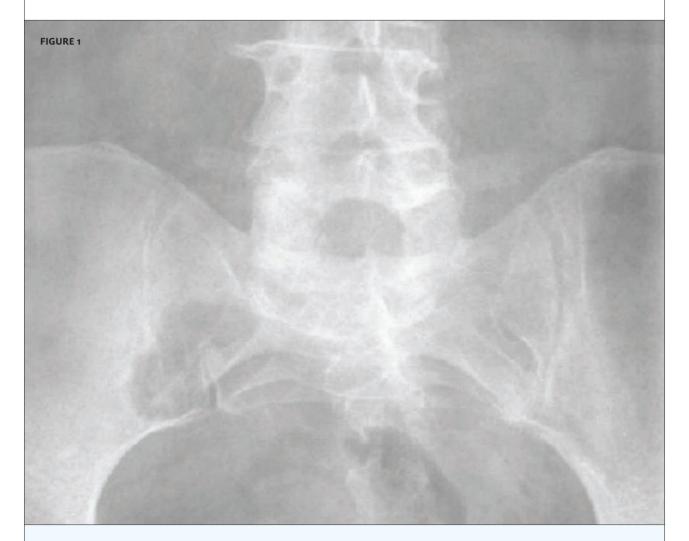
In each issue, *JUCM* will challenge your diagnostic acumen with a glimpse of x-rays, electrocardiograms, and photographs of dermatologic conditions that real urgent care patients have presented with.

If you would like to submit a case for consideration, please e-mail the relevant materials and presenting information to *editor@jucm.com*.

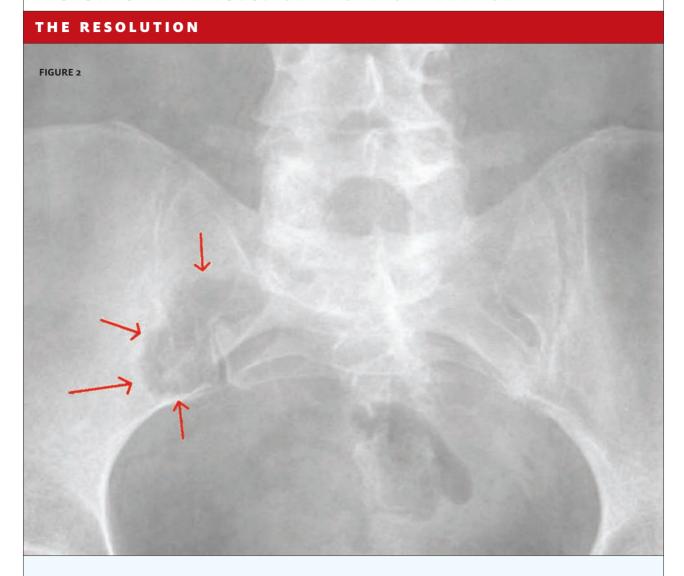


The patient is a 55-year-old female who experienced a blow to the back when she fell while riding a bus. She complains of pain in her neck, shoulder, and back.

On examination, you find that her vitals are stable and she has no significant past medical history.

View the x-ray taken (**Figure 1**) and consider what your diagnosis and next steps would be. Resolution of the case is described on the next page. (Hint: this is an incidental finding.)

## INSIGHTS IN IMAGES: CLINICAL CHALLENGE



The x-ray shows a lesion over the right ilium, as marked by the arrows.

Initially, this was thought to be overlying gas. However, closer attention reveals that the bone abutting the lesion is slightly thickened. In addition, the edge of the lesion ends at the lower border of the ilium (whereas a gas bubble would have a separate border, distinct from that of the bone).

The radiologist's opinion was that this was an osteolytic lesion that required CT for further follow-up.

The fact that this was a random finding teaches a valuable lesson: Do a complete, thorough reading of all films, regardless of the focused complaint.

Acknowledgment: Case presented by Nahum Kovalski, BSc, MDCM