

Abdominal pain pathway

Clinical support tool for remote clinical assessment



Clinical findings	Green – low risk	Amber – intermediate risk	Red – high risk
Behaviour	<ul style="list-style-type: none"> Content/smiles Stays awake/awakens quickly Strong normal crying/not crying 	<ul style="list-style-type: none"> No smile Decreased activity/lethargic Irritable 	<ul style="list-style-type: none"> No response Unable to rouse or if roused does not stay awake Clinical concerns about nature of cry (weak, high pitched or continuous) Severe pain
Skin	<ul style="list-style-type: none"> Normal skin colour Warm extremities 		<ul style="list-style-type: none"> Pale / mottled / blue Cold extremities
Hydration	<ul style="list-style-type: none"> Moist tongue and conjunctivae Fontanelle normal 	<ul style="list-style-type: none"> Dry tongue and conjunctivae Sunken fontanelle 	
Urine output	<ul style="list-style-type: none"> Normal 	<ul style="list-style-type: none"> Reduced / not passed urine in past 12 hours 	<ul style="list-style-type: none"> No urine for 24 hours
Respiratory	<ul style="list-style-type: none"> Normal pattern and rate 		<ul style="list-style-type: none"> Abnormal/fast breathing
Other		<ul style="list-style-type: none"> Polyuria, dysuria or urgency Reduced appetite Additional parent/carer concerns Pain not settling with analgesia Waking with pain Pain increased on movement Fever for >5 days Significant abdominal distension Age 3-6 months with temp $\geq 39^{\circ}$ (102.2°F) with no clear focus of infection 	<ul style="list-style-type: none"> Non blanching rash Described oedema Described jaundice Dark green (bilious) vomiting Recent injury to the abdomen Testicular pain Blood in stool Age 0-3 months with temp $\geq 38^{\circ}$ (100.4°F)



Green Action

[Provide abdo pain safety netting advice](#)
 Confirm they are comfortable with the decisions/
 advice given.
 Always consider safeguarding issues

Amber Action

Consider video consultation
 and/or
 refer to primary care service for review

Red Action

Refer immediately to emergency care –
 consider whether 999 transfer or parent/taxi
 most appropriate based on clinical acuity etc.

This guidance has been reviewed and adapted by Healthcare professionals across Hertfordshire & West Essex.

This document was arrived at after careful consideration of the evidence available including but not exclusively NICE, SIGN, EBM data and NHS evidence, as applicable. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. The guidance does not, however, override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient in consultation with the patient and / or carer.