Medical Report: Patient 006-102786

1. Patient Information

* **Patient Unit Stay ID:** 893771 * **Unique Patient ID:** 006-102786 * **Gender:** Male * **Age:** 66 * **Ethnicity:** Caucasian * **Hospital Admission Time:** 2014-XX-XX 12:52:00 (Hospital Admit Offset: -303 minutes from unit admit) * **Hospital Admission Source:** Floor * **Hospital Discharge Time:** 2014-XX-XX 22:45:00 (Hospital Discharge Offset: 6050 minutes from unit admit) * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admission Time:** 2014-XX-XX 17:55:00 * **Unit Admission Source:** Floor * **Unit Visit Number:** 1 * **Unit Stay Type:** stepdown/other * **Admission Weight:** 82.9 kg * **Discharge Weight:** 85.4 kg * **Unit Discharge Time:** 2014-XX-XX 22:45:00 (Unit Discharge Offset: 6050 minutes from unit admit) * **Unit Discharge Location:** Home * **Unit Discharge Status:** Alive * **Admission Height:** 178 cm

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 lab data shows multiple blood tests performed at various time points during the patient's stay. The data includes both chemistry and hematology panels. Several key trends are observable:

* **Creatinine:** Creatinine levels show some fluctuation. Initial values were elevated (0.66 mg/dL and 0.72 mg/dL) but decreased to 0.48 mg/dL at later time points, indicating potential improvement in renal function. Further monitoring is warranted. * **Glucose:** Glucose levels are significantly elevated throughout the stay, ranging from 92 mg/dL initially to as high as 197 mg/dL. This suggests potential hyperglycemia, which requires further investigation and management to prevent complications. * **Albumin:** Albumin levels are consistently low (2.7 g/dL, 2.4 g/dL, 2.3 g/dL, and 2.2 g/dL) throughout the patient’s stay, indicative of hypoalbuminemia. This could be due to various factors, including liver dysfunction or malnutrition and warrants further investigation. * **Total Bilirubin:** Total bilirubin values are slightly elevated at various time points (0.4 mg/dL, 0.3 mg/dL, and 0.5 mg/dL), suggesting possible mild liver involvement. This needs further assessment to determine the cause. * **Hematology:** Hemoglobin, hematocrit, MCV, MCH, and MCHC values are within the normal range at later timepoints, after initial low values. White blood cell counts remain relatively stable, while platelet counts are consistently within the normal range. These parameters provide indicators of the patient's overall blood health. * **Electrolytes:** Potassium, Sodium, Chloride, and Bicarbonate levels show some variability across the measurement time points, but mostly stay within acceptable ranges. Close monitoring of electrolyte balance is essential in critically ill patients. The anion gap also shows some fluctuation, suggesting metabolic changes.

7. Microbiology Tests

NULL (Insufficient data provided)

8. Physical Examination Results

The physical exam is noted as "Not Performed" in the available data.