Presently described is case of left ventricular (LV) posterior wall rupture contained by posterolateral pseudoaneurysm with calcified thrombus. A 63-year-old male was admitted to coronary intensive care unit with acute pulmonary edema and required mechanical ventilation for 2 days. He had undergone coronary angiography with diagnosis of unstable angina 1 year prior, and drug-eluting stent had been implanted for 90% stenosis of proximal left anterior descending artery (LAD). Chest radiography revealed enlarged mediastinal and cardiac silhouette. Computed tomography scan of the chest displayed LV posterior wall rupture contained by posterolateral pseudoaneurysm with calcified thrombus (Figure A, B, arrows). Transthoracic echocardiogram showed dilated, hypokinetic LV with inferoposterior hypokinesia and confirmed pseudoaneurysm 7.1x4.7 cm in size at widest diameter and with neck length of 4 cm, extending from posterolateral to anterolateral wall (Figure C and supplementary video 1*). Coronary angiography revealed double vessel disease with significant stenosis diagonal LAD and total occlusion in the proximal left circumflex artery (Supplemental video 2 and 3*). Patient underwent open-heart surgery. Dor technique was used for endo-exclusion of pseudoaneurysm with endopatch. Rupture was repaired with pericardial patch and polypropylene running suture. Coronary artery bypass grafting was performed, and procedure was completed without complications (Figure D-G and supplementary video 4*). Unfortunately, the next day, the patient died due to malignant arrhythmia and severe bleeding.