Patient Information

Patient ID: 002-10949 Patient Unit Stay ID: 225207 Gender: Female Age: > 89 Ethnicity: Caucasian Hospital Admission Time: 2014-XX-XX 19:30:00 Hospital Admission Source: Emergency Department Hospital Discharge Time: 2014-XX-XX 18:57:00 Hospital Discharge Location: Nursing Home Hospital Discharge Status: Alive Unit Type: Med-Surg ICU Unit Admission Time: 2014-XX-XX 14:39:00 Unit Admission Source: ICU to SDU Unit Discharge Time: 2014-XX-XX 16:35:00 Unit Discharge Location: Floor Unit Discharge Status: Alive Admission Height (cm): 152.4 Admission Weight (kg): NULL Discharge Weight (kg): NULL

Medical History

NULL (Insufficient data provided)

Diagnoses

NULL (Insufficient data provided)

Treatments

NULL (Insufficient data provided)

Vital Trends

NULL (Insufficient data provided)

Lab Trends

The provided data includes multiple lab results for the patient, taken at two different time points: approximately 1281 minutes and 2691 minutes after unit admission. The lab results show several trends that warrant further investigation:

* **Hemoglobin (Hgb):** The patient's hemoglobin levels dropped from 9.0 g/dL to 9.3 g/dL between the two time points. While this change is relatively small, it's important to consider within the context of other lab values and the patient's overall clinical picture. Anemia warrants further investigation. * **Red Blood Cell Count (RBC):** Similarly, RBC count shows a slight increase from 2.82 M/mcL to 2.95 M/mcL. This modest increase should be analyzed in conjunction with the Hgb and Hct levels to determine the cause of the changes. * **Hematocrit (Hct):** The hematocrit decreased from 26.6% to 28.4% between the two time points. This suggests a possible response to treatment or a natural fluctuation. * **White Blood Cell Count (WBC):** WBC count increased from 11.6 K/mcL to 11.1 K/mcL. This minor decrease may not be clinically significant without additional context. * **Platelets:** Platelet counts increased slightly from 508 K/mcL to 551 K/mcL. This might be due to underlying conditions or treatment response. * **Mean Corpuscular Volume (MCV):** MCV increased slightly from 94.3 fL to 96.3 fL. This small increase, along with other hematological parameters, might indicate a macrocytic anemia. * **Red Cell Distribution Width (RDW):** RDW increased from 14.9% to 15.5%, suggesting an increase in the variation of red blood cell size. This, together with other hematological markers, could indicate anemia with variable red cell size. * **Chemistry Panel:** A chemistry panel was also conducted including glucose, anion gap, BUN, creatinine, total protein, albumin, ALT, AST, alkaline phosphatase, total bilirubin, calcium, sodium, potassium, and chloride. These results will need further investigation to determine any abnormalities and implications for the patient's overall health. * **Differential:** A differential white blood cell count was performed which showed increased neutrophils (-monos), decreased lymphocytes (-lymphs), and slight increase in eosinophils (-eos) and basophils (-basos). This warrants further investigation to determine if there is an infection or inflammatory process.

It is crucial to note that these interpretations are preliminary and require a complete clinical assessment. Further information on the patient's medical history, physical examination, and other diagnostic tests is needed for a comprehensive evaluation.

Microbiology Tests

NULL (Insufficient data provided)

Physical Examination Results

NULL (Insufficient data provided)