सेवा मे

Save the Child
Smile Foundation
Sushant Vihar, Delhi -110036

विषय = गरिब व्यक्ति कि सहायता हेतु प्रार्थना पत्र।

महोदय,

सविनय निवेदन यह है कि मै मैहर चन्द मेरा पुत्र रोहन। मेरे पुत्र का ईलाज AIIMS मे चल रह है। मेरे पुत्र का Heart Disorder है जिसमे Rs 1,65 000/- का खर्चा है। मे बहुत गरिब व्यक्ति हुँ कृपया आप मेरी आर्थिक सहायता कर दिजिए। जिससे मे अपने पुत्र का ईलाज करवा सकुँगा। कृपा आप मेरी Rs 1,65 000/- की सहायता कर दिजिए। मे आपका सदा आभारी रहुँगा।

धन्यवाद

निवेदक
मैहर
(मैहर चन्द)
Address
H.No.- 1729
इन्द्रा नगर
फरीदाबाद, सेक्टर-7
हरियाणा - 121006

CARDIO - THORACIC CENTRE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI-110029

Date : 2/8/24

ESTIMATE CERTIFICATE / अनुमानित व्यय प्रमाण पत्र

Name of Patient Mr./Ms./ रोगी का नाम श्रीमान/श्रीमती Rohan

Age/ उम्र 12 yrs. Sex / लिंग M CV No. / CTVS No. / सीवी संख्या/सीटीवीएस संख्या 474/13

UHID No. / यूएचआईडी संख्या 201300010962

Nature of Disease / रोग का नाम P/o ASD + VSD closure c multiple VSD's

Nature of Surgery / Procedure required / सर्जरी/प्रक्रिया की आवश्यकता P.A Bandeij (Rule)

Units of Blood required for operation / ऑपरेशन के लिये आवश्यक रक्त की यूनिट 4D unit blood

Package charges for Surgery / Procedure / सर्जरी/प्रक्रिया के लिये पैकेज शुल्क Rs 1,65,000/-

The above mentioned amount must be deposited in advance by bank draft / Electronic transfer drawn in

favour of **"AIIMS PATIENT'S ACCOUNT"** / **"AIIMS ANGIOGRAPHY PATIENT'S ACCOUNT"**

(A/c No. 10874584258, IFSC Code : SBIN0001536) **(A/c No. 10874584269, IFSC Code : SBIN0001536)**

(for CTVS Surgical Patients) **(for Cardiology Patients)**

The said estimate will be valid for employees of CGHS/ESI/Govt. undertakings and their beneficiaries. This will also be applicable for seeking financial assistance from National Illness Fund, Prime Minister Relief Fund & from other sources.

उपयुक्त राशि को नीचे दिये गए सम्बंधित पक्ष में बैंक ड्राफ्ट / इलेक्ट्रोनिक हस्तांतरण द्वारा अग्रिम रूप से जमा किया जाना चाहिए ।

"एम्स सीटी पेशेंट अकाउंट" / "एम्स एन्जिओग्राफी पेशेंट अकाउंट"

(A/c No. 10874584258, IFSC Code : SBIN0001536) **(A/c No. 10874584269, IFSC Code : SBIN0001536)**

(सी.टी.वी.एस. सर्जरी मरीजों के लिए) (कार्डियोलॉजह मरीजों के लिए)

अनुमानित व्यय सीजीएचएस/ईएसआई/सरकार स्वायत संख्या और उनके लाभार्थियों तथा कर्मचारियों के लिए भी मान्य होगा । यह राष्ट्रीय आरोग्य निधि प्रधान मंत्री राहत कोष और अन्य स्त्रोतो से वित्तीय सहायता मांगने के लिये भी लागू होगा ।

For any query related to package charges / money deposition, please contact Accounts Section Room No. 105 (Basement, C. N. Centre)

पैकेज शुल्क / रूपये जमा करने से सबंधित किसी भी पूछताछ के लिए, कृपया लेखा अनुभाग कमरा न. 105 (बेसमेंट, सी.एन. सेंटर) में सपंर्क करे ।

Dept. of C.T.V.S.
C.N. Centre, A.I.I.M.S., New Delhi

(Signature & Rubber Stamp of Consultant)

भारत सरकार
GOVERNMENT OF INDIA

रोहन
Rohan
जन्म तिथि/ DOB: 23/09/2012
पुरुष / MALE

8268 1557 5213

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
आत्मज: मेहर चन्द, हाउस न
1729, इन्द्रा नगर,
फरीदाबाद सेक्टर ७,
फरीदाबाद,
हरियाणा - 121006

Address:
S/O: Meher Chand, house no
1729, indra nagar, Faridabad
Sector 7, Faridabad,
Haryana - 121006

8268 1557 5213

MERA AADHAAR, MERI PEHACHAN

भारत सरकार
GOVERNMENT OF INDIA

मीना देवी
Meena Devi
जन्म तिथि/ DOB: 01/05/1991
महिला / FEMALE

6107 1596 7584

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
अर्धांगिनी: महेरचंद, 1729,
गली न-8, इन्द्रा नगर,
फरीदाबाद सेक्टर ७,
फरीदाबाद,
हरियाणा - 121006

Address:
W/O: Maherchand, 1729, Gali no-8, Indra Nagar, Faridabad Sector 7, Faridabad, Haryana - 121006

6107 1596 7584

MERA AADHAAR, MERI PEHACHAN

Save the Child
Smile foundation

SMILE FOUNDATION

Plot No 80, Kh, No 250, Gali No 28, Sushant Vihar Village Delhi 110036 Near Sunny Builder
Ph.: +91 9266897167, 8743917285 Email : support@stcsfoundation.org
Web : www.stcsfoundation.org

Sponsorship form for a Disabled Child Treatment/ Education

Name : Rohan

Date of Birth : 23/09/2012

Disease/ Disability : P/O ASD + VSD closure C. Multiple VSDs

Treatment Prescribed : PA Bandej (Rule)

Add of rehab centre/School : AIIMS NEW DELHI

Father/mother/guardian Name: Meherchand

Occupation : Labour Income PM 5,000/-

No. of Earning Members : 1 member

Any financial assistance for the same purpose if yes received form...../Requested Elsewhere..... No

Expense on Treatment

- Purchase of Rehabilitation equipment
- Therapy equipment. Music equipment
- Specific therapies/play therapy
- Muscle relaxant drugs
- Botox phenol/nerve block
- Hyperbaric oxygen therapy
- Reflexology
- Special education/ speech/therapy
- Any other /surgeries

Total Amount : Rs 1,65,000/-

I declare that the information given above is correct and complete in all respect and I am not in position to arrange funds for treatment/ special education of my child.

मेहर
Signature parent

वरिष्ठ निवासी डॉक्टर / Senior Resident
सी.टी.वी.एस. विभाग / Deptt. of C.T.V.S.
एम्स, नई दिल्ली / AIIMS, New Delhi
physician/ doctor's signature

Date - 2/8/24

दिनांक
Date

Chang. asst.

Rd 11 ⇒ 6/9/22

Tab. ⓐ . - Gt medication
- Pt on Tel.

Rd 25

7/ASD, residual VHD,
Sev. PAH (CC)

plan

NYHA II

- ~~Bosentan~~ .
- ~~Echo~~ .
- Tab. Bosentan (62.5 mg)
½ — ½ .

100

on physical file

- Tab. CARDIVAS 3.125 mg
- ~~Chloroquine~~
- Dental hygiene .
- ~~Cap~~ Syp. Vitcofol 7.5 ml PO OD

14

SpO2 → 95%.

Auscultate.

Mon, Fri

टेली कार्डियोलॉजी अपॉइंटमेंट
मोबाइल नंबर 8929936750
समय सुबह 9:30 बजे और शाम 5:00 बजे (सोमवार से शुक्रवार) तक।

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब० रो० वि०
अ० भा० आ० सं०, नई दिल्ली-110029

हृदय रोग विज्ञान / सीटीवीएस ओपीडी
CARDIOLOGY/CTVS OPD
सोमवार / मंगलवार / शुक्रवार
Monday/Wednesday/Friday
दोपहर के बाद
Afternoon

Cardiothoracic & Neurosciences Centre, O.P.D.
A.I.I.M.S., New Delhi-110029

दिनांक/Date 20130010962 CTVS- 72859

विभाग Deptt. C	नाम Name ROHAN	उम्र Age 10
यू०एच०आई०डी०सं० UHID No. 474/13	पुत्र/पुत्री/पत्नी S/D/W	लिंग Sex M
	निदान Diagnosis	

10 yr old

POST ASO + VSD patch closure (2013)

Residual VSD | Sev-PAH | Mod-TR | Sev-WMD | RV dysfn. (+).

(Class I)

Spo - Remains 95%

TO CCST.

RTA 6 months.

Please share your feedback to improve our hospital on the Website link: meraaspataal.nhp.gov.in

LH3103231567 20130010962
RCHAN

~~P/ ASD + VSD patch closure Residual~~
P/ ASD + VSD patch closure (Residual VSD - Sec. PAH. (Obstructive)

Ward
SpO2 Room: 89% WEF 404.
Lpose: 88%
Eq.
NWD - 274m

Plan
- Telemonitoring
- continue same med

Class II
Residual VSD
Some PAH
Some Br dysfunction

Adv
Echo Review
CST

Dr Anand

(M) A
BC, RFT, LFT)

R.21 (20)
22/12/23

R.21 (23)
5/1/24

Please share

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब० रो० वि०
अ० भा० आ० सं०, नई दिल्ली-110029
Cardiothoracic & Neurosciences Centre, O.P.D.
A.I.I.M.S., New Delhi-110029

दिनांक/Date 2-1-2010962

विभाग Deptt.	नाम Name	उम्र Age
	Rohan	10

यू०एच०आई०डी०सं० UHID No.	पुत्र/पुत्री/पत्नी S/D/W	लिंग Sex
424/13		M

निदान
Diagnosis

6/1/24

TGA VSD PAH

P) Asst VSD cl 2013

Residual VSD / Sev Dist dysfn

Sev PAH on MR

CRetard PA band by CVS

Heart OPD

21/5/24

⇒

8/8/24

4

① TAB Bisoprolol 62.5mg OD

② TAB Cardivas 3.125mg BD

③ TAB Syp. Vitcal IHB OD

④ ~~TAB~~

Please share your feedback to improve our hospital on the Website link: meraaspataa;.nhp.gov.in

8/11/24

दिनांक
Date

11 year old wt: 22 kg

P/Aso + VSD closure - 2013

Residual VSD / severe PAH

severe RV dysfunction

class III

PSM ⓑ . GDM ⓟ

cyanosis ⓟ .

R·21 (28)

31/3/24

Rx

① T. Lasilactone (20/50) ½ BD

② T. Envas 1.25 mg BD.

③ T. Bosentan 62.5 mg BD

④ T. Cardivas 3.125 mg BD

⑤ Cap Intas OD

Echo - 1W.

21/9/23

· Echo · 9 AM · Friday (62) — (SRD)

Dr Saravanan · · Residual VSD shunty BDS.
· · Mild TR RVSP: RAP+90.
· · Severe PR+.
EDG : 62.
Mitral DG :
· · Mild LV dysf EF - 40% no LVOTO. Trivial AR

Sr
23/9/23

31/3/23

Monday. 4pm. (62) Dr. Saravanan/ Dr Lavak

(operability)

Dr Saravanan

3/6/24

(62) Mon 4pm vent & AVR

Residual VSD ⊕ shunty mod RVSP 80 mmHg
mild PR
Severe PR. (EDG: 45).
mild MR Trivial TR
Severe BV dysfunction
LVEF ~ 25%
No RE/clot/veg
Severe PAH

SP advise

ECHOCARDIOGRAPHY REPORT

DEPARTMENT OF CARDIOLOGY, CARDIOTHORACIC CENTRE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

NAME Rehan AGE 8yr SEX M/F DATE 23/6/21

ECHO No. CV No. UHID No. 20130010962 C.R. No.

HEIGHT cm WEIGHT 18 kg. BSA m² Ref. Physician

Referring Diagnosis

Quality of Imaging Poor/Adequate/Good Done by Dr Ankur Checked by Dr.

MITRAL VALVE

Morphology AML - Normal/Thickening/Calcification/Flutter/Vegetation/ Prolapse/ SAM/ Doming
PML Normal/ Thickening / Calcification/ Prolapse/Paradoxical motion/Fixed.
Subvalvular deformity Present/ Absent Score

Doppler Normal / Abnormal
Mitral stenosis Present / Absent RR interval msec
EDG mmHg MDG mmHg MVA cm2
Mitral regurgitation Absent/Trivial/Mild/Moderate/Severe

TRICUSPID VALVE

Morphology Normal/ Atresia/ Thickening/ Calcification/ Prolaps/ Vegetation/ Doming

Doppler Normal/ Abnormal
Tricuspid stenosis Presentt/Absent RR interval msec
EDG mmHg MDG mmHg
Tricuspid regurgitation Absent/Trivial/Mild/Moderate/Severe Fragmented Signals
Valocity m/sec Pred. RSVP-RAP 30 mmHg

PULMONARY VALVE

Morphology Normal/Atresia/Thickening/Doming/Vegetation

Doppler Normal/Abnormal
Pulmonary stenosis Present/Absent Level
PSG mmHg Pulmonary annulus mm
Pulmonary regulation Present/Absent
Early diastolic gradient mmHg End diastolic gradient mmHg

mPAP = GI + PAP

AORTIC VALVE

Morphology Normal / Thickening/Calcification/Restricted Opening/Flutter/Vegetation No. or cusps 1/2/3/4

Doppler Normal / Abnormal
Aortic stenosis Presnnt/Absent Level
PSG mm Hg Aortic annulus mm
Aortic regurgitation Absent/ Trivial/Mild/Moderate/Severe

Echocardiography report

Measurements		Normal Values		Normal Valu
Aorta	14.7	(21-22mm/m²)	LA es 23	(21-22 mm/m
LV es	38	(1?-19mm/m²)	LV ed 51	(19-32 mm/m
IVS ed	8.3	(06-10mm)	PW(LV)ed 8.4	(07-11mm)
RV ed		(4-14mm/m²)	RV Anterior wall	(upto 5mm)
EF	15-20%	(62-80%)		
IVS Motion		Normal/Flat/Paradoxical		
IAS				

CHAMBERS

	Normal/Enlarged/Clear/Thrombus/Hypertrophy
	Contraction Normal/Reduced
LA	Normal/Enlarged/Clear/Thrombus
RA	Normal/Enlarged/Clear/Thrombus
RV	Normal/Enlarged/Clear/Thrombus

PERICARDIUM Normal/Thickened/Calcification/Effussion.

REMARKS

Post ASO + VSD closure with patch (25/3/13)

Multiple mid M/s VSD + apical VSD (R→L)

- Arch not clear

TEE

Severe Biventricular dysft

IVC → 16 mm
< 50% collapsibility

RV S' → 7 TAPSE → 12 mm

Mod TR RVSP = 80 + RAP

Mod PR MPAP = 61 + RAH

Sev PAH. Mild AR

DIAGNOSIS

Final Impression

Post ASO + VSD closure with patch / Multiple mid M/S VSD + apical / Severe Biventricular dysft / Sev PAH

Resident

Consultant

P/Δ1o + Subpulmonic VSD closure

→ Multiple Mid Muscular & Apical Muscular VSDs (+)
(3mm Right) (7mm Right)

→ Small Residual VSD 3mm at the Apical end of VSD patch

Δ RVSB has bidirectional shunt

→ Severe Biventricular dysfunction (+) LV EF-20%.

→ Low Moderate TR (RVSP→RA+70)

→ Severe PR (Peak PR gl 60 mHg)
End diastolic PR gl 48 mHg.

→ IVC dilated, Minimal hepatic venules

→ No pericardial effusion / no Intracardiac clot

→ Left main, No stenosis in Branch PA

→ Left Aortic Arch, Amputated Arch (Bnd No gradient)
Pulsatile DTA flow.

Sd/-
25/6/24

Post ASO
RA/RV dilated, RVSP = 78+RAP, IVC dilated, S/D akinesia
LVEDD = 4.8 Severe PR (PEDK = 48 End = 32) Bilio ventricular collapsing.
LVEDD = 4.8
LVDS = 4.0
LVEF = 20%.

TAPSE = 9.2mm
No Residual effusion
Rest same
4mm Residual VSD (B/D) Mid muscular.
Multiple residual inlet muscular VSD (B/D)

एम.आर.-5 डाक्टर आर्डर
M.R.- 5 Doctors Orders

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

Initial all orders Cancel by crossing through and initaling Rewrite all orders when turning over and after major operations. Sister should sign in the column provided when the order is transferred to the treatment books.

नाम Name: Rohan | उम्र Age: 10y | लिंग Sex: M | वैवाहिक स्थिति Marital Status: | यू.एच.आई.डी. नं. UHID No.: 201300 1096 2.

सर्विस/Service: | वार्ड/Ward: | बेड/Bed: | व्यवसाय/Occupation: | धर्म/Religion:

Date Order	Date Cancelation	Doctor's orders with signature	The sister's signature with date
6/5/24 1.30pm		c/s/p - Peds cardio SR k/c/o - dTHA | VSD | P' ASO + VSD closure (2013) ↓ Sw. BV dys | Sw. PAH.	
	->	currently c/o vomiting difficulty ×2 days c/o ↑ DOE × 2 days c/o ↓ed U.O | Edema + Hands & feet.	
	NO		
->	was on Bosintan currently, Symptomatically improved		
O/E	H.R - 91/min SpO2 - 85% in RA	CP/PP - ++/++ CM - <35	

DOCTORS ORDER

Initial all orders Cancel by crossing through and initaling Rewrite all orders when turning over and after major operations. Sister should sign in the column provided when the order is transferred to the treatment books.

Date Order	Date Cancelation	Doctor's orders with signature	The sister's signature with date
		CVS- S1 S2 (+)	
		RS- clear	
		CNS- NO FND	
		P/A- Soft, Liver 4cm ↓ Fem.	
		Adv.	
		1) T. CASIX 20mg f/o BD	
		2) T. Aldactone 25mg BD	
		3) T. Envas 1.25mg BD	
		4) continue T. Bosentan 62.5mg BD	
		5) T. Actrii 1Tab OD	
		6) can be discharged if Symptomatically improved and can be asked to review in Peds cardio OPD	
		7) MU BOS in Peds cardio.	

Dr. [illegible] M.D.
Assistant Professor
Dept. of Pediatrics
AIIMS, New Delhi-110029

U. a

Delhi

(REVISIT)

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI -110029
आपातकालीन विभाग
(DEPT. OF EMERGENCY MEDICINE)

UHID No:20130010962

आपातकालीन सं.(Emergency No): 2024/030/0042045
दिनांक DATE: 05/05/2024
समय TIME: 07:34:57 PM
NON-MLC

नाम NAME: **BABY ROHAN**
S/O : MAHER CHAND
आयु AGE : **11 years 7 months 13 days**
लिंग /SEX : **M**
पता ADDRESS:
मकान संख्या H.NO:
शहर/ब्लाक CITY/BLOCK: INDRA COLONY FARIDBAD
गली / मुहल्ला STREET/MOH:
राज्य STATE: HARYANA
पिन PIN:
मोबाइल MOBILE NO:
दूरभाष सं. PHONE NO:
द्वारा BROUGHT BY: Relative
स्थान Location: Paediatrics Emergency
Criticality: Red / Yellow / Green

Triage: Responsive/ Unresponsive HR /min BP mmHg RR /min spO2 %
Shifted to Paeds/ Main/ New Emergency

dTGA/VSD/Post ASD & VSD closure in 25/3/2013 @ Dr Devgun

Presenting Complaints

On Bosentan
Cerdinas.

Now come c Breathing difficulty x 2days
Exertional dyspn (+).
No fever/↓U/O/swelling.

Primary Assessment (ABCDE) : Assessment Pentagon

Airway

Open & stable : Yes/No
If No.....

Breathing: RR 32/min
Efforts: Normal/Poor/Increased
Auscultation:
Air entry: Mildly (+)
Normal/poor/Differential

Added sounds:
None/Stridor/Wheeze/Crackles

SpO2 on Room air 88%.
On O2 also 80-86% by FM

Circulation

HR 91/min
CFT 2 secs.
BP 110/71 mmHg
Peripheral pulse: Poor/Good
Central pulse: Poor/Good
Skin temp: Warm/cool

Others
Liver 4 5-6cm BCM
Parenchymal heave (+)
PSM (+) @ L 2nd ICS.

Disability

GCS 15/15
Pupil size 3/min
Pupillary Reactions RR

Motor activity:
Normal & Symmetrical/Asymetrical/ Posturing/Flacidity/Seizure

Blood Sugar.....mg/dl
Exposure:
Temp afeb
Colour: Normal/pallor/cyanosis /mottled
Any other skin lesions.....

Diagnosis

dTGA/VSD/Post ASD & VSD closure c Residual VSD.
c Sev B.V dysf c Severe PAH c ? Eisenmenger.
c R.V dysfunction

CBC
VBG.

Adv @ 3PM
Inj Lasix 20mg IV stat.
O2 by FM @ 4LPM
ECG & Chest Xray.

Dr
Dr
Ass

Pedcardio R/w (Sanfomed)

c/s/B. pedi cardio SR.

5/5/24.

Case of TGA/VSD

P/ A10 two chamber (2013)

P/ Random VIO (B10) / semi in dyspnea

xray - Cmm cardiomegaly

AO ITF Cmm.

O/E patient ac- fair

P-1 J°/y + / L- IC: Y/L-

HR - 96/min	Cmm - Bil AF: ⊖.
RR - 30/min.	clear.
PR - Cmm.	CMM - S_1S_2 ⊕ m
CVS - <3 secs	PA - SM ⊖
peripheries - warm	Lab - Hb 12
BP 110/70 mm	cmm - nil.

Plan:

- Inj Lasix 20 mg IV BD
- T. Aldactone (25 mg) BD
- Wit Ramedium.
- T. Enam 1.25 mg BD (Inj KF if normal).
- Continue Komboka.

10:00 AM

Doctor on Duty
Aga Khan University Medical Center

DEPARTMENT OF PEDIATRIC EMERGENCY AIIMS, NEW DELHI

PATIENT: Baby Rohan AGE/SEX: 11 DS / M UHID 2030010962

NURSES VITALS MONITORING SHEET

Time	Temp. (F)	HR	RR	BP mm/hg	SPO_2	RBS Mg/dl	MEANS OF VENTILATION	SIGNATURE
1pm	AF	88	30	110/71	80		↓ O_2 by FM @ 4L	
6pm	AF	87	22	-	84%		↓ O_2 by FM @ 4L/m	
11Am	AF	112	20	-	86%		↓ O_2 by FM	
6pm	AF	95	20	-	74%		↓ Room Air	

DAY-2 **DATE:-**

DEPARTMENT OF PEDIATRIC EMERGENCY AIIMS, NEW DELHI

DATE	NURSES NOTE
(5/5)	child is conscious and oriented to P/P and E Orally allowed. Self voiding. Dj
11AM 6/5	- child is conscious & oriented. Orally allowed. Self - voiding.

SIGNATURE OF NO A SHIFT:..... B SHIFT :..... C SHIFT:..... 5/5/24.

DATE	NURSES NOTE

SIGNATURE OF NO A SHIFT:..... B SHIFT :..... C SHIFT:.....

DEPARTMENT OF CARDIOTHORACIC & VASCULAR SURGERY
A.I.I.M.S.: ANSARI NAGAR, NEW DELHI – 110029
DISCHARGE SUMMARY

CR No.	**55696/13**					
Body Weight:	**4 kg**	**BloodGroup:**	**O POS**	**Age:**	**6 MTHS**	**Sex:**	**MALE**
Name:	***BABY ROHAN***			C.V.No.	474/13	C.T.V. No:	72859
S/O	MAHER CHAND			DOA	24/03/2013		
Address:	INDRA COLONY, FARIDABAD			DOP	25/03/2013		
				DOD			

Diagnosis:	***CCHD,INC QP, D TGA, S/P VSD, ADDL MUS SMALL VSD, NO ASD/PDA/CoA, NL CORONARIES, NL BIV FUNCTN, NSR NO CCF/IE/PE.***
Echo 16/01/2013, 1466/13, DR JUNEJA	MV/TV/AV/PV-NL, AO/LAes=14/16, LVes/ed=18/27, IVSed/PW(LV)ed=7/5, LV/LA/RV/RA-NL, SS, LC, AVC, VA DISCORDANCE, 3PVs→LA, SVC/IVC→RA, NO ASD COULD BE SEEN, S/P VSD WITH L→R, ADDL SMALL MID-MUSC VSD, NO LVOTO/RVOTO, LV LOOKS PREPARED, NO PDA, ARCH APPEARS NL, NO CoA, REVIEW=CCHD, INC QP, D-TGA, LARGE S/P VSD, ADDL MID-MUS VSD, NO ASD/PDA/CoA, NL IV FUNCTN
DATE OF OPERATION	**25/03/2013**
PROCEDURE	***ARTERIAL SWITCH OPERATION + VSD CLOSURE WITH DACRON PATCH***
Operative findings	STERNUM NORMAL, THMUS +, RETRACTED, INNOMINATE +, PERICARDIUM NORMAL, NO PE, SS/ LC/ SVC/ IVC→ RA, 4PVs→LA, NO CARDIOMEGALY, AORTA ANTERIOR AND LEFT TO PA, PA RIGHT & POSTERIOR TO AO (MORE LIKE SIDE BY SIDE RELATION), CORONARY PATTERN NORMAL 1 LCX, 2R, AV CONCORDANCE , VA DISCORDANCE, PDA CLIPPED, NO ASD, PFO+, MAL-ALIGNED DOUBLY COMMITTED LARGE VSD (1.5 BY 1.5CM2) CLOSED THROUGH TRANSRA & AORTIC APPROACH, AORTIC VALVE TRICUSPID VALVE NORMAL. NORMAL PULMONARY VALVE. TV-NL, NO TR, PERICARDIUM OPEN
Operative notes	MEDIAN STERNOTOMY THYMUS PRESERVED BY RETRACTING, PERICARDIAL PATCH HARVESTED AND FIXED IN GLUTERALDEHYDE, . PERICARDIAL STAYS. , AORTA , MPA, LPA , RPA DISSECTED FREE, AND LOOPED. HEPARIN→ AORTO BICAVAL CANNULATION, ACT CHECKED, CPB ON, CARDIOPLEGIA CANNULA PLACED, AOXCL→ ROOT CBC, →HEART ARRESTED, AORTA TRANSECTED, CORONARY BUTTONS HARVESTED, MPA STAYS, MPA TRANSECTED BELOW THE BIFURCATION, SVC/IVC SNUGGED, RA OPENED, LARGE VSD CLOSED DACRON PATCH THROUGH TRANS RA & AORTIC ROUTE, SLITS MADE IN NEOAORTA, AND CORONARY BUTTONS ANASTOMOSED TO CREATE NEO AORTIC ROOT.LECOMPTE MANUEVER DONE, NEO AORTIC ROOT ANASTOMOSED TO THE DISTAL ASCENDING AORTA.NEO PULMONARY ROOT RECONSTRUCTED OVER AUTOLOGUS FIXED PERICARDIAL PATCH.PFO OPEN, . RA CLOSED , AOXCL OFF, ROOT DEAIRED, NEO PULMONARY ROOT ANASTOMOSED TO DISTAL MPA, CPB WEANED OFF, PROTA , DECANNULATION, HEMOSTASIS, PACING WIRES,DRAINS, CLOSURE