Medical Report for Patient 002-10076

1. Patient Information

* **Patient Unit Stay ID:** 216950 * **Unique Patient ID:** 002-10076 * **Patient Health System Stay ID:** 187781 * **Gender:** Female * **Age:** 46 * **Ethnicity:** African American * **Hospital ID:** 73 * **Ward ID:** 102 * **Unit Type:** Neuro ICU * **Unit Admit Time:** 2014-XX-XX 18:29:00 (Assuming a date) * **Unit Admit Source:** Other ICU * **Unit Discharge Time:** 2014-XX-XX 04:32:00 (Assuming a date) * **Unit Discharge Location:** Floor * **Unit Discharge Status:** Alive * **Hospital Admit Time:** 2014-XX-XX 19:55:00 (Assuming a date) * **Hospital Admit Source:** Operating Room * **Hospital Discharge Year:** 2014 * **Hospital Discharge Time:** 2014-XX-XX 22:05:00 (Assuming a date) * **Hospital Discharge Location:** Rehabilitation * **Hospital Discharge Status:** Alive * **Admission Height (cm):** 154.9 * **Admission Weight (kg):** NULL * **Discharge Weight (kg):** 71.4

2. History

NULL (Insufficient information provided)

3. Diagnoses

The patient presented with multiple diagnoses, some active upon discharge and others not. The diagnoses, listed in order of priority, are:

* **Primary:** neurologic|trauma - CNS|intracranial injury|with intracerebral hemorrhage (ICD-9: 851.80, S06.9) * **Major:** neurologic|infectious disease of nervous system|meningitis|chronic|non-infectious|vasculitis (ICD-9: 322.2, G03.1) * **Other:** neurologic|disorders of vasculature|stroke (ICD-9: 436, I67.8) * **Other:** neurologic|post-neurosurgery|post craniotomy * **Other:** cardiovascular|ventricular disorders|hypertension (ICD-9: 401.9, I10)

Note that several diagnoses, including intracranial hemorrhage, hypertension, and meningitis, were recorded at multiple time points during the stay, indicating ongoing monitoring and management of these conditions. The deactivation of some diagnoses suggests improvement or resolution of those specific issues. The lack of ICD-9 codes for some diagnoses needs clarification.

4. Treatments

NULL (Insufficient information provided)

5. Vital Trends

NULL (Insufficient information provided)

6. Lab Trends

The provided lab data includes multiple measurements of glucose, BUN, creatinine, chloride, potassium, sodium, and complete blood count (CBC) parameters including Hct, Hgb, RBC, WBC, RDW, lymphocytes, monocytes, bands, and eosinophils. The time-series data reveals fluctuations in these values over the patient's stay. A detailed analysis requires visualization to identify potential trends and correlations. For example, serial bedside glucose measurements show significant variability, ranging from lows around 100 mg/dL to highs over 300 mg/dL. Similarly, creatinine levels also fluctuate but remain within a relatively narrow range. Further analysis is needed to determine the clinical significance of these changes.

7. Microbiology Tests

NULL (Insufficient information provided)

8. Physical Examination Results

NULL (Insufficient information provided)

This report is based solely on the provided data. Additional information is needed to complete sections on patient history, treatments, vital trends, and physical examination findings. Furthermore, a more thorough interpretation of the laboratory data necessitates a time-series analysis and visualization. The clinical significance of the lab results should be evaluated in context with the patient's complete medical history and treatment plan.