

An Ongoing Series

Pleuritic Chest Pain *This Can't Be Happening!*

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Your team is being deployed to Africa. One of your teammates has had a respiratory infection for the past week. A few hours after a 14-hour flight, he comes to you reporting shortness of breath and pain on the right side of his chest whenever he takes a deep breath.

You evaluate this otherwise healthy 29-year-old male starting with a set of vital signs:

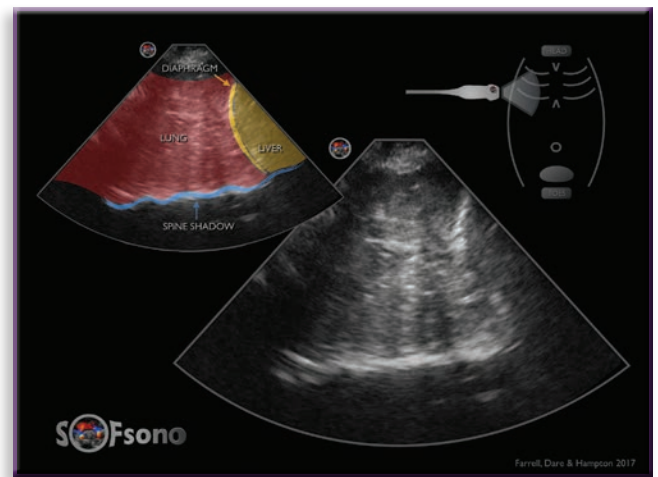
Heart rate 90 beats/min, blood pressure 120/65mmHg, respiratory rate 24/min, SpO₂ 95% on room air, temperature 38.0°C (100.4°F)

On physical examination, the patient is taking shallow breaths but he is not in respiratory distress. He is warm to touch, and he has notably decreased breath sounds over the lower right lateral side of his chest. The remainder of his examination is unremarkable.

As part of your evaluation, you obtain an ultrasound of his lungs. While viewing a dynamic clip, you are able to make a diagnosis (Figure 1, Video 1 online).

1. What is the most likely diagnosis, and what suggestive findings are present in Figure 1?

Figure 1 Coronal view of the right lower chest.



2. What dynamic findings pathognomonic for this diagnosis would you expect to see in Video 1 (online)?
3. What is the Pulmonary Embolism Rule-out Criteria (PERC) rule, and how does it help you in this case?

Join us at SOFSono.org for further case discussion.

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Winter 2017
Volume 17, Edition 4

JSOM

JOURNAL of SPECIAL OPERATIONS MEDICINE™



THE JOURNAL FOR OPERATIONAL MEDICINE AND TACTICAL CASUALTY CARE



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