

DISCHARGE SUMMARY

PATIENT NAME: BABY OF NIDA	AGE: 14 days (DOB 19/03/2026) ; SEX: FEMALE
REGN NO: 14463854	IPD NO: 65784/26/1201
DATE OF ADMISSION: 28/03/2026	DATE OF DISCHARGE: 02/04/2026
CONSULTANTS: DR. NEERAJ AWASTHY	

FINAL DIAGNOSIS

- Cyanotic congenital heart disease
- Tricuspid atresia
- FO ASD
- Large VSD
- Severe PS
- PDA dependent pulmonary circulation
- Normal Sinus Rhythm
- Normal LVEF
- S/P PDA stenting using ONYX FRONTIER coronary Stent (3 mm X 18 mm) on 28/03/2026.

INVASIVE PROCEDURE

PDA STENTING USING ONYX FRONTIER CORONARY STENT (3 MM X 18 MM) ON 28/03/2026

RESUME OF HISTORY

BABY OF NIDA is a 14days old female, 2nd in birth order, born at term via LSCS delivery with birth weight of 2.5 kg, cried immediately after birth, was apparently alright till 3rd day of life after which she developed jaundice for which admitted for phototherapy. On 5 days of life she developed cyanosis, difficulty in feeding and fast breathing for which shifted to NICU and oxygen was started. Echo done suggestive of congenital heart disease and she was referred to higher center. She is now admitted at Fortis Escorts Heart Institute, New Delhi in emergency for further medical management.

On examination, her pulse rate was 135/min regular, RR 50/min. Saturation of 75 %. There was cyanosis and tachypnea present, but no pallor, clubbing, jaundice or edema. Bilateral air entry present. Precordial examination revealed apex in left 4th ICS at MCL. S1 normal, S2 single. Rest of the systemic examination was unremarkable.

WT ON ADMISSION : 2.4 KG

HEIGHT ON ADMISSION : 44CM

ECHO

: Done on 28/03/2026 revealed situs solitus, levocardia, D-loop. NREGA, AV-VA concordance, normal drainage of systemic and pulmonary veins. ASD 7mm (bidirectional shunt). Laminar LV inflow and outflow. Normal systemic and tricuspid atresia. Hypoplastic RV. Severe pulmonary stenosis, amounting to pulmonary atresia, confluent pulmonary branch arteries. PDA (left to right shunt), duct dependent pulmonary circulation. Left arch. Laminar flow in arch. No coarctation of aorta. No LSVC, normal LVEF. No collection.

PRE-DISCHARGE ECHO

Done on 02/04/2026 revealed PDA stent in situ with good bolus of flow in branch PAs. Laminar flow across arch. No coarctation of aorta. Tricuspid atresia. Large VSD. Laminar aortic outflows. LVEF normal. No collection.

COURSE IN THE HOSPITAL

BABY OF NIDA was admitted in Fortis Escorts Heart Institute, New Delhi for further management. Base line investigations were sent. Echo, Chest X ray and ECG was done. She underwent PDA stenting using ONYX FRONTIER coronary Stent (3 mm X 18 mm) on 28/03/2026 (detailed report attached). Post procedure she was continued on mechanical ventilatory support. She was started on IV milrinone and Heparin infusion, IV antibiotic (Piptaz, Amikacin and fluconazole). Gradually she was weaned off ventilatory support once hemodynamics stabilized and extubated. Her inotropic support was gradually tapered off. Heparin was stopped and started on Aspirin and clopidogrel. Feeds were started and gradually increased to full feeds. She is maintaining saturation around 88% on room air, and is being discharged in stable condition with advice for regular follow up.

CONDITION AT DISCHARGE: Stable

Saturation at discharge = 88% on room air

PLAN FOR CONTINUED CARE:

➤ TO SEE DR. NEERAJ AWASTHY AFTER ONE WEEK IN PEDIATRIC ECHO LAB

DIET : breastfeed/ katori spoon feed

MEDICATIONS

- Tab Aspirin 10mg orally once daily
- Tab Clopidogrel 2.5mg orally once daily
- Tab Lanzole JR 5mg orally once daily
- Syp. Osteocalcium 2.5ml orally thrice daily
- Drop Vitamin D3 1ml orally once daily X till 1 year of age

Signature _____

(DR. SOURYA)

(FELLOW IN PEDIATRIC CARDIOLOGY)

Signature _____

(DR. NEERAJ AWASTHY)

(DIRECTOR, PEDIATRIC & CONGENITAL HEART DISEASE)

Patient to be followed in cardiac clinic by DR. NEERAJ AWASTHY on first appointment. Please confirm your appointment from the appointment section (Direct 011-47134921).

Tele consultation with DR. NEERAJ AWASTHY call customer care 011-47134500 (12:00 pm to 2:00 pm)

All appointment may be taken from the appointment section 011-47134921

Patient is advised to come for review with the discharge summary.