A 56-year-old man was admitted with progressive dyspnea that started suddenly the previous day. Physical examination was normal. Pulmonary embolism was diagnosed on a computed tomography scan of the chest, which showed intraluminal filling defects in both pulmonary arteries and in the branches for the right lower lobe; it also showed a clot in the right atrium (Figure 1). Duplex ultrasonography revealed an underlying deep-vein thrombosis of the left popliteal vein.

Transthoracic echocardiography showed a fluttering thrombus trapped in the patent foramen ovale with floating parts in the right and left atrium (Figure 2; see Movies I and II in the online-only Data Supplement). Anticoagulant therapy with unfractionated heparin was started.

During the stay in the hospital, he started to suffer from a headache. The neurological examination was negative. Magnetic resonance imaging was performed, and it showed multiple supraventricular and ventricular hyperintense areas compatible with ischemic lesions (Figure 3). A second echocardiography revealed the dissolution of the thrombus (Figure 4). The patient was discharged in good clinical condition 11 days later and continued to receive anticoagulant therapy.

Disclosures
None.
Figure 2. Transthoracic echocardiography shows a fluttering thrombus trapped in the patent foramen ovale with floating parts in the right and left atrium. A, Long axis; B, short axis.

Figure 3. Magnetic resonance imaging in T2 multiple supraventricular and ventricular hyperintense areas.

Figure 4. Transthoracic echocardiography reveals the dissolution of the thrombus. A, long axis; B, short axis.
Fluttering Thrombus in Patent Foramen Ovale With Paradoxical and Cerebral Embolism
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Movie Legend

Movies 1A,1B. Transthoracic echocardiography at admission, which shows a fluttering thrombus trapped in the patent foramen ovale with floating parts in the right and left atrium. 1A long axis; 1B short axis. Best viewed with Windows Media Player.

Movies 2A,2B. Second transthoracic echocardiography, which revealed the complete dissolution of the thrombus: 2A long axis; 2B short axis. Best viewed with Windows Media Player.