

## **\*\*Medical Report for Patient 006-101872\*\***

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

\* \*\*Patient Unit Stay ID:\*\* 796205 \* \*\*Unique Patient ID:\*\* 006-101872 \* \*\*Patient Health System Stay ID:\*\* 608184 \*  
\*\*Gender:\*\* Male \* \*\*Age:\*\* 56 \* \*\*Ethnicity:\*\* Caucasian \* \*\*Hospital ID:\*\* 175 \* \*\*Ward ID:\*\* 417 \* \*\*Unit Type:\*\*  
Med-Surg ICU \* \*\*Unit Admit Time:\*\* 05:54:00 \* \*\*Unit Admit Source:\*\* Operating Room \* \*\*Unit Discharge Time:\*\*  
15:29:00 \* \*\*Unit Discharge Location:\*\* Acute Care/Floor \* \*\*Unit Discharge Status:\*\* Alive \* \*\*Hospital Admit Time:\*\*  
02:43:00 \* \*\*Hospital Admit Source:\*\* Operating Room \* \*\*Hospital Discharge Year:\*\* 2015 \* \*\*Hospital Discharge Time:\*\*  
01:55:00 \* \*\*Hospital Discharge Location:\*\* Home \* \*\*Hospital Discharge Status:\*\* Alive \* \*\*Admission Weight:\*\* 76 kg \*  
\*\*Discharge Weight:\*\* 72 kg \* \*\*Admission Diagnosis:\*\* GI perforation/rupture, surgery for

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

NULL (Insufficient information provided in the JSON to generate a detailed patient history.)

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

\* \*\*Diagnosis ID:\*\* 12354319 \* \*\*Patient Unit Stay ID:\*\* 796205 \* \*\*Active Upon Discharge:\*\* True \* \*\*Diagnosis Offset  
(minutes from unit admit):\*\* 12 \* \*\*Diagnosis String:\*\* gastrointestinal|post-GI surgery|s/p exploratory laparoscopy \*  
\*\*ICD-9 Code:\*\* NULL \* \*\*Diagnosis Priority:\*\* Primary

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

\* \*\*Treatment ID:\*\* 23961260 \* \*\*Patient Unit Stay ID:\*\* 796205 \* \*\*Treatment Offset (minutes from unit admit):\*\* 12 \*  
\*\*Treatment String:\*\* gastrointestinal|exploratory surgery|exploratory laparoscopy \* \*\*Active Upon Discharge:\*\* True

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

NULL (No vital sign data provided in the JSON.)

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

The provided lab data includes multiple blood chemistry and hematology tests performed at different time points during the patient's stay. The data shows two sets of lab results, one at approximately 326 minutes and another at approximately 1761 minutes post-unit admission. A third set of lab results is available at 4703 minutes post-unit admission. There's also an initial set from -299 minutes, preceding unit admission. Key lab values include:

\* \*\*Electrolytes:\*\* Sodium, potassium, chloride, bicarbonate, and anion gap show some fluctuations between the initial and later measurements. \* \*\*Renal Function:\*\* BUN and creatinine levels are monitored, showing changes over time. \* \*\*Liver Function:\*\* ALT (SGPT) and AST (SGOT) are assessed, indicating some liver involvement. \* \*\*Hematology:\*\* Hemoglobin (Hgb), hematocrit (Hct), MCV, MCH, MCHC, RBC, WBC, platelets, and RDW are recorded at multiple time points, potentially indicating an evolving hematological picture. \* \*\*Other:\*\* Total protein, albumin, glucose, and lipase are also monitored.

Detailed analysis of these trends requires further examination and potentially additional data points to establish definitive patterns and their clinical significance.

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

NULL (No microbiology test data provided in the JSON.)

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

A structured physical exam was performed at 5 minutes post-unit admission. The recorded values include:

\* \*\*Glasgow Coma Scale (GCS):\*\* Scored as 15 (Eyes 4, Verbal 5, Motor 6) \* \*\*Blood Pressure (BP):\*\* Systolic BP ranged from 84 to 89 mmHg, while diastolic BP ranged from 55 to 56 mmHg. \* \*\*Weight:\*\* Admission weight was 76 kg, decreasing to 72 kg at the time of the exam, a net loss of 4 kg. \* \*\*Intake and Output (I&O):\*\* Total intake was 0 ml, with a total output of 500 ml, resulting in a net negative balance of 500 ml.

The physical exam findings suggest a generally stable neurological status, but the weight and fluid balance indicate a potential need for further assessment and management.