

RUQ Pain  
8/13/2017

Know these 5 diagnoses: cholelithiasis +/- biliary colic, cholecystitis, choledocholithiasis, cholangitis, and gallstone pancreatitis

1. **Cholelithiasis** = gallstone in the gallbladder  
**Biliary colic** = episodes of spasmy RUQ pain that resolves (intermittent cystic duct obstruction)
  - RUQ US -> shows cholelithiasis
  - Pt gets surgery f/u in clinic -> *elective lap chole*
2. **Cholecystitis** = inflammation of gallbladder
  - Constant cystic duct obstruction with back-pressure, ischemia, inflammation
  - RUQ US -> GB wall thickening, pericholecystic fluid, and cholelithiasis
  - Pt gets *urgent cholecystectomy*
3. **Choledocholithiasis** = constant common bile duct obstruction by stone
  - Persistent pain + liver outflow is blocked -> increased LFTs
  - At risk for cholangitis
  - RUQ US may not show stone, but may show CBD dilation!
  - Tx = *ERCP* (endoscopic retrograde cholangiopancreatography)
4. **Cholangitis** = infection of the bile duct
  - Charcot's Triad = RUQ pain, fever, jaundice
  - Pt needs *ERCP, fluids, and abx!*
5. **Gallstone pancreatitis**
  - CBD obstructing stone also obstructs main pancreatic duct
  - Same stuff as above, but also elevated lipase
  - Tx = ERCP, fluids, pain meds

#### Quick Facts

- Classically biliary colic wakes people up from sleep
- 15% of the population have gallstones and only 1% have complications from them
- Risk factors for gallstones: fat, female, fertile, forty
- Don't miss these orders for RUQ pain: LFT, RUQ ultrasound, lipase
- Also know Reynaud's Pentad: Fever, RUQ pain, jaundice, altered mental status, and signs of shock