

## **\*\*Medical Report for Patient ICU Stay\*\***

### **\*\*1. Patient Information\*\***

\*\*\*PatientUnitStayID:\*\* 568432 \* \*\*PatientHealthSystemStayID:\*\* 471519 \* \*\*Gender:\*\* Female \* \*\*Age:\*\* 62 \*  
\*\*Ethnicity:\*\* Caucasian \* \*\*HospitalID:\*\* 175 \* \*\*WardID:\*\* 417 \* \*\*Admission Diagnosis:\*\* Pneumonia, other \*  
\*\*Admission Height (cm):\*\* 149 \* \*\*Hospital Admit Time:\*\* 2015-XX-XX 20:54:00 (Hospital Admit Offset: -106 minutes from unit admit) \* \*\*Hospital Admit Source:\*\* Emergency Department \* \*\*Hospital Discharge Year:\*\* 2015 \* \*\*Hospital Discharge Time:\*\* 2015-XX-XX 23:59:00 (Hospital Discharge Offset: 1519 minutes from unit admit) \* \*\*Hospital Discharge Location:\*\* Other External \* \*\*Hospital Discharge Status:\*\* Alive \* \*\*Unit Type:\*\* Med-Surg ICU \* \*\*Unit Admit Time:\*\* 2015-XX-XX 22:40:00 \* \*\*Unit Admit Source:\*\* Emergency Department \* \*\*Unit Visit Number:\*\* 1 \* \*\*Unit Stay Type:\*\* admit \* \*\*Admission Weight (kg):\*\* 39.8 \* \*\*Discharge Weight (kg):\*\* 42.3 \* \*\*Unit Discharge Time:\*\* 2015-XX-XX 23:59:00 (Unit Discharge Offset: 1519 minutes from unit admit) \* \*\*Unit Discharge Location:\*\* Other External \* \*\*Unit Discharge Status:\*\* Alive \* \*\*Unique Patient ID:\*\* 006-106334

### **\*\*2. History\*\***

NULL (Insufficient information provided in the JSON data to elaborate on the patient's medical history.)

### **\*\*3. Diagnoses\*\***

The patient presented with multiple diagnoses during her ICU stay. The primary diagnosis upon discharge was acute COPD exacerbation (ICD-9 codes: 491.21, J44.1). Other significant diagnoses included acute respiratory failure (ICD-9 codes: 518.81, J96.00) and pneumonia (ICD-9 codes: 486, J18.9). It is important to note that pneumonia and acute respiratory failure were listed as both major and primary diagnoses at different times, reflecting the evolving clinical picture. The diagnosis of pneumonia and acute respiratory failure were initially recorded at 47 minutes after unit admission, while the acute COPD exacerbation diagnosis was made at 491 minutes. The acute COPD exacerbation diagnosis was also recorded again at 1438 minutes, suggesting a possible fluctuation in the patient's condition. All diagnoses were active upon discharge except for pneumonia and acute respiratory failure.

### **\*\*4. Treatments\*\***

The patient received non-invasive ventilation as a treatment. This treatment was initiated 47 minutes after unit admission and continued until discharge (1438 minutes from unit admission) as evidenced by the `activeupondischarge` flag.

### **\*\*5. Vital Trends\*\***

Based on the physical exam, the patient's vital signs at the time of the initial assessment (11 minutes post-unit admission) were:

\* \*\*Heart Rate (HR):\*\* 94 bpm (Current, Lowest, and Highest values were all recorded as 94 and 95 bpm respectively). \*  
\*\*Blood Pressure (BP):\*\* 109/80 mmHg (Systolic current and highest were 109, lowest systolic was 103; Diastolic current and highest were 80, lowest diastolic was 56) \* \*\*Respiratory Rate:\*\* 16 breaths per minute (Current, Lowest, and Highest were all recorded as 16 bpm) \* \*\*Oxygen Saturation (O2 Sat):\*\* 98% (Lowest and Current values were both 98%, Highest was 99%)

### **\*\*6. Lab Trends\*\***

The patient underwent several laboratory tests. Initial blood tests (-180 minutes from unit admission) showed:

\* \*\*BUN:\*\* 26 mg/dL \* \*\*Chloride:\*\* 92 mmol/L \* \*\*Creatinine:\*\* 0.8 mg/dL \* \*\*Anion Gap:\*\* 9 \* \*\*Sodium:\*\* 139 mmol/L \*  
\*\*Bicarbonate:\*\* 38 mmol/L \* \*\*Calcium:\*\* 9.7 mg/dL \* \*\*Glucose:\*\* 277 mg/dL \* \*\*RBC:\*\* 4.63 M/mcL \* \*\*MCV:\*\* 92 fL \*  
\*\*Hgb:\*\* 13.1 g/dL \* \*\*Hct:\*\* 42.7 % \* \*\*WBC x 1000:\*\* 16.4 K/mcL \* \*\*Platelets x 1000:\*\* 676 K/mcL \* \*\*RDW:\*\* 13.7 % \*

**\*\*Troponin-I:\*\* 0.03 ng/mL**

Subsequent lab results (680 minutes from unit admission) revealed changes in several values:

**\* \*\*BUN:\*\* 15 mg/dL \* \*\*Chloride:\*\* 101 mmol/L \* \*\*Creatinine:\*\* 0.8 mg/dL \* \*\*Anion Gap:\*\* 9 \* \*\*Sodium:\*\* 141 mmol/L \*  
\*\*Bicarbonate:\*\* 31 mmol/L \* \*\*Calcium:\*\* 8.4 mg/dL \* \*\*Glucose:\*\* 196 mg/dL \* \*\*Potassium:\*\* 3.2 mmol/L \* \*\*RBC:\*\*  
3.53 M/mcL \* \*\*MCV:\*\* 90 fL \* \*\*Hgb:\*\* 10.1 g/dL \* \*\*Hct:\*\* 31.9 % \* \*\*WBC x 1000:\*\* 19.2 K/mcL \* \*\*Platelets x 1000:\*\*  
535 K/mcL \* \*\*RDW:\*\* 13.8 % \* \*\*Troponin-I:\*\* 0.01 ng/mL**

Additional bedside glucose measurements and arterial blood gas (ABG) results are also available throughout the stay.

#### **\*\*7. Microbiology Tests\*\***

NULL (Insufficient information provided in JSON data.)

#### **\*\*8. Physical Examination Results\*\***

A structured physical exam was performed. The exam documented the vital signs as described above. The patient's GCS score was estimated as 15 (4+5+6) due to medication effects. The patient's weight remained consistent at 39.8kg throughout the initial period of observation and had a total fluid intake of 1520 ml.