Laparoscopic sleeve gastrectomy is a common, low-cost bariatric procedure resulting in significant weight loss. The incidence of post-surgical deep venous thrombosis varies from 1.6 to 1.8%, however, Porto-mesenteric thrombosis is a rare but potentially fatal complication of the surgery.

Case Description
- 32-year-old female
- Past Medical History: hypertension, type 2 diabetes, hyperlipidemia, morbid obesity status post laparoscopic sleeve gastrectomy 10 days prior
- Presenting Complaint: epigastric pain, fevers, and chills
- She denied nausea or vomiting
- Last bowel movement was 2 days ago but was able to pass flatus.
- Vitals: HR 120 beats per minute (bpm), blood pressure was 130/80 mmHg, Temp 37.8 C, RR 18/min.
- Physical examination: Epigastric tenderness.
- Labs:
  - WBC: 11.7 10⁹/L
  - AST: 72 IU/L
  - ALT 173 IU/L
- Imaging
  - CT Scan abdomen and pelvis: acute porto splenic and superior mesenteric venous thrombosis
- Interventional radiology was consulted who recommended to start a heparin drip
- Patient was able to ambulate well and tolerate a regular bariatric diet
- Discharged on apixaban

Discussion
The thrombosis of the portal and/or mesenteric veins without the development of collaterals can lead to intestinal ischemia or necrosis and the clinical presentation may be nonspecific. Clinicians should keep this potentially life-threatening complication in mind in patients who have recently undergone this procedure.