

Foot Fracture

In June, a healthy 25 year old female forcibly twists her left foot. She is in severe pain and cannot get up or walk on her own. She is taken by ambulance to the emergency department at a nearby hospital. A hospital physician examines her, consistent with clinical guidelines, and finds that she has bone tenderness and cannot ambulate her foot. She reports that she has never had ankle sprains or fractures before. The physician orders an x-ray and diagnoses her with a clinically significant fracture of her fifth metatarsal. The bone is adequately aligned. She is released from the emergency department the same day with a prescription for pain medication, crutches and a splint which she wears for the next week. She follows up with an orthopedic specialist twice. On the first visit, the patient is still in pain while bearing minimal weight on the ankle. The specialist removes the splint, orders an x-ray and places a weight-bearing cast on the ankle. On the second visit, five weeks later, the specialist takes another x-ray, removes the cast, and orders physical therapy sessions to restore mobility and regain strength.

DISCLAIMER: This narrative and the accompanying benefit scenario illustrate care for a hypothetical patient receiving treatment for an ankle fracture. The care, and cost of care, will vary for each patient. No portion of this narrative or the accompanying benefit scenario should be construed as recommendations for care, or cost of care, by the United States Government.

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