Patient Information

* **Unique Patient ID:** 006-100319 * **Patient Unit Stay ID:** 755285 * **Patient Health System Stay ID:** 583500 * **Gender:** Male * **Age:** 57 * **Ethnicity:** Caucasian * **Hospital ID:** 167 * **Ward ID:** 408 * **Unit Type:** CSICU * **Unit Admit Time:** 19:22:00 * **Unit Admit Source:** ICU to SDU * **Unit Discharge Time:** 02:17:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:** 23:22:00 * **Hospital Admit Source:** Operating Room * **Hospital Discharge Year:** 2014 * **Hospital Discharge Time:** 00:08:00 * **Hospital Discharge Location:** Skilled Nursing Facility * **Hospital Discharge Status:** Alive * **Admission Height (cm):** 170 * **Admission Weight (kg):** 71 * **Discharge Weight (kg):** NULL

Medical History

NULL (Insufficient data provided)

Diagnoses

NULL (Insufficient data provided)

Treatments

NULL (Insufficient data provided)

Vital Trends

NULL (Insufficient data provided)

Lab Trends

The provided data includes a series of laboratory tests performed during the patient's ICU stay. The tests primarily focus on hematological parameters, including Hemoglobin (Hgb), Red Blood Cell Distribution Width (RDW), Mean Platelet Volume (MPV), Red Blood Cell count (RBC), Platelet count, Mean Corpuscular Hemoglobin Concentration (MCHC), and Mean Corpuscular Hemoglobin (MCH). Additionally, there are chemistry panel results for sodium, potassium, chloride, bicarbonate, BUN, creatinine, and anion gap, as well as bedside glucose measurements taken at various time points during the stay. The lab results are reported as offsets in minutes from the unit admission time, allowing for temporal analysis of the trends.

Analysis of the data reveals multiple lab test results at different time points. For instance, Hemoglobin levels were measured at 9.6 g/dL, 9.3 g/dL, and 9.4 g/dL at different time points. The fluctuations in these and other parameters require further investigation to determine clinical significance. The data also includes multiple measurements of bedside glucose, which show significant variation, ranging from lows in the 80s mg/dL to highs above 200 mg/dL. This warrants an assessment for potential hyperglycemia or hypoglycemia. Similarly, creatinine levels show a concerning trend, with values ranging from 2.97 mg/dL to 7.24 mg/dL over the course of the stay, suggesting a potential renal dysfunction that needs further evaluation. The complete blood count (CBC) with differential shows some variation in WBC counts and differential percentages, but a detailed analysis would require a longer time-series and correlation with clinical findings.

Microbiology Tests

NULL (Insufficient data provided)

Physical Examination Results

NULL (Insufficient data provided)