

****Medical Report: Patient 002-10263****

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

* **Patient Unit Stay ID:** 230150 * **Patient Health System Stay ID:** 198025 * **Unique Patient ID:** 002-10263 *
Gender: Male * **Age:** 78 * **Ethnicity:** Caucasian * **Hospital ID:** 56 * **Ward ID:** 82 * **Unit Type:** Med-Surg
ICU * **Unit Admit Time:** 2014-XX-XX 14:31:00 (Assuming a date is available but missing from the data) * **Unit Admit
Source:** Emergency Department * **Unit Discharge Time:** 2014-XX-XX 15:35:00 (Assuming a date is available but
missing from the data) * **Unit Discharge Location:** Other Hospital * **Unit Discharge Status:** Alive * **Hospital Admit
Time:** 2014-XX-XX 06:08:00 (Assuming a date is available but missing from the data) * **Hospital Admit Source:**
Emergency Department * **Hospital Discharge Year:** 2014 * **Hospital Discharge Time:** 2014-XX-XX 16:15:00
(Assuming a date is available but missing from the data) * **Hospital Discharge Location:** Other Hospital * **Hospital
Discharge Status:** Alive * **Admission Weight:** NULL * **Discharge Weight:** 76.6 kg * **Admission Diagnosis:**
Bleeding, lower GI

****2. History****

NULL (Insufficient data provided to elaborate on the patient's medical history beyond the admission diagnosis.)

****3. Diagnoses****

* **Cardiovascular Shock/Hypotension:** ICD-9 codes 458.9, I95.9 (Other priority) * **Gastrointestinal GI Bleeding/PUD:**
ICD-9 codes 578.9, K92.2 (Other priority) * **Cardiovascular Chest Pain/ASHD/Coronary Artery Disease (Known):** ICD-9
codes 414.00, I25.10 (Other priority)

****4. Treatments****

NULL (No treatment information is available in the provided data.)

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

NULL (No vital sign data is provided.)

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

The provided lab data shows multiple chemistry and hematology tests performed at different times. There are two sets of results, one approximately 2046 minutes before unit admission and another around 5 minutes after unit admission. A detailed analysis would require plotting these values against time to observe trends. Key lab values include:

* **Electrolytes:** Sodium, Potassium, Chloride, Bicarbonate * **Renal Function:** BUN, Creatinine * **Liver Function:**
AST (SGOT), ALT (SGPT), Total Bilirubin, Albumin, Alkaline Phosphatase * **Hematology:** Hemoglobin, Hematocrit,
Platelets, White Blood Cell count, Differential (lymphocytes, monocytes, polys, bands, basos), MCV, MCH, MCHC, RDW

Significant variations between the initial and subsequent lab results suggest a dynamic clinical picture. For instance, elevated BUN and creatinine levels initially indicate possible renal compromise, while the later results show changes in several parameters. Further investigation is needed to determine the significance of these changes. These changes could be due to treatment, fluid balance, or underlying disease processes.

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

NULL (No microbiology test results are provided.)

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

* **Physical Exam Performed:** Yes, a structured physical exam was performed. * **Glasgow Coma Scale (GCS):**
Scored as 15 (Eyes: 4, Verbal: 5, Motor: 6) * **Blood Pressure (Systolic):** 92 mmHg (Current, Highest, Lowest all
reported the same, which might indicate an error or only one reading) * **Blood Pressure (Diastolic):** 57 mmHg (Current,
Highest, Lowest all reported the same, which might indicate an error or only one reading) * **Weight:** 76.6 kg * **Intake:**
2630 ml * **Output:** 1075 ml * **Total Net I&O:** +1555 ml (this is the difference between intake and output)

The GCS score of 15 suggests normal neurological function. The blood pressure readings need clarification. The fluid balance shows a positive net fluid balance, suggesting possible fluid overload.

This report is based on limited data. A comprehensive assessment requires additional information, including a complete medical history, details of treatments administered, and trends in vital signs over the entire ICU stay. Further interpretation of lab values should be done within the context of the overall clinical picture.