

****Medical Report: Patient 007-10050****

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

* **Patient Unit Stay ID:** 976782 * **Patient Health System Stay ID:** 720081 * **Unique Patient ID:** 007-10050 *
Gender: Female * **Age:** 68 * **Ethnicity:** Caucasian * **Hospital ID:** 183 * **Ward ID:** 426 * **Unit Type:**
Neuro ICU * **Unit Admit Time:** 2015-XX-XX 18:40:00 (Assuming a date is available from other data not provided) *
Unit Admit Source: Other ICU * **Unit Discharge Time:** 2015-XX-XX 20:43:00 (Assuming a date is available from
other data not provided) * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:**
2015-XX-XX 17:47:00 (Assuming a date is available from other data not provided) * **Hospital Admit Source:** Floor *
Hospital Discharge Year: 2015 * **Hospital Discharge Time:** 2015-XX-XX 00:38:00 (Assuming a date is available
from other data not provided) * **Hospital Discharge Location:** Skilled Nursing Facility * **Hospital Discharge Status:**
Alive * **Admission Height (cm):** 170.2 * **Admission Weight (kg):** 96.88 * **Discharge Weight (kg):** 95.1 * **APACHE
Admission Dx:** Rhythm disturbance (atrial, supraventricular)

****2. History****

NULL (Insufficient information provided in the JSON to describe the patient's medical history.)

****3. Diagnoses****

The patient presented with multiple diagnoses upon admission to the Neuro ICU. These included:

* **Gastrointestinal/Abdominal Issues:** Nausea (ICD-9: 787.02, R11.0), Abdominal pain/tenderness (ICD-9: 789.00,
R10.9), Small bowel obstruction (ICD-9: 560.9, K56.60) * **Pulmonary Infection:** Aspiration pneumonia (ICD-9: 507.0,
J69.0) * **Cardiovascular Arrhythmia:** Atrial flutter (ICD-9: 427.32, I48.1)

All diagnoses were active upon discharge from the unit.

****4. Treatments****

The patient received a comprehensive range of treatments during their ICU stay, including:

* **Pulmonary:** Oxygen therapy (40-60%), Mechanical ventilation, Chest x-ray, Pulmonary/CCM consultation. *
Gastrointestinal: Exploratory laparoscopy, Antiemetic medications, Stress ulcer prophylaxis, Nasogastric tube
placement, CT scan, Gastroenterology consultation. * **Cardiovascular:** Diltiazem (Class IV antiarrhythmic), Normal
saline administration, Cardiology consultation. * **Endocrine:** Insulin administration for glucose control. * **Surgical:**
Analgesics and sedative agents.

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

NULL (No vital sign data provided in JSON.)

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

The provided lab data includes multiple chemistry and hematology tests performed at different time points during the patient's stay. Specific trends will require analysis of the time-series data. Initial labs (approximately 915 minutes post-unit admission) showed elevated liver enzymes (AST and ALT), along with other chemistry values. A subsequent set of labs (approximately 3825 minutes post-unit admission) show changes in these values. Additional lab values included BUN, creatinine, glucose, electrolytes, and complete blood counts (CBC) with differential, reflecting the multi-system nature of the patient's illness. More detailed analysis is required to fully interpret these trends.

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

NULL (No microbiology test data provided in JSON.)

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

The initial physical examination (approximately 19 minutes post-unit admission) recorded the following:

* **Heart Rate (HR):** 155 bpm (Current, Lowest, and Highest values were all 155 bpm, suggesting a consistent measurement) * **Blood Pressure (BP):** 119/78 mmHg (Current, Lowest, and Highest values were consistent) * **Respiratory Rate (RR):** 19 breaths/minute (Current, Lowest, and Highest values were consistent) * **Oxygen Saturation (O2 Sat):** 95% (Current, Lowest, and Highest values were consistent) * **Weight:** 96.88 kg (admission) and 96.89 kg (current), indicating a minimal weight change. * **Input/Output:** 700 ml urine output and 0 ml total intake, indicating a net negative fluid balance of 1400 ml. * **Glasgow Coma Scale (GCS):** 15 (scored 6, 5, 4 for motor, verbal, and eye responses, respectively). This suggests a normal level of consciousness.