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**Patient Information**
* **Patient ID:** 007-10353 * **Patient Unit Stay ID:** 963942 * **Gender:** Female * **Age:** > 89 * **Ethnicity:**
Caucasian * **Hospital ID:** 182 * **Ward ID:** 424 * **Unit Type:** Med-Surg ICU * **Unit Admit Time:** 2015-XX-XX
14:29:00 (Exact date missing from data) * **Unit Admit Source:** ICU to SDU * **Unit Discharge Time:** 2015-XX-XX
23:44:00 (Exact date missing from data) * **Unit Discharge Location:** Telemetry * **Unit Discharge Status:** Alive *
**Admission Weight:** 68.03 kg * **Discharge Weight:** 67.19 kg * **Admission Height:** 154.9 cm
**Medical History**
NULL (Insufficient data provided)
**Diagnoses**
NULL (Insufficient data provided. The 'apacheadmissiondx' field is empty.)
**Treatments**
NULL (Insufficient data provided)
**Vital Trends**
NULL (Insufficient data provided. No vital signs data was included.)
**Lab Trends**
The following laboratory test results were recorded during the patient's stay:
* **Glucose (mg/dL):** Multiple measurements over time show fluctuating glucose levels. The highest value recorded was
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- 254 mg/dL, and the lowest was 136 mg/dL. There appears to be a trend of elevated glucose, requiring further investigation into potential causes and management.
- * **Potassium (mmol/L):** Levels remained relatively stable at around 3.3 mmol/L on two separate occasions.
- * **Calcium (mg/dL):** Showed elevated levels, 8.9 mg/dL and 9.4 mg/dL, indicating potential hypercalcemia. Further investigation is needed to determine the cause and clinical significance of these values.
- * **Creatinine (mg/dL):** 1.6 mg/dL on two separate occasions, suggesting potential renal impairment. This warrants further assessment and monitoring.
- * **Sodium (mmol/L):** Showed a value of 142 mmol/L at one time point and 139 mmol/L at another, indicating some fluctuation. These values are within the normal range.
- * **Chloride (mmol/L):** Values of 106 mmol/L and 104 mmol/L were observed, within the normal range. However, the context within the patient's overall clinical picture must be considered.
- * **Bicarbonate (mmol/L):** Levels were 24 mmol/L and 25 mmol/L, indicating normal values.
- * **BUN (mg/dL):** Values of 57 mg/dL and 53 mg/dL indicate elevated levels, potentially suggesting renal dysfunction. This needs to be investigated further.

- * **Anion Gap:** Values were 12 and 10, which should be interpreted in the context of other electrolyte values and the patient's clinical picture. Further investigation is needed to assess the significance.
- * **Hematology:** Complete blood count (CBC) results including Hemoglobin (Hgb), Hematocrit (Hct), RBC, WBC, Platelets, MCV, MCH, MCHC, RDW, lymphocytes, monocytes, eosinophils, basophils, and polys, were obtained. These values should be examined together to assess the overall hematologic status of the patient. Specific values are provided in the CSV data below.

Microbiology Tests

NULL (Insufficient data provided)

Physical Examination Results

NULL (Insufficient data provided)