

****Patient Information Report****

****1. Patient Info:****

* **Patient Unit Stay ID:** 757202 * **Unique Patient ID:** 006-100970 * **Patient Health System Stay ID:** 584668 *
Gender: Male * **Age:** > 89 * **Ethnicity:** Caucasian * **Hospital ID:** 148 * **Ward ID:** 347 * **Admission
Diagnosis (APACHE):** NULL * **Admission Height (cm):** 170 * **Hospital Admit Time:** 18:34:00 * **Hospital Admit
Offset (minutes from unit admit):** -3013 * **Hospital Admit Source:** Emergency Department * **Hospital Discharge
Year:** 2014 * **Hospital Discharge Time:** 19:13:00 * **Hospital Discharge Offset (minutes from unit admit):** 2786 *
Hospital Discharge Location: Home * **Hospital Discharge Status:** Alive * **Unit Type:** MICU * **Unit Admit Time:**
20:47:00 * **Unit Admit Source:** ICU to SDU * **Unit Visit Number:** 2 * **Unit Stay Type:** stepdown/other *
Admission Weight (kg): NULL * **Discharge Weight (kg):** 91.2 * **Unit Discharge Time:** 05:29:00 * **Unit Discharge
Offset (minutes from unit admit):** 522 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive

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

NULL (Insufficient data provided)

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

NULL (Insufficient data provided)

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

NULL (Insufficient data provided)

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

NULL (Insufficient data provided)

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

The provided data includes multiple laboratory tests conducted at different time points during the patient's ICU stay. The tests include complete blood count (CBC) with differential, basic metabolic panel (BMP), and other relevant chemistries. Specific values are available for Hemoglobin (Hgb), Hematocrit (Hct), Red Blood Cell count (RBC), White Blood Cell count (WBC), Platelets, Mean Platelet Volume (MPV), Mean Corpuscular Volume (MCV), Mean Corpuscular Hemoglobin Concentration (MCHC), Mean Corpuscular Hemoglobin (MCH), Red cell distribution width (RDW), Sodium, Potassium, Chloride, Bicarbonate, Anion gap, BUN, Creatinine, Calcium, Glucose, and bedside glucose. Note that some values are repeated at different time points, allowing for trend analysis. There is no information on the exact timing of blood draws beyond their offset from unit admission. A more comprehensive timeline is needed for accurate trend analysis. Further analysis reveals a possible trend of slightly decreased sodium and increased glucose levels from the initial to the later blood draw times. The platelet counts also appear to have increased from 165 to 167 K/mcL. More data points across a wider time window are needed to verify these trends. Detailed analysis would require longitudinal data with precise timestamps for each lab result.

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

NULL (Insufficient data provided)

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

NULL (Insufficient data provided)

****Note:**** This report is based solely on the provided data. Additional information is required for a complete and comprehensive medical history. Specifically, a timeline of events (including treatments and vital signs), along with detailed diagnostic information, is crucial for a thorough assessment.