

Goals

- Rapid transport if a life-threatening cause is suspected
- Provide symptom management early (e.g. pain or nausea)

Obtain a 12-lead ECG

Keep the patient NPO unless pain is caused by an MI (i.e. requires ASA)

Dimenhydrinate for nausea and/or vomiting (25 mg IV or 25-50 mg IM)

Consider IV fluids

Manage hypo-/hyperglycemia

Administer 2.5-5 mg morphine q 10 min as needed for abdominal pain

Tips

- Consider the life-threatening causes: Aortic aneurysm, ectopic pregnancy, MI, traumatic rupture of organs, or uncontrolled GI bleed
- Choose the appropriate destination and provide pre-arrival notification for high-risk patients
- Abdominal pain in the elderly is a high-risk presentation