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**Title:** A nasogastric feeding tube placed at the pleural space via bronchial system

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**Body:** Nasogastric feeding tubes (NGFT) used for gastric decompression and feeding at the emergency services and intensive care units. Anatomic malformations, age, worsening of mental conditions due to primary disease or sedation, swallowing difficulties or depression of cough reflexes, intubation are the major risk factors. Tracheobronchial system is the most common reported disposition of NGFT. But intrapleural localization of the NGFTS are very rare. In our case we present a patient with a dispositioned NGFT via bronchial system. CASE: 93 years old female patient with the diagnosis of ischemic cerebrovascular disease was consulted for acute dyspnea after NGFT insertion. She was unconscious, dyspneic with intercostal retracitions. Breathing sounds were diminished at the right hemithorax. Distal part of the NGFT was seen at the pleural space via tracheabronchial system in chest X-ray. Pleural effusion and pneumothorax were also determined.

NGFT was removed immediately and chest tube thoracostomy was applied. Medical therapy was rearranged due to the patients clinical situation. NGFT must be applied with care also chest X-ray controls may be helpful for prevention morbidity and mortality of malposition.