

Gender: Female

Age: 33

MRN: 765344

Diagnosis: Chronic hepatic failure

History and Physical:

Patient Information:

Name: Sobia Pervaiz

Age: 32 years

Gender: Female

Marital Status: Married, has a child

Residence: Bahrain

Occupation: Housewife

Medical History: Diabetic (most likely Type 1), controlled on Insulin

Social History: No smoking, No alcohol, Post-graduate education

Family History:

Parents: Diabetic, Mother is hypertensive

Grandmother and Aunt had Breast cancer

Maternal uncle had Blood cancer

Current Medications:

Hormonal medications for conception

Metformin 500mg OD

Insulin

Doctor's Conversation with Patient:

Doctor: Hello, Sobia. What brings you in today?

Patient: I have been feeling nauseous lately.

Doctor: I see. Let me ask you a few questions. Have you experienced any significant weight loss recently?

Patient: No, I havent had any weight loss.

Doctor: Have you had any fevers or night sweats?

Patient: No, no fevers or night sweats.

Doctor: Any physical or cognitive limitations?

Patient: No, I dont have any limitations.

Doctor: Lets go over your investigations. You had an ultrasound, CT scan, and MRI. I see from the CT scan dated 15th February that it showed multiple bilobar hepatic lesions. Did you experience any symptoms like jaundice or melena?

Patient: No, I didnt have jaundice or melena.

Doctor: I see your MRI from 6th March shows a large mass centered over segment 4 of 12cm with washout and diffusion restriction, suggesting HCC. The biopsy shows a well-differentiated hepatocellular lesion, which favors hepatic adenoma.

Patient: Yes, Ive been informed about the diagnosis of hepatic adenoma.

Doctor: Good. We are discussing surgery options for you. The plan is to perform a central hepatectomy after Eid. I would like to submit the CDs of your CT scan and MRI for further MDT discussion.

Patient: Okay, I understand. I will send the CDs. Is there anything else I need to do?

Doctor: You will meet Mr. Asif for surgery coordination, and we will perform a pre-operative workup. The risk of mortality is around 1-2%, and the morbidity risk is around 10%. We will monitor your progress closely.

Follow-Up Visit:

Doctor: Welcome back, Sobia. How have you been feeling since your last visit?

Patient: I dont have any active complaints. Everything feels normal.

Doctor: Great to hear. I see that your CT scan from PKLI, dated 15th February, shows multifocal bilobar arterialized lesions. Though the biopsy confirmed hepatic adenoma, the radiology report suggests that fibrolamellar HCC and fibro-nodular hyperplasia remain differential diagnoses.

Patient: Yes, the doctors explained that.

Doctor: For now, the MDT has advised surgery, as the liver mass could be related to either hepatic adenoma or fibro-nodular hyperplasia. We are proceeding with surgery after Eid.

Patient: Got it. Is there any additional preparation I need to make?

Doctor: We will proceed with the pre-operative workup and fitness tests. Please meet the coordinator, Mr. Asif, for further details. And dont forget, the risks for surgery are minimal, but it's important to be aware of the potential for complications.

Lab Results:

HB: 14.4

TLC: 10.6

PLT: 349

T-BIL: 0.7

D-BIL: (Not recorded)

ALT/AST: 59/30

ALP: 239

Albumin: 4.8

Creatinine: 0.51

Na+: 139

K+: 4.51

INR: 1.03

Assessment / Diagnosis:

Hepatic Adenoma

Plan:

Central Hepatectomy after Eid

Submit CDs of CT and MRI for MDT discussion

Pre-operative workup and fitness check (Meet Mr. Asif)

Explain risks of mortality (1-2%) and morbidity (10%)