A 64-year-old man developed a 3-month history of recurrent fatigue, fevers, and leukocytosis after teeth cleaning. A year earlier, he had experienced sudden vision loss in the left eye, believed to be nonarteritic anterior ischemic neuropathy.

Two-dimensional and 3-dimensional transthoracic and transesophageal echocardiography revealed a shaggy, highly mobile, 13.0 × 1.5 cm sausage-like mass in the left heart (A,B). The mass prolapsed intermittently through the mitral valve into the left ventricle (Online Video 1) and was tethered to the interatrial septum near the fossa ovalis (C,D, Online Videos 2 and 3). Neither significant mitral regurgitation nor mitral stenosis was observed. Blood cultures grew *Streptococcus sanguinis*.

The patient underwent surgical removal of the mass (E, Online Video 4). Histopathology revealed left atrial myxoma superinfected with *S. sanguinis*. Despite the giant tumor size and its plop through the mitral valve, the myxoma was clinically silent until it led to subacute nonvalvular infective endocarditis and likely prior ocular embolism.