

****Patient Medical Report****

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

* **Patient Unit Stay ID:** 257287 * **Unique Patient ID:** 003-10552 * **Gender:** Male * **Age:** 70 * **Ethnicity:** Caucasian * **Hospital Admission Time:** 2014-10-26 22:20:00 * **Hospital Admission Source:** Emergency Department * **Hospital Discharge Time:** 2014-10-27 17:45:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admission Time:** 2014-10-26 22:37:00 * **Unit Admission Source:** Emergency Department * **Unit Discharge Time:** 2014-10-27 19:42:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Admission Weight:** 99.79 kg * **Discharge Weight:** 103.46 kg * **Admission Height:** 175.26 cm * **APACHE Admission Diagnosis:** Angina, unstable (angina interferes w/quality of life or meds are tolerated poorly)

****2. History****

NULL (Insufficient data provided)

****3. Diagnoses****

The patient presented with multiple diagnoses during their ICU stay. The primary diagnosis upon admission was GI bleeding/PUD (ICD-9 codes: 578.9, K92.2). Major diagnoses included chest pain/ASHD (ICD-9 codes: 786.50, R07.9) and acute blood loss anemia (ICD-9 codes: 285.1, D62). The diagnoses of acute blood loss anemia and chest pain/ASHD remained active upon discharge from the unit.

* **Diagnosis 1 (Primary):** gastrointestinal|GI bleeding / PUD|GI bleeding (578.9, K92.2) - Entered at 66 minutes, 342 minutes, and 1481 minutes post unit admission. * **Diagnosis 2 (Major):** cardiovascular|chest pain / ASHD|chest pain (786.50, R07.9) - Entered at 66 minutes, 342 minutes, and 1481 minutes post unit admission. Active upon discharge. * **Diagnosis 3 (Major):** hematology|bleeding and red blood cell disorders|anemia|acute blood loss anemia (285.1, D62) - Entered at 66 minutes, 342 minutes, and 1481 minutes post unit admission. Active upon discharge.

****4. Treatments****

The patient received various treatments during their ICU stay. These included medications (ondansetron, simvastatin, lisinopril, amitriptyline, pantoprazole), intravenous fluid administration, blood product administration (packed red blood cells, fresh frozen plasma), and consultations (Cardiology, Surgery). Ondansetron, simvastatin, pantoprazole, and compression stockings were still active upon discharge.

* **Treatment 1:** pulmonary|vascular disorders|VTE prophylaxis|compression stockings (Multiple entries) * **Treatment 2:** cardiovascular|myocardial ischemia / infarction|ACE inhibitor|lisinopril (Multiple entries) * **Treatment 3:** gastrointestinal|medications|antiemetic|serotonin antagonist|ondansetron (Active upon discharge) * **Treatment 4:** gastrointestinal|medications|stress ulcer prophylaxis (Multiple entries) * **Treatment 5:** cardiovascular|myocardial ischemia / infarction|antihyperlipidemic agent|HMG-CoA reductase inhibitor|simvastatin (Active upon discharge) * **Treatment 6:** neurologic|pain / agitation / altered mentation|antidepressant|amitriptyline (Multiple entries, Active upon discharge) * **Treatment 7:** cardiovascular|myocardial ischemia / infarction|nitroglycerin (Active upon discharge) * **Treatment 8:** gastrointestinal|intravenous fluid administration|blood product administration|packed red blood cells (Multiple entries, Active upon discharge) * **Treatment 9:** gastrointestinal|intravenous fluid administration|blood product administration|fresh frozen plasma (Multiple entries) * **Treatment 10:** gastrointestinal|medications|stress ulcer treatment|pantoprazole (Multiple entries, Active upon discharge) * **Treatment 11:** renal|intravenous fluid|normal saline administration (Active upon discharge) * **Treatment 12:** gastrointestinal|consultations|Surgery consultation (Active upon discharge) * **Treatment 13:** cardiovascular|consultations|Cardiology consultation (Active upon discharge) * **Treatment 14:** cardiovascular|shock|blood product administration|packed red blood cells (Active upon discharge)

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

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

The patient underwent multiple blood tests during their ICU stay. Hemoglobin (Hgb) levels initially measured 7.0 g/dL and 8.1 g/dL, decreased to 8.7 g/dL at 934 minutes, and subsequently increased to 10.1 g/dL and 10.5 g/dL. Hematocrit (Hct) levels followed a similar trend, starting at 23.9% and 26.5%, decreasing to 31.8%, then rising to 33.4% and 33.8%. Platelet counts showed fluctuation, initially around 337 and 392 K/mcL, then dropping to 294 K/mcL, and finally recovering to 289 K/mcL and 312 K/mcL. White blood cell (WBC) counts were relatively stable, ranging from 6.5 K/mcL to 8.2 K/mcL. The PT-INR values indicated a coagulation abnormality, initially around 2.4 ratio, rising to 1.8 ratio before recovering to values of 1.0 ratio and 1.1 ratio. The PT values showed some fluctuation as well, starting at 25.3 sec, increasing to 20.8 sec, then decreasing to 13.5 sec and 14.2 sec. PTT was initially 38.8 sec. Other chemistry values including glucose, BUN, creatinine, calcium, chloride, sodium, and anion gap were also measured and showed some variations.

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

NULL (Insufficient data provided)

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

Physical exams were performed at 26 minutes and 52 minutes post-admission. Initial vital signs included a heart rate (HR) of 84 bpm, a systolic blood pressure (BP) of 121 mmHg, a diastolic BP of 75 mmHg, and a respiratory rate of 17 breaths per minute. Oxygen saturation (O2 Sat) was 99%. A later exam, at 52 minutes, showed an HR ranging from 84-88 bpm, systolic BP 122-137 mmHg, diastolic BP 68-73 mmHg, and respiratory rate 17-18 breaths per minute. O2 Sat was 99-100%. The Glasgow Coma Scale (GCS) score at 52 minutes was 15 (Eyes 4, Verbal 5, Motor 6). Weight was 99.79 kg on admission and 99.8 kg during the stay. A physical exam was not performed at 1479 minutes and 337 minutes.