

DISCHARGE SUMMARY

PATIENT NAME: MAST. HARSH	AGE: 7 YEAR; SEX: MALE
REGN NO: 13098686	IPD NO: 117924/24/1201
DATE OF ADMISSION: 24/06/2024	DATE OF DISCHARGE: 27/06/2024
CONSULTANTS: DR NEERAJ AWASTHY	

FINAL DIAGNOSIS

- Situs solitus, Levocardia
- Supra-Valvular pulmonary stenosis
- Doming and dysplastic pulmonary valve
- Confluent and adequate branch Pas.
- Intact IAS and IVS
- Mild + TR
- Normal LVEF
- Normal Sinus rhythm
- S/P Balloon dilation of pulmonary valve done using Tyshak II balloon of size 14 mm x 3 cm f/b tyshak II balloon of size 15 mm x 3 cm till disappearance of waist on 25/06/2024.

INVASIVE PROCEDURE

BALLOON DILATION OF PULMONARY VALVE DONE USING TYSHAK II BALLOON OF SIZE 14 MM X 3 CM F/B TYSHAK II BALLOON OF SIZE 15 MM X 3 CM TILL DISAPPEARANCE OF WAIST ON 25/06/2024.

RESUME OF HISTORY

MAST. HARSH is a 7-year-old male, is known case of congenital heart disease. he underwent cataract bilateral surgery in 2017. Child came for cardiac clearance needed for eye surgery (strabismus surgery). Echo done on 18/04/2024 which showed Doming pulmonary valve. Mild + TR. He was advised for admission for BPV. Now child admitted here Fortis Escorts Heart Institute, New Delhi on 08/05/2024 for Balloon dilation of pulmonary valve

On examination, he was afebrile, his pulse rate was 102/min regular, RR= 18/min. Saturation in room air 97 %. There was no tachypnea, pallor, cyanosis, clubbing, jaundice or edema. Bilateral air entry present. Precordial examination revealed apex in left 4th ICS at MCL. S1 normal, S2 present. Ejection systolic murmur grade III at left upper sternal border. Rest of the systemic examination was unremarkable.



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WT ON ADMISSION : 16.5KG
HEIGHT ON ADMISSION : 119CM

ECG	:	Normal sinus rhythm
CHEST X RAY	:	No cardiomegaly, decreased pulmonary vascularity

ECHO: : Done on 08/04/2024 revealed, normal segmental analysis. Intact IAS and IVS. Laminar inflow. Mild + TR (max PG= 105mmHg). doming pulmonary valve (max PG= 95mmHg). trace PR. confluent branch PAs. Left arch. No coarctation of aorta. No PDA. Normal biventricular function. PA annulus = 11, LVIDd= 3cm (z score= -1.1). LVIDs= 1.8cm (z score= -1.1)

PRE DISCHARGE ECHO : : Done on 26/06/2024 revealed, well opened RVOT (max PG= 40mmHg) mainly supravalvular. Good flow in branch PAs. Laminar inflow. Mild TR (max PG= 56mmHg). no MR. normal LVEF. Good RV function. No collection.

COURSE IN THE HOSPITAL

MAST. HARSH was admitted in Fortis Escorts Heart Institute, New Delhi for Balloon dilation of pulmonary valve. Blood investigations (CBC, RFT, LFT, viral markers) were sent which were within normal limits. He underwent Balloon dilation of pulmonary valve done using Tyshak II balloon of size 14 mm x 3 cm f/b tyshak II balloon of size 15 mm x 3 cm till disappearance of waist on 25/06/2024. (report attached). He was kept in CCU for hemodynamically monitoring. He is being discharged in stable condition with advice to regular follow up.

CONDITION AT DISCHARGE: Stable

DIET : Normal diet

PLAN FOR CONTINUED CARE:

- TO SEE DR. NEERAJ AWSTHY AFTER 1 MONTH IN PEDIATRIC ECHO LAB, BASEMENT

MEDICATIONS



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- Syp. Cefixime (5ml/100mg) 3ml orally twice daily X 3 days
- Syp. Calcium 5ml orally once daily
- Drop Tonoferon (1ml/25mg) 2ml orally once daily
- Tab. Propranolol 10mg orally twice daily

SBE PROPHYLAXIS x 6 months

Signature _____

(DR. VAISHALI)

**(FELLOW IN PEDIATRIC
CARDIOLOGY)**

Signature _____

(DR NEERAJ AWASTHY)

**(DIRECTOR, PEDIATRIC & CONGENITAL
HEART DISEASE)**

Patient to be followed in cardiac clinic by **DR NEERAJ AWASTHY** on first appointment. Please confirm your appointment from the appointment section (Direct 011-47134921).

Tele consultation with DR NEERAJ AWASTHY call customer care 011-47134500 (12:00 pm to 2:00 pm). All appointment may be taken from the appointment section 011-47134921

Patient is advised to come for review with the discharge summary.



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