

## **\*\*Patient Medical Report\*\***

### **\*\*1. Patient Information\*\***

\*\*\*Patient Unit Stay ID:\*\* 369237 \*\*\*Patient Health System Stay ID:\*\* 316739 \*\*\*Gender:\*\* Male \*\*\*Age:\*\* 44 \*  
\*\*Ethnicity:\*\* Asian \*\*\*Hospital ID:\*\* 112 \*\*\*Ward ID:\*\* 252 \*\*\*Admission Diagnosis:\*\* Sepsis, renal/UTI (including bladder) \*\*\*Admission Height:\*\* 175.2 cm \*\*\*Hospital Admit Time:\*\* 2015-XX-XX 17:33:00 \*\*\*Hospital Admit Source:\*\* Emergency Department \*\*\*Hospital Discharge Year:\*\* 2015 \*\*\*Hospital Discharge Time:\*\* 2015-XX-XX 17:30:00 \*  
\*\*\*Hospital Discharge Location:\*\* Other Hospital \*\*\*Hospital Discharge Status:\*\* Alive \*\*\*Unit Type:\*\* Med-Surg ICU \*  
\*\*\*Unit Admit Time:\*\* 2015-XX-XX 21:40:00 \*\*\*Unit Admit Source:\*\* Emergency Department \*\*\*Unit Visit Number:\*\* 1 \*  
\*\*\*Unit Stay Type:\*\* Admit \*\*\*Admission Weight:\*\* 108.8 kg \*\*\*Discharge Weight:\*\* NULL \*\*\*Unit Discharge Time:\*\* 2015-XX-XX 21:00:00 \*\*\*Unit Discharge Location:\*\* Floor \*\*\*Unit Discharge Status:\*\* Alive \*\*\*Unique Patient ID:\*\* 004-10342

### **\*\*2. History\*\***

NULL (Insufficient information provided)

### **\*\*3. Diagnoses\*\***

The patient presented with multiple diagnoses, reflecting the complexity of their condition. The primary diagnosis upon admission to the ICU was sepsis with multi-organ dysfunction (ICD-9 codes: 995.92, R65.20). Other major diagnoses included: lower urinary tract infection (ICD-9 codes: 595.9, N30.9), acute renal failure due to sepsis and nephrotoxic agents (aminoglycosides) (ICD-9 codes: 584.9, E930.8, N17.9), pressure sores (ICD-9 codes: 707.00, L89.90), complete quadriplegia (ICD-9 codes: 344.00, G82.50), metabolic encephalopathy (ICD-9 codes: 348.31, G93.41), and hypothyroidism (ICD-9 codes: 244.9, E03.9). Note that some diagnoses were active upon discharge, while others were not. The temporal relationship between diagnoses (indicated by `diagnosisoffset`) suggests a possible progression of the illness. More detailed clinical history is needed for a comprehensive understanding of the patient's condition.

### **\*\*4. Treatments\*\***

The patient received a wide range of treatments during their ICU stay. These included broad-spectrum antibiotics (vancomycin, ceftriaxone, tobramycin, linezolid), stress ulcer prophylaxis (omeprazole), laxatives (bisacodyl, docusate), and electrolyte correction (calcium and magnesium). They also received vasopressors (norepinephrine), oxygen therapy via nasal cannula, and VTE prophylaxis (compression stockings and boots). Consultations with nephrology and social work were also documented. The treatment plan highlights the multi-system involvement of the patient's illness. The `activeupondischarge` field indicates which treatments were ongoing at the time of unit discharge.

### **\*\*5. Vital Trends\*\***

NULL (Insufficient data. Vital signs would need to be included in the dataset.)

### **\*\*6. Lab Trends\*\***

Initial laboratory results showed the following:

\*\*\*Sodium:\*\* 144 mEq/L \* \*\*Albumin:\*\* 3.0 g/dL \* \*\*Glucose:\*\* 109 mg/dL \* \*\*Creatinine:\*\* 3.3 mg/dL \* \*\*BUN:\*\* 22 mg/dL \*  
\*\*\*Potassium:\*\* 4.8 mEq/L \* \*\*Hematocrit:\*\* 32.7 % \* \*\*White Blood Cell Count:\*\* 11.1 K/mcL \* \*\*Arterial Blood Gas (ABG):\*\* \* pH: 7.31 \* PaO2: 78.6 mm Hg \* PaCO2: 49.1 mm Hg \* FiO2: 28 % \* O2 Saturation: 98 % \* Respiratory Rate: 22 /min \* LPM O2: 2 L/min

These initial values reveal an acute kidney injury (elevated creatinine and BUN), potential dehydration, and respiratory acidosis (low pH, elevated PaCO2). The elevated WBC count is consistent with infection. More longitudinal data is

required to monitor these trends during the ICU stay.

#### **\*\*7. Microbiology Tests\*\***

NULL (Insufficient data. Culture results are required.)

#### **\*\*8. Physical Examination Results\*\***

The physical exam was performed. Initial vital signs recorded were: heart rate (71 bpm), systolic blood pressure (78 mmHg), diastolic blood pressure (49 mmHg), respiratory rate (11 breaths per minute), and oxygen saturation (98%). A Glasgow Coma Scale (GCS) score of 12 (Eyes 4, Verbal 4, Motor 4) was documented. The patient's weight at admission was 108.8kg. Further details on the physical exam are unavailable. Longitudinal data on these parameters is missing.