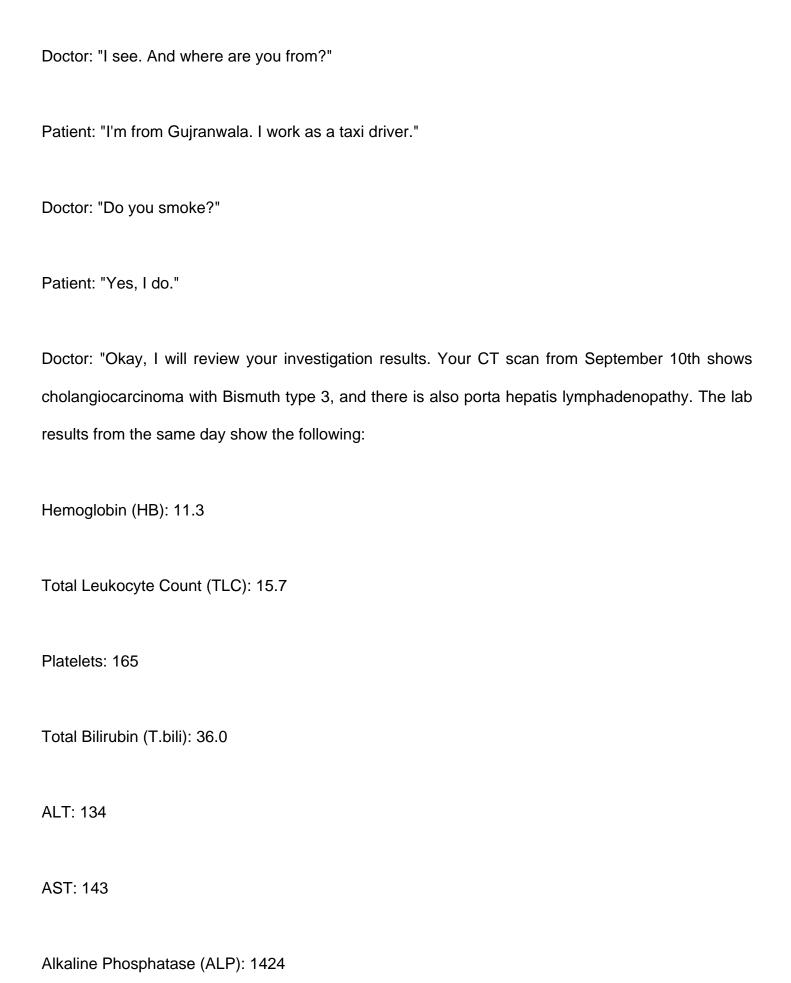
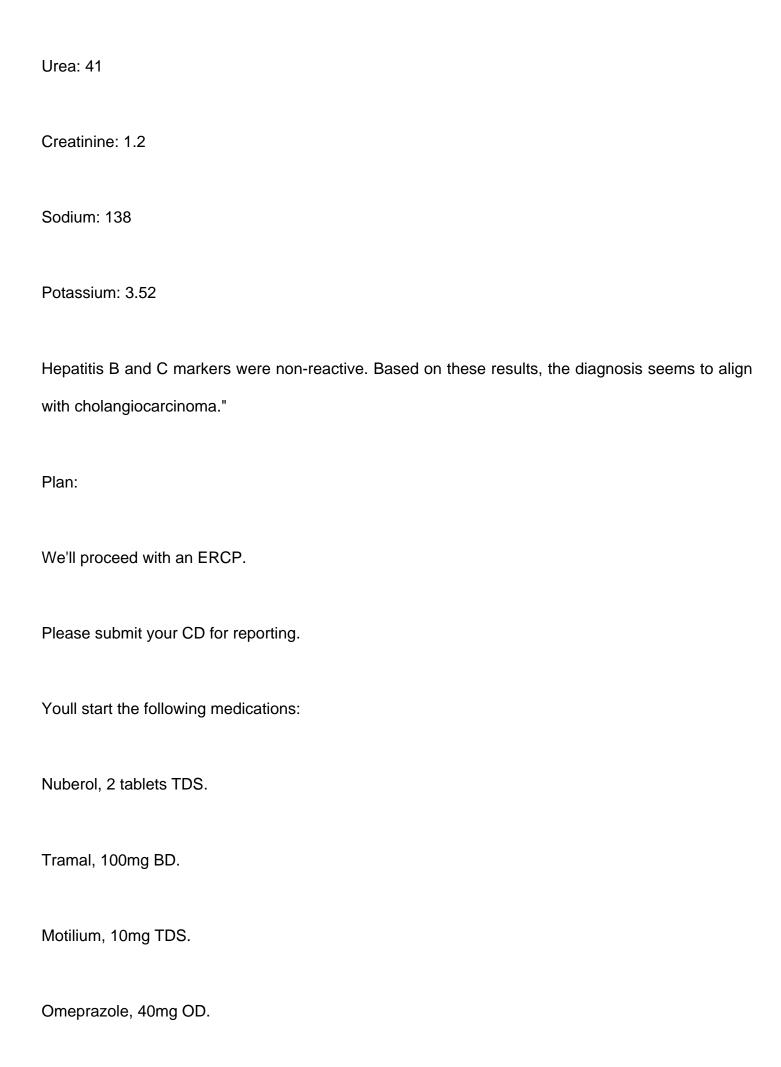
Gender: Male
Age: 61
MRN: 821085
Diagnosis: Cholangiocarcinoma
History and Physical:
Patient Visit 1 - 30/09/2024
Patient: "Doctor, I've been experiencing abdominal pain and itching for the past four days. I've also
noticed that I've lost my appetite."
Doctor: "I see. How long has this been going on?"
Patient: "The itching and pain started four days ago, but I've had jaundice for about a month now. I
was admitted to Gondal Hospital, where they told me I might have cholangiocarcinoma."
Doctor: "I understand. So, you've been dealing with jaundice for a while. Have you had any other
issues like variceal bleeding, ascites, or encephalopathy?"
Patient: "No, none of those."
Doctor: "Alright. Let's take a look at your medical history. Any past surgeries or allergies?"
Patient: "No, nothing significant. No allergies either."
Doctor: "What medications are you currently on?"

Patient: "None at the moment."



Albumin: 3.0



Id like to see you again in 4 weeks for a follow-up.

Follow-Up Visit 2 - 07/10/2024

Patient: "Doctor, Ive had a follow-up visit, and I still feel pain. My symptoms are the same as before."

Doctor: "Let's go over the CT scan findings and your lab results. Your CT scan from October 3rd

shows moderate intrahepatic biliary dilatation due to an enhancing mass lesion, consistent with a

Bismuth IIIb classification. The lesion is at the confluence of the right and left hepatic ducts,

extending proximally and distally into the mid CBD. It seems the segment IV hepatic artery is

partially encased by the tumor. Theres also some hypodensity in the caudate lobe, and prominent

abdominal lymphadenopathy, likely metastatic.

Your lab results from September 10th are as follows:

Hemoglobin (HB): 11.3

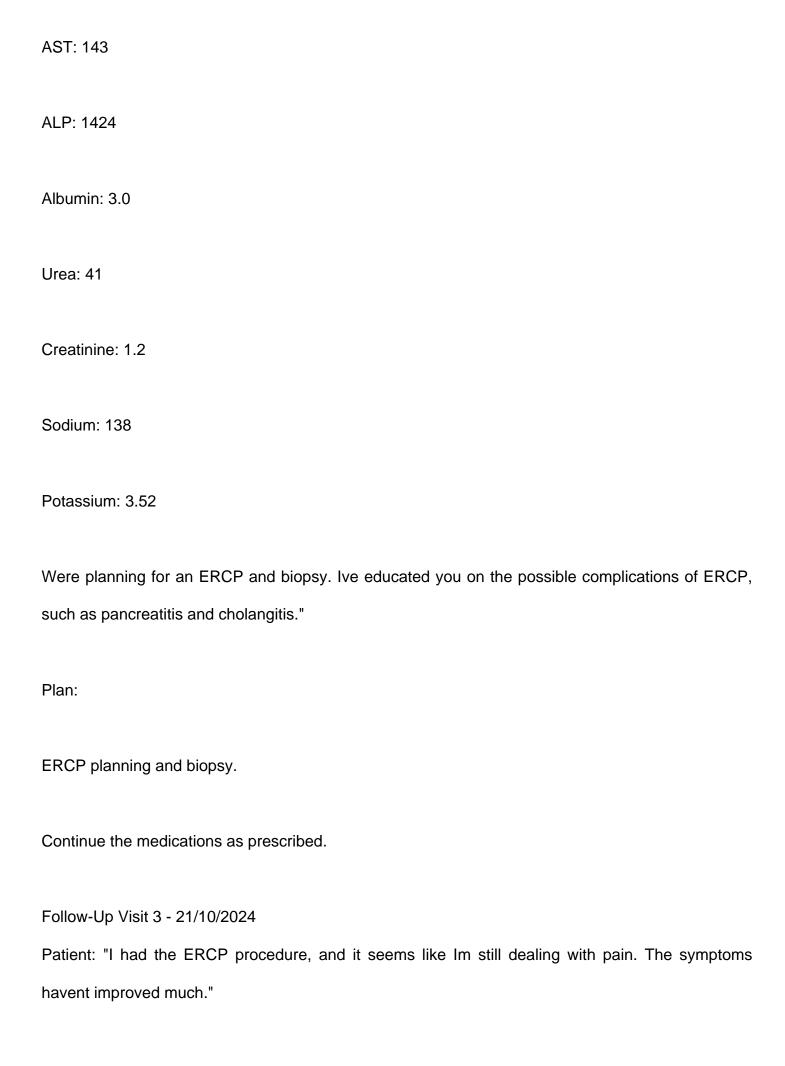
Total Leukocyte Count (TLC): 15.7

Platelets: 165

Random Sugar: 9

Total Bilirubin (T.bili): 36.0

ALT: 134



Doctor: "I see. The ERCP results from October 11th show a normal-looking ampulla, and we performed a pancreatic papillotomy. We achieved cannulation of the common bile duct with a double guidewire technique and passed it into the left hepatic duct. A sphincterotomy was performed, and we placed a 5 French 5 cm pancreatic stent. After this, we placed biliary stents in both the right and left hepatic systems with excellent drainage. Histopathology from the CBD brushings came back negative for malignant cells."

Patient: "What does that mean for my condition, doctor?"

Doctor: "It means that while we didnt find malignant cells in the brushing, your cholangiocarcinoma diagnosis remains. We are focusing on supportive care at this stage. Your liver function tests and liver biopsy will help us assess the next steps."

Plan:

Continue with Ursodeoxycholic acid 250 mg TDS and Omeprazole 40 mg OD.

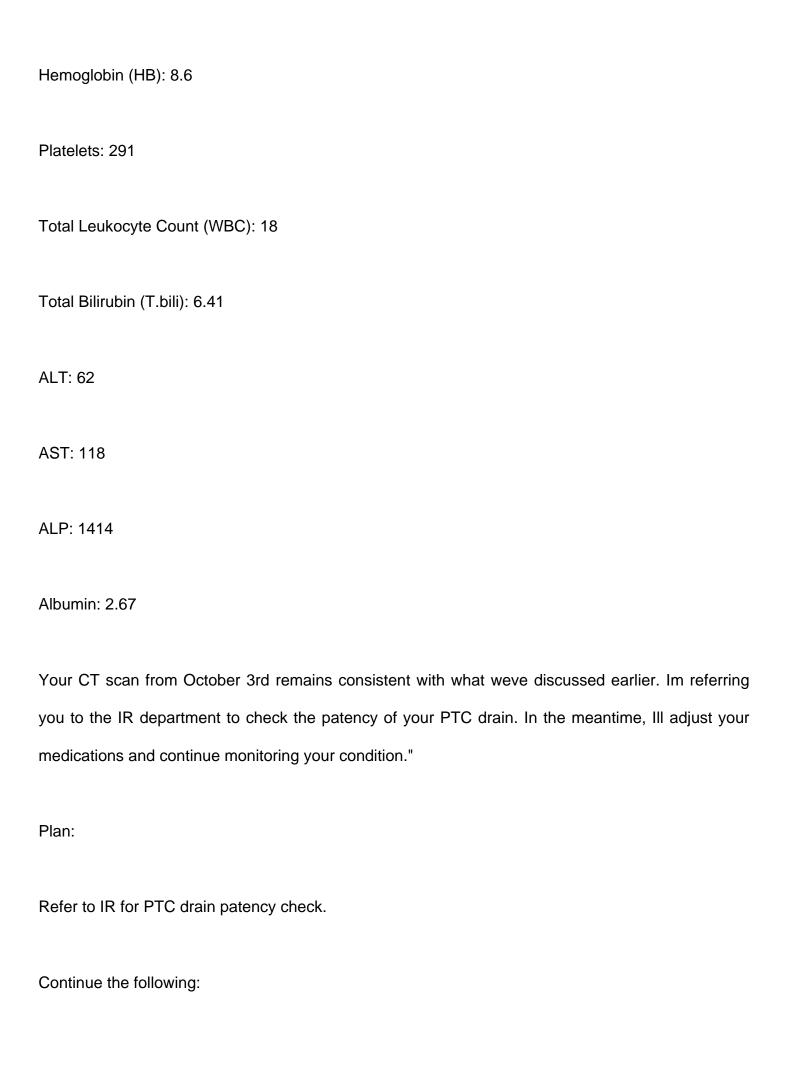
Begin Cefixime 400 mg once daily for 7 days.

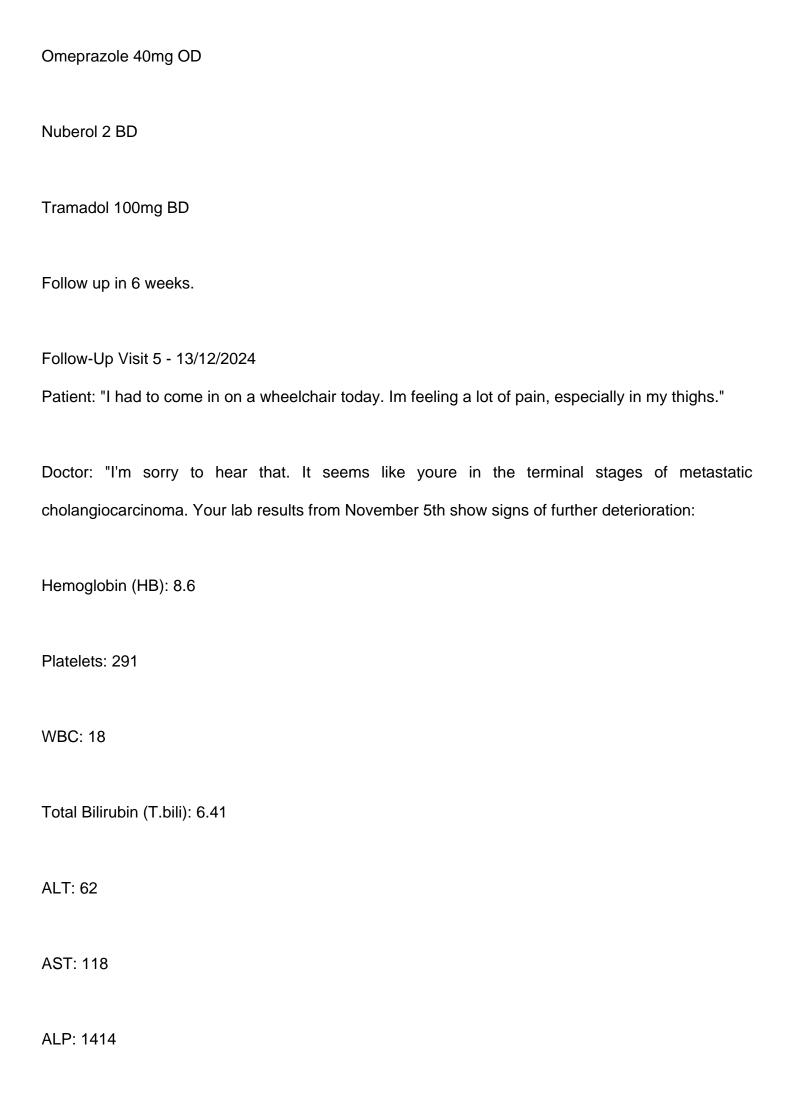
Follow-up in one month.

Follow-Up Visit 4 - 22/11/2024

Patient: "I've been feeling more pain, especially around the PTC drain site. I'm also vomiting quite a bit."

Doctor: "It seems you're dealing with some complications related to the cholangiocarcinoma and your PTC drain. Your recent lab results show some changes:





Creatinine: 1.02
Albumin: 2.67
Given your condition, were now focusing on supportive care."
Plan:
Continue with the following medications:
Topento IR BD
Gabica 75mg BD
Neubrol Forte BD
Omeprazole 40mg OD
Ciprofloxacin 500mg BD
Ondansetron TDS
Motilium 10mg TDS