

# A Not-So-Old Football Injury

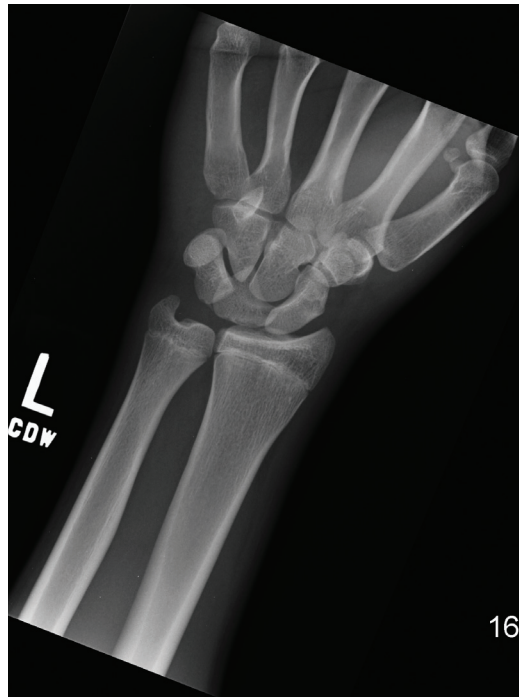
**A** 15-year-old boy presents for evaluation of left wrist pain. He says that two days ago, while playing football, he fell onto his outstretched left hand, which twisted upon impact with the ground. Immediately after the fall, he experienced severe pain. Since then, the pain has been constant, although it lessens to a moderate dull ache at rest and sharpens with activity.

He denies any numbness or tingling in the affected hand and wrist. There are no other areas of injury from the fall, nor is there significant medical history.

Physical exam identifies moderate left wrist swelling with focal tenderness over the volar aspect of the distal radius, extending to the wrist. The patient has limited active and passive flexion and extension of the left hand and wrist, along with reduced grip strength due to pain. There is mild navicular tenderness. Radial pulse is 2+, the hand is warm to the touch, and the skin is intact. Sensation is intact in all of the digits, which also demonstrate brisk capillary refill.

Radiographs of the left wrist are obtained. What is your impression?

*see answer on page 38 >>*



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>> *continued from page 32*

**ANSWER**

Imaging shows a ventral dislocation of the lunate. There is also a tiny avulsion fracture on the ulnar aspect of the adjacent triquetrum.

The patient was referred to orthopedics for a perilunate dislocation of the left wrist. He underwent successful closed reduction and was placed in a short arm cast for four weeks. **CR**

