



Figure. Axial CT imaging of brain shortly post-event (A) shows multiple punctate, hypodense foci (air bubbles) at the gray/white junction bilaterally (white arrows); 20 hours post-event (B) shows resolution of most hypodensities, but residual hyperdensities likely representing hemorrhage (black arrow); 5 days post-event (C), only small hyperdensities remain.

Cerebral air embolism during transbronchial biopsy

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A 55-year-old man with a history of prior rectal carcinoma underwent elective bronchoscopy and transbronchial biopsy for evaluation of a new lung mass. At the precise point of biopsy, he

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had a short tonic-clonic seizure followed by irritability, disorientation, and hemiparesis of his left face, arm, and leg. The timing of the event and appearance on CT (figure) suggested the diagnosis of cerebral air embolism (CAE). Although rare, CAE can be a potentially life-threatening complication of this procedure.^{1,2} Our patient returned to his normal neurologic baseline within 48 hours of the event without intervention.

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