

****Medical Report: Patient 006-100222****

****1. Patient Information****

* **Patient Unit Stay ID:** 618867 * **Unique Patient ID:** 006-100222 * **Gender:** Female * **Age:** 54 * **Ethnicity:** Hispanic * **Hospital Admission Time:** 2014, 20:10:00 * **Hospital Admission Source:** Emergency Department * **Hospital Discharge Time:** 2014, 23:16:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admission Time:** 21:53:00 * **Unit Admission Source:** Emergency Department * **Unit Discharge Time:** 10:50:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Admission Weight:** 95.5 kg * **Discharge Weight:** 95.5 kg * **Admission Height:** 165 cm * **Admission Diagnosis:** Sepsis, pulmonary

****2. History****

NULL (Insufficient information provided)

****3. Diagnoses****

The patient presented with multiple diagnoses during her ICU stay. The diagnoses, their priority, and active status upon discharge are detailed below:

* **Diagnosis 1:** pulmonary|respiratory failure|acute respiratory failure (ICD-9 code: 518.81, J96.00); Priority: Other; Active upon discharge: False. This diagnosis was recorded 11 minutes after unit admission. * **Diagnosis 2:** cardiovascular|shock / hypotension|sepsis (ICD-9 code: 038.9, A41.9); Priority: Other; Active upon discharge: False. This diagnosis was recorded 11 minutes after unit admission. * **Diagnosis 3:** cardiovascular|shock / hypotension|sepsis (ICD-9 code: 038.9, A41.9); Priority: Primary; Active upon discharge: True. This diagnosis was recorded 2213 minutes after unit admission. * **Diagnosis 4:** pulmonary|pulmonary infections|pneumonia (ICD-9 code: 486, J18.9); Priority: Major; Active upon discharge: False. This diagnosis was recorded 189 minutes after unit admission. * **Diagnosis 5:** pulmonary|respiratory failure|acute respiratory failure (ICD-9 code: 518.81, J96.00); Priority: Major; Active upon discharge: True. This diagnosis was recorded 2213 minutes after unit admission. * **Diagnosis 6:** cardiovascular|shock / hypotension|sepsis (ICD-9 code: 038.9, A41.9); Priority: Primary; Active upon discharge: False. This diagnosis was recorded 1554 minutes after unit admission. * **Diagnosis 7:** cardiovascular|shock / hypotension|sepsis (ICD-9 code: 038.9, A41.9); Priority: Primary; Active upon discharge: False. This diagnosis was recorded 189 minutes after unit admission. * **Diagnosis 8:** pulmonary|respiratory failure|acute respiratory failure (ICD-9 code: 518.81, J96.00); Priority: Major; Active upon discharge: False. This diagnosis was recorded 1554 minutes after unit admission. * **Diagnosis 9:** pulmonary|pulmonary infections|pneumonia (ICD-9 code: 486, J18.9); Priority: Other; Active upon discharge: False. This diagnosis was recorded 11 minutes after unit admission. * **Diagnosis 10:** pulmonary|pulmonary infections|pneumonia (ICD-9 code: 486, J18.9); Priority: Major; Active upon discharge: False. This diagnosis was recorded 1554 minutes after unit admission. * **Diagnosis 11:** pulmonary|respiratory failure|acute respiratory failure (ICD-9 code: 518.81, J96.00); Priority: Major; Active upon discharge: False. This diagnosis was recorded 189 minutes after unit admission. * **Diagnosis 12:** pulmonary|pulmonary infections|pneumonia (ICD-9 code: 486, J18.9); Priority: Major; Active upon discharge: True. This diagnosis was recorded 2213 minutes after unit admission.

The presence of both respiratory failure and sepsis, with sepsis being the primary diagnosis at discharge, suggests a complex clinical picture.

****4. Treatments****

The patient received the following treatments:

* **Treatment 1:** pulmonary|ventilation and oxygenation|mechanical ventilation; Active upon discharge: False. Initiated 189 minutes after unit admission. * **Treatment 2:** pulmonary|ventilation and oxygenation|mechanical ventilation; Active upon discharge: False. Initiated 11 minutes after unit admission. * **Treatment 3:** cardiovascular|arrhythmias|antiarrhythmics|class III antiarrhythmic|amiodarone; Active upon discharge: True. Initiated

2213 minutes after unit admission.

****5. Vital Trends****

NULL (Insufficient information provided)

****6. Lab Trends****

The provided lab data includes multiple chemistry, hematology, and blood gas results at various time points. A detailed analysis requires time-series visualization (see section 2).

****7. Microbiology Tests****

NULL (Insufficient information provided)

****8. Physical Examination Results****

A structured physical exam was performed. Key findings include:

* **Blood Pressure (Systolic):** 88 mmHg (current, lowest, and highest readings) * **Blood Pressure (Diastolic):** 55 mmHg (current, lowest, and highest readings) * **FiO2:** 50% * **PEEP:** 5 cm H2O * **Ventilator Rate:** 16 breaths/minute * **Weight (kg):** 95.5 kg (admission and current) * **Glasgow Coma Scale (GCS):** Scored as 1-1-5 (Eyes, Verbal, Motor, respectively). This indicates a severe neurological impairment.

The physical exam suggests the patient was intubated and on mechanical ventilation at the time of the exam, supporting the diagnosis of acute respiratory failure.