



# Topic 10

## Case Study of Abdominal Pain



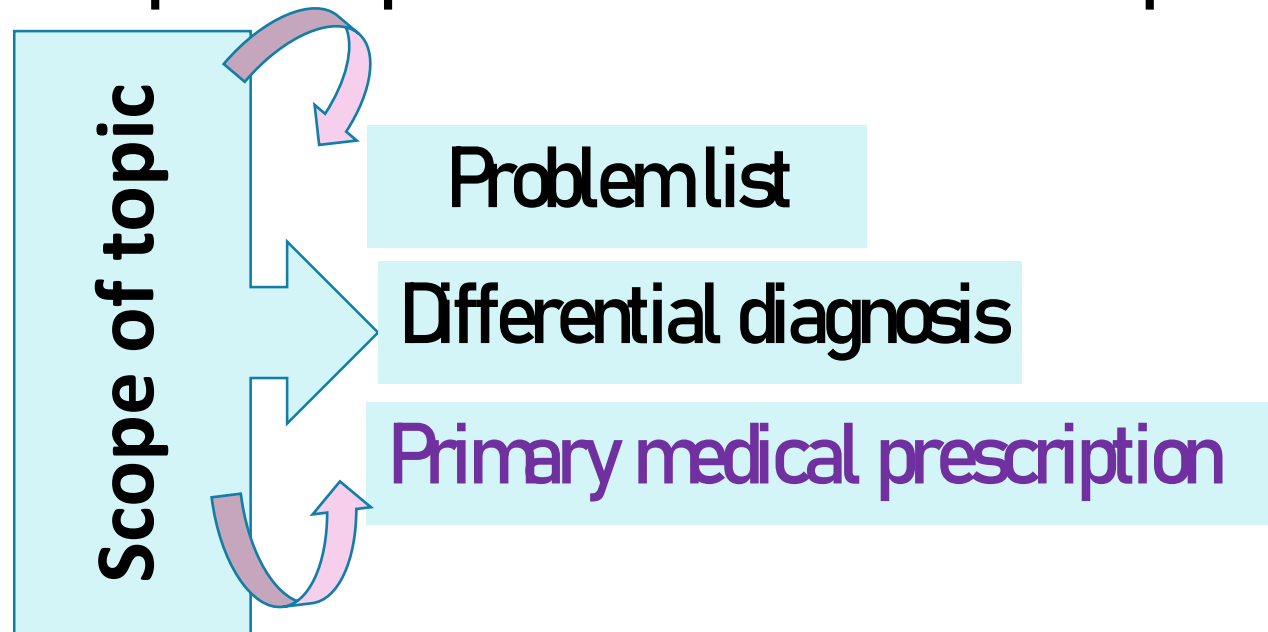
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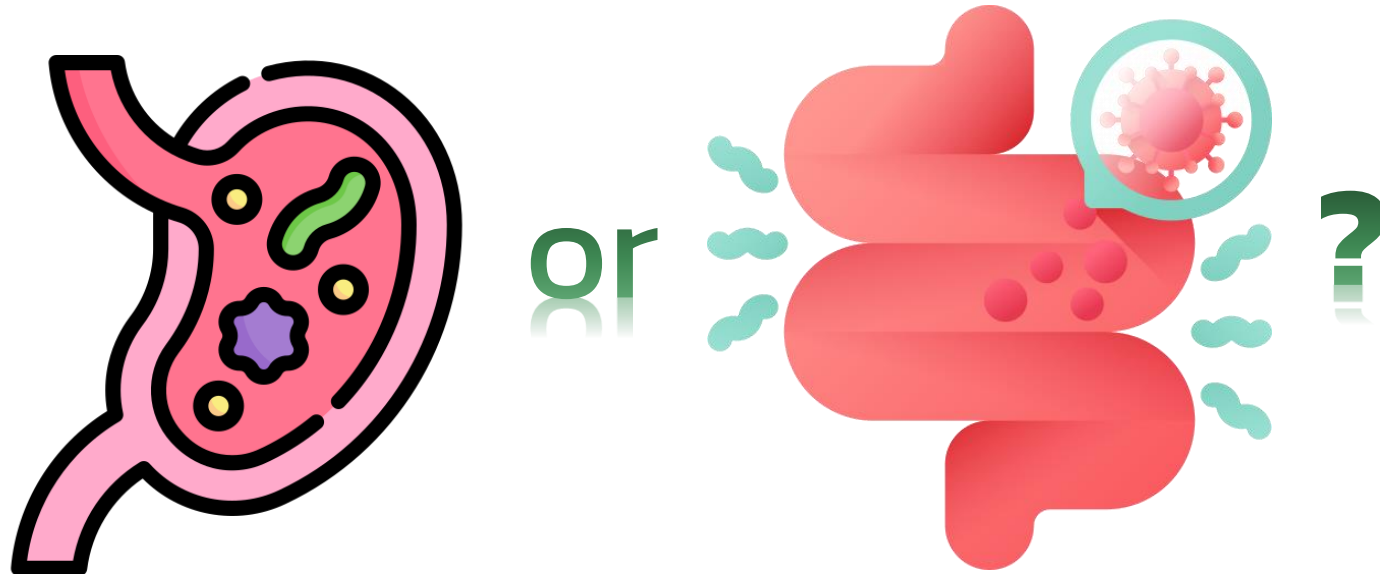
# Lesson objectives

**By the end of the topic students should be able to:-**

- assess health problems according to patient with abdominal pain,
- determine differential diagnosis of patient with abdominal pain,
- provide primary medical prescriptions and care for a patient with abdominal pain



# Case study of abdominal pain






# Chief complaints



A 17-year-old woman presents to the hospital complaining of sudden sharp right-sided abdominal pain 3 hours prior to arrival.

- ✓ History taking should attention to 
  - ✓ : progression of symptom (duration, rapidity of onset, intensity), associated complaints (e.g. anorexia, diarrhea, fever)
  - ✓ : Body position that tends to relieve pain,
- PE: sign of dehydration or fever, abdominal parts.

# Case study

- A 17-year-old woman presents to the hospital complaining of **sudden sharp right-sided abdominal pain 3 hours prior to arrive.**
- She states the pain has been **persistent** since it began and now is **radiating diffusely** throughout her abdomen. It is associated with **nausea**, although the patient has not vomited.
- The patient denies fever, urinary symptoms, or vaginal discharge. Her L.M.P. was 10 days ago.
- The patient reports multiple episodes of similar symptoms over the last two years. She had an outpatient abdominal ultrasound done 6 months ago which was negative to her knowledge.
- The patient has no known drug allergies and denies abdominal operation procedures.

# Physical examination <sub>1</sub>

## Vital Signs

T = 37.0 °C, P = 70 beat/min (bpm), fullness, regular rhythm,

R = 18 bpm, BP = 110/70 mmHg.

= 99% of room air oxygen saturation

BW= 55 kg, Ht.=160 cm.

## General

The patient is awake and alert, looking acutely ill

### • Head and Face

Symmetry, Normal shape and size, Normal movement

### • Neck No jugular venous distension

# Physical examination <sub>2</sub>

**Eye** – no eyelids edema, conjunctiva not pale

**Mouth**            dry lip and mucous membrane,

Buccal mucosa – pink, no inflammation nor erosions,

Tongue – Normal papillae, no sign of inflammation

Pharynx – no injection,

Tonsil – no injection

**Skin** – no edema, good skin turgor, no jaundice

Chest – normal chest contour, no adventitious sound

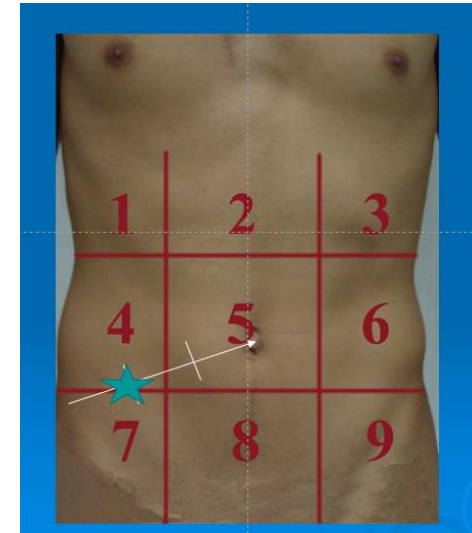
Heart – Apical beat at 5th Lt.ICS, MCL, normal  $s_1s_2$ , no murmur



# Physical examination <sub>3</sub>

## Abdominal

- No distension, no surgical scars, no dilated veins,
- Bowel sound (BS) 18 bpm. (hyperactive bowel sounds)
- Abdominal wall soft, **tenderness to palpation at McBurney's point.**
- Liver – not palpable
- Spleen – not palpable
- Kidney – not palpable, CVA no tenderness
- **Genitalia: no abnormal discharge**



- Rovsing's sign positive,
- Psoas's sign positive,
- Obturator's sign positive



# Problem lists

1. sudden sharp right-sided abdominal pain 3 hours prior to arrive,
2. persistent pain & radiating diffusely throughout abdomen
3. nausea
4. dry lip and mucous
5. Abdominal wall tenderness to palpation at McBurney's point  
Rovsing's sign positive,  
Psoas's sign positive,  
Obturator's sign positive

# Differential diagnosis

1. Acute appendicitis
2. Salpingitis/Pelvic inflammatory disease
3. Renal calculus



## Plan for diagnosis (Physical order)



- CBC
- UA

# Laboratory results

## ➤ Blood test: CBC

- Hct 45% (Normal 42-52%)

- **WBC 14,500 cell/cu.mm.**

(Normal 5,000-10,000 cell/cu.mm)

**Neutrophils 75% (Normal 55-70%)**

Eosinophils 0% (Normal 1-4%)

Basophils 5% (Normal 0.5-2%)

Lymphocytes 20% (Normal 20-40%)

Platelets 160,000 cell/cu.mm. (Normal 150,000-400,000 cell/cu.mm.)

## ➤ UA

• Urinalysis

- RBC 1 cell/HF

(Normal 0-1 cell/HF)

- Epithelial cell 1-2 cell/HF  
(Normal 0-1 cell/HF)

- WBC 4 cell/HF

(Normal 3-5 cell/HF)

# Assessments & Analysis

## Problem lists

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# Final diagnosis : **Acute appendicitis**

## Specific treatment

Appendectomy

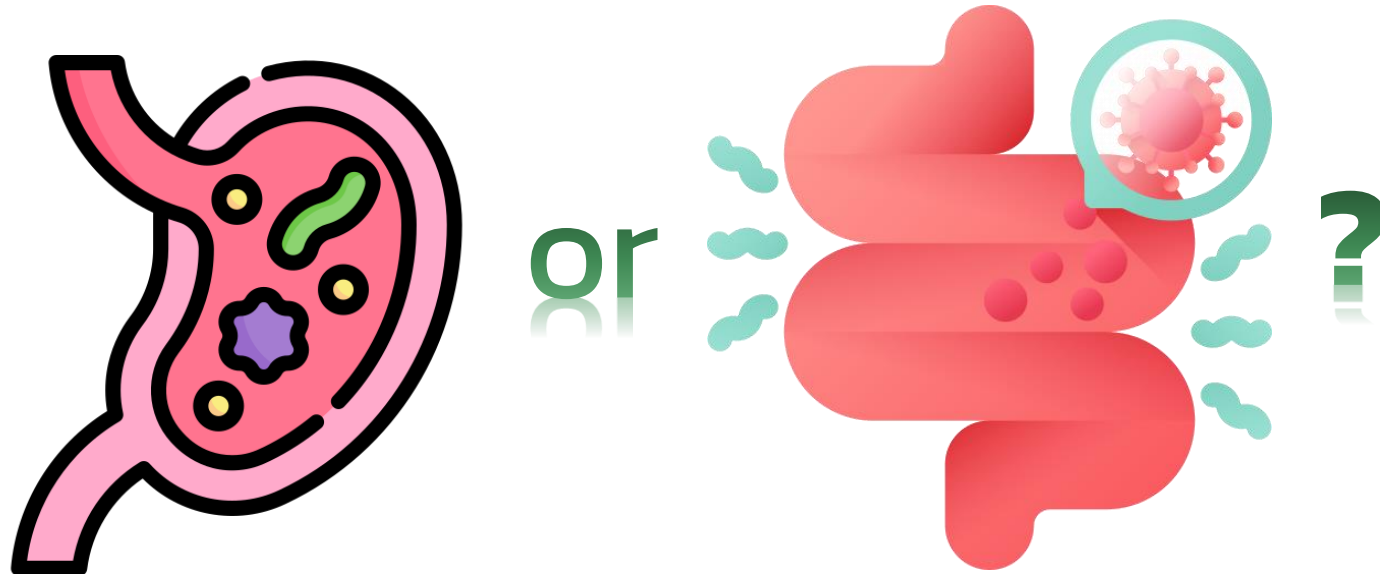


Antibiotic

## Symptomatic treatment

- NPO
- Refer
- Health Education  
Patient & Parent

# Case study of abdominal pain



# Summary

- A 17-year-old woman presents with **sudden sharp right-sided abdominal pain 3 hours prior to arrive.**
- Abdominal pain has been **persistent, radiating diffusely** throughout abdomen, associated with **nausea.**
- Her physical examination presented signs of appendicitis such as McBurney's point tenderness, Rovsing's sign positive, Psoas's sign positive, and Obturator's sign positive
- Her laboratory test showed infection.
- She have to refer to facility hospital for appendectomy.



# Thank You!



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