A 53-year-old man presented with sudden-onset dyspnea and chest pain. Transthoracic echocardiography showed a mobile thrombus extending from the right atrium to the left atrium through a patent foramen ovale (Fig. A). For better delineation of the thrombus and atria, we performed transesophageal echocardiography, which showed a 53 x 8-mm mobile thrombus entrapped in the patent foramen ovale (Fig. B). Multidetector computed tomography revealed extensive pulmonary embolism with associated pulmonary infarction in the right lower lobe. Doppler ultrasonography of the lower extremities showed deep vein thrombosis in the right leg. Hospitalization was recommended to the patient due to pulmonary embolism and high risk for systemic embolization, but he did not accept.

Figures. (A) Transthoracic echocardiography demonstrates biatrial mobile thrombus. (B) Transesophageal echocardiography (bicaval view) shows a large mobile thrombus extending from the right to the left atrium through a patent foramen ovale. Most of the thrombus is floating in the right atrium, and the remaining is in the left atrium. LA: Left atrium; RA: Right atrium; LV: Left ventricle; RV: Right ventricle; IAS: Interatrial septum.