

## **\*\*Patient Information\*\***

Patient Unit Stay ID: 202294 Patient Health System Stay ID: 176377 Gender: Female Age: 62 Ethnicity: Caucasian Hospital ID: 58 Ward ID: 108 Unique Patient ID: 002-12027 Admission Height: 154.9 cm Admission Weight: 70.1 kg Discharge Weight: 70.1 kg Hospital Admit Time: 08:29:00 Hospital Admit Source: Emergency Department Hospital Discharge Year: 2014 Hospital Discharge Time: 18:51:00 Hospital Discharge Location: Rehabilitation Hospital Discharge Status: Alive Unit Type: Med-Surg ICU Unit Admit Time: 08:32:00 Unit Admit Source: Emergency Department Unit Visit Number: 1 Unit Stay Type: admit Unit Discharge Time: 23:50:00 Unit Discharge Location: Floor Unit Discharge Status: Alive Admission APACHE Diagnosis: Overdose, street drugs (opiates, cocaine, amphetamine)

## **\*\*Medical History\*\***

Insufficient data provided to elaborate on the patient's detailed medical history beyond the admission diagnosis of drug overdose. A comprehensive medical history would include information on past illnesses, surgeries, allergies, family history, and social history (smoking, alcohol, drug use, etc.). This information is crucial for understanding the context of the current ICU stay and developing a complete clinical picture. The provided data only offers a snapshot of the diagnoses recorded during the ICU stay, not a complete history leading up to the admission.

## **\*\*Diagnoses\*\***

The patient presented with multiple diagnoses during her ICU stay. These diagnoses, listed in order of diagnosis ID, reflect a complex clinical picture involving respiratory, neurological, toxicological, and cardiovascular issues. The primary diagnosis upon admission and discharge was drug overdose (diagnosis IDs: 4053743, 3662795, 4041174, 3710936, 3605158, 3772683, 4188120). Major diagnoses included respiratory failure with hypercarbia and hypoxemia (diagnosis IDs: 4062394, 3392018, 3603184, 3715084, 4239286, 3493218, 4252926, 3643270, 3454186, 4150385, 3957412, 4213624, 3849792), respiratory acidosis (diagnosis IDs: 3800480, 3733334, 3606391, 3609644, 4242394, 4109456, 3504523, 3932568, 4107631, 3838726, 4053755, 3983634, 3395011, 3862116, 3929261), and altered mental status/pain (diagnosis IDs: 3413342, 4065528, 3700997, 4154854, 3599064, 4198223, 4015418). Other diagnoses included aspiration pneumonia (diagnosis IDs: 3800480, 3606391, 4053755, 3395011, 3862116, 3929261), hypertension (diagnosis IDs: 3795913, 3587573, 3683173, 3442930, 4120974, 3425482, 3983969, 4090877), vomiting (diagnosis IDs: 3983634, 4144140, 3909949, 4268760), and Hepatitis C (diagnosis IDs: 4170107, 3546164, 3955581, 3894483). The presence of multiple active diagnoses at discharge indicates a complex and potentially serious condition.

## **\*\*Treatments\*\***

NULL. No treatment information is provided in the dataset.

## **\*\*Vital Trends\*\***

NULL. No vital sign data is available.

## **\*\*Lab Trends\*\***

The provided lab data shows several complete blood count (CBC) and blood chemistry results taken at different time points during the ICU stay. The data includes Hemoglobin (Hgb), Hematocrit (Hct), White Blood Cell count (WBC), Platelets, Mean Corpuscular Volume (MCV), Mean Corpuscular Hemoglobin (MCH), Mean Corpuscular Hemoglobin Concentration (MCHC), and red blood cell distribution width (RDW). Chemistry panels include Sodium, Potassium, Chloride, Bicarbonate, BUN, Creatinine, Anion Gap, total protein, total bilirubin, direct bilirubin, albumin, ALT, AST, and alkaline phosphatase. Arterial blood gas (ABG) values were also recorded, including pH, PaO2, PaCO2, HCO3, and Base Deficit. Analysis of these trends would require time-series data, which is not explicitly available in the provided format. Further information on the timing of the lab tests is needed for a detailed trend analysis. However, the presence of multiple chemistry and ABG panels suggests an attempt to assess and manage electrolyte imbalances and respiratory function.

## **\*\*Microbiology Tests\*\***

NULL. No microbiology test results are provided.

**\*\*Physical Examination Results\*\***

The physical exam notes indicate a Glasgow Coma Scale (GCS) score of 15 (Eyes: 4, Verbal: 5, Motor: 6) and a FiO2% of 100%. The physical exam was performed and documented in a structured format. Additional details about the patient's physical examination are needed for a more complete assessment. The GCS score suggests that the patient was alert and oriented at the time of the exam, while the FiO2% suggests the use of supplemental oxygen at 100%.