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Massive pulmonary embolism

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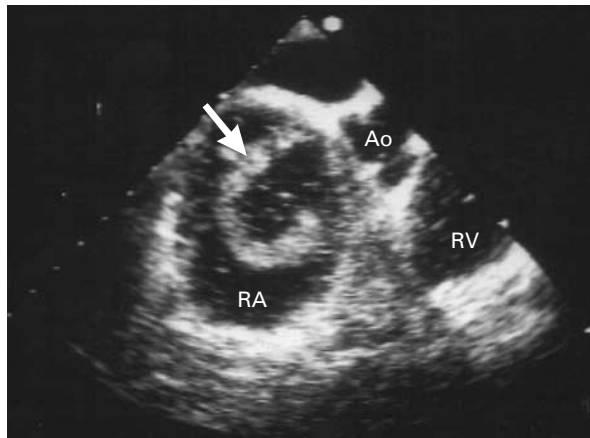
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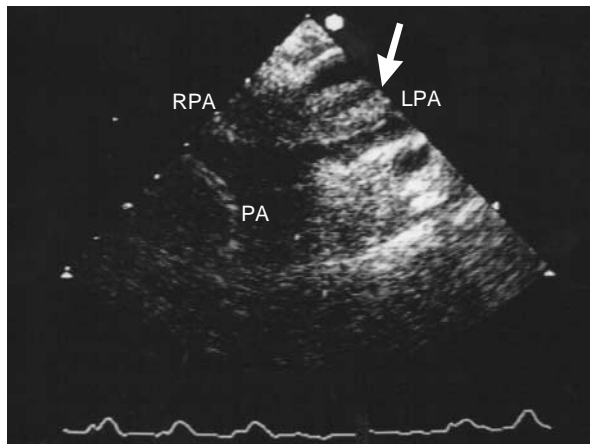
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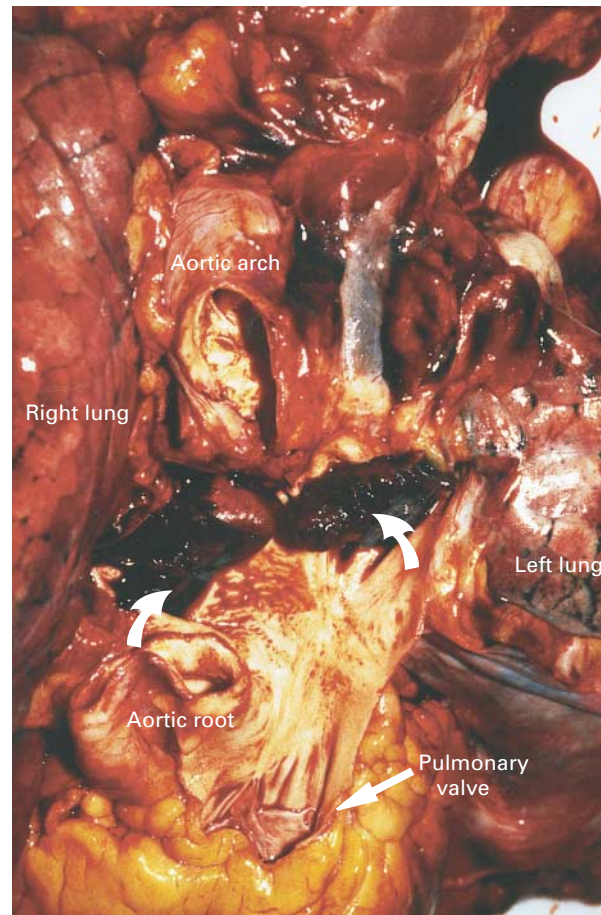
Images in Clinical Medicine



A



B



C

Massive Pulmonary Embolism

An 82-year-old woman with a history of myocardial infarction and heart failure collapsed during rehabilitation following a cerebral infarction with hemiparesis. Several days earlier, the presence of deep venous thrombosis of the right leg was suspected but could not be confirmed by vascular ultrasonography. The patient was admitted to the intensive care unit with severe dyspnea and circulatory shock. The blood pressure was 70/40 mm Hg, and the central venous pressure was 30 mm Hg. The electrocardiogram showed sinus rhythm and right bundle-branch block. A transthoracic echocardiogram revealed dilatation of the chambers of the right side of the heart and nearly empty chambers on the left side. Transesophageal echocardiography showed a large, free-floating, echodense mass in the right atrium (arrow in Panel A) and a large mass in the left pulmonary artery (arrow in Panel B). The patient died five hours after the initiation of treatment with tissue plasminogen activator, inotropic agents, pulmonary vasodilators, and artificial ventilation. Postmortem examination showed large pulmonary emboli in the left and right pulmonary arteries (curved arrows in Panel C). Ao denotes aorta, RV right ventricle, RA right atrium, PA pulmonary-artery trunk, LPA left pulmonary artery, and RPA right pulmonary artery.

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