

SUSPICION OF DIVERTICULITIS

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| <p>Professional: Nurse working at the Access Clinic of the CIUSSS de l'Ouest-de-l'île-de-Montréal</p> <p>Targeted user: Patient suspected of having diverticulitis who is referred by MD/ NP</p> <p>Indication: Patient meets all general admission criteria for the Access Clinic (AC)</p> | <p>Specific inclusion criteria: Patient is experiencing NEW LLQ (left lower quadrant) pain >24h. Note - the following symptoms are common:</p> <ul style="list-style-type: none"> - Nausea / vomiting - Fever > 37.5°C - Constipation or change in bowel habits <p>Prescription: Referring MD/ NP is responsible for prescribing antibiotic therapy and analgesia</p> | <p>Specific exclusion criteria:</p> <ul style="list-style-type: none"> - Signs of shock : hypotension, tachycardia, desaturation - Intense pain not relieved by PO analgesia - Signs of peritonitis : Abdominal rigidity, rebound tenderness upon abdominal palpation, absence of peristalsis | <p>Complicated diverticulitis:</p> <ul style="list-style-type: none"> - Pericolonic abscess - Intestinal obstruction - Extracolonic fistula - Peritonitis - Extra colonic free-air, including microperforation |
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CLINICAL ALERT

If unable to meet the delay for the consultation, the patient must be reassessed by the Access Clinic professional.

CLINICAL ALERT

If patient condition worsens at any time:
Send patient to ER.

