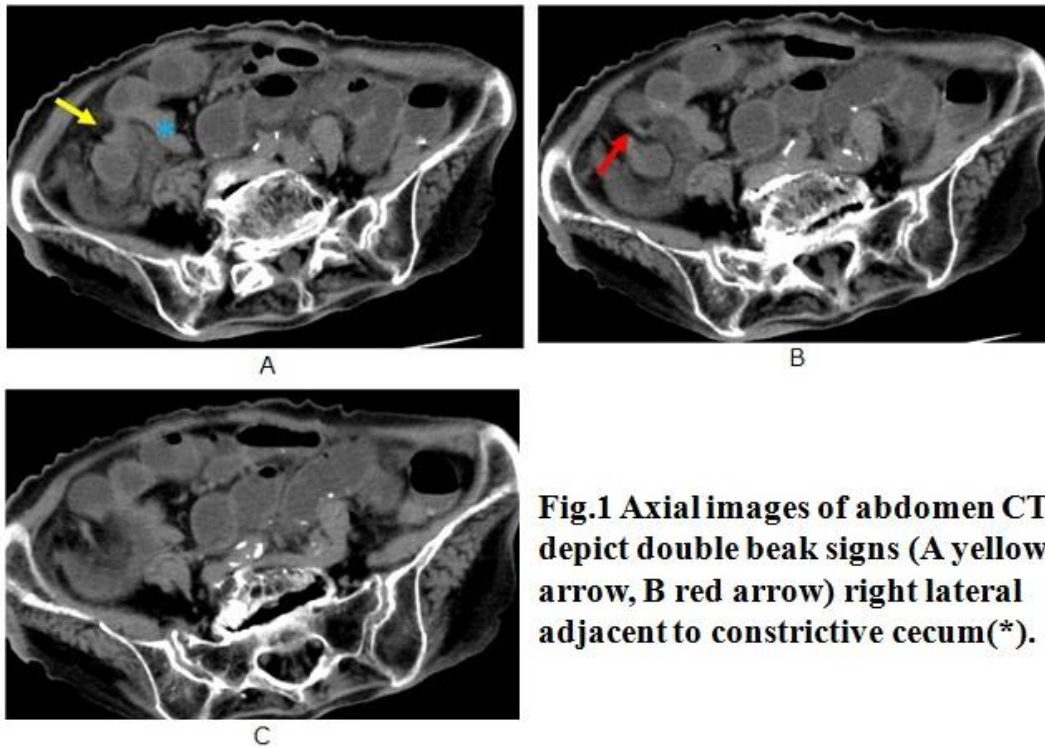


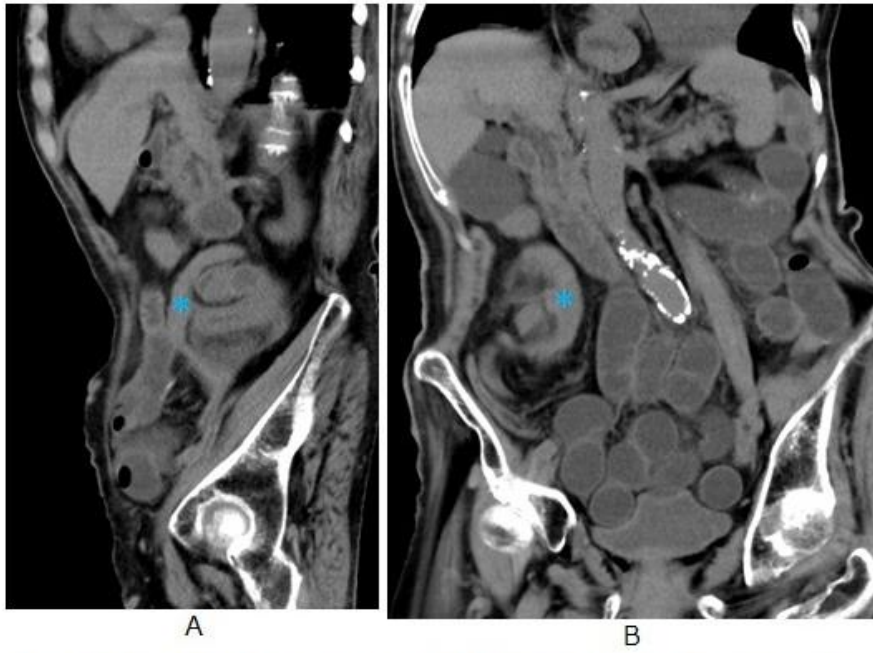
## A Case of the 10 days

### Case 301

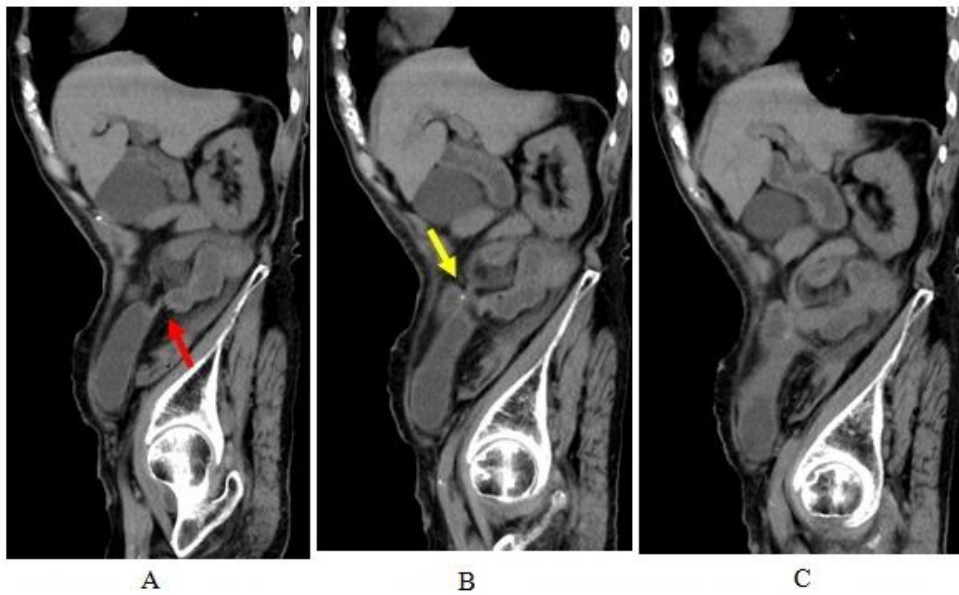
A ninety four-year-old female presented in our hospital for rectal bleeding and vomiting. She experienced rectal bleeding today, three times of 1pm, 3pm and 6:30 pm. Her repeated vomiting of salivary-like fluids emerged at 6:30 pm. Because her SpO2 dropped, the ambulance car was called. She usually took time at nursing care home in weekdays and passed at home in the weekends. Laboratory test revealed white blood cells 10730/mm<sup>3</sup>, neutrocytes 87.2%, CRP 0.80 mg/dL, BUN 29.6 mg/dL, LDH 268 U/L. She took non-enhanced CT for further investigation (Figs 1 - 4).



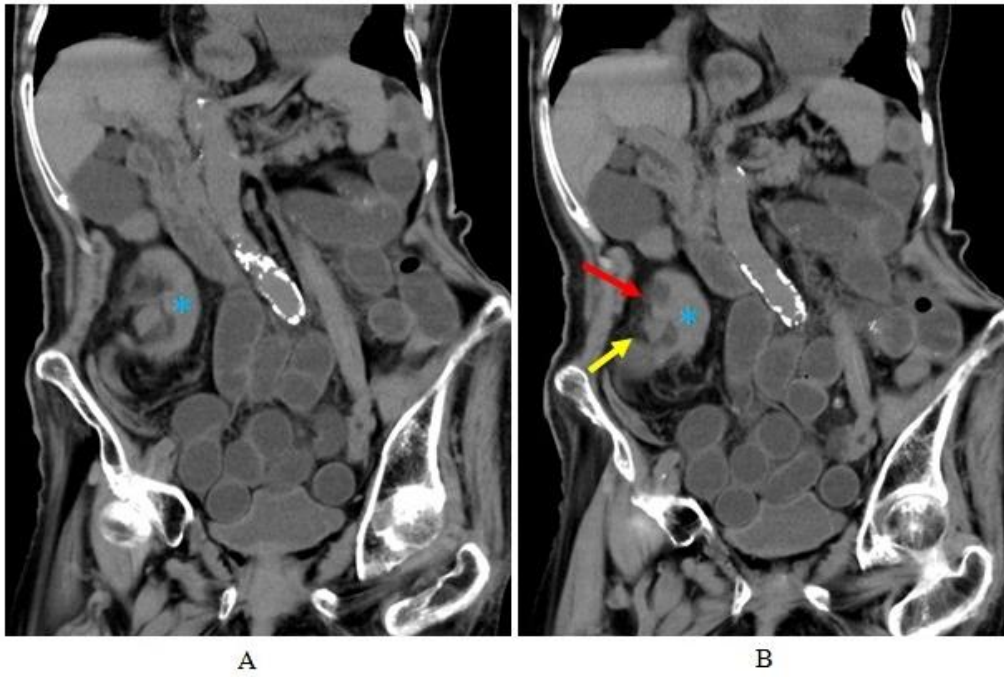
**Fig.1 Axial images of abdomen CT depict double beak signs (A yellow arrow, B red arrow) right lateral adjacent to constrictive cecum(\*).**



**Fig. 2** Sagittal and coronal CT depict that collection of small bowel is demonstrated in posterior (A) and lateral (B) area of cecum and ascending colon (\*) where small bowel should be originally absent.



**Fig. 3** Sagittal CT images depict double beak signs (A red arrow, B yellow arrow) adjacent to cecum.



**Fig. 4** Coronal CT images depict double knots sign (A, B red arrow, yellow arrow) adjacent to constructive cecum and ascending colon (A \*).



**Fig.5** Laparoscopic findings demonstrate red-dark colored small intestine and mesentery indicative of ischemic necrosis.

What is the imaging diagnosis on chest CT ?

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1. **Bowel intussusception**
2. **Appendicitis**
3. **Strangulation hernia**
4. **Cecal cancer**
5. **Infectious colitis**

answer

2023.6.13