

Part
one

1. (e) and (f). The acute onset of the dyspnoea strongly favours one of these two diagnoses. The lack of previous lung disease puts thromboembolism at the top of the list, though it certainly does not rule out pneumothorax due to rupture of a previously unsuspected bulla.

Part
two

2. (c) or (e).

Part
three

3. (c). A raised d-dimer level indicates thromboembolism when combined with answer (e) in Q2.

Part
four

4. (a), (b), (c), and (e). Post-operative risk for thromboembolism remains higher than that for non-operated women for up to 6 months.

Part
five

5. (a), (b), (c), and (e). In fact the peak time for post-operative thromboembolism is 3 weeks after surgery, when most patients have been discharged home, so it is essential that the diagnosis is kept in mind by doctors in practice when patients suddenly become breathless.

Reference

Sweetland S et al. Duration and magnitude of the postoperative risk of venous thromboembolism in middle aged women: prospective cohort study. *BMJ* 2010; 340: 32.



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