

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

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

\*\*\*Patient Unit Stay ID:\*\* 257802 \*\*\*Unique Patient ID:\*\* 003-10264 \*\*\*Gender:\*\* Male \*\*\*Age:\*\* 70 \*\*\*Ethnicity:\*\* Caucasian \*\*\*Hospital ID:\*\* 79 \*\*\*Ward ID:\*\* 133 \*\*\*Unit Type:\*\* Med-Surg ICU \*\*\*Unit Admit Time:\*\* 2014-XX-XX 15:25:00 (Assuming a date is available elsewhere, this is not provided in the JSON) \*\*\*Unit Admit Source:\*\* Operating Room \*\*\*Unit Discharge Time:\*\* 2014-XX-XX 18:00:00 (Assuming a date is available elsewhere, this is not provided in the JSON) \*\*\*Unit Discharge Location:\*\* Floor \*\*\*Unit Discharge Status:\*\* Alive \*\*\*Hospital Admit Time:\*\* 2014-XX-XX 10:28:00 (Assuming a date is available elsewhere, this is not provided in the JSON) (Note: Offset indicates admit to the hospital was before ICU admit) \*\*\*Hospital Admit Source:\*\* Operating Room \*\*\*Hospital Discharge Time:\*\* 2014-XX-XX 17:30:00 (Assuming a date is available elsewhere, this is not provided in the JSON) \*\*\*Hospital Discharge Location:\*\* Home \*\*\*Hospital Discharge Status:\*\* Alive \*\*\*Admission Weight:\*\* 73.5 kg \*\*\*Discharge Weight:\*\* 73.8 kg \*\*\*Admission Height:\*\* 180.3 cm (Assuming cm is the unit) \*\*\*APACHE Admission Diagnosis:\*\* Transphenoidal surgery

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

NULL (Insufficient information provided in the JSON to generate a detailed patient history. The provided data only includes diagnoses and treatments, not the narrative history leading to admission.)

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

The patient presented with multiple diagnoses, some active upon discharge and others not. The primary diagnosis was post-head and neck cancer surgery. Major diagnoses included hypopituitarism due to a CNS tumor, hypothyroidism (possibly related to pituitary issues), and mild pain/altered mental status. Other diagnoses included hypertension. Specific ICD-9 codes were provided for some but not all diagnoses. Note that some diagnoses were recorded multiple times, possibly indicating ongoing assessment and revisions.

\*\*\*Primary Diagnosis:\*\* s/p head and neck cancer surgery \*\*\*Major Diagnoses:\*\* \* Hypopituitarism due to CNS tumor (ICD-9: 253.2, E23.0) \* Hypothyroidism (pituitary related) (ICD-9: 244.8, E03.8) \* Mild pain/altered mental status \*\*\*Other Diagnosis:\*\* Hypertension (ICD-9: 401.9, I10)

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

The patient received a variety of treatments during their ICU stay. Active treatments at discharge included bolus parenteral analgesics, nicardipine (antihypertensive), chest x-ray, normal saline administration, ondansetron (antiemetic), parenteral glucocorticoid administration, and compression stockings. Several other treatments were administered but were not active upon discharge. These included cefazolin (antibiotic), narcotic analgesics, and hydralazine (antihypertensive).

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

NULL (Vital signs data is not provided in the JSON dataset)

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

The provided lab data includes multiple blood tests over time (though specific dates/times are not explicitly shown, relative times are available via 'labresultoffset'). These include hematologic tests (e.g., complete blood count with differential, including WBC, RBC, Hgb, Hct, MCV, MCH, MCHC, platelets, PT, PTT, INR, RDW), and chemistry tests (glucose, BUN, creatinine, sodium, potassium, chloride, bicarbonate, anion gap). Additionally, there are arterial blood gas (ABG) related measurements (FiO2 and LPM O2) and urine tests (urinary sodium, urinary osmolality, urinary specific gravity). The lab data shows some electrolyte imbalances and variations in renal function markers, necessitating further analysis to identify trends and significance. Some values appear to be taken pre-admission and others during the ICU stay, which is useful for evaluating changes.

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

NULL (No microbiology test results are included in the JSON data.)

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

The physical exam was performed, documented as "Performed - Structured." Initial vital signs included a heart rate (HR) between 61 and 72 bpm, a respiratory rate (RR) between 11 and 19 breaths/min, blood pressure (BP) between 139/61 and 158/69 mmHg, and an O2 saturation (O2 Sat) of 96-100%. The patient's Glasgow Coma Scale (GCS) was documented as 13 (3+4+6), indicating mild impairment in consciousness. The patient was somnolent but displayed calm and appropriate affect. The patient's orientation was partially oriented. The admission weight was recorded as 73.5 kg.