

****Medical Report for Patient 004-12627****

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

* **Patient Unit Stay ID:** 414364 * **Unique Patient ID:** 004-12627 * **Gender:** Male * **Age:** 40 * **Ethnicity:** NULL * **Hospital Admission Time:** 2015-XX-XX 02:07:00 * **Hospital Admission Source:** Emergency Department * **Hospital Discharge Time:** 2015-XX-XX 20:15:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admission Time:** 2015-XX-XX 02:43:00 * **Unit Admission Source:** Emergency Department * **Unit Discharge Time:** 2015-XX-XX 15:10:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Admission Weight:** 99.7 kg * **Admission Height:** 185 cm * **APACHE Admission Diagnosis:** Diabetic ketoacidosis

****2. History:****

The patient's medical history is not explicitly detailed in the provided data. Further information is needed to provide a complete history. The available data only indicates the patient was admitted from the Emergency Department with a primary diagnosis of Diabetic Ketoacidosis (DKA). The presence of acute renal failure and hypertension suggests pre-existing conditions that may have contributed to the DKA. More detailed information regarding the patient's past medical history, family history, social history, and presenting symptoms would be required for a comprehensive assessment.

****3. Diagnoses:****

The patient received multiple diagnoses during their ICU stay. These include:

* **Primary Diagnoses:** * Diabetic Ketoacidosis (DKA) (ICD-9 codes: 250.13, E10.1) * **Major Diagnoses:** * Acute Renal Failure (ICD-9 codes: 584.9, N17.9) * Diabetes Mellitus * Hypertension (ICD-9 codes: 401.9, I10)

The diagnoses of DKA and acute renal failure were active upon discharge, indicating the severity of the patient's condition. The timing of diagnosis entry (diagnosisoffset) shows that some diagnoses were made early in the ICU stay, while others were made later, suggesting a progression of the patient's illness.

****4. Treatments:****

The patient received a variety of treatments during their ICU stay. These included:

* **Renal/Electrolyte Correction:** Potassium administration, intravenous electrolyte administration. * **Endocrine/Glucose Metabolism:** Continuous insulin infusion. * **Cardiovascular/IV Fluids:** Fluid boluses of normal saline. * **Pulmonary:** Oxygen therapy via nasal cannula, chest x-ray.

The treatments administered suggest a multi-faceted approach to managing the patient's DKA, acute renal failure, and possibly other underlying conditions. The 'activeupondischarge' flag indicates which treatments were still ongoing at the time of discharge, offering insight into the ongoing management plan.

****5. Vital Trends:** NULL**

****6. Lab Trends:** NULL**

****7. Microbiology Tests:** NULL**

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

The physical examination was performed. The following data was recorded:

* **Weight (Admission):** 99.7 kg * **Heart Rate (Current):** 55 bpm * **Blood Pressure (Systolic, Current):** 96 mmHg *
Blood Pressure (Diastolic, Current): 47 mmHg * **Respiratory Rate (Current):** 18 breaths/min * **Oxygen Saturation
(Current):** 98% * **FiO2 (Current):** 21% * **Glasgow Coma Scale (GCS):** 15 (Eyes 4, Verbal 5, Motor 6)

The GCS score of 15 indicates a normal level of consciousness. The other vital signs suggest a relatively stable condition upon initial examination. More comprehensive lab and vital signs data would allow a more thorough assessment of the patient's physiological status over time.