NORTH REGIONAL MEDICAL CENTER DISCHARGE SUMMARY

Name: Sandy Flipper [SYN158] DOB: 01/27/1969 Admission: 04/05/2025

Discharge: 04/14/2025 Attending: Dr. Adams

DIAGNOSIS: Symptomatic intracranial hemorrhage (left parietal) in patient with ROS1+ NSCLC on entrectinib

ONCOLOGY SNAPSHOT:

- Female, 56y, diagnosed NSCLC 09/2023
- ROS1 fusion positive, PD-L1 TPS 60%
- Brain metastases at diagnosis (3 lesions)
- On entrectinib 600mg daily since 10/2023
- Excellent intracranial and systemic response

PRESENTATION: Patient developed sudden right-sided weakness and expressive aphasia. CT head showed 2.5cm left parietal hemorrhage at site of previously responding brain metastasis. Entrectinib held upon admission. Neurosurgery evaluated but recommended conservative management.

INPATIENT INTERVENTIONS: • Dexamethasone 4mg IV q6h \rightarrow taper initiated • BP control (target <140/90) • Daily neurochecks • Speech/physical therapy • Serial head imaging showing stable hemorrhage

OUTCOMES: Right-sided weakness improved from 2/5 to 4/5 strength. Aphasia significantly improved. Able to ambulate with walker.

DISCHARGE PLAN:

- 1. Entrectinib resumed at 400mg daily
- 2. Dexamethasone taper over 2 weeks
- 3. Intensive rehab program arranged
- 4. Weekly neuro checks with oncology
- 5. Repeat MRI brain in 4 weeks
- 6. Home BP monitoring (target <140/90)

FOLLOW-UP APPOINTMENTS: Neuro-oncology: 04/21/2025 Rehab Medicine: 04/16/2025

Dr. Adams Neuro-Oncology