Medical Report for Patient 003-10057

1. Patient Information

* **Patient Unit Stay ID:** 282439 * **Unique Patient ID:** 003-10057 * **Gender:** Male * **Age:** 81 * **Ethnicity:** Caucasian * **Hospital Admission Time:** 2015, 09:39:00 * **Hospital Discharge Time:** 2015, 15:03:00 * **Unit Admission Time:** 2015, 04:39:00 * **Unit Discharge Time:** 2015, 14:55:00 * **Unit Type:** Med-Surg ICU * **Admission Weight:** 93.62 kg * **Admission Height:** 187.96 cm * **Hospital Admission Source:** Floor * **Hospital Discharge Location:** Other External * **Hospital Discharge Status:** Alive * **Unit Admission Source:** Floor * **Unit Discharge Location:** Other Hospital * **Unit Discharge Status:** Alive * **Hospital ID:** 92 * **Ward ID:** 143 * **Admission Diagnosis:** Hemorrhage (for gastrointestinal bleeding GI-see GI system) (for trauma see Trauma)

2. History

NULL (Insufficient information provided)

3. Diagnoses

The patient presented with multiple diagnoses during their ICU stay. The primary diagnosis upon admission and discharge was acute blood loss anemia (ICD-9 codes: 285.1, D62). Other diagnoses included:

* Atrial fibrillation with controlled ventricular response (ICD-9 codes: 427.31, I48.0) – This diagnosis was active upon discharge. * Chronic kidney disease (ICD-9 codes: 585.9, N18.9) – This diagnosis was active upon discharge. * Acute renal failure (ICD-9 codes: 584.9, N17.9) – This diagnosis was active upon discharge.

Note that some diagnoses were marked as 'Other' priority, suggesting they may be secondary or contributing factors to the primary diagnosis.

4. Treatments

The patient received several treatments during their ICU stay. Active treatments upon discharge included:

* Aggressive volume resuscitation (>250 mls/hr) with normal saline administration. * Prophylactic antibacterials. * Fresh frozen plasma administration. * Packed red blood cells administration.

Some treatments, such as prophylactic antibacterials and blood product administration (fresh frozen plasma and packed red blood cells), were discontinued before discharge.

5. Vital Trends

NULL (Insufficient information provided. Vital signs data would be needed here, such as heart rate, blood pressure, respiratory rate, and oxygen saturation over time.)

6. Lab Trends

The patient underwent extensive laboratory testing. Key trends observed include:

* **Hemoglobin (Hgb):** Fluctuated significantly throughout the stay, indicating ongoing blood loss and response to treatment. Initial levels were low (around 7 g/dL), improving to around 9 g/dL later on. * **Hematocrit (Hct):** Similar to Hgb, Hct showed initial low levels (around 20%), improving over time reflecting the blood transfusion and fluid resuscitation. * **Creatinine:** Elevated, indicating impaired kidney function (consistent with the diagnosis of acute and

chronic kidney disease). Levels were initially high (around 3.5 mg/dL), showing some improvement towards the end of the stay (around 1.4 mg/dL), though still elevated. * **Potassium:** Showed significant fluctuation, with levels initially elevated (above 6 mmol/L), and then decreasing to within the normal range at discharge (around 4 mmol/L). This requires careful monitoring due to potential cardiac complications. * **Platelets:** Decreased during the stay, reflecting the hemorrhagic episode. The platelet count was initially low (around 108 K/mcL), showing some improvement to 87 K/mcL at discharge. * **Glucose:** Showed elevated values initially (above 195 mg/dL), with subsequent values fluctuating between 100 and 148 mg/dL. This suggests possible hyperglycemia, requiring further investigation and management.

7. Microbiology Tests

NULL (Insufficient information provided)

8. Physical Examination Results

A structured physical exam was performed. The patient's vital signs at the time of initial exam were: Heart rate (HR) between 92-93 bpm, systolic blood pressure (BP) between 96-117 mmHg, diastolic BP between 55-57 mmHg, and respiratory rate (RR) between 13-19 breaths per minute. Oxygen saturation (SpO2) was between 96-98%. The patient's weight on admission was 93.62kg. The patient's Glasgow Coma Scale (GCS) score was 15. The patient's heart rhythm was paced, and the respiratory mode was spontaneous. The patient had a normal level of consciousness.