

PREOPERATIVE DIAGNOSIS: , Left distal both-bone forearm fracture.,POSTOPERATIVE DIAGNOSIS: , Left distal both-bone forearm fracture.,PROCEDURE:, Closed reduction with splint application with use of image intensifier.,INDICATIONS: , Mr. ABC is an 11-year-old boy who sustained a fall on 07/26/2008. Evaluation in the emergency department revealed both-bone forearm fracture. Considering the amount of angulation, it was determined that we should proceed with conscious sedation and closed reduction. After discussion with parents, verbal and written consent was obtained.,DESCRIPTION OF PROCEDURE: ,The patient was induced with propofol for conscious sedation via the emergency department staff. After it was confirmed that appropriate sedation had been reached, a longitudinal traction in conjunction with re-creation of the injury maneuver was applied reducing the fracture. Subsequently, this was confirmed with image intensification, a sugar-tong splint was applied and again reduction was confirmed with image intensifier. The patient was aroused from anesthesia and tolerated the procedure well. Post-reduction plain films revealed some anterior displacement of the distal fragment. At this time, it was determined this fracture proved to be unstable.,DISPOSITION: , After review of the reduction films, it appears that there is some element of fracture causing displacement. We will proceed to the operating room for open reduction and internal fixation versus closed reduction and percutaneous pinning as our operative schedule allows.,