acute abdominal pain	
possible causes of abdominal pain in a newborn	Intestinal obstructions e.g volvulus, Hirshsprung, pyloric stenosis Hernia Trauma (during birth) Peritonitis (nectr- otizing enterocolitis, GI perforation) Gastroesophageal reflux
possible causes of abdominal pain in an infant (<2 years)	Constipation Acute gastroenteritis Hernia, volvulus, intussusception Colic Toxin ingestion Trauma Respiratory illness
possible causes of abdominal pain in a child	Acute gastroenteritis Constipation, Intestinal obstruction Testicular torsion Respiratory illness/pneumonia Mesenteric adenitis UTI, Toxin ingestion/food poisoning, Trauma, HSP Appendicitis, pancreatitis, cholecystitis
e possible causes of abdominal pain in adolescent	Gastroenteritis, Trauma, dysmenorrheoa, PIV, ovarian torsion/cysts, constipation, pregnancy, testicular tosion, IBD/IBS, functional
red flags in abdomminal pain	Bilious vomiting Bloody stool or emesis Night time waking with abdominal pain Haemodynamic instability Weight loss persistent pain dysphagia
queations asked for recurrent abdominal pain	Dietary history particularly in young children Reoccurrence? PMH Sexual hx in females FH especially IBS/IBD Travel hx Social/pcyhiatric hx for potential stressors
Non-specific acute abdominal pain	mesenteric adenitis-Mesenteric adenitis is often diagnosed in those children in whom large mesen- teric nodes are observed and whose appendix is normal,pain is less severe than in appendicitis, and tenderness in the right iliac fossa is varia- ble- also constipation
malrotation	first 1–3 days of life with intestinal obstruction from Ladd bands obstructing the duodenum or volvulus

respiratory distress synrome	respiratory distress synrome (cont)

RDS risk factors	37 weeks (more common/severewith greater prematurity) Mother with insulin-dependentdiabetes Multiple birth LUSCS Mec at birth Cold stress Asphyxia Precipitous delivery Previously affected infant Male infant
RDS signs	Grunting Retractions: supersternal, intercostal and subcostal Cyanosis Tachypnoea (RR >60) Tachycardia (HR >160) Nasal flaring Apnoea
	Pneumothorax Transient tachypnoea of the newborn Infection/pneumonia Meconium aspiration syndrome Respiratory distress syndrome (HMD) Cardiac disease

differential diagnosis for RDS	transient tacypnea of newborn,aspiration pneumonia-meconium aspirattion-oneumothorax-diaphragmatic hernia-cyanotic heart disease
stages of lung development	1. embryonic 2. pseudoglandular 3. canalicular 4. saccular (terminal sac) 5. alveolar period
pseudoglandular stage (5 facts	from 5-16 weeks of gestation
saccular stage	air exchange starts from here at 26-36 weeks
complications of RDS	divided into early and late complications
early complications	septicemia-pulmonary hhemmorhage--apnea pneumothorax intracranial hemmorhage-pneuminonia
chronic complications	BPD -NEC-rop-periventricular leukomalacia-PDA can also occur

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