

# THE AMAZING CASE RACE

## CASE STUDY 08

IASLC

INTERNATIONAL  
ASSOCIATION  
FOR THE STUDY  
OF LUNG CANCER

## Management of care for patients diagnosed with poorly differentiated carcinoma of the lung

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### LEARNING GOALS

**Goal 1:** Appropriate initial evaluation of a patient with suspicion concerning advanced lung cancer.

**Goal 2:** Recognizing the diagnostic dilemma of poorly differentiated carcinoma of the lung.

**Goal 3:** Role of expert consultation and the significance of choosing appropriate testing in diagnostic dilemmas.

## BACKGROUND

P.C. is a 68-year-old male with former 60 pack-year smoking history and COPD.

He presents with progressive fatigue, shortness of breath, dry cough, and a 10 lb. weight loss in the last 2 months.

He notified his primary care physician, who recommended urgent evaluation at the local ER.

At the ER, he was noted to have hypoxia with pulse oximetry reading 82% that improved with 2L nasal cannula.

A chest X-ray reveals a large left hilar mass and mediastinal fullness. He was admitted for further work-up.

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### CURRENT PRESCRIPTIONS

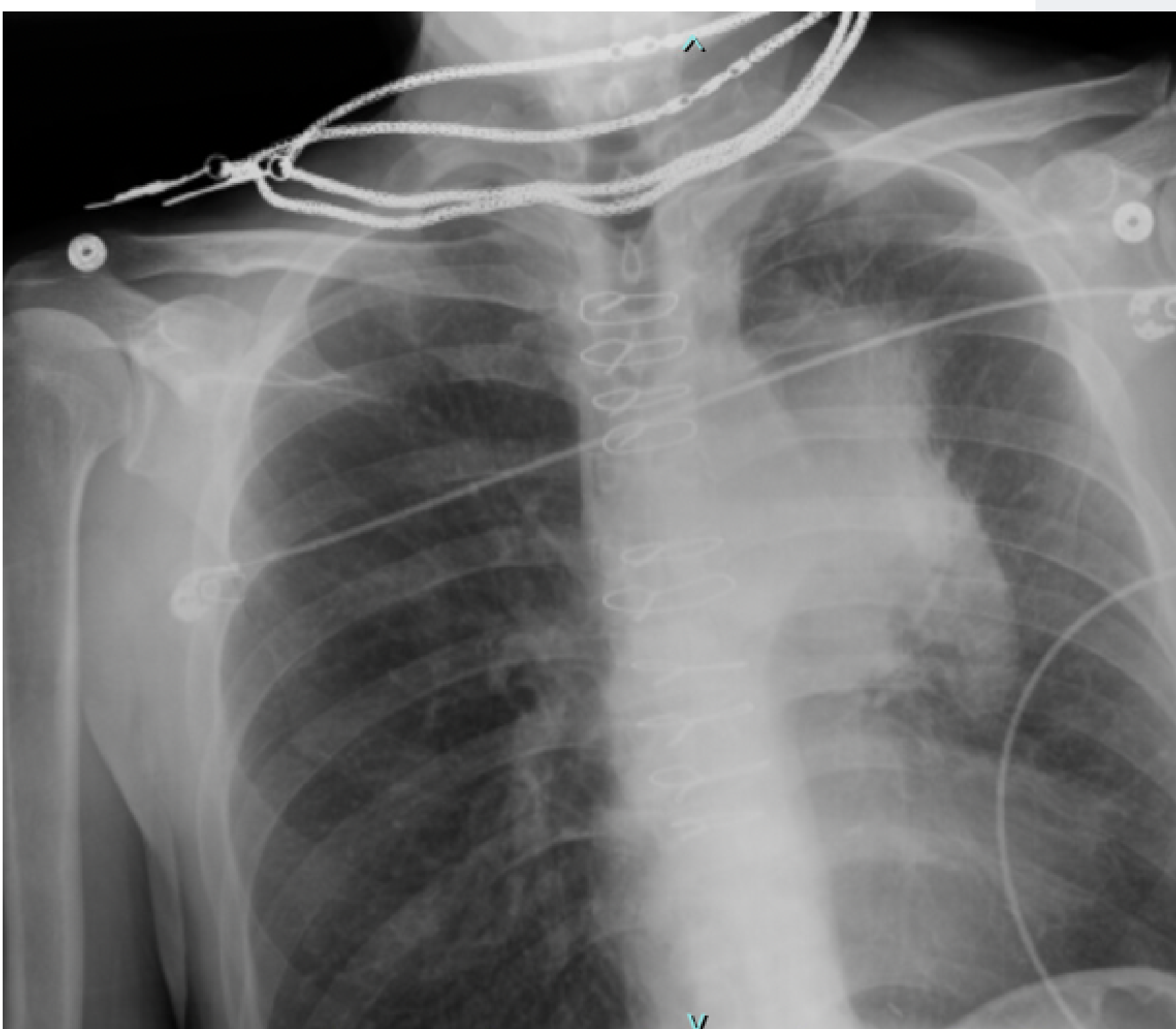
- Albuterol 2 puffs q4h PRN for wheezing
- Amlodipine 5 mg daily
- Aspirin 81 mg daily

### COMORBIDITIES/MED HX

- COPD
- Hypertension
- Coronary artery disease s/p CABG
- Peripheral vascular disease

### OVERALL DIAGNOSIS

POU2F3-positive extensive-stage small cell carcinoma of the lung (Note: Final diagnosis disclosed at the end of case).



### TESTING

Chest X-ray revealed a large left hilar mass, mediastinal fullness (**Figure 1**).



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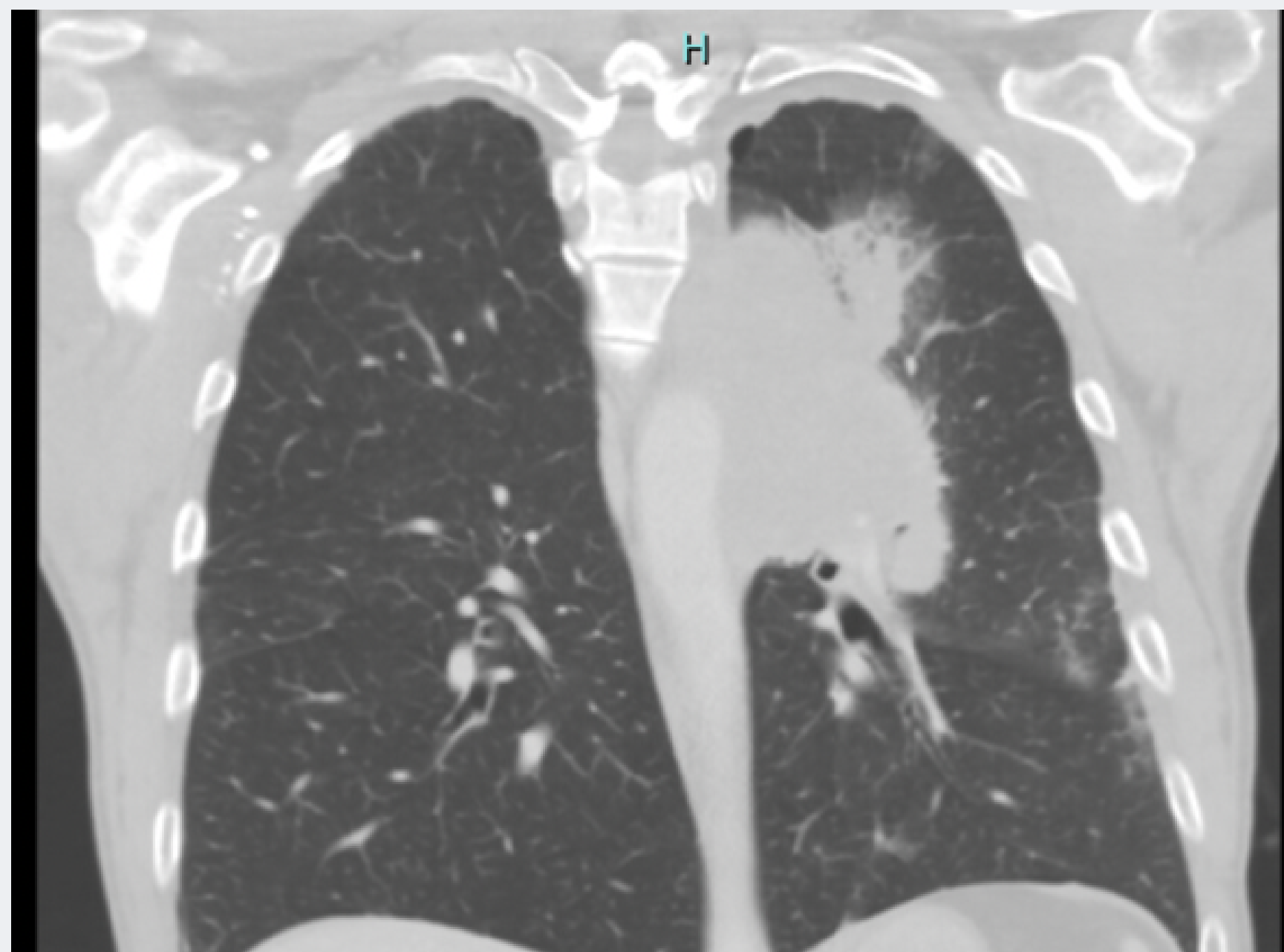


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### ADDITIONAL TESTING

#### CT-CHEST

7cm x 10 cm left hilar mass abutting the pleura with post-obstruction atelectasis, bilateral hilar lymphadenopathy, mediastinal conglomerate mass involving the contralateral lymph nodes were noted. .



**Want to learn more  
about this case?**

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p40

Synaptophysin

RB