Medical Report for Patient 006-10151

1. Patient Information:

* **Patient Unit Stay ID:** 640260 * **Unique Patient ID:** 006-10151 * **Gender:** Female * **Age:** 61 * **Ethnicity:** Caucasian * **Hospital Admission Time:** 2014-01-34 01:34:00 * **Hospital Admission Source:** Emergency Department * **Hospital Discharge Time:** 2014-01-34 19:36:00 * **Hospital Discharge Location:** Home * **Hospital Discharge Status:** Alive * **Unit Type:** Med-Surg ICU * **Unit Admission Time:** 2014-01-34 04:13:00 * **Unit Admission Source:** Emergency Department * **Unit Discharge Time:** 2014-01-34 02:02:00 * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Admission Weight:** 109 kg * **Discharge Weight:** 88.1 kg * **Admission Height:** 183 cm

2. History:

NULL (Insufficient information provided in the JSON data to generate a detailed patient history.)

3. Diagnoses:

NULL (Insufficient information provided in the JSON data to generate a list of diagnoses. The `apacheadmissiondx` field is empty.)

4. Treatments:

NULL (No treatment information is available in the provided data.)

5. Vital Trends:

NULL (No vital sign data is included in the JSON.)

6. Lab Trends:

The following lab results were recorded during the patient's stay:

* **Hematology:** Multiple hematology tests were performed, including complete blood count (CBC) with differential. Initial results showed elevated white blood cell count (WBC) (20.5 K/mcL) and slightly decreased hematocrit (Hct) (38.8%). Subsequent tests showed fluctuations in Hct (ranging from 33.5% to 37%), with a final Hct of 36.1%. Hemoglobin (Hgb) levels also fluctuated (10.4 g/dL to 14.6 g/dL). Platelet counts were initially high (368 K/mcL) and decreased to 283 K/mcL. Mean platelet volume (MPV) and red cell distribution width (RDW) were also measured. These values suggest the patient may have experienced an inflammatory response and potential anemia during the ICU stay. Further investigation is needed to determine the underlying cause of these abnormalities.

* **Chemistry:** Basic metabolic panel (BMP) was performed, showing a normal potassium level (3.5 mmol/L) but a slightly elevated BUN (33 mg/dL). Other chemistry results included a normal albumin level (3.8 g/dL), slightly elevated alkaline phosphatase (77 Units/L), and normal levels of total bilirubin, total protein, chloride, and calcium. The anion gap was measured at 11. These results suggest a possible dehydration or renal insufficiency.

* **Miscellaneous:** An ammonia level was measured at 24 mcg/dL. The significance of this finding requires further clinical context.

* **Coagulation:** Prothrombin time (PT) and international normalized ratio (INR) were measured, initially showing a prolonged PT (14.6 sec) but a normal INR (1.1 ratio). This requires further evaluation to determine the cause of the prolonged PT.

7. Microbiology Tests:

NULL (No microbiology test results are provided.)

8. Physical Examination Results:

The physical examination was noted as "Not Performed".

Note: This report is based solely on the provided data. Further clinical information and correlation with other data sources are necessary for comprehensive interpretation and management of this patient's case. The temporal relationship between lab results and clinical events is crucial for proper diagnosis. For example, the elevated WBC could be associated with an infection, but this requires further information about the patient’s symptoms, treatment, and other diagnostic tests.