## Life in the fast lane

This 25 year old female presented with worsening breathless. She has no previous medical problems. **Chest X-ray** was done + describe the findings (Look at screen).

The **pulse oximeter** reads 90% so you decide to perform a **blood gas**. What do the results mean?

BLOOD GASES Temperature pH pCO2 HCO3(Std) Base Excess pO2 O2 Sat	37.0 7.46H 25L 21L -5.6L 61L 90L
ELECTROLYTES	(Whole Blood)
Potassium	3.7
Sodium	140
Chloride	115H
iCa++	1.16
Glucose	5.6
Lactate	0.9

After careful consideration of the diagnostic possibilities you decide to perform a **CTPA** (CT Angio Pulmonary Arteries/Veins).

What is the result?

Before anticoagulating the patient you review the **blood tests**:

	02/11/07 22:15		Ref Range
Full Bloc	od Count (Whole Blood)		
	150	q/L	130-170
WCC	5.4	x10^9/L	4.0-11.0
PLT	26L	x10^9/L	140-400
RCC	5.39	x10^12/L	4.50-5.70
PCV	0.44	L/L	0.40-0.50
MCV	82.0	fL	80.0-96.0
MCH	27.9	pg	27.0-33.0
MCHC	340	g/L	320-360
	15.2H		11.0-15.0
White Cel	ll Differential		
Neut	4.3	x10^9/L	2.0-8.0
Lymph	0.8L	x10^9/L	1.2-4.0
Mono	0.8L 0.3	x10^9/L	0.1-1.0
Eos	0.1	x10^9/L	0.0-0.5
Baso	0.0	x10^9/L	0.0-0.1
Date	ment : Please note marked thrombocytopenia.  Red cells are normochromic normocytic v polychromasia. No fragmentation seen. Leucocytes are normal.  2: 02/11/07 2: 22:15		s Ref.
INR APTT Fibrinoger	on (Plasma) 1.3 51H 1 4.3 41.9		0.8-1.3 cs 24-35 d 2.0-5.0
	02/11/07 22:15 50/50 mixture of the patient's plasma with - NOT Corrected. The APTT was repeated using high phospholic result was 31 seconds.		

## What is the diagnosis?

How would you treat this patient? (by the way the answer is not to ask someone else from another speciality what to do)

While waiting for the steroids to work you need to make sure that patient doesn't drop dead from a
further pulmonary embolism so you order an <b>ultrasound of the legs</b> to assess the situation further.
What does the ultrasound demonstrate?
W/l4 :- 41:-0
What is this?

ECG was done on admission. Describe it.