

DISCHARGE SUMMARY

PATIENT NAME: RISHU K	AGE: 1 YEAR, 3 MONTHS & 7 DAYS, SEX: M
REGN: NO: 13309725	IPD NO: 174857/24/1201
DATE OF ADMISSION: 09/09/2024	DATE OF DISCHARGE: 18/09/2024
CONSULTANT: DR. K. S. IYER / DR. NEERAJ AWASTHY	

DISCHARGE DIAGNOSIS

- Cyanotic congenital heart disease with decreased pulmonary blood flow
- Tetralogy of Fallot with severe Pulmonary stenosis, borderline Pulmonary annulus, confluent and adequate branch Pulmonary arteries
- Large malaligned perimembranous ventricular septal defect (Bidirectional shunting)
- Patent foramen ovale
- Hypertrophied infundibular muscle bundle causing Right ventricular outflow tract obstruction
- Right ventricle hypertrophied
- Preoperative nasal swab - Methicillin Resistant Staphylococcus Aureus

OPERATIVE PROCEDURE

Tran right atrial - Dacron patch closure of ventricular septal defect + Infundibular muscle bundle resection + Transannular patch (Right ventricular outflow tract and Main pulmonary artery augmentation with autologous unfixed pericardial patch) + Direct closure of patent foramen ovale done on 10/09/2024

Tricuspid valve checked with saline challenge. Right ventricular outflow tract and Main pulmonary artery administered full size Hegar No.12 freely. Right pulmonary artery admitted Hegar No.5 and Left pulmonary artery admitted Hegar No.7.

RESUME OF HISTORY

Rishu K is a 1 year and 3 months old male child (date of birth: 03/06/2023) from Bihar who is a case of congenital heart disease. He is 1st in birth order and is a product of full term LSCS (lower segment caesarian section) delivery. His birth weight was 3.5 kg. Maternal age is currently 20 years.



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Repeat Thyroid function test done on 17/09/2024 which revealed T3 3.32 pg/ml (normal range – 2.41 – 5.50 pg/ml), T4 2.68 ng/dl (normal range 0.96 - 1.77 ng/dl), TSH 1.290 μ IU/ml (normal range – 0.700 – 5.970 μ IU/ml).

Minimal enteral feeds were started on 3rd POD and cautiously and gradually advanced to full feeds by 4th POD. Oral feeds were started on 6th POD.

CONDITION AT DISCHARGE

His general condition at the time of discharge was satisfactory. Incision line healed by primary union. No sternal instability. HR 120/min, normal sinus rhythm. Chest x-ray revealed bilateral clear lung fields. Saturation in air is 99%. His predischarge x-ray done on 17/09/2024

In view of congenital heart disease in this patient his mother is advised to undergo fetal echo at 18 weeks of gestation in future planned pregnancies.

Other siblings are advised detailed cardiology review.

PLAN FOR CONTINUED CARE:

DIET : Semisolids diet as advised

Normal vaccination (After 6 weeks from date of surgery)

ACTIVITY: Symptoms limited.

FOLLOW UP:

Long term cardiology follow-up in view of:-

1. Possibility of recurrence of Right ventricular outflow tract obstruction

Review on 19/09/2024 in 5th floor at 09:30 AM for wound review

Repeat Echo after 6 - 9 months after telephonic appointment

Repeat Thyroid function test after 3 – 4 months

To review with neurologist in view post operative focal seizure



PROPHYLAXIS :

Infective endocarditis prophylaxis prior to any invasive procedure

MEDICATION:

1. Syp. Paracetamol 120 mg PO 6 hourly x one week
 2. Tab. Pantoprazole 10mg PO twice daily x one week
 3. Tab. Fluconazole 50 mg PO once daily x one week
 4. Syp. Lasix 5 mg PO thrice daily till next review
 5. Tab. Aldactone 4.5 mg PO thrice daily till next review
 6. Syp. Shelcal 2.5 ml PO twice daily x 3 months
 7. Tab. Thyroxine 12.5mcg PO once daily x 3 months and then repeat Thyroid function test (Empty Stomach)
 8. Syp. Levetiracetam 80 mg PO twice daily till next review
 9. Mupirocin ointment local application in the nose twice daily x 4 - 6 weeks
- All medications will be continued till next review except the medicines against which particular advice has been given.

Review at FEHI, New Delhi after 6 – 9 months after telephonic appointment
In between Ongoing review with Pediatrician

Sutures to be removed on 24/09/2024; Till then wash below waist with free flowing water

4th hrly temperature charting - Bring own your thermometer

- **Frequent hand washing every 2 hours**
➤ **Daily bath after suture removal with soap and water from 25/09/2024**

Telephonic review with Dr. Parvathi Iyer (Mob. No. 9810640050) / Dr. K. S. IYER (Mob No. 9810025815) if any problems like fever, poor feeding, fast breathing



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(DR. KEERTHI AKKALA)
(ASSOCIATE CONSULTANT
PEDIATRIC CARDIAC SURGERY)

K. S. Iyer

(DR. K.S. IYER)
(EXECUTIVE DIRECTOR
PEDIATRIC CARDIAC SURGERY)

Please confirm your appointment from (Direct 011-47134540, 47134541, 47134500/47134536)

- Poonam Chawla Mob. No. 9891188872
- Treesa Abraham Mob. No. 9818158272
- Gulshan Sharma Mob. No. 9910844814
- To take appointment between 09:30 AM - 01:30 PM in the afternoon on working days

OPD DAYS: MONDAY – FRIDAY 09:00 A.M

In case of fever, wound discharge, breathing difficulty, chest pain, bleeding from any site call
47134500/47134536/47134534/47134533

Patient is advised to come for review with the discharge summary. Patient is also advised to
visit the referring doctor with the discharge summary.



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