

Discharge Summary

Patient Name : Ms. FIZA [6 Yr /F] SR623770
Address : H. No. 782, Jamai Colony, Near B N Public School, Faridabad, Haryana

Mob. No. : 9873571832
Next Of Kin : Sabir Khan (FATHER)
IP. No. : IP235419 **Dept./Speciality** : PEDIATRIC
Adm. Date : 18-06-2021 12:08PM **CARDIOLOGY &**
Ward Info. : 3229/GENERAL **CARDIAC SURGERY**
CATEGORY/3F-DEV WING

Discharge Type : Discharge
Consultants : DR. VIRESH MAHAJAN, DR. PRADIPTA KUMAR ACHARYA, DR. AMOL GUPTA, DR. SHYAMVEER SINGH KHANGAROT

Patient Category : Diya Medicare Foundation

Final Diagnosis

ACYANOTIC CONGENITAL HEART DISEASE
 MODERATE SIZED PDA
 MODERATE MR
 DILATED LA, LV
 GOOD LV /RV SYSTOLIC FUNCTION
 SUCCESFUL TRANSCATHETER PDA DEVICE CLOSURE USING 8X10MM ADO1 DEVICE ON
 19-06-2021

Presenting Complaints

Baby Fiza 6 years old girl from faridabad is a known case of Acyanotic Congenital Heart Disease. she was first diagnosed at the age of 6 months when she was being evulated for respiratory tract infection. 2D Echo done in suggested PDA with Moderate MR . She was managed conservatively and was advised further evaluation & management at a higher center. There is history of recurrent respiratory tract infection. No history of seizures and ear discharge. Growth & development is appropriate for age according to her father. she is immunized appropriately for her age. Now she has come to this center for further evaluation and management.

Examination

Weight on admission:-20kgs
 Weight on discharge:-20kgs
 SPO2- 94% on room air
 BP- 100/70mmHg

PR-100/min

RR- 28/min

Hospital Stay

On admission, she was thoroughly evaluated and investigated, Echo was done, which confirmed the diagnosis

Pre-operative echo

Situs Solitus, Levocardia

IAS/IVS intact

Moderately restrictive PDA measuring 3.5mm with left to right shunt with PG of 87mmHg and Diastolic

GDT of 34mmHg

Moderate MR

Mild AR

Dilated LA, LV

Adequate LV/RV function

Left Arch, No COA

Her father was counselled in detail about the natural history of the disease and the risk & benefits of procedure were also explained in detail. The possibility of prolonged ICU stay were also adequately explained.

After high risk consent, she was taken for the Cath. Procedure on 19.6.2021

Procedure: Successful Transcatheter PDA device closure using 8x10mm ADO1 device on 19.6.2021

Post Procedure, she was shifted to Paediatric CTVS ICU for further monitoring and management

Pre-discharge Echo findings:

PDA Device in Stable Position

No Residual Shunt

Laminar Flows in LPA and Arch

Mild . Moderate MR

Trace TR with PG of 26mmHg

Dilated LA, LV

Good LV, RV systolic function

No IVC congestion

No collection

Patient is being discharged with following advice.

Treatment Advice On Discharge

Sr.	Description	Remark	
1	Tab Hb Cefi(cefixim) 200mg (CEFIXIME 200 MG)	1/2 tab twice a day	5 days
2	Syp Tonoferon Paed 100ml (IRON+FOLIC ACID 100 ML)	5 ml Once a day	3 months
3	Tab Pantop 40mg (PANTOPRAZOLE 40 MG)	1/2 tab Once a day	7 days
4	Tab Dolo 500mg (PARACETAMOL 500 MG)	1 tab Thrice a day	2 days

Review**Consult doctor in case of :-**

Fever, Pain, Swelling, Breathlessness, Excessive cough, Any drug allergy, soakage , bleeding from surgical wound site

Diet:-

High protein diet

Avoid spicy, oily, fatty meals

No tea, coffee on empty stomach

Any other instruction:-

Do not stop any medication without doctor advice

Condition at discharge:-

Symptomatically better

Accepting orally well

Follow up:-

Follow up to this Center after 7 days in Pediatric Cardiac OPD. .

Condition At Discharge

Hemodynamically stable

Afebrile

Feeding well
Chest is clinically clear
No fresh complaints
SpO₂ 96% on room air.

Summary of Key Investigations during Hospitalization: As per Report Attached

Investigation Report

Investigation	Date	Value	Investigation	Date	Value
CRP (C-Reactive Protein)	18-06-2021 06:25 PM	0.6 mg/L	HBsAg By ECLIA	18-06-2021 05:53 PM	0.344
HCV By ECLIA	18-06-2021 05:53 PM	0.031	HIV 1 and 2 By ECLIA	18-06-2021 05:53 PM	0.057
Prothrombin Time (PT)	18-Jun 04:40 PM		RFT II	19-Jun 12:56 AM	
Wt INR			Blood Urea		17.5 mg/dl
Control	12.5 Sec.		Potassium(K ⁺)		3.86 mmol/L
INR	1.032		Chloride(CL ⁻)		107.7 mmol/L
Prothrombin Time(PT)	12.900 Sec.		Serum Creatinine		0.35 mg/dl
			Sodium(Na ⁺)		137.9 mmol/L

Authorised By
Dr. Viresh Mahajan

Authorised By

Authorised By
Dr. Amol Gupta

For Dr. Amol Gupta

Authorised By

CONTACT HOSPITAL IN CASE OF EMERGENCY (105959 / 18003131414).

Patient Acknowledgement: I have received discharge summary and explained in detail about follow up medication as advised Patient / Attendant Signature _____ Full Name/ Relation _____

Mob No: _____

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