UNIVERSITY MEDICAL CENTER DEPARTMENT OF ONCOLOGY DISCHARGE SUMMARY

MRN: SYN156 NAME: Lea Bordy (DOB: 07/03/1961) Admission Date: 04/10/2025

Discharge Date: 04/14/2025

DIAGNOSIS: Osimertinib-Induced QTc Prolongation

ONCOLOGIC HISTORY: • 63F diagnosed with EGFR L858R+ stage IV NSCLC (8/23/2022) • Liver metastases at diagnosis • PD-L1 TPS 35% • First-line osimertinib 80mg daily since 9/14/2022 • Excellent response with >70% tumor reduction

BRIEF COURSE: Patient on osimertinib with good disease control admitted after routine ECG showed QTc 520ms (baseline 440ms). Asymptomatic. No syncope, palpitations, or chest pain. Taking no other QT-prolonging medications. Electrolytes normal. Telemetry monitoring showed no arrhythmias. Osimertinib held for 5 days with QTc normalization (450ms). Restarted at reduced dose (40mg daily) on day of discharge with plan for close cardiac monitoring.

DISCHARGE PLAN:

- 1. Osimertinib 40mg PO daily
- 2. Weekly ECG \times 4 weeks
- 3. Home potassium monitoring
- 4. Avoid all QT-prolonging medications
- 5. Cardio-oncology follow-up in 2 weeks
- 6. Oncology follow-up in 1 week

LABORATORY: K+ 4.2, Mg 2.1, Ca 9.6, TSH 2.3 QTc: Admission 520ms → Discharge 450ms

Dr. K. Singh Medical Oncology 04/14/2025