Tracheal rupture hidden by selective intubation of right bronchium

Rotura traqueal secundaria a intubación selectiva de bronquio derecho

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Seventy-year old woman without significant past medical history transferred to the hospital 35 min after performing advanced CPR maneuvers including orotracheal intubation (technique not described in the medical report) and use of mechanical chest compression device. One thoracic CT scan is conducted at the ER (A) followed by the selective intubation of the patient’s right main bronchus. Upon arrival at the ICU, the endotracheal tube is removed followed by the sudden appearance of extensive subcutaneous emphysema. The thoracic CT scan (B) is repeated showing solution of

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continuity at her right posterolateral tracheal wall due to tracheal tear that triggers bilateral apical pneumothorax, extensive pneumomediastinum, and subcutaneous emphysema (Fig. 1). Three (3) days after ICU admission, the patient died following limitation of life support treatment (LLST) due to severe anoxic encephalopathy.

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