

## **\*\*Medical Report: Patient 006-10037\*\***

### **\*\*1. Patient Information\*\***

**\*\*Patient Unit Stay ID:\*\* 906947** **\*\*Unique Patient ID:\*\* 006-10037** **\*\*Gender:\*\* Female** **\*\*Age:\*\* 61** **\*\*Ethnicity:\*\* Caucasian** **\*\*Hospital ID:\*\* 176** **\*\*Ward ID:\*\* 376** **\*\*Unit Type:\*\* Med-Surg ICU** **\*\*Unit Admit Time:\*\* 2014-XX-XX 06:24:00 (Assuming a date is available but missing from the data)** **\*\*Unit Admit Source:\*\* Floor** **\*\*Unit Discharge Time:\*\* 2014-XX-XX 20:07:00 (Assuming a date is available but missing from the data)** **\*\*Unit Discharge Location:\*\* Step-Down Unit (SDU)** **\*\*Unit Discharge Status:\*\* Alive** **\*\*Hospital Admit Time:\*\* 2014-XX-XX 23:30:00 (Assuming a date is available but missing from the data)** **\*\*Hospital Admit Source:\*\* Floor** **\*\*Hospital Discharge Year:\*\* 2014** **\*\*Hospital Discharge Time:\*\* 2014-XX-XX 23:45:00 (Assuming a date is available but missing from the data)** **\*\*Hospital Discharge Location:\*\* Home** **\*\*Hospital Discharge Status:\*\* Alive** **\*\*Admission Weight:\*\* 72 kg** **\*\*Discharge Weight:\*\* 67 kg** **\*\*Admission Height:\*\* 171 cm** **\*\*Admission Diagnosis:\*\* Acid-base/electrolyte disturbance**

### **\*\*2. History\*\***

NULL (Insufficient information provided in the JSON data to elaborate on the patient's medical history before ICU admission.)

### **\*\*3. Diagnoses\*\***

**\*\*Diagnosis ID:\*\* 11175836** **\*\*Patient Unit Stay ID:\*\* 906947** **\*\*Active Upon Discharge:\*\* True** **\*\*Diagnosis Offset (minutes from unit admit):\*\* 56** **\*\*Diagnosis String:\*\* endocrine|fluids and electrolytes|hyponatremia** **\*\*ICD-9 Code:\*\* 276.1, E87.1** **\*\*Diagnosis Priority:\*\* Primary**

The primary diagnosis upon ICU admission was hyponatremia (low sodium levels in the blood), a fluid and electrolyte imbalance within the endocrine system. The ICD-9 codes suggest a more detailed underlying condition, but further information is needed for complete interpretation.

### **\*\*4. Treatments\*\***

**\*\*Treatment ID:\*\* 25653616** **\*\*Patient Unit Stay ID:\*\* 906947** **\*\*Treatment Offset (minutes from unit admit):\*\* 56** **\*\*Treatment String:\*\* cardiovascular|shock|vasopressors|norepinephrine > 0.1 micrograms/kg/min** **\*\*Active Upon Discharge:\*\* True**

The patient received norepinephrine, a vasopressor, to manage shock. The dosage indicates a significant level of cardiovascular compromise requiring intervention. The treatment was ongoing at the time of discharge from the ICU.

### **\*\*5. Vital Trends\*\***

NULL (No vital sign data is included in the provided JSON.)

### **\*\*6. Lab Trends\*\***

The provided lab data shows multiple blood chemistry tests performed at various times during the patient's stay. These include repeated measurements of sodium, potassium, chloride, bicarbonate, BUN (blood urea nitrogen), creatinine, glucose, albumin, total protein, and also complete blood count (CBC) components like RBC, Hct, Hgb, MCV, MCH, MCHC, Platelets, WBC, MPV, and differential counts (lymphocytes, polys, monos, basos, eos). Analysis requires plotting these values over time to observe trends and identify potential correlations with the diagnoses and treatments.

### **\*\*7. Microbiology Tests\*\***

NULL (No microbiology test results are provided in the JSON data.)

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

\* \*\*Physical Exam ID:\*\* 26896239 \* \*\*Patient Unit Stay ID:\*\* 906947 \* \*\*Physical Exam Offset (minutes from unit admit):\*\* 50 \* \*\*Physical Exam Path:\*\* notes/Progress Notes/Physical Exam/Physical Exam Obtain Options/Not Performed \*  
\*\*Physical Exam Value:\*\* Not Performed \* \*\*Physical Exam Text:\*\* Not Performed

A formal physical exam was not performed or documented at the time of this report. This lack of documentation hinders a complete assessment of the patient's condition.