

****Medical Report: Patient 005-11202****

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

* **Patient Unit Stay ID:** 485952 * **Patient Health System Stay ID:** 411744 * **Unique Patient ID:** 005-11202 *
Gender: Female * **Age:** 21 years * **Ethnicity:** Hispanic * **Hospital ID:** 144 * **Ward ID:** 267 * **Unit Type:**
Med-Surg ICU * **Unit Admit Time:** 05:44:00 * **Unit Admit Source:** Emergency Department * **Unit Discharge Time:**
02:41:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:** 04:29:00 *
Hospital Admit Source: Emergency Department * **Hospital Discharge Year:** 2014 * **Hospital Discharge Time:**
14:39:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Admission Height:** 160 cm *
Admission Weight: 53.9 kg * **Discharge Weight:** NULL

****2. History****

Admission history indicates the patient presented to the Emergency Department with Diabetic Ketoacidosis (DKA), a primary diagnosis, and uncontrolled Type I diabetes mellitus (Major diagnosis). Asthma/bronchospasm was also noted as a major diagnosis. Further details regarding the presenting symptoms, duration of illness, and relevant family history are not available in this dataset.

****3. Diagnoses****

* **Primary Diagnosis:** Diabetic Ketoacidosis (DKA) (ICD-9 Codes: 250.13, E10.1) * **Major Diagnoses:** * Uncontrolled Type I Diabetes Mellitus (ICD-9 Codes: 250.03, E10.65) * Asthma/Bronchospasm (ICD-9 Codes: 493.90, J45)

****4. Treatments****

The patient received the following treatments during her ICU stay:

* **Pulmonary:** Albuterol (Proventil, Ventolin) (beta-agonist bronchodilator), Ipratropium * **Endocrine:** Continuous insulin infusion, Potassium electrolyte correction, Normal saline administration * **Cardiovascular:** Labetalol (vasodilating agent - IV), Enoxaparin (low molecular weight heparin for VTE prophylaxis) * **Gastrointestinal:** Laxatives, Pantoprazole (stress ulcer prophylaxis)

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

NULL. This section requires time-series data on vital signs (heart rate, blood pressure, respiratory rate, oxygen saturation, etc.) which is not provided in the dataset.

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

The following laboratory results are available. Detailed trends require a time-series representation (see visualization section):

* **Hematology:** MPV, RBC, Hct, MCV, MCH, MCHC, platelets x 1000, WBC x 1000, RDW, -monos, -bands, -polys, -lymphs. Note that multiple measurements were taken over time for some of these parameters (e.g. glucose, bedside glucose). These values show fluctuations that need further analysis. * **Chemistry:** BUN, glucose, creatinine, phosphate, magnesium, chloride, anion gap, total bilirubin, direct bilirubin, total protein, albumin, ALT (SGPT), AST (SGOT), amylase, lipase, potassium, sodium, salicylate. * **Arterial Blood Gas (ABG):** paO2, pH, paCO2, FiO2, O2 Sat (%), Base Excess. ABG values were recorded at one point. * **Other:** Urinary specific gravity, WBC's in urine.

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

NULL. No microbiology test results are included in this dataset.

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

* **Glasgow Coma Scale (GCS):** Scored as 15 (Eyes: 4, Verbal: 5, Motor: 6) * **Heart Rate (HR):** Current, Lowest, and Highest HR readings were all 93. * **Blood Pressure (BP):** Current, Lowest, and Highest systolic BP readings were all 95 mmHg. Current, Lowest, and Highest diastolic BP readings were all 51 mmHg. * **Respiratory Rate:** Current respiratory rate was 14 breaths per minute; lowest recorded was 14 breaths per minute; highest was 16 breaths per minute. * **Oxygen Saturation (O2 Sat%):** Current O2 Sat was 99%; lowest was 98%; highest was 99%. * **Weight (kg):** Admission weight was 53.9kg. This data was recorded as part of the physical exam and is also included in the patient demographics. A structured physical exam was performed.