



Wadia Hospital

TEL: 022-24126003. Ext-357

BAI JERBAI WADIA HOSPITAL FOR CHILDREN

Acharya Donde Marg, Parel, Mumbai-400012

Department of Pediatric Cardiac Surgery

Dr Biswa Ranjan Panda

Chief Pediatric Cardiac Surgeon

Email- drbiswapanda@gmail.com**To WHOMSOEVER IT MAY CONCERN**

This is to certify that **Maahi Shattrughan Chaturvedi**, 3yr old girl (Op No – 1132894) is a case of congenital heart disease, Large perimembranous VSD, Dysplastic mitral valve, Small PDA. Severe PAH. She is presently under care for her heart ailment at "Bai Jerbai Wadia Hospital for Children" Mumbai.

The patient requires Open heart surgery (VSD Closure + PDA Ligation) which is planned on 20th November 2018. The total expected expenditure for the surgery and ICU stay is around Rs 2, 00,000/- (Two Lac only) In case the baby has prolonged and stormy post operative course the cost will exceed the quoted amount.

This certificate is being issued as per the request of parents to arrange the finances. This document is valid till 30th November 2018. Our Hospital does not have MJPJAY Facility for paediatric cardiac surgery.

The cheque or Draft is to be drawn in favour of "Bai Jerbai Wadia Hospital for Children".


Cardiac Surgical Coordinator

19/10/2018

Department of Pediatric Cardiac Surgery
Bai Jerbai Wadia Hospital for Children
Parel, Mumbai - 400 012

BAI JERBAI WADIA HOSPITAL FOR CHILDREN
Acharya Donde Marg, Parel, Mumbai-400012
Department of Paediatric Cardiology

DISCHARGE SUMMARY

NAME: MAHI SHATRUGAN CHATURVEDI SEX: FEMALE AGE: 3 YRS

PH: 9967762496 IP NO: 3046859 OPD NO: 1132894

ADDRESS: R. NO 17, ASHTAVINAYAK CHAWL, RAMABAI AMBEDKAR NAGAR,
WATER TANK RD BHANDUP

DOA: 28/08/2018 DOP: 29/08/2018 DOD: 30/08/2018

CARDIOLOGIST: DR SHREEPAL JAIN, CONSULTANT PAEDIATRIC CARDIOLOGIST

BLOOD GROUP: A +VE WEIGHT: 11.8 KG

Diagnosis: LARGE PERIMEMBRANOUS VSD WITH PREDOMINANT L-R SHUNT.
DYSPLASTIC MITRAL VALVE. SMALL PDA WITH BIDIRECTIONAL SHUNT.
SEVERE PAH.

Procedure: Cardiac Catheterization to assess pulmonary dynamics for VSD closure.

Course in hospital: Patient was admitted for elective cardiac catheterization for pulmonary hemodynamic assessment to decide on VSD closure (report provided separately). Cardiac catheterisation procedure was performed and oxymetry was done at baseline on room air and post Inj. Sildenafil 5mg iv from multiple sites and pulmonary pressures were found to be high.. Patient remained stable throughout the procedure and post procedure stay. On discharge the lower limb pulses are well felt, right lower limb is warm and perfusion appears good.

Preoperative ECHO: Large perimembranous VSD with predominant L-R shunt. Dysplastic mitral valve. AML appears flail. The AML chordae are elongated. PML chordae are attached predominantly to posteromedial pappillary muscle. Closely spaced papillary muscle. The PML movement is restricted. There is moderate to severe MS (PG/MG- 35/19mmHg). Mild MR. Narrow LVOT. No

8

16



1132894

Date / Time : 15/08/2018 10:29:06AM

Shakuntala, Prabhu

MAHESHATRUGAN CHATURVEDI

Age : 3 Yr

NO-17, ASHTAVINAYAK CHAWL, RAMABAI AMBEDKAR NGR, WATER TANK RD
CHANDUP

Education :

Mobile No : 9967762496

Diagnosis and Date

S/B Dr SV

kn of CHD.
old papers
misplaced
has come for
2D Echo/co. (was adv.
on 2/8)

Birth History : - FTND, Bunt = 1-7kg
CAB kept in
NICU.

Immunization : → CFA

Milestones : - WNR

Diet : - FD

Ht : → 89 cm.

Wt : → 11.26 kg

ML :

SpO₂ : 97%

O/E : Gc stable

Investigation

Soft dysmorphism + Treatment

Ans. S₁S₂ ⊙
P₂M₂
~~P₂M₂~~
L₂L₃ ⊙

⊙ ear is small &
filled!
High arch palate

Adv

- 2D Echo/co today
- TB F/u & park records
in OPD as adv.

[Signature]