A 37-year-old white man with a past medical history of mental retardation, hypertension, and insulin-dependent diabetes mellitus was admitted to a regional hospital with uncontrolled hypertension, nausea, and vomiting. Two days after admission, the patient developed ischemia in the right lower extremity, for which he underwent right femoral embolectomy. An echocardiogram revealed regional wall motion abnormalities and a large, loose thrombus in the left ventricular cavity, as shown in the figure. A coronary angiogram showed three-vessel disease. The patient subsequently underwent coronary artery bypass graft surgery and removal of the thrombus from the left ventricle. He was discharged on day 7 after surgery in stable condition.
Left Ventricular Thrombus
Imran Chaudry, Vasco Marques and Robert J. Ruffner

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