Patient Information

* **PatientUnitStayID:** 148611 * **UniquePID:** 002-10736 * **Gender:** Male * **Age:** 28 * **Ethnicity:** Caucasian * **HospitalID:** 61 * **WardID:** 120 * **Admission Diagnosis:** Overdose, other toxin, poison or drug * **Admission Height:** 182.9 cm * **Admission Weight:** 91.8 kg * **Discharge Weight:** 91.9 kg * **Hospital Admit Time:** 2015-XX-XX 18:02:00 * **Hospital Discharge Time:** 2015-XX-XX 15:15:00 * **Unit Admit Time:** 2015-XX-XX 18:03:00 * **Unit Discharge Time:** 2015-XX-XX 15:11:00 * **Hospital Admit Source:** Emergency Department * **Unit Admit Source:** Emergency Department * **Unit Type:** Med-Surg ICU * **Hospital Discharge Status:** Alive * **Unit Discharge Status:** Alive * **Hospital Discharge Location:** Other * **Unit Discharge Location:** Floor

History

NULL (Insufficient data provided)

Diagnoses

* **Admission Diagnosis:** Overdose, other toxin, poison or drug

Treatments

NULL (Insufficient data provided)

Vital Trends

NULL (Insufficient data provided)

Lab Trends

The provided data includes multiple lab results taken at different time points relative to unit admission. The earliest set of labs was drawn 215 minutes before unit admission (-215 minutes offset), while a second set was drawn 947 minutes after unit admission. Key observations include:

* **Sodium:** Remained relatively stable at approximately 142 mmol/L at both time points. * **Potassium:** Slightly increased from 3.5 mmol/L to 3.7 mmol/L. * **Anion Gap:** Decreased significantly from 18 mmol/L to 10 mmol/L. * **Creatinine:** Decreased from 1.02 mg/dL to 0.82 mg/dL, indicating potential improvement in renal function. * **BUN:** Increased slightly from 4 mg/dL to 7 mg/dL, possibly reflecting dehydration or other factors. * **Glucose:** Increased significantly from 76 mg/dL to 112 mg/dL. This warrants further investigation to rule out hyperglycemia. * **Hemoglobin (Hgb):** Decreased from 16.8 g/dL to 15.5 g/dL. This drop could indicate blood loss or other issues. * **Hematocrit (Hct):** Decreased from 50.1% to 47.5%. This is consistent with the decrease in Hgb. * **Other Labs:** Other lab values like albumin, total bilirubin, AST, ALT, alkaline phosphatase, calcium, platelets, WBC, MCV, MCH, MCHC, RDW, PT, INR were also recorded with varying values. However, without temporal information, trends cannot be established. * **Drug Levels:** Acetaminophen and salicylate levels were checked. Acetaminophen was below 2 mcg/mL, and salicylate levels were initially 2.0 mg/dL and later 2.5 mg/dL. This information requires further context to interpret fully. * **Lactate:** A lactate level of 2.6 mmol/L was recorded -183 minutes from unit admission. This suggests possible metabolic acidosis.

Microbiology Tests

NULL (Insufficient data provided)

Physical Examination Results

* **Physical Exam Performed:** A structured physical exam was performed. * **GCS Score:** 14 (Eyes: 4, Verbal: 4, Motor: 6) This indicates a relatively good neurological status. * **Admission Weight:** 91.8 kg * **Current Weight:** 91.9 kg * **Weight Change:** +0.1 kg

Further Notes: The report is significantly limited by the incomplete nature of the data. Additional information on the patient's history, treatments, vital signs, and temporal resolution of lab results would be necessary for a more complete and informative report. The provided data focuses primarily on a snapshot of lab values at two different time points and basic physical exam findings. A longitudinal view of the patient's condition is not possible with only this data.