

Nuri HAVAN'

Vaka 1: Kardiyomegali

Vaka 2: Ventriküler Anevrizma

Vaka 3: Fallot Tetralojisi

Vaka 4: Dev Sağ Atrium

Vaka 5: Sol Ventrikül İçi Trombüs

Vaka 6: Tek Koroner Arter

Vaka 7: Koroner Arter-Pulmoner Arter Arasında Fistül

Vaka 8: Lad Fuziform Anevrizma

Vaka 9: Perikardit, Perikardiyal Efüzyon ve Kardiyak Tamponad

Vaka 10: Kronik Romatizmal Konstriktif Perikardit

Vaka 11: Basit Perikardiyal Kist

olup, aritmi, bası etkisi, kist içi kanama, kist perforasyonu, ventrikül duvar hasarı oluşabilir (21).

Tuzaklar

Bazen sağ akciğerde majör fissüre doğru uzayabilir. Bu nedenle lokalize bir plevral efüzyon ile karıştırılmamalıdır.

Tedavi ve yaklaşım

Semptom varlığında perkütan yolla aspirasyon ya da cerrahi tedavi yapılabilir iken, semptom yok ise takip yeterli olabilir.

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