

DISCHARGE SUMMARY

PATIENT NAME: ARSH SHESH	AGE: 11 MONTHS & 14 DAYS, SEX: M
REGN: NO: 14366819	IPD NO: 35437/26/1201
DATE OF ADMISSION: 17/02/2026	DATE OF DISCHARGE: 25/02/2026
CONSULTANT: DR. K. S. IYER / DR. NEERAJ AWASTHY	

DISCHARGE DIAGNOSIS

- **Complex Congenital Heart Disease**
- **ALCAPA (Anomalous Left Coronary Artery arising from the Main Pulmonary artery)**
- **Coronaries:- Right coronary artery arising normally from right sinus, tortuous and dilated, multiple collaterals present, Left coronary artery: single ostium arising from the posterolateral aspect of Main pulmonary artery**
- **Mild left ventricular dysfunction (LVEF 35%)**
- **Moderate mitral regurgitation**
- **Dilated left atrium and left ventricle**
- **Late presentation**

OPERATIVE PROCEDURE

ALCAPA repair (Translocation of the Left Coronary artery to the Aorta) done on 18/02/2026

Epicardial Echo Showed mild mitral regurgitation with normal annulus, leaflet and subvalvular apparatus. Hence the plan for mitral valve repair was deferred.

RESUME OF HISTORY

Arsh Shesh is a 11 months old male child (date of birth: 04/03/2025) from Gorakhpur (Uttar Pradesh) who is a case of congenital heart disease. He is 3rd in birth order and is a product of full term normal vaginal delivery. His birth weight was 3 kg. Maternal age is currently 35 years. Other two siblings are apparently well (14 years and 6 years old boy).

CONDITION AT DISCHARGE

His general condition at the time of discharge was satisfactory. Incision line healed by primary union. No sternal instability. HR 120-130/min, normal sinus rhythm. Chest x-ray revealed bilateral clear lung fields. Saturation in air is 96-98%. **His predischarge x-ray done on 24/02/2026**

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 : Fluid restricted 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. ALCAPA repair - Aspirin therapy**
- 2. Mild + mitral regurgitation**

Review on 26/02/2026 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 125 mg PO 6 hourly x one week
2. Tab. Pantoprazole 10 mg PO twice daily x one week
3. Syp. Lasix 10mg PO twice daily till next review
4. Tab. Aldactone 3.125 mg PO twice daily till next review
5. **Tab. Colsprin 40 mg PO once with feed x 6 months**
6. Syp. Shelcal 2.5 ml PO twice daily x 3 months
7. **Tab. Enalapril 1.5 mg PO twice daily till next review**

8. **Nasoclear nasal drop 2 drop both nostril 4th hrly**
9. **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 05/03/2026; 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 06/03/2026**

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



**(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, 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.