

Dancing swan in left hemithorax

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Clinical Image

A 67-yrs-old, diabetic, hypertensive individual was admitted for multivessel coronary artery bypass graft surgery. Off-Pump CABG was performed using Left Internal Thoracic Artery to Left Anterior Descending Artery, left radial artery to first Obtuse Marginal branch, and reversed saphenous vein graft to Posterior Descending Artery as conduits. His total chest drainage was 430 ml. He was discharged on 8th postoperative day.

He was brought to emergency treatment unit on 28th postoperative day with cough and dyspnoea. On examination he was dyspnoic, oxygen saturation was 88% on room air. Point of care Transthoracic Echocardiogram demonstrated "dancing swan in left hemithorax" (VIDEO).

The TTE which included lung ultrasonography, showed left sided heterogeneously anechoic effusion with partial thin septation & floating echoes. The partially collapsed left lower lobe dances during each cardiac pulsation due to propagation of a waveform across this moderate effusion. Exudate effusions often demonstrate punctate, hyper-echoic foci floating within the effusion, referred to as Plankton sign.

Intercostal drain was inserted on left side and 1.8 liters of hemorrhagic fluid was drained, total chest drainage was 2.4 liters.

Video: shows collapsed left lower lobe (swan) floating in pleura effusion. Septation is also seen.

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