Physicians' Abdominal Auscultation: A multi-rater agreement study

Background: Abdominal auscultation has an important position in the physical examination of the abdomen. Little is known about rater agreement. The aim of this study was to describe rater agreement and thus, indirectly, the value of the examination. Methods: In a semi-virtual setup 12 recordings of the intestinal sounds from 8 patients with acute abdominal pain and 4 healthy volunteers were presented to 100 physicians. The physicians were asked to characterize the intestinal sounds as normal or pathologic. Fisher's exact test was used for comparison between groups of physicians. Results: Overall, 72% of the answers with regard to healthy volunteers concluded that the sounds were normal (equalling agreement), whereas 64% of answers with regard to intestinal obstruction concluded that the sounds were pathologic (but agreement was higher due to agreement on wrong diagnosis in one case). Bowel sounds from colonic obstruction were diagnosed as pathologic in 94 of 100 answers. In peritonitis disagreement dominated. Specialists in gastrointestinal medicine diagnosed bowel obstruction significantly more poorly than nonspecialists in gastrointestinal surgery (P < 0.05). Conclusion: Rater agreement in normal subjects and in patients with intestinal obstruction was acceptable for a clinical examination. Abdominal auscultation is a helpful clinical examination in patients with acute abdominal pain.

General information
State: Published
Organisations: Department of Information Technology, DSP-Consultant, Copenhagen University Hospital
Contributors: John, G., Peter, K., Andersen, O. T., Boel, P. S., Steen, B.
Pages: 773-777
Publication date: 1998
Peer-reviewed: Yes

Publication information
Journal: Scandinavian Journal of Gastroenterology
Volume: 33
Issue number: 7
ISSN (Print): 0036-5521
Ratings:
BFI (2018): BFI-level 1
Web of Science (2018): Indexed yes
BFI (2017): BFI-level 1
Scopus rating (2017): CiteScore 2.35 SJR 1.226 SNIP 0.91
Web of Science (2017): Impact factor 2.629
Web of Science (2017): Indexed yes
BFI (2016): BFI-level 1
Scopus rating (2016): CiteScore 2.38 SJR 1.108 SNIP 0.918
Web of Science (2016): Impact factor 2.526
BFI (2015): BFI-level 1
Scopus rating (2015): CiteScore 2.19 SJR 0.947 SNIP 0.764
Web of Science (2015): Impact factor 2.199
Web of Science (2015): Indexed yes
BFI (2014): BFI-level 1
Scopus rating (2014): CiteScore 2.44 SJR 1.072 SNIP 0.999
Web of Science (2014): Impact factor 2.361
BFI (2013): BFI-level 1
Scopus rating (2013): CiteScore 2.33 SJR 1.08 SNIP 0.987
Web of Science (2013): Impact factor 2.329
ISI indexed (2013): ISI indexed yes
Web of Science (2013): Indexed yes
BFI (2012): BFI-level 1
Scopus rating (2012): CiteScore 2.23 SJR 1.064 SNIP 1.023
Web of Science (2012): Impact factor 2.156
ISI indexed (2012): ISI indexed yes
Web of Science (2012): Indexed yes
BFI (2011): BFI-level 1
Scopus rating (2011): CiteScore 1.97 SJR 0.922 SNIP 0.916
Web of Science (2011): Impact factor 2.019
ISI indexed (2011): ISI indexed yes
BFI (2010): BFI-level 1
Scopus rating (2010): SJR 0.81 SNIP 0.824
Web of Science (2010): Impact factor 1.966
BFI (2009): BFI-level 1
Scopus rating (2009): SJR 0.874 SNIP 0.823
BFI (2008): BFI-level 1
Scopus rating (2008): SJR 0.915 SNIP 0.882
Scopus rating (2007): SJR 0.846 SNIP 0.92
Scopus rating (2006): SJR 0.829 SNIP 0.905
Scopus rating (2005): SJR 0.916 SNIP 0.958
Scopus rating (2004): SJR 0.886 SNIP 0.932
Scopus rating (2003): SJR 0.864 SNIP 1.009
Web of Science (2003): Indexed yes
Scopus rating (2002): SJR 0.796 SNIP 1.003
Web of Science (2002): Indexed yes
Scopus rating (2001): SJR 0.861 SNIP 0.935
Web of Science (2001): Indexed yes
Scopus rating (2000): SJR 0.819 SNIP 1.051
Scopus rating (1999): SJR 0.795 SNIP 1.097
Original language: English
Source: orbit
Source-ID: 167891
Research output: Research - peer-review › Journal article – Annual report year: 1998