ECHO IDAHO:
K12 School Nurses

How to Triage: Stomach Problems

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Please keep in mind that your School District policies and Health Services procedures, medication administration protocols, process guidelines, remain the guiding principles to your practice.

None of the planners or presenters for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Learning Objectives

SCHOOL
NURSE

- Review of the abdominal anatomy
- Assessing in the school setting
- Inspection, Auscultation, Palpation and Percussion
- Determining seriousness
- Recognizing the outliers

T.Y. is sent to the nurse office before math class.

Chief complaint stomachache

- Subjective: worst tummy ache I have ever had, I feel like I might throw up. Pain is 10/10. I already tried a drink of water and the bathroom like my teacher asked. Can I go home?

Nurse has seen TY several times

- Objective: 9-year-old with normal vital signs, appears non-toxic and sitting upright with no facial grimacing.

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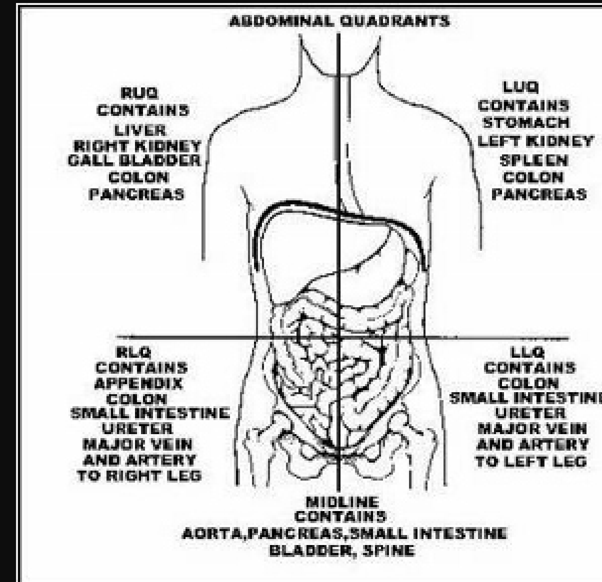
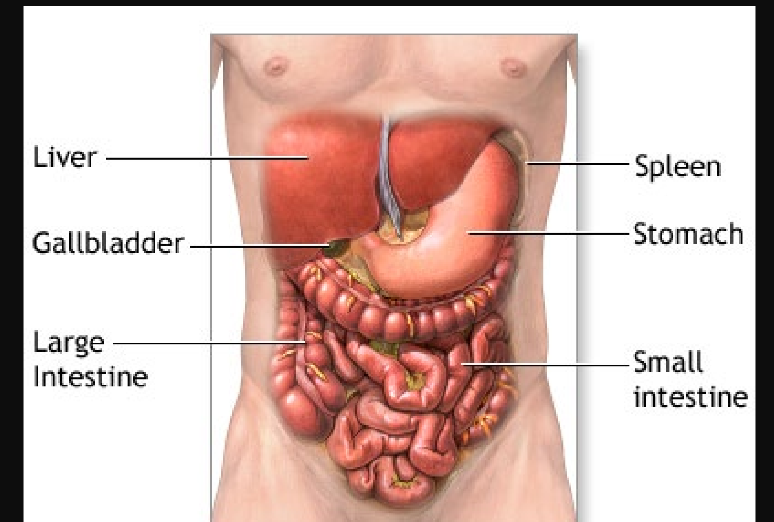
Abdominal Anatomy

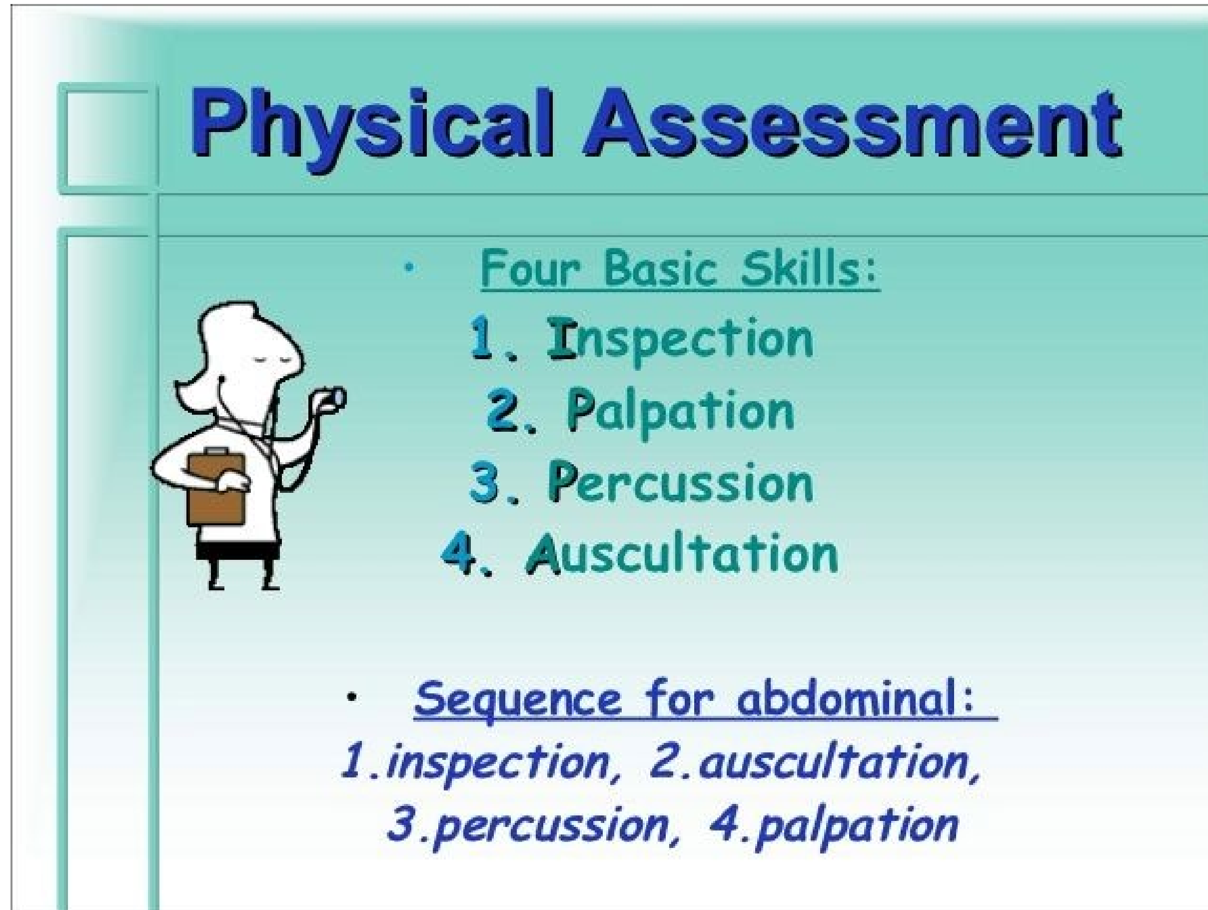




SUBJECTIVE and OBJECTIVE Information

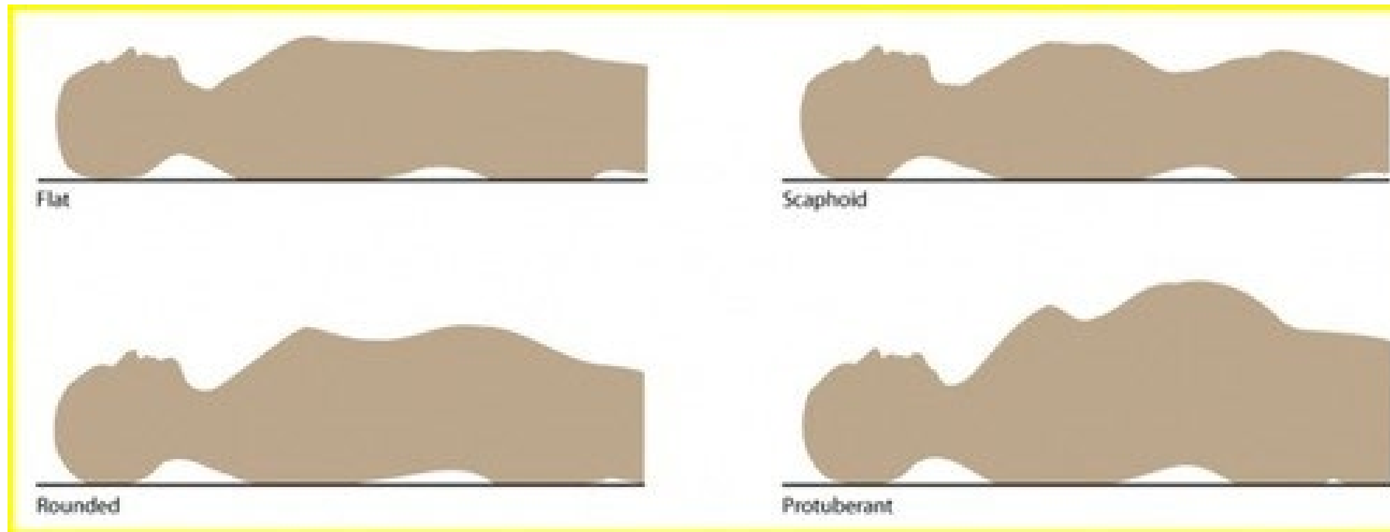
- Subjective is the health history that we gather:
  - A patient's verbal statements or feelings, such as a complaint of a sore wrist. Subjective data can provide insight into a patient's perspective, but it's based on personal interpretation.
- Objective is the information that is gathered from our physical assessment.
  - Measurable data, such as vital signs, lab results, and physical exam findings. Objective data is numerical and can't be refuted, so it's considered more reliable and consistent.

4 STEPS to the Abdominal assessment



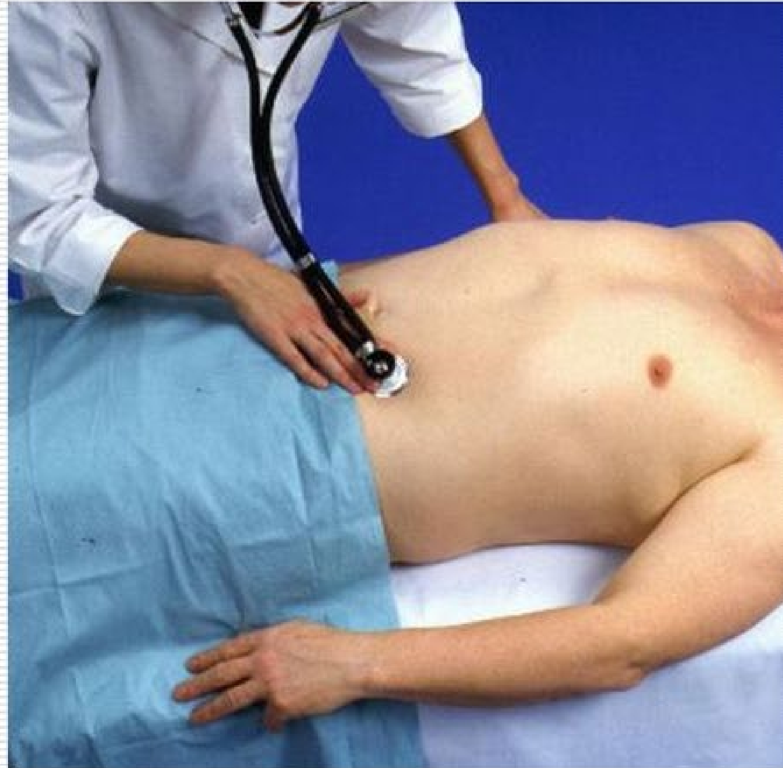
Inspection

- The first step of the abdominal exam, where you visually examine the abdomen. Look for masses, and note their size, location, and consistency. Also observe how the abdominal wall moves when the patient breathes.



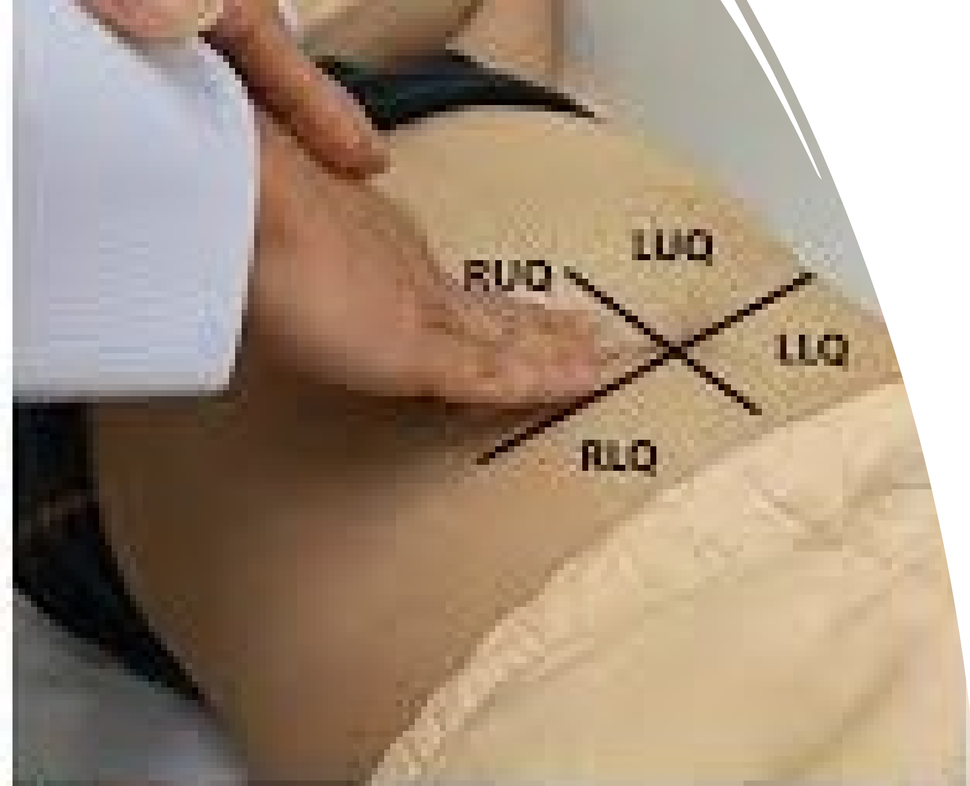
Auscultation of Bowel Sounds

- Absent
  - **no BS for 5 min**
- Hypoactive
  - **less than 5/min**
- Active
  - **5-30 per min**
- Hyperactive
  - **> 30 /min**



Auscultation

- Use a stethoscope to listen to bowel sounds in each quadrant of the abdomen. Normal bowel sounds are gurgling and low-pitched, and occur at a rate of 2–35 per minute.

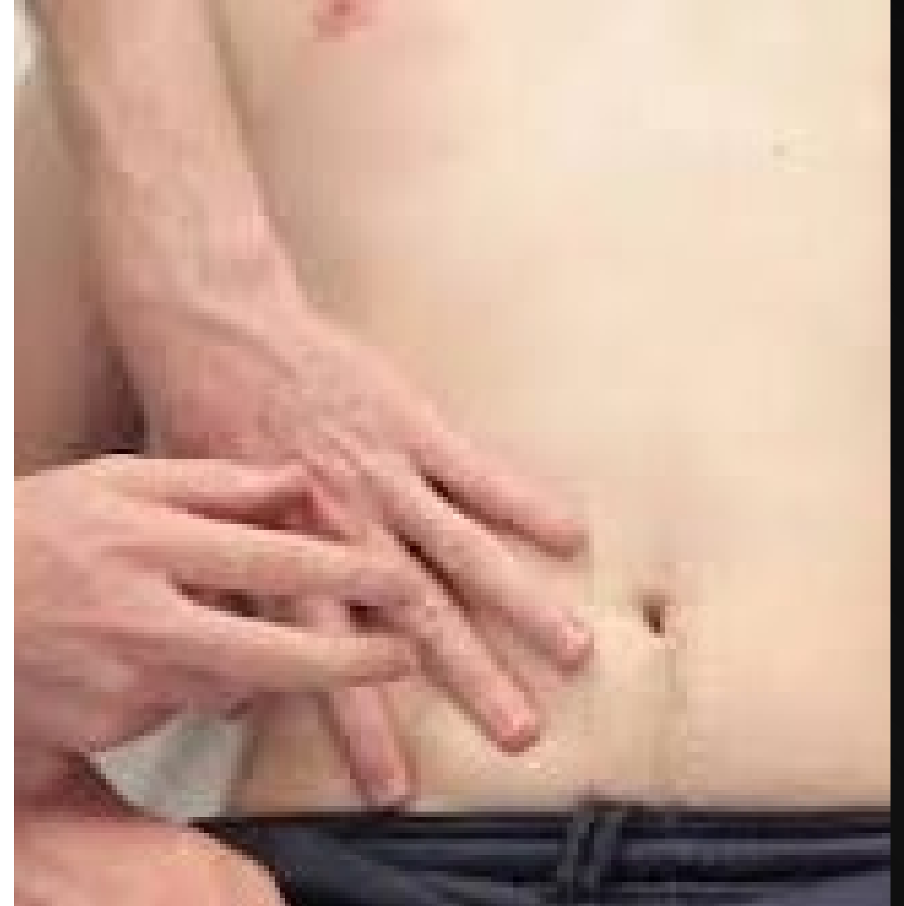


Palpation

- Use your fingers to feel the abdomen for tenderness, masses, or rigidity. You can also palpate for specific organs, like the liver and spleen.

Percussion

- Use percussion to assess the size of the liver and detect splenic dullness.



Common causes of abdominal pain

- Constipation
- Indigestion
- Stress/Anxiety
- Appendicitis
- Bowel Obstruction
- Urinary Tract Infection

TY: lets talk about assessment

ABNORMAL FINDINGS

Tenderness: Tenderness in different parts of the abdomen can indicate different conditions

Rigidity: Involuntary stiffness of the abdominal wall muscles

Guarding: Voluntary or involuntary tensing of the abdominal muscles

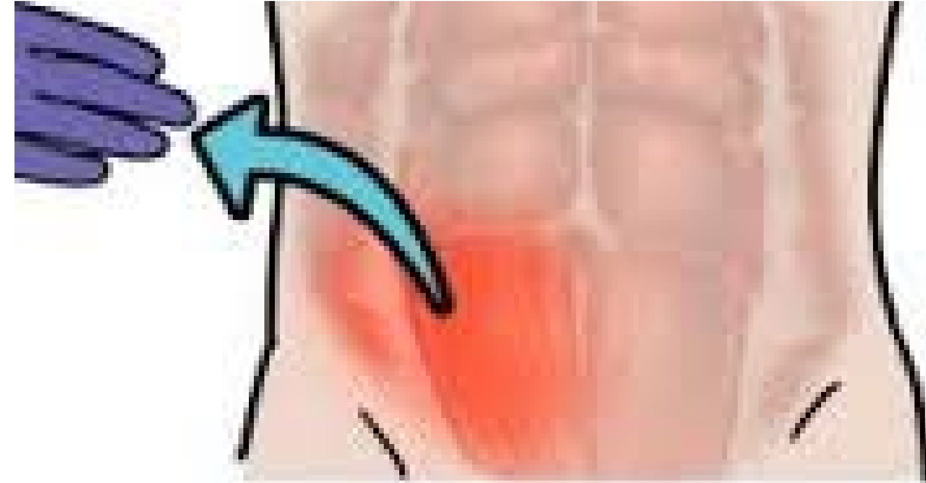
Rebound tenderness: A common finding associated with an acute abdomen

Discoloration: Areas of discoloration, such as a bluish discoloration of the umbilicus

Bowel sounds: Hyperactive bowel sounds can indicate increased intestinal activity, while hypoactive or missing bowel sounds can indicate more serious conditions

Appendicitis

- **McBurney point tenderness:** Could indicate appendicitis, inflammation of the ileocolic area, or an infection



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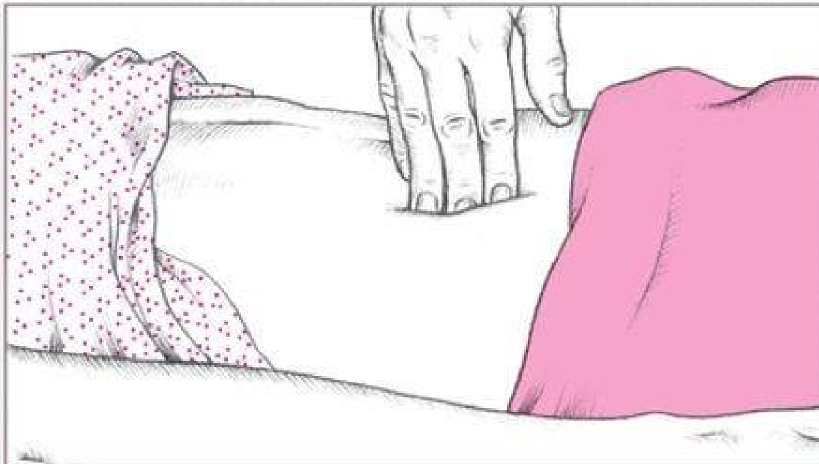
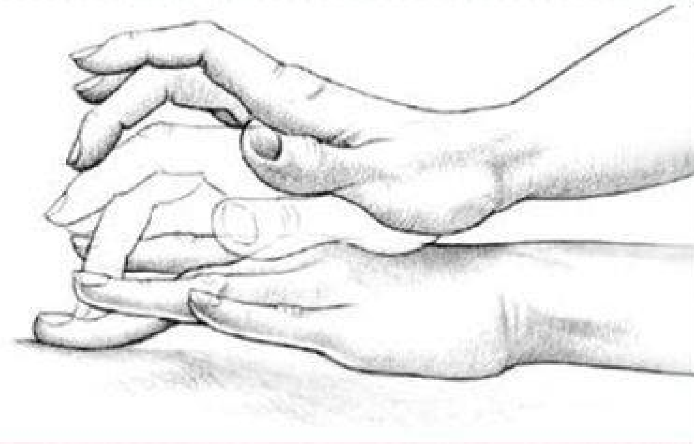
ABDOMINAL EXAMINATION
BLUMBERG'S SIGN

a.k.a. rebound tenderness

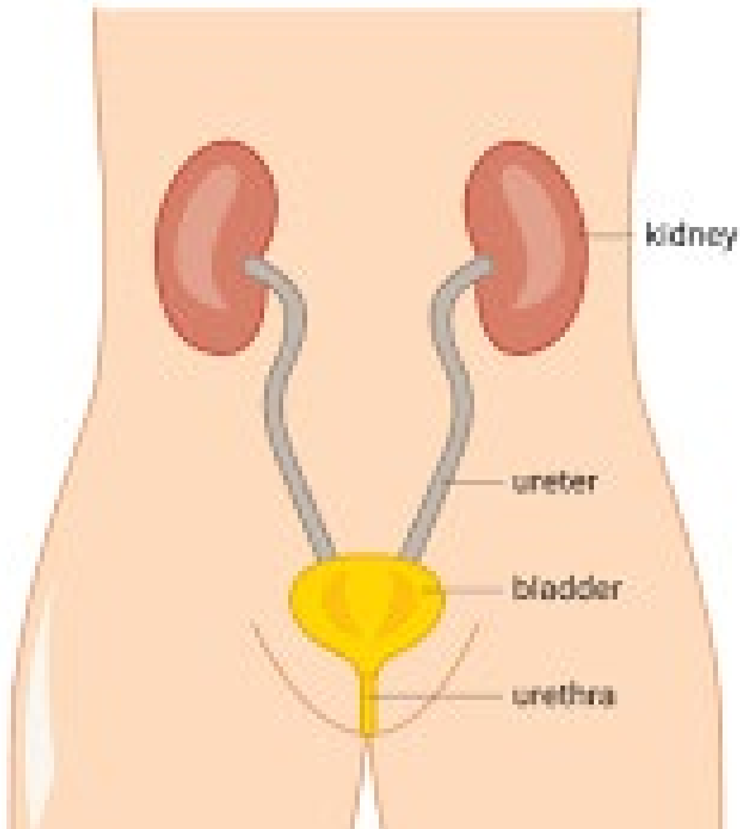
Pain upon removal of pressure rather than application of pressure to the abdomen

Peritonitis and/ or appendicitis





Urinary Tract Infections



- Pain in your flank, abdomen, pelvic area or lower back.
- Pressure in the lower part of your pelvis.
- Cloudy, foul-smelling pee.
- Urinary incontinence.
- Frequent urination.
- Urge incontinence.
- Pain when you pee (dysuria).
- Blood in your pee (hematuria).

BOWEL Obstruction

- A change in bowel habits, such as more frequent bowel movements, constipation, or diarrhea
- Blood in your stool, which can be bright red or very dark
- Abdominal pain, bloating, or cramping
- A lump in your anus or rectum
- Unexplained weight loss
- Fatigue, tiredness, or anemia (pale complexion, weakness, and breathlessness)

It takes a Village, and we are a part of the Village

NURSE'S OFFICE

Thank you

References

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