

Appendix Table 1: Characteristics, by clinical indicator, 2012 - 2013

Indicator ID	Indicator Description	Age Inclusion Criteria	No. of Sites				Level of Evidence	Phase of Care	Quality of Care
			GP	SP	ED	IP			
ABDO01	Children who presented with acute abdominal pain had their pain history documented (e.g. onset, location, severity, progression, character).	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO02	Children who presented with acute abdominal pain were screened for other associated features (e.g. fever, cough, vomiting, pallor, lethargy, anorexia).	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO03	Children who presented with acute abdominal pain were assessed for possible urinary tract infection (e.g. offensive urine, dysuria, frequency).	1 - 15 years	57	0	34	27	Consensus-based recommendation	Diagnosis	Underuse
ABDO04	Children who presented with acute abdominal pain had their gynaecological history documented.	13 - 15 years	14	0	26	11	Consensus-based recommendation	Diagnosis	Underuse
ABDO05	Children who presented with acute abdominal pain had their history of bowel movements documented (e.g. stool pattern, stool quality [size, hard/soft, odour], constipation, diarrhoea).	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO06	Children who presented with acute abdominal pain had their past medical history documented (e.g. surgical, medical, family, and travel).	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO07	Children who presented with acute abdominal pain had their vital signs (including HR and Temp) documented.	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO08	Children who presented with acute abdominal pain had the severity of their dehydration (e.g. absent, mild, moderate or severe dehydration) documented.	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO09	Children who presented with acute abdominal pain received an abdominal assessment for tenderness (e.g. local or generalised tenderness).	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse

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ABDO10	Children who presented with acute abdominal pain received an abdominal assessment for signs of acute abdomen (e.g. rebound, guarding or rigidity).	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO11	Children who presented with acute abdominal pain had other abdominal findings (e.g. masses, distention, palpable faeces, bowel sounds) documented.	1 - 15 years	57	0	34	28	Consensus-based recommendation	Diagnosis	Underuse
ABDO12	Children who presented with acute abdominal pain received an assessment of their inguinoscrotal area (e.g. swelling or tenderness).	1 - 15 years	44	0	33	21	Consensus-based recommendation	Diagnosis	Underuse
ABDO13	Children who presented with non-traumatic acute abdominal pain who do not require exclusion of a differential diagnosis of acute obstruction or perforation, did not receive an abdominal x-ray or CT scan.	1 - 15 years	56	0	34	21	Consensus-based recommendation	Diagnosis	Overuse
ABDO14	Children who presented with non-traumatic acute abdominal pain, and NO bile (yellow or green) stained vomit, did not receive an abdominal x-ray or CT scan.	1 - 15 years	57	0	34	23	Consensus-based recommendation	Diagnosis	Overuse
ABDO15	Children who presented with non-traumatic acute abdominal pain, and NO suspected ingestion of radiopaque foreign objects, did not receive an abdominal x-ray or CT scan.	1 - 15 years	57	0	34	24	Consensus-based recommendation	Diagnosis	Overuse
ABDO16	Children who presented with acute severe abdominal pain were administered IV morphine or intranasal fentanyl.	1 - 15 years	NA	NA	30	16	Grade A	Treatment	Underuse
ABDO17	Children who presented with acute mild abdominal pain, who require analgesia, were administered paracetamol or ibuprofen.	1 - 15 years	39	0	34	22	Grade A	Treatment	Underuse
ABDO18	Children who presented with acute abdominal pain who were moderately dehydrated had their blood sugar measured.	1 - 15 years	4	0	12	4	Consensus-based recommendation	Treatment	Underuse

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ABDO19	Children who presented with acute abdominal pain who were severely dehydrated OR shocked, had their electrolytes measured.	1 - 15 years	1	0	2	1	Consensus-based recommendation	Treatment	Underuse
ABDO20	Children who presented with acute abdominal pain who were severely dehydrated OR shocked, had their blood sugar measured.	1 - 15 years	1	0	1	1	Consensus-based recommendation	Treatment	Underuse
ABDO21	Children who presented with acute abdominal pain who were severely dehydrated OR shocked, received fluid resuscitation (initial bolus 20 ml/kg normal saline).	1 - 15 years	NA	NA	1	1	Consensus-based recommendation	Treatment	Underuse

Legend: ID=Identifier; GP=General Practitioner; SP=Specialist Pediatrician; ED=Emergency Department; IP=Inpatient; HR=Heart Rate; Temp=Temperature; CT=Computed Tomography; IV=Intravenous.