

**\*\*Medical Report: Patient 004-12627\*\***

**\*\*1. Patient Information:\*\***

\* \*\*Patient Unit Stay ID:\*\* 326251 \* \*\*Unique Patient ID:\*\* 004-12627 \* \*\*Gender:\*\* Male \* \*\*Age:\*\* 40 \* \*\*Ethnicity:\*\* Caucasian \* \*\*Hospital Admission Time:\*\* 2015, 18:46:00 \* \*\*Hospital Admission Source:\*\* Emergency Department \* \*\*Hospital Discharge Time:\*\* 2015, 20:03:00 \* \*\*Hospital Discharge Location:\*\* Home \* \*\*Hospital Discharge Status:\*\* Alive \* \*\*Unit Type:\*\* Med-Surg ICU \* \*\*Unit Admission Time:\*\* 2015, 21:42:00 \* \*\*Unit Admission Source:\*\* ICU to SDU \* \*\*Unit Discharge Time:\*\* 2015, 11:52:00 \* \*\*Unit Discharge Location:\*\* Other ICU \* \*\*Unit Discharge Status:\*\* Alive \* \*\*Admission Weight:\*\* 88.4 kg \* \*\*Admission Height:\*\* 187.9 cm

**\*\*2. History:\*\***

The patient was admitted to the hospital via the Emergency Department with a diagnosis of Diabetic Ketoacidosis (DKA). The patient's unit stay was in the Med-Surg ICU, following a transfer from another ICU. The patient was discharged from the unit to another ICU and ultimately discharged home from the hospital.

**\*\*3. Diagnoses:\*\***

\* \*\*Primary Diagnosis:\*\* Diabetic Ketoacidosis (DKA) (ICD-9 codes: 250.13, E10.1) \* The diagnosis of DKA was recorded 26 and 326 minutes after unit admission. It was not active upon discharge from the unit.

**\*\*4. Treatments:\*\***

The patient received the following treatments during their ICU stay:

\* \*\*Renal/Electrolyte Correction:\*\* Magnesium and Potassium administration. These treatments were not active upon discharge. \* \*\*Gastrointestinal:\*\* Promethazine (antiemetic). This treatment was not active upon discharge. \* \*\*Endocrine/Glucose Metabolism:\*\* Continuous insulin infusion. This treatment was not active upon discharge.

**\*\*5. Vital Trends:\*\***

NULL. The provided data does not contain time-series data on vital signs such as heart rate, blood pressure, respiratory rate, etc. To generate this section, additional data, such as time-stamped vital signs measurements, would be required.

**\*\*6. Lab Trends:\*\***

The following lab results are available:

\* \*\*Glucose:\*\* 294 mg/dL (obtained at 304 minutes post-unit admission) \* \*\*Sodium:\*\* 139 mEq/L (obtained at 304 minutes post-unit admission) \* \*\*WBC x 1000:\*\* 14 K/mcL (obtained at 304 minutes post-unit admission) \* \*\*Creatinine:\*\* 1.2 mg/dL (obtained at 304 minutes post-unit admission) \* \*\*Hct:\*\* 45.8% (obtained at 304 minutes post-unit admission) \* \*\*BUN:\*\* 17 mg/dL (obtained at 304 minutes post-unit admission)

NULL. More frequent lab results over time are needed to establish trends. The current data only shows a single set of lab results at a single point in time.

**\*\*7. Microbiology Tests:\*\***

NULL. No microbiology test data was provided.

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

Initial physical exam was documented as "Performed - Structured" at 23 minutes post-unit admission. Admission weight was 88.4 kg. The initial GCS score was unable to be obtained due to medication. A subsequent physical exam at 245 minutes post-unit admission indicated a scored GCS of 15 (Eyes 4, Verbal 5, Motor 6), heart rate of 117 bpm, respiratory rate of 13 breaths per minute, blood pressure 151/88 mmHg, O2 saturation of 97% on 21% FiO2 with spontaneous respirations.