Medical Report: Patient 006-100694

1. Patient Information

* **Patient Unit Stay ID:** 585971 * **Patient Health System Stay ID:** 482017 * **Unique Patient ID:** 006-100694 * **Gender:** Male * **Age:** 73 * **Ethnicity:** Caucasian * **Hospital ID:** 148 * **Ward ID:** 347 * **Unit Type:** MICU * **Unit Admit Time:** 10:53:00 * **Unit Admit Source:** Floor * **Unit Discharge Time:** 17:29:00 * **Unit Discharge Location:** Step-Down Unit (SDU) * **Unit Discharge Status:** Alive * **Hospital Admit Time:** 03:13:00 (Hospital admit offset: -1900 minutes from unit admit time) * **Hospital Admit Source:** Floor * **Hospital Discharge Year:** 2014 * **Hospital Discharge Time:** 00:00:00 (Hospital discharge offset: 16627 minutes from unit admit time) * **Admission Weight:** 46.9 kg * **Admission Height:** 149.8 cm * **APACHE Admission Dx:** Bleeding, upper GI

2. History

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

3. Diagnoses

The patient presented with multiple diagnoses during their ICU stay. These diagnoses, listed in order of priority and time of entry (offset from unit admission time), include:

* **Primary Diagnosis (3146 minutes):** Gastric upper GI bleeding (ICD-9 codes: 533.00, K92.2) * **Major Diagnoses (Multiple entries at various offsets):** * Hypotension (ICD-9 codes: 458.9, I95.9) * Anemia * Atrial fibrillation with rapid ventricular response (ICD-9 codes: 427.31, I48.0) * Hypovolemic shock (ICD-9 codes: 785.59, R57.1)

Note: Multiple entries of the same diagnosis string exist, suggesting repeated assessments or evolving clinical presentation. The ICD-9 codes are inconsistently populated across diagnoses. The 'diagnosisPriority' field provides a relative severity ranking, but does not fully capture the complexity of the patient's condition.

4. Treatments

The patient received several treatments during their ICU stay. The treatments, listed in order of their time of entry (offset from unit admission time) and active status upon discharge, include:

* **121 minutes:** Transfusion of 1-2 units of packed red blood cells. * **121 minutes:** Amiodarone (Class III antiarrhythmic). * **59 minutes:** Amiodarone (Class III antiarrhythmic). * **727 minutes:** Amiodarone (Class III antiarrhythmic). * **786 minutes:** Amiodarone (Class III antiarrhythmic). * **1004 minutes:** Amiodarone (Class III antiarrhythmic). * **1004 minutes:** Esophagogastroduodenoscopy. * **1004 minutes:** Mechanical ventilation. * **1634 minutes:** Esophagogastroduodenoscopy. * **1634 minutes:** Amiodarone (Class III antiarrhythmic). * **1634 minutes:** Mechanical ventilation. * **3146 minutes:** Esophagogastroduodenoscopy (Active upon discharge) * **3146 minutes:** Amiodarone (Class III antiarrhythmic) (Active upon discharge)

It is noteworthy that amiodarone and EGD were administered multiple times, indicating ongoing management of arrhythmias and upper GI bleeding. The lack of detailed treatment information (dosage, response, etc.) limits a comprehensive assessment of treatment efficacy.

5. Vital Trends

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

6. Lab Trends

The provided lab data shows multiple blood tests performed at different times during the hospital stay. The data includes chemistry, hematology, and blood gas analyses. Specific trends require time-series analysis (see visualization section). Key lab values include:

* **Glucose:** Highly variable, with values ranging from 75 mg/dL to 352 mg/dL. This suggests potential issues with glycemic control. * **Hemoglobin (Hgb):** Also fluctuated significantly, indicating possible ongoing blood loss or response to treatment. Values ranged from 4.9 g/dL to 13.1 g/dL. * **Potassium:** Showed some variation, ranging from 3.5 mmol/L to 5.1 mmol/L. This needs to be monitored for potential cardiac implications. * **Creatinine:** This value fluctuated, reflecting renal function changes during the ICU stay. Values ranged from 1.16 mg/dL to 1.58 mg/dL. * **Blood Gas Analysis:** The limited number of blood gas results show variations in pH, PaO2, PaCO2, and Base Excess, indicating respiratory and acid-base disturbances. Detailed analysis requires a complete time series of the data.

7. Microbiology Tests

NULL (No microbiology test data was included in the JSON.)

8. Physical Examination Results

The physical exam documented at 8 minutes post-unit admission shows a Glasgow Coma Scale (GCS) score of 15 (Eyes 4, Verbal 5, Motor 6), indicating normal neurological function. A subsequent exam at 782 minutes post-unit admission shows similar neurological function (GCS scored). Vital signs recorded at the 782-minute mark include a heart rate (HR) of 87 bpm (range 85-171 bpm), systolic blood pressure (BP) of 126 mmHg (range 126-197 mmHg), diastolic blood pressure of 54 mmHg (range 54-77 mmHg), respiratory rate of 18 breaths per minute (range 14-30 bpm), oxygen saturation (O2 Sat) of 100% (range 99-100%), FiO2 of 40%, PEEP of 5 cm H2O, and a ventilator rate of 18 breaths/min. The patient's admission weight was 46.9 kg. Fluid balance data is also recorded, showing a positive net balance of 1996 ml.

The limited physical exam data restricts a thorough evaluation of the patient's overall condition. More detailed and frequent physical exam records are necessary for comprehensive clinical assessment.