



IMAGES IN INTENSIVE MEDICINE

Right and left thromboembolism in a COVID-19 infected patient



Tromboembolismo derecho e izquierdo en paciente con infección por COVID-19

I. Keituqwa Yáñez*, J. Navarro Martínez, M. García Valiente

Unidad de Cuidados Intensivos y Electroestimulación Cardíaca, Hospital General Universitario Rafael Méndez, Lorca, Murcia, Spain

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Patient admitted to the ICU due to SARS-CoV-2-induced pneumonia who required mechanical ventilation and was transferred to one of the hospital conventional wards after 14 days at the ICU treated with anticoagulant therapy with enoxaparin. He was readmitted due to respiratory failure.

The CAT scan performed revealed the presence of thrombi in segmental arteries of both the right superior and left inferior lobes. The transesophageal echocardiogram performed revealed the presence of dense, spontaneous echocontrast in the right chambers ([Appendix B](#); video 1 and [Fig. 1](#)). After

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* Corresponding author.

E-mail address: ivankeituqwa@gmail.com (I. Keituqwa Yáñez).

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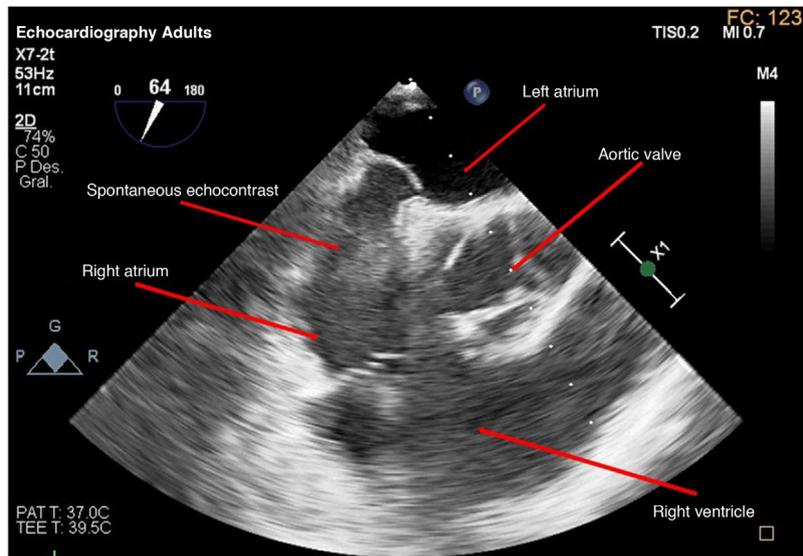


Figure 1

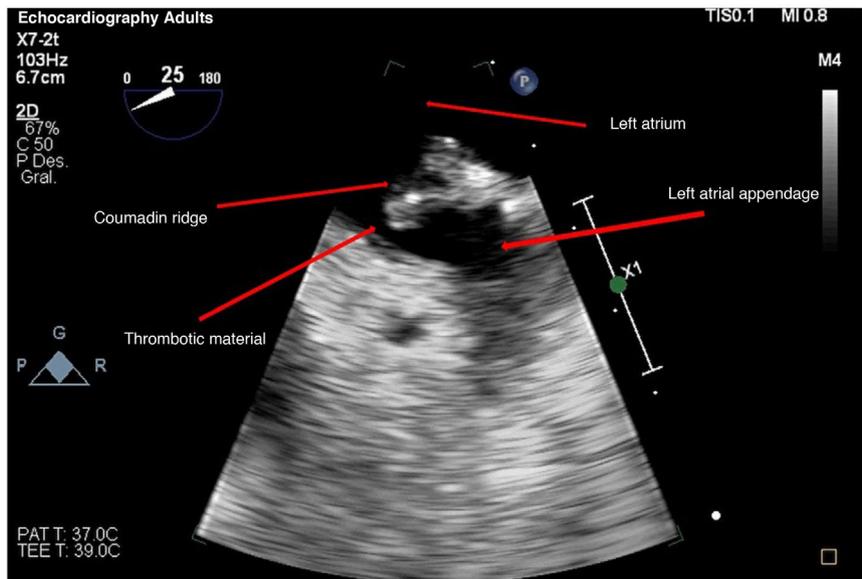


Figure 2

the new hospital discharge, the patient showed low level of consciousness. The cranial CAT scan performed revealed the presence of an infarction at right medial cerebral artery level while the transesophageal echocardiogram performed revealed the presence of a coumadin ridge (variant of normality) with attached thrombotic material (Appendix B; video 2 and Fig. 2), and lack of cardiac shunt (Appendix B; video 3). A sequela of left residual hemiparesis remained at the ICU discharge. This is a clear example that the infec-

tion due to COVID-19 increases the risk of thromboembolic events.

Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi:<https://doi.org/10.1016/j.medin.2021.03.007>.