

COVID-19: case 66

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71-year-old female

patient admitted to the ED with dyspnea and fever (39°C) for 3 days. Epidemiologic risk for SARS-CoV-2 exposure. Medical history: COPD.

Dyspnea,
tachypnea, pO₂ 93%.

RT-PCR on nasopharyngeal swab positive for SARS-CoV-2.

Chest radiography:



Diffuse interstitial markings and peripheral consolidations. Right pleural effusion.

The patient was hospitalized in a Covid-19 dedicated department with clinical improvement, as confirmed by CT scan performed 8 days after.



Small, blurred ground-glass opacities in the apicoposterior segment of the LUL and in the ML. bilateral pleural effusion, more evident on the right. Emphysema.