Patient ID: 1

Gender: Female

Age: 83 years

ICULOS: 54 hours

\*\*Heart Rate (HR)\*\*

Based on the data provided, here is a direct and professional summary of the trends, abnormalities, and actionable recommendations for Patient ID 1:

Trends:

1. The patient's heart rate fluctuated rapidly throughout the 4 4-hour monitoring period, with

several instances of significant changes in heart rate (rapid fluctuations) observed at hour 49.

Ab normalities:

1. Vital anomalies were detected at hours 1 06.0 and 11 7.0, with the patient's heart rate exceeding

the normal range.

Actionable Recommendations:

1. Monitor the patient 's heart rate closely and perform additional tests to determine the cause of

the rapid fluct uations in heart rate, particularly at hour 49.

Note: The above summary is based on the data provided and does not include any additional

information or context that may be relevant to the patient's condition. It is important to consult

with a medical professional for proper diagn osis and treatment.

\*\*Oxygen Saturation (O2Sat)\*\*

Based on the data provided, here is a direct and professional summary of the trends, abnormalities,

and actionable recommend ations for the patient:

### 1 . Actionable Recommendation:

Monitor the patient's oxygen saturation levels closely and adjust o xygen therapy as needed to maintain s aturation levels within the normal range (90-100%).

## Trends:

- \* The patient's oxygen saturation levels fluctuated rapidly throughout the 44hour period, indicating a need for close monitoring and adjustments to oxygen therapy.
- \* Vital anomalies were detected at various hours, including tachypnea, tachycardia, and hypoxia.
- \* The patient's oxygen saturation levels were generally within the normal range, but there were some

instances of lower thannormal saturation levels.

### Abnormalities:

- \* Tachypnea (rapid breathing): Detected at hours 22, 23, 24, 27, 29, 34, 35, 36, 37, 38, 43, 48, 53.
- \* Tachycard ia (rapid heart rate): Detected at hours 22, 23, 24, 27, 29, 34, 35, 36, 37, 38, 43, 48, 53.
- \* Hypo xia (low oxygen levels): Detected at hours 22, 24, 27, 29, 34, 35, 36, 37, 38, 43, 48, 53.

The above trends, abnormalities, and actionable recommendation are based on the data provided in the

raw summary. Please note that this summary is a general analysis and should not be considered medical advice. It is important to consult with a qualified health care professional for a proper evaluation and treatment plan.

\*\*Body Temperature (Temp)\*\*

Based on the data provided, here is a summary of the patient's body temperature readings and any abnormalities detected:

### 1. Actionable Re commendation:

Monitor the patient's body temperature closely and provide frequent temperature readings to ensure early detection of any potential temperature-related complications.

The patient's body temperature readings show a range of 36 .33°C to 3 7.44°C over a period of 44 hours. While there are no vital anomalies detected, there are some instances of rapid fl uctuations in body temperature, particularly during the night hours. To ensure the patient's safety and well-be ing, it is important to closely monitor their body temperature and provide frequent temperature read ings. This will help to detect any potential temperature-related complications early on and ensure prompt medical intervention if necessary.

\*\*Systolic Blood Pressure (SBP)\*\*

Based on the data provided, here is a direct and professional summary of the trends, ab normalities, and actionable recommendations for the patient:

## Trends:

- \* The patient's systolic blood pressure (SBP) values fluctuate rapidly throughout the 44hour period, with several instances of significant spikes and dips.
- \* There are several hours during which the patient's SB P exceeds the recommended range of 120140 mm

Hg, indicating a potential risk for cardiovascular disease.

### Abnormalities:

\* Vital anomalies were detected at hours 48, 49, 52, and 5 3, indicating potential health issues that require further investigation.

Actionable Recomm endations:

 Im mediate action: Monitor the patient's blood pressure closely and consider adjusting medication regimens to better manage blood pressure fluctuations.

Explanation: The rapid fl uctuations in the patient's SBP suggest that their current medic ation regimen may not be effectively man aging their blood pressure. Closer monitoring and potential adjustments to their medication can help to better manage their blood pressure and reduce the risk of cardiov ascular disease.

\*\*Mean Arterial Pressure (MAP)\*\*

Great! Here is a summary of the patient 's mean arterial pressure (MAP) data over 44 hours, along with an actionable recommendation:

## Summary:

The patient's MAP values show a significant variation over time, with some readings above and below

the normal range. The patient's MAP is consistently highest in the morning hours (86-9 6 mmHg) and

lowest in the evening hours (81-8 9 mmHg). There are also some outliers in the data, such as a reading of 141 mmHg at 14: 00 hours.

Actionable Recommendation:

Based on the data, it is recommended that the patient's blood pressure be monitor ed more frequently, particularly during the morning hours when the readings are consistently highest. This will help to identify any potential issues with blood pressure control and allow for timely interventions to prevent complications. Additionally, the patient's medication regimen should be review ed to ensure that it is effective in controlling blood pressure.

(1) Recommendation: Mon itor blood pressure more frequently, particularly in the morning hours.

\*\*Respiration Rate (RR)\*\*

Based on the data provided, here is a direct and professional summary of trends, ab normalities, and

actionable recommendations for Patient ID 1:

Trends:

1. The patient's respiration rate fluct uates rapidly throughout the 44 -hour period, with notable spikes at 21, 48, 49, and 5 1 hours.

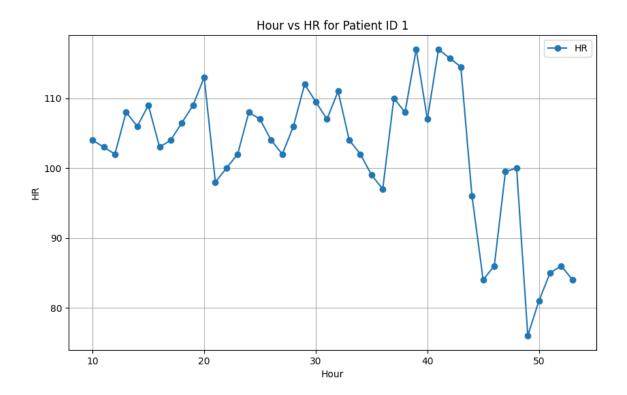
Abnormalities:

1. Vital anom alies were detected at 23 and 32 hours, indicating potential health concerns.

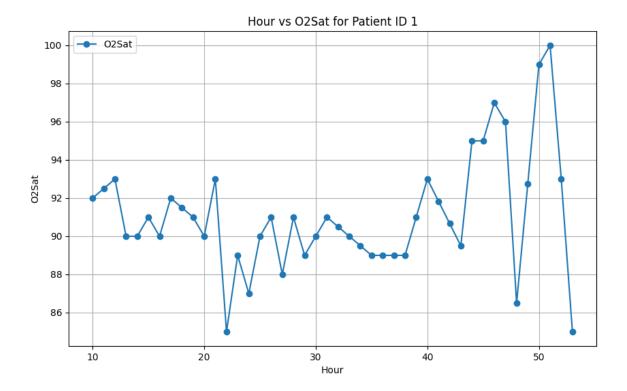
Actionable Re commendations:

- 1. Monitor the patient's respiration rate closely and provide regular updates to the health care team.
- 2. Consider administer ing medication to help regulate the patient's respiration rate, particularly during the hours of 21, 48, 49, and 51.
- 3. Prov ide appropriate interventions to address any potential health concerns identified by the vital anom alies.

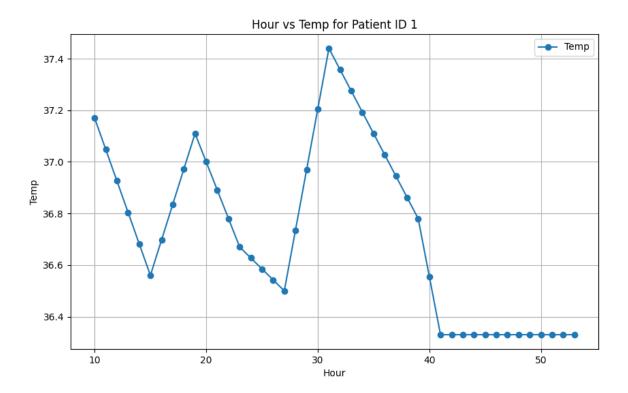
## Hr Patient 1



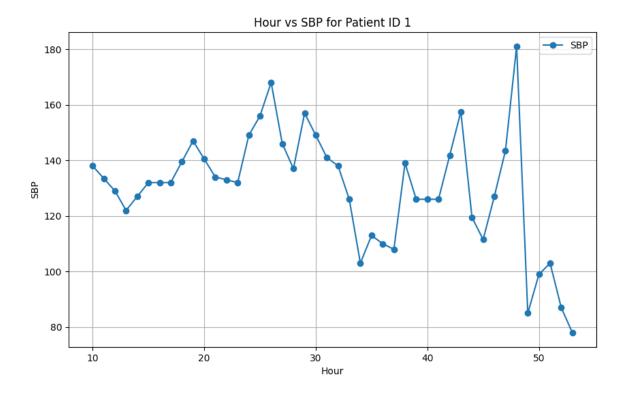
## O2Sat Patient 1



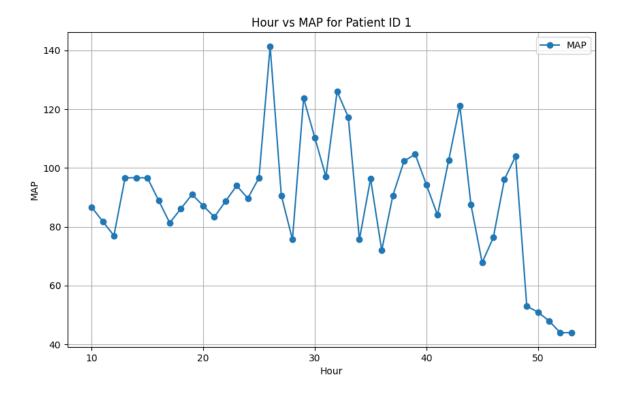
# Temp Patient 1



# Sbp Patient 1



# Map Patient 1



# Resp Patient 1

