Haematology	09-12-2019 02:16	08-12-2019 06:03	08-12-2019 05:47
FBE			
☐ Hb	155		153
☐ WBC	24.34		25.14
☐ Platelets	191		267
☐ Hct	0.45		0.47
☑ MCV	*89		95
☐ MCH	30.5		30.6
☐ MCHC	341		324
☐ RBC	5.08		4.99
☐ RDW	13.1		13.2
☐ Neutrophils	22.19		19.73
☐ Lymphocytes	0.71		4.29
☐ Monocytes	1.44		0.57
☐ Eosinophils	0.00		0.49
☐ Basophils	0.00		0.06
Coagulation			
Anticoagulant?	None	None	
☐ INR	*1.4	1.3	
☐ PT	18.7	16.8	
☐ APTT	*34.4	*40.0	
☐ Fibrinogen Level	3.5	2.6	
☐ TCT	16.6	20.3	

pH

Lactate (BG)

MCV
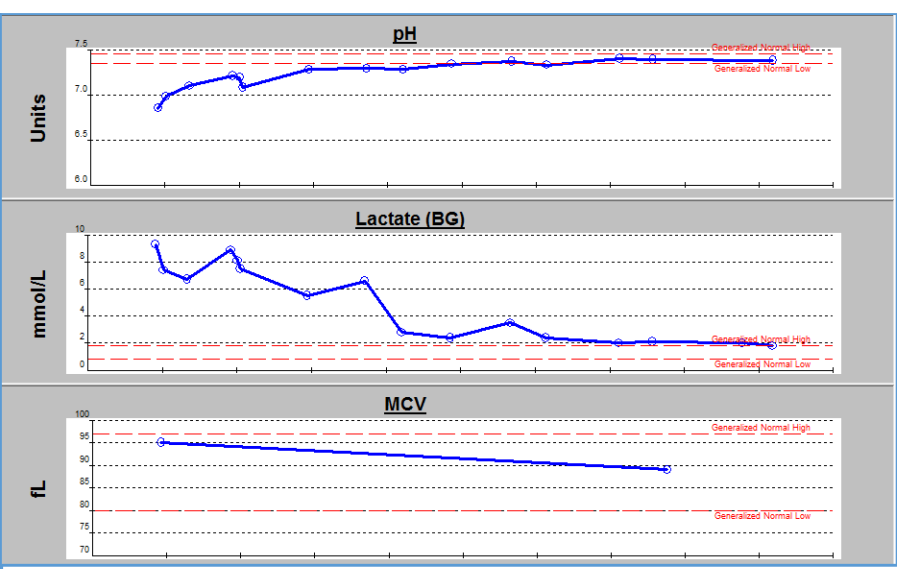
Note the correlation of MCV with the lactate which is indicative of metabolic imbalance affecting the MCV measurement.
MCV has dropped but MCH and RDW constant.

08-12-2019 09:02	08-12-2019 08:45	08-12-2019 07:00	08-12-2019 06:05	08-12-2019 06:03	08-12-2019 05:44
Arterial	Arterial	Arterial		Arterial	* Venous
80	80	80			
7.19	7.21	7.10		6.98	6.85
41	37	59		73	109
201	141	101		154	88
-12	-13	-12		-16	-18
15	14	18		17	18
99	98	96		98	89
177	178	169		161	161
0.3	0.3	0.3		0.3	0.5
1	1	1		1	1
144	144	143		140	141
3.1	3.3	4.2		4.5	4.7
104	102	101		100	99
16.1	15.6	17.4		18.2	19.6
8.1	8.9	6.7		7.4	9.3
1.10	1.13	1.14		1.17	1.20
* Test Not Done	1.04	* Test Not Done		* Test Not Done	* Test Not Done
			73		
			36		
			37		
			8		
			325		
			45		
			107		
			74		
			9		
			<1		
			18.7		
			* Detected		
			Not Detected		
			Not Detected		
			Not Detected		
			Not Detected		
			Not Detected		

History of Presenting Complaint

22M OOHCA (asystole) in setting of GHB + ETOH with hypoxic ischaemic encephalopathy

BG
asthma

HPC/progress
- attending party tonight. had allegedly taken GHB
- became very drowsy ?unresponsive in club so carried out to car by friends +/- security.
- friends left pt for a few minutes. went back to car to check pt; found to be note breathing and without a pulse. bystanders had started CPR and called ambos
- arrived ~10mins after call. had 20mins of ALS by ambos; in asystole throughout prior to ROSC
- intubated during CPR (cold). size 7 ETT. 23cm at lips. BVM, no spont effort
- no sedation or paralysis given until just prior to ICU admission
- pupils fixed and dilated since arrival, GCS 3, no corneal reflex
- CTB on way to ICU: Features in keeping with hypoxic ischaemic encephalopathy
- Difficult to ventilate and oxygenate - ?aspiration. CO2 >100, improving
- increasing adrenaline requirement now 20mcg
- pH 6.85 lactate 9.3 CO2 109 O2 88 on arrival