Journal of Pulmonary & Respiratory Medicine

Wu et al., J Pulm Respir Med 2014, 4:4
DOI: 10.4172/2161-105X.1000i002

Image Article Open Access

Perioperative Images of Extralobar Sequestration in a Newborn Boy

Ming-Ho Wu, MD* and Han-Yun Wu, NP

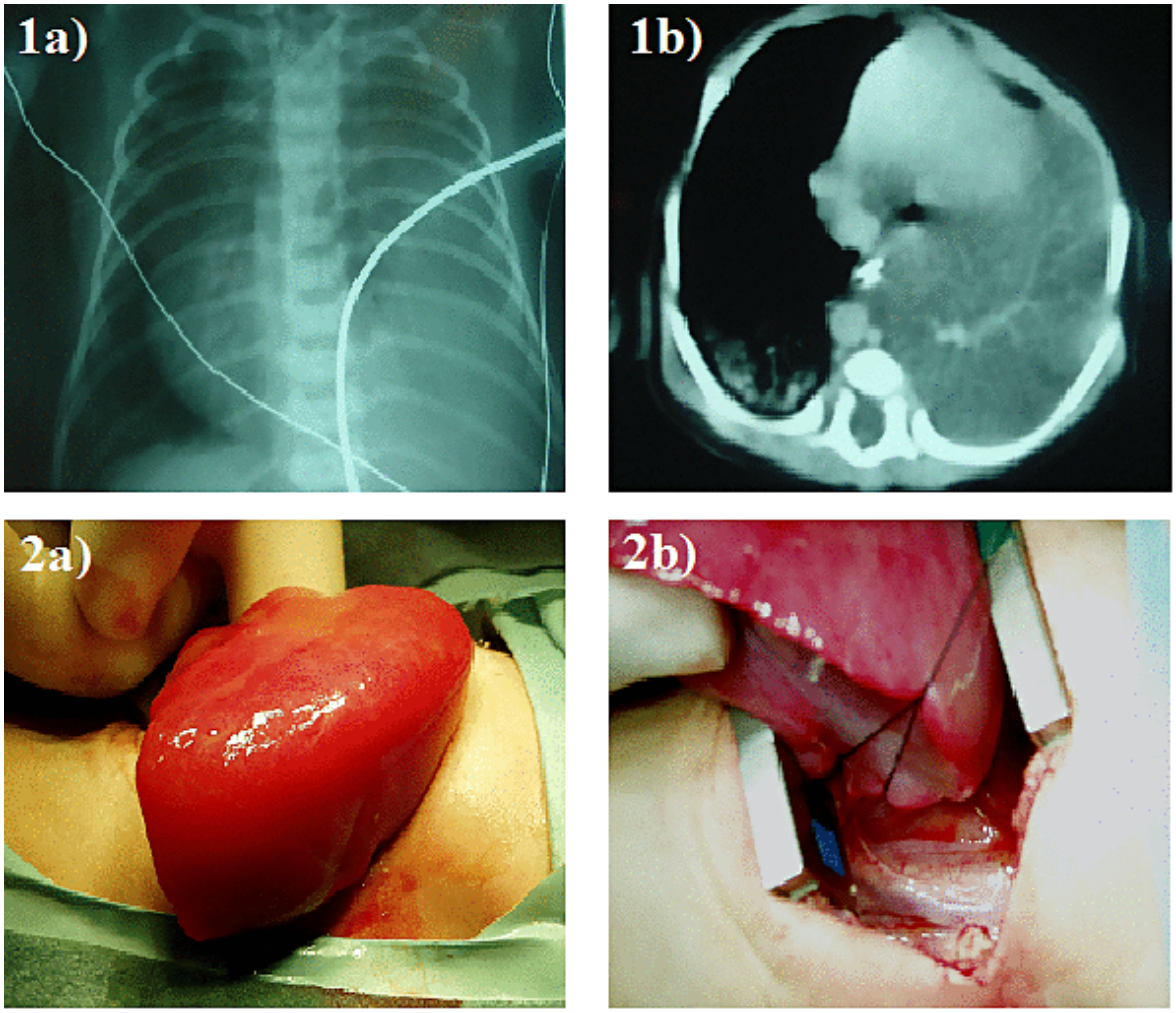
Department of Surgery, Tainan Municipal Hospital, 670 Chung-Te Rd, Tainan, Taiwan

***Corresponding author:** Dr. Ming-Ho Wu, Department of Surgery, Tainan Municipal Hospital, 670 Chung-Te Rd, Tainan, Taiwan, Tel: 886-6-2609926; Fax: 886-6-2606351; E-mail: m2201@mail.ncku.edu.tw

Received date: Jun 28, 2014, **Accepted date:** Jun 30, 2014, **Published date:** Jul 02, 2014

Citation: Wu M-H, Wu H-Y (2014) Perioperative Images of Extralobar Sequestration in a Newborn Boy. J Pulm Respir Med 4: i002. doi:10.4172/2161-105X.1000i002

Clinical Image



Images of Cardiothoracic Surgery

A full-term newborn boy weighing 3025 gm presented with respiratory distress was referred to us for surgical intervention of intrathoracic tumor. The tumor was detected by routine prenatal ultrasound at a local hospital. Preoperative chest film taken at the pediatric critical care unit showed a huge tumor in left lower thorax with dextrocardia and an oral gastric tube in place (Figure 1a). Chest computed tomography revealed a feeding artery originated from the descending aorta to the tumor (Figure 1b). The boy underwent left posterior lateral thoracotomy via the 7th rib bed for resection of the extralobar sequestration measuring 7x6, 5x4 cm (Figure 2a). The sequestration, with a concave surface towards the left diaphragm, showed a small pedicle containing a feeding artery from the aorta and a venous drainage to the hemiazygos vein (Figure 2b). He was well in an 11year follow-up after surgery.