

FUO

*

((°F) / °C (:
(

%

%

:

مجله علمی ابن سینا / اداره بهداشت و درمان نهاجا (دوره ۹، شماره ۱،
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| ESR | CK-MB | CPK | LDH | |
|-----|-------|-----|-----|--|
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| | | | | |
| | | | | |
| | | | | |
| | | | | |

:

BP= / mmHgPR= /min

RR= /minT= / °C

(FUO)

/)

(

:

WBC= FBS= Na=

Hb= / LDH= K=

PLT= CPK= T₃=

MCV= / PT= T₄= /

MCH= / PTT= TSH= /

ESR= SI= HBS Ag= Neg

CRP=+++ TIBC= HCVAb= Neg

BUN= Ferritin= HIVAb= Neg

Cr= U/A,U/C=

FUO

FUO

RBBB

ECG

(Right Bandle Branch Block)

LDH

%

%

%

% / /

%

$$\left(\dots \right)$$

)

%

%

.

%

%

TEI

(Trans esophageal Imaging)

(%)

(%)

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(%)

(%)

(%)

(%)

(%)

MRI CT

(%)

(%)

(%)

(%)

(%) ESR

(%)

(%)

(%)

(%)

(%)

(%)

%
/0

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Atrium myxoma as FUO

Abstract

Fever of unknown origin (FUO) is: 1) temperatures $>38.3^{\circ}\text{C}$ (101°F) on several occasions; 2) a duration of fever of >3 weeks; and 3) failure to reach a diagnosis despite 1 week of inpatient investigation. Fever of unknown origin in contagious diseases is a problem 30% in children and 10% in adults in spite of adequate researches.

We try to explain a case diagnosed as atrium myxoma with the symptoms of three week fever, dry cough, and breathing problems that was admitted and underwent surgery.

Keywords: Fever of unknown origin, Atrium myxoma, Surgical operation

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