

Anonymized Medical Record

Patient Demographics

Patient ID:

FH-005

Date of Birth:

2009-09-01 (Age: 15)

Gender:

Male

Ethnicity:

Caucasian

Chief Complaint (CC)

:

Right ankle pain after soccer game.

History of Present Illness (HPI)

:

15-year-old male presents with acute right ankle pain sustained during a soccer game yesterday. States he landed awkwardly after jumping for a header, felt a 'pop' in his ankle, and immediately experienced sharp pain. Unable to bear weight immediately. Applied ice and elevated, but swelling and bruising have developed. Pain 8/10 with movement. No prior ankle injuries.

Past Medical History (PMH)

:

- Healthy, no chronic medical conditions.
- Fractured left wrist at age 10 (healed without complications).

Medications

:

- Ibuprofen 400mg PRN (last dose 2 hours ago).

Allergies

:

None known.

Family History (FH)

:

- Mother: No significant medical history.

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- Father: History of knee ligament injury from sports.

Social History (SH)

:

High school student. Plays competitive soccer. Lives with parents and younger sister.

Review of Systems (ROS)

:

- Musculoskeletal: Right ankle pain, swelling, bruising. Denies numbness, tingling, or weakness in foot. Unable to bear weight.

- Constitutional: Denies fever, chills.

Physical Examination (PE)

:

- Vitals: Temp 98.6°F, HR 70, RR 16, BP 118/75.

- General: Appears in moderate pain, favoring right leg.

- Musculoskeletal:

- Right Ankle: Moderate swelling noted around lateral malleolus. Ecchymosis present. Tenderness to palpation over anterior talofibular ligament (ATFL) and calcaneofibular ligament (CFL). Pain with dorsiflexion and inversion. Limited range of motion due to pain and swelling. Unable to bear weight on affected limb. No bony tenderness along malleoli or base of 5th metatarsal (negative Ottawa ankle rules for fracture clinically).

- Capillary Refill: < 2 seconds in toes.

- Pulses: Dorsalis pedis and posterior tibial pulses 2+ bilaterally.

- Neurological: Intact sensation distal to injury.

Assessment

:

1. Acute right ankle sprain, likely moderate to severe (Grade II/III), involving lateral ligaments. Rule out fracture.

Plan

:

1. Imaging: X-ray right ankle (AP, Lateral, Oblique) to rule out fracture.

2. RICE Protocol: Reinforce Rest, Ice, Compression (ace bandage/brace), Elevation.

3. Medications: Continue Ibuprofen for pain and inflammation.

4. Orthopedic Referral: If fracture ruled out, refer to sports medicine or physical therapy for rehabilitation. If fracture present, refer to Orthopedics immediately.

5. Follow-up: Return to clinic in 1 week or sooner if pain significantly worsens or new symptoms develop. Crutches recommended for non-weight-bearing.