Examination for Appendicitis*

Wash your hands & Introduce the exam to your patient

Positioning & Draping

• Position the patient so that their abdominal muscles are relaxed. Therefore, the patient:
  o is lying flat
  o has their arms at their sides
  o has a pillow under their head

• Drape so that the abdomen is visible from the nipples to at least the Anterior Superior Iliac Spines (ASIS’s)

Inspection

• Look for:
  o masses, scars, and lesions (trauma)
  o atrophy/hypertrophy
  o discolouration
  o swelling
  o muscle bulk/symmetry
  o distended abdomen

Diagnostic approach

• Prototypical clinical progression of appendicitis
  o Low grade fever → Dull, constant, periumbilical pain → Anorexia, nausea, vomiting → Well-localized, constant pain over McBurney’s point

• A “3-test” surgical exam
  o Point tenderness
    ▪ ask the patient “Point to your pain”
    ▪ they will point to McBurney’s point
  o Cough tenderness
    ▪ tell the patient to cough. Ask “Where does it hurt?”
    ▪ they will point to McBurney’s point
o Attempt to exam the area of pain
  § the Right Lower Quadrant (RLQ) will be guarded/rigid

• **Summary**
  o progression of symptoms + point tenderness, cough tenderness, & guarding is prototypical for appendicitis
  o be aware that this is the PROTOTYPICAL case and is often not seen with appendicitis!

• **Other Signs of appendicitis**
  o Rovsing's sign
    § palpate in the Left Lower Quadrant (LLQ)
    § if pain is felt in RLQ, this is suggestive of appendicitis
  o Psoas sign
    § pain on extension of the Right thigh
    § suggestive of an inflamed retro-cecal appendix
  o Obturator sign
    § Pain on internal rotation of the Right thigh at the hip
    § Suggestive of an inflamed pelvic appendix
  o Rebound tenderness
    § Increased pain on quick release of deep abdominal palpation
    § Suggestive of peritonitis
  o Tenderness on Digital rectal examination
    § Suggestive of an inflamed appendix inferior to the cecum

**PLEASE NOTE:**

- A digital rectal exam should be performed with ALL examinations involving the abdomen! (This is taught in ASCM2)

- *The examination for appendicitis is presented as a clinical vista to illustrate how a patient’s history and physical examination can be linked to make a diagnosis. Although you must know how to elicit the signs needed to diagnose appendicitis, as 1st and 2nd year students you are NOT required to know this exam in this much detail… that’s for you to learn when you are a clinical clerk!*