well as the overall condition of the patient.



When managing your patient with abdominal pain, your history taking should take into account the following conditions for the differential diagnosis:

- |                           |                   |                                |
|---------------------------|-------------------|--------------------------------|
| • Aneurysm                | • MI or Angina    | • Urinary Disorders            |
| • Appendicitis            | • Pancreatitis    | • Vascular Disorders           |
| • Cholecystitis           | • Renal Colic     | • Urinary Tract Infection      |
| • Irritable Bowel Disease | • Ruptured Spleen | • Testicular Torsion           |
| • Esophageal Varices      | • Ulcer           | • Post-operative complications |
| • Intestinal Obstruction  | • Hepatitis       |                                |