

# Discharge Summary

Dept. of PAEDIATRIC CARDIAC SURGERY



## General Information

<b>UHID</b>	APD1.0011188039	<b>Patient Identifier</b>	DELIP323577
<b>Ward/Bed No</b>	1st Floor, CTVS ICU, Bed no:2155		
<b>Name</b>	Master. TASAVVUR .		
<b>Age</b>	2Yr 3Mth 15Days	<b>Sex</b>	Male
<b>Address</b>	TAJPUR MAFI POST KATGHAR, Moradabad, Uttar Pradesh		
<b>Primary Consultant</b>	Dr. MUTHU JOTHI PAEDIATRIC CARDIAC SURGERY		
<b>Admission Date</b>	28-Jan-2021		
<b>Discharge Date</b>	04-Feb-2021		
<b>Allergies</b>	No Known		
<b>Diagnosis</b>	..		

Congenital heart defect (CHD) with Tricuspid Atresia with atrial septal defect(ASD) with DORV with Dextroposed aorta with pulmonary stenosis with Patent ductus arteriosus (PDA)

### Surgery/Procedure

- Bidirectional Glenn shunt on 29.01.2021 +
- Atrial septectomy +
- Ligation of Patent ductus arteriosus (PDA)

## Present Illness

### History of Present Illness

Master. TASAVVUR, a 2 years old child was diagnosed as a case of Congenital heart defect (CHD) at the age of 1.5 month. Child was having complaints of recurrent chest infection for which he has been hospitalized

many times. Child also having complaints of cyanosis which usually exacerbates on crying, playing or during winter session.

## Clinical Examination

**On Examination**      Conscious, oriented  
 Afebrile  
 Pulse Rate: 126/minute  
 Blood Pressure: 100/60 mmHg  
 Respiratory Rate: 28/minute  
 SpO2 : 76%  
 Cyanosis +  
 No clubbing / pedal edema / icterus / pallor / lymphadenopathy  
 Chest: Bilateral clear  
 Cardiovascular system: S1, S2 Normal / murmur / rub / gallop / murmur +  
 Per abdomen: Soft, No tenderness, No distension  
 Central nervous system: No focal neurological deficit

## Course In The Hospital & Discussion

Patient admitted, Echo done showing Tricuspid atresia with atrial septal defect (ASD) with DORV with severe pulmonary stenosis with D-malposed aorta with small Patent ductus arteriosus (PDA), adequate PA branch. Patient operated on 29.01.2021 bidirectional glenn shunt + atrial septectomy + PDA ligation done. Patient extubated on next day of surgery.

Inotropic support given with Dobutamine and Milrinone. Chest X-Ray : within normal limit. ECG :sinus tachycardia noted, managed with Ivabradine.

Feeding optimized gradually. Post operative Echo shows patent Glenn shunt, no obstruction. Normal ventricular function. No PE. Trace AV valve regurgitation.

Pre discharge Echo on 03.02.2021 showed ASD Right-Left shunt. Patent Glenn shunt (PG ~ 30 mm Hg), good flow seen in both PA branches. Normal ventricular function. No PE.

Patient is being discharge with vitals Pulse Rate 130/min, Respiratory Rate : 22/min, SpO2 : 87%.

## ADVICE ON DISCHARGE

**Diet**                      As advised

**Physical Activity**

- Following activity to be restricted for 3 months to allow breastbone (sternum) to completely heal: Avoid rough play or activities likely to injure the chest wall: bicycling, climbing, rollerblading, skateboarding or contact sports for 6 months.
- Not to lift objects weighing more than 3- 5 kg (backpacks, younger siblings, pets, etc.) for

3 months.

- To keep arm immobilized for 24hrs after pacemaker placement.
- Avoid lifting the arm above the head. Lift the baby by holding under the arms for 4 weeks.

**Discharge Medication**

Syp Furuped 1 ml per orally twice a day  
 Tab Aldactone 25 (½ tab) per orally once a day  
 Tab Lanjol JR 15 mg 1 tab per orally once a day  
 Tab Ecosprin 75 mg 1 tab per orally once a day  
 Tab Envas 25 mg ½ tab per orally twice a day  
 Syp Calcimax Total 10 ml per orally thrice a day  
 Syp Dixon 1 ml per orally twice a day

**Other advice**

- Bacterial endocarditis prophylaxis as advised.
- Fetal echo of mother to be done at 18 weeks during the next pregnancy.
- Live vaccination after 3 months.

**Follow up**

Follow up with surgeon Dr. Muthu Jothi after 2 days, with prior appointment.

**Pending Reports**

Kindly bring a copy of your bill to collect the pending reports from gate no-4(from respective labs & Gate No:7 for Radiology Reports)on week days,Monday to Saturday(8am-8pm)and Sunday(8am-2pm). You can also download the reports from Apollo Prism app.To login, kindly use your registered mobile number.

**IF you have any of following symptoms,contact your doctor or our Emergency Physician on +911126925888/26825555/29872001/2003**

1. Fever Of 101°F
2. Onset of new pain or worsening of previous pain.
3. Vomiting.
4. Breathing difficulty.
5. Altered level of consciousness.
6. Discharge from the operative wound.
7. Worsening of any symptoms.
8. Other significant concerns.

**Thank you for choosing Apollo Hospital for your healthcare needs.**

Dr. MUTHU JOTHI  
 PAEDIATRIC CARDIAC SURGERY  
 Primary Consultant

  
 Registrar/Resident

Please understand your discharge prescription from your doctor before using the medicines.

You can contact Emergency Room Physician, INDRAPRASTHA MEDICAL CORPORATION LIMITED at 26925858 or 1066.