DISCUSSION

Case Report

Initial evaluation
- Healthy 31-year-old Caucasian shot twice to head with crossbow bolts, entry wounds to midforehead and right temple.
- Oral exam revealed tooth #16 laterally displaced by the tip of a crossbow bolt. Fiberoptic exam revealed metallic foreign body in posterior nasal cavity and nasopharynx with no active bleeding. Remaining exam unremarkable.

CT findings:
- 6.5 mm by 1.9 mm crossbow bolt extending from right orbitomeatal fossa through right pterygoplatine fossa and posterior maxillary sinus traversing the nasopharynx and through the left posterior soft palate with the tip ending anterior to the left mandibular ramus. “Blades” of arrow tip were in “open” position in retropharyngeal space and nasopharynx. CT angionography was negative for internal maxillary or sphenopalatine artery injury. CT also revealed a left frontal bone fracture immediately superior to the frontal sinus and a minimal amount of pneumocephalus in the anterior cerebral vault.

Operative removal of foreign body
-Bolt was observed in choanae/nasopharynx with an endoscope, and superior blade was retracted endoscopically. Arrowhead was advanced forward and removed through left oropharynx. No neurovascular injury occurred. A patek separation from the amniotic and the floor of mouth were closed primarily, mandible was plated and neck incision closed with bilateral drains. Nasopharyngeal stents were placed to prevent scar contracture/stenosis.

Post operative course was uneventful: decannulated post-op day 5, discharged without complications post-op day 8, and 1 month follow up showed no further neurologic deficit.

REFERENCES