

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 present-

ing information to editor@jucm.com.



The patient is a 93-year-old female who lost her balance and twisted her ankle. She presents with significant pain in the ankle and swelling over her lateral ankle, though she is able to bear weight.

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.

INSIGHTS IN IMAGES: CLINICAL CHALLENGE: CASE 1

THE RESOLUTION



In this case, the x-ray was directed to the ankle due to the nature of the patient's complaint, but the pathology was in the foot. This is a proximal fifth metatarsal fracture involving the tuberosity.

It is difficult to assess on this view whether or not there is involvement of the diaphysis. Distinguishing fifth metatarsal "shaft" fractures from tuberosity fractures is critical to determining stability. Fifth metatarsal shaft fractures have a high incidence of malunion, and orthopedic consultation is mandatory. Tuberosity fractures can be managed with a compression dressing and a post-op shoe.

This case highlights the importance of ensuring appropriate films are obtained based on mechanism of injury and exam. It also demonstrates that pathology can be elsewhere from the location of the primary complaint and findings.

Many urgent care patients are triaged to x-ray prior to physician evaluation. A full set of foot films would be indicated in this case.

Acknowledgment: Case presented by Nahum Kovalski, BSc, MDCM, Terem Emergency Medical Centers, Jerusalem, Israel.



INSIGHTS IN IMAGES CLINICAL CHALLENGE: CASE 2



The patient is a 2½-year-old child whose parents report recurrent episodes of abdominal pain without vomiting or diarrhea.

On exam, you note fullness of the abdomen.

View the image taken (Figure 1) and consider what your diagnosis and next steps would be.

Resolution of the case is described on the next page.

INSIGHTS IN IMAGES: CLINICAL CHALLENGE: CASE 2

THE RESOLUTION



A globus of the urinary bladder was suspected based on the opacification in the area of the pelvis and the displacement of the bowel.

The child underwent an ultrasound study that, in fact, displayed a significant urinary retention after voiding, as well as dilatation of the kidney collecting system (consistent with longer-standing retention).

The child was referred to hospital for a) assessment of renal function, b) alleviation of the urinary retention, and c) diagnosis of the source of the retention.

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