

A potentially hazardous object with benign appearance at the outset

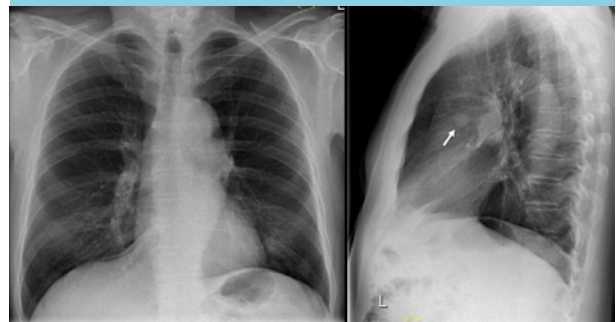
B. Weijs^{1*}, M. de Booi², H-J. Mager⁵, J-A. Vos⁴, G.P. Bootsma³

¹Department of Cardiology, Maastricht University Medical Center and Cardiovascular Research Institute Maastricht, the Netherlands, Departments of ²Radiology, ³Pulmonology, Atrium Medical Center, Heerlen, the Netherlands, Departments of ⁴Interventional Radiology, ⁵Pulmonology, St. Antonius Hospital, Nieuwegein, the Netherlands, *corresponding author: tel.: +31(0)43-3876543, fax: +31(0)43-3875104, email: bobweijs@hotmail.com

CASE REPORT

We present the case of a 73-year-old male patient who was referred to our outpatient department because of a solitary pulmonary nodule on routine chest X-ray (*figure 1*). His medical history comprised mood disorders, benign prostatic hyperplasia, adequately treated hypertension and asbestos exposure. He had never been hospitalised previously and a chest X-ray was requested as part of the routine work-up by the neurologist for mild cognitive impairment. The patient was free of pulmonary symptoms. Physical examination and biochemical and haematological tests revealed no relevant findings. Lateral chest X-ray revealed a discrete, homogenous round nodule with smooth borders, projecting over the ascending aorta, which was not visible on the posteroanterior view (*figure 1*).

Figure 1. Lateral chest X-ray showing a homogenous round nodule (arrow), projecting over the ascending aorta, which is not visible on the posteroanterior view



WHAT IS YOUR DIAGNOSIS??

See page 349 for the answer to this photo quiz.