

DATE OF SERVICE: September 21, 2023

PATIENT: Williams, Robert James **ID:** SYN163 **DOB:** May 11, 1958

PROVIDER: Benjamin Carter, MD

SUBJECTIVE: Patient presents for follow-up. Started Capmatinib 400mg BID November 11, 2022 for Stage IV MET Exon 14 Skipping Lung Adenocarcinoma metastatic to bone diagnosed on October 19, 2022 (PD-L1 10%). Initial response was good with pain improvement and stable scans. Tolerated Capmatinib with persistent Gr 2 LE edema (managed w/ Lasix PRN, compression) & mild hypoalbuminemia (nadir 3.0). Reports return of L hip/sacral pain over past 6 weeks, now requiring daily NSAIDs + occasional Tramadol. Fatigue also increased slightly. Denies cough/SOB/other sx. Edema stable.

OBJECTIVE:

- **Vitals:** Stable. ECOG 1. Wt +3 lbs. +2 LE pitting edema.
- **Exam:** Tender L SI joint / greater trochanter.
- **Labs (09/19/23):** CBC WNL. Cr 1.0. Albumin 3.1 g/dL. LFTs WNL. Alk Phos 310 U/L (up from 220 prior).
- **Imaging (PET/CT, 09/14/23):** Compared to PET/CT 05/10/23. **Progression.** Increased FDG avidity (SUVmax 8.5 vs 5.0) and subtle enlargement of known L iliac/sacral metastatic lesion. New focus of moderate FDG uptake in T11 vertebral body (SUVmax 6.0). No new visceral mets. Primary lung lesion stable/indolent.

ASSESSMENT: Stage IV METex14 Lung Adeno with **disease progression in bone** on first-line Capmatinib. Patient symptomatic (pain, fatigue). Edema/hypoalbuminemia stable, likely drug-related.

PLAN:

1. **Discussed progression** & need to change therapy. Patient understands.
2. **Discontinue Capmatinib.** Expect gradual improvement in edema/albumin.
3. **Second-Line Therapy:** Recommend **Carboplatin + Pemetrexed** IV q3wks (standard post-TKI for adeno, good PS). Discussed rationale, risks/benefits, need for B12/Folate. Patient agreeable.
4. **Initiate Chemo:** Target C1D1 within 1-2 wks pending auth. Start Folic Acid today. Schedule B12 inj. Provide anti-emetic Rx. Schedule chemo teach.
5. **Pain Mgmt:**
 - **Palliative RT Consult** placed for L hip/sacrum/T11 pain.
 - Continue NSAID/Tramadol PRN. Add Oxycodone 5mg PO q6h PRN breakthrough pain. Reassess after RT/chemo initiation.
6. **Bone Health:** Continue Denosumab monthly (pending dental review). Cont Ca/D.
7. **F/U:** Nurse to coordinate chemo start/RT/dental. Return prior C2.

(Signed Electronically) B. Carter, MD