

# Case Presentation

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A 50-year-old man came to the outpatient clinic for pain and functional impairment of the right ankle and hind-foot associated with regional global edema and restriction of subtalar mobility (**Figure 1**).



**Figure 1.** Clinical presentation of the patient 20 days after trauma. **A.** AP view. **B.** Lateral view.

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**How to cite this article:** Segura FP, Lucero Zudaire MP, Quiroz RC, Briggen P, Preisz SV, Álvarez Castillo JA. Postgraduate Orthopedic Instruction – Imaging. Case Presentation. *Rev Asoc Argent Ortop Traumatol* 2024;89(2):93-95. <https://doi.org/10.15417/issn.1852-7434.2024.89.2.1925>

He had sustained a right ankle injury from a fall from an enduro motorcycle 20 days before. He was treated at an emergency department on the day of the accident, where radiographs were taken (Figure 2). Without a certain diagnosis, immobilization with a walker boot and weight-bearing restriction were indicated. He was re-examined seven days after the trauma, and an MRI of the ankle and foot was requested (Figure 3), after which physiotherapy and progressive weight offloading were indicated. The pain progressively increased, and the edema and functional impairment persisted, so the patient decided to seek a second opinion.



**Figure 2.** Radiographs taken on admission. **A.** Foot, AP view. **B.** Foot, oblique view. **C.** Ankle, AP view. **D.** Ankle, lateral view.



**Figure 3.** MRI of ankle and foot requested in the first control, 7 days after the accident. **A.** Coronal section. **B.** Sagittal section.

## FINDINGS AND INTERPRETATION OF IMAGING STUDIES

The AP and oblique views of the foot revealed no images compatible with traumatic injuries. The AP ankle radiograph showed a solution of continuity in the distal lateral contour of the body of the talus (Figure 2C, yellow arrow). The lateral view of the ankle showed an incongruity in the anterior portion of the lateral process of the talus with loss of its symmetrical V-shaped contour (Figure 2D, yellow arrow).

MRI of the ankle and foot showed foci of post-traumatic bone edema in the plantar neck and talar body (Figure 3B, white arrows) and an oblique articular fracture with perifracture bone edema on the lateral process of the talus, involving the posterolateral subtalar joint without significant fragment displacement (Figure 3B, yellow arrow).

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