

Painful ankle medical treatment

[Health & Medicine](#)



Patient B.

Age: 51 years old male.

Patient comes alone and gives own health and personal history. The patient also sign the consent form on his own and consents to examination and any necessary care. The patient comes walking with a level of difficulty. The patient is not sick-looking, communicates with ease and freely.

PC: The patient complains of a swollen and painful ankle (Kaufman 2008, p. 2396).

HPC: The patient has been running after a cow that had broken out of the shed when his left foot got stuck in a trench and he fell spraining his left ankle.

Attending the department for examination and care.

PMH: patient admitted once at the age of 16 years with appendicitis (Dealey 2012, p. 199). Appendectomy done.

No major illness since childhood.

Weight: 76kg

Medications: The patient has been on analgesics broad-spectrum antibiotics regimen that ended three days ago; provided at the clinic. No other medication currently.

Allergies: The client has a specific protein food allergies, cannot eat eggs. There is no known drug allergies.

Immunisation: Tetanus injection immediately after the cut (one week ago) scheduled for a repeat (booster) in three weeks' time (Greaves and Johnson 2002, p. 38).

SH: the patient is married, living with the wife and two children. He is a farmer while his wife owns a grocery shop. Does not smoke but occasionally
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takes alcohol.

His hobbies include reading, listening to music and tending the flowers.

O/E: Stable general outlook. Not sick-looking.

NAD on examination of the head, Neck, back, chest. Hands.

Left foot: The ankle joint is swollen. The patient reports painful joint and cannot walk well.

ROM:

ROM: Active:

Flexion- Cannot flex the ankle due to pain on anterior aspect

Extension- full range; with minimal pain on movement

Abduction- painful

Adduction- painful

Medial Rotation- painful

Passive:

Flexion- full range; with pain on anterior aspect the ankle

Extension- full range; painful

Abduction- full range; painful

Adduction- full range; painful

Medial Rotation- painful

Resistive:

Flexion-with intense pain on anterior aspect of ankle

Extension- painful

Abduction- painful

Adduction- painful

Medial Rotation- painful

Impression: Ankle sprain

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Plan: Analgesics Diclofenac 50mg PO given, Range of motion exercise.

Treatment: Analgesics. Weekly visit for physiotherapy.

Advised: Rest the foot for one week. Maintain active range of motion to ensure maintenance of functionality (Lippincot 2008, p. 20).

To take precaution whilst working because the ankle healing may be affected by strenuous exercise take at least one week before going back to work if possible.

Abbreviations

PC-Presenting Complain

HPC-History of Presenting Complain

Kg-Kilogram

PMH-Past Medical History

SH-Social History

O/E-On Examination

NAD-No Abnormality Detected

ROM:- Range of Motion

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