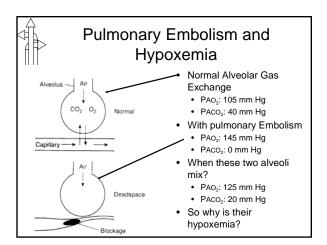
On Call Case 6-1

 72-year old woman undergoes surgery for a leg fracture following a fall. Three days later, she has an acute onset of severe dyspnea, hemoptysis, and chest pain. ABG show pH: 7.41, Paco₂: 38, Pao₂: 50, HCO₃⁻: 24, Sao₂: 88%. Vital Signs show BP: 130/90, f: 30/min, HR: 112/min,

Temp: 37°C, and " $_{\rm E}$ of 18 L/min.

• What's wrong and how to treat?



Cause of Hypoxemia in Pulmonary Embolism

- NOT the actual pulmonary embolism!
- When a Pulmonary Embolism occurs, blood flow has to be diverted elsewhere, causing over-perfusion of some alveoli and a ventilation-perfusion mismatch.
- Also, there are some cellular mediators released at the site of embolism (secondary to local infarction) and these mediators cause bronchial constriction, reduced ventilation, and a ventilationperfusion mismatch.