

# Case presentation

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- Name: Master. Edf
- Age: 7years
- Gender: male
- Address: virajpet, madikeri
- Parents name: Mr.Xy and Mrs. Qrs( age 28years, education: 10std)
- Date of admission: 21<sup>st</sup> may 2020
- Date of examination: 23<sup>rd</sup> may 2020
- History given by :patient's mother

# Chief complaints

- Pain In lower part right thigh since 5days
- Fever Since 2days

# History of presenting illness

- The boy was apparently fine 5 days ago and then he started complaining of pain in his lower part right thigh it was insidious in onset, since 5 days, it's gradually progressive, aggravates while walking and during night and it relieves after medication. He even complains of limping to left side while walking. It is a throbbing type of pain in lower part of right thigh. It is non radiating type of pain. It is associated with fever.
- Fever is sudden in onset, since 2 days, it is of continuous type and increases at night, it is high grade fever, and is associated with chills and reduces after taking medication.
- No history of Trauma, joint pain, rashes in skin, restriction of movement.

# Past history

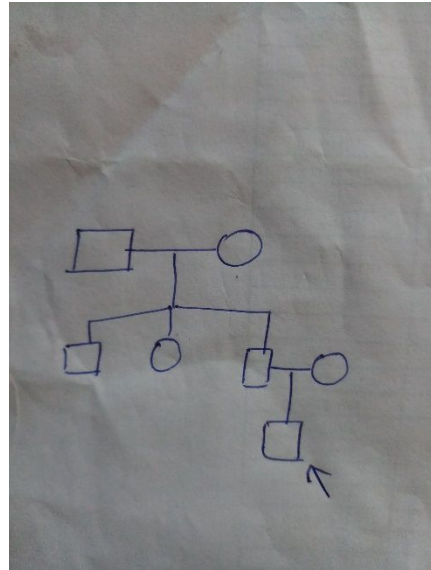
- History of ear infection 7 days ago and got treated.
- No history of similar complaints in past.
- No history of any surgery, typhoid, tuberculosis, pneumomonia, teeth extraction, sickle cell anemia.

# Personal history

- Diet: mixed
- Appetite : decreased
- Sleep:adequate
- Bowel and bladder habits : regular

# Family history

- No similar complains in the family



- Socioeconomic status:
- Father is a farmer, studied till 10th std
- Belongs to class 3 according to BG Prasad  
Classification
- Development history: Appropriate for the given age.
- Immunization history: Well immunized the child according to national Immunisation schedule.
- Allergic history: no history of allergy to any substance.



# Summary

- Here is 7 years old male child, comes with a complaints of pain since 5 days, which is a throbbing type of pain on lower part of right thigh near the knee joint and limping walk towards the left side. Fever since 2 days, continuous type of fever, increases at night, associated with chills and relieves after medication. There is a history of ear infection 7 days back and got treated. The child is born from non consanguinous marriage and is completely immunized
- From the history the boy may be a infectious case of bone.

# General physical examination

- Here is a child ,who is conscious,cooperative, well oriented to time, place and person, moderately built and well nourished.
- He walks limping towards left side
- Child is examined in supine position.
- Vitals
  1. Pulse rate: 86beats per min,right radial artery, normal character, regular rhythm, normal volume
  2. Respiratory rate:19cycles/min, abdomino thoracic type
  3. Blood pressure: 110/70mm of hg, right arm sitting position.
  4. Temperature: 38.5 degree celsius

- No pallor, icterus,clubbing,cyanosis,pedal edema and genralized lymphedenopathy
- Height=121 cm
- Weight = 22kg
- Bmi:15.27kg/m<sup>2</sup>

# Local examination

- Child is examined in a well lit room after obtaining an informed consent from his parents.
- Both the legs are exposed till umbilicus.

# Inspection

- Skin over the right thigh just above the knee joint appears to be is red, which is diffusely present above the knee joint.
- knee joint appears to be normal
- No such skeletal deformity seen
- No scars, or wound, or any colour changes in the skin.
- No muscle wasting and shortening of limbs

# Palpation

- There is local rise of temperature on right lower part of the thigh just above the knee joint.
- Presence of tenderness over that area
- All peripheral pulses were felt.
- Muscle power of both the limb is normal
- No bone irregularity
- No ulcers and sinuses
- No palpable lymph nodes

## Measurements:

1. Length of lower limbs are equal
2. Circumference of both the limbs are equal

## Movements in joint:

- *Hip joint: All movements were normal*
  - *Knee joint: Right knee joints movements could not be assessed as the patient presented with severe tenderness on passive movements*
1. Other limb appears to be normal

# Provisional diagnosis

- It is probably a case of acute osteomyelitis caused by hematogenous route of spread.









