

Trauma



Figure 8(a). Posterior dislocation of the left shoulder. The Grashey view shows internal rotation of the humeral head. Note the medial position of the anterior greater tuberosity (straight arrow). Note also the overlap of the humeral head with the glenoid (curved arrow).



Figure 8(b). The CT scan section shows the posteriorly dislocated humeral head hinged on the posterior glenoid. Note the reverse Hill-Sachs anteromedial impaction fracture (arrow).

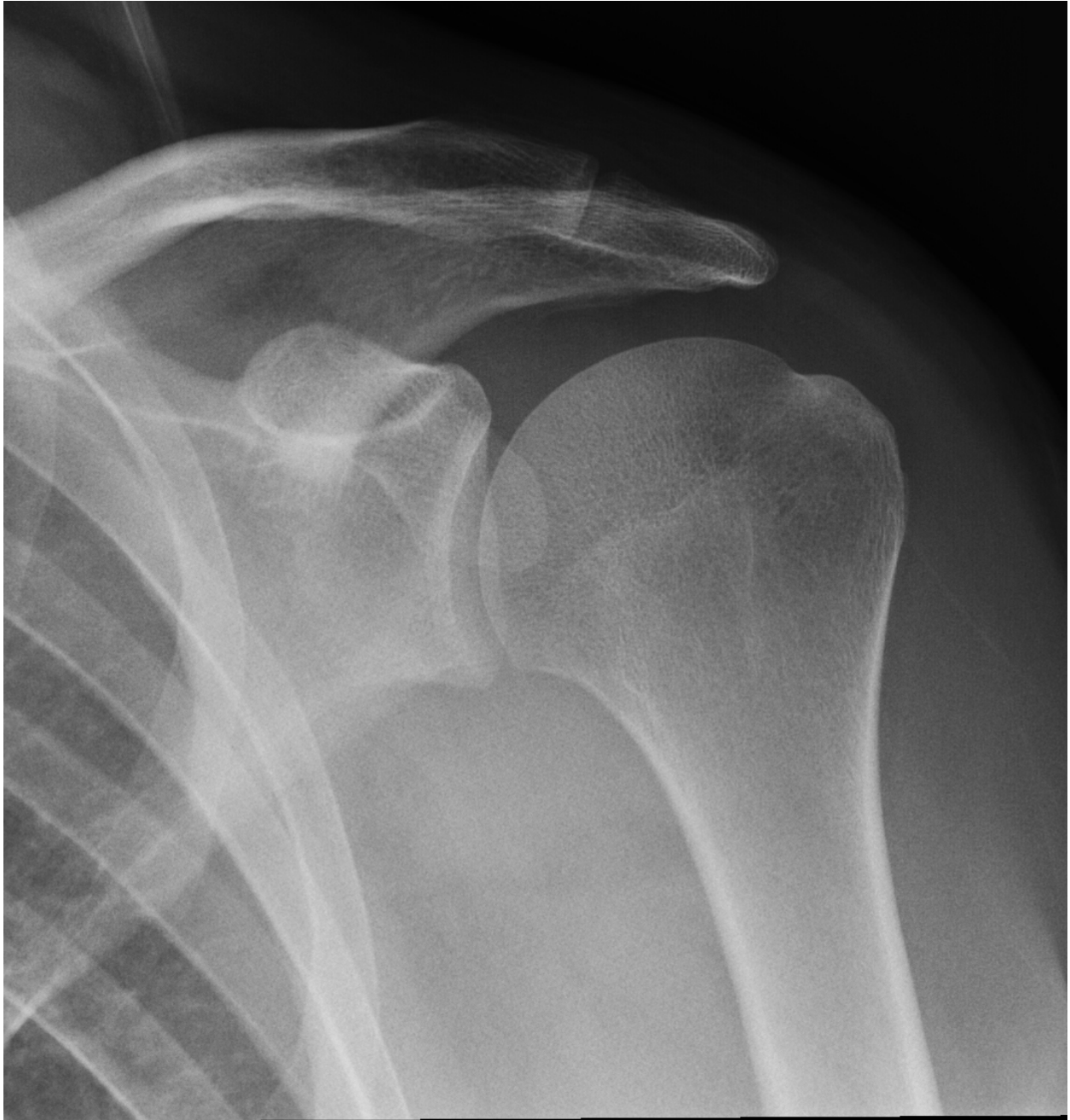


Figure 9(a). Occult greater tuberosity fracture of the left shoulder. The Grashey view shows no abnormality; the anterior-posterior and axial views were also normal.

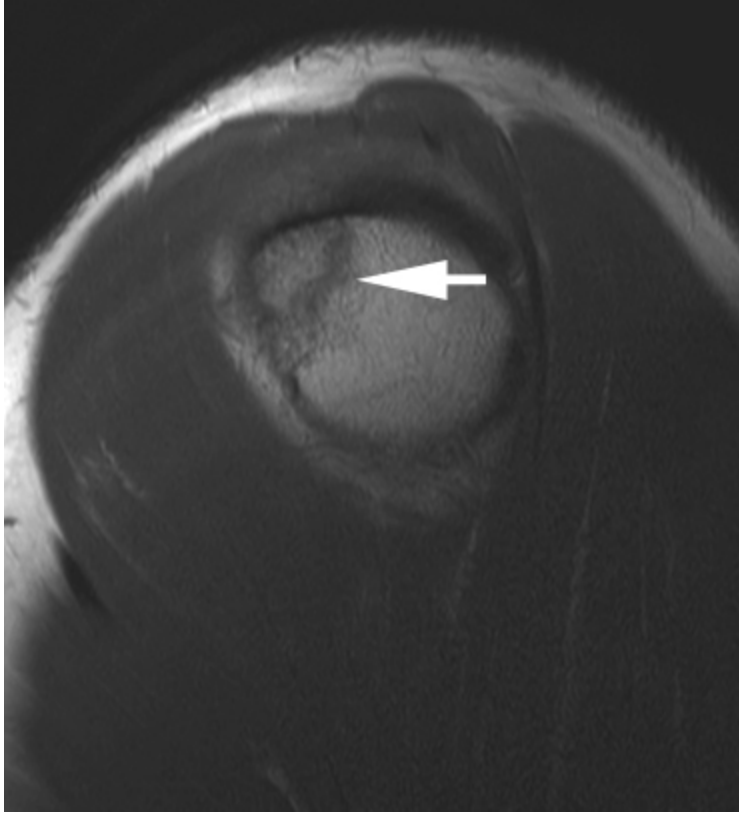


Figure 9(b). Oblique sagittal PD image of the left shoulder clearly shows the occult fracture through the greater tuberosity (arrow).

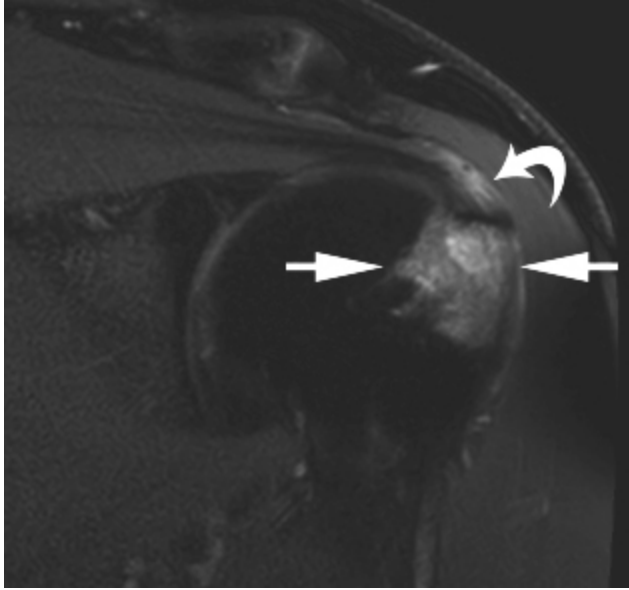


Figure 9(c). The coronal fat suppressed T2 weighted image shows diffuse edema within the greater tuberosity secondary to the fracture (straight arrows). Note there is some edema within the supraspinatus secondary to contusion, but the tendon is still intact (curved arrow).

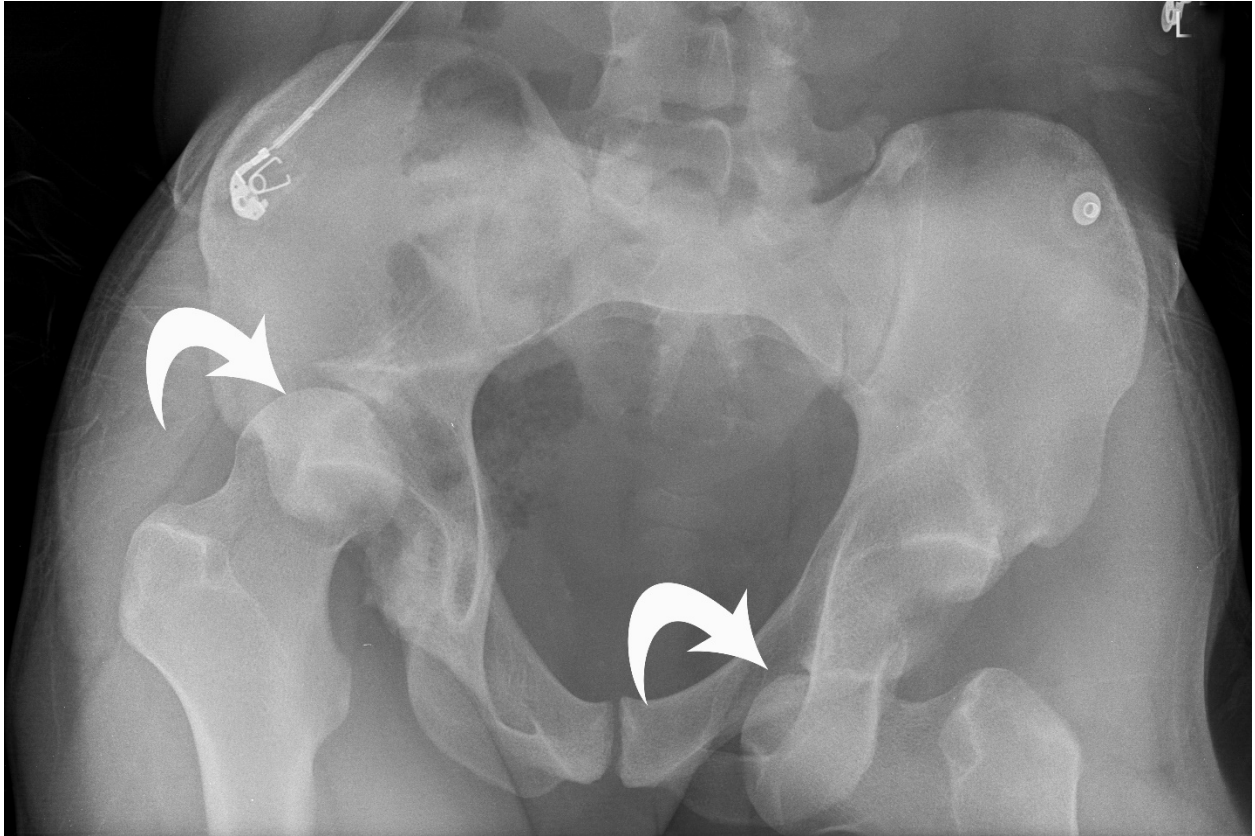


Figure 10. Anterior and posterior dislocation of the hips. AP radiograph of the pelvis shows a posteriorly dislocated right hip and an anteriorly dislocated left hip (arrows).

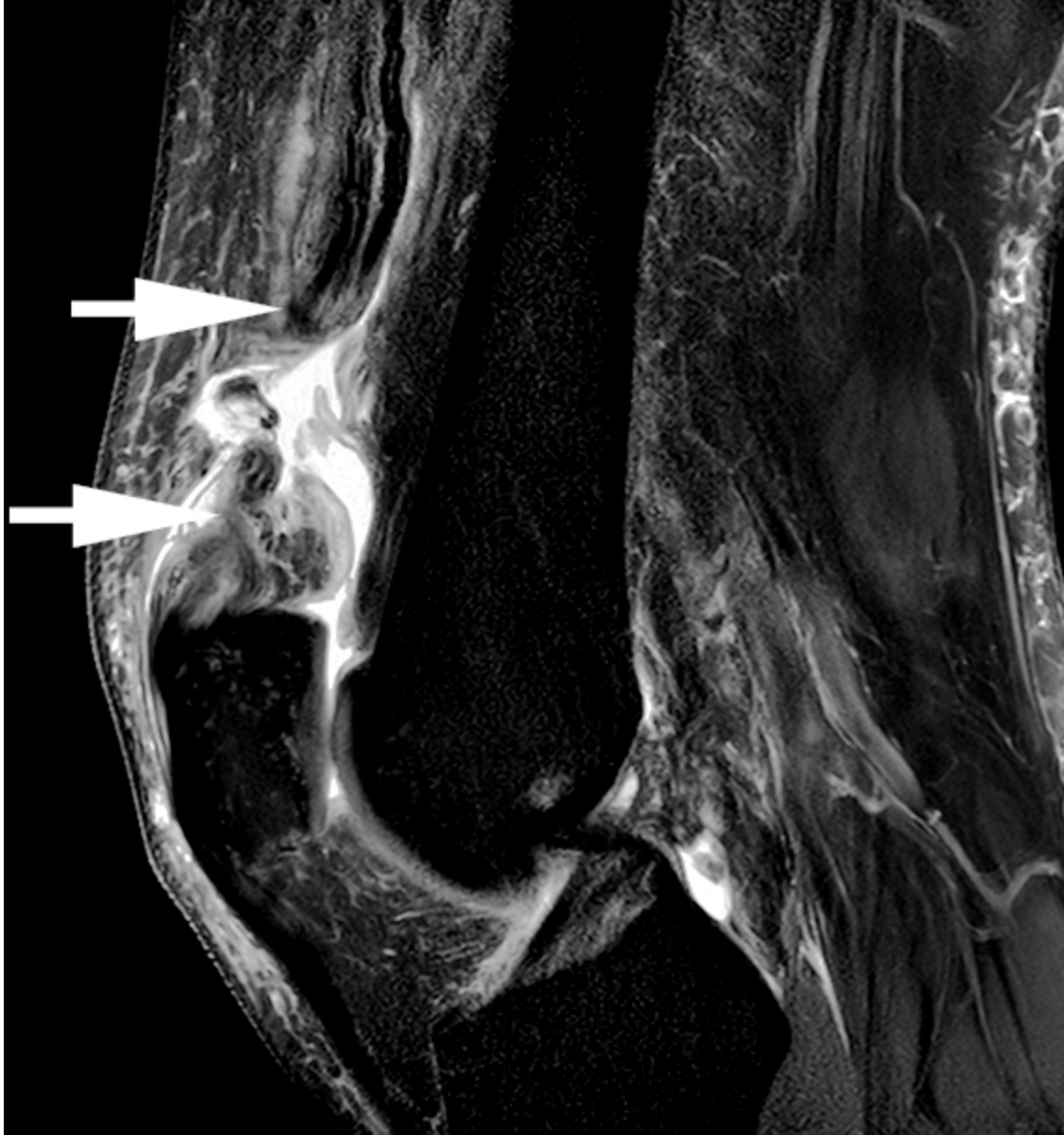


Figure 11. Complete tear of the quadriceps tendon. Sagittal fat saturated T2 weighted image of the right knee shows complete transection of the quadriceps tendon with retraction (arrows).