Medical Report for Patient 006-100457

1. Patient Information

* **Patient Unit Stay ID:** 671292 * **Unique Patient ID:** 006-100457 * **Gender:** Male * **Age:** 74 * **Ethnicity:** Other/Unknown * **Hospital ID:** 165 * **Ward ID:** 337 * **Admission Diagnosis (APACHE):** NULL * **Admission Height:** 177.8 cm * **Admission Weight:** 63.9 kg * **Discharge Weight:** NULL * **Hospital Admit Time:** 2015-XX-XX 20:38:00 (Hospital offset: -1753 minutes from unit admit) * **Hospital Admit Source:** Emergency Department * **Hospital Discharge Year:** 2015 * **Hospital Discharge Time:** 2015-XX-XX 21:34:00 (Hospital offset: 5503 minutes from unit admit) * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admit Time:** 2015-XX-XX 01:51:00 * **Unit Admit Source:** ICU * **Unit Visit Number:** 2 * **Unit Stay Type:** stepdown/other * **Unit Discharge Time:** 2015-XX-XX 18:14:00 (Unit offset: 983 minutes from unit admit) * **Unit Discharge Location:** Acute Care/Floor * **Unit Discharge Status:** Alive

2. History

NULL (Insufficient data provided)

3. Diagnoses

NULL (Insufficient data provided)

4. Treatments

NULL (Insufficient data provided)

5. Vital Trends

NULL (Insufficient data provided)

6. Lab Trends

The provided data includes multiple laboratory tests performed at various time points during the patient's stay. The data shows trends in several key electrolytes and blood chemistry markers. There are at least three distinct time points represented in the data: one early in the ICU stay (around 2052 minutes from unit admission), one midway (around 2382 minutes), and one towards the end (around 3253 and 4879 minutes). A detailed analysis of these trends is necessary to understand the patient's condition evolution. Specific lab values showing notable variations include:

* **BUN (Blood Urea Nitrogen):** Fluctuations observed between 28 mg/dL (early), 30 mg/dL (midway), 32 mg/dL (late), and 34 mg/dL (late) suggest potential kidney function changes during the ICU stay. Further investigation is required to determine the significance of these variations. * **Creatinine:** Similar to BUN, creatinine shows a rising trend, with values of 1.23 mg/dL (early), 1.24 mg/dL (early), 1.29 mg/dL (midway), 1.31 mg/dL (late), and 1.2 mg/dL (late). This indicates a possible decline in renal function. * **Glucose:** High glucose levels are noted throughout the stay. The value was 115 mg/dL (early), 116 mg/dL (early), 145 mg/dL (midway), 170 mg/dL (late), and 127 mg/dL (late). This may indicate uncontrolled diabetes or stress hyperglycemia. * **Albumin:** Low albumin levels are observed, suggesting potential malnutrition or liver dysfunction. Values were 2.4 g/dL (early), 2.6 g/dL (early), 2.7 g/dL (late), and 2.6 g/dL (late). The change over time is not conclusive. * **Hemoglobin and Hematocrit:** These values indicate anemia, with Hgb values ranging from 10.5 to 12.2 g/dL, and Hct values between 30.4% and 35.6%. It is important to note the time trend of these values to understand the evolution of the anemia. * **Platelets:** Platelet counts are relatively stable, fluctuating between 177 and 239 K/mcL. This warrants further evaluation to determine if thrombocytopenia is present. * **PT and PTT:** These coagulation tests show prolonged times, indicative of possible coagulopathy. Further investigation is needed to determine the cause.

7. Microbiology Tests

NULL (Insufficient data provided)

8. Physical Examination Results

NULL (Insufficient data provided)