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abdominal surgery to quantify the prevalence and the clinical utility of 2DE using air ventilation-perfusion (V/Q) scans in this setting. Fifty-one patients who underwent major abdominal surgery with suspected postoperative PE underwent 2DE, right heart catheterization (RHC), and a V/Q scan. A perfusion defect on 2DE was correlated with pulmonary artery pressure (PAP) and findings on RHC. There were three patients (5.9%) with documented late PE. All patients with late PE had wedge-shaped perfusion defects on 2DE and elevated PAP, which was in agreement with the finding of pulmonary infarction on RHC. In 1 of these 3 patients, the V/Q scan failed to detect PE. Five of 45(11.1%)

patients with a wedge-shaped defect on 2DE had elevated PAP (> 25 mm Hg). These 5 patients had no clinical symptoms and normal RHC. The findings on 2DE did not change the clinical management. The true prevalence of late PE in patients after major abdominal surgery is approximately 5%. Although a wedge-shaped perfusion defect seen on 2DE is highly specific for the diagnosis of PE, 2DE cannot reliably rule out clinically significant late PE. A V/Q scan may be required in selected patients with isolated findings of pulmonary infarction on 2DE. How the weather affects your hospital visit Share this story Share this story QUEEN CREEK, Wash. - You've got to be careful when visiting the hospital.

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"scanned-page"){.424} {.425} a good amount of reverb. That's it. I love the drum sound. Of course, I can't resist the urge to transform it into something I like better. This is it. I'm not sure how I ended up with a flange on the back of my amp with no gain. Weird! Triumphant Pedal Board