

Troublesome Foreign Bodies

Match the image to the case.

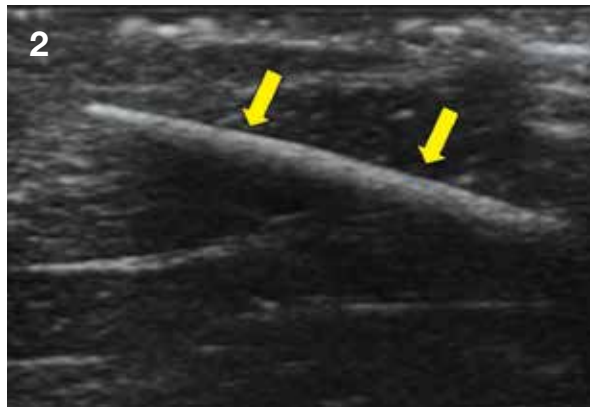
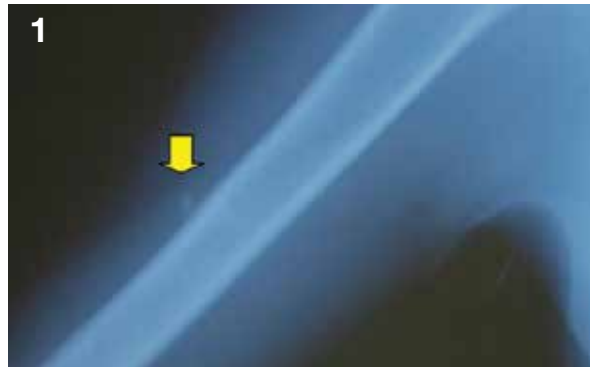
CASES

a. A 30-month-old boy, who is in obvious distress with a barking cough and croup-like symptoms but no fever, is brought by his mother for examination. History is unremarkable except for a recent choking episode. A radiograph is ordered.

b. A 13-year-old girl presents to urgent care with a laceration that occurred when she fell through a glass door. You note a 2-cm linear laceration, and radiography shows what appears to be a residual piece of glass at or near the site of the laceration.

c. This patient was punctured by a sago palm thorn, but believes that she removed the entire thorn at the time of injury. A small puncture wound is seen on physical exam, and x-rays are unremarkable. The patient is placed on a 10-day course of oral cephalexin. At follow-up, she has swelling in an adjacent finger.

d. A 2-year-old boy complains of pain after stepping on a toothpick. His father suspects that part of the toothpick remains embedded. Examination reveals a plantar puncture wound but no sign of a foreign body. Radiography shows no deformity. An ultrasound is ordered and reveals a toothpick segment.



For answers, see next issue; for discussion, go to www.medge.com/clinicianreviews/picture

Figure 3 and case text originally published in *Am J Orthop*. 2008;37(4):208-209. Answers to last month's "Picture This" (*Clinician Reviews*. 2017;27[4]:37): 1d, 2c, 3b, 4a