

Gender: Male

Age: 70

MRN: 792361

Diagnosis: Hepatocellular Carcinoma

History and Physical:

Patient: "Doctor, I have been feeling a fullness in my epigastric region for the past six months."

Doctor: "I see. How has your health been overall? Any other issues or changes?"

Patient: "Well, I was diagnosed with Hepatitis C five years ago. I underwent treatment with DAAs for three months, and I achieved a sustained virological response (SVR). My last HCV PCR test on April 26, 2024, was not detected."

Doctor: "That's good news regarding the HCV. Any recent symptoms or signs of complications?"

Patient: "No, I haven't had any hematemesis, ascites, or jaundice. I also haven't experienced melena or any encephalopathy."

Doctor: "What about weight changes? Any significant weight loss or other issues?"

Patient: "Yes, I lost 10 kilograms in the past four months. I haven't had any blood transfusions or fevers, and no night sweats either."

Doctor: "Okay. It's also important to check your history. Any past surgeries or medical issues?"

Patient: "I had an orchidectomy 15 years ago. No other major health problems."

Doctor: "Any allergies?"

Patient: "No allergies."

Doctor: "What medications are you currently taking?"

Patient: "I am on Carvida 3.12mg, Levijon, Painkillers, PPI, and Syp Lilac."

Doctor: "Are there any financial or social factors affecting your treatment?"

Patient: "Yes, I am facing some financial strains. I have completed my matriculation and Im retired from my job as a Fuji."

Doctor: "Noted. Any addiction history?"

Patient: "I quit smoking five years ago."

Doctor: "Good to know. Whats your family history like?"

Patient: "My father had tuberculosis."

Doctor: "Alright, now moving on to your physical examination. Your cognitive function seems intact. You are conscious and oriented. Your vital signs are stable, and your abdominal examination is normalno tenderness or distention."

Patient: "Thats good to hear."

Doctor: "Now, lets review your test results. You had a CT scan on May 8, 2024, showing chronic liver disease with a lesion in the left lobe of your liver and tumor thrombosis in the portal vein. You also had an MRI on June 24, 2024, which confirmed a fibrolamellar carcinoma in the left lobe."

Patient: "I remember those scans. What do the latest lab results show?"

Doctor: "Your recent lab results from July 11, 2024, and August 13, 2024, show some changes. Your hemoglobin is stable at 10.7 g/dL, and your liver function tests are still a bit off with an ALT of 73 and AST of 352, showing some liver stress. Your bilirubin levels are in the normal range, but your albumin is slightly low at 3.25 g/dL, and your AFP remains stable at 2.25."

Patient: "Is that concerning?"

Doctor: "The ALT and AST levels are elevated, which suggests ongoing liver damage. However, the stable AFP levels are encouraging. We will need to proceed with further imaging and regular monitoring."

Patient: "What about the CT scan you mentioned recently?"

Doctor: "Yes, the latest CT scan from August 13, 2024, confirmed that there are exophytic HCC lesions in the left lobe of your liver. The disease is on a background of chronic liver disease, but theres no sign of ascites."

Patient: "Whats the next step in my treatment?"

Doctor: "Ive reviewed your case with the multidisciplinary team, and we recommend left lateral segmentectomy and wedge resection for your HCC. We will also monitor you closely post-surgery,

and I will meet with you and your family to discuss the surgery timing."

Follow-up Visit - 16/08/2024

Doctor: "I've spoken to your son, Umair, on the phone regarding the next steps. We are proceeding with the surgery plan, and you should be ready for the procedure soon."

Follow-up Visit - 20/08/2024

Doctor: "After reviewing your clinical history and your progress, we are preparing for the surgery. You will undergo left lateral segmentectomy, and we will remove the part of the stomach involved with the tumor."

Post-Op Update - 6/11/2024

Doctor: "You've undergone your surgery, which included left lateral segmentectomy and gastric resection. You were discharged on September 26, 2024. How are you feeling now?"

Patient: "I feel okay but developed some abdominal distention after the surgery. I had an ultrasound at a local center, and they diagnosed positive ascites, so I've started spironolactone. I also had some constipation followed by loose stools, 4 to 6 times a day for the last four days."

Doctor: "I see. Your scar site looks good, with no active discharge, but there is some tenderness, and a lump around the scar site. It seems like an incisional hernia, which we will need to monitor."

Patient: "What about my lab results?"

Doctor: "Your latest labs show some improvement. Your hemoglobin is at 11.0, and your liver function tests are stable. Your albumin is slightly better at 3.48 g/dL, but your alkaline phosphatase is still high at 340. Your creatinine and electrolytes are normal. Your MELD score is 6, and your CTP score is A6, which is good."

Patient: "Whats the next step?"

Doctor: "We need to follow up with imaging, and Ive scheduled a CT scan with HCC protocol. We will also start you on sorafenib 200mg twice daily, along with other medications to support your recovery and prevent complications."

Histopathology Report:

Liver Tumor (Segment II/III) with partial stomach resection: Hepatocellular carcinoma (G3), poorly differentiated, largest tumor measuring 21 cm.

Tumor invading the adjacent stomach wall and liver capsule. Vascular invasion present.

Background liver shows chronic hepatitis with bridging fibrosis (Metavir score A1/A3, F3/F4).

Ultrasound Report:

Liver: Coarse parenchymal echotexture with irregular margins, an ill-defined hypoechoic area noted in the left lobe measuring 4.1 x 2.4 cm, requiring further evaluation.

Doctor: "Ive reviewed the ultrasound and histopathology reports. The next steps involve starting the medications I mentioned, and well monitor you closely. Well also need to review your HCV PCR,

AFP levels, and the upcoming CT scan."

Patient: "Alright, thank you, Doctor. Ill follow your instructions and look forward to the follow-up."

Doctor: "Youre welcome. Lets stay on top of this. Ill see you in a month for a check-up."