

Case Presentation

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A 10-year-old patient presented to the Emergency Department complaining of left foot pain of sudden onset. This patient presented with an altered gait and weight-bearing on the lateral border of the foot. No history of previous trauma.

On physical exam, the dorsomedial area of her left midfoot was tender to palpation without any other relevant findings. Anterior-posterior (AP) and lateral X-rays of both feet were taken.

FINDINGS AND INTERPRETATION OF IMAGING STUDIES

Foot AP and lateral X-ray (Picture 1) evidences flattening of the left navicular bone, resembling a coin- or disc-shaped object. This finding is best visualized in the lateral projection. In addition, radiologic evaluation shows areas of sclerosis, rarefaction, loss of the normal bony trabecular architecture and even irregular fragmentation which was confirmed by CT imaging (Pictures 2-4). Right navicular showed no abnormalities.

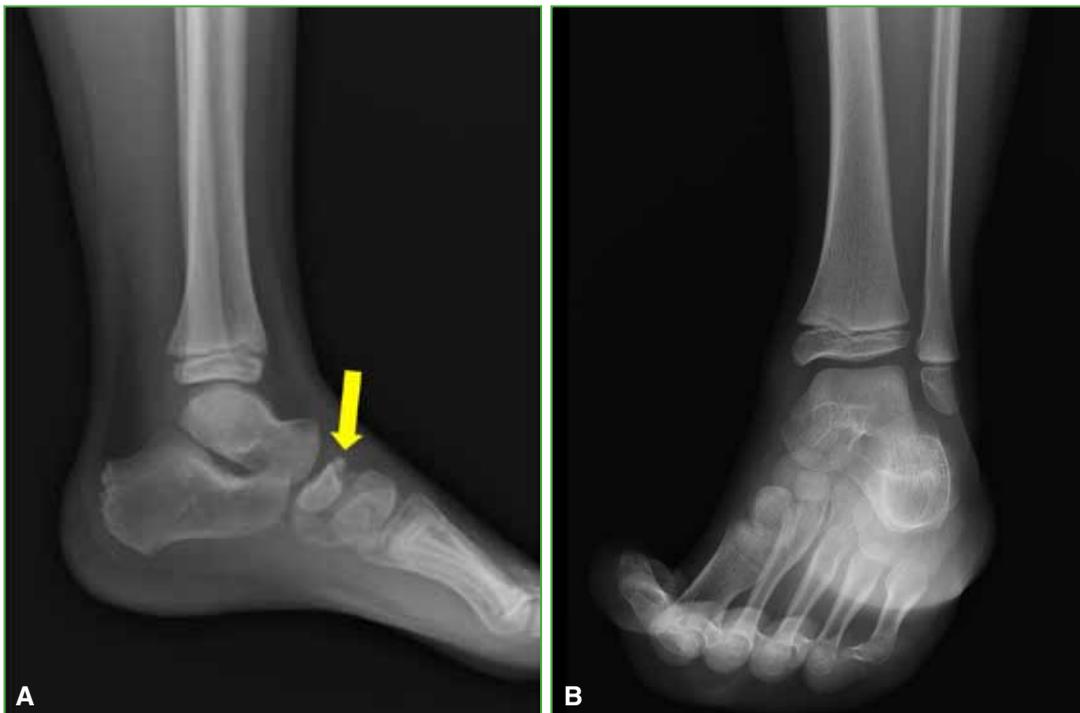


Figure 1. Lateral and oblique X-ray views of the left foot. Navicular morphological changes including fragmentation and sclerosis in its superior sector.

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Figure 2. Computed tomography sagittal reconstruction image of the left foot. CT imaging confirms fragmentation and sclerosis in the navicular superior sector.

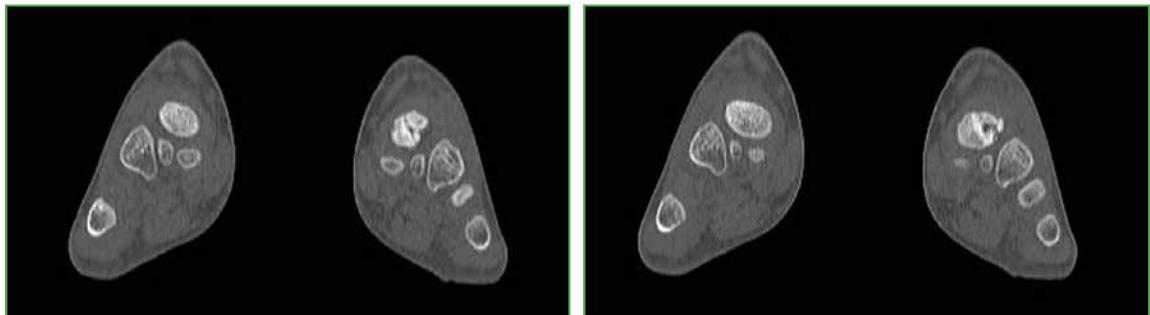


Figure 3. Computed tomography coronal reconstruction image of both feet. Compare the morphological characteristics of both navicular bones. Right navicular shows no abnormalities.



Figure 4. Computed tomography transverse section. Compare the morphological characteristics of both navicular bones. Right navicular shows no abnormalities.

Conflict of interest: Author claim he do not have any conflict of interest.