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Resection of Anterior Mediastinal Mass and Right Atrial Mass Requiring Cardiopulmonary Bypass

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A 43 year old male presenting for surgical resection of approximately 10 cm anterior mediastinal mass and a right atrial mass. The patient underwent resection of anterior mediastinal mass via and right atrial mass under general anesthesia and requiring cardiopulmonary bypass. During intraoperative transesophageal echocardiography performed a patent foramen ovale was noted and repaired. Intra-operative course was complicated by flow reversal via the patient foramen ovale. Post operative hospital course complicated by prolonged intubation and seizures. This case highlights the importance of incidental findings on echocardiography and complications as well as the considerable morbidity and mortality risk associated.