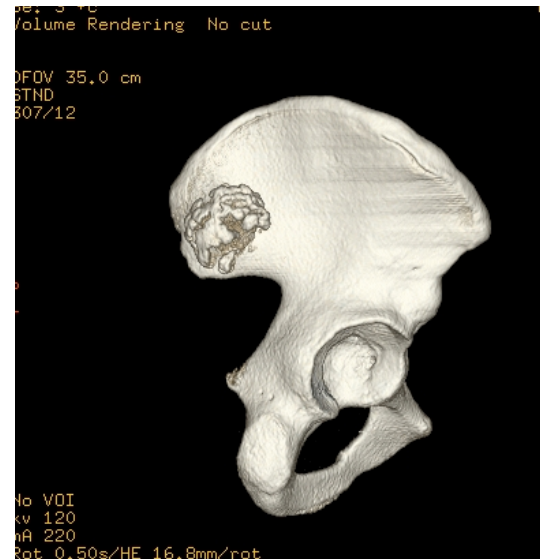
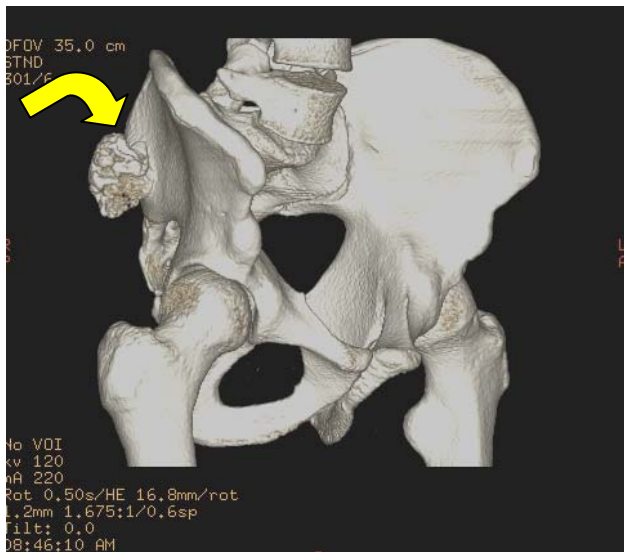


May Case Study: Large Pelvic Osteochondroma
Erin S. Hart, NP

History of Present Illness: BG is an extremely athletic 16-year-old male who has been referred to this clinic for expert evaluation because he felt a lump in his right buttock region approximately 2 months ago. He states that he feels the lump more when he is laying down on his back. He has been having more discomfort due to the prominence of the mass. He has no history of fever, weight loss, or any constitutional symptoms of illness. He also does not complain of low back pain. He is an extremely healthy young man who takes part in sporting activities at a very high competitive level.

Physical Examination: This is a conscious, cooperative, young athletic male in no apparent distress who is alert and oriented x3. His height is 173 cm and weight is 163 pounds. He has a normocephalic and atraumatic head with nondysmorphic features. The cervical spine shows full range of motion in flexion and extension and lateral rotation. The spine is straight without evidence of scoliosis. On examination of his right iliac region, a lump that is approximately 5 x 6 x 4 cm is palpable over his right buttock region under the gluteus maximus. The lump is very firm in consistency and is non-compressible or expansile. The skin over the mass is normal. He has full range of motion of both hips and is NVI in both lower extremities.

Radiographs:



CT Scan with 3D Recon View showing large iliac osteochondroma

Diagnosis: Large Iliac Wing Osteochondroma/Exostosis

Impression/Plan: Because of the large size of the exostosis and the location near the greater sciatic notch, surgical excision was discussed with the patient and his parents. They wished to proceed with surgery consisting of excision of the osteochondroma. He tolerated the procedure quite well and was discharged home on post-op day #1.