

## Invisible Injury: The Enigma Of A Delayed Pediatric Clavicle Fracture Diagnosis.

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### INTRODUCTION:

Clavicle fractures are common in children, some fractures may not present with obvious signs at the initial consultation, leading to a delayed diagnosis. This case report describes a paediatric patient who initially appeared normal, with no evident signs of injury, but was later found to have a clavicle fracture during a follow-up visit.

### REPORT:

A 2-year-old boy presented to the emergency department after falling off while playing. He was evaluated for shoulder pain. Physical examination indicated full range of motion in the arm without focal tenderness. Despite the mechanism of injury, an X-ray was performed initially and no obvious fracture seen. Treat as soft tissue injury left shoulder.

The following 3 week, the patient returned for a follow-up appointment. During this visit, he reported persistent pain and some limited shoulder function. A repeat detailed physical examination revealed mild tenderness over the mid-clavicular region that had not been noted previously.

An X-ray was obtained and revealed a mid-shaft clavicle fracture, which was not visible on the initial assessment

### DISCUSSION:

Clavicular fractures in children are typically managed non-operatively, with a good prognosis. However, the potential for a missed diagnosis exists, especially in cases where clinical signs may not be prominent. This case emphasizes the significance of thorough follow-up in pediatric patients after trauma, as initial examinations may overlook subtle injuries that warrant further investigation.



Figure 1: Radiograph 27/10/24.



Figure 2: Radiograph 18/11/24.

### CONCLUSION:

This case illustrates the potential for a delayed diagnosis of clavicle fractures in paediatric patients with an absence of overt injury signs. It underscores the necessity for healthcare providers to maintain a high index of suspicion for skeletal injuries after trauma, even when initial examinations appear normal. Regular follow-ups and re-evaluation of symptoms are crucial in paediatric care.

### REFERENCES

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