

**Shannon H. Bagwell, MD**  
**Rawle A. Seupaul, MD**

From the Department of Emergency Medicine, Indiana University School of Medicine, Indianapolis, IN.

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**Figure 1.** Note the significant amount of left periorbital edema, resulting in the inability to open the eyelid.



**Figure 2.** Axial CT image depicting left pre- and postseptal cellulitis with dural involvement and early abscess formation (arrow). The ethmoid sinuses are also full (asterisk). Used with permission of Rawle A. Seupaul, MD, Department of Emergency Medicine, Indiana University School of Medicine, Indianapolis, IN.

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An 11-year-old previously healthy immunized girl presented to the emergency department with a 2-day history of worsening left eye pain and temperatures to 101.5°F (38.6°C). Physical examination was notable for left periorbital erythema and proptosis. She was unable to open the eye on her own (Figure 1), and her conjunctiva was injected without discharge. Extraocular movements were limited in all directions because of pain. Visual acuity in the affected eye was 20/50 and 20/20 in the unaffected eye. A head and orbital computed tomography (CT) scan was obtained to aid in the diagnosis (Figure 2).

*For the diagnosis and teaching points, see page 639.  
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