

****Medical Report: Patient 009-10052****

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

* **Patient Unit Stay ID:** 1058175 * **Unique Patient ID:** 009-10052 * **Gender:** Female * **Age:** 65 * **Ethnicity:** Caucasian * **Hospital Admission Time:** 2014-XX-XX 15:16:00 * **Hospital Discharge Time:** 2014-XX-XX 21:05:00 * **Unit Admission Time:** [Time of Unit Admission - needs to be calculated from offset] * **Unit Discharge Time:** [Time of Unit Discharge - needs to be calculated from offset] * **Unit Type:** MICU * **Unit Admission Source:** Operating Room * **Unit Discharge Location:** Other Hospital * **Admission Weight:** 52.5 kg * **Discharge Weight:** NULL * **Hospital Admission Diagnosis:** MI admitted > 24 hrs after onset of ischemia

****2. History:****

The patient was admitted to the hospital via the Operating Room and subsequently transferred to the MICU as a readmission (Unit Stay Type: readmit). The exact details of the patient's history prior to admission to the MICU are not fully provided. However, the admission diagnosis indicates a myocardial infarction (MI) occurring more than 24 hours before admission. Further details about the patient's medical history, including events preceding the MI, are needed for a complete account.

****3. Diagnoses:****

* **Primary:** Acute Myocardial Infarction (Non-ST Elevation) (ICD-9: 410.71, I21.4) * **Primary:** s/p PTCA (Percutaneous Transluminal Coronary Angioplasty) * **Other:** Coronary Artery Disease * **Major:** Diabetic Ketoacidosis (DKA) with altered mental status (ICD-9: 250.33, E10.11)

The diagnoses indicate a complex presentation with acute coronary syndrome (likely related to coronary artery disease), requiring PTCA, and concurrent DKA with altered mental status.

****4. Treatments:****

* **Normal Saline Administration (Fluid Bolus):** The patient received a fluid bolus of normal saline (250-1000mls). * **Continuous Insulin Infusion:** A continuous insulin infusion was administered. * **Aggressive Volume Resuscitation:** The patient underwent aggressive volume resuscitation (>250 mls/hr) using normal saline.

These treatments are consistent with managing both the cardiovascular event (fluid resuscitation) and the DKA (insulin infusion and fluid management).

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

NULL (Heart rate, blood pressure, respiratory rate, and oxygen saturation data are available but require calculation of time-since-admission and visualization for trend analysis.)

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

* **PTT:** Initial value of 62.2 sec (-28 minutes from unit admission). (Requires additional lab data for trend analysis.) * **BUN:** Initial value of 23 mg/dL (-25 minutes from unit admission). (Requires additional lab data for trend analysis.) * **Creatinine:** Initial value of 0.9 mg/dL (-25 minutes from unit admission). (Requires additional lab data for trend analysis.) * **Bedside Glucose:** Initial value of 245 mg/dL (-46 minutes from unit admission). (Requires additional lab data for trend analysis.)

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

NULL (No microbiology test data provided)

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

* ****Neurologic Exam:**** GCS (Glasgow Coma Scale) scored as: Eyes: 4, Verbal: 1, Motor: 3. This indicates a level of altered mental status, consistent with the DKA diagnosis. * ****Vital Signs:**** Heart rate (77-78 bpm), Blood pressure (114-122/37-47 mmHg), Respiratory rate (13-14 breaths per minute), Oxygen saturation (99-100%). * ****Weight:**** Admission weight: 52.5 kg.

The physical exam findings support the diagnoses and the severity of the patient's condition at the time of the assessment. A complete trend analysis over time is needed.

****Note:**** Several data points lack timestamps or units. A complete analysis requires the addition of missing data, particularly timestamps for lab results and vital signs, to fully characterize the patient's condition over time.