



**DEPARTMENT OF CARDIOTHORACIC SURGERY UNIT-II**  
**CHRISTIAN MEDICAL COLLEGE,**  
IDA SCUDDER ROAD, VELLORE - 632 004, INDIA.

Grams : "MISSIONHOS"  
Telex : 405 202 CMCH IN

Telephone : 0091-416-2282868 / 2282160  
2282029 / 2282106  
Telefax : 0091-416-2232035 / 2232103  
E.mail : cardiothoracic2@cmcvellore.ac.in  
thoracic2@cmcvellore.ac.in

**VINAYAK SHUKLA**, M.S., M.Ch., Dip.N.B., (CVTS),  
Professor

**KORAH T. KURUVILA**, M.S., M.Ch.(CVTS)  
Professor & HOU

**VINAY M. RAO**, M.S., M.Ch.,(CVTS),  
Assistant Professor

17.06.2019

**TO WHOM IT MAY CONCERN**

**SANTHOSH R.BENJAMIN**, M.S., M.Ch., (CVTS)  
Assistant Professor

This is to certify that **BABY. KARISHMA KUMARI**, 12/F, Hospital No. **640662-H**, has been seen in the Departments of Cardiology Unit II and Cardiothoracic Surgery Unit II. She has been diagnosed to have Tetralogy of Fallot, Severe valvular Pulmonary Stenosis, Persistent LSVC and Good PA Anatomy. She has been advised to undergo Intra Cardiac Repair.

The cost of the operation would be about Rs. 2,60,000/- to Rs. 2,80,000/- (Rupees two lakh sixty thousand to two lakh eighty thousand only) in the general ward. This includes 10 days of hospitalization of which 2 days will be in the ICU.

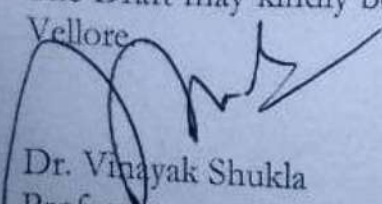
The medicines will have to be purchased separately which would cost about Rs.15,000/- to Rs.20,000/- and four persons will have to donate blood towards surgery, which can be of any blood group. The final bill and cost of drugs will however vary with the duration of stay in the ICU and stage of the disease.

Any complication which occurs post operatively may result in increased expenditure.

Kindly get a clearance from your local dental surgeon prior to the admission.

She has been advised to come for admission for surgery when the finances are arranged. Kindly let us know the tentative date of your arrival along with the photocopy of this certificate if there is any change in the plan.

The Draft may kindly be addressed to "The Treasurer", Christian Medical College, Vellore

  
Dr. Vinayak Shukla  
Professor

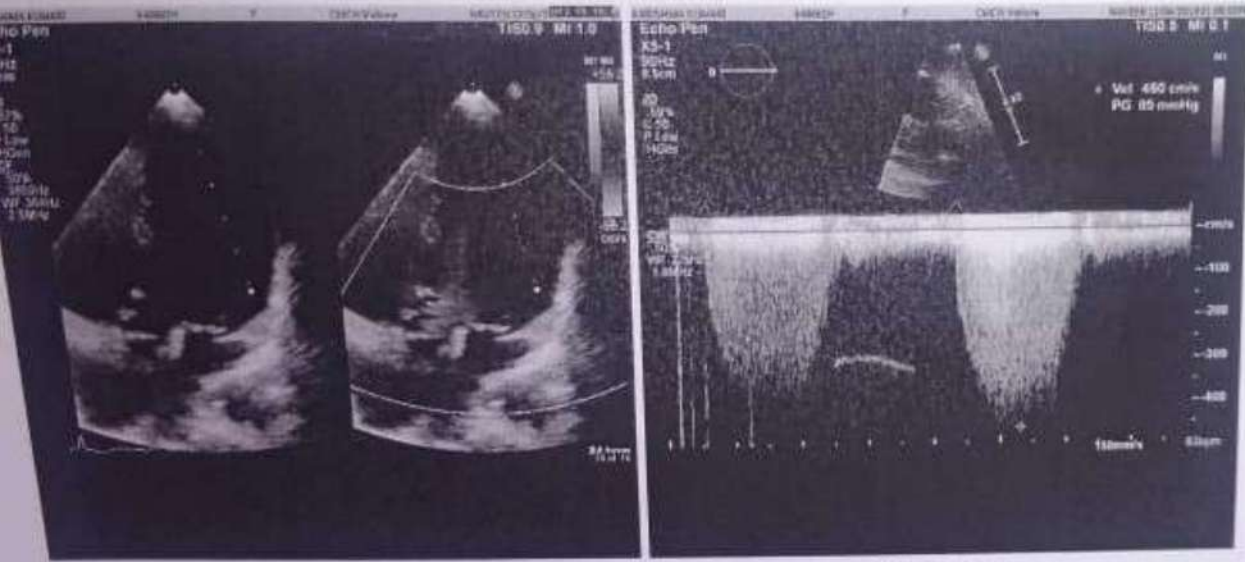
**Dr. VINAYAK SHUKLA**,  
M.S., M.Ch.,(Thor), Dip.NB(CVTS)  
Professor & Head  
Department of Cardiothoracic Surgery Unit-II  
Christian Medical College  
Vellore - 632 004, INDIA





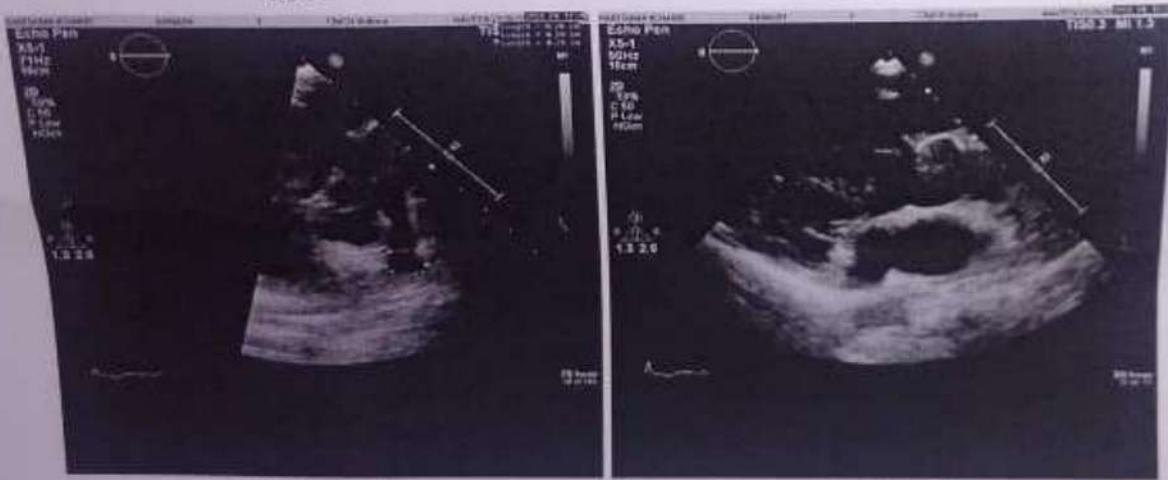
MARK THE INVESTIGATIONS  
REQUIRED IN THE BOX

| BLOOD / SERUM                       |                     | UNITS     | NORMAL RANGE                         |
|-------------------------------------|---------------------|-----------|--------------------------------------|
| <input type="checkbox"/>            | GLUCOSE F           | mg %      | 60-110                               |
| <input type="checkbox"/>            | GLUCOSE PP          | mg %      | 110-140                              |
| <input checked="" type="checkbox"/> | GLUCOSE R 54        | mg %      | 60-140                               |
| <input type="checkbox"/>            | GTT                 | GLU F     | mg %                                 |
|                                     |                     | GLU-hr PP | mg %                                 |
|                                     |                     | GLU-hr PP | mg %                                 |
|                                     |                     | GLU-hr PP | mg %                                 |
|                                     |                     | GLU-hr PP | mg %                                 |
| <input type="checkbox"/>            | UREA 19             | mg %      | 10-50                                |
| <input type="checkbox"/>            | CREATININE 0.5      | mg %      | 0.5-1.8                              |
| <input type="checkbox"/>            | CALCIUM 9.6         | mg %      | 8.1-10.4                             |
| <input type="checkbox"/>            | PHOSPHATE 5.7       | mg %      | 2.5-4.5                              |
| <input type="checkbox"/>            | URIC ACID 6.6       | mg %      | 2.0-7.4                              |
| <input type="checkbox"/>            | SODIUM 138          | mEq/L %   | 130-149                              |
| <input type="checkbox"/>            | POTASSIUM 4.5       | mEq/L %   | 3.5-5.0                              |
| <input type="checkbox"/>            | BILIRUBIN TOTAL 2.6 | mg %      | 0.8-1.0                              |
|                                     | CONJUGATED          | mg %      |                                      |
|                                     | UNCONJUGATED        | mg %      |                                      |
| <input checked="" type="checkbox"/> | TOTAL PROTEIN 6.7   | gm %      | 6.6-8.7                              |
| <input type="checkbox"/>            | ALBUMIN 4.2         | gm %      | 4.0-5.5                              |
| <input type="checkbox"/>            | GLOBULIN 2.5        | gm %      | 3.8-4.0                              |
| <input type="checkbox"/>            | SGOT (AST) 17       | I.U.      | upto 50                              |
| <input type="checkbox"/>            | SGPT (ALT) 17       | I.U.      | upto 50                              |
| <input type="checkbox"/>            | ALK PHOS (ALP) 329  | I.U.      | >18yrs. : 80-240<br>0-18yrs. 240-840 |
| <input type="checkbox"/>            | TOTAL CHOLESTEROL   | mg %      | 150-210                              |
| <input type="checkbox"/>            | ACID PHOS (ACP)     | U/L       | upto 6.5                             |
| <input type="checkbox"/>            | AMYLASE             | U/L       | upto 95                              |



a5c

PS GDT



PA dimensions

CS Dilated

Reading Physician: \_\_\_\_\_

XCELERAEXPRESS\Philips 12/06/2019 04:04 PM

Performed By: NAVEEN

2 ventricles. Normal LV size. RVH. Large nonrestrictive VSD 14mm . VA concordance.

**Semilunar Valves:**

Severe valvular PS (PS peak gdt 8 5mm Hg)

Normal Pulmonary valve morphology Normal tricuspid aortic valve.

**Great Vessels:**

Normal size aorta

Narrow PA

MPA 7.9mm

RPA 2.9mm

LPA 2.9mm.

No patent ductus arteriosus.

Left Aortic arch. No CoA

**Pericardial and Pleural Space:**

No pericardial effusion.

**Function:**

Normal LV systolic function

**Doppler Measurements & Calculations**

Ao V2 max: 116.7 cm/sec

PA V2 max: 439.8 cm/sec

TR max vel: 129.0 cm/sec

Ao max PG: 5.5 mmHg

PA max PG: 77.4 mmHg

TR max PG: 6.7 mmHg



vsc

vsc



**CHRISTIAN MEDICAL COLLEGE  
VELLORE - 4  
CARDIOLOGY UNIT II**

**MEDICAL REPORT**

**Consultants**

|                                    |                      |
|------------------------------------|----------------------|
| Dr. PAUL V GEORGE MD DM (CARDIO)   | Professor            |
| Dr. JOHN JOSE E MD DM(card)        | Professor            |
| Dr. PRADEEP KUMAR R MD DM          | Assistant Professor  |
| Dr. PERLA HARSHA TEJA MD DM (card) | Assistant professor  |
| Dr. KRISHNAPRASATH V MD (Medicine) | Sr. Resident Grade I |
| DNB (cardio)                       |                      |

Email cardio2@cmcvellore.ac.in  
Tel (0416) 228 2631

**Name :** KARISHMA KUMARI

**Hospital Number** 640662H

**Age :** 12 **Sex :** Female

**Visit Date :** 13-Jun-2019

**Address :** KOLTEX KODERMA  
KODERMA  
KODERMA

JHARKHAND

**Pincode :** 825410

**DIAGNOSIS :**

PENTALOGY OF FALLOT  
NORMAL LV & RV FUNCTION  
NYHA CLASS I  
SINUS RHYTHM

**CHEST X RAY**

No cardiomegaly, No PVC

**ECG**

Sinus rhythm, Rate:85/min, RVH+

**INVESTIGATIONS**

| Investigation                        | Value           | Unit    | Reference Range |
|--------------------------------------|-----------------|---------|-----------------|
| 13/06/2019 ECHO - CHILD - CARDIOLOGY | REPORT UPLOADED |         |                 |
| 10/06/2019 ECG (CARDIOLOGY)          | REPORT UPLOADED |         |                 |
| 10/06/2019 CREATININE                | 0.53            | mg/dl   | 0.5-1.4         |
| 10/06/2019 SERUM ELECTROLYTES        | 140             | m mol/L | 135-145         |
| SODIUM                               | 4.8             | m mol/L | 3.5-5.0         |
| POTASSIUM                            | 23              | m mol/L | 22-29           |
| BICARBONATE                          |                 |         |                 |
| 10/06/2019 CBC PROFILE               | 91.2            | fL      | 80-100          |
| NE:41, LY:47, MO:9, EO:3, BA:0       | 30.1            | pg      | 26-34           |
| MCV                                  | 33.0            | f       | 31.4-36.3       |
| MCH                                  | 13.0            | f       | 11.5-14.5       |
| MCHC                                 | 6600            | /cumm   |                 |
| R/W                                  |                 |         |                 |
| TOTAL WBC                            | 18.7            | y/dL    | M 13-17:F       |
| 4,000-12,000                         |                 |         |                 |
| HB                                   | 167000          | /cumm   |                 |
| 11-15                                |                 |         |                 |
| PLATELET COUNT                       | 6.22            | MM/cumm | H               |
| 1,50,000-4,50,000                    |                 |         |                 |
| HBC                                  | 56.7            | f       | M 40-50:F       |
| 4.4-5.9:F 3.8-5.2                    |                 |         |                 |
| HCT(PCV)                             |                 |         | 0.5-2.5         |
| 35-46                                |                 |         |                 |
| RETICS                               |                 |         |                 |

**ECHO**

64066

### PHYSICAL EXAMINATION

Name \_\_\_\_\_ Cl. No. \_\_\_\_\_ Date \_\_\_\_\_

Ht. (Cm.) \_\_\_\_\_ Wt. (Kg.) \_\_\_\_\_

Pallor \_\_\_\_\_ Cyanosis ++ Clubbing (+) Edema \_\_\_\_\_

Jaundice - S.C. Nodule \_\_\_\_\_ Thyroid \_\_\_\_\_ JVP \_\_\_\_\_

Pulse 90/ Min. Reg/Irreg \_\_\_\_\_

E.P. Supine R.A. \_\_\_\_\_ LA \_\_\_\_\_ RL \_\_\_\_\_ LL \_\_\_\_\_

Sitting R.A. \_\_\_\_\_ LA \_\_\_\_\_ Standing RA \_\_\_\_\_ LA \_\_\_\_\_

Peripheral Pulsations RC \_\_\_\_\_ LC \_\_\_\_\_ RSC \_\_\_\_\_ LSC \_\_\_\_\_

RA + LA + RB \_\_\_\_\_ LB \_\_\_\_\_ RR \_\_\_\_\_ LR \_\_\_\_\_

RF \_\_\_\_\_ LF \_\_\_\_\_ RP \_\_\_\_\_ LP \_\_\_\_\_ RDP \_\_\_\_\_ LDP \_\_\_\_\_

Bruits (Specify area) \_\_\_\_\_

C.V.S. Apex beat \_\_\_\_\_

LPSH \_\_\_\_\_ Thrill \_\_\_\_\_

St (+) S2 (+) Spilt \_\_\_\_\_ A2 \_\_\_\_\_ P2 \_\_\_\_\_

S3 \_\_\_\_\_ S4 \_\_\_\_\_ OS \_\_\_\_\_ Click \_\_\_\_\_

Murmurs SSM at (A) V5C

Chest B/L vbs +

Abdomen \_\_\_\_\_ Liver \_\_\_\_\_ Spleen \_\_\_\_\_ Kidneys \_\_\_\_\_

Ascites \_\_\_\_\_ Abd Veins \_\_\_\_\_

Fundus \_\_\_\_\_

C.N.S. \_\_\_\_\_

Diagnosis CCFD & Op, TOF.

Functional Class (NYNA) I, II, III, IV.

Management :

Report attached

**RECOMMENDATIONS**

1. Tab. Propranolol 10mg twice daily
2. Tab. Livogen one tablet once daily

\* Advised ICR.



Dr. PRADEEP KUMAR R (Assistant Professor)  
MD DM

CARDIOLOGY UNIT II

Appointment can be fixed by online through the following link:

-----  
[www.cmch.vellore.edu](http://www.cmch.vellore.edu) ---> Patient Services ---> Appointments

Our outpatients clinic days are Monday/Thursday.



दिनांक  
Date

R-11 (34)  
19/8/19

TOF

For Cash



R.No. 24A: 4PM: For Cash

Please deposit R. 600/-  
for Cash in Allms Pt. Anj. A/c

Dy.

Dy.

Card to be raised

R. 600/-



P 13 (47)  
28/8/19

100

WCH  
LCH  
9AM

TOF

PDA

Ac - 2788/19  
(23/08/19)

Dy.

CONSULTANTS REMARKS & FOLLOW UP

17 | 08 | 17

E.C.G. and a

13/F

TOF (+)

Sight S/A VSIG

Sw. PS

B/c confluent PAs

SeO<sub>2</sub>: 80%

Hb: 17.2 g/dl

Pcv: 53

Bu: 19

C: 0.5

N.I.N: 138/4.5

ECG: SR

N/W

No sig. RVH

No trace

Calm

C.M. No CE

L PDR

23/08/17

Cch: Ac - 2788

Good sight confluent PAs

LVC → C

PDA ⊙

⊙ Concern

No sig. ACh.

For ICR +

PDA ligature.

PHYSICAL EXAMINATION

Name \_\_\_\_\_ Cl. No. \_\_\_\_\_ Date \_\_\_\_\_

Ht. (Cm.) \_\_\_\_\_ Wt. (Kg.) \_\_\_\_\_

Pallor \_\_\_\_\_ Cyanosis ++ Clubbing (+) Edema \_\_\_\_\_

Jaundice - S.C. Nodule \_\_\_\_\_ Thyroid \_\_\_\_\_ JVP \_\_\_\_\_

Pulse 90/ Min. Reg/Irreg \_\_\_\_\_

E.P. Supine R.A. \_\_\_\_\_ LA \_\_\_\_\_ RL \_\_\_\_\_ LL \_\_\_\_\_

Sitting R.A. \_\_\_\_\_ LA \_\_\_\_\_ Standing RA \_\_\_\_\_ LA \_\_\_\_\_

Peripheral Pulsations RC \_\_\_\_\_ LC \_\_\_\_\_ RSC \_\_\_\_\_ LSC \_\_\_\_\_

RA + LA + RB \_\_\_\_\_ LB \_\_\_\_\_ RR \_\_\_\_\_ LR \_\_\_\_\_

RF \_\_\_\_\_ LF \_\_\_\_\_ RP \_\_\_\_\_ LP \_\_\_\_\_ RDP \_\_\_\_\_ LDP \_\_\_\_\_

Bruits (Specify area) \_\_\_\_\_

C.V.S. Apex beat \_\_\_\_\_

LPSH \_\_\_\_\_ Thrill \_\_\_\_\_

St (+) S2 (+) Spilt \_\_\_\_\_ A2 \_\_\_\_\_ P2 \_\_\_\_\_

S3 \_\_\_\_\_ S4 \_\_\_\_\_ OS \_\_\_\_\_ Click \_\_\_\_\_

Murmurs SSM at (D) V5C

Chest R/L vbs +

Abdomen \_\_\_\_\_ Liver \_\_\_\_\_ Spleen \_\_\_\_\_ Kidneys \_\_\_\_\_

Ascites \_\_\_\_\_ Abd Veins \_\_\_\_\_

Fundus \_\_\_\_\_

C.N.S. \_\_\_\_\_

Diagnosis CCFD & Qp, TOF.

Functional Class (NYNA) I, II, III, IV.

Management :

*[Faint handwritten notes and diagrams at the bottom of the page, including a circled 'I' and some illegible text.]*

Please share your feedback  
to improve our hospital  
on the We meraaspataa

# हृदय वक्ष एवं तंत्रिका विज्ञान

Consultant Room 11

Dr. Deepti  
Siddharthan  
DR. JAVAID

SR Room 10



CHC-060819104 104664984

HBC-060819101 104664984

KarishmaKumari

दिनांक  
Date  
विभाग  
Deptt.

CV 2019/014/0022944  
UHID: 104664984  
Date 05/08/2019  
Name KARISHMA KUMARI

Cardiology  
Cardiology  
12Y 10M  
16D /F

ब०रो०वि०सं०  
O.P.D. No.

पुत्र/पुत्री/पत्नी  
S/D/W

लिंग  
Sex

निदान  
Diagnosis

819039  
6/11/19

CCHO & OP

TOF

R

• ~~Caplan~~ do

Tab. met XL 25 OD

Tab. Inogen-2 OD

2

R. 3-45  
21/8/19

CT3

S.O. 79-80%

KAKI  
KIMPAI

**ECHOCARDIOGRAPHY REPORT**

Echocardiography report (continued...2)

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

NAME Kavitha Kumari AGE 72 SEX MF DATE 8/8/19  
ECHO No. 21431/19 CV No. \_\_\_\_\_ UHID No. 184661924 C.R. No. \_\_\_\_\_  
HEIGHT \_\_\_\_\_ cm WEIGHT \_\_\_\_\_ kg BSA \_\_\_\_\_ m<sup>2</sup> Ref. Physician Dr. S. Vijay  
Referring Diagnosis \_\_\_\_\_  
Quality of Imaging Poor/Adequate/Good Done by Dr. S. Vijay Checked by Dr. \_\_\_\_\_

| Measurements    | Normal Values             | Normal Values                              |
|-----------------|---------------------------|--|
| Aorta <u>34</u> | (21-22mm/m <sup>2</sup> ) | LA es <u>20</u> (21-22 mm/m <sup>2</sup> ) |
| LV es <u>73</u> | (15-19mm/m <sup>2</sup> ) | LV ed <u>34</u> (18-32 mm/m <sup>2</sup> ) |
| IVS ed <u>6</u> | (06-10mm)                 | PW(LV)ed <u>9</u> (07-11mm)                |
| RV ed _____     | (4-14mm/m <sup>2</sup> )  | RV Anterior wall (upto 5mm)                |
| EF <u>60%</u>   | (62-80%)                  |  |
| IVS Motion      | Normal/Flat/Paradoxical   |  |
| IAS             |                           |  |

**MITRAL VALVE**

Morphology 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 \_\_\_\_\_ cm<sup>2</sup>  
Mitral regurgitation Absent/Trivial/Mild/Moderate/Severe \_\_\_\_\_

**CHAMBERS**

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

**TRICUSPID VALVE**

Morphology Normal Atrialis/Thickening/Calcification/Prolapse/Vegetation/Doming  
Doppler Normal / Abnormal \_\_\_\_\_  
Tricuspid stenosis Present/Absent \_\_\_\_\_ RR interval \_\_\_\_\_ msec  
EDG \_\_\_\_\_ mmHg MDG \_\_\_\_\_ mmHg  
Tricuspid regurgitation Absent/Trivial/Mild/Moderate/Severe \_\_\_\_\_ Fragmented Signals \_\_\_\_\_  
Velocity \_\_\_\_\_ m/sec Pred. RSV<sup>2</sup>/RAP \_\_\_\_\_ mmHg

**PERICARDIUM**

Normal/Thickened/Calcification/Effusion.

REMARKS = 58, 66, 30 → BT, AV-RTC, NRTI, 4-arch, 100%

**TEE**

large  
= SLAVSD E B10 shunt, = severe mitral regurg +  
valvular ps. grad = 80 mmHg

**DIAGNOSIS**

= confluent PAs, MPA ≈ 1.3cm, RPA/LPA imm. calc  
= no additional VSPs, PDA/CoA  
= @ 310°, no clot LV/L PE

**PULMONARY VALVE**

Morphology Normal Atrialis/Thickening/Doming/Vegetation  
Doppler Normal / Abnormal \_\_\_\_\_  
Pulmonary stenosis Present/Absent \_\_\_\_\_ Level \_\_\_\_\_  
PSG \_\_\_\_\_ mmHg Pulmonary annulus \_\_\_\_\_ mm  
Pulmonary regurgitation Present/Absent \_\_\_\_\_  
Early diastolic gradient \_\_\_\_\_ mmHg End diastolic gradient \_\_\_\_\_ mmHg

**Final Impression**

CEA, ↓ Sp/DP / 100% | valv + intravalvular ps, = confluent PAs,  
@ 310°

**AORTIC VALVE**

Morphology Normal Thickening/Calcification/Restricted Opening/Flutter/Vegetation No. of cusps 1/2/3/4  
Doppler Normal / Abnormal \_\_\_\_\_  
Aortic stenosis Present/Absent \_\_\_\_\_ Level \_\_\_\_\_  
PSG \_\_\_\_\_ mmHg Aortic annulus \_\_\_\_\_ mm  
Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe \_\_\_\_\_

Resident  
S. Vijay Consultant

Consultant review