Gender: Male

Age: 9

MRN: 808374

Diagnosis: Hepatic fibrosis

History and Physical:

Doctor: Hello, how are you today?

Patient's Guardian: We are here for our child's follow-up appointment.

Doctor: Could you please tell me your child's name and age?

Patient's Guardian: His name is Adnan Shafiq, and he is 10 years old.

Doctor: Great, thank you. Let's start with his medical history. What are his presenting complaints?

Patient's Guardian: He has been experiencing malena (dark stool) for the past two weeks.

Doctor: I see. Can you tell me more about his previous medical history?

Patient's Guardian: He had kidney stones at 9 months old, and was operated on for that. Later, he developed recurrent fevers, and at 7 years old, he was diagnosed with hepatosplenomegaly and underwent a bone marrow biopsy. After extensive investigations, he was diagnosed with congenital hepatic fibrosis. He has had two EGDs (Esophagogastroduodenoscopies) done.

Doctor: Thank you for that information. Does he have any known complications or decompensations?

Patient's Guardian: Yes, he has had an upper gastrointestinal bleed (UGIB) and some issues with his spleen and liver. He also has pancytopenia.

Doctor: Understood. Lets move on to his physical examination. What did you observe during his check-up?

Patient's Guardian: His weight is 25 kg and his height is 131 cm, both above the 25th percentile for his age. There was no jaundice, but he has some pallor. His spleen was palpable 12 cm below the costal margin, and the liver was also palpable. There was no ascites. His abdomen was distended.

Doctor: Thats noted. How about his current medications?

Patient's Guardian: He is taking propranolol 10mg twice daily, omeprazole 10mg once daily, and maltofer 5ml once daily.

Doctor: Now, let's look at his recent lab results. The bilirubin is 0.4, ALT is 45, AST and ALP are normal, albumin is 3.4, and INR is 1.0. His white blood cell count (WBC) is 2.47, hemoglobin (Hb) is 6.6, and platelets (PLT) are 78. His sodium is 136, potassium is 3.96, and chloride is 103.8. The reticulocyte count is 2.0, and CRP and procalcitonin are not available.

Doctor: Have there been any recent imaging results?

Patient's Guardian: Yes, we have had a CT scan and an ultrasound done. The ultrasound showed coarse liver and splenomegaly. The CT scan, done on 29th August, showed a small liver with irregular serrated margins, capsular retraction, splenomegaly, and dilated portal veins. It also indicated varices and minimal ascites.

Doctor: Based on all of this, the diagnosis is congenital hepatic fibrosis with portal hypertension. We will continue the current treatment with propranolol and omeprazole, and monitor him closely. His upcoming appointments are for an EGD on October 1st and liver biopsy in one month.

Patient's Guardian: Thank you, doctor.

Doctor: You're welcome. Please follow up after the planned tests, and we will adjust the treatment as needed.

Plan Summary:

EGD scheduled for 1st October 2024.

Liver biopsy scheduled in one month.

Continue propranolol 10mg BID, omeprazole 10mg daily, and maltofer 5ml daily.

Monitor lab results closely, including liver function and hemoglobin levels.

Financial screening and baseline liver disease work-up planned.