

DISCHARGE SUMMARY

PATIENT NAME: SHAKIR SHAMSAD	AGE: 5 MONTHS & 9 DAYS, SEX: M
REGN: NO: 13428419	IPD NO: 220908/24/1201
DATE OF ADMISSION: 11/11/2024	DATE OF DISCHARGE: 21/11/2024
CONSULTANT: DR. K. S. IYER / DR. NEERAJ AWASTHI	

DISCHARGE DIAGNOSIS

- Congenital Acyanotic Heart Disease with increased Pulmonary blood flow
- Single ventricle physiology
- Large inlet ventricular septal defect with type 3 straddling of tricuspid valve
- Normally related great arteries
- Cleft mitral valve
- Mild mitral regurgitation
- Mild tricuspid regurgitation
- Severe failure to thrive (< 3rd Percentile); Z score < - 3 SD
- ? Down's syndrome

OPERATIVE PROCEDURE

Pulmonary artery banding through upper mini-sternotomy done on 12/11/2024

RESUME OF HISTORY

- Shakir Shamsad is a 5 months old male infant (date of birth: 03/06/2024) from Begusarai (Bihar) who is a case of congenital heart disease. He is 4th in birth order and is a product of full term normal vaginal delivery. His birth weight was 2 kg, born to a non-consanguineous marriage. Maternal age is currently 32 years. Other siblings are apparently well.



CONDITION AT DISCHARGE

His general condition at the time of discharge was satisfactory. Incision line healed by primary union. No sternal instability. HR 120/min, normal sinus rhythm. Chest x-ray revealed bilateral clear lung fields. Saturation in air is 100%. His predischarge x-ray done on 18/11/2024.

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.

In view of advanced maternal age, the mother had been advised to do chorionic villus sampling or amniocentesis early in any future pregnancy to exclude Down's syndrome and she has also been advised a detailed congenital anomaly scan in next pregnancy.

Other siblings are advised detailed cardiology review.

PLAN FOR CONTINUED CARE:

DIET : Breast feeds / Spoon feeds 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. Palliative surgery - Pulmonary artery banding

Review on 22/11/2024 in 5th floor at 09:30 AM for wound review

Repeat Echo after 6 - 9 months after telephonic appointment



PROPHYLAXIS :

Infective endocarditis prophylaxis prior to any invasive procedure

MEDICATION:

1. Syp. Paracetamol 50 mg PO 6 hourly x one week
 2. Tab. Pantoprazole 5 mg PO twice daily x one week
 3. Syp. Lasix 3 mg PO twice daily till next review
 4. Tab. Aldactone 2 mg PO twice daily till next review
 5. Syp. Shelcal 2.5 ml PO twice daily x 3 months
 6. Nasoclear nasal drop 2 drop both nostril 4th hrly
 7. 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 6 – 9 months after telephonic appointment
In between Ongoing review with Pediatrician

Sutures to be removed on 26/11/2024; Till then wash below waist with free flowing water

4th hrly temperature charting - Bring own your thermometer

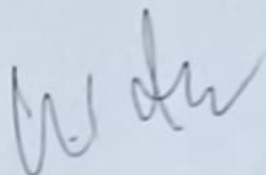
- Frequent hand washing every 2 hours
➤ Daily bath after suture removal with soap and water from 27/11/2024

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. KEERTHI AKKALA)
(ASSOCIATE CONSULTANT
PEDIATRIC CARDIAC SURGERY)



(DR. K.S. IYER)
(EXECUTIVE DIRECTOR
PEDIATRIC CARDIAC 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.



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