Management of acute abdominal pain in children

**Primary survey (ABCDEFG)**
- Airway
- Breathing
- Circulation
- Disability
- Exposure
- Fluids
- Glucose
  Also: Pain Management

**History of significant trauma**
- Yes → See local or NSW trauma guidelines
- No → “Surgical abdomen”

*Intestinal obstruction, Peritonitis, Localised tenderness (not peritonitis), Palpable abdominal mass, Inguinogenital pain or swelling*

**“Surgical abdomen”**
- Yes → Surgical consultation
  - Consider appropriate escalation algorithm
  - Immediate referral to paediatrician and consult with a paediatric surgeon as required

**No** → Bloody stool
- Yes → Consider urinary tract infection.
  - Refer to paediatrician and consider commencing treatment with antibiotics
- No → **Positive urine dipstick from clean catch, catheter, or suprapubic urine sample for leukocyte esterase or nitrites, and pyuria/bacteruria on microscopy**
  - Yes → Consider gastroenteritis.
  - **(Refer to Infants and Children: Management of Acute Gastroenteritis Clinical Practice Guideline)**
  - No → **Diarrhoea + Vomiting + Fever**
    - Yes → Consider pneumonia. Obtain chest X-ray.
    - If abnormal, commence antibiotics. Discuss with paediatrician
  - No → **Fever + / - tachypnoea, respiratory distress, recession, cough, chest signs**
    - Yes → **Consider constipation**
    - **(Refer to Infants and Children: Acute Management of Abdominal Pain Clinical Practice Guideline)**
    - No → **Firm stool palpable in lower abdomen**
      - Yes → Consider less common diagnoses
        - **(Refer to Infants and Children: Acute Management of Abdominal Pain Clinical Practice Guideline)**
      - No → **No specific diagnosis. Clinically Concerned**
        - Yes → **UNWELL/ Significant concern**
          - Consult paediatrician or ED specialist
          - **Consult paediatrician or ED specialist**

**No** → **Observe over 4 hour period**
- Yes → Concerned or not improving
- No → **Not clinically concerned or improving**

**IF ANY CONCERNS** → resuscitate as required and immediate referral to paediatrician, ED specialist, paediatric surgeon, general surgeon or NETS

**UNWELL/ Significant concern**
- **Consult paediatrician or ED specialist**
- **Consult paediatrician or ED specialist**

**Discharge home** with appropriate follow up and a written discharge plan. Educate family & provide **Abdominal Pain (stomach ache) fact sheet**