

Supplementary material

Sá Couto D, Santos M, Trêpa M et al. Subacute (hematic) pericarditis following calcified ischemic apical aneurysm rupture and pseudoaneurysm formation. Kardiol Pol. 2023.

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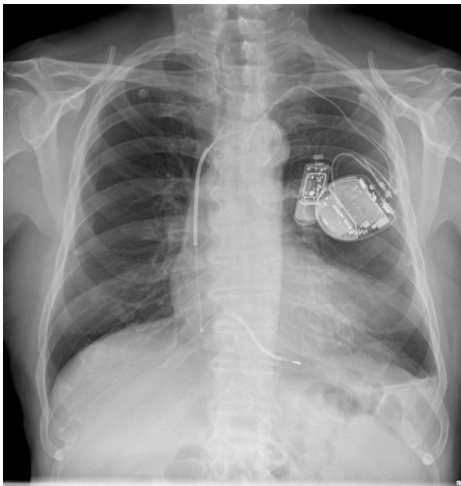


Figure S1. Chest X-ray at admission. Note the single-chamber implantable cardioverter-defibrillator and previously implanted loop recorder

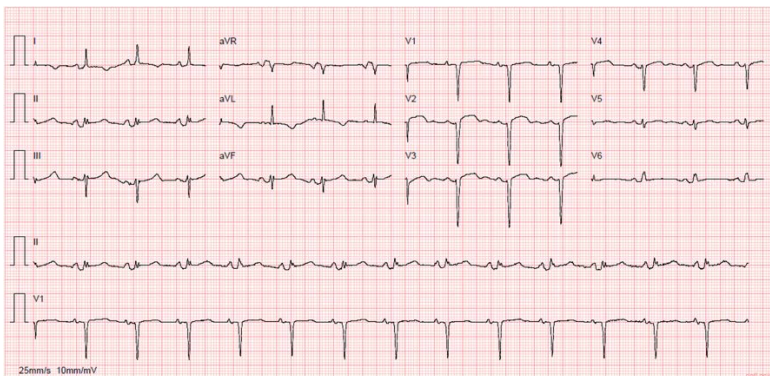
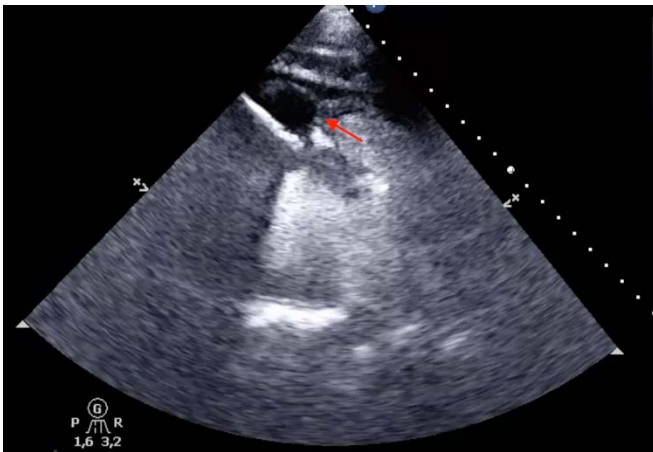


Figure S2. Electrocardiogram at admission revealing sinus rhythm, PR segment depression in more than one lead and PR segment elevation in aVR, anterior QS complexes, weak R wave progression in the precordial leads and lateral T wave inversion. Findings compatible with past myocardial infarction and possible pericarditis

Video S1



Video S1. Apical 4-chamber view depicting large left ventricular apical thrombus with calcifications



Video S2. Parasternal long axis view with contrast (SonoVue®): saccular cavity compatible with pseudoaneurysm, with systolic bulging and without contrast filling (red arrow). Note the mild pericardial effusion