



Target USMLE

ABDOMEN CASE

SAMPLE CORRECTED PATIENT NOTES

Note: Red fonts are Target's corrections

Black fonts are original student written notes

History :

HPI -46 yo F comes to clinic with c/o pain in the R side of upper abdomen x 3hrs. Started after intake of pizza, progressively increasing, 7/10 ,sharp pain that radiates to back, lasts 5 min , intermittent, aggravated on food intake, no relieving factors. nausea +, one episode of non-bilious, non-bloody vomiting, a handful. **No history of regurgitation of undigested food.** No fever. No **jaundice.** **No** abdominal distension, **loss of weight or appetite.** **No change in bowel and bladder habits.** No h/o of blood in stools. No h/o chest pain/SOB/cough/headache/ expectoration or leg swelling. OBS/GYN - irregular periods for past 2 years. LMP- 2 months back. 2 children, delivered by normal labor.ROS- none except above ALLERGIES-none MEDICATION –none PMH - had similar episode 3 yrs back PSH- none SH -takes fatty diet. non smoker. Drinks 2 glasses wine daily ETOH x 10 yrs CAGE 0/4. No illicit drugs/tatoos/blood transfusions FH- no similar complaints in family members

Physical Examination :

GE- comfortable at rest. not in acute distress VS- WNL except BP 132/72mmHg/ HEENT- atraumatic, normocephalic. Eyes- no icterus. ENT- normal.ABD- not distended. no scars, dilated veins. BS + no bruit. no rigidity. tenderness in the R upper quadrant. No rebound tenderness Murphy's sign- +ve No CVA tenderness. Heart- RRR, S1/S2 normal no murmur, rubs, gallop Chest: clear breath sounds heard both sides. No rales/rhonchi

Diagnosis # 1		Acute Cholecystitis
	History	PE
1.	pain in the R upper quadrant	tenderness in the R upper quadrant
2.	Vomiting	Murphy's sign
3.	Fast food diet (precipitated by fatty food)	No icterus

Diagnosis #2	Choledocholithiasis
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	History	PE
1.	pain in the R upper quadrant	tenderness in the R upper quadrant
2.	vomiting	no icterus
3.	fast food diet	
	previous episode in past	

Diagnosis # 3	Acute pancreatitis
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	History	PE
1.	pain in the R upper quadrant radiating to back (when you don't have a 3rd point why put it as a single point. Made it a 3rd point)	tenderness in the R upper quadrant
2.	alcohol 2 glasses/day for 10 years	no icterus
3.	Pain radiates to back	

Diagnostic Study/Studies	
1.	CBC with differential (can be last – wouldn't help to point any particular DD except signs of inflammation)
2.	Bilirubin, AST,ALT,GGT, Alkaline phosphatase (Liver function test , LFT)
3.	serum amylase, lipase
4.	US abdomen (can be first, to r/o choledocholithiasis, hepatomegaly , mass upper abdomen etc)

