

# AMSER Case of the Month: March 2025

39-year-old male presenting to ED after  
being found unconscious next to his bike



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# Patient Presentation

- HPI

- 39 y/o M presenting to ED after being found unconscious next to his bike by a bystander
- Patient found to have hematoma on forehead
- Combative and uncooperative with EMS
  - Given 5mg IM versed
- GCS of 7 on arrival to ED
  - Hypoxic to 86%
  - Eventually intubated due to poor mental status and hypoxia
- Appeared intoxicated

# Patient Presentation

- Vitals
  - BP: 99/67
  - Pulse: 77 bpm
  - Respiratory rate: 26
- Pertinent labs
  - Ethanol: 213
  - UDS: positive for benzodiazepines

What Imaging Should We Order?

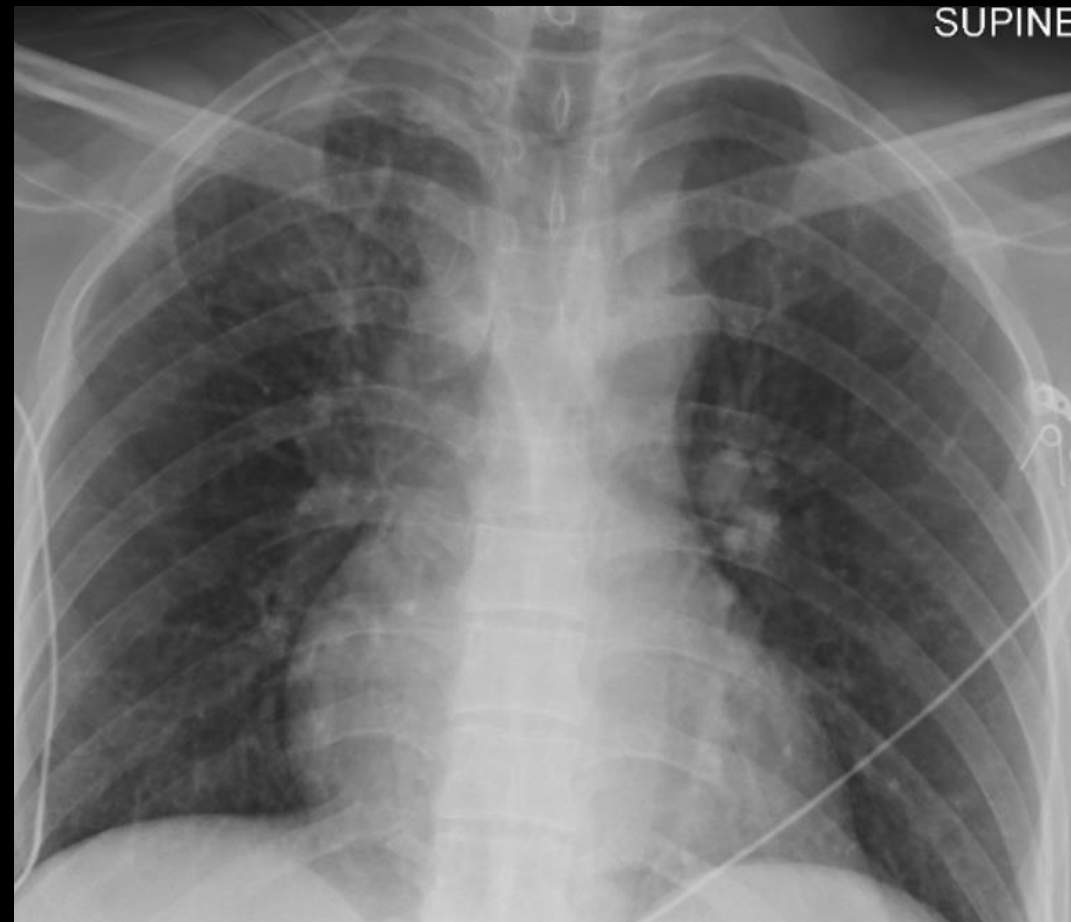
# Select the applicable ACR Appropriateness Criteria

**Variant 2:**

**Major blunt trauma. Hemodynamically stable. Not otherwise specified. Initial imaging.**

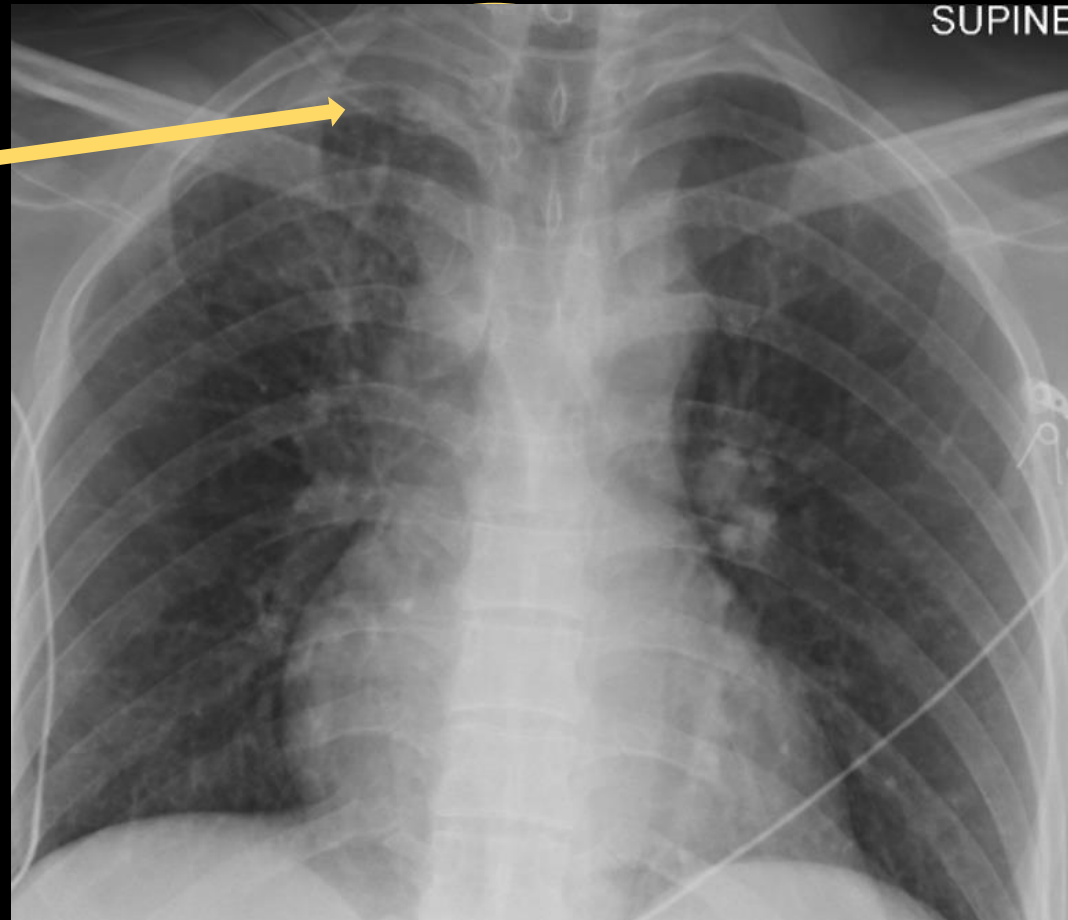
Procedure	Appropriateness Category	Relative Radiation Level
CT whole body with IV contrast	Usually Appropriate	☼☼☼☼
Radiography trauma series	Usually Appropriate	☼☼☼
US FAST scan chest abdomen pelvis	Usually Appropriate	○
CT whole body without IV contrast	May Be Appropriate	☼☼☼☼
Fluoroscopy retrograde urethrography	Usually Not Appropriate	☼☼☼
MRI abdomen and pelvis without and with IV contrast	Usually Not Appropriate	○
MRI abdomen and pelvis without IV contrast	Usually Not Appropriate	○

# Findings: CXR (unlabeled)

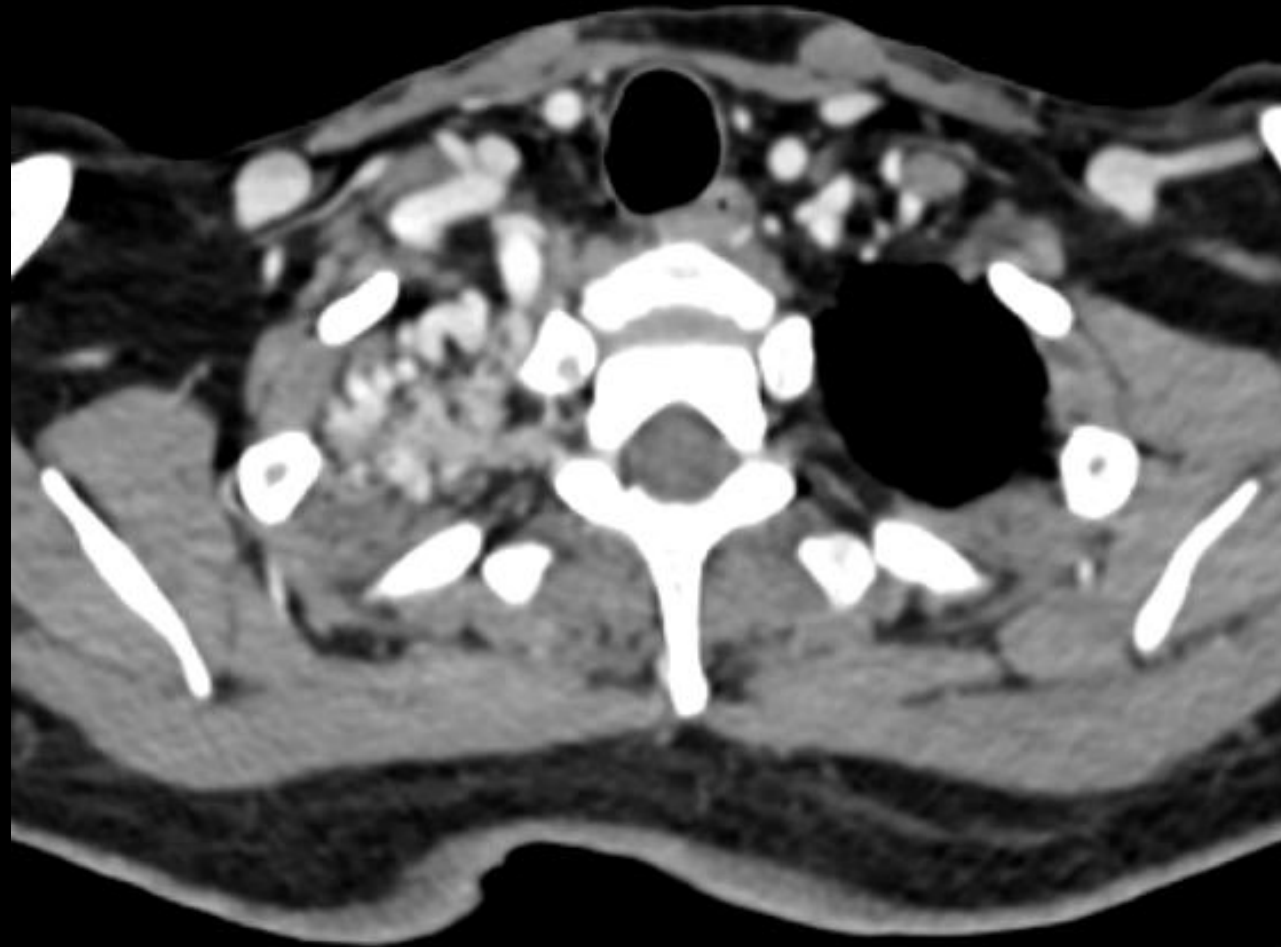


# Findings (labeled)

asymmetric right apical  
pleural thickening (pleural  
cap)



Findings: Chest CT with contrast (unlabeled)

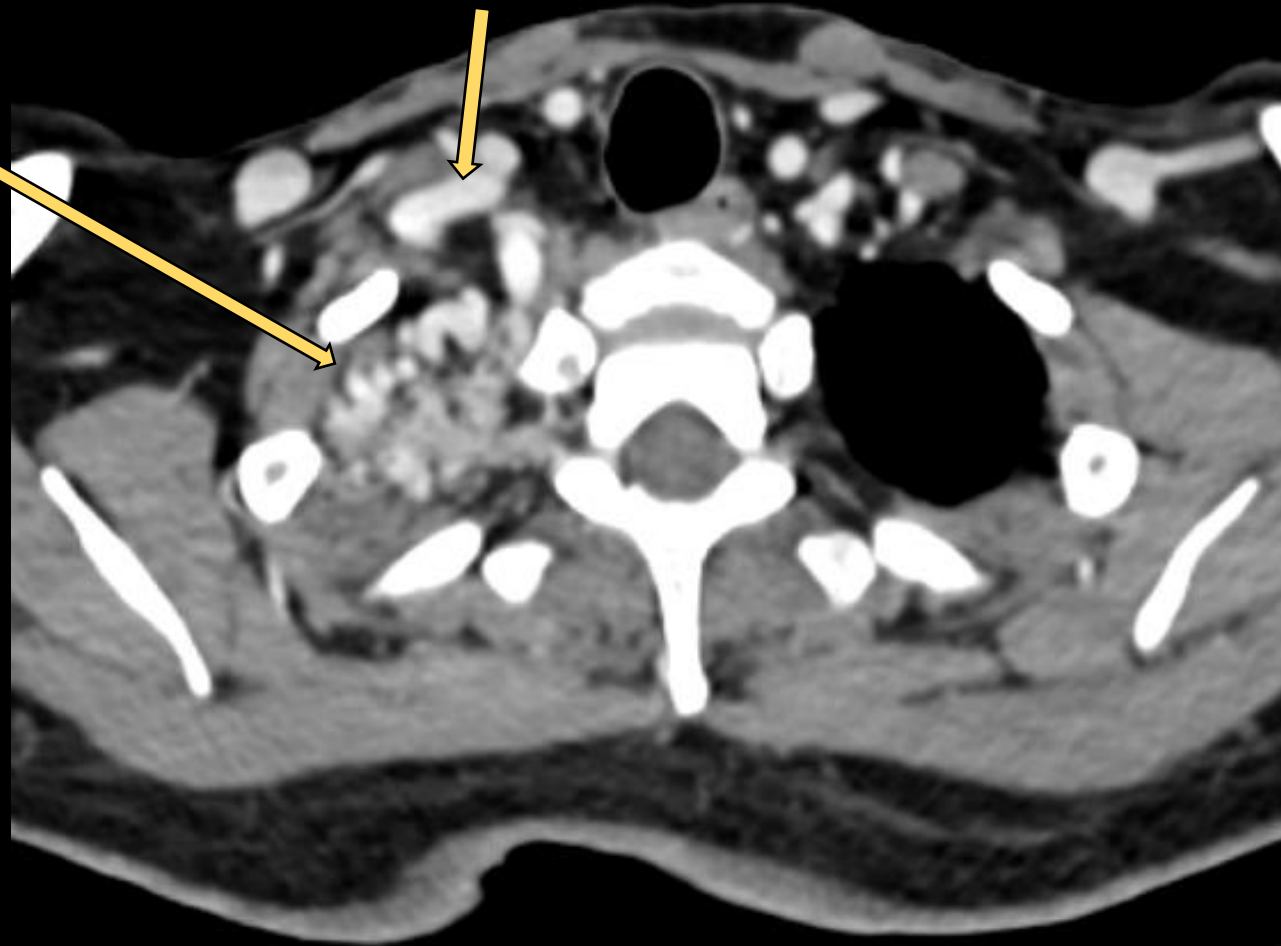




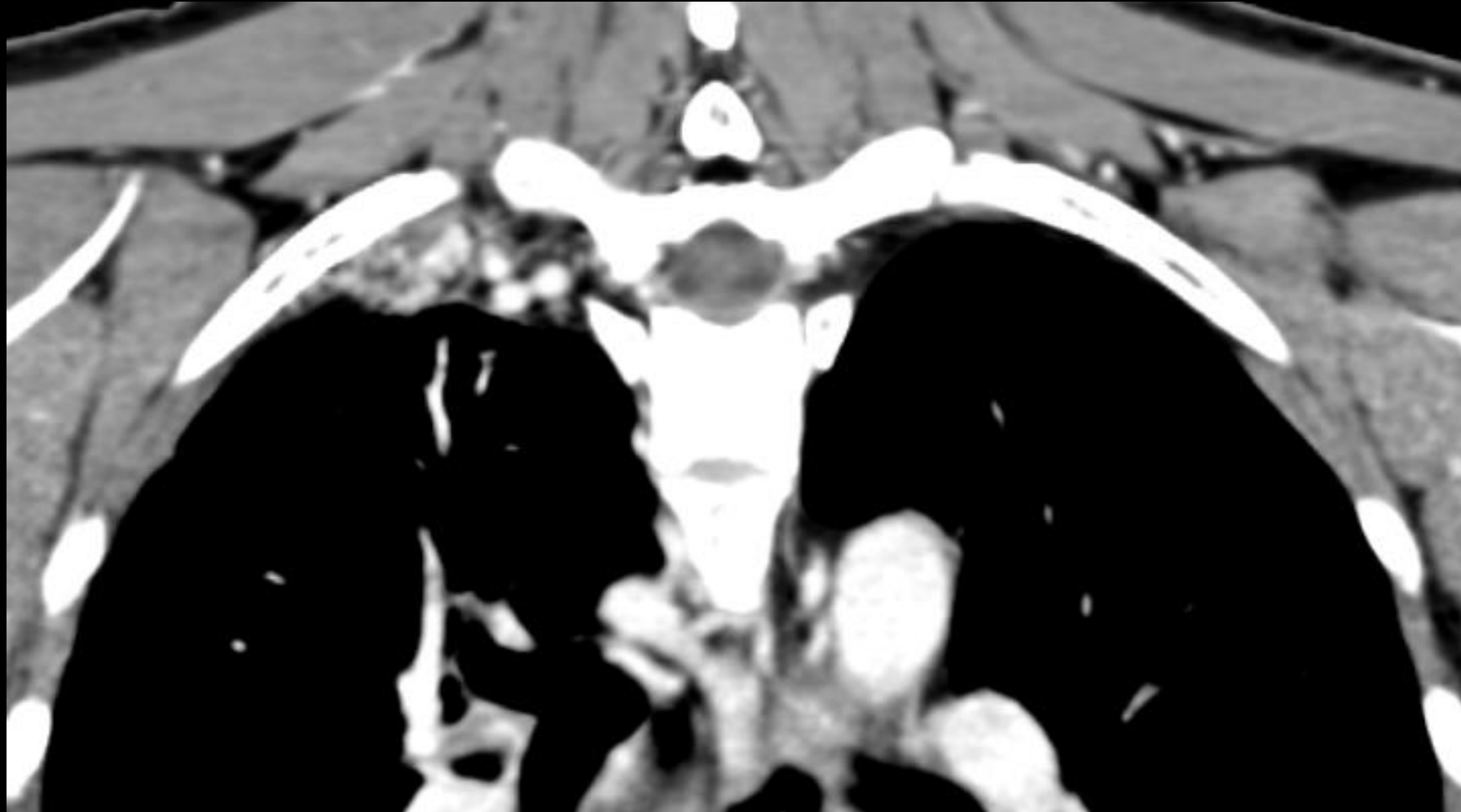
# Findings: Chest CT with contrast (labeled)

high flow arteriovenous  
malformation

right subclavian artery

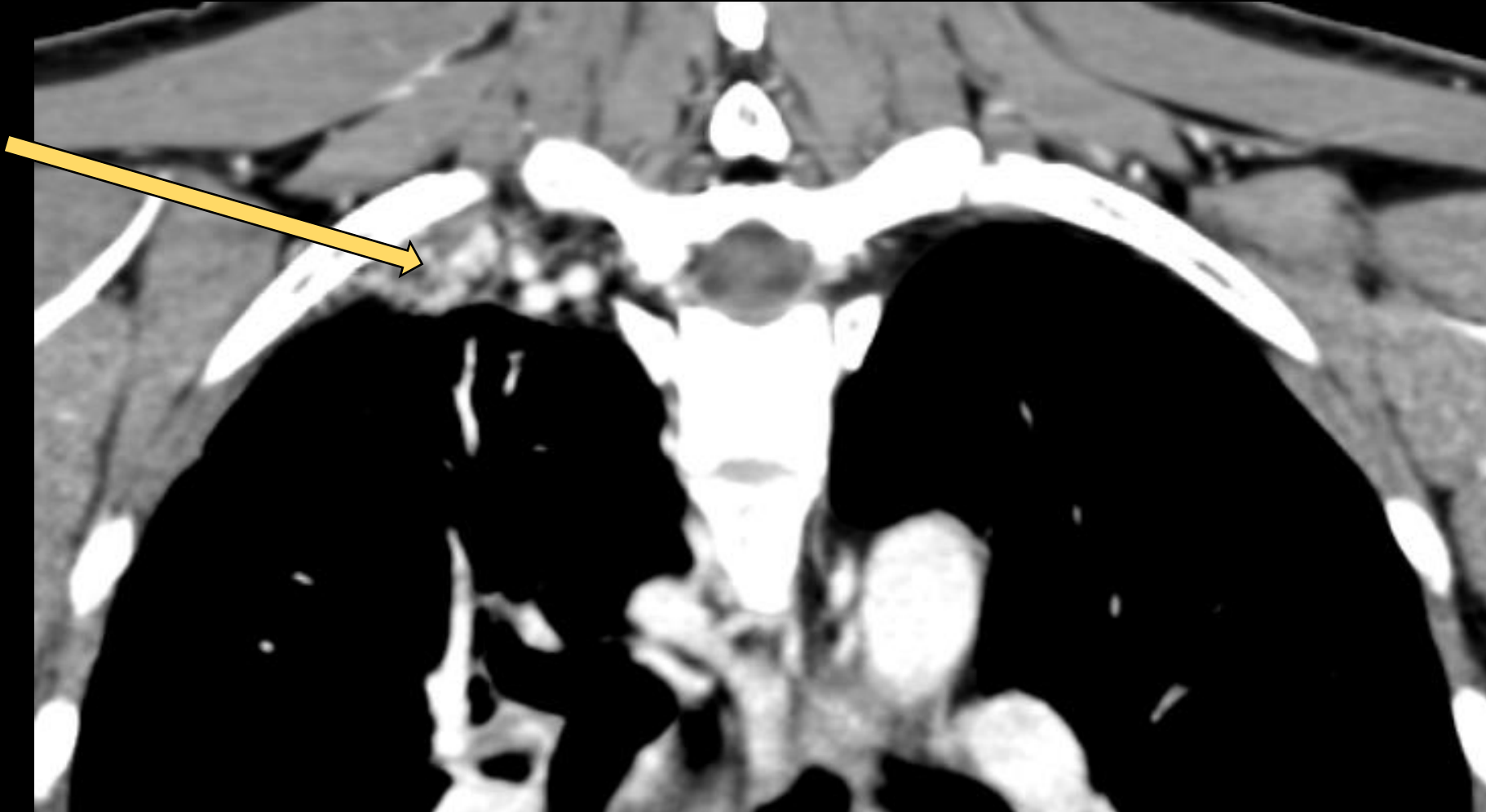


Findings: Chest CT with contrast (unlabeled)

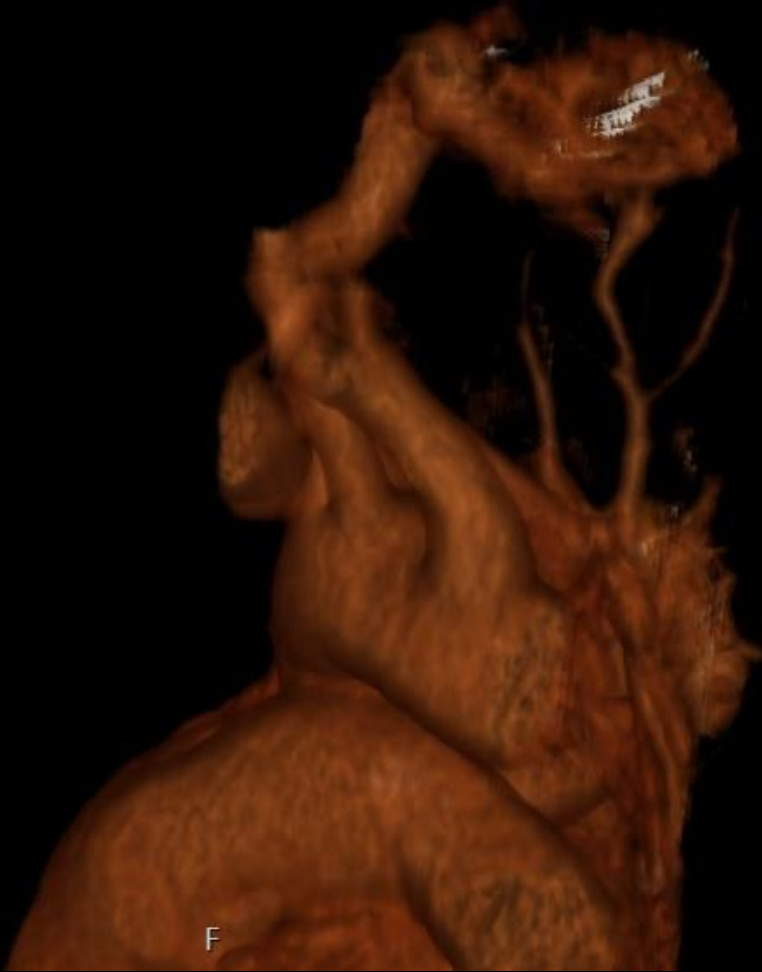


# Findings: Chest CT with contrast (unlabeled)

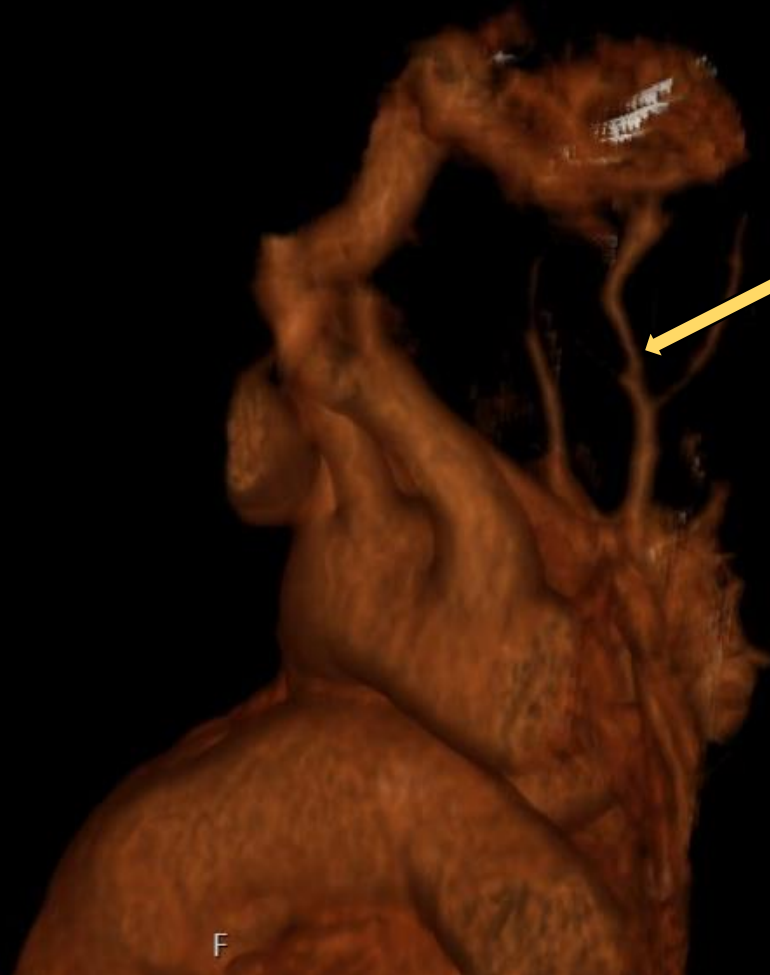
high flow  
arteriovenous  
malformation



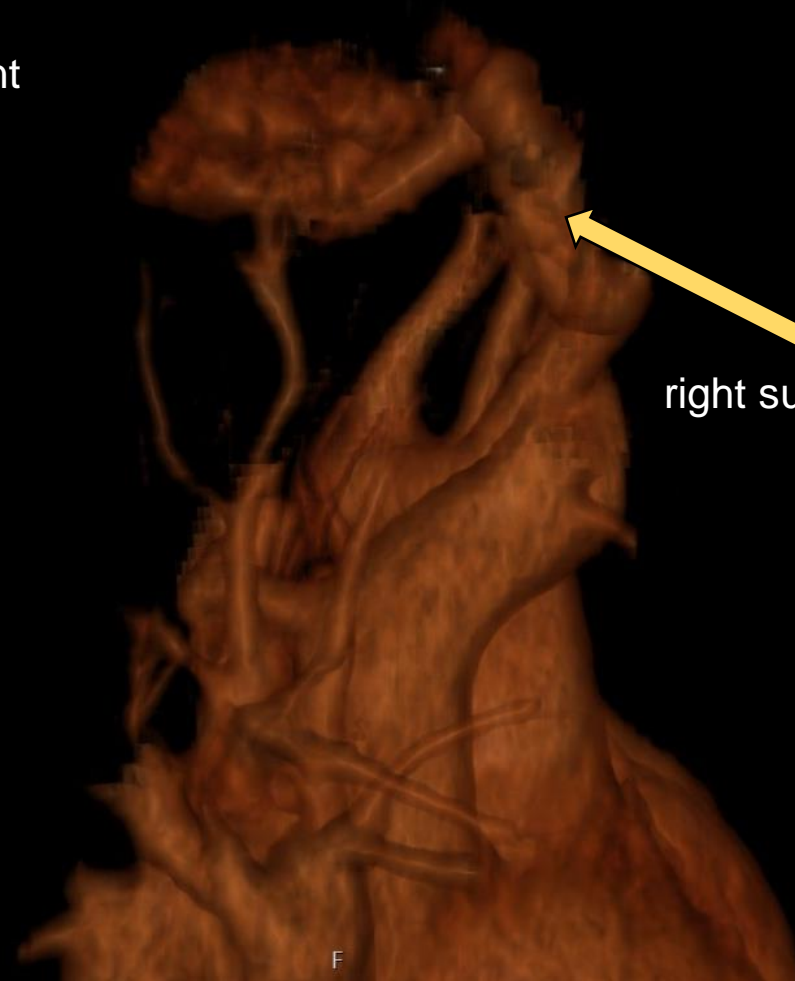
# Findings: 3D reconstruction (unlabeled)



# Findings: 3D reconstruction (labeled)



right superior segment  
pulmonary artery



right subclavian artery



# Final Diagnosis

Right Apical Pleural Cap Due To Rare Arteriovenous  
Malformation

# Case Discussion: Apical Pleural Cap

- Pleural apical caps are curved densities at the lung apex that can be seen with a chest radiograph
- Often bilateral
  - If unilateral, it is more common on the right
- DDX
  - Pleural thickening
  - Pancoast tumor
  - Hematoma
    - Often due to trauma
  - Lymphoma
  - Abscess

# Case Discussion: Arteriovenous Malformations

- Pulmonary arteriovenous malformations are rare abnormal communications between an artery and vein in the lung that is rarely seen as a pleural cap
  - Typically found in lower lobes of lung
    - Apical pulmonary AVMs, seen in this case, are extremely rare
- Patients' symptoms can range from asymptomatic to severe dyspnea
  - Dependent on the degree of right to left shunting of blood
  - Other risks include stroke, brain abscess/other infection and hemoptysis
- AVMs are typically congenital
  - Most patients have the autosomal dominant condition: hereditary hemorrhagic telangiectasia (HHT)
  - May also be found in patients with liver cirrhosis



# Case Discussion: Arteriovenous Malformations

- Diagnosis

- Transthoracic contrast echocardiography is the ideal screening test to detect intrapulmonary shunting
  - If an AVM is present, contrast will be observed in left atrium 3-8 cardiac cycles after it is seen in the right atrium due to the increased time needed to transverse pulmonary vasculature
- CT Chest is performed in patients with known AVM

- Treatment

- Embolization is treatment of choice if feeding vessel is  $> 3\text{mm}$ 
  - Coil are typically utilized to occlude the abnormal communication
  - Success rate from embolization is 98%

# References:

- Martinez-Pitre PJ, Khan YS. Pulmonary Arteriovenous Malformation (AVMs) [Updated 2023 May 20]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK559289/>
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- Raptis D, Short R. CT Appearance of Pulmonary Arteriovenous Malformations and Mimics. *Radiographics*. 2022 Jan-Feb; 42(1): 56-68. doi: 10.1148/rg.210076. PMID: 34990315
- Pollak J, Henderson K, White R. (2014). Pulmonary Arteriovenous Malformations: Diagnosis and Management. In *Image-Guided Interventions* (2<sup>nd</sup> ed., pp. 608-612). Elsevier.