Every day, 550 babies are born in India with congenital heart disease with a recovery rate of under 2%





TOUCHING

young lives giving them a second chance to a better tomorrow







- Surgeries and procedures can cost these parents anywhere between USD 1350 and USD 6750
- Rotary International District 3141
 Project "TOUCHING LITTLE HEARTS" helps such parents
- We have collaboration with Rotary Clubs across the District.





TOUCHING

young lives giving them a second chance to a better tomorrow





16-12-2020

- In 2012 PDG Dr Bal Inamdar initiated this project supporting Congenial Heart disease affected children at KDAH
- Over 119 surgeries have been conducted in RI Dist 3141 so far, this Rotary year while complying with CoVid protocols
- Other contributors are the State Government and some private charities

https://youtu.be/rNWgKH -eGM

https://youtu.be/5kHotGnSHP8





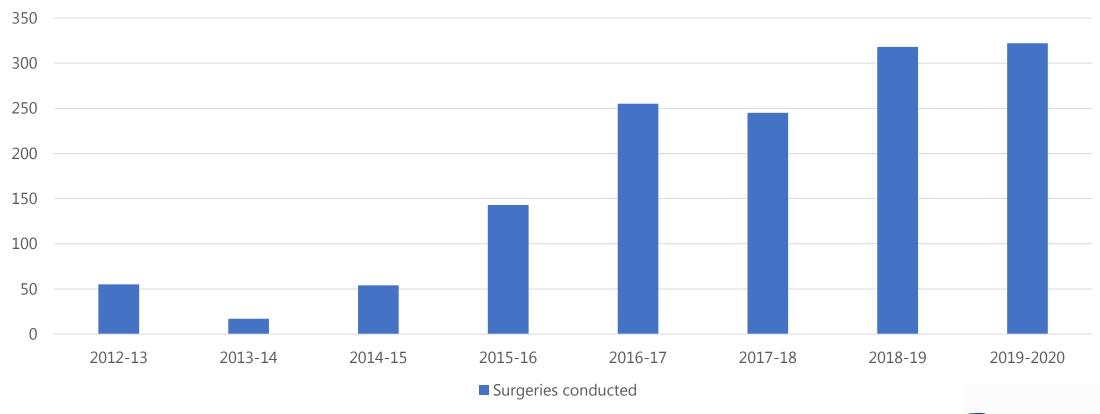


3

The progress chart



Surgeries conducted over the past years



Rotary

DISTRICT 3141

MUMBAI INDIA



Baby of mother Chhaya Singh From Uttar Pradesh

Age at time of admission: 30 days

Diagnosed to have **CHD** on day 7 after birth

Rotary with the help of 4 clubs took up the case and admitted the child on Oct 26, 2018

Successfully operated, treated and discharged on Nov 5, 2018





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Page 1 of 2



Every Life Matters



Medical Report

Patient ID

: KH1000618856

Patient Name

Baby of M/ch Chaaya A Singh

Encounter ID

:

: 12569250

: 003B Floor 03 Central

Location

Clinical Note

26/10/2018 10:19

UHID	: KH1000618856		Location	: 003B Floor 03 Ce ntral
Name Gender	: Baby of M/ch Chaaya A Sing : Male Age		Specialty	Children Heart Ce
Admission Date		ending : Dr.HARI BIPIN	I RADHAKRISHNAN	

DISCHARGE SUMMARY

Discharge Date Diagnosis : 05/11/2018 : SCTAPVC.

Chief Complaints

Diagnosed to have CHD on evaluation for distress on Countries.

Started on Pulmonary vasodilator therapy suspecting IN.

Significant Findings

: Echo: CHD, Obstructed total anomalous pulmonary v All four pulmonary veins join to form a ne and

innominate vein vir al vein. T' rs small. All othe hunt. Mild TR.
Severe PAH. Is mild RV sys. Ic dysfr ood L''.

Course In Hospital

: Uneventful op recovery.

Uneventful precovery.

Post op Ect minar flow pulmonar ious cr ce to LA junction. M with peak pressure int cr ...nHg. Good biventricula ion. Tiny PFO shunti ...th peak pressure

Hg. Good bive ficula. ...cion. No PAH.

Post op ECG a WNL.

Wounds healed

Surgery / Procedure

: TAPVC Repair done

pair done _J18.

Findings: Situs solitus, Levocardia, A-V/V-A concordance. NRGA. TAPVC. All 4 PV's opening into a horizontally oriented common chamber behind the heart and draining via left vertical vein into innominate vein. Smallish left upper PV, Good sized MV. PDA present. Small PFO.

Steps: Median sternotomy, Thymus excised. Pericardial patch harvested and treated. Aorto bicaval CPB established. Cooled to 24 deg. Aorta cross clamped. Left vertical vein snared.

NA B H

06-11-2018

16-12-2020 6





Every Life Matters

common chamber and edges of posterior wall of LA using 7/0 prolene continuous sutures. PFO closed. Left heart deaired and aorta cross clamp released. RA closed. Heart picked in SR. Rewarmed. Weaned off CPB. MUF done. PA line inserted. 1 Lt pl,1 Rt pl and 1 med drain inserted. Hemostasis achieved. 2 Atriand 1 Ventricular pacing wire taken. Sternum stented in sealed with Tegaderm. Shifted to ICU on Adr 0.06, Mi. ... HR 100/min, paced AOO 140. SBP 80/40/60, PA

. CVP 5, SPO2 100%.

Une ful chest closure done on 26/10/2018.

epair done on 25/10/2018.

5/10/18.

Patient Response :

Treatment/ Drugs Given

uction

ignature

/min.

Room PO2 at discharge: 99%.

Status : Treate | Improved.

1 Stay

1edicatic Disc: Tab. A.Jactone 3.125 mg twice daily, till next follow up.

-AP

Tab. Lasix 3 mg twice daily, till next follow up.

Syp. Calcimax P 1.5 ml twice daily, till next follow up.

: Follow up in Paediatric Cardiology OP after 1month with prior

appointment.

F/u with local pediatrician/referring doctor and monitor growth and

weight gain.

: DR. HARI BIPIN RADHAKRISHNAN.

* In case of emergency and to obtain urgent care, please contact Accident & Emergency at Tel. No. 30919191.

**Pending laboratory and X-Ray/CT/MRI/Ultrasound reports to be collected from Central dispatch on Ground floor between 10 a.m. to 8 p.m. except Sundays and Holidays within1month of discharge.

Logged User : Dr.SURESH RAO

Date / Time: 06/11/2018 10:44



06-11-2018

It is easy to do a coronary bypass surgery; you can make tons of money if you are good, but this is a different ball game.

Dr Suresh Rao





Two children sponsored by Rotary have stayed for three months, but the hospital hasn't asked us for any more money.

Natasha Sejpal





















touching little hearts....



give them a chance.



