Case presentation

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Case resolution on page 858.

A 27-year-old male patient consulted for pain in the distal third of the right wrist, over the volar sector. He referred to having noticed progressive loss of strength in the last 3 months.

Upon physical examination, no tumors were palpable. There were no alterations of the pulses in dynamic maneuvers. The compression of the flexor tendons was painful and Tinel's sign was positive. Anteroposterior and lateral radiographs of the right wrist (Figure 1) and an ultrasound of the right wrist (Figure 2) were requested.



Figure 1. Radiograph of the right wrist, with normal characteristics.

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How to cite this article: Re R, Allende Nores C. Postgraduate Orthopedic Instruction - Imaging. Case presentation. Rev Asoc Argent Ortop Traumatol 2022;87(6):745-747. https://doi. org/10.15417/issn.1852-7434.2022.87.6.1605

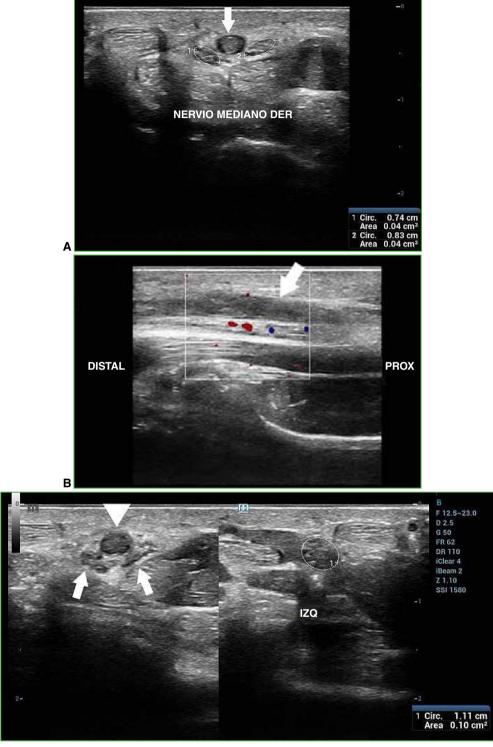


Figure 2. Ultrasound of the right wrist, with a high-frequency transducer. A. Cross section of the median nerve, showing its bifid morphology with a rounded tumor that separates it, with a hypoechoic signal (arrow). As a whole, the median nerve has a diameter of 8 mm². B. Longitudinal section of the wrist, showing a tubular tumor with echogenic material inside (arrow), without flow on Doppler examination. C. Cross section with comparative study of the median nerve. Right: study of the right wrist with the bifid median nerve (arrows) and the tumor in the middle (arrowhead). Left: The left median nerve is seen, with normal characteristics.

FINDINGS AND INTERPRETATION OF IMAGING STUDIES

The wrist radiograph (Figure 1) shows no alterations. The right wrist ultrasound (Figure 2) shows a bifid median nerve, with a rounded, hypoechoic tumor that separates it, with no flow on Doppler examination. No alterations are observed at the level of the radial or ulnar nerves. The flexor and extensor tendons are normal. There is no joint effusion.

The imaging examination is completed with magnetic resonance imaging of the right wrist.

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