Gender: Male

Age: 5

MRN: 771253

Diagnosis: Budd-Chiari syndrome

History and Physical:

Doctor: Hello, Sami. I see you're back for your follow-up visit. How have you been feeling since your

last appointment?

Patient: Im still experiencing abdominal distention, and Ive noticed the swelling hasnt reduced much.

Im continuing the medications you prescribed.

Doctor: I see. Let's go over your medical history and your recent lab results.

Patient: Sure, Doctor.

Doctor: You were born via spontaneous vaginal delivery (SVD) at term, and your birth was

uneventful. You had no major health issues until you turned 2.5 years old, when you developed

abdominal distension and fever. This was treated at CMH Rawalpindi, where the distension

resolved, but the issue recurred 4 to 5 months ago with fever, constipation, and prominent

superficial veins on your chest. You were then referred to Shifa Hospital, where we continued the

evaluation. Youve never experienced jaundice, loose stools, or itching, correct?

Patient: Yes, thats right.

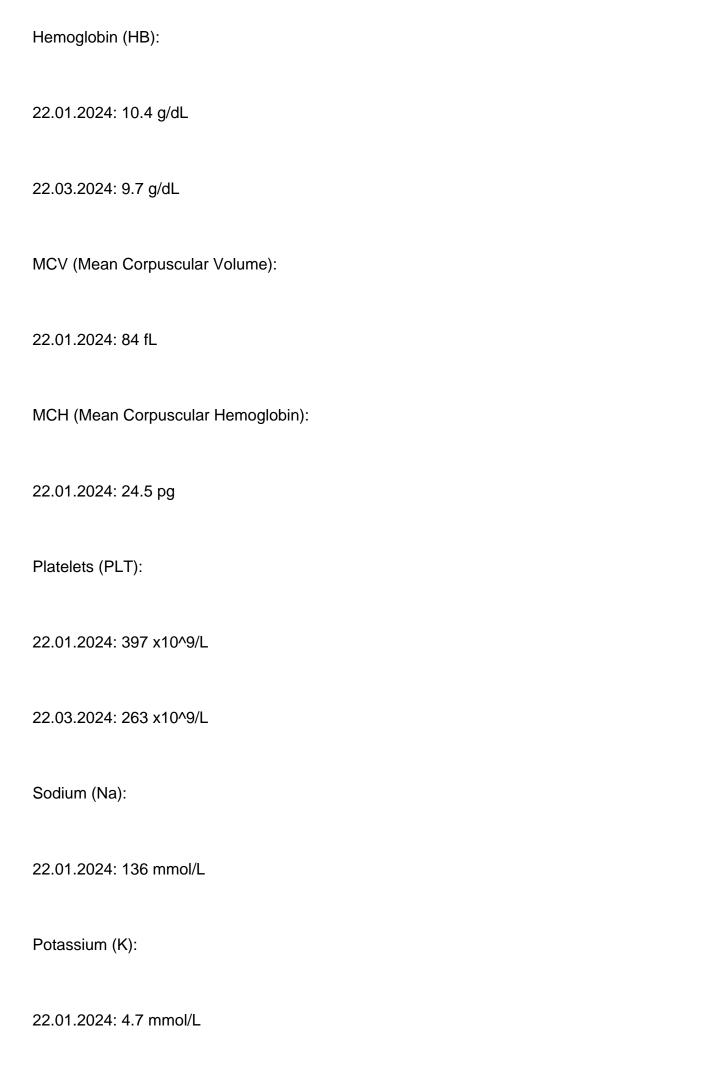
Doctor: You did mention an episode of hypoglycemia that led to a loss of consciousness, but youve

had no history of seizures. And you've not been taking the prescribed Warfarin for the last 20 days?

Patient. Correct, Doctor.
Doctor: Now, lets look at the results from your recent lab work.
Laboratory Results:
Bilirubin:
22.01.2024: 1.14 mg/dL
22.03.2024: 0.9 mg/dL
Direct Bilirubin:
22.01.2024: 0.85 mg/dL
ALT (Alanine Aminotransferase):
22.01.2024: 81 U/L
22.03.2024: 60 U/L
AST (Aspartate Aminotransferase):
22.01.2024: 156 U/L
22.03.2024: [Data Missing]

22.01.2024: 299 U/L 22.03.2024: 261 U/L GGT (Gamma-Glutamyl Transferase): 22.01.2024: 234 U/L 22.03.2024: 106 U/L Albumin: 22.01.2024: 4.2 g/dL INR (International Normalized Ratio): 22.01.2024: 1.19	ALP (Alkaline Phosphatase):
GGT (Gamma-Glutamyl Transferase): 22.01.2024: 234 U/L 22.03.2024: 106 U/L Albumin: 22.01.2024: 4.2 g/dL INR (International Normalized Ratio):	22.01.2024: 299 U/L
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INR (International Normalized Ratio):	Albumin:
	22.01.2024: 4.2 g/dL
22.01.2024: 1.19	INR (International Normalized Ratio):
	22.01.2024: 1.19
WBC (White Blood Cells):	WBC (White Blood Cells):
22.01.2024: 11.98 x10^9/L	22.01.2024: 11.98 x10^9/L

22.03.2024: 15 x10^9/L



Creatinine (Cr):

22.01.2024: 0.32 mg/dL

Special Tests:

Protein C, Protein S, Anti-Thrombin III, and Factor V Leiden: Normal (Shifa Hospital Notes)

AFP (Alpha-fetoprotein): 3.6 ng/mL

Factor V Leiden: Negative

APTT (Activated Partial Thromboplastin Time): 32 seconds

Doctor: You also had an ultrasound on 29.12.2023 that showed mild hepatosplenomegaly and mild to moderate ascites. A CT scan on the same date showed hepatomegaly with a flip-flop enhancement pattern, which is associated with thrombosized or fibrosed hepatic veins, and moderate ascites. This suggests Budd-Chiari Syndrome. You also had a right-sided hydrocele.

Patient: Yes, I remember. I had some swelling on my abdomen and chest, but no jaundice.

Doctor: That's correct. On physical exam, your weight is still below the 5th percentile at 14 kg. You have pallor, but there is no edema. Your liver is palpable 6 cm below the costal margin, and theres shifting dullness on abdominal exam. The prominent veins extending from your upper abdomen to over your chest are a significant finding.

Doctor: Based on all these findings, including the radiological and lab results, the most likely diagnosis is Budd-Chiari Syndrome with right-sided hydrocele. We will continue the current medications you are on, which include spironolactone, furosemide, and the oral drops.

Patient: Okay, Doctor, so what's the plan moving forward?

Doctor: We will keep you on a salt-free diet to manage the ascites. You will continue with your current medications. We need to schedule further tests, including a CT triphasic scan, an ultrasound shearwave, and an esophagogastroduodenoscopy (EGD). Your follow-up is in two weeks, and well reassess your condition then.