

Short Report

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Chest tube telltale: A miraculous injury

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Short report

A 35-years-old man with an underlying lymphoma presented with the complaint of progressive dyspnea. The left hemithorax was dull on percussion with a significant reduce air entry. Chest x-ray showed a total 'white-out' of the left hemithorax suggestive of pleural effusion. A medical officer inserted a left chest tube with the sharp trochar provided. After the puncture, he noticed a rapid flow of frank blood. Otherwise, patient's vital sign was stable. An urgent CT showed the tip of the tube was

a milimetres into the interventricular septum. Fortunately, the chest tube dislodged after the patient ambulated. He was monitored in the ICU and an ECHO was done which showed a normal heart function. He was referred to the interventional radiologist for pig-tail drainage. He was discharged the following week. Chest tube insertion using a sharp trochar should not be recommended as it is associated with high morbidity and mortality.



Figure 1:



Figure 3:

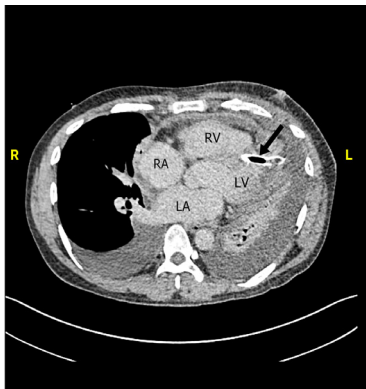


Figure 2: