Introduction:
Tuberculosis is an infectious disease caused by a common bacteria known as *Mycobacterium tuberculosis* discovered by Robert Koch, a German Physician in 1882. Ranked as one of the most common causes of death in early decades. Immunocompromised patients have a greater risk of getting infected.

Case Report:
A case of a 12-year old healthy girl who was presented with left hip pain with no preceding trauma. Clinically, tenderness over the left hip and range of movement was limited due to pain. Left hip MRI done and findings in figure 1&2. Wound debridement and arthrotomy washout of left hip was done. Ilioinguinal and anterior surgical approach used in this case. Intraoperatively noted subperiosteal collection, cold abscess with thick pus and infected bone over the anterior and medial wall of left acetabulum. Histopathology examination reported as chronic granulomatous inflammation which is highly suggestive of Tuberculosis.

Discussions:
It is uncommon for a healthy child to have extrapulmonary tuberculosis infection. Good history taking, examination and relevant blood and radiological investigation should be done to achieve working diagnosis. MRI scan was performed to confirm the diagnosis and to decide on surgical approach. Surgical approach makes an important role in this case to identify different sites of lesion. Left Ilioinguinal approach was crucial to explore the lesion over anterior and medial wall of left acetabulum which is a rare site of Tuberculosis infection.

Conclusion:
Non-specific clinical presentation certainly is a challenge to diagnose skeletal tuberculosis, especially in immunocompromised patients. It can also mimic a variety of benign conditions and cause a delay in diagnosis and treatment when there is a lack of familiarity.

References: