

**\*\*Patient Information:\*\***

\* \*\*Unique Patient ID:\*\* 002-1185 \* \*\*Patient Unit Stay ID:\*\* 171926 \* \*\*Gender:\*\* Male \* \*\*Age:\*\* 80 \* \*\*Ethnicity:\*\* Caucasian \* \*\*Hospital ID:\*\* 61 \* \*\*Ward ID:\*\* 120 \* \*\*Unit Type:\*\* Med-Surg ICU \* \*\*Unit Admit Time:\*\* 18:57:00 \* \*\*Unit Admit Source:\*\* ICU to SDU \* \*\*Unit Discharge Time:\*\* 02:49:00 \* \*\*Unit Discharge Location:\*\* Floor \* \*\*Unit Discharge Status:\*\* Alive \* \*\*Admission Height (cm):\*\* 177.8 \* \*\*Discharge Weight (kg):\*\* 71.3 \* \*\*Hospital Admit Time:\*\* 19:58:00 \* \*\*Hospital Admit Source:\*\* Emergency Department \* \*\*Hospital Discharge Year:\*\* 2015 \* \*\*Hospital Discharge Time:\*\* 20:00:00 \* \*\*Hospital Discharge Location:\*\* Skilled Nursing Facility \* \*\*Hospital Discharge Status:\*\* Alive

**\*\*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 at different time points during the patient's ICU stay. The tests cover various blood chemistries and hematological parameters. Multiple measurements exist for some lab tests, indicating repeat testing over time, such as for potassium and magnesium. There is at least one instance where a potassium level is taken before ICU admission (-399 minutes offset). This shows a need for a temporal analysis of these values. Specifically, we observed the following:

\* \*\*Potassium (mmol/L):\*\* Fluctuated between 3.4 mmol/L and 4.1 mmol/L during the ICU stay. There's a pre-admission value of 3.4 mmol/L. This requires further investigation to understand the temporal trend of potassium levels and possible underlying causes of fluctuation. \* \*\*Magnesium (mg/dL):\*\* Showed values of 1.5 mg/dL and 1.8 mg/dL at different time points. Again, the temporal aspect needs to be analyzed to assess for any significant changes over time. \* \*\*Hemoglobin (g/dL):\*\* Values of 8.8 g/dL and 9.2 g/dL were recorded, suggesting possible anemia. The temporal context of these measurements is crucial in determining the severity and progression of anemia. \* \*\*Hematocrit (%):\*\* Hematocrit levels were 26.8% and 28.2%, consistent with the hemoglobin findings, indicative of anemia. \* \*\*Platelets (K/mcL):\*\* Values of 208 K/mcL and 223 K/mcL were recorded, which are within the normal range. However, the trend needs to be explored further for a comprehensive analysis. \* \*\*Other Chemistries:\*\* Values were recorded for albumin, creatinine, chloride, bicarbonate, anion gap, total bilirubin, AST (SGOT), ALT (SGPT), alkaline phosphatase, total protein. These need to be evaluated in the context of the patient's clinical presentation to determine their significance.

**\*\*Microbiology Tests:\*\***

NULL (Insufficient data provided)

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

NULL (Insufficient data provided)

