Medical Report for Patient 004-11094

1. Patient Information

* **Patient Unit Stay ID:** 368911 * **Unique Patient ID:** 004-11094 * **Gender:** Male * **Age:** 25 * **Ethnicity:** Caucasian * **Hospital Admission Time:** 2015, 18:30:00 * **Hospital Admission Source:** Floor * **Hospital Discharge Time:** 2015, 21:48:00 * **Hospital Discharge Location:** Other External * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admission Time:** 2015, 02:20:00 * **Unit Admission Source:** Floor * **Unit Discharge Time:** 2015, 21:48:00 * **Unit Discharge Location:** Other External * **Unit Discharge Status:** Alive * **Admission Weight:** 65.4 kg * **Discharge Weight:** NULL * **Admission Height:** 172 cm

2. History

Admission diagnosis was Coma/change in level of consciousness. The patient presented from the floor with altered mental status, which was the primary reason for ICU admission. The patient's history also includes drug overdose (Major diagnosis), bipolar disorder (Major diagnosis) and suicidal ideation (Major diagnosis). The onset and specifics of the drug overdose are not detailed in the provided data. The patient's bipolar disorder and suicidal ideation appear to be contributing factors to their altered mental status. Further details on the patient's medical history prior to this admission are not available within this dataset.

3. Diagnoses

* **Primary Diagnosis:** Neurologic | Altered Mental Status / Pain | Change in Mental Status (ICD-9 Codes: 780.09, R41.82) * **Major Diagnosis:** Toxicology | Drug Overdose | Drug Overdose - General (ICD-9 Code: NULL) * **Major Diagnosis:** Neurologic | Altered Mental Status / Pain | Bipolar Disorder (ICD-9 Codes: 296.80, F31.9) * **Major Diagnosis:** Neurologic | Altered Mental Status / Pain | Suicidal Ideation (ICD-9 Codes: V62.84, R45.851)

The multiple diagnoses suggest a complex clinical picture requiring multifaceted management. The lack of ICD-9 codes for some diagnoses limits the ability to perform detailed epidemiological analysis.

4. Treatments

* **Oral Feeds:** The patient received oral feeds throughout their ICU stay. This suggests that their level of consciousness improved enough to allow for oral intake. * **Compression Boots:** Compression boots were used for VTE prophylaxis, indicating a focus on preventing venous thromboembolism. This is standard practice for patients with prolonged immobility. * **Ketorolac:** Ketorolac, a non-narcotic analgesic, was administered for pain management. The dosage and response to this medication are not documented in the data.

The treatments administered reflect a focus on nutritional support, thromboembolic prophylaxis, and pain management. More comprehensive information on treatment plans and their effectiveness would enhance the completeness of this report.

5. Vital Trends

NULL: No vital signs data were provided.

6. Lab Trends

The following lab results were recorded approximately 50 minutes post-unit admission:

* **Sodium:** 142 mEq/L * **Creatinine:** 1.1 mg/dL * **BUN:** 15 mg/dL * **Glucose:** 147 mg/dL

Additional lab results at approximately 52 minutes post-unit admission:

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* **WBC x 1000:** 10.2 K/mcL * **Hct:** 43.9 %
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These initial lab values provide a baseline for assessing renal function, hydration status, and the presence of infection. Longitudinal data is needed to assess trends in these values over time.

7. Microbiology Tests

NULL: No microbiology test data was provided.

8. Physical Examination Results

The physical examination was performed and documented. Key findings include:

* **Heart Rate (HR):** Current 72 bpm, Lowest 72 bpm, Highest 86 bpm * **Blood Pressure (BP):** Systolic – Current 125 mmHg, Lowest 125 mmHg, Highest 126 mmHg; Diastolic – Current 78 mmHg, Lowest 78 mmHg, Highest 77 mmHg * **Respiratory Rate (RR):** Current 19 breaths/min, Lowest 16 breaths/min, Highest 19 breaths/min * **Oxygen Saturation (O2 Sat%):** Current 100%, Lowest 100%, Highest 100% * **Glasgow Coma Scale (GCS):** Total score not provided, but sub-scores are available: Eyes 3, Verbal 3, Motor 6. This indicates a significantly impaired level of consciousness.

The physical exam findings support the diagnosis of altered mental status and provide baseline vital signs. A more detailed physical examination could provide additional insights into the patient's condition.