

DISCHARGE SUMMARY

PATIENT NAME: AVYAN DUBEY	AGE: 3 YEARS, 3 MONTHS & 4 DAYS, SEX: M
REGN: NO: 14293767	IPD NO: 279198/25/1201
DATE OF ADMISSION: 28/12/2025	DATE OF DISCHARGE: 05/01/2026
CONSULTANT: DR. K. S. IYER / DR. NEERAJ AWASTHY	

DISCHARGE DIAGNOSIS

- Acyanotic congenital heart disease with increased pulmonary blood flow
- Large restrictive Perimembranous ventricular septal defect restricted by aneurysmal Septal tricuspid leaflet
- Dilated left atrium and left ventricle
- Trisomy 21 – (47 XY +21)
- Failure to thrive (< 3rd Percentile); Z score < - 3 SD

OPERATIVE PROCEDURE

Trans right atrial – Dacron patch closure of ventricular septal defect done on 29/12/2025

Tricuspid valve checked with saline and found competent.

RESUME OF HISTORY

Avyan Dubey is a 3 years old male child (date of birth: 25/09/2022) from Allahabad who is a case of congenital heart disease. He is 2nd in birth order and is a product of full term LSCS (lower segment caesarian section) delivery. His birth weight was 2.5 kg. Maternal age is currently 42 years. 1st sibling is apparently well (14 years old boy).

On evaluation he had phenotypic features of Trisomy 21 which was confirmed on karyotyping which revealed 47 XY +21 done on 25/11/2023 outside.

CONDITION AT DISCHARGE

His general condition at the time of discharge was satisfactory. Incision line healed by primary union. No sternal instability. HR 110/min, normal sinus rhythm. Chest x-ray revealed bilateral clear lung fields. Saturation in air is 100%. His predischarge x-ray done on 3/01/2026

In view of advanced maternal age, preferably she is advised not to have any more pregnancies
Other siblings are advised detailed cardiology review.

PLAN FOR CONTINUED CARE:

DIET : Normal 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. Large ventricular septal defect closure

Review on 06/01/2026 in 5th floor at 09:30 AM for wound review

Repeat Echo after 9 - 12 months after telephonic appointment

Repeat Thyroid function test after 3 – 4 months

Long term Neurodevelopmental review in view of Trisomy 21

PROPHYLAXIS :

Infective endocarditis prophylaxis prior to any invasive procedure

MEDICATION:

1. Syp. Paracetamol 150 mg PO 6 hourly x one week
2. Tab. Pantoprazole 10 mg PO twice daily x one week
3. Syp. Lasix 10 mg PO twice daily till next review
4. Tab. Aldactone 4.5 mg PO twice daily till next review
5. Syp. Shelcal 5 ml PO twice daily x 3 months
6. Tab. Thyroxine 25mcg PO once daily x 3 months and then repeat Thyroid function test
(Empty Stomach)

7. Nasoclear nasal drop 2 drop both nostril 4th hrly
8. Nebulization with normal saline 4th hrly

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

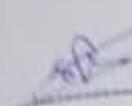
Review at FEHI, New Delhi after 9 – 12 months after telephonic appointment
In between Ongoing review with Pediatrician

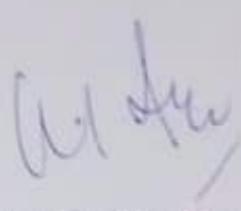
Sutures to be removed on 12/01/2026; Till then wash below waist with free flowing water

4th hrly temperature charting - Bring your own thermometer

> Daily bath after suture removal with soap and water from 13/01/2026

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. SNEH LALWANI)
(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.