## \*\*Patient Information\*\*

Patient ID: 006-104324 Patient Unit Stay ID: 712313 Gender: Male Age: 64 Ethnicity: Caucasian Hospital Admission Time: 05:47:00 Hospital Admission Source: Emergency Department Hospital Discharge Time: 18:03:00 Hospital Discharge Location: Home Hospital Discharge Status: Alive Unit Type: Med-Surg ICU Unit Admission Time: 06:51:00 Unit Admission Source: Emergency Department Unit Discharge Time: 18:03:00 Unit Discharge Location: Home Unit Discharge Status: Alive Admission Weight: 131 kg Discharge Weight: 96.6 kg Height: 175 cm

\*\*History\*\*

Insufficient data provided to generate a detailed patient history. The provided JSON only contains lab results, physical examination notes, and admission/discharge information. A comprehensive history would require additional information such as presenting complaints, past medical history, family history, social history, and medication history. This section would normally include details of the events leading to the ICU admission, including the nature and duration of symptoms experienced by the patient.

\*\*Diagnoses\*\*

NULL. No diagnoses are explicitly stated in the provided data. A complete medical report would typically include a list of the patient's diagnoses, both upon admission and any that developed during the ICU stay. This would be based on clinical findings, imaging studies, and other diagnostic tests not included here.

\*\*Treatments\*\*

NULL. The provided data lacks information on the treatments administered to the patient during their ICU stay. A comprehensive report would detail all interventions, including medications, intravenous fluids, respiratory support, and any surgical procedures undertaken.

\*\*Vital Trends\*\*

NULL. No vital sign data (heart rate, blood pressure, respiratory rate, temperature, oxygen saturation) is available in the provided JSON. A vital signs trend graph would be a crucial component of a complete ICU report, illustrating the patient's physiological status over time.

\*\*Lab Trends\*\*

The following laboratory results are available:

\* \*\*Chemistry Panel (Multiple Time Points):\*\* Anion gap, AST (SGOT), creatinine, sodium, alkaline phosphatase, total protein, BUN, chloride, glucose, total bilirubin, ALT (SGPT), direct bilirubin, lactate, CPK. \* \*\*Hematology Panel (Multiple Time Points):\*\* MCH, MCHC, WBC x 1000, Hct, platelets x 1000, RBC, MCV, MPV, PT, PT-INR, PTT. \* \*\*Drug Levels:\*\* Acetaminophen, Ethanol

Significant variations were observed in several lab values over the ICU stay, particularly potassium and creatinine levels which showed a substantial increase from initial values. Elevated AST, ALT, and total bilirubin indicated liver injury. The anion gap also fluctuated, suggesting metabolic disturbances. Detailed analysis of individual lab value trends (e.g., graphical representation) is required to assess the severity and progression of these abnormalities.

\*\*Microbiology Tests\*\*

NULL. No microbiology test results (e.g., blood cultures, urine cultures) are included in the provided data. This section would normally report on any cultures performed and the results, including identification of microorganisms and antibiotic

sensitivities.

\*\*Physical Examination Results\*\*

The physical examination was documented as "Not Performed". This is unusual for an ICU admission and suggests a possible oversight in documentation. A complete physical examination is typically conducted upon admission and may be repeated periodically during the stay to monitor the patient's condition.