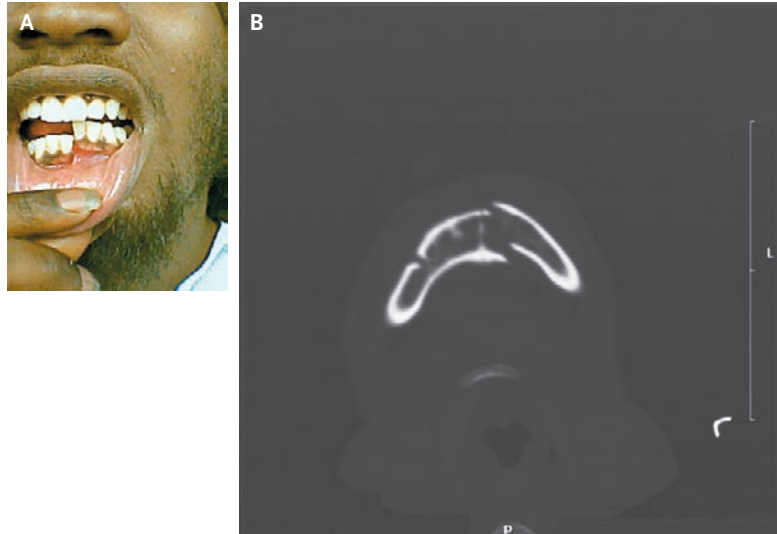


## IMAGES IN CLINICAL MEDICINE

Open Mandibular Fracture  
with Malocclusion

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**A** 21-YEAR-OLD HEALTHY MAN PRESENTED TO THE EMERGENCY DEPARTMENT with mouth pain and bleeding, after being struck with a gun on his right lower jaw. Physical examination revealed upward displacement of the left half of his mandible with malocclusion on biting and mild bleeding from the fracture line between his central incisors (Panel A). He had no other intraoral lacerations or fractures of the teeth. Computed tomography showed a comminuted fracture of the left mandible just lateral to the symphysis mentalis, extending vertically through the alveolar ridge near the midline (Panel B), and a comminuted fracture of the right mandibular body and angle. Given the U shape of the mandible, it is common for contralateral fractures to result from major trauma. Intravenous analgesics and antibiotics were given; the patient was nasotracheally intubated and underwent open reduction with internal fixation of his fractures. After surgery, he was able to tolerate a soft diet by mouth and was discharged home. One month later, he remained well, without evidence of osteomyelitis or malocclusion, and was able to advance to a full diet.

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