



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.

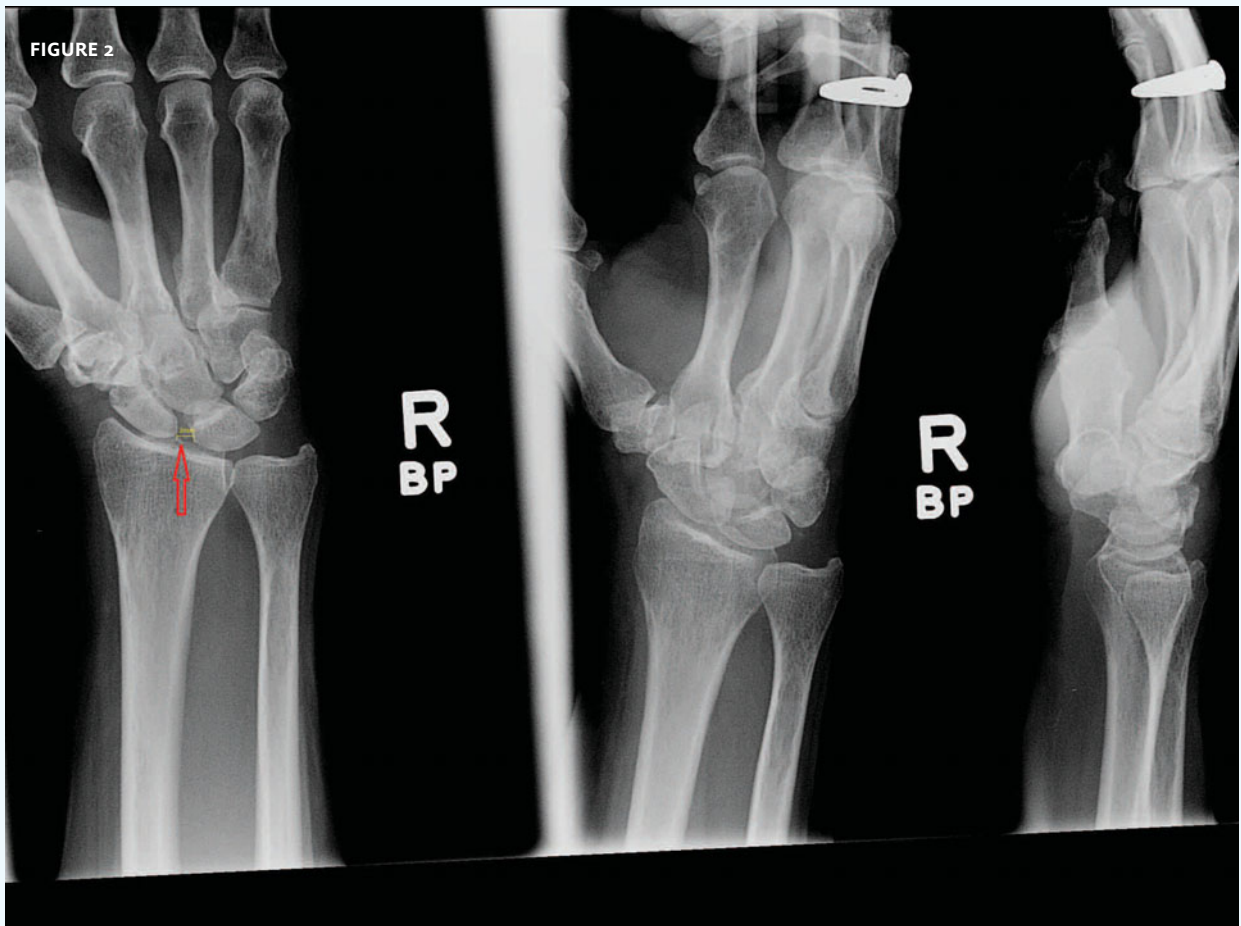


This patient presented with a wrist injury.

View the images taken (**Figure 1**) and consider what your diagnosis would be.

Resolution of the case is described on the next page.

THE RESOLUTION



Diagnosis: The x-rays reveal a scapholunate dissociation (arrow).

Scapholunate dissociation is a significant ligamentous wrist injury. Findings on x-ray can be subtle, but are important to identify. There is disruption of the scapholunate ligament with resultant instability. AP radiographs may demonstrate a widened scapholunate space (>3 mm), known as the Leon Spinks sign (gap-tooth appearance) (yellow line). This is best seen in clenched-fist views and PA views with the wrist in ulnar deviation.

Acknowledgement: Case presented by Teleradiology Specialists (<http://www.teleradiologyspecialists.com>)

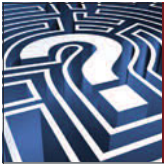


FIGURE 1



This x-ray was taken on a young basketball player with foot pain and no specific injury.

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

Resolution of the case is described on the next page.

THE RESOLUTION

FIGURE 2



Diagnosis: The x-ray reveals a stress fracture of the fifth metatarsal (arrow).

Most diaphyseal (shaft) fifth metatarsal stress fractures are caused by chronic overloading in a young athlete (usually from jumping and pivoting activities). Treatment is dependent on time to diagnosis, age, and level of future physical activity desired. Initial management is a splint, non-weight bearing with orthopedic consultation.

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