

## CASE OF THE MONTH July 2022

Dr. Sean Muir BVSc Hons (Melbourne University) Post Graduate Diploma Medical Ultrasound (Monash University) Tasmania, Australia This is an interesting case based more on a rare finding of a cardiac FB as a cause for pericardial effusion.

## Dr. Sean Muir

BVSc Hons (Melbourne University)

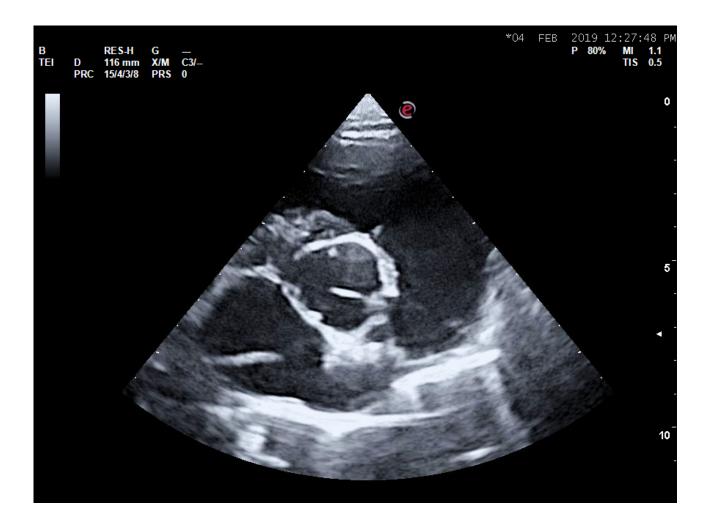
Post Graduate Diploma Medical Ultrasound (Monash University)

Ultrasound Diagnostics Pty Ltd - Mobile consultancy ultrasound / referral practice based in Tasmania, Australia

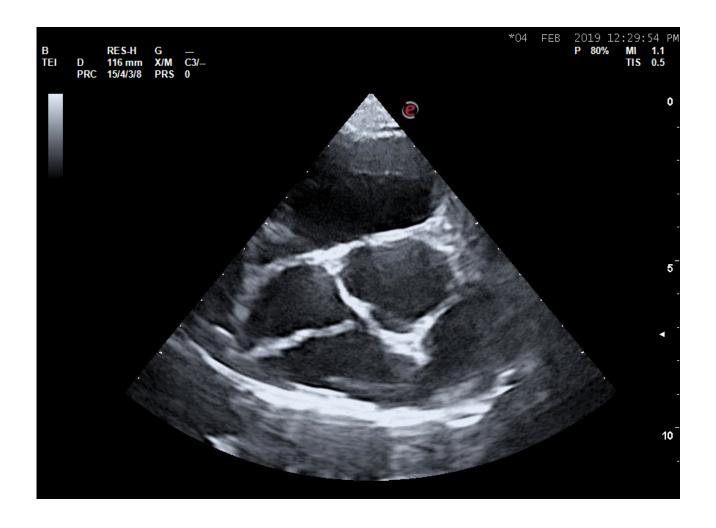
## Presentation

Boris, an 18MO MN Bernese Mountain Dog (weight approx. 40kg) with a history of eating a kebab stick a number of weeks ago and having been intermittently off colour and febrile ever since.

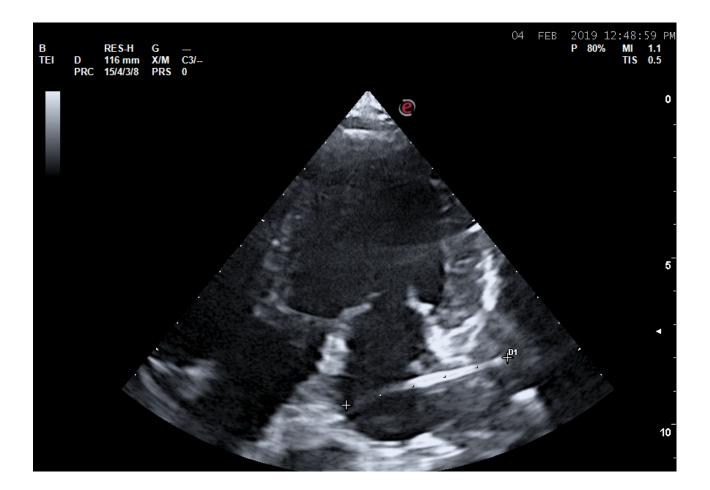
An unremarkable abdominal ultrasound had been performed the week previous. Presented on the day of examination after having been at the after-hours clinic the night before with a pericardial effusion (which had been drained) to try and determine the cause of the effusion. Below is the first image that obtained of the heart (RSAX Aorta view).



There was obviously something not quite right with the LA (bottom R of the image). The best views obtained were oblique ones (following) - they are not your standard echo planes but were the best to see the FB present.







The missing kebab stick was protruding into the LA from the R side.

Surgery was performed by a referral surgeon through the R 5th intercostal space. Upon exposure of the lungs, the R accessory lobe was noted to be attached (by adhesions) to the diaphragm, and the FB (Kebab stick) was within this lobe. Reflection and exposure of the FB was impossible without removing the entire accessory lobe, so this was done at the same time as removing the FB from the LA. A pericardial fenestration was also performed below the phrenic nerve.

The dog made an uneventful recovery from surgery and throughout follow-up. It was noted by the owner that 3 days before presenting to the after-hours clinic the dog had jumped off the couch and let out a rather loud cry. It was presumed that this was the moment that the kebab stick left either the distal oesophagus or stomach and started projecting into the LA.

