

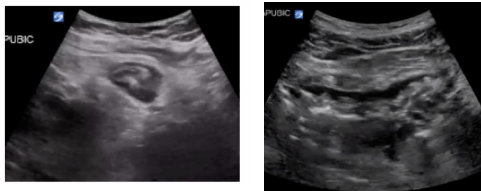
## Case 1

29 yo F with PMH of constipation and ovarian cysts presented with **bilateral flank pain for one week, along with fever and vomiting**. No melena, hematochezia, dysuria or hematuria.

PE revealed **fever (98.2) and tachycardia** of 101. Left paraumbilical and **LLQ tenderness**, guarding no rebounding. No mass.

Lab: **WBC 15**. Na 133. Bicarb 28. UA neg

POCUS: target sign in the colon. Thickening bowel wall with enhancement in the around fat. Echogenic in the luminal area



Dx: Diverticulitis

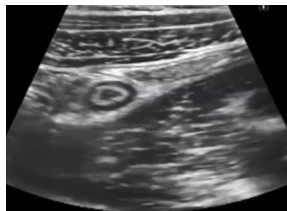
## Case 2

23 yo M with **abd pain for 5/10 in intensity for 3 days** in the right side. The **pain was acute and colicky w/o radiation associated with nausea**, no vomiting and loss of appetite for 3 days. Denies bowel or urinary Sx. No previous abd Sx, no family or medical history.

PE: **T 38.8, HR 110, BP 100/78, SpO2 99%**. Soft abd with **significant tenderness and guarding in the right iliac fossa**. No rebounding. Neg rovsing, psoas or obturator sign.

Lab: **Wbc 12.9 (N#74%)** hg 12 Plt 350; Cr 1.2 (bs 0.7-1.2)  
UA: **strip blood 5+, RBC/HPF 10, WBC/HPF 5, few epithelial cell**

POCUS: inflamed appendix, thickened bowel wall.



Dx: Appendicitis

## Teaching Points (Maryana):

### Case 01: Bilateral flank pain -> left lower quadrant

- Constipation causing bladder obstruction
- Gynecological: ovarian torsion, ectopic pregnancy, endometriosis
- Intestinal causes: diverticulitis, bowel obstruction
- **WBC 15, other labs wnl, UA negative: more exams are necessary**
- **Ultrasound in the abdomen: is not only useful for paracentesis**
- **Gold standard exam: CT, but POCUS can be faster and reveal diagnosis in some cases**
- **Diverticulosis in a young patient: bad eating habits**

Dx: Diverticulitis

### Case 02: abdominal pain for three days

- Appendicitis, hernia, diverticulitis, kidney stone
- Male patient: consider testicular torsion
- Rovsing sign: negative in this case -> it does not rule out appendicitis
- POCUS hint: put the probe where the patient says the pain is worse
- Image finding: periappendiceal fluid and inflammation

Dx: Appendicitis