

Imaging – Abdomen

See separate section for [Renal Tract](#)

Indications:	Not Indicated Routinely:
<p>Abdominal X-Ray (AXR)</p> <ul style="list-style-type: none">• Acute abdominal pain ? perforated viscus ? obstruction (+CXR erect)• Acute exacerbation of inflammatory bowel disease• ? Ingested radiopaque foreign body if likely to be dangerous – e.g. battery• Acute pancreatitis (+CXR) <p>Ultrasound</p> <ul style="list-style-type: none">• Palpable abdominal mass (indicate if mass is lower or upper abdomen as patient preparation may be different) <p>- (For abdominal wall masses see section on soft tissue/MSK Lumps and bumps)</p> <ul style="list-style-type: none">• Jaundice• Suspected gallbladder disease• Suspected pancreatic disease• ? Abdominal aortic aneurysm• Post cholecystectomy pain• ? Hepatic metastases• Persistent unexplained abnormal LFTs	<p>Not Indicated Routinely:</p> <ul style="list-style-type: none">• Constipation – AXR may be useful in geriatric and psychiatric patients• Non specific abdominal pain• Abdominal bloating• Dysphagia – See Dysphagia• Heartburn/?hiatus hernia – Barium studies not indicated - see Dyspepsia• Dyspepsia – Barium studies not indicated see Dyspepsia• Intestinal blood loss – Barium studies not indicated – see GI guidelines• Suspected small bowel disease – Barium studies not indicated – see GI guidelines• Suspected colonic pathology – Barium studies not indicated – see GI guidelines

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