



M-01 ABDOMINAL PAIN/ VOMITING		
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KEY POINTS:

- Always consider non-GI life-threatening causes of abdominal pain:
 - **Cardiac/STEMI:** Consider 12-lead EKG for any upper abdominal pain or nausea/vomiting as they can be symptoms of an Acute Coronary Syndrome, even in the absence of chest pain or shortness of breath.
 - **Aortic Aneurysm/Dissection:** Especially consider with hypotension or syncope with abdominal pain. Treat as potential hemorrhagic shock with fluid resuscitation and possibly needing vasopressors.
 - **Pregnancy:** Ectopic pregnancy until proven otherwise (if US not done before). Can have large volume of blood loss if ruptures. Treat hypotension as hemorrhagic shock.
 - **Diabetic Ketoacidosis (DKA):** Consider with vague abdominal pain and vomiting with evidence of dehydration (tachycardia, hypotension, etc.). Glucose can be only mildly elevated but is generally >300. Treatment is with fluid resuscitation and pressors if needed in the field, and insulin drip in the ED.

QI Review Parameters:

1. {PENDING}