Distant endoarterial bullet migration following penetrating chest injury

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A 61-year-old man was referred to us for massive left haemothorax (Fig. 1) following a penetrating thoracic gunshot wound. The entrance wound was between the scapula and the spine; no exit wound was evident. Left coxofemoral X-ray demonstrated the presence of the retained bullet in the left femoral region (Fig. 2).

An emergency left thoracotomy was performed and a small regular round laceration of the thoracic aorta was detected and closed with primary suture; a pulmonary upper lobe laceration was sutured too. No other endothoracic lesions were observed.

The bullet was detected in the left superficial femoral artery by ultrasonographic examination, and successfully removed with an arteriotomy. The absence of diaphragmatic and abdominal lesions are suggestive of an endoarterial migration of the bullet.

The postoperative course was uneventful and the patient was discharged from the hospital in good general condition.