

****Patient Information****

* **PatientUnitStayID:** 739483 * **PatientHealthSystemStayID:** 574049 * **Gender:** Female * **Age:** 62 *
Ethnicity: Caucasian * **HospitalID:** 174 * **WardID:** 400 * **Admission Height (cm):** 163 * **Admission Weight (kg):** 61 * **Discharge Weight (kg):** 59.1 * **Hospital Admit Time:** 01:25:00 * **Hospital Admit Source:** Emergency Department * **Hospital Discharge Year:** 2015 * **Hospital Discharge Time:** 18:45:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admit Time:** 03:05:00 *
Unit Admit Source: Emergency Department * **Unit Visit Number:** 1 * **Unit Stay Type:** stepdown/other * **Unit Discharge Time:** 02:31:00 * **Unit Discharge Location:** Acute Care/Floor * **Unit Discharge Status:** Alive * **Unique Patient ID:** 006-100195

****Medical History****

NULL (Insufficient data provided)

****Diagnoses****

NULL (Insufficient data provided)

****Treatments****

NULL (Insufficient data provided)

****Vital Trends****

NULL (Insufficient data provided)

****Lab Trends****

The provided lab data includes multiple blood tests conducted at various time points during the patient's stay. The data shows some key electrolyte and blood chemistry values. There are three distinct time points with multiple labs performed at each point: One at approximately -220 minutes from unit admission, another at 580 minutes, and a third at 4910 minutes. This suggests a pattern of routine blood work being drawn on the patient.

* **Electrolytes:** Sodium levels fluctuated between 139 mmol/L, 141 mmol/L, and 143 mmol/L across the different time points. Chloride levels were 104 mmol/L, 109 mmol/L, and 110 mmol/L. Potassium levels ranged from 3.3 mmol/L to 4.7 mmol/L. Bicarbonate levels show some variation, from 21 mmol/L to 27 mmol/L. The anion gap also varied between 6 and 12. These variations warrant further investigation to determine the cause. * **Renal Function:** Creatinine levels were measured at 0.58 mg/dL, 0.60 mg/dL, and 0.65 mg/dL. BUN levels varied from 5 mg/dL to 11 mg/dL. These values indicate some fluctuation in renal function and need to be reviewed in the context of the patient's overall clinical picture. *
Liver Function: AST (SGOT) levels were 18 U/L and 25 U/L, and ALT (SGPT) levels were 29 U/L and 31 U/L. Alkaline phosphatase was measured at 71 U/L and 99 U/L. Total bilirubin levels fluctuated between 0.4 mg/dL and 0.5 mg/dL. These results indicate some degree of liver enzyme elevation and require further evaluation to rule out any liver pathology. *
Hematology: Hemoglobin (Hgb) levels ranged from 13.4 g/dL to 16.1 g/dL. Hematocrit (Hct) values were between 38.4% and 44.5%. Mean corpuscular volume (MCV) showed values of 96 fL, 97 fL, 98 fL, and 99 fL. Mean corpuscular hemoglobin (MCH) levels varied from 33.9 pg to 34.7 pg and mean corpuscular hemoglobin concentration (MCHC) from 35 g/dL to 36 g/dL. Platelet counts fluctuated between 140 K/mcL and 228 K/mcL, and white blood cell counts (WBC) were between 6.1 K/mcL and 9.7 K/mcL. Red blood cell (RBC) counts varied between 3.93 M/mcL and 4.64 M/mcL. RDW (Red cell distribution width) was between 11.8% and 12.5%. These hematological findings need to be interpreted in the context of the patient's clinical presentation and other investigations. * **Other:** Albumin levels were 3.2 g/dL and 4.2 g/dL, and glucose levels were 94 mg/dL and 110 mg/dL. Lipase was measured at 81 U/L. These results are important to assess nutritional status and overall metabolic state.

It's crucial to note that the absence of specific time stamps for each lab result makes it difficult to fully discern the temporal relationships between these lab values and the patient's clinical course. A more precise timeline would allow for a more comprehensive analysis. Furthermore, the lack of reference ranges for many of the lab results makes interpretation more challenging.

****Microbiology Tests****

NULL (Insufficient data provided)

****Physical Examination Results****

The physical examination records indicate that a structured physical exam was performed at 35 minutes post unit admission. The patient's admission weight was 61 kg and the current weight was 59.1 kg, resulting in a weight change of -1.9 kg. The Glasgow Coma Scale (GCS) score was 15 (Eyes: 4, Verbal: 5, Motor: 6), indicating an alert and oriented patient.

Further details regarding other aspects of the physical exam are missing. In order to draw comprehensive conclusions, more detailed physical examination data are required.