A 73-year-old male patient with advanced coronary artery disease was scheduled for percutaneous transmyocardial revascularization. Through a 9F sheath a guiding catheter containing a Holmium-YAG percutaneous laser catheter was advanced into the left ventricle. The anterior and inferior-lateral walls of the left ventricle were beamed 12 and eight times, respectively. During the procedure the patient suddenly developed pericardial tamponade. A pigtail catheter was inserted and fresh blood aspirated. The patient was immediately transferred to the operating room in critical condition maintained by continuous reinfusion of the blood from the pericardial sac. Surgical exploration revealed a large jet coming up from the lateral wall the left ventricle (Fig. 1). The perforation was oversewn with interrupted pledgeted stitches. The patient was unstable and the sternum was left open with delayed sternal closure performed the following day. His condition deteriorated and he ultimately died from respiratory distress and multi-organ failure on the fifth postoperative day.