

Common client complaints ?Appetite ?Presence of dysphagia ?Food intolerance ?Abdominal pain ?Nausea ?Vomiting ?Bowel habits (any diarrhea or constipation) ?Past history of abdominal diseases 4

1.General appearance 2.Inspection 3.Auscultation 4.Percussion 5.Palpation Components and techniques of abdominal assessment 5 7 Think Anatomically: ?Abdominal Quadrant Approach: Examine the abdomen using a four-quadrant system (RUQ, RLQ, LUQ, LLQ).This suggests irritation of the peritoneum (the lining of the abdominal cavity).Abdomen– Palpation 16 Normal Findings oPalpate for rebound tenderness oNormally pain is not felt by the patient (performed at the end of the examination) Abnormal Observations oPain on release of pressure confirms rebound tenderness which indicates peritoneal inflammation that usually accompanies appendicitis.Exam of the Abdomen Quadrants of the Abdomen 8 Topical Anatomy of the Abdomen oRestlessness and constant turning with colicky pain (sharp, localized gastrointestinal or urinary pain that can arise abruptly, and tends to come and go in spasm like waves) oAbsolute stillness.oDecreased skin turgor 13 Abnormalities on Inspection 14 Obese abdomen Hepatomegaly Ascites Markedly enlarged gall bladder Umbilical Hernia 2.Abdomen– Inspection 10 Normal Findings oPeristaltic waves oAortic pulsation Abnormal Observations oMarked pulsation of aorta occurs with widened pulse pressure (hypertension, aortic aneurysm).Percussing The Kidneys 25 Normal Versus Abnormal Abdominal Percussion findings: oLiver: Usually mostly covered by ribs; occasionally a small edge protrudes below the costal margin.Abdomen– Auscultation (Bowel sounds) 11 Normal Findings oDiaphragm of the stethoscope– Begin at the RLQ oBowel sounds are high pitched, gurgling, cascading sounds, occurring irregularly from 5 to 30 times per minute.Abnormal Observations oA systolic bruit is a pulsatile blowing sound and occurs with stenosis, partial occlusion or aneurysm of an artery.oTympany should predominate oShifting dullness Abnormal Observations oDullness– distended bladder, adipose tissue, fluid or mass oHyperresonance is present with gaseous distension.?Anatomical Awareness: Visualize the organs located within each quadrant during inspection, auscultation, palpation, and percussion.oHyperperistalsis due to hyperactive bowel sound (borborygmus) Abnormal Observations oHyperactive sounds– loud, high pitched, rushing, tinkling sounds that signal increased motility.Abdomen– Auscultation(Vascular sounds) 12 Normal Findings oNo vascular sounds or bruits over the aorta, renal arteries, ileac and femoral arteries.oNo surgical scars oNormal Skin turgor oRespiratory movements Abnormal Observations oRedness indicates localized inflammation.Abdomen– Percussion 13 Normal Findings oMove clockwise, all 4 quadrants –determine the existing tympany & dullness..Place your hands gently on the right lower quadrant at McBurney's point (located about midway between the umbilicus and the anterior superior iliac spine).Abdomen– Inspection 8 Normal Findings oUmbilicus is midline, inverted, without discolouration, inflammation or hernia.oAbout 4–20% of healthy people may have a normal bruit originating from the celiac artery, which is systolic, medium to low in pitch, heard between xiphoid process and the umbilicus.oHepatomegaly– liver palpated more than 1– 2 cm below the right costal margin oPain during inspiration– inflamed gall bladder.To minimize the risk of rupturing an inflamed appendix, don't repeat the maneuver for assessing rebound tenderness.If the individual feels sudden pain in the right lower quadrant of the abdomen, it is indicative of a positive Rovsing's sign Rebound Tenderness: Pain felt when pressure on the abdomen is released, not when it's applied.oKnees flexed up, facial grimacing, and rapid, uneven respirations also indicate pain.General

appearance 6 Abnormal Observations oScaphoid abdomen caves in. oProtuberant abdomen indicates abdominal distension. oMarked visible peristalsis together with a distended abdomen indicates intestinal obstruction. Abnormal Observations oLiver is displaced downwards from hyper inflated lung. ?Differential

Diagnosis: Knowing organ location aids in identifying normal findings and potential pathologies. TYMPANY--a clear, hollow sound similar to a drum beating--occurs when you percuss over hollow organs such as an empty stomach or bowel. Abdomen--Percussion Normal Findings oTo assess the Kidney -place one hand over the 12th rib at the costovertebral angle on the back. Don't percuss if the patient has an abdominal aortic aneurysm or a transplanted abdominal organ. Abdomen--Palpation 15 Normal Findings oPalpate for the kidneys oOccasionally, the lower pole of the Rt. kidney is felt as a round, smooth mass that slides between the fingers. oLook for symmetry Abnormal ??...???????. Observations ????1.2.??????...2.2.3.3.19 4.23 STOP!24 ??5