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We thank the patient and her family for consenting to the publication of this case. We sincerely thank the medical staff and the nursing staff of the pediatrics ward of the hospital where the patient was treated and the Pediatric Resuscitation Center of the National Center of Cardiology Research and Training for providing the image of the irregular pulse during the patient's resuscitation. Conflicts of Interest ===== The authors declare that they have no conflicts of interest regarding the publication of this paper. ![A 21-month-old girl with a diagnosis of pulmonary thromboembolism. (a) Chest x-ray at the time of admission showing the presence of a large mass in the right lung and mild pleural effusion. (b) Computed tomography showing mass with a thick wall, associated with segmental pulmonary artery obstructions.](CRIFE2018-3565683.001){#fig1} ![The pediatrics ward of the hospital where the patient was treated. The nurses working in the ward press and connect the robot arms with the chest of the child via the plate to support the chest.](CRIFE2018-3565683.002){#fig2} ![A 20-month-old girl with a diagnosis of pulmonary thromboembolism. (a) Computed tomography showing the appearance of the mass in the right lung. (b) Cardiac ultrasound. (c) Her right pulmonary artery was obstructed, so that no blood flow was shown.](CRIFE2018-3565683.003){#fig3} ![A 21-month-old girl with a diagnosis of pulmonary thromboembolism. (a) Chest x-ray at the time of discharge showing mild dilatation of the right cavities, and (b) CT scan showing small pericardial effusion. (c) ECG showing no arrhythmia.](CRIFE2018-3565683.004){#fig4} ![The pediatrics ward of the hospital where the patient was treated. Chest movements performed via the robotic arms of the monitor. The respiratory function of the child can be easily observed.](CRIFE2018-3565683.005){#fig5}

