Fortis Escorts
HEART INSTITUTE

Escorts Heart Institute and
Research Centre Ltd.
Okhla Road, New Delhi - 110 025 (India)
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Website : www.fortishealthcare.com
A NABH Accredited Institute

DISCHARGE SUMMARY

PATIENT NAME: AYANSH	AGE: 3 MONTHS & 19 DAYS, SEX: M
REGN: NO: 15257471	IPD NO: 153746/26/1201
DATE OF ADMISSION: 08/07/2026	DATE OF DISCHARGE: 25/07/2026
CONSULTANT: DR. K. S. IYER / DR. NEERAJ AWASTHY	

1. S/P Coarctation of aorta repair (extended resection and end to end anastomosis) via Left posterolateral Thoracotomy on 11/04/2026 at Career Institute of medical Science and Hospital, Lucknow for
    - Congenital heart disease
    - Severer coarctation of aorta
2. Now presented with
    - Re-coarctation of Aorta with Hypoplastic transverse arch
    - Aortic aneurysm due to Coarctation of aorta anastomotic site dehiscence and Thrombosis in proximal descending thoracic aorta
    - Dilated left atrium and left ventricle
    - Main pulmonary artery & branches dilated, Soft
    - Normal Coronaries
    - S/P Ballooning of Coarctation of aorta attempted, but abandoned in view of surprising cystic aortic aneurysm on 09/07/2026 at Fortis Escorts Heart Institute, New Delhi
    - Failure to thrive (< 3rd Percentile); Z score < - 3 SD

OPERATIVE PROCEDURE

Aortic aneurysm repair + Coarctation of aorta repair with Transverse arch augmentation with treated pericardial patch + Removal of Thrombus from descending thoracic aorta through median sternotomy done on 11/07/2026

His pre-operative liver functions showed (SGOT/SGPT = 41/15 IU/L, S. bilirubin total 0.42 mg/dl, direct 0.23 mg/dl, Total protein 7.6 g/dl, S. Albumin 4 g/dl, S. Globulin 3.6 g/dl Alkaline phosphatase 425 U/L, S. Gamma Glutamyl Transferase (GGT) 158 U/L and LDH 338 U/L).

He had mildly deranged liver functions on 1st POD (SGOT/SGPT = 57/23 IU/L, S. bilirubin total 1.40 mg/dl & direct 0.72 mg/dl and S. Albumin 3.4 g/dl) and repeat (SGOT/SGPT = 48/19 IU/L, S. bilirubin total 0.63 mg/dl & direct 0.33 mg/dl and S. Albumin 3 g/dl).

On 2nd (SGOT/SGPT = 28/13 IU/L, S. bilirubin total 0.45 mg/dl & direct 0.23 mg/dl and S. Albumin 2.8 g/dl).

This was managed with avoidance of hepatotoxic drug and continued preload optimization, inotropy and after load reduction. His liver function test gradually improved. His other organ parameters were normal all through.

His predischarge liver function test are SGOT/SGPT = 28/16 IU/L, S. bilirubin total 0.41 mg/dl, direct 0.24 mg/dl, Total protein 4.9 g/dl, S. Albumin 2.9 g/dl, S. Globulin 2 g/dl Alkaline phosphatase 133 U/L, S. Gamma Glutamyl Transferase (GGT) 98 U/L and LDH 394 U/L).

Thyroid function test done on 11/07/2026 which revealed T3 2.56 pg/ml (normal range – 1.95 – 6.04 pg/ml), T4 1.65 ng/dl (normal range 0.89 – 2.20 ng/dl), TSH 0.609 µIU/ml (normal range – 0.720 – 11.000 µIU/ml).

Minimal enteral feeds were started on 6th POD and cautiously and gradually advanced to full feeds by 9th POD. Oral feeds were started on 13th POD.

CONDITION AT DISCHARGE

His general condition at the time of discharge was satisfactory. Incision line healed by primary union. No sternal instability. HR 110-120/min, normal sinus rhythm. Chest x-ray revealed bilateral clear lung fields. Saturation in air is 100%. His predischarge x-ray done on 23/07/2026

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 : Breast feeds / Spoon feeds 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 Coarctation of aorta**

Review on 27/07/2026 in 5th floor at 09:30 AM for wound review

Repeat Echo after 3 - 4 months after telephonic appointment

PROPHYLAXIS :

Infective endocarditis prophylaxis prior to any invasive procedure

MEDICATION:

1. Syp. Paracetamol 60 mg PO 6 hourly x one week
2. Tab. Pantoprazole 5 mg PO twice daily x one week
3. Syp. Lasix 5 mg PO twice daily till next review
4. Tab. Aldactone 3.125 mg PO twice daily till next review
5. Syp. Shelcal 2.5 ml PO twice daily x 3 months
6. **Clotrimazole (Candid) mouth paint for local application**
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 3 – 4 months after telephonic appointment
In between Ongoing review with Pediatrician

Sutures to be removed on 27/07/2026; 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 28/07/2026**

Telephonic review with Dr. Parvathi Iyer (Mob. No. 9810640050) / Dr. K. S. IYER (Mob No. 9810025815)

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(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, poor feeding, fast breathing, breathing difficulty, chest pain, wound discharge, 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.