

Gender: Male

Age: 42

MRN: 768771

Diagnosis: Hepatocellular Carcinoma

History and Physical:

Doctor:

Hello, how have you been since your last visit?

Patient:

I have been feeling some pain in the right hypochondriac (RHC) and epigastric region. It's been bothering me for a few months now.

Doctor:

I see. Last time, we discussed a potential hepatic mass. Based on your CT scans, the lesion could be indicative of a gastrointestinal stromal tumor (GIST), though there was a possibility of an atypical hepatocellular carcinoma (HCC). How are you managing with the medications?

Patient:

Im still on the medications you prescribed Tres Orix, Tramadol for the pain, and Laxoberon for constipation. I havent had any major issues, but the pain persists.

Doctor:

That's good to hear that you're managing well with the medications. How is your weight? Any significant changes lately?

Patient:

Ive lost about 5-7 kg in the past year. Its been gradual.

Doctor:

Noted. Have you noticed any other symptoms like fatigue, jaundice, or changes in your appetite?

Patient:

No, no jaundice or anything like that. I do feel tired at times, and I've been having some bloating and discomfort in my stomach.

Doctor:

Alright, let's go over some of your investigations. Your CT scan from May 8th showed a large heterogeneously enhancing mass in the right hypochondrium, and the findings are more consistent with GIST, not HCC. The lesion is quite large, and it appears to involve the posterior wall of the pylorus and antrum. It's likely causing the pain and discomfort you mentioned.

Patient:

That sounds like a pretty serious issue. What's next?

Doctor:

Yes, it's important we proceed carefully. Your liver biopsy from June 5th confirmed the presence of an epithelioid-type GIST. This type of tumor can sometimes be difficult to treat, but we have options. We are planning a resection of the tumor with a left hepatectomy.

Patient:

What exactly does that mean for me?

Doctor:

Essentially, we'll need to surgically remove the tumor. The liver will also need to be part of the

resection, so it's a more complex procedure. The team will be monitoring you closely throughout the process. We'll also need to discuss the approach further with a multidisciplinary team (MDT) to make sure all options are considered.

Patient:

Okay, that makes sense. Is there anything else I need to be aware of before the surgery?

Doctor:

Before we proceed, we'll do a few more things. We'll make sure your blood levels are stable, especially your hemoglobin. I see that it was quite low during your last visit (6.6), so we'll need to ensure you're getting the necessary blood transfusions. We may need to give you another round of packed red blood cells. We also need to address the weight loss and the low grade fever you've been experiencing.

Patient:

Yes, I had 2 PCV transfusions before, but the hemoglobin hasn't gone up much since.

Doctor:

We'll continue monitoring your hemoglobin and make sure you get the right support. Let's also keep your liver function under close observation. I'll arrange a referral to the coordinator for further steps and ensure everything is lined up for the surgery.

Patient:

Thank you, Doctor. I'm a bit anxious, but I trust your plan.

Doctor:

I understand your concern, but we will take good care of you. It's important that we proceed with

caution and make sure all steps are thoroughly planned. After the surgery, we'll continue monitoring your recovery closely.

Patient:

Sounds good. I'll follow up with all the appointments.

Doctor:

Perfect. We'll see you again in two weeks for a follow-up. In the meantime, make sure you're staying on top of your medications and any further instructions. If you have any issues, don't hesitate to reach out.

Doctor:

Let's now review your medical history. You mentioned that you've had no decompensation symptoms and you haven't had a history of significant liver problems before this. You've been feeling some low-grade fever lately, which is something we will monitor.

Patient:

Yes, it's been a bit of a concern for me, but it's not too bad.

Doctor:

Good to note. You've also mentioned some psychological stress due to your current health condition, and I want to assure you that we'll help you manage this. You're not alone in this journey.

Patient:

I have been feeling a bit down with everything going on. It's just been a lot to handle.

Doctor:

It's completely understandable. We'll ensure you have support during this time, both physically and emotionally. We'll keep an eye on your mental health and offer resources as needed.

Patient:

I appreciate that, Doctor. It's reassuring to know you're keeping track of everything.

Doctor:

You're welcome. You're in good hands. We'll work together to ensure the best possible outcome. I'll make sure we have everything in place for your surgery, and we'll discuss the next steps once we have all the results.

Doctor:

Finally, let me go over the lab results from your last test on May 24th. Your liver function tests were as follows:

Bilirubin: 0.24

ALT: 13, AST: 18

ALP: 126

Albumin: 3.7

Creatinine: 0.64

Sodium: 140

Potassium: 4.25

AFP: 6.93

All of these values are within normal range, though we'll continue monitoring. We'll focus on your hemoglobin levels, as they're a bit concerning, and plan for transfusion as needed.

Patient:

Alright, I understand. Thank you for explaining everything.

Doctor:

You're welcome. Please don't hesitate to contact me if you have any questions. See you in two weeks for your follow-up.