

### **Summary**

Mrs. C, a 60 year-old housewife who is a diagnosed patient with poorly controlled Type 2 DM, hypertension, dyslipidemia and a history of ankle fracture following an accidental fall, who underwent fibular plate insertion presented with a chronic discharging wound on the left lateral malleolus which was the previous fracture site.

She was diagnosed with infected fibular plate and treated with intravenous antibiotics along with removal of fibular plate.

Her Barthel index was impaired and she became fully dependent on IADL. Type 2 DM with microvascular complications, potential risk postmenopausal osteoporosis, personal and environmental risk factors for falls were identified as major problems that needed special attention.