

Admission Date May 18, 2012	Admission Type Elective	Discharge Date May 18, 2012	Discharge Disposition Home
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**Consults electronically signed by Hakimian, Behrooz, MD at 5/21/2012 10:34 AM**

Author:	Hakimian, Behrooz, MD	Service:	(none)	Author	Physician
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THE CEDARS-SINAI  
OUTPATIENT CANCER CENTER

NAME:  
MR#:  
DOE  
DATE: 05/18/2012  
PHYS: Behrooz Hakimian, M.D.

CONSULTATION

RADIATION ONCOLOGY CONSULTATION

DATE OF CONSULTATION: 05/18/2012

REFERRING PHYSICIAN

Jethro Hu, MD

IDENTIFYING DATA

The patient is a very pleasant 28-year-old female with a diagnosis of glioblastoma multiforme.

HISTORY OF PRESENT ILLNESS

This pleasant patient was in her usual state of good health and apparently presented with severe headaches and after further evaluation apparently was noted to have a seizure. She was attended by her boyfriend who took her to the emergency room. This was worked up by CT scans which revealed that she does have a right frontal brain lesion. Apparently she was obtunded and intubated in the initial presentation and subsequently underwent resection of this large cystic mass which caused cerebral edema and transtentorial herniation. Postoperatively, MRI was obtained and this revealed that there was no residual contrast enhancement. There was T2 abnormality noted in the right midfrontal lobe superiorly. Pathology of this lesion was glioblastoma multiforme, WHO grade 4. The patient showed up to 90% positivity for P53. IDH was positive in 20% of the cells. MGMT was less than 1% of the tumor nuclei. PTEN was retained. EGFR was pending at the time of initial pathology.

Given these findings, the patient is being considered for combined chemoradiation as well as vaccination trial. I have been asked to evaluate her regarding consideration of radiation therapy.

## PAST MEDICAL HISTORY

Significant for the above-mentioned. She has a history of migraine headaches.

## PAST SURGICAL HISTORY

She had a left knee ACL surgery.

## FAMILY HISTORY

No history of cancer was elicited from the patient.

## SOCIAL HISTORY

The patient denies any smoking, drinking, or use of illicit drugs. She is a personal trainer.

## ALLERGIES

No known drug allergies.

## MEDICATIONS

At the present time include antiseizure medications.

## REVIEW OF SYSTEMS

GENERAL: She denies any fever, chills, or night sweats.

HEENT: Denies any blurry vision, double vision.

CARDIOVASCULAR: Denies any chest pain.

RESPIRATORY: Denies any dyspnea.

GASTROINTESTINAL: Denies any nausea or vomiting.

GENITOURINARY: Denies any urgency or nocturia.

OB-GYN: She is G 0, P 0. She indicates that she is not pregnant.

SKIN: Denies any rashes.

The rest of the 14-point review of systems was performed and was positive for the pertinent findings as per HPI.

## PHYSICAL EXAMINATION

GENERAL: She is a well-developed, well-nourished female under no acute distress.

VITAL SIGNS: Her weight is 117.8 pounds, temperature 98.2 degrees, blood pressure 107/64, respirations 16, pulse 56.

HEENT: Sclerae showed injection on the right side. Pupils are equally round and reactive to light. Extraocular motion is intact.

NECK: Supple.

HEART: Regular.

LUNGS: Clear.

ABDOMEN: Soft and nontender. No hepatosplenomegaly.

EXTREMITIES: No clubbing, cyanosis, or edema.

NEUROLOGIC: Alert and oriented x 3. Cranial nerves II-XII intact.

Muscle strength 5/5, equal bilaterally.

SKIN: Intact except a few tattoos on her left arm.

## IMPRESSION

Glioblastoma multiforme, status post initial complete remission.

## PLAN

The patient is being considered for phase II clinical trial of ISLET CELL TUMOR-107. In addition, she would benefit from a course of combined radiation therapy with Temodar. The rationale, risks and benefits of this therapy were discussed in detail with the patient and her boyfriend. They understand the side effects of skin reaction, fatigue, hair loss, and long-term potential for necrosis of the brain. A dose of 60 Gy in 30 fractions with field reduction after 46 Gy is intended. 3D conformal radiation therapy will be used with a mask as immobilization device. She is to undergo CT planning today and treatment will start next week or the following week, pending HLA typing and her dendritic cell vaccine evaluation.

I thank you again for asking me to evaluate and participate in the care of this very pleasant patient.

Behrooz Hakimian, M.D.  
Radiology Oncologist

BH/STS/PC #: 514602600 D: 05/18/2012 T: 05/20/2012 Job#: 444123

cc: Jethro L. Hu, MD

Chirag Patil, MD

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