

****Medical Report for Patient 003-11972****

****1. Patient Information****

* **Patient Unit Stay ID:** 288133 * **Patient Health System Stay ID:** 248587 * **Unique Patient ID:** 003-11972 *
Gender: Male * **Age:** 79 * **Ethnicity:** Caucasian * **Hospital ID:** 95 * **Ward ID:** 126 * **Unit Type:**
Med-Surg ICU * **Unit Admit Time:** 2015-XX-XX 19:00:00 (Note: Day and Month are missing from the data) * **Unit
Admit Source:** Emergency Department * **Unit Discharge Time:** 2015-XX-XX 13:30:00 (Note: Day and Month are
missing from the data) * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:**
2015-XX-XX 19:00:00 (Note: Day and Month are missing from the data) * **Hospital Admit Source:** Emergency
Department * **Hospital Discharge Time:** 2015-XX-XX 18:45:00 (Note: Day and Month are missing from the data) *
Hospital Discharge Location: Home * **Hospital Discharge Status:** Alive * **Admission Weight:** 82.7 kg *
Discharge Weight: 84.1 kg * **Admission Height:** 170.2 cm * **APACHE Admission Diagnosis:** Extremity only
trauma

****2. History****

NULL (Insufficient data provided)

****3. Diagnoses****

* **Primary Diagnosis:** Closed Pelvis Fracture (ICD-9 code: 808.8) * **Other Diagnoses:** * Anemia
(hematology|bleeding and red blood cell disorders|anemia) * Hypocalcemia (renal|electrolyte imbalance|hypocalcemia)
(ICD-9 code: 275.41, E83.51) * Dementia (neurologic|altered mental status / pain|dementia) (ICD-9 code: 294.9, F03) *
Ventricular Premature Beats (cardiovascular|arrhythmias|ventricular premature beats) (ICD-9 code: 427.69, I49.3)

****4. Treatments****

The patient received numerous treatments during their ICU stay. These include, but are not limited to: internal fixation for trauma, chest x-rays, head CT scans, various consultations (Orthopedics and Surgery), and medications such as promethazine, ondansetron, and pantoprazole. Electrolyte administration (potassium and magnesium) and intravenous fluids (normal saline) were also administered. Note that the data does not specify dosages, frequency, or routes of administration for these medications. Several treatments were active upon discharge, indicating ongoing management of the patient's conditions.

****5. Vital Trends****

NULL (Insufficient data provided. While some vital signs are present in the physical exam data, there is no time-series information for trends.)

****6. Lab Trends****

The provided lab data shows multiple lab tests performed at different time points. There were some fluctuations in the values of several key parameters. For example, potassium levels rose slightly from 3.7 mmol/L to 4.1 mmol/L between initial and discharge tests. BUN fluctuated, but generally remained within normal limits. Creatinine also showed some variation, however the specific ranges and significance of these fluctuations require further clinical interpretation.

****7. Microbiology Tests****

NULL (No microbiology data provided.)

****8. Physical Examination Results****

Physical exams were performed at multiple time points. The recorded vital signs include heart rate (HR), blood pressure (BP), respiratory rate (Resp), and oxygen saturation (O2 Sat). These measurements showed some fluctuations. The initial neurological examination showed a GCS score of 13, which improved to a GCS score of 13 at a later time point. The patient's weight decreased slightly during their stay. The patient's heart rhythm was documented as sinus rhythm with PVCs at multiple time points.

****Note:**** This report is based on the provided data. Missing information (e.g., dates, detailed history, complete vital sign trends) limits the comprehensiveness of this report. A complete clinical assessment requires additional information. This report is for informational purposes only and should not be used for diagnostic or treatment decisions.