

Surgery

Abdominal distension

5Fs

Fat, Fluid, Faeces, Flatus, Fetus

Acute Abdomen

MEDIC CURSES A MOP

Mesenteric Adenitis, Enteritis, Diverticulitis, Ischaemic Colitis

Cholecystitis, Ulcers, Renal Colic, Salpingitis, Ectopic Pregnancy, Small bowel obstruction

Appendicitis, Meckels Diverticulum, Ovarian Cyst, Pancreatitis

Bleeding PR

Haemorrhoidal DRAIN

Haemorrhoids, Diverticulitis, Radiation enteritis, AV malformation, Ischaemia, Neoplasm

GI obstruction

PV D&C

Pain, Vomiting, Distension, Constipation

Haematemesis

GUM BLEEDING

Gastritis, Ulcer, Mallory-Weiss

Biliary (Haemobilia), Large varices, Esophagitis, Entero-aortic fistula, Duodenitis, IBD, Neovascularisation, Gastric carcinoma

Ng tube removal post op

Ps

Peristalsis, Passage of flatus, Paucity of aspirate, Patient Peckish

Leg Ulcers

VAIN PAIN

Venous, Arterial, Infection (e.g. syphilis), Neuropathic

Pressure sores, Arthritis (e.g. RA, PAN), Injury / IDB, Neoplastic

Prophylactic antibiotics

APPLE

Amputations, Prosthesis, Penetrating wounds, Large bowel surg, Endocarditis

Small bowel obstruction

SHAVIT

Stone, Hernia, Adhesions, Volvulus, Intussusception, Tumour

Pancreatitis

GET SMASHED

Gallstones / Gravid, Ethanol, Trauma (incl. surgery)
Steroids, Mumps, Autoimmune (PAN), Scorpion bites, Hyper-lipid / calcium / hypothermia,
ERCP, Drugs (azothioprine, thiazide diuretics)

Ranson's criteria for acute pancreatitis:

ACUTELY (What A GAL)	> 48 hours (FUCH BO)
↑WCC (>15)	↑Fluid sequestered (>6L)
↑Age (>55)	↑Urea (>10mmol)
↑Glu (10mmol)	↓Ca ²⁺ (<2mmol)
↑AST (>250iu/l)	↓Haematocrit (>10%)
↑LDH (>350iu/l)	↑Base XS (>-4)
	↓O ₂ (<8kPa)

Glasgow-Imrie Score for Acute Pancreatitis, taken at admission (score 0-9)

WCC >15 x 10⁹/l

Age >55 yrs

Glu >10 mmol/l

ALT / ALT >100 units / l

LDH > 600 units / l

Ca²⁺ < 2 mmol/l

PaO₂ <8kPa

Urea >16 mmol/l

Alb < 32 g/l

Please remember that serum Amylase is an acute phase reactive protein. It can go up as well as down in the first 48 hours. The level measured bears no correlation to the severity of the acute pancreatic process. Always treat the patient and not the blood result.