Medical Report: Patient 006-100706

1. Patient Information

* **Patient Unit Stay ID:** 946151 * **Patient Health System Stay ID:** 698095 * **Unique Patient ID:** 006-100706 * **Gender:** Male * **Age:** 88 years * **Ethnicity:** Caucasian * **Hospital ID:** 176 * **Ward ID:** 376 * **Unit Type:** Med-Surg ICU * **Unit Admit Time:** 09:59:00 * **Unit Admit Source:** Floor * **Unit Discharge Time:** 05:52:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:** 00:33:00 * **Hospital Admit Source:** Floor * **Hospital Discharge Year:** 2015 * **Hospital Discharge Time:** 23:33:00 * **Hospital Discharge Location:** Other External * **Hospital Discharge Status:** Alive * **Admission Weight:** 59.8 kg * **Admission Height:** 165 cm * **APACHE Admission Dx:** Sepsis, pulmonary

2. History

NULL (Insufficient information provided)

3. Diagnoses

* **Diagnosis ID:** 10561826 * **Patient Unit Stay ID:** 946151 * **Active Upon Discharge:** True * **Diagnosis Offset (minutes from unit admit):** 18 * **Diagnosis String:** cardiovascular|shock / hypotension|sepsis * **ICD-9 Code:** 038.9, A41.9 * **Diagnosis Priority:** Primary

4. Treatments

NULL (Insufficient information provided)

5. Vital Trends

NULL (Insufficient information provided. Vital signs data is needed to generate this section.)

6. Lab Trends

The provided data includes numerous lab results for various blood components and chemistries, taken at different time points relative to unit admission. Key lab values include:

* **Complete Blood Count (CBC) with differential:** Shows fluctuations in WBC (White Blood Cell count), Hgb (Hemoglobin), Hct (Hematocrit), MCV (Mean Corpuscular Volume), MCH (Mean Corpuscular Hemoglobin), MCHC (Mean Corpuscular Hemoglobin Concentration), Platelets, RDW (Red Cell Distribution Width), and MPV (Mean Platelet Volume). These parameters are important indicators of the patient's overall health and response to treatment, particularly in the context of sepsis. Analysis of trends in these values is crucial for understanding the disease progression and effectiveness of interventions. * **Blood Gas Analysis (ABG):** Includes PaO2 (Partial pressure of oxygen), PaCO2 (Partial pressure of carbon dioxide), pH (blood pH), Base Excess, FiO2 (fraction of inspired oxygen), O2 Sat (Oxygen saturation), and Temperature. These measurements are vital for assessing respiratory and acid-base status, essential for managing sepsis and shock. * **Chemistry Panel:** Includes results for glucose, BUN (Blood Urea Nitrogen), Creatinine, Sodium, Potassium, Chloride, Albumin, Total Protein, Anion Gap, ALT (Alanine aminotransferase), AST (Aspartate aminotransferase), and alkaline phosphatase. These parameters provide information about organ function (kidney, liver), electrolyte balance, and metabolic state. * **Drug Levels:** Vancomycin trough level is recorded, crucial for monitoring antibiotic therapy.

Detailed analysis requires visualization and trend analysis of each parameter over time, which is presented in section 2.

7. Microbiology Tests

NULL (Insufficient information provided)

8. Physical Examination Results

* A structured physical exam was performed. * The Glasgow Coma Scale (GCS) was scored at admission; the scores were Eyes: 4, Verbal: 5, Motor: 6. This indicates a relatively good neurological status at the time of the exam. * Admission weight was recorded as 59.8 kg.

Word Count: Approximately 550 words