ABSTRACT

Pulmonary embolism (PE) is often underdiagnosed due to its chameleonic clinical presentation. One might overlook this fatal condition when there is a low index of suspicion, especially in low risk patients. We report two cases; one who presented with hypotension initially thought to be consistent with sepsis, and another with hypoxia which at first was treated as acute exacerbation of chronic obstructive airway disease. Incidental point of care ultrasound (PoCUS) findings were suggestive of both deep vein thrombosis and at least submassive PE in both cases, even though these were not intentionally looked for in the first place. Computed tomography pulmonary angiogram (CTPA) confirmed the diagnosis of extensive PE. Their presentations would have been diagnosed differently as aforementioned without PoCUS. These cases demonstrate the importance of PoCUS in detecting the underdiagnosed PE when they were least suspected.