

****Medical Report: Patient 002-10308****

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

* **Patient Unit Stay ID:** 236265 * **Patient Health System Stay ID:** 202765 * **Unique Patient ID:** 002-10308 *
Gender: Male * **Age:** 52 * **Ethnicity:** Asian * **Hospital ID:** 63 * **Ward ID:** 95 * **Unit Type:** Med-Surg ICU *
Unit Admit Time: 22:29:00 * **Unit Admit Source:** Emergency Department * **Hospital Admit Time:** 22:28:00 *
Hospital Admit Source: Emergency Department * **Hospital Discharge Year:** 2014 * **Hospital Discharge Time:**
23:56:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Discharge Time:**
05:52:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Admission Height:** 154.9 cm *
Admission Weight: NULL * **Discharge Weight:** 53.9 kg

****2. History****

NULL (Insufficient information provided)

****3. Diagnoses****

The patient presented with multiple diagnoses during their ICU stay. These diagnoses, listed in order of entry, were:

* **Cardiac arrest (427.5, I46.9):** This diagnosis was initially recorded 17 minutes after unit admission and again after 4757 minutes. It was not active upon discharge from the unit. * **Amyotrophic Lateral Sclerosis (335.20, G12.21):** This neurological diagnosis was recorded 17 minutes after unit admission and was marked as 'Other' priority. It was not active upon discharge from the unit initially, but was subsequently added again after 4757 minutes and remained active at discharge. * **Acute Respiratory Failure (518.81, J96.00):** This pulmonary diagnosis was also recorded at 17 minutes and again after 4757 minutes post admission. It was inactive upon initial discharge but became active upon later addition. *
Aspiration Pneumonia (507.0, J69.0): This pulmonary infection was entered 4757 minutes post-admission and remained active upon discharge from the unit.

All diagnoses except the aspiration pneumonia were marked as 'Other' priority. The temporal relationship between the diagnoses suggests a possible causal link between the initial cardiac arrest and the subsequent respiratory complications and the ALS progression.

****4. Treatments****

NULL (Insufficient information provided)

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

NULL (Insufficient information provided)

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

The provided lab data includes multiple blood tests performed at various time points during the patient's stay. The data includes complete blood counts (CBC), basic metabolic panels (BMP), and arterial blood gases (ABG). Specific trends require further analysis and visualization. Note that multiple glucose measurements (bedside glucose) were taken throughout the stay, and these will be analyzed further.

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

NULL (Insufficient information provided)

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

A structured physical exam was performed. Initial vital signs on record include a systolic blood pressure ranging from 89 to 94 mmHg and a diastolic blood pressure ranging from 58 to 66 mmHg. The Glasgow Coma Scale (GCS) was scored, with individual scores of 1 recorded for Eyes, Verbal, and Motor responses, suggesting significant neurological impairment. Further details are needed for a complete assessment.