Patient Medical Report

1. Patient Information

* **Patient Unit Stay ID:** 876268 * **Patient Health System Stay ID:** 656229 * **Unique Patient ID:** 006-100897 * **Gender:** Male * **Age:** 78 years * **Ethnicity:** Caucasian * **Hospital ID:** 176 * **Ward ID:** 376 * **Unit Type:** Med-Surg ICU * **Unit Admit Source:** Acute Care/Floor * **Unit Admit Time:** 21:30:00 * **Unit Discharge Time:** 22:14:00 * **Unit Discharge Location:** Acute Care/Floor * **Hospital Admit Source:** Emergency Department * **Hospital Admit Time:** 10:29:00 * **Hospital Discharge Time:** 21:29:00 * **Hospital Discharge Location:** Skilled Nursing Facility * **Admission Weight:** 87 kg * **Discharge Weight:** 93.6 kg * **Admission Height:** 180 cm * **APACHE Admission Diagnosis:** Sepsis, pulmonary

2. History

NULL (Insufficient information provided in the JSON data to generate a detailed patient history. This section would typically include information about presenting symptoms, past medical history, family history, social history, and medication history.)

3. Diagnoses

The patient presented with multiple diagnoses during their ICU stay. The diagnoses, listed in order of priority, are:

* **Primary Diagnoses:** * Sepsis (038.9, A41.9, multiple entries) * Severe Sepsis (995.92, R65.2, multiple entries) * Septic Shock (785.52, R65.21, multiple entries) * **Major Diagnoses:** * Acute Respiratory Failure (518.81, J96.00, multiple entries) * Metabolic Encephalopathy (348.31, G93.41, multiple entries) * Bacteremia (038.9, R78.81, multiple entries) * Meningitis (multiple entries) * Acute Renal Failure (584.9, N17.9)

Note: Some diagnoses lack ICD-9 codes. This may indicate incomplete documentation. The multiple entries for several diagnoses suggest ongoing evaluation and management of these conditions throughout the ICU stay.

4. Treatments

The patient received the following treatments during their ICU stay:

* **Renal:** Medications including bicarbonate (multiple entries). The repeated entries for bicarbonate suggest ongoing administration. * **Pulmonary:** Mechanical ventilation (multiple entries). The multiple entries indicate the use of mechanical ventilation at different times during the stay. Non-invasive ventilation was also administered. * **Cardiovascular:** Vasopressors, specifically norepinephrine (at a dose of <= 0.1 micrograms/kg/min).

5. Vital Trends

NULL (No vital sign data is included in the JSON. This section should chart trends in heart rate, blood pressure, respiratory rate, temperature, and oxygen saturation over time.)

6. Lab Trends

The provided lab data includes multiple time points for various blood chemistries and hematology tests. Detailed trends require a time-series analysis, which is presented in the visualization and CSV sections. However, some key observations are:

* **Bedside Glucose:** Showed significant fluctuation throughout the stay, requiring close monitoring and management. * **Hemoglobin (Hgb) and Hematocrit (Hct):** These values fluctuated, indicating potential ongoing blood loss or other

hematologic issues. Specific trends need graphical representation. * **Electrolytes (Sodium, Potassium, Chloride, Bicarbonate):** These values also showed fluctuation, suggesting an electrolyte imbalance that was actively managed. A graphical analysis would clarify the trends. * **Renal Function (BUN, Creatinine):** These values indicate renal function. The changes over time need to be visualized to determine the severity and response to treatment. * **Liver Function (ALT, AST, Alkaline Phosphatase):** These lab values displayed variation, showing liver involvement. A visual representation will provide a more comprehensive understanding. * **Blood Gases (pH, PaO2, PaCO2, Base Excess):** These indicate the patient's acid-base balance and oxygenation status. The values suggest fluctuations and the need for respiratory support. A time-series visualization is crucial for understanding these trends.

7. Microbiology Tests

NULL (No microbiology test results are present in the provided data. This section would typically include results of blood cultures, urine cultures, and other relevant cultures, indicating the presence or absence of infection.)

8. Physical Examination Results

Two sets of structured physical examination data were recorded during the ICU stay. These show the patient's vital signs and Glasgow Coma Scale (GCS) scores. The data suggests significant fluctuations in heart rate and blood pressure, and changes in GCS scores, which warrant further analysis.

* **Physical Exam 1 (Offset: 52 minutes):** GCS score was recorded as 'scored'; Heart Rate (HR) Current: 102 bpm, HR Lowest: 99 bpm, HR Highest: 104 bpm; Blood Pressure (BP) systolic Current: 142 mmHg, BP systolic Lowest: 123 mmHg, BP systolic Highest: 128 mmHg; BP diastolic Current: 62 mmHg, BP diastolic Lowest: 55 mmHg, BP diastolic Highest: 103 mmHg; Respiratory Rate (Resp) Current: 30 breaths/min, Resp Lowest: 28 breaths/min, Resp Highest: 31 breaths/min; Oxygen Saturation (O2 Sat) Current: 93%, O2 Sat Lowest: 93%, O2 Sat Highest: 96%; Admission Weight: 87 kg; GCS Motor Score: 5; GCS Eyes Score: 4; GCS Verbal Score: 4. * **Physical Exam 2 (Offset: 11168 minutes):** GCS score was recorded as 'scored'; Heart Rate (HR) Current: 114 bpm, HR Lowest: 76 bpm, HR Highest: 133 bpm; Blood Pressure (systolic) Current: 132 mmHg, BP systolic Lowest: 109 mmHg, BP systolic Highest: 108 mmHg; BP diastolic Current: 61 mmHg, BP diastolic Lowest: 55 mmHg, BP diastolic Highest: 105 mmHg; Respiratory Rate (Resp) Current: 26 breaths/min, Resp Lowest: 20 breaths/min, Resp Highest: 28 breaths/min; Oxygen Saturation (O2 Sat) Current: 97%, O2 Sat Lowest: 93%, O2 Sat Highest: 100%; Admission Weight: 87 kg; Current Weight: 97.3 kg; Weight Delta: +10.3 kg; I&O; (ml) Intake Total: 2795 ml; I&O; (ml) Output Total: 1977 ml; I&O; (ml) Dialysis Net: 0 ml; I&O; (ml) Total Net: +818 ml; GCS Eyes Score: 4; GCS Motor Score: 5; GCS Verbal Score: 3.