Medical Report: Patient 002-10306

1. Patient Information

* **Patient Unit Stay ID:** 230427 * **Patient Health System Stay ID:** 198249 * **Unique Patient ID:** 002-10306 * **Gender:** Male * **Age:** 73 * **Ethnicity:** Asian * **Hospital ID:** 63 * **Ward ID:** 95 * **Unit Type:** Med-Surg ICU * **Unit Admit Time:** 21:22:00 * **Unit Admit Source:** Direct Admit * **Unit Discharge Time:** 04:19:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:** 20:11:00 * **Hospital Admit Source:** Direct Admit * **Hospital Discharge Year:** 2014 * **Hospital Discharge Time:** 14:53:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Admission Height (cm):** 152.4 * **Admission Weight (kg):** NULL * **Discharge Weight (kg):** 73.6

2. History

NULL (Insufficient data provided)

3. Diagnoses

The patient presented with multiple cardiovascular diagnoses during their ICU stay. The primary diagnosis, identified as acute myocardial infarction (with ST elevation), was recorded 36 minutes after unit admission (diagnosis ID: 4201543, ICD-9 code: 410.90, I21.3). This was accompanied by several other diagnoses, including acute coronary syndrome (post-percutaneous transluminal coronary angioplasty (PTCA) with stent placement; diagnosis IDs: 3758567 and 4150475), post-coronary artery bypass graft (CABG) surgery (less than 7 days post-op; diagnosis IDs: 3869625 and 3516003), and coronary artery disease (diagnosis IDs: 4107916 and 4234940). Additionally, diabetes mellitus (diagnosis IDs: 3603634 and 4132537) and acute respiratory distress (diagnosis ID: 4120462, ICD-9 code: 518.82) were recorded as secondary diagnoses.

Note that the `activeupondischarge` flag indicates that coronary artery disease and acute respiratory distress were still active at the time of unit discharge. The absence of ICD-9 codes for many diagnoses suggests incomplete data entry or reliance on internal coding systems. The diagnosis priority field provides additional context on the relative importance of each diagnosis. Multiple instances of the same diagnosis string with different diagnosis IDs suggest multiple instances of the same diagnosis or potential data entry inconsistencies.

4. Treatments

NULL (Insufficient data provided)

5. Vital Trends

Physical examination data reveals the following vital signs at 31 minutes post-unit admission:

* Heart Rate (HR) Current: 65 bpm * Heart Rate (HR) Lowest: 65 bpm * Heart Rate (HR) Highest: 68 bpm * Blood Pressure (BP) Systolic Current: 164 mmHg * Blood Pressure (BP) Systolic Lowest: 164 mmHg * Blood Pressure (BP) Systolic Highest: 166 mmHg * Blood Pressure (BP) Diastolic Current: 89 mmHg * Blood Pressure (BP) Diastolic Lowest: 89 mmHg * Blood Pressure (BP) Diastolic Highest: 90 mmHg * Respiratory Rate (Resp) Current: 15 breaths/minute * Respiratory Rate (Resp) Lowest: 15 breaths/minute * Respiratory Rate (Resp) Highest: 17 breaths/minute * Oxygen Saturation (O2 Sat) Current: 100% * Oxygen Saturation (O2 Sat) Lowest: 98% * Oxygen Saturation (O2 Sat) Highest: 100% * Weight (kg) Current: 68.9 kg * Respiration Mode: Spontaneous * Heart Rhythm: Sinus rhythm, regular

Additional vital sign data at 4122 minutes post-unit admission:

* Heart Rate (HR) Lowest: 58 bpm * Heart Rate (HR) Highest: 83 bpm * Blood Pressure (BP) Systolic Lowest: 107 mmHg * Blood Pressure (BP) Systolic Highest: 126 mmHg * Blood Pressure (BP) Diastolic Lowest: 65 mmHg * Blood Pressure

(BP) Diastolic Highest: 73 mmHg * Respiratory Rate (Resp) Lowest: 13 breaths/minute * Respiratory Rate (Resp) Highest: 13 breaths/minute * Oxygen Saturation (O2 Sat) Lowest: 97% * Oxygen Saturation (O2 Sat) Highest: 100% * Weight (kg) Current: 70.4 kg * Intake Total: 2477 ml * Output Total: 500 ml * Dialysis Net: 0 ml * Total Net: +1977 ml * Respiration Mode: Spontaneous

6. Lab Trends

The provided lab data includes multiple bedside glucose measurements, complete blood counts (CBC) with differential, and basic metabolic panels (BMP) with blood gas analysis. These lab values are spread across several time points during the ICU stay and demonstrate fluctuation in glucose levels and changes in some blood parameters. Detailed analysis requires visualization.

7. Microbiology Tests

NULL (Insufficient data provided)

8. Physical Examination Results

See section 5 for vital sign trends. More comprehensive physical examination results are not provided in the data.