

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

Patient Unit Stay ID: 300141 Unique Patient ID: 003-13269 Gender: Male Age: 69 Ethnicity: Caucasian Hospital Admission Time: 2015-XX-XX 08:00:00 Hospital Admission Source: Emergency Department Hospital Discharge Time: 2015-XX-XX 22:15:00 Hospital Discharge Location: Home Hospital Discharge Status: Alive Unit Type: Med-Surg ICU Unit Admission Time: 2015-XX-XX 08:11:00 Unit Admission Source: Floor Unit Visit Number: 2 Unit Stay Type: readmit Admission Weight: 80.3 kg Admission Height: 175.3 cm Discharge Weight: NULL Unit Discharge Time: 2015-XX-XX 01:20:00 Unit Discharge Location: Floor Unit Discharge Status: Alive Admission Diagnosis: Sepsis, other

## **\*\*Medical History\*\***

NULL (Insufficient data provided)

## **\*\*Diagnoses\*\***

Primary Diagnosis: Sepsis, other

## **\*\*Treatments\*\***

NULL (Insufficient data provided)

## **\*\*Vital Trends\*\***

NULL (Insufficient data provided)

## **\*\*Lab Trends\*\***

The provided data includes several laboratory results from different time points during the patient's stay. The results include blood chemistry (anion gap, creatinine, potassium, sodium, chloride, bicarbonate, glucose, BUN, calcium), and hematology (hemoglobin (Hgb), hematocrit (Hct), mean corpuscular volume (MCV), mean corpuscular hemoglobin (MCH), mean corpuscular hemoglobin concentration (MCHC), red blood cell count (RBC), white blood cell count (WBC), platelets, differential blood counts including lymphocytes, monocytes, band cells, eosinophils, and polymorphonuclear cells). Specific trends cannot be definitively stated without knowing the exact timing of each lab draw relative to the patient's admission and the overall duration of the stay. However, some observations can be made based on the available data:

\* **Hemoglobin and Hematocrit:** Initial Hgb and Hct levels (around 9 g/dL and 27.3%, respectively) appear to be low, suggestive of anemia. Later values (around 9.7 g/dL and 30%) show a slight improvement. The significance of this change would depend on the temporal context. \* **White Blood Cell Count:** Initial WBC count is low (1.4 K/cmm), which is consistent with the patient's sepsis diagnosis. Later values (5.7 K/cmm and 2.1 K/cmm) still remain within a low range. \* **Platelets:** The platelet count shows fluctuation with initial values around 99 K/cmm and later values of 82 K/cmm and 76 K/cmm. This suggests a potential thrombocytopenia. \* **Creatinine:** Creatinine levels are elevated (2.4 mg/dL initially and 2.3 mg/dL later), indicating potential renal impairment. The clinical significance depends on the baseline creatinine level of the patient. \* **Electrolytes:** Electrolyte values are variable, but within generally acceptable ranges, although the anion gap is slightly elevated. The clinical significance of this would need further analysis.

## **\*\*Microbiology Tests\*\***

NULL (Insufficient data provided)

## **\*\*Physical Examination Results\*\***

NULL (Insufficient data provided)

