

DISCHARGE SUMMARY

PATIENT NAME: SHAHMEER ALI	AGE: 25 DAYS, SEX: M
REGN: NO: 13852219	IPD NO: 107759/25/1201
DATE OF ADMISSION: 22/05/2025	DATE OF DISCHARGE: 10/06/2025
CONSULTANT: DR. K. S. IYER / DR. NEERAJ AWASTHY	

DISCHARGE DIAGNOSIS

- Complex Cyanotic Congenital Heart Disease
- d-Transposition of great arteries
- Small perimembranous ventricular septal defect
- Small Patent ductus arteriosus
- Patent foramen ovale
- Coronaries: 1LCx, 2R
- Low birth weight 2.1 kg
- Failure to thrive (< 3rd Percentile); Z score < - 3 SD

OPERATIVE PROCEDURE

Arterial Switch Operation + Direct closure of ventricular septal defect + Patent ductus arteriosus double ligation and division + Direct closure of patent foramen ovale done on 28/05/2025

RESUME OF HISTORY

Shahmeer Ali is a 22 days old male infant (date of birth: 03/05/2025) from Delhi 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 2.1 kg, born to a consanguineous marriage. Maternal age is currently 26 years.

Soon after birth, he had history of desaturation and respiratory distress for which he was admitted in NICU. During evaluation, cardiac murmur was detected. Echo was done which revealed Congenital heart disease – d-Transposition of great arteries. He was referred to Fortis Escorts Heart Institute, New Delhi for further management

He was seen at FEHI, New Delhi on 17/05/2025. His saturation at that time was 78% with weight of 2.4 Kg. Echo was done which revealed normal segmental analysis, fossa ovalis atrial septal defect (3.5mm) left to right shunt, laminar inflow, d-Transposition of great arteries, restrictive subpulmonic ventricular septal defect (right to left shunt), max PG 58mmHg, laminar aortic outflow, mild flow acceleration across pulmonary valve (max Pg 20mmHg), confluent branch Pulmonary arteries with mild flow acceleration in branch Pulmonary arteries, Right pulmonary artery max PG 18mmHg, Left pulmonary artery max PG 13mmHg, left arch, good bolus of flow across arch with tiny posterior shelf (max PG 14mmHg), no diastolic spill, normal ventricular function, no Patent ductus arteriosus no left superior vena cava, tiny collateral, Coronaries – 1 – LAD, sinus II, RCA and LCx, Right pulmonary artery 2.8mm, Left pulmonary artery 3mm (Exp 3.5mm), LVIDd 1.7cm, LVIDs 1cm, LVPWd 0.29, LVFS 40%. He was advised surgical management.

Now he is admitted at FEHI, New Delhi for further evaluation and management. On admission, his saturation was 80% off oxygen and 92% on oxygen, His Hb 15.4g/dl and Hematocrit 47.6% on admission.

In view of his diagnosis, symptomatic status, echo findings he was advised early high risk surgery after detailed counselling of family members regarding possibility of prolonged stay as well as uncertain long term issues.

Weight on admission 2.4 kg, Height on admission 45 cm, Weight on discharge 2.42 kg

His Weight on admission 2.4 kg. Failure to thrive (< 3rd Percentile); Z score < - 3 SD

His blood Group B positive

Baby and his Mother SARS-COV-2 RNA was done which was negative.

MEDICATION:

1. Syp. Paracetamol 40 mg PO 6 hourly x one week
2. Tab. Pantoprazole 3 mg PO twice daily x one week
3. **Tab. Voriconazole 20 mg PO twice daily x 2 weeks**
4. Syp. Lasix 3 mg PO twice daily till next review
5. Tab. Aldactone 3.125 mg PO twice daily till next review
6. **Tab. Colsprin 15 mg PO once with feed till next review - not to be stopped**
(Dose of Colsprin to be increased (5mg/kg/day) according to weight gain upto maximum of 100mg once daily)
7. Syp. Shelcal 2.5 ml PO twice daily x 3 months
8. **Tab. Thyroxine 12.5mcg PO once daily x 3 months and then repeat Thyroid function test**
(Empty Stomach)
9. Nasoclear nasal drop 2 drop both nostril 4th hrly
10. Nebulization with normal saline 4th hrly

➤ All medications will be continued till next review except the medicines against which particular advice has been given.

Review at FEHI, New Delhi after 3 – 4 months after telephonic appointment
In between Ongoing review with Pediatrician

Sutures to be removed on 11/06/2025; Till then wash below waist with free flowing water

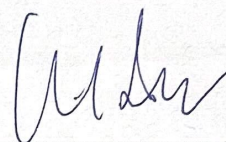
4th hrly temperature charting - Bring own your thermometer

- Frequent hand washing every 2 hours
- Daily bath after suture removal with soap and water from 12/06/2025

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



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



(DR. K.S. IYER)
(CHAIRMAN
PEDIATRIC & CONGENITAL HEART 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.