

18/03/26

## Clerking sheet

s/b Dr Jayden & Dr Shan

Nurul Fatimah (990427-11-7756)  
45 years old, malay, female  
living with husband and 2 child

cc: c/o pain over right hand

hopi: Case referred from ED green zone. Alleged fall today (18/3/26) around 0800H. Patient was cleaning living room at home for raya preparation. Accidentally stepped on wet cloth and fall. Fall on right hand and fall on right hand. Post trauma sustained, developed pain and swelling over the right hand

s: right hand  
o: after fall, noted swelling and increase in size  
c: pulsating and sharp  
r: not radiating  
a: swelling over right hand, limited hand movement mainly in gripping action  
t: gotten better  
e: worse with movement, relieved by tab PCM  
s: 6

o/w no other pain or injury elsewhere

past med hx: T2DM, under f/up KK Berserah  
past surgical hx: h/o ray amputation left 5th toe on Nov 2025 at HTAA  
past meds: T. MTF 50mg BD  
ROS: well fit person

At ed, given T. PCM and creep bandage over right hand

currently  
- under RA  
- pain tolerable

o/e  
bp: 120/81  
hr: 91  
t: 37  
spo2: 99 under RA

right hand  
- no bone deformity  
- no skin changes, no bruises  
- minimal swelling compared to contralateral hand  
- tender on 4th MCB, not warm  
- cannot close grip fully  
- ROM active and passive MCPJ of ring finger limited d/t,  
- ROM active and passive other joints full  
- neurovascular intact

xray right hand  
- displace transverse fracture midshaft 4th MCB  
- distal fracture segment displaced volarly

Case and progress d/w Mr Afif (Sp Ortho Oncall)

imp: closed displace transverse fracture right midshaft 4th mtb

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Explained to patient regarding current condition of the hand and xray shown. Treatment option explained.

Conservative:

- non operative, risk of non-union, mal-union, union with angulation is high, hand will be not strong as before. need prolong physiotherapy

Surgical:

- operation with mini plating, risk of non-union, mal-union, union with angulation is low, hand can be same strong as before. no need long physiotherapy

Patient understands risks and benefits keen for surgical intervention.

Cost (~RM2000–3000) and tentative date (25/3/2026) explained. Patient agrees and is able to self-pay.

Plan

1. Allow discharge
2. Discharge with volar slab over right hand
3. For analgesia; Tab PCM 1g QID, Cap Tramadol 50 mg TDS
4. For elective ORIF (mini plating) right 4th metacarpal on 25/3/2026
5. For admission on 24/3/2026
6. For repeat X-ray on admission
7. For arrange quotation and payment prior to surgery

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