

MEDICAL EDUCATION UNIT
Dr. PINNAMANENI SIDDHARTHA INSTITUTE OF MEDICAL SCIENCES &
RESEARCH FOUNDATION

Chinna Avutapalli, Vijayawada, Gannavaram Mandal, Krishna District- 521286, A.P.

Dispatch No.MEU/ 184 / 25

Date: 18.08.2025

ACADEMIC SOCIETY

CIRCULAR

There will be a **Clinico Pathological Conference** from the **Department of Orthopaedics on Wednesday 20.08.2025**, at Drs.Sudha & Nageswara Rao Telemedicine Hall in the college campus from **02.00pm** onwards. All the faculty members, Post Graduate students, Interns are requested to attend the meeting and participate in the discussion.

Chief Discussant: Dr. Shyam Chintha, M.S, Professor & HOD, Department of Orthopaedics, Govt. General Hospital, Machilipatnam.

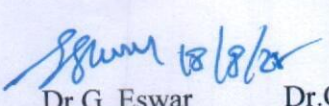
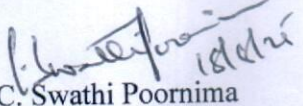
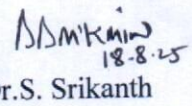
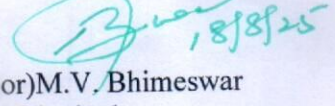
Subject Moderator: Dr.N. Krishna Prasad, M.S, Professor & HOD, Department of Orthopaedics.

Presented by: Dr.G. Phani Kumar, 2nd Year Post Graduate, Department of Orthopaedics.

Dr. Hima Bindu.K, MS, Associate Professor of General Surgery will moderate the session.

Dr.C. Nageswara Rao, M.S, F.R.C.S.C, F.A.C.S, Director General Will Chair the Session.

The details of the clinical case for discussion are enclosed.

 Dr.G. Eswar Convener, Acad. Society	 Dr.C. Swathi Poornima Coordinator, MEU	 Dr.S. Srikanth Vice-Principal(Acd)	 Dr.(Major)M.V. Bhimeswar Principal
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Copy to the Director General,

Copy to the Director,

Copy to the Medical Superintendent,

Copies to all HOD's with request to circulate among their staff and see that all the faculty, P.G's and interns attend the meeting,

Copy to All Notice boards,

Copy to Academic Section,

Copy to Audiovisual.

Note: Attendance is mandatory for all P.G's, Interns. They are instructed to come prepared and participate in the discussion.

ADOLESCENT HIP PAIN

CLINICO PATHOLOGICAL CONFERENCE FROM DEPARTMENT OF ORTHOPAEDICS

Chief complaint:

- 12-year-old boy with limping on left side since 5 months, following fall.

History of present illness:

- Previously normal, fell while playing football (5 months ago).
- Walked after incident but had significant left groin pain.
- Took analgesics and pain subsided after 1 month.
- Limp persisted; no radiating/rest/night pain.
- No fever, constitutional symptoms, or massage to hip.
- Able to squat, difficulty sitting cross-legged.

Past history:

- No childhood limp, major surgeries, or chronic illness.
- Normal developmental milestones.

General examination:

- Height: 150 cm, Weight: 50 kg.
- No craniofacial dysmorphism, thyroid swelling, or genital abnormalities.
- Axillary/pubis hair present.
- **Gait:** unassisted, bipedal, Trendelenburg gait.

Local examination:

- **Inspection:**
 - Supine, hip in external rotation (patella & foot outward).
 - ASIS at same level.
 - No scars, sinuses, swelling, veins.
 - Left lower limb shortened by 1 inch.
 - No muscle wasting.
- **Palpation:**
 - No temperature rise, joint line tenderness, or trochanteric irregularities.
 - Femoral pulses felt equally on both sides
 - No palpable lymph nodes.

Range of movements (Right vs Left):

- Flexion: 110° vs 70°
- Extension: 10° vs 0°
- Abduction: 40° vs 20°
- Adduction: 20° vs 20°

- External rotation: 40° vs 30°
- Internal rotation: 30° vs 0–10°
- SLR: 90° vs 70°

Measurements:

- Apparent length: 111 vs 109 cm
- True length: 90 vs 88.5 cm
- Bryant's triangle base: 8 vs 6.5 cm
- **Shortening:** Apparent 2 cm, True 1.5 cm (supra-trochanteric).

Special tests:

- Nelaton's line: GT above line (left).
- Shoemaker's line: Converge below umbilicus.
- Chiene's line: Converge left.
- Telescopy test: Negative.
- Trendelenburg test: Positive.
- Sectoral sign : positive

Other systems examination: no abnormality notes

Provisional diagnosis - ? 1. Slipped capital femoral epiphysis

? 2. Perthes disease

Blood investigations

Hemoglobin	14gm%
CRP	1mg/l
Rapid antigen (Covid)	Negative

TWBC	6.31×10^9 cells/uL
Serum T3	1.50ng/ml
Serum T4	5.20ng/ml

TSH	2.50uIU/ml
Serum calcium	10mg/dl

- One diagnostic test was done.