



Westvic After Hours Health Advice Line
1800 641 395

TELEPHONE TRIAGE PROTOCOLS
Version 4
2011

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The primary objective of the Nurse Telephone Triage Model is to offer the community an after hours service that is confidential, reliable and a consistent source of locally relevant and professional advice on health care.

An initiative funded by the federal Department of Health and supported by WestVic Division of General Practice.

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Protocols do not replace skilled clinical judgement Source: Modified from Briggs (2007) 3

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ABDOMINAL PAIN, ADULT V4/2011/02

KEY QUESTIONS: Name, Age, Onset, Pain Scale

ASSESSMENT

1. Are any of the following present?

- Severe persistent pain
- Fainting/light headedness/pale/clammy
- Vomiting blood/dark/coffee ground material (ask amount)
- Sudden severe abdominal and shoulder pain in menstruating women, where menses are >4 weeks late

2. Are any of the following present?

- Pregnancy
- Age >80, new onset rapidly increasing pain
- New onset, rapidly increasing pain
- Unusually heavy vaginal bleeding and possible pregnancy
- History of recent abdominal surgery
- RLO pain with poor appetite, nausea and/or vomiting or fever
- Bloody or black stools unrelated to haemorrhoids or iron supplements
- Ingestion of plant, drug, chemicals or water affected by blue-green algae
- Severe nausea and vomiting
- History of hepatitis or exposure to hepatitis
- Continuous pain >1 hour
- Unexplained progressive abdominal swelling
- Painful or difficult urination or unable to pass urine
- Blood in urine
- Pain interferes with activity or worsens with coughing
- Fever (adult 40°-42.3°C child 38°-41.8°C)
- Scrotal pain
- Unable to move bowels or pass gas

3. Are any of the following present?

- Vaginal or urethral discharge
- Nausea, vomiting, diarrhoea
- History of abdominal pain and usual treatment is ineffective
- Constipation
- History of nervous stomach
- Significant increase in stress level
- Intermittent mild pain associated with an empty stomach, eating certain foods, or use of pain, antibiotic, or anti-inflammatory medications
- Mild infrequent diarrhoea
- Other family members are ill

ACTION

Call an ambulance (000)
Seek emergency care

Attend A&E for assessment

Phone Maternity Unit where booked to give birth (if applicable)

Seek medical care in the morning
Follow home advice
Call back if concerned

Follow home advice
Call back if concerned

Home Care Advice Rest, Clear liquids or bland diet for 12-24 hours (ie. tea diluted, broth, apple juice, sports drinks, bread, potatoes, rice, crackers, bananas). Avoid sweet, sugary and fatty foods and other types of fruit.
Take medication as directed by pharmacist (if applicable) eg OTC, antacids, paracetamol and/or Gastrolyte®. Avoid aspirin and anti-inflammatory drugs (unless ordered by doctor).
Avoid alcohol, caffeine, greasy or spicy foods.
Apply heat (hot towel, heating pad, hot water bottle, wheat bag) to the abdomen for cramping or a warm bath. Report: bloody/black stools or emesis, pain worsens with heat pack.
SEEK EMERGENCY CARE IMMEDIATELY IF: Unusually firm or hard abdomen, persistent vomiting, severe persistent pain, fainting/light headedness.

DOCUMENT CALL

ICD2 Codes
D01 Generalised Abdominal Pain
D06 Localised Abdominal Pain

Protocol Certification: Abdominal Pain, Adult

Primary Reviewer	Trudy Scott De Costa
Qualification	RN, Certified Midwife, Intensive Care Certificate, Coronary Care Certificate, Renal Nursing Certificate
Date Reviewed	5 February 2011
Hard Copy References:	Briggs, J.K. <i>Telephone Triage Protocols For Nurses</i> , 3 rd ed, 2007. Lippincott, Williams & Wilkins.
• Author	
• Title	Goulburn Murray Water Blue Green Algae Human Health Risks
• Journal Reference (if applicable)	http://www.gmwater.com.au/environment/vstomusuliyh-g_algae
• Page Numbers	Accessed 3/3/11
• Date of Publication	Abdominal pain in adults.
• Publisher	www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Abdominal_pain_in_adults?open
Electronic References:	Accessed 23/5/11
• Site Name	
• Article Name	
• Web address	
• Date accessed	
Additional Reviewers & Qualifications:	Deidre Rennick RN, Graduate Diploma Advanced Nursing
Approved for Use By:	West Vic Division of General Practice Board
Date of Approval	21 June 2011
Next Review Due	21 June 2013

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Protocol Reference Example

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