Team 2 Updates

Update 1 (9/15)

- Only very simple EDA done at this point
- Mentioned that we noticed grouping in lab results
- Pandas Profiling package (file too large to put on Github)
 - Demonstrated how the package is a starting point for EDA on datasets with many variables
 - Example information, data overview:



Update 2 (9/22)

- Presented data dictionary
 - Example:

Data dictionary

```
1. 'Patient ID'-unique ID identifying an anonymized patient
2. 'Patient age quantile'- bins representing the patients age, as
   interpreted on kaggle by others
         1:0-5
         2: 6-10
3:11-15
         4:16-20
         5:21-25
         6:26-30
         7:31-35
         8:36-40
         9:41-45
         10:46-50
         11:51-55
         12:56-60
         13:61-65
         14:66-70
         15 : 71-75
         16 : 76-80
         17:81-85
         18:86-90
         19:91-95
3. 'SARS-Cov-2 exam result'-Positive or negative PCR result, 558
  positive results, categorical variable
    'Patient admitted to regular ward (1=yes, 0=no)' self-explanatory
   'Patient admitted to semi-intensive unit (1=yes,
   \ensuremath{\text{0=\!no}}\xspace\ensuremath{\text{)'-semi-intensive}}\xspace or intermediate care unit, is usually the
   place to move improving ICU patients or deteriorating regular ward
   patients. The semi-intensive unit can be for a patient who is bad
   but not deteriorating rapidly.
6. 'Patient admitted to intensive care unit (1=yes, 0=no)'- self
   explanatory, for the most critical, on the edge of death patients,
   ICU beds typically cost between \$25,000 and \$30,000. The cost of an
   ICU bed per night is $1,107, according to a recent study of two
   Washington hospitals.
7. 'Hematocrit' -volume percentage of red blood cells in blood,
```

- Presented our lab test groupings based on 1) tests that appear grouped together in our data dictionary and 2) numbers of missing values
 - o Data dictionary at that point had highlights grouping different lab groups together
- Data quality biggest issue at this point, which is why a majority of project spent trying to create a usable dataset for modeling

Update 3 (9/27)

- Did not present visuals but talked through our final dataset: COVID-19 positive patients with several new features indicating whether a set of lab tests were performed (based on previous week's presentation)
- Also decided to collapse our prediction problem from 4 classes (discharged, general, semi-intensive, ICU) to just admitted vs discharged due to lack of data & data quality)
- Mentioned combined over- & under-sampling
- Mentioned models to run being KNN & Random Forests