

UNSEEN IMPACT: A BULLET LODGED IN AN UNEXPECTED LOCATION

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A 26-year-old male presented with gunshot injury over left anterior chest wall with no detectable exit wound. Patient was admitted at our center after immediate management with chest tube placement due to minor pneumo/hemothorax. Upon admission, patient was conscious, cooperative and oriented and stable from a hemodynamic point of view.

Contrast-enhanced chest computed tomography (CT) showed a metal projectile (1.5×1.0×0.7cm) lodged immediately posterior to the left subclavian artery and

adjacent to the left lateral aspect of the esophageal wall. The integrity of the esophageal wall was confirmed using oral contrast (gastrografin). CT also revealed an apparent trace of fracture of the left first costal arch and an anterior apical contusion consolidation of the left upper lobe lung.

Due to patient stability, the foreign body was removed by uniportal video-assisted thoracoscopic in the 3rd intercostal space, anterior axillary line, on the following day. The procedure was uneventful and the patient was discharged on the 3rd post-operative day.



