

His Old Pain Is Back

You are called in for a neurosurgical consult of a 60-year-old man who underwent a lumbar decompression approximately 18 months ago. For the past several weeks, he has been experiencing worsening back pain that radiates down his left leg; at times, he has to use his cane and walker. The patient denies any acute injury or trauma preceding the pain; however, last night he slipped and fell in his bedroom, which made it much worse.

Medical history is significant for hypertension and hyperlipidemia. The patient responded well to his previous back surgery. The emergency department clinician is concerned that his symptoms may be caused by a new lumbar stenosis at an adjacent level.

On exam, you note a mildly obese male who appears uncomfortable but is in no



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obvious distress. His vital signs are stable. He has some tenderness within his left hip. Distally, his strength is good, and there is no evidence of neurovascular compromise. Internal and external rotation causes some discomfort.

A portable pelvic radiograph is obtained (shown). What is your impression?

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ANSWER

The radiograph demonstrates a fracture within the femoral neck. These types of fractures, which are slightly angulated and located at the base of the neck, are typically referred to as *basicervical femur fractures*.

Prompt orthopedic surgery consultation was obtained, and the patient underwent an open reduction and internal fixation of his fracture. **CR**

