Patient: No, nothing in particular.
Doctor: Any financial strains or issues that could affect your treatment?
Patient: No, everything is fine financially.
Doctor: And your education level?
Patient: I have a bachelor's degree.
Doctor: What about your occupation?
Patient: Im a housewife, and I have two children.
Doctor: Do you have any addictions, like smoking or alcohol?
Patient: No, none of that.
Doctor: Alright, and now let's talk about your family history. Are there any conditions like diabetes,
hypertension, cancer, or asthma in your family?
Patient: No, theres nothing of that sort in my family history.
Doctor: Moving on to psychological screening. Have you ever felt depressed or had any suicidal thoughts?
Patient: No, not at all. Ive never had those thoughts.

Doctor: Thats reassuring. Now, any issues with language, speech, vision, or cognitive abilities? Patient: No, everything is normal in that regard. Doctor: Let me ask you about your menstrual history. Any issues there? Patient: No, everything is fine. Doctor: Lets proceed with the examination. Your abdomen is soft, non-tender, and non-distended. Your lungs are clear with normal breathing sounds, and your heart sounds are normal without murmurs. Neurologically, you are conscious and oriented, and your GCS score is 15 out of 15. Doctor: Now, lets review the lab results and vital signs. For the donor: Blood Pressure: 107/72 Heart Rate: 66 beats per minute Temperature: 36.4°C

Height: 165 cm

Oxygen Saturation: 99%

Weight: 83 kg BMI: 30.5 For the recipient: Blood Pressure: 124/60 Heart Rate: 115 beats per minute Temperature: 36.2°C Oxygen Saturation: 98% Height: 77 cm Weight: 7 kg Doctor: Your donor risk assessment shows a 0.5% mortality risk and a 15-20% morbidity risk. The risks include liver failure, deep vein thrombosis, pulmonary embolism, pneumonia, incisional hernia, and biliary leaks, which may require interventions. As part of the donor hepatectomy, a

cholecystectomy will also be performed. These risks have been explained to you.

Patient: Yes, I understand the risks involved.

Doctor: Good. Now, lets move forward with the plan. Youll need to get blood tests and an ultrasound. Also, please meet with Mr. Touseef for further discussions.

Patient: Okay, I will do that.

Doctor: Great. Let me summarize the plan for you. Youve been educated about living donor liver

transplantation (LDLT), and you understand the associated risk factors. We'll proceed with Step 1:

blood tests and ultrasound.

Follow-up visits:

Doctor (November 13, 2024): I noticed you didn't show up for your appointment today.

Patient: Yes, something came up, and I couldn't make it.

Doctor (November 20, 2024): Let's review your latest gynecology examination. Your ultrasound

shows that your uterus is anteverted, measuring 9.2 x 3.4 x 5.6 cm, and the endometrium is 4 mm

thick. Your right ovary measures 3.1 x 1.5 x 2.8 cm with a volume of 7.3 ml, and your left ovary

measures 2.6 x 1.8 x 3.7 cm with a volume of 9.6 ml. No gross pelvic pathology was found.

Patient: Okay, Doctor.

Doctor: Your beta HCG is less than 0.1, which is normal. Also, the pap smear kit was unavailable,

but there are no risk factors for cervical or endometrial cancer. You have a curdy white discharge,

but otherwise, the examination is normal.

Patient: What does that mean?

Doctor: It seems like you have vaginal candidiasis, which is a fungal infection. I recommend taking

Canestein tablets once per week for three weeks. After that, youll be fit to proceed with the donation process.

Patient: Understood. Thank you, Doctor.