**Patient**: Richard Montgomery (DOB 1951-05-25)  
**MRN**: 583692  
**Admission**: 2025-03-18 | **Discharge**: 2025-03-23  
**Physicians**: Dr. L. Harrington (Medical Oncology), Dr. A. Rodriguez (Cardiology), Dr. P. Sinha (Pain Management)

**Discharge diagnosis: mCRPC with pain crisis**

**1. Oncological Diagnosis**

* **Primary**: Metastatic Castration-Resistant Prostate Cancer (mCRPC)
* **Initial Diagnosis**: 2022-06-15 (localized), 2023-09-20 (metastatic)
* **Pathology**: Adenocarcinoma, Gleason 4+5=9, pT3bN1M0, positive margins, 3/12 positive LNs
* **Current Disease Status**:
  + PSA: 189 ng/mL (increased from 125 ng/mL one month ago)
  + Testosterone: <20 ng/dL (castrate level)
  + Bone scan (2/15/25): Progressive disease with new/enlarged metastases in vertebrae (T8, T10, L2-L4), ribs, pelvis, bilateral femoral heads
  + MRI spine (3/10/25): Pathologic compression fractures at T10 and L3 with epidural extension at L3, no cord compression

**2. Current Admission**

* **Pain Crisis**: Severe pain (9/10) in thoracic/lumbar spine, pelvis, left hip
* **Pain Management**:
  + Initial: Hydromorphone 1 mg IV q2h PRN with PCA
  + Transition: Morphine 10 mg IV q4h scheduled + 5 mg IV q2h PRN
  + Discharge: Morphine ER 60 mg PO q12h + IR 15 mg PO q4h PRN
  + Adjuvants: Gabapentin 300 mg PO TID → 450 mg PO TID, dexamethasone taper
* **Interventions**:
  + Palliative RT to T10 and L3 planned for 3/25/25

**3. Treatment History**

* **Surgery**: Radical prostatectomy with pelvic lymph node dissection (7/20/22)
* **Radiation**: Adjuvant EBRT (66 Gy) to prostate bed (10-11/22)
* **ADT**: Leuprolide 45 mg SubQ q6mo (started 9/22)
* **First-line mCRPC**: Docetaxel 75 mg/m² q3wks + prednisone (6 cycles, 10/23-3/24)
  + Response: PSA 95 → 42 ng/mL
* **Second-line mCRPC**: Abiraterone 1000 mg daily + prednisone (started 6/24)
  + Initial response: PSA 78 → 52 ng/mL, then progression
* **Bone-targeted**: Denosumab 120 mg SubQ q4wks (started 9/23)
* **Palliative RT**: Right iliac bone (30 Gy/10 fractions, 8/24)

**4. Comorbidities**

* STEMI (1/22/25)
* HFrEF (LVEF 45%)
* Hypertension
* Hyperlipidemia
* T2DM (diet-controlled, A1c 6.7%)
* CKD G3a (eGFR 50-55)
* Osteopenia
* Obesity (BMI 31)
* GERD

**5. Discharge Medications**

* Abiraterone 1000 mg PO daily (empty stomach)
* Prednisone 5 mg PO daily
* Leuprolide 45 mg SubQ q6mo (next: 7/10/25)
* Denosumab 120 mg SubQ q4wks (next: 4/2/25)
* Morphine ER 60 mg PO q12h
* Morphine IR 15 mg PO q4h PRN
* Gabapentin 450 mg PO TID
* Calcium 1200 mg PO daily
* Vitamin D3 2000 IU PO daily
* Senna-docusate 8.6-50 mg PO BID
* Aspirin 81 mg PO daily
* Ticagrelor 90 mg PO BID
* Atorvastatin 80 mg PO daily
* Metoprolol succinate 50 mg PO daily
* Lisinopril 10 mg PO daily
* Spironolactone 25 mg PO daily
* Pantoprazole 40 mg PO daily

**6. Follow-up Plan**

* **Medical Oncology**: Dr. L. Harrington in 1 week (3/31/25)
  + Discuss next-line therapy (radium-223, clinical trial)
* **Radiation Oncology**: Dr. K. Freeman on 3/25/25
  + Palliative RT to T10 and L3 (8 Gy × 1 fraction each)
* **Cardiology**: Dr. A. Rodriguez in 4 weeks (4/20/25)
  + Echo scheduled before appointment
* **Pain Management**: Dr. P. Sinha in 2 weeks (4/6/25)
* **Imaging**: MRI spine post-RT, bone scan in 3 months

**7. Lab Values (Admission → Discharge)**

* Hemoglobin: 10.2 → 10.0 g/dL
* Creatinine: 1.4 → 1.3 mg/dL (eGFR: 51 → 54)
* Alkaline Phosphatase: 285 → 270 U/L
* PSA: 189 → 192 ng/mL
* Testosterone: <20 ng/dL
* Troponin I: <0.01 ng/mL (× 2)
* BNP: 210 pg/mL

**Electronically Signed By**:  
Dr. L. Harrington (Medical Oncology) - 2025-03-23 15:30  
Dr. A. Rodriguez (Cardiology) - 2025-03-23 14:15  
Dr. P. Sinha (Pain Management) - 2025-03-23 13:45