

Trying Times



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The world as we know it has changed dramatically. The current COVID-19 pandemic has ravaged the world, stretching health-delivery systems and causing hundreds of thousands of deaths. Our knowledge of the pathophysiology of this disease continues to expand. It appears to be clear now that many of the patients with COVID-19 suffer important cardiovascular complications. They often present venous and arterial thrombosis. In a Dutch study of critically ill patients in the ICU, thromboembolic complications have been seen in 49% of the patients, with pulmonary embolism accounting for the majority of the events.¹

In the current issue of CASE, Horowitz *et al.* present the detection of a clot in transit using TEE in an ICU patient with COVID-19. Because of the potential for contagion when performing the test, echocardiography has been used sparingly and point-of-care echo has gained relevance. The American Society of Echocardiography has released important statements in regard to the use of POCUS echo² and the protection of echocardiography providers during this pandemic.³

We hope that the CASE community remains safe and engaged as we move forward in uncharted waters. We sincerely thank all the authors and reviewers who have dedicated their time and effort to help CASE continue in its mission of publishing high-quality educational content.

REFERENCES

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