Pulmonary embolism is a serious disease whose diagnosis and therapy is very consuming and must be urgent . Pulmonary embolism occurs closing the pulmonary artery or their branches thrombus which may be generated in situ, rarely , but more frequently occurs in some distant location of the vascular system . This state may be called as thromboembolic disease. Despite ever -improving diagnostic capabilities remain a number of cases of pulmonary embolism undetected . The first and most important step in the diagnostic algorithm for pulmonary embolism even think based on the clinical picture of the patient.

The actual pulmonary embolism can occur with different variability and therefore it is necessary to correct after

diagnosis without delay appropriate medical treatment . I correctly indicated treatment may have number of side effects , so the therapeutic regimens on the basis of new clinical studies are still being upgraded. Lege Artis procedures are designed in our country and described recommendations in the diagnosis and treatment of pulmonary embolism Czech Society of Cardiology .

The last revision was in 2007. The aim of optimizing therapy is to reduce the number of relapses, side effects and complications, prevent fatal consequences of pulmonary embolism, extension of life, quality of life, reduced hospitalization.

Rate of reperfusion time evolution is very difficult. In fact, it is only possible to Based on examination of any of the imaging methods, lung scintigraphy or CT angiography . Most patients , however, further tests during treatment or after end , not lose .

Pathogenetic classification distinguishes several types of pulmonary embolism according to the mechanism

formation . In my work I will only thrombotic embolism .