

****Medical Report: Patient 007-10111****

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

* **Patient Unit Stay ID:** 970984 * **Patient Health System Stay ID:** 715399 * **Unique Patient ID:** 007-10111 *
Gender: Female * **Age:** 56 * **Ethnicity:** Asian * **Hospital ID:** 184 * **Ward ID:** 429 * **Unit Type:** Cardiac
ICU * **Unit Admit Time:** 2015-XX-XX 20:23:00 (Assuming a date is available but missing from the JSON) * **Unit Admit
Source:** Emergency Department * **Unit Discharge Time:** 2015-XX-XX 01:57:00 (Assuming a date is available but
missing from the JSON) * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:**
2015-XX-XX 19:20:00 (Assuming a date is available but missing from the JSON) * **Hospital Admit Source:** Emergency
Department * **Hospital Discharge Year:** 2015 * **Hospital Discharge Time:** 2015-XX-XX 23:37:00 (Assuming a date is
available but missing from the JSON) * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive *
Admission Weight: 39.2 kg * **Discharge Weight:** 36.5 kg * **Admission Height:** 147.3 cm (Assuming cm as it is a
standard unit for height) * **APACHE Admission Dx:** Sepsis, GI

****2. History****

NULL (Insufficient information provided in the JSON to elaborate on the patient's medical history.)

****3. Diagnoses****

The patient presented with multiple diagnoses, primarily related to sepsis and a pancreatic tumor. Specific diagnoses included:

* Signs and symptoms of sepsis (SIRS) (ICD-9 code: 995.90) * Sepsis with multi-organ dysfunction syndrome (ICD-9 codes: 995.92, R65.20) – This diagnosis was recorded multiple times at different offsets, suggesting a fluctuating condition. * Severe sepsis (ICD-9 codes: 995.92, R65.20) – Also recorded multiple times at different offsets, indicating the severity of the sepsis. * Pancreatic CA (ICD-9 codes: 157.9, C25.9) – This was an active diagnosis upon discharge, indicating an ongoing condition. * Biliary obstruction due to tumor (ICD-9 codes: 575.2, K82.0)

The priority of these diagnoses varied, with most listed as 'Other', suggesting the primary concern might not be fully captured in the provided data. The temporal aspects of the diagnoses (diagnosisoffset) highlight the evolving nature of the patient's condition during the ICU stay. More detailed clinical notes would be necessary for a complete understanding of the disease progression and the relation between diagnoses.

****4. Treatments****

The patient received various treatments during their ICU stay, including:

* Vasopressors (multiple entries at different times indicating potential fluctuation in need) * Analgesics (ongoing treatment at discharge) * Antibacterials (multiple entries) * Normal saline administration (ongoing treatment at discharge) * Pulmonary/CCM consultation (multiple entries, suggesting ongoing monitoring) * Percutaneous abscess drainage procedure * ERCP (Endoscopic Retrograde Cholangiopancreatography)

The multiple entries for some treatments (e.g., vasopressors, antibacterials, normal saline, consultations) indicate ongoing management and adjustments to the treatment plan based on the patient's response. The specific dosages and the reasons for the treatments are missing from the JSON and would improve the completeness of this section.

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

NULL (Vital signs data is missing from the JSON. This section would include trends in heart rate, respiratory rate, blood pressure, oxygen saturation, temperature, etc., over time.)

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

The provided lab data shows multiple blood tests performed at various times during the hospital stay. Trends would need to be analyzed over time for key indicators such as Hemoglobin (Hgb), Hematocrit (Hct), White Blood Cell count (WBC), Platelets, BUN (Blood Urea Nitrogen), Creatinine, Electrolytes (Sodium, Potassium, Chloride, Bicarbonate), Liver enzymes (ALT, AST), Bilirubin, Albumin, and others. The data shows fluctuations in various parameters, suggesting a dynamic clinical picture. A graphical representation would be beneficial to illustrate the trends and their correlations. Further analysis of these trends would require more lab results over a longer period.

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

NULL (Microbiology test results are not included in the provided JSON data.)

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

Physical examinations were performed at multiple time points during the stay, as indicated by the 'physicalexamoffset' values. The data includes observations on vital signs (heart rate, respiratory rate, blood pressure, oxygen saturation) and weight. Heart rate, respiratory rate, and weight demonstrated some variation throughout the stay. The data also reveals a GCS score of 14 at one point, indicating some neurological status which was later recorded as 'scored'. More detailed descriptions of the physical examination findings are needed for a comprehensive evaluation.