



Objectives: Abdominal Pain

1. Given a patient with abdominal pain, paying particular attention to its location and chronicity:
 - a. Distinguish between acute and chronic pain
 - b. Generate a complete differential diagnosis
 - c. Investigate in an appropriate and timely manner
2. In patients with diagnosed abdominal pain (e.g. GERD, PUD, IBD), manage specific patients appropriately (e.g. medications, lifestyle changes).
3. In women with abdominal pain:
 - a. Always rule-out pregnancy if she is of reproductive age
 - b. Suspect gynecologic etiology for abdominal pain
 - c. Do a pelvic examination, if appropriate
4. In a patient with acute abdominal pain, differentiate between a surgical and non-surgical abdomen.
5. In specific patient groups (e.g. children, pregnant women, the elderly), include group-specific surgical causes of acute abdominal pain in the differential diagnosis.
6. Given a patient with a life-threatening cause of acute abdominal pain (e.g. ruptured abdominal aortic aneurysm, ruptured ectopic pregnancy):
 - a. Recognize the life-threatening situation
 - b. Make the diagnosis
 - c. Stabilize the patient
 - d. Promptly refer the patient for definitive treatment
7. In a patient with chronic or recurrent abdominal pain:
 - a. Ensure adequate follow-up and monitor for new or changing signs or symptoms
 - b. Manage symptomatically with medication and lifestyle modifications for conditions such as IBS
 - c. Always consider cancer in an at-risk patient
8. Given a patient with a diagnosis of inflammatory bowel disease (IBD), recognize an extraintestinal manifestation.

** Mapped to the CFPC's 105 priority topics: #1-Abdominal Pain