



STANDING ORDER

ABDOMINAL PAIN

I. ASSESSMENT

- A. Medical history.
- B. Vital signs, including temperature.
- C. Location, duration and pattern of pain.
- D. What happened at onset?
- E. What relieves/aggravates the pain?
- F. Effect, if any, of eating, drinking, and passage of stool or flatus on the pain.
- G. Date of last bowel movement.
- H. Auscultate bowel sounds.
- I. Rigidity of abdomen.
- J. Rebound tenderness in right lower quadrant.
- K. Unable to stand erect when ambulating.

II. MANAGEMENT

- A. Contact the Facility Provider or may send to Emergency Room if pain is accompanied by RLQ tenderness, nausea, vomiting, diarrhea, anorexia, abdominal rigidity or fever and does not subside in a reasonable length of time or greatly intensifies.
- B. If inmate is unable to straighten legs or is unable to walk, call 911 for transport to the hospital.
- C. If inmate is able to walk, transport to the hospital or as directed by the Facility Provider.

III. EVALUATION

- A. To be evaluated by physician or nurse practitioner as outlined above.