

Gender: Male

Age: 68

MRN: 772548

Diagnosis: Cholangiocarcinoma

History and Physical:

Patient:

Hello, Doctor. Ive been having on-and-off pain in my right hypochondrium for about a year now. It's not very intense, but it has been persistent.

Doctor:

I see, Mr. Ashraf. How would you describe the pain? And has it been affecting your daily activities?

Patient:

The pain comes and goes. Its mild, but I do feel discomfort, especially after meals. It doesn't completely interfere with my routine, but its worrying.

Doctor:

Understood. Well need to explore this further. I'll review your recent tests and discuss your medical history to get a clearer picture. Have you noticed any other symptoms, like weight loss, fever, or fatigue?

Patient:

No weight loss or fever, Doctor. Ive also never had any blood transfusions.

Doctor:

Good. That helps rule out a few things. You mentioned that youve had some abdominal ultrasounds and blood tests in the past. Lets go over those results. Your ultrasound from May shows an

enlarged, fatty liver and some cholelithiasis, which means gallstones. It also highlights significant intrahepatic biliary dilatation and a somewhat dilated common bile duct.

Patient:

Yes, the doctors mentioned that the bile ducts were dilated. What does that mean?

Doctor:

The dilation of the bile ducts could suggest a blockage or obstruction, often due to stones or a tumor. In your case, there is a possibility of a Klatskin tumor, which is a type of cancer that affects the bile ducts. Your MRI and CT scans from May and June further confirm some abnormalities in the biliary system, including a stricture at the bile duct junction, which is concerning for a malignant growth.

Patient:

Is it cancer, Doctor?

Doctor:

It's still too early to make that determination. However, the possibility of cholangiocarcinoma, a cancer of the bile ducts, is something we need to consider seriously. Your liver function tests show some abnormal results, like elevated ALP levels, which are often seen in biliary diseases.

Patient:

I see. What steps do we need to take next?

Doctor:

We're going to take a few more measures. We'll submit your CT and MRI images for a detailed review. Additionally, I recommend a biopsy via ERCP, where we can obtain a sample from the bile

ducts to confirm whether there's malignancy. We'll also monitor the CA19-9 tumor marker, which could give us more insight.

Patient:

Will the ERCP be painful?

Doctor:

It's a minimally invasive procedure, but you'll be under sedation so it should be relatively comfortable.

The goal is to collect a tissue sample from the area of concern.

Patient:

What's the prognosis if it turns out to be cancer?

Doctor:

If it's confirmed as cholangiocarcinoma, we will explore treatment options. However, it's important to note that, based on current imaging, your condition appears to be locally advanced, and surgery may not be an option. We would then refer you to oncology for further management, which may include chemotherapy or other palliative treatments.

Patient:

That sounds like a lot, Doctor. How soon can we proceed with these tests?

Doctor:

I understand this is overwhelming, but we will proceed step by step. I've already arranged for you to have an ERCP, and we'll also do a follow-up in a few days to discuss the results. Meanwhile, we'll keep an eye on your liver function through regular tests.

Patient:

Thank you, Doctor. Ill follow your advice.

Doctor:

Youre welcome. Well be here to support you through each step. Lets take it one day at a time.

Please dont hesitate to contact us if you have any concerns in the meantime.

Follow-Up Visit (16/08/24):

Doctor:

Good to see you again, Mr. Ashraf. How have you been feeling since your last visit?

Patient:

The pain in my right hypochondrium is still there. It's been on and off, but I feel a bit weaker now. Im worried about whats going on.

Doctor:

I understand your concern. Lets go over your latest tests. We recently did an ERCP and histopathology of the bile duct. The results came back with benign ductal epithelial cells, and no malignant cells were found. This suggests that the stricture in your bile duct may not be cancerous.

Patient:

Thats a relief to hear, Doctor. But what does it mean for me now?

Doctor:

Its good news, but we still need to stay vigilant. The ERCP revealed a stricture at the bile duct junction with dilation, which could be related to benign or inflammatory causes. Well continue

monitoring your condition closely. Based on the ERCP findings and histopathology, we don't suspect malignancy at this time, but we will keep checking.

Patient:

Do I need any further treatments?

Doctor:

For now, the plan is to continue with conservative management. We'll monitor your liver function and do further imaging if needed. We'll also keep following up with oncology in case any treatment is necessary. Your lab results are improving slightly, which is a positive sign.

Patient:

Thank you for explaining, Doctor. I feel a bit better after hearing that. What's the next step?

Doctor:

We'll schedule regular follow-up visits to monitor your condition and make sure your symptoms don't worsen. Keep track of any new or worsening symptoms and let us know immediately. We'll also review your test results regularly and make adjustments to your care as needed.

Patient:

I will, Doctor. Thanks for everything.