

**SREE CHITRA TIRU NAL INSTITUTE FOR
MEDICAL SCIENCES AND TECHNOLOGY**

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W O R K R E C O R D

Name : DR. SUDIP DUTTA BAR UAH

Course : MCh

Discipline : CARDI O VASCU LAR AND THOR ACIC SURGERY

Year of Study : Jan 20 12 – Dec 2014

CERTIFICATE

*I hereby certify that I have performed / assisted
all the procedures listed in the work record.*

Place:

Signature:

Date:

Name : Dr. Sudip Dutta Baruah

Forwarded: The above candidate has satisfactorily
carried out the minimum required procedures.

Seal

Prof. Jayakumar K.,
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PERFORMED

PROCEDURES PERFORMED

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RESTERNOTOMY & CLOT EVACUATION	1
PD CATHETER INSERTION	6
LA & PA LINE REMOVAL	15

CONFERENCES ATTENDED & PAPER PRESENTATION

f IACTS 2013 - The 59th Annual National Conference of the Indian Association of Cardiovascular and Thoracic Surgeons; 14-17 Feb 2013; Mumbai

“Ellis van Creveld Syndrome: Case Series and Review of Literature”

f IACTS 2014 – The 60th Annual National Conference of the Indian Association of Cardiovascular and Thoracic Surgeons; 20-23 Feb 2014; Thiruvananthapuram

“Outcome and survival analysis of post-infarction VSR: Our experience”

f Midterm CME of IACTS; 12-13 Sep 2014; Madurai

CASES PERFORMED

Sl.No.	H. No.	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SUPERVISED BY
1			5	F	7-Oct-2013	ACHD, OS ASD, MILD PAH, GDLV, SR	DIRECT CLOSURE OF ASD	DR.THOMAS MATHEW
2			25	M	22-Jan-2014	ACHD, OSASD, SR	PERICARDIAL PATCH	DR. BINEESH K.R.
4			5	M	10-Jun-2014	ACHD,OS ASD,GD LV, SR, B/L SVC	CLOSURE TPP CLOSURE OF OS ASD	SABARINATH MENON(DR.)
5			3	F	18-Jun-2014	ACHD,SV ASD, PAPVC RUPV & RMPV, GD LV, SR	DOUBLE PATCH REPAIR OF SV ASD	SABARINATH MENON(DR.)
6			8	F	30-Jun-2014	ACHD, OS ASD, MILD PAH, SR	ASD CLOSURE	SABARINATH MENON(DR.)
7			9	F	1-Jul-2014	ACHD, OSASD, SR	ASD CLOSURE	SABARINATH MENON(DR.)
8			14	M	21-Aug-2014	ACHD,SV ASD,PAPVC OF RUPV AND RMPV, SR	DOUBLE PATCH REPAIR	SABARINATH MENON(DR.)
9			25	F	03-Sep-2014	ACHD, OS ASD, SR	TANNED PERICARDIAL PATCH CLOSURE OF OS ASD	DR. BINEESH K.R.

CASES ASSISTED

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
1			3	F	14-Feb-2012	CCHD,TOF,GOOD PA,SR	TRANS RA + PA ICR	DR.THOMAS MATHEW
2			5	M	29-Feb-2012	CCHD SI DC DORV SA AND MUSCULAR VSD SEV PS SR	BDG WITH PA BANDING	DR.THOMAS MATHEW
3			63	F	15-Mar-2012	CAD DVD MILD LMCA OLD AAWMI GOOD LV FUNCTION SR DM HTN DYSLIPIDEMIA B/L VARICOSE VEIN	CABG X 3(LIMA TO LAD,RSVG TO RCA AT CRUX OM1)	DR. JAYAKUMAR K
4			45	F	15-Mar-2012	RHD SEV MS MILD MR MOD PAH - P/BMV ACUTE SEVERE MR SEVERE MS SEVERE PAH	EMERGENCY MVR #27 SJM WITH DIRECT ASD CLOSURE	DR. VIVEK V. PILLAI
5			54	M	22-Mar-2012	CAD,TVD,GD LV,SR,DM	CABG X 4(LIMA TO LAD, RSVG TO D,OM2,RCA)	DR. JAYAKUMAR K
6			56	M	23-Mar-2012	CAD, MILD LMCA, TVD, OLD AAWMI, GOOD LV, DM, HTN, DLP, LEFT PVOD	CABG X 4 GRAFTS (LIMA TO LAD,RSVG TO D1,OM1,LPLB)	DR. JAYAKUMAR K
7			76	M	23-Mar-2012	CAD,TVD,GD LV,SR,DM	CABG X 4(LIMA TO LAD, RSVG TO D,OM2,RCA)	DR. JAYAKUMAR K
8			60	M	27-Mar-2012	CAD,TVD,GOOD LV,OLD ACS,SR,DLP	CABG X 3(RSVG TO LAD,MAJ OM,DISTAL RCA)	DR. VIVEK V. PILLAI
9			12	M	14-May-2012	D,PAVCD,CLEFT AML,MOD MR,MILD PAH,SR	ICR(CLEFT AML REPAIR + TANNED PERICARDIAL PATCH CLOSURE OF OPASD)	SABARINATH MENON (DR.)

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
10			0	F	14-May-2012	CONGENITAL MS, HYPOPLASTIC LV, VSD, TINY ASD (P/BAS), SEV PAH, SR	ATRIAL SEPTECTOMY + PA BANDING (22 MM)	DR. BAIJU S.DHARAN
11			3	F	28-May-2012	ACHD, DCVSD, MILD INF PS, MILD AR, NO PAH, SR	TRANS RA_PA ICR	DR. THOMAS MATHEW
12			51	M	7-Jun-2012	RHD, P/CMV(1991), SEV CALCIFIC RE-MS, MILD AR, MOD PAH, FAIR LV/RV FUNC, CAD, SVD, AF	AVR#25SJM+PMLP+CABG(RSVG TO MAJ OM)	DR. PRAVEEN VARMA P.K.
13			57	M	11-Jun-2012	SEV CAL AS, CAD, SVD, SR	AVR # 23PM + CABG(RSVG TO OM4)	DR. VARGHESE T.PANICKER
14			70	F	13-Jun-2012	CAD, TVD, MILD LVD, S/P MVR # 25 PM, AF, RENAL DYSFUNCTION, DM, HTN	CABG X 4(LIMA TO LAD, RSVG TO D1, OM1, PDA)	DR. JAYAKUMAR K
15			37	M	15-Jun-2012	RHD, MOD TO SEV MR, MILD TO MOD MS, MOD AR, MILD PAH, DIL & GOOD LV, AF	DVR(MVR # 25CHVP WITH PMLP + AVR # 21CHVP)	DR. PRAVEEN VARMA P.K.
16			59	M	18-Jun-2012	CAD, TVD, OLD IWMI, MILD MR, GOOD LV, SR, DM, DLP	CABG X 3(LIMA TO LAD, RSVG TO OM2, PDA)	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
17			42	F	20-Jun-2012	RHD,P/CMV('90),SEV CAL RE-MS,MLD MR,MLD PAH,GD LV,AF,NC	MVR # 25 SJM + PMLP	DR. PRAVEEN VARMA P.K.
18			60	M	20-Jul-2012	CAD TVD MILD MR FAIR LV SR	CABG X 5(LIMA TO LAD, RSVG TO D1, OM1, OM2 & RPDA)	DR. JAYAKUMAR K
19			57	M	23-Jul-2012	CAD TVD GOOD LV SR	CABG X 5 GRAFTS (LIMA TO LAD, RSVG TO D1, RI, OM1, RPDA)	DR. JAYAKUMAR K
20			59	F	25-Jul-2012	CAD, TVD, MILD AR & TR, GD LV, SR	CABG X 5 GRAFTS(RSVG TO LAD, MAJ DIAG, MAJ OM, SEQUENTIAL GRAFTS TO RCA & RPDA)	DR. JAYAKUMAR K
21			67	M	27-Jul-2012	SEV AR, MILD MR, DILATED LV, MILD LVD, NC	AVR # 21 CE PERIMOUNT MAGNA	DR. VARGHESE T.PANICKER
22			36	M	27-Jul-2012	BAV, SEV AR, MILD MR & TR, DILATED LV, MILD LV DYSFUNCTION, SR	AVR # 25 CHVP	DR. VARGHESE T.PANICKER
23			52	M	31-Jul-2012	CONTAINED RUPTURE OF ABDOMINAL AORTIC ANEURYSM WITH LT.COMMON ILIAC ARTERY OCCLUSION	ENDOANEURYSMORRAPPHY+ LEFT RENAL VEIN DIVISION + INFERIOR MESENTERIC ARTERY REIMPLANTATION UNDER INTERRENAL CLAMP	DR. UNNIKISHNAN.M

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
24			55	M	2-Aug-2012	BAV SEVERE CALCIFIC AS, MOD TO SEVERE LV DYSFUNCTION, CHB, S/P TPI, NC	AVR # 23 C-E PERIMOUNT PERICARDIAL BIOPROSTHESIS AORTIC	DR. VARGHESE T.PANICKER
25			53	F	6-Aug-2012	CAD, LMCA, TVD, MILD AS, GOOD LV, DM, HTN, HYPOTHYROIDISM	CABG X 5(LIMA TO LAD, RSVG TO D1, RI, MAJ OM, RPDA)	DR. JAYAKUMAR K
26			63	M	8-Aug-2012	CAD,TVD,GD LV,SR,DM,DLP	CABG X 5 (LIMA TO LAD, RSVG TO MAJ DIAG, INFERIOR BRANCH OF MAJ OM, PDA, PLB)	DR. JAYAKUMAR K
27			63	F	16-Aug-2012	CAD, TVD, RECENT ACS, GD LV, SR, HTN	CABG X 5 (LIMA TO LAD, RSVG TO D2, MAJ OM, RPDA, RPLB)	DR. JAYAKUMAR K
28			53	M	17-Aug-2012	BAV, SEV CAL AS,MILD AR,GOOD LV,CHB,S/P PPI	AVR # 21CHVP	DR. PRAVEEN VARMA P.K.
29			65	M	22-Aug-2012	SEV CAL AS,MILD AR,MILD MR,GOOD LV,SR,NC,DUODENAL EROSIONS, HTN, DM	AVR # 21 C- E PERIMOUNT	DR. VIVEK V. PILLAI
30			2	F	16-Sep-2012	D-TGA, P/BAS, S/P ASO + ASD MADE RESTRICTIVE WITH STENTED STERNUM	DELAYED STERNAL CLOSURE	SABARINATH MENON (DR.)

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
31			10	M	15-Oct-2012	EBSTEIN'S ANOMALY, MOD TR, OSASD, 2ND DEGREE AV BLOCK	CONE REPAIR OF TRICUSPID VALVE + BDG	DR. BAIJU S.DHARAN
32			0	M	25-Oct-2012	PA, IVS,PDA DEP PUL CIR S/P PDA STENT, PDA SPASM, ARCH INJURY(LACERATION OF LEFT SUBCLAVIAN A ORIGIN)	EMERGENCY RMBTS (3MM PTFE) + LPA BOVINE PERICARDIAL PATCH PLASTY + LEFT SCA LIGATION + PDA STENT EXTRACTION +PDA INTERRUPTIONUNDER TCA	DR. THOMAS MATHEW
33			2	M	29-Oct-2012	ACHD, MALALIGNED SAVSD, SEV PAH, SR	GORETEX PATCH CLOSURE VSD + PFO OPEN	DR. BAIJU S.DHARAN
34			58	M	1-Nov-2012	SEV CAL AS, MILD AR, MOD MR, FAIR LV, SR, NC	AVR# 23PM	DR. VARGHESE T.PANICKER
35			47	M	7-Nov-2012	CAD, TVD, GOOD LV, P/PTCA-LAD & RI, ISR, SR	CABG X 3 GRAFTS(LIMA TO LAD, RSVG TO RI & PDA)	
36			54	M	7-Nov-2012	CALCIFIC AORTIC VALVE,SEV AR,MOD AS, DILATED & GOOD LV,SR,NC	AVR # 27 MH MECHANICAL HEART VALVE + AORTOPLASTY	DR. VIVEK V. PILLAI
37			52	M	7-Nov-2012	P/MVREPAIR FOR MR,NOW MILD MR WITH HEMOLYSIS,GOOD LV,SR,HTN	REDO STERNOTOMY - RING EXPLANTATION+ MVR# 27SJM+PMLP	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
38			77	M	16-Nov-2012	CAD, TVD, GD LV, MILD AR, SR, HTN, DM, DLP	CABG X 5 (LIMA TO LAD, RSVG TO MAJ D, OM1, OM2 & RPDA)	DR. JAYAKUMAR K
39			43	M	16-Nov-2012	CAD, TVD, OLD AWTMI, MOD LVD, HTN, SR	CABG X 5 (LIMA TO LAD, RSVG TO OM1, MAJ DIAG, RI & LPDA)	DR. JAYAKUMAR K
40			50	M	16-Nov-2012	CKD	RIGHT 'SNUFF-BOX' RADIO-CEPHALIC AV FISTULA CREATION	DR. SIDHARTH VISWANATHAN
41			62	M	19-Nov-2012	CAD, TVD, OLD AWTMI, GD LV, SR, HTN, DLP	CABG X 5 (LIMA TO LAD, RSVG TO RPDA, OM3, OM1 & MAJ DIAG)	DR. JAYAKUMAR K
42			58	M	19-Nov-2012	CAD, LMCA, TVD, RECURRENT UNSTABLE ANGINA, GD LV, SR, DM, HTN, DLP	CABG X 4 (LIMA TO LAD, RSVG TO TERM OM, MAJ OM, MAJ DIAG)	DR. JAYAKUMAR K
43			44	M	20-Nov-2012	CAD, TVD, AWTMI, MOD TO SEV LVD, SR, DLP	CABG X 4 (LIMA TO LAD, RSVG TO MAJ OM, RCA & MAJ DIAGONAL)	DR. JAYAKUMAR K
44			57	M	22-Nov-2012	CAD, TVD, MOD LVD, OLD IWMI, RECURRENT ACS, SR, MILD PVOD	CABG X 4 (LIMA TO LAD, RSVG TO D1, MAJ OM & RPDA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
45			70	M	26-Nov-2012	SEV CAL AS, CAD, SVD, GOOD LV, SR, HTN, HYPOTHYROIDISM	AVR # 21 PERIMOUNT	DR. VARGHESE T.PANICKER
46			70	M	7-Dec-2012	CAD,TVD,IWMI,GOOD LV,SR,HTN	CABG X 5(LIMA TO LAD, RSVG TO OM1, OM2, RPDA & MAJ DIAG PIGGY BACK TOOM1)	DR. JAYAKUMAR K
47			45	M	11-Dec-2012	CAD, LMCA, TVD, AWTMI, FAIR LV, SR, HTN, DM, DLP	CABG X 3 (RSVG TO LAD, D1, MAJ OM, LAD PIGGY BACK TO D1)	DR. PRAVEEN VARMA P.K.
48			37	F	11-Dec-2012	ACHD,SV ASD,PAPVC OF RUPV, ADDL. OSASD, MILD PAH,GOOD LV,SR	DOUBLE PATCH CLOSURE OF SVASD + PAPVC REROUTING AND DIRECT CLOSURE OF OSASD.	DR.MANISH MATHEW
49			52	M	13-Dec-2012	CAD, TVD, P/PCI TO RCA, GD LV, SR, DM, HTN, DLP	CABG X 4 (LIMA TO LAD & RSVG TO MAJ DIAG, OM1 & RPDA)	DR. JAYAKUMAR K
50			31	F	18-Dec-2012	RHD, SEV MS, S/P-MVR(03), GOOD LV, MILD AR/MR/TR, SR	PM # 27 VALVE EXPLANTATION + REDO MVR 27#SJM	DR. PRAVEEN VARMA P.K.
51			60	M	31-Dec-2012	MVP AML, SEV MR, MILD TR/PR, MOD PAH, MOD LVD, AF, CAD-SVD, DM	MVR # 29 SJM + PMLP	DR. VARGHESE T.PANICKER

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
52			37	M	2-Jan-2013	ACHD, OS ASD, MILD PAH, SR, HBSAG +VE	DIRECT ASD CLOSURE	DR. VARGHESE T.PANICKER
53			63	F	2-Jan-2013	CAD, TVD, GOOD LV, SR, DM, HTN, DLP	CABG X 5(LIMA TO LAD, RSVG TO D1, MAJ OM, OM1& RPDA; D1 & OM1 PIGGY BACK TO MAJ OM)	DR. JAYAKUMAR K
54			37	M	11-Jan-2013	RHD, SEV MS & AR, MOD AS, MILD TR, TRIVIAL MS, MOD PAH, GD LV, AF	DVR (MVR# 27SJM + AVR# 21SJM)	DR. VARGHESE T.PANICKER
55			58	M	4-Feb-2013	CAD,TVD,ASC AO ANEURYSM,FAIR LV,SR,HTN,DLP	CABG X 3 (LIMA TO LAD; RSVG TO MAJ OM& RCA WITH RCA PIGGY BACK TOMAJ OM) + MODIFIED BENTALL'S PROCEDURE(# 23 CHVP+# 24MM ALBO GRAFT)	DR. JAYAKUMAR K
56			72	M	5-Feb-2013	CAD,LMCA,TVD,GDLV,MILD TO MOD AR,SR,S/P PTCA(2006),HTN	CABG X 4 (LIMA TO LAD, RSVG TO DIAG, PDA, RI, DIAG PIGGY BACK TO RI)	DR. JAYAKUMAR K
57			46	M	6-Feb-2013	RHD,SEV CAL MS,MILD MR,SEV PAH,GDLV,NC	MVR # 29SJM	DR. VARGHESE T.PANICKER
58			60	M	6-Feb-2013	CAD, LMCA, TVD, FAIR LV, SR	CABG X 4 (LIMA TO LAD & RSVG TO D1, TERM OM, PDA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
59			72	M	9-Feb-2013	SEV AR, MOD MR, MOD TR, POST IE SEQUELAE, GD LV, SEV PAH, SR, CCF, RENAL DYSFUNCTION	DVR (AV # 21SJM + MV # 29 SJM) + PMLP	DR. VIVEK V. PILLAI
60			20	M	11-Feb-2013	ACUTESEV MR, S/P BMV, RHD, SEV MS, MILD MR, SEV PAH,SR,G1P0	MVR # 25 SJM+ PMLP	DR. VARGHESE T.PANICKER
61			57	M	11-Feb-2013	CAD, TVD, MOD LVD, SR	CABG X 4 (LIMA TO LAD, RSVG TO MEDIAL & LATERALBR MAJ OM & PRE CRUX RCA)	DR. JAYAKUMAR K
62			48	M	18-Feb-2013	SSI WITH SINUS (STERNAL WOUND) S/P DVR, GD LV, SR, MRSA (+)	STERNAL WIRE REMOVAL + WOUND DEBRIDMENT WITH PRIMARY CLOSURE	DR. VARGHESE T.PANICKER
63			55	M	18-Feb-2013	CAD, TVD, GDLV, SR, DM, HTN	CABG X 3 (LIMA TO LAD, RSVG TO MAJ DIAGONAL, RPDA)	DR. PRAVEEN VARMA P.K.
64			52	M	20-Feb-2013	MOD-SEV PARAVALVULAR MR, VALVE DEHISCENCE, SEV PAH, P/DVR(MAR&MAY 05) , RHD, PPI(VVI 05), GDLV , NC	REDOSTERNOTOMY + MVR # 31SJM	DR. PRAVEEN VARMA P.K.
65			34	M	21-Feb-2013	BAV, SEV AS, MILD AR, GOOD LV, SR	AVR # 19 SJM	DR. VARGHESE T.PANICKER

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
66			50	M	21-Feb-2013	CAD, TVD, FAIR LV, SR, HTN, DLP	CABG X 6 (LIMA TO LAD, RSVG TO MAJ D, OM3, OM2, RI & RPDA)	DR. JAYAKUMAR K
67			45	F	25-Feb-2013	PV THROMBOSIS,S/P MVR&BMV,RHD,SEV MS,SEV PAH,AF IN CCF	REDOSTERNOTOMY+ EMERGENCY MVR (23 CHVP)	DR. VARGHESE T.PANICKER
68			79	M	25-Feb-2013	CAD,TVD,GDLV,DM,HTN,DL P,SR	CABG X 4 (LIMA TO LAD, RSVG TO PDA, OM2 & OM3; PDA SIDE TO END ANASTOMOSIS TO AORTA & OM3 PIGGY BACK TO RPDA WITH END TO END ANASTOMOSIS)	DR. JAYAKUMAR K
69			64	M	27-Feb-2013	SEVERE PARAVALVULAR MR, IE SEQUELAE, S/P MVR FOR RHD, SEV MR, GD LV, AF, NC	REDOSTERNOTOMY + MVR (25 PM)	DR. VARGHESE T.PANICKER
70			64	F	27-Feb-2013	CAD, TVD, GRI DIASTOLIC DYSFUNCTION, SR, DM, HTN	CABG X 4 (LIMA TO LAD, RSVG TO PLB, MAJ D & MAJ OM)	DR. JAYAKUMAR K
71			51	M	4-Mar-2013	CAD, DVD, GDLV, SR, DM, HTN, DLP, HBSAG+	CABG X 3 (LIMA TO LAD; RSVG TO D1 & PDA)	DR. JAYAKUMAR K
72			61	M	6-Mar-2013	CAD, TVD, AWTMI, FAIR LV, SR, DM, HTN, DLP	CABG X 4 (LIMA TO LAD; RSVG TO MAJ D, ACUTE MARGINAL, RPDA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
73			65	M	7-Mar-2013	CAD, MILD LMCA, TVD, OLD IWMI, MOD LVD, SR, DM, HTN, DLP	CABG X 5 (LIMA TO LAD; RSVG TO DISTAL LAD, MAJ D, MAJ OM & PDA)	DR. JAYAKUMAR K
74			50	F	7-Mar-2013	BAV, SEV CAL AS, MOD AR, DILATED ASCENDING AORTA, SEV LVD, LMCA DISSECTION S/P CAD,PCI TO LAD,SR,HTN, DLP	AVR # 21 CHVP + CABG X 2 (RSVG TO LAD & MAJ OM) + LMCA PLICATION + LINEAR PLICATION	DR. JAYAKUMAR K
75			67	M	11-Mar-2013	CAD, TVD. GD LV, SR, DM, HTN, DLP	CABR X 5 (LIMA TO LAD; RSVG TO MAJ DIAG, RI, PDA & PLB)	DR. JAYAKUMAR K
76			53	M	13-Mar-2013	CAD, TVD, FAIR LV, SR, HTN, DM, DLP	CABG X 4 (LIMA TO LAD; RSVG TO D1, MAJ OM & LPLB)	DR. JAYAKUMAR K
77			23	M	13-Mar-2013	RHD, SEVMS, MOD MR, MOD PAH, GD LV, SR,	MVR # 27 CHVP + PARTIAL PMLP	DR. VIVEK V. PILLAI
78			72	M	14-Mar-2013	CAD,TVD,GDLV,SR,COPD	CABGX4 GRAFT(LIMA-LAD,RSVG-PRE CRUX,OM,DIAG)	DR. PRAVEEN VARMA P.K.
79			54	M	18-Mar-2013	CAD, TVD, OLD IWMI, GD LV, MILD MR, SR, S/P PCI - RCA, DLP	CABG X 5 (LIMA TO LAD; RSVG TO D2, RI, MAJ OM & RPDA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
80			55	M	19-Mar-2013	CAD, TVD, GDLV, SR, DM, HTN, DLP	CABG X 4 (LIMA TO LAD; RSVG TO D1, TERM OM & RPDA)	DR. JAYAKUMAR K
81			53	M	20-Mar-2013	CAD, DVD, GD LV, SR, HTN, DLP	CABG X 4 (LIMA TO LAD; RSVG TO D1, RPDA & RPLB)	DR. JAYAKUMAR K
82			22	M	20-Mar-2013	FOREIGN BODY PENETRATING ASCENDING AORTA WITH SACCULAR PSEUDOANEURYSM ASCENDING AORTA WITH RCC TEAR WITH ACUTE AR, MILD MR, SEV TR, SEV PAH, GD LV, SR	FOREIGN BODY EXTRACTION WITH EMERGENCY AVR # 19CHVP WITH EXCISION OF ANEURYSM & AORTOPLASTY	DR. JAYAKUMAR K
83			66	M	25-Mar-2013	CAD, TVD, GD LV, SR, DM, HTN, DLP	CABG X 5 (LIMA TO LAD; RSVG TO MAJ D, OM4, RPDA & LPLB)	DR. JAYAKUMAR K
84			46	F	26-Mar-2013	CHRONIC TYPE A ASCENDING AORTIC DISSECTION, MOD TO SEV AR, MILD TO MOD MR, GD LV, SR, HYPOTHYROID, MARFAN SYND	MODIFIED BENTALL'S PROCEDURE (25CHVP + 26 ALBOGRAFT)	DR. JAYAKUMAR K
85			57	F	27-Mar-2013	CORONARY ARTERIOVENOUS(RA-LCX) FISTULA, MOD-SEVERE TR, GD LV, SR	FISTULA LIGATION WITH DIRECT CLOSURE OF FISTULOUS OPENING	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
86			0	F	5-Apr-2013	CCHD, DTGA, IVS, ASD, PDA, MILD PS, GD LV, NC, SR	ASO + STENTED STERNUM	DR. BAIJU S.DHARAN
87			1	F	5-Apr-2013	CCHD, TOF, PUL ATRESIA, ASD, MAPCA, H/O SPELLS	EMERGENCY RMBTS # 3.5MM PTFE TUBE GRAFT	DR. THOMAS MATHEW
88			9	F	8-Apr-2013	CCHD, TOF, CONFLUENT PA, GOOD LV, NC, SR, SPELLS	TRANS RA- PA ICR	DR. SABARINATH MENON
89			0	F	10-Apr-2013	CCHD,OBSTRUCTED IC-TAPVC,SEV PAH	PRIMARY SUTURELESS REPAIR OF IC-TAPVC + LA AUGMENTATION WITH BPP+ ASD MADE RESTRICTIVE WITH STENTED STERNUM	DR. BAIJU S.DHARAN
90			0	F	11-Apr-2013	D TGA, MUSCULAR VSD, PDA, B/L SVC, 1LCX 2R, SR	ASO + VSD CLOSURE (RACHS 4)	DR. BAIJU S.DHARAN
91			4	M	18-Apr-2013	ACHD, SA VSD, OS ASD, SEV PAH, SR	GORTEX PATCH CLOSURE VSD + TANNED PERICARDIAL PATCH CLOSURE OSASD + 2.5MM PFO OPEN	DR. SABARINATH MENON
92			0	M	22-Apr-2013	CCHD, D-TGA, IVS, OSASD, PDA, MOD PAH, 1LCXR, SR	ASO + ASD MADE RESTRICTIVE	DR. BAIJU S.DHARAN

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
93			0	M	23-Apr-2013	S/P ASO WITH STENTED STERNUM, DTGA, IVS, PAH, SR	DELAYED STERNAL CLOSURE	DR. THOMAS MATHEW
94			3	F	24-Apr-2013	ACHD, SV ASD, PAPVC OF RUPV, MILD PAH, GD LV, SR	WARDEN'S PROCEDURE	DR. SABARINATH MENON
95			1	F	24-Apr-2013	CCHD, OBSTRUCTED CARDIAC TAPVC, MODERATE TO SEVERE TR, SEV PAH, BRONCHOPNEUMONIA	TAPVC REPAIR (CS CUTBACK TECHNIQUE)	DR. BAIJU S.DHARAN
96			2	M	26-Apr-2013	CCHD, TOF, CONF PA, MODERATE TR, NC, SR	ICR WITH TAP WITH MONOCUSP RECONSTRUCTION OF RVOT	DR. SABARINATH MENON
97			7	M	29-Apr-2013	ACHD, OSASD, SR	TANNED PERICARDIAL PATCH CLOSURE ASD	DR. SABARINATH MENON
98			1	F	30-Apr-2013	CCHD, SS, MESOCARDIA, MIXED TAPVC, MODERATE PAH, GOOD LV/RV FN, SR	TAPVC REPAIR (CS CUTBACK + V.V -LA APPENDAGE ANASTAMOSIS.)	DR. THOMAS MATHEW
99			1	F	2-May-2013	CCHD, SS, DC, D TGA, IVS, OSASD, MILDLY REGRESSED LV, 2LCXR 1 CONAL BR, B/L SVC, SR	ASO + ASD MADE RESTRICTIVE	DR. BAIJU S.DHARAN

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
100			6	M	3-May-2013	ACHD, SP VSD, RCC PROLAPSE, MILD AR, SR	TRANS PA GORTEX PATCH CLOSURE OF VSD	DR. SABARINATH MENON
101			9	F	3-May-2013	SEVERE AR, S/P VSD CLOSURE + AV & MV REPAIR FOR ACHD, PMVSD, SEV AR, MOD MR, MOD PAH	AVR # 19CHVP (19A T2 48803)	DR. BAIJU S.DHARAN
102			1	F	4-May-2013	S/P ASO WITH STENTED STERNUM	DSC	DR. SABARINATH MENON
103			1	M	6-May-2013	ACHD, SA VSD, SEV PAH, GD LV, SR	GORTEX PATCH CLOSURE OF VSD	DR. SABARINATH MENON
104			0	M	7-May-2013	CCHD, OBSTRUCTED IC- TAPVC, SEV PAH, ASD, SR	PRIMARY SUTURELESS REPAIR IC-TAPVC WITH TPP CLOSURE ASD(2.5MM PFO KEPT OPEN)	DR. BAIJU S.DHARAN
105			19	M	8-May-2013	RECURRENT PE, S/P SUBXIPHOID PERICARDIAL DRAINAGE, UNIFOCAIZATIONMAPCA, ICR FOR TOF	PLEURO-PERICARDIAL WINDOW THROUGH LEFT ANTEROLATERAL THORACOTOMY	DR. SABARINATH MENON

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
106			4	F	8-May-2013	ACHD, OS ASD, SEV MR, SEV PAH, SR	MV REPAIR (ANTERIOR LEAFLET PLICATION + POSTERIOR ANNULOPLASTY) + TPP CLOSUTE ASD	DR. BAIJU S.DHARAN
107			27	M	13-May-2013	ACHD,SP VSD, RCC PROLAPSE, TRIVIAL AR, SR	TRANS PA GORETEX PATCH CLOSURE OF VSD	DR. THOMAS MATHEW
108			9	M	14-May-2013	PACING & STERNAL WIRE SINUS S/P ICR FOR TOF	PACING & STERNAL WIRE REMOVAL WITH SINUS TRACT EXCISION WITH SECONDARY SUTURING	DR. SABARINATH MENON
109			12	M	14-May-2013	ACHD, SP VSD, RCC PROLAPSE, MILD AR, SR	TRANS PA GORETEX PATCH CLOSURE OF VSD	DR. SABARINATH MENON
110			0	M	15-May-2013	S/P ASO+VSD+MUSCULAR VSD CLOSURE+TACHEOSTOMY WITHCHB	PPI VIA LEFT ANTEROLATERAL THORACOTOMY APPROACH	DR. BAIJU S.DHARAN
111			1	M	17-May-2013	ACHD, SA & MID MUSCULAR VSD, SEVERE PAH, MILD RVOTO, SR	GORETEX PATCH CLOSURE OF SAVSD+ DIRECT CLOSURE MM VSD WITH EXCISIONOF PARIETAL BANDS + PFO CREATED	DR. SABARINATH MENON

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
112			1	M	17-May-2013	CONGENITAL COMPLETE HEART BLOCK, MILD LVD	EPICARDIAL PPI VIA MINISTERNOTOMY	DR. SABARINATH MENON
113			1	M	20-May-2013	ACHD, SA VSD, ADDITIONAL MID MUSCULAR VSD (?), MILD TO MODERATE PAH, SR	DIRECT VSD CLOSURE	DR. BAIJU S.DHARAN
114			7	F	22-May-2013	CCHD, TOF, DCVSD, GOOD PA, SR	ICR + TAP + MONOCUSP RECONSTRUCTION OF RVOT	DR. THOMAS MATHEW
115			23	F	24-May-2013	CCHD TOF GOOD PA NORMAL CORONARY SR	ICR WITH TRANS ANNULAR PATCH WITH MONOCUSP RECONSTRUCTION OF RVOT	DR. SABARINATH MENON
116			0	M	27-May-2013	CCHD, DTGA, MULTIPLE VSD, SMALL PDA, 1LCX 2R, GD LV, SR	ASO + VSD CLOSURE	DR. BAIJU S.DHARAN
117			0	M	28-May-2013	S/P ASO+VSD CLOSURE WITH STENTED STERNUM	DSC	DR. SABARINATH MENON
118			11	M	31-May-2013	ACHD, OUTFLOW VSD ,MOD AR, SAM,SR	GP CLOSURE + SAM EXCISION + TRUSLER'S REPAIR	DR. SABARINATH MENON
119			12	M	3-Jun-2013	ACHD, SVASD, PAPVC OF RUPV & RMPV, B/L SVC, GD LV, SR	DOUBLE PATCH REPAIR	DR. THOMAS MATHEW

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
120			4	F	4-Jun-2013	CCHD, PA, LPA STENOSIS, SAVSD, OSASAD, PDA, SR, S/P CLASSICAL RBTS	ICR (GP CLOSURE VSD + ASD CLOSURE + PDA INTERRUPTION) WITH CONDUIT WITH LPA PLASTY WITH BTS TAKE DOWN	DR. BAIJU S.DHARAN
121			18	M	5-Jun-2013	CCHD, PA, SAVSD, OSASD, PDA, MAPCA, SR, S/P LMBTS	ICR (GP CLOSURE VSD + ASD CLOSURE + PDA INTERRUPTION) WITH CONDUIT WITH UNIFOCALIZATION WITH RMBTS TAKE DOWN	DR. BAIJU S.DHARAN
122			10	F	6-Jun-2013	S/P VSD CLOSURE WITH MOD PE	SUBXIPHOID PERICARDIAL DRAINAGE	DR. SABARINATH MENON
123			7	F	6-Jun-2013	P/ICR WITH CONDUIT WITH PE	RESTERNOTOMY + CLOT EVACUATION	DR. SABARINATH MENON
124			3	M	6-Jun-2013	CCHD, TOF, FAIR PA, NC, SR	ICR WITH TRANS ANNULAR PATCH WITH MONOCUSP RECONSTRUCTION OF RVOT	DR. SABARINATH MENON
125			0	F	9-Jun-2013	S/P ASO WITH STENTED STERNUM	DELAYED STERNAL CLOSURE	DR. THOMAS MATHEW
126			0	M	10-Jun-2013	ACHD, MALALIGNED SAVSD WITH OUTFLOW EXTENSION, MOD PAH, PDA, SR	GORETEX PATCH CLOSURE VSD WITH PDA LIGATION	DR. SABARINATH MENON

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
127			2	F	11-Jun-2013	CCHD, TOF, CONFLUENT GOOD SIZED PA, RIGHT ARCH,B/L SVC,GOOD LV FUNCTION, NORMAL CORONARY PATTERN,SR	ICR + TAP+ MONOCUSP RECONSTRUCTION OF RVOT + PFO CLOSURE	DR. THOMAS MATHEW
128			1	F	21-Jun-2013	S/P TAPVC REPAIR, STENTED STERNUM	DSC	DR. BAIJU S.DHARAN
129			1	F	24-Jun-2013	ACHD, MULTIPLE VSD (MALALIGNED SAVSD+ MIDMUSCULAR VSD), SEVERE PAH, SR, ARM(RECTOVESTIBULAR FISTULA)	GORETEX PATCH CLOSURE SAVSD + DIRECT CLOSURE OF MID MUSCULAR VSD	DR. SABARINATH MENON
130			1	F	26-Jun-2013	CCHD, TOF, GOOD PA, OSASD, PDA, NC, SR, SPELLS	TRANS RA ICR WITH INFUNDIBULAR RESECTION	DR. BAIJU S.DHARAN
131			53	F	4-Jul-2013	CAD, TVD, SEVERE LVD, SR, DM, HTN, DLP, B/L CAROTID DISEASE	CABG X 4 (LIMA TO LAD, RSVG TO D1,MAJ OM & RPDA; ENDARTERECTOMY OF OM& PIGGY BACK TO DI)	DR. PRAVEEN VARMA P.K.
132			59	M	5-Jul-2013	SEV CAL AS, MOD AR, MILD CAD, MILD LVD, SR, DM	AVR #21 CHVP	DR. VARGHESE T.PANICKER

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
133			35	F	19-Jul-2013	RHD, SEV CALCIFIC MS, MILD MR & TR, SEVERE PAH, GD LV, SR	MVR # 27SJM + PMLP	DR. BINEESH K. R.
134			31	M	22-Jul-2013	RHD,SEVERE MS,MODERATE MR,SEVERE TR,SEVERE PAH, MODERATE RVD,LA CLOT,AF,RECENT LVF,?OLD TIA,H/O RHEUMATIC REACTIVATION,	MVR 27 SJM +PMLP +LA CLOT REMOVAL + TV REPAIR (TV BICUSPIDISATION +TV ANNULOPLASTY WITH 32 CE RING)	DR. VIVEK V. PILLAI
135			55	M	23-Jul-2013	CAD, TVD, FAIR LV, SR, P/ NSTEMI, HTN, DLP, CHILD PUGH'S -I LIVER DISEASE WITH GRADE I ESOPHAGEAL VARICES, HBSAG(+)	CABG X 4 (LIMA TO LAD & RSVG TO DISTAL LAD, MAJ OM, DISTAL RCA)	DR. VIVEK V. PILLAI
136			20	M	24-Jul-2013	RECURRENT GCT	EXCISION	DR. UNNIKRISHNAN.M
137			53	F	25-Jul-2013	CAD, NSTEMI, TVD, HYPERTROPHIED LV, SR, DM, HTN, DLP, BA	CABG X 4 (LIMA TO LAD, RSVG TO MAJ DIAGONAL, MAJOR OM & DISTAL RCA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
138			56	M	26-Jul-2013	CAD, LMCA, TVD, RECENT IWMI, GOOD LV, SR, DM, HTN	CABG X 4 (LIMA TO LAD, RSVG TO MAJ DIAGONAL, MAJOR OM, RI & RPDA)	DR. JAYAKUMAR K
139			44	F	26-Jul-2013	RHD, SEV CALCIFIC MS, MILD MR, MOD PAH, GD LV, SR	MVR # 27CHVP	DR. VARGHESE T.PANICKER
140			56	M	29-Jul-2013	CAD,TVD, RECENT ACS, GDLV, SR, DM	CABG X 5 (LIMA TO LAD; RSVG TO MAJOR DIAGONAL, MAJ OM, RAMUS & RPDA)	DR. JAYAKUMAR K
141			69	F	30-Jul-2013	SEV CAL AS, GDLV, CONC LVH, HTN, DLP, SR,NC	AVR # 19 MM PERIMOUNT MAGNA	DR. PRAVEEN VARMA P.K.
142			29	F	31-Jul-2013	ACHD, SVASD, PAPVC, MILD PAH, SR	ACHD,DOUBLE TANNED PERICARDIAL PATCHREPAIR OF SVASD, PAPVCREROUTING OF RUPV, MILD PAH, SR	DR. BINEESH K. R.
143			54	M	31-Jul-2013	CAD, TVD,GD LV, SR, S/P PCI (RCA, D1) & POBA TO D2, DM,DLP	CABG X 4 (LIMA TO LAD; RSVG TO D1, D2 & TERMINAL OM WITH D1 PIGGY BACK TO D2)	DR. JAYAKUMAR K
144			53	M	1-Aug-2013	BAV, SEVERE CAL AS, SAM WITH SEVERE LVOTO(HOCM), MODERATE MR, GOOD LV, SR	AVR # 27CHVP WITH SEPTAL MYECTOMY	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
145			58	M	2-Aug-2013	SEV CAL AS, MOD AR, TRIVIAL TR, CAD, TVD, LVH, SR, DM, HTN, DLP	AVR # 19SJM-R + CABG X 1 (RSVG TO RPDA)	DR. PRAVEEN VARMA P.K.
146			51	M	7-Aug-2013	CAD, TVD, OLD IWMI, FAIR LV, SR, S/P PCI TO RCA	CABGX 5 (LIMA TO LAD; RSVG TO D1, RI, OM1 & RPDA)	DR. PRAVEEN VARMA P.K.
147			15	F	8-Aug-2013	RHD, SEV MR, MOD TO SEVERE AR, MODERATE TR, SEV PAH, GD LV, SR	AORTIC VALVE REPAIR + MITRAL VALVE ANNULOPLASTY WITH 28# SADDLE RING	DR. VIVEK V. PILLAI
148			14	F	12-Aug-2013	ACHD, OSASD, MILD PAH, SR, HBSAG(+)	DIRECT CLOSURE ASD	DR. BINEESH K. R.
149			59	F	13-Aug-2013	CAD, DVD, GOOD LV, SR, COPD	CABG X 3 (LIMA TO LAD; RSVG TO D1 & RPDA)	DR. VIVEK V. PILLAI
150			81	M	14-Aug-2013	SEV CAL AS, MILD AR, SEV MR, MODERATE PAH, CAD, SVD, GDLV, SR, DM, DLP, HTN, COPD	MV REPAIR WITH 28 SADDLE RING + AVR # 21 PM- MAGNA + CABG X 1 (RSVG TO LAD)	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
151			65	F	19-Aug-2013	CAD, TVD, SEV LVD, MODERATE MR, SEVERE PAH, SR, DM, HTN, DLP, BA, S/P HYSTRECTOMY FOR CA ENDOMETRIUM	CABGX 4 (LIMA TO LAD; RSVG TO D1, OM1 & RPDA)	DR. JAYAKUMAR K
152			60	M	20-Aug-2013	CAD, TVD, GD LV, SR, DM, HTN, DLP	CABG X 5 (LIMA TO LAD; RSVG TO D2, OM2, RPDA & LPLB)	DR. JAYAKUMAR K
153			45	M	20-Aug-2013	RHD, SEV CAL RE-MS, S/P CMV(1998), MILD MR, SEV TR, SEV PAH, GD LV, AF, NC	MVR # 29SJM + TRA WITH 34MM CLASSIC RING WITH CLOT EXTRACTION	DR. VARGHESE T.PANICKER
154			62	F	21-Aug-2013	CAD, TVD, GDLV, SR, HTN, DLP	CABG X 3 (LIMA TO LAD, RSVG TO MAJ OM & RPDA)	DR. PRAVEEN VARMA P.K.
155			50	M	21-Aug-2013	BAV, SEV CAL AS, GDLV, CONC LVH, HTN, DLP, SR, NC	AVR # 21 MM CHVP	DR. PRAVEEN VARMA P.K.
156			66	M	22-Aug-2013	CAD, TVD, CONCENTRIC LVH, GR I DIASTOLIC DYSFUNCTION, SR	CABG X 6 (LIMA TO LAD; RSVG TO D1, OM1, TERMINAL OM, RPDA & RPLB) + APICAL PLICATION	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
157			37	M	23-Aug-2013	BAV, SEV CAL AS, MILD AR, MILD COA, GD LV, SR, S/P PDACLOSURE	AVR # 25CHVP	DR. VARGHESE T.PANICKER
158			54	M	26-Aug-2013	CAD, TVD, REC ACS, GD LV, SR, HTN, DM, DLP	CABG X 5 (LIMA TO LAD; RSVG TO AM-PDA, DIAGONAL, MAJOR OM & DISTAL LAD)	DR. PRAVEEN VARMA P.K.
159			29	M	26-Aug-2013	ACHD, OS ASD, MILD PAH, GD LV, SR	DIRECT CLOSURE OF OS ASD	DR. VIVEK V. PILLAI
160			56	M	27-Aug-2013	CAD, TVD, OLD MI, S/P PCI TO RCA, SEVERE LVD, SR, DM, HTN	CABG X 6 (LIMA TO LAD; RSVG TO D1, RI, PDA1, PDA2 & RPLB)	DR. JAYAKUMAR K
161			54	M	29-Aug-2013	CAD, TVD, LMCA, GD LV, SR, HTN, DLP	CABG X 4 (LIMA TO LAD; RSVG TO D1, MAJ OM & RPDA)	DR. JAYAKUMAR K
162			73	M	29-Aug-2013	CAD, TVD, OLD IWMI, SEVERE LVD, DM, HTN, DLP	CABG X 6 (LIMA TO LAD; RSVG TO D1, RI, BOTH BRANCHES OF OM & DISTAL RCA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
163			73	F	30-Aug-2013	SEV CAL AS, MILD MR, GDLV, SR, NC, DM, HTN	AVR # 19 PM MAGNA	DR. VARGHESE T.PANICKER
164			66	M	30-Aug-2013	CAD, LMCA, TVD, GD LV, SR, DM, HTN, DLP, RENAL DYSFUNCTION	CABG X 5 (LIMA TO LAD; RSV G TO D1, MAJOR OM, RI & LAST RPLB)	DR. JAYAKUMAR K
165			3	F	5-Sep-2013	CCHD, HYPOPLASTIC MV, SV(RV), MULTIPLE VSD, SEVERE TR, PAH, B/L SVC, S/P PA BANDING + ATRIAL SEPTECTOMY +PDA INTERRUPTION	VSD ENLARGEMENT + TV REPAIR + B/L BDGS (RACHS IV)	DR. BAIJU S.DHARAN
166			2	F	10-Sep-2013	CCHD, MIXED TAPVC, MILD PAH, SR	TAPVC REPAIR (LUPV TO LAA & COMMON CHAMBER TO LA ANASTOMOSIS +WARDEN'S PROCEDURE)	DR. THOMAS MATHEW
167			1	F	11-Sep-2013	CCHD, TOF WITH PULMONARY ATRESIA, PDA, OSASD, GOOD CONF PA, NC,SR	ICR WITH TRANS ANNULAR PATCH WITH RVOT RECONSTRUCTION WITH MONOCUSP + ASD MADE RESTRICTIVE	DR. SABARINATH MENON
168			2	M	12-Sep-2013	CCHD, HYPOPLASTIC TV, PV, RV, OSASD, GD LV, SR, SPELLS	BDGS + FENESTRATED CLOSURE OF ASD	DR. THOMAS MATHEW

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
169			0	M	13-Sep-2013	ACHD, SEV COA (POST SCA), BAV, MILD MR, SR	RESECTION AND END-TO-END ANASTOMOSIS	DR. BAIJU S.DHARAN
170			1	M	15-Sep-2013	S/P ASO AND ARCH REPAIR	DSC	DR. THOMAS MATHEW
171			1	M	17-Sep-2013	UHL'S ANOMALY, SEV TR, DILATED RV WITH RV DYSFUNCTION, GD LV, SR, SPELLS	BDGS + ATRIAL SEPTECTOMY + DEVAGUS TRICUSPID ANNULOPLASTY	DR. THOMAS MATHEW
172			2	M	18-Sep-2013	COR TRIATRIATUM, MODERATE PAH, SR	COR TRIATRIATUM REPAIR	DR. SABARINATH MENON
173			1	F	19-Sep-2013	RESIDUAL VSD, S/P ICR + TAP WITH MONOCUSP RECONSTRUCTION FOR TOF , INFUNDIBULAR ATRESIA, SR	VSD CLOSURE + TAP WITH MONOCUSP RECONSTRUCTION	DR. BAIJU S.DHARAN
174			1	F	23-Sep-2013	CCHD, DORV, SAVSD VSD, SEV PS, ASD (OPASD & OSASD), B/L SVC, GOOD PA, SR	ICR + TAP WITH MONOCUSP RECONSTRUCTION OF RVOT	DR. THOMAS MATHEW
175			7	F	24-Sep-2013	ACHD, SAVSD, SEVERE INFUNDIBULAR PS, ,CONF PA, GD LV, SR	TRANS RA-PA ICR	DR. THOMAS MATHEW

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
176			0	M	25-Sep-2013	ANOMALOUS ORIGIN RPA FROM AORTA, PDA, PFO, SEVERE PAH, SR	REIMPLANTATION OF RPA TO MPA + PDA INTERRUPTION	DR. BAIJU S.DHARAN
177			0	F	27-Sep-2013	S/P COA REPAIR AND PA BAND	PA BAND TIGHTENING	DR. BAIJU S.DHARAN
178			0	M	27-Sep-2013	CCHD, TA, SA VSD, INF PS, SPELLS	BDGS	DR. BAIJU S.DHARAN
179			4	M	30-Sep-2013	CCHD, TOF, CONF PA, MILD LPA ORIGIN STENOSIS, PDA, SR	ICR + MPA PLASTY WITH PATCH EXTENDING TO LPA ORIGIN	DR. THOMAS MATHEW
180			8	F	1-Oct-2013	ACHD, OSASD,SR,NC	PERICARDIAL PATCH CLOSURE OF ASD VIA MINISTERNOTOMY	DR. SABARINATH MENON
181			1	M	3-Oct-2013	ACHD, DC VSD, PFO, SEV PAH, GDLV, SR	TRANS PA GORETEX PATCH CLOSURE OF VSD	DR. SABARINATH MENON
182			12	M	4-Oct-2013	FOREIGN BODY GRANULOMA STERNAL WOUND, S/P ASD CLOSURE	GRANULOMA EXCISION	DR. SABARINATH MENON
183			5	F	7-Oct-2013	ACHD, OS ASD, MILD PAH, GDLV, SR	DIRECT CLOSURE OF ASD	DR. SUDIP DUTTA BARUAH
184			0	F	8-Oct-2013	S/P IC-TAPVC REPAIR+ STENTED STERNUM	DSC	DR. THOMAS MATHEW

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
185			1	M	8-Oct-2013	CCHD, DORV, NON COMMITTED INFLOW VSD, SEV PAH, OSASD, RIGHT ARCH, SR	PA BAND # 25MM (RACHS III)	DR. BAIJU S.DHARAN
186			8	M	9-Oct-2013	CCHD, TA, SEV PS, RESTRICTED VSD, L SVC, SR	B/L BDGS	DR. THOMAS MATHEW
187			4	F	11-Oct-2013	S/P ICR WITH WOUND DEHISCENCE	SECONDARY SUTURING	DR. THOMAS MATHEW
188			12	M	11-Oct-2013	S/P VSD CLOSURE WITH FRACTURE STERNAL WIRE	STERNAL WIRE REMOVAL	DR. SUDIP DUTTA BARUAH
189			0	F	15-Oct-2013	ACHD, SA VSD, SEVERE PAH, SR, DOWNS SYNDROME	BOVINE PERICARDIAL PATCH CLOSURE OF VSD	DR. BAIJU S.DHARAN
190			1	M	15-Oct-2013	CTGA, MUS VSD, OSASD, SEV PAH, PDA, B/L SVC	GORETEX PATCH CLOSURE VSD + L SVC TRANSLOCATION TO RAA + UNROOFED CS CLOSURE WITH PERICARDIAL PATCH + ASD MADE RESTRICTIVE	DR. THOMAS MATHEW
191			1	F	17-Oct-2013	ACHD, SA VSD, SEVERE PAH, SR	GORETEX PATCH CLOSURE VSD	DR. THOMAS MATHEW

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
192			0	F	17-Oct-2013	ACHD, MULTI VSD, OSASD, SEV PAH, SR	PA BAND # 23MM (RACHS III)	DR. THOMAS MATHEW
193			13	F	18-Oct-2013	CCHD, DORV, PA, SAVSD WITH INLET EXTENSION, SR, S/P BDG+ ATRIAL SEPTECTOMY, P/ MAPCA COILING	BIVENTRICULAR REPAIR WITH INTRA CARDIAC TUNNELING & 21 MM PULMONARY HOMOGRAFT + ASD CLOSURE + BDGTAKEDOWN	DR. BAIJU S.DHARAN
194			1	F	21-Oct-2013	SS, DC, DORV, C-TGA, INLET VSD, OSASD, SEVERE PS, SR	BDGS	DR. SABARINATH MENON
195			0	F	22-Oct-2013	CCHD, SC-TAPVC WITH RESTRICTIVE ASD ,SEV PAH, SR	PRIMARY SUTURELESS REPAIR BY RIGHT LATERAL APPROACH +ASD MADE RESTRICTIVE WITH STENTED STERNUM	DR. BAIJU S.DHARAN
196			6	M	22-Oct-2013	ACHD, OSASD, VAL PS, NOONAN SYND	PERICARDIAL PATCH CLOSURE OF ASD + PULMONARY VALVOTOMY	DR.SIMRAN KUNDAN
197			2	M	28-Oct-2013	CCHD, TOF, GOOD PA , SR, NC, SPELLS (?)	ICR	DR. SABARINATH MENON
198			1	F	29-Oct-2013	ACHD, SAVSD, PDA, PFO, SEV PAH, SR, DOWN'S SYNDROME	GORETEX PATCH CLOSURE VSD + PDA LIGATION WITH PFO KEPT OPEN	DR. SABARINATH MENON

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
199			4	M	30-Oct-2013	ACHD, SP VSD, MODERATE TO SEVERE TR & MR, SEV PAH, MILD RV DYSFUNCTION, FAIR LV, NC, SR	GORETEX PATCH CLOSURE VSD + MV REPAIR (POSTERIOR ANNULOPLASTY) + DEVAGUS TRICUSPID ANNULOPLASTY	DR. THOMAS MATHEW
200			0	F	31-Oct-2013		ASO+TAPVC REPAIR((RACHS 4)	DR. BAIJU S.DHARAN
201			51	M	1-Nov-2013	RHD, SEVERE AR, MOD AS, SEVERE MS, DILATED LV, NC, SR	DVR (AVR # 23CHVP + MVR # 27SJM)	DR. PRAVEEN VARMA P.K.
202			55	M	1-Nov-2013	ACUTE TYPE A AORTIC DISSECTION, GOOD LV, NC	SUPRA CORONARY ASCENDING AORTIC REPLACEMENT	DR. JAYAKUMAR K
203			76	M	4-Nov-2013	CAD, DVD, GDLV, SR, DM, DLP	OPCABG X 3 (LIMA TO LAD; RSVG TO DIAGONAL 1 & RPDA)	DR. JAYAKUMAR K
204			72	M	5-Nov-2013	CAD, TVD, GOOD LV, SR, DM, HTN, DLP	CABG X 5(LIMA TO LAD; RSVG TO D2, TERM OM, RPDA, RPLB)	DR. JAYAKUMAR K
205			65	M	6-Nov-2013	CAD, TVD, GD LV, SR, DM, HTN, DLP	CABG X 5 (LIMA TO LAD; RSVG TO D1, MAJ OM, LPLB & RPDA)	DR. JAYAKUMAR K
206			39	M	7-Nov-2013	RHD, SEV MR, MODERATE MS, MODERATE PAH, AF, S/P AVR & OMV	REDO STERNOTOMY + MVR # 289SJM + PMLP	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
206			39	M	7-Nov-2013	RHD, SEV MR, MODERATE MS, MODERATE PAH, AF, S/P AVR & OMV	REDO STERNOTOMY + MVR # 289SJM + PMLP	DR. PRAVEEN VARMA P.K.
207			59	M	8-Nov-2013	CAD, TVD, GD LV, SR, DM, HTN, DLP	CABG X 4 (LIMA TO LAD; RSVG TO D1, RI & LPLB)	DR. PRAVEEN VARMA P.K.
208			74	F	11-Nov-2013	CAD, TVD, GD LV, SR, DM, HTN, DLP	CABG X 4 (LIMA TO LAD; RSVG TO MAJOR DIAGONAL, MAJOR OM & RPDA)	DR. JAYAKUMAR K
209			55	F	12-Nov-2013	CAD, TVD, GD LV, SR, HTN, DLP, S/P THYROIDECTOMY	CABG X 4 (LIMA TO LAD; RSVG TO MAJ DIAG, MAJ OM & DISTAL RCA)	DR. PRAVEEN VARMA P.K.
210			23	F	12-Nov-2013	RHD, SEV MR, MODERATE MS, SEV PAH, GD LV, SR	MVR # 23CHVP + PMLP	DR. VARGHESE T.PANICKER
211			33	F	13-Nov-2013	RHD, SEV MR, MILD MS, FAIR LV, AF	MVR # 27CHVP + PMLP	DR. VIVEK V. PILLAI
213			65	M	15-Nov-2013	SACCULAR ANEURYSM ASCENDING AORTA + DTA ANEURYSM, GOOD LV, SR	EXCISION OF ANEURYSM WITH DACRON PATCH REPAIR OF AORTA	DR. JAYAKUMAR K
214			58	M	19-Nov-2013	CAD, TVD,GDLV, SR, DM, HTN	CABG X 6 (LIMA TO LAD; RSVG TO D1, D3, MAJOR OM, TERM OM & RPDA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
215			43	M	20-Nov-2013	BAV, ASCENDING AORTIC ANEURYSM, MODERATE AS & AR,,GOOD LV, SR, NC	MODIFIED BENTALL'S PROCEDURE (25CHVP + 26 ALBOGRAFT)	DR. JAYAKUMAR K
216			45	M	21-Nov-2013	RHD, SEV CAL MS, MILD MR, MILD LVD, MILD PAH, AF, LAA CLOT, NC, SEIZURE DISORDER	MVR # 31 CHVP + LAA EXCLUSION	DR. VARGHESE T.PANICKER
217			26	F	22-Nov-2013	RHD, SEV AR, MOD SEV AS, MOD MR, MILD MS, GOOD LV, DILATED LV, SR	AVR # 19 CHVP + MV ANNULOPLASTY WITH #27 RING	DR. VARGHESE T.PANICKER
218			44	M	25-Nov-2013	BAV, SEVERE CALCIFIC AS, MORERATE TO SEVERE AR, LVH, SR, NC	AVR # 23 CHVP	DR. PRAVEEN VARMA P.K.
219			34	M	25-Nov-2013	BAV, SEVERE CALCIFIC AS, GOOD LV, LVH, SR	AVR # 21 CHVP + WRAP AORTOPLASTY	DR. VARGHESE T.PANICKER
220			29	F	26-Nov-2013	ACHD, OSASD, MILD PAH, SR	TANNED PERICARDIAL PATCH CLOSURE OF ASD	DR. BINEESH K. R.
221			49	F	26-Nov-2013	RHD, SEVERE MR, MODERATE MS, MODERATE PAH, SR, NC, S/P BMV	MVR # 25CHVP + PMLP	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
222			33	M	27-Nov-2013	RHD, SEVERE CAL MS, MODERATE MR, SEV TR, MILD AR, SEVERE PAH, SR	MVR # 23 SJM + TVA # 28MM MC3 RING	DR. PRAVEEN VARMA P.K.
223			43	M	29-Nov-2013	ASCENDING AORTIC ANEURYSM, SEV AR, MILD AS, DILATED LV, SR, NC, HYPOTHYROIDISM	MODIFIED BENTALL'S PROCEDURE (23 CHVP + 24 ALBOGRAFT)	DR. JAYAKUMAR K
224			38	F	29-Nov-2013	S/P BMV SEV MR, RHD, SEVERE MS, MO TR, SEV PAH, AF	MVR # 29CHVP + PMLP	DR. VIVEK V. PILLAI
225			35	F	2-Dec-2013	ACHD, SV ASD, MOD PAH	DOUBLE PATCH REPAIR	DR. JAYAKUMAR K
226			47	M	2-Dec-2013	CAD, TVD, SEV LVD, SR, DM, DLP	CABG X 4 (LIMA TO LAD; RSVG TO D1, OM1 & RPDA)	DR. JAYAKUMAR K
227			62	M	3-Dec-2013	CAD, TVD, FAIR LV, SR, DM, DLP, OSTEOARTHRITIS	CABG X 4 (LIMA TO LAD; RSVG TO D1, OM1 & TERM OM)	DR. JAYAKUMAR K
228			65	F	4-Dec-2013	CAD, TVD, GDLV, SR, DM, HTN, DLP	CABG X 5 (LIMA TO LAD; RSVG TO PDA, PLB, MAJ DIAG & OM2)	DR. JAYAKUMAR K
229			49	M	4-Dec-2013	CAD, TVD, GDLV, SR, DM, HTN	CABG X 3 (LIMA TO LAD; RSVG TO DISTAL RCA & TERMINAL OM)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
230			68	M	5-Dec-2013	CAD, TVD, GOOD LV, SR, DM, DLP	CABG X 4 (LIMA TO LASD; RSVG TO D1, OM1 & RPLP)	DR. JAYAKUMAR K
231			15	M	6-Dec-2013	RHD, SEV MR, MOD PAH, GOOD LV, SR	MVR # 25 CHVP + PARTIAL PMLP	DR. VIVEK V. PILLAI
232			62	M	9-Dec-2013	CAD, TVD, GD LV, SR, DM, HTN, OA	CABG X 4 (LIMA TO LAD; RSVG TO RI, LOWER DIVISION OF MAJ OM & PDA)	DR. PRAVEEN VARMA P.K.
233			67	M	10-Dec-2013	CAD, TVD, GOOD LV, SR, DM, HTN	CABG X 5 (LIMA TO LAD; RSVG TO OM1, OM2, OM3 & PDA)	DR. JAYAKUMAR K
234			51	F	10-Dec-2013	CAD, TVD, GD LV, SR, DM, HTN, GASTRITIS	CABG X 4 GRAFTS (LIMA TO LAD, RSVG TO RI, MAJOR OM AND RPDA) (SEQUENTIAL RSVG TO PROXIMAL AND DISTAL RI)	DR. JAYAKUMAR K
235			29	F	11-Dec-2013	ACHD, OSASD, GDLV, SR	TPP CLOSURE OF OS ASD	DR. SIMRAN KUNDAN
236			56	F	11-Dec-2013	RHD, SEVERE MS, SEVERE AS, MOD AR, MILD MR, LVH, SR	DVR (MVR # 23 SJM + PMLP + AVR # 17SJR)	DR. PRAVEEN VARMA P.K.
237			35	F	12-Dec-2013	ACHD, SVC TYPE SVASD WITH OVER RIDING OF RUPV	DOUBLE PATCH CLOSURE OF ASD	DR. VARGHESE T. PANICKER

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
238			54	M	12-Dec-2013	CAD, TVD, MODERATE LV DYSFUNCTION, SR, DM, HTN	CABG X 3 (LIMA TO LAD; RSVG TO MAJOR OM & RPDA)	DR. PRAVEEN VARMA P.K.
239			59	M	13-Dec-2013	CAD, TVD, IWMI, MILD LVD, MILD MR, SR, DM, HTN, DLP	CABG X 6 (LIMA TO LAD; RSVG TO D1, D2, MAJOR OM, RPDA & RPLB)	DR. JAYAKUMAR K
240			54	M	13-Dec-2013	CAD, TVD, GD LV, SR, DM, HTN	CABG X 3 (LIMA TO LAD; RSVG TO D1 & LPDA)	DR. VIVEK V. PILLAI
241			43	F	15-Dec-2013	PERICARDIAL EFFUSION S/P ASD CLOSURE	SUBXIPHOID PE DRAINAGE	DR. VIVEK V. PILLAI
242			58	M	16-Dec-2013	CAD, TVD, GOOD LV, SR, DM	CABG X 5 (LIMA TO LAD; RSVG TO D1, OM3, OM4 & RPDA)	DR. JAYAKUMAR K
243			35	M	16-Dec-2013	ACHD, SV ASD, GDLV, SR	DOUBLE PATCH REPAIR	DR. JAYAKUMAR K
244			47	M	17-Dec-2013	RHD, SEV MR, SEV AR, MILD MS, MODERATE LV DYSFUNCTION, CAD, DVD, SR, DM	DVR (MVR # 27 CHVP + PMLP + AVR # 23CHVP) + CABG X 2 (RSVGTOD1 & TERM OM)	DR. PRAVEEN VARMA P.K.
245			65	F	18-Dec-2013	RHD, SEV MR, RE-MS (S/P PTMC), TRIVIAL TR & AR, GOOD LV, MILD PAH, CAD, DVD, SR, DM	MVR # 25 CHVP & PMLP+ CABG X 2 (RSVGTOLAD & OM 1)	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
246			57	M	20-Dec-2013	CAD, TVD, OLD AWMI, SEVERE LVD, SR, HTN, DM, DLP	CABG X 6 (LIMA TO LAD; RSVG TO D1, OM1, OM2, OM3 & RPDA) + APICAL & ANTEROLATERAL WALL PLICATION	DR. JAYAKUMAR K
247			57	M	22-Dec-2013	S/P CABG, VB STROKE, PULMONARY LACERATION (LF) WITH HEMOTHORAX, DM, HTN, DLP	LF EXPLORATORY THORACOTOMY & REPAIR OF PULMONARY LACERATION	DR. BALASUBRAMONIAM K.R.
248			49	M	31-Dec-2013	CAD, SVD, GD LV, SR, DLP, COPD	CABG X 3 (LIMA TO LAD; RSVG TO LAD & D1)	DR. JAYAKUMAR K
249			68	M	1-Jan-2014	CAD, TVD, GD LV, SR, DM, HTN, S/P PCI TO LAD	CABG X 5 (LIMA TO LAD; RSVG TO D2, OM1, RPDA, RPLB WITH D2 PIGGY BACKED TO OM1)	DR. JAYAKUMAR K
250			67	M	2-Jan-2014	CAD, DVD, GD LV, SR	CABG X 4 (LIMA TO LAD; RSVG TO DISTAL RCA, D1 & ACUTE MARGINAL PDA)	
251			0	F	3-Jan-2014	CCHD, DTGA, SMALL MUS VSD, PDA, 1LR2CX, PRESERVED LV, PAH, SR	ASO + VSD CLOSURE WITH STENTED STERNUM	DR. BAIJU S.DHARAN
252			37	F	6-Jan-2014	RHD, SEV AS, MOD AR, S/POMV 2004, KYPHOSCOLIOSIS, RESTRICTIVE LUNG DISEASE	REDOSTERNOTOMY + AVR # 17 SJR + AORTOPLASTY DONE WITH BPP	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
253			53	M	7-Jan-2014	CAD.TVD,MOD LVD,SR,/P PTCA(LAD&RCA)	CABG X 3 GRAFTS (LIMA- LAD,RSVG-RPDA,RPLB)	DR. PRAVEEN VARMA P.K.
254			57	F	7-Jan-2014	ACHD, OSASD, SEVERE PAH,SR	DIRECT CLOSURE OF ASD	DR. BINEESH K.R.
255			40	M	8-Jan-2014	MVP, MOD MR, GD LV, SR, NC	MV REPAIR WITH # 35 TAILOR ANNULOPLASTY RING	DR. PRAVEEN VARMA P.K.
256			22	F	8-Jan-2014	RHD, MVP, SEV MR, MILD PAH, GD LV, SR	MVR # 25MMPM + PMLP	DR. VIVEK V. PILLAI
257			51	M	9-Jan-2014	CAD, TVD, FAIR LV, CKD, DM, HTN, DLP	CABG X 3 (LIMA TO LAD; RSVG TO OM1 & RPDA)	DR. JAYAKUMAR K
258			52	M	10-Jan-2014	RHD, MVP OF PML, SEV MR, MOD TR, SEV PAH, GDLV, SR	MVR #29 CHVP+PMLP	DR. PRAVEEN VARMA P.K.
259			52	M	13-Jan-2014	RHD, S/P MVR(2005), RECURRENT FUNGAL IE, FAIR LV, MODERATE PAH, NC, AF, DM	REDOSTERNOTOMY + MVR #25 CHVP	DR. VIVEK V. PILLAI
260			53	M	17-Jan-2014	CAD, TVD, GOOD LV, SR	CABG X 4 (LIMA GTO LAD; RSVG TO D2, TERMINAL OM & ACUTE MARGINAL PDA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
261			46	F	20-Jan-2014	ACHD,OP ASD,CLEFT AML,MOD MR,MOD PAH,GDLV,SR,NC	PAVCD REPAIR(BOVINE PERICARDIAL PATCH CLOSURE OF OP ASD+CLEFT AML REPAIR)	DR. VIVEK V. PILLAI
262			56	M	21-Jan-2014	CAD,TVD,GDLV,SR,DM,DLP, VV	CABG X 6 GRAFTS (LIMA -LAD; RSVG-MAJ D,BOTH BRANCHS OF OM,AM,DISTAL RCA)	DR. JAYAKUMAR K
263			20	M	21-Jan-2014	ACHD,SV ASD, MILD PAH, SR	DOUBLE PATCH REPAIR	DR. BINEESH K.R.
264			25	M	22-Jan-2014	ACHD, OSASD, SR	PERICARDIAL PATCH CLOSURE	DR. SUDIP DUTTA BARUAH
265			54	M	22-Jan-2014	CAD, TVD ,RECENT IWMI, GOOD LV, SR, DM, HTN.	CABG X 4 GRAFTS(LIMA-LAD,RSVG-MAJ.D,MAJ.OM,DISTAL RCA)	DR. PRAVEEN VARMA P.K.
266			61	M	23-Jan-2014	CAD,DVD,IWMI (OLD),GDLV,S/P PTCA TO LAD-OM), MILD ISR,SR,HTN	CABGX4 GR(LIMA TO LAD ,RSVG TO MAJ DIAGONAL, MAJ OM AND TERM. OM)	DR. JAYAKUMAR K
267			23	M	23-Jan-2014	ACHD, OS ASD, MILD PAH, GOOD LV, SR	TPP CLOSURE OF ASD	DR. MOHAMMED IDHREES A.
268			33	M	24-Jan-2014	RHD, SEV CAL MS, MILD MR, ,SEV TR, MOD AR, MODERATE RV DYSFUNCTION, SEVERE PAH, SR	MVR # 23CHVP + TVA # 28MM MC3 RING	DR. VARGHESE T.PANICKER

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
269			57	M	27-Jan-2014	CAD,TVD,GD LV, PAPVC OF RUPV & RMPV, SR, DM, HTN	CABG X 3 GRAFTS (LIMA TO LAD,RSVG TO D1 AND OM1)+DOUBLE PATCH REPAIR	DR. PRAVEEN VARMA P.K.
270			51	F	28-Jan-2014	RHD, SEV CAL MS, MILD MR, SEVERE AS, MILD AR & TR, SEVERE PAH, GOOD LV, AF	DVR(MVR # 25CHVP WITH PMLP + AVR # 19 SJR) + LAA EXCISION	DR. PRAVEEN VARMA P.K.
271			40	F	29-Jan-2014	RHD,SEV MS,MILD MR, SEV AS,MOD AR,MILD TR,LVH,MOD PAH,SR	DVR(MVR#25 CHVP WITH PMLP + AVR#19SJR)	DR. PRAVEEN VARMA P.K.
272			57	M	30-Jan-2014	CAD,TVD,GDLV,SR,HTN,DM, DLP,SCARRED MYOCARDIUM(INFERIOR AND POSTERIOR BASAL REGION)	CABG X 5 (LIMA-LAD,RSVG-MAJ D,MAJ OM,RPDA,RPLB)	DR. JAYAKUMAR K
273			36	F	30-Jan-2014	RHD,SEV MS,MOD MR,MILD AR,MILD PAH,GDLV,SR	MVR 24 #CHVP + PMLP	DR. PRAVEEN VARMA P.K.
274			49	M	31-Jan-2014	CAD, TVD, OLD IWMI, MILD LVD, SR, DM, HTN, DLP	CABG X 3 (LIMA TO LAD; RSVG TO MAJ OM & PDA)	DR. PRAVEEN VARMA P.K.
275			47	F	3-Feb-2014	CAD, TVD, OLD AWMI, MODERATE LVD, SR, HTN	CABG X 4 (LIMA TO LAD; RSVG TO MAJ OM, TERM OM & RPDA) + LINEAR PPLICATION	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
276			54	F	3-Feb-2014	MVP OF PML (P2 & P3), SEVRE MR, MILD PAH, SR, DM, HTN	MV REPAIR WITH QUADRANGULAR RESECTION OF P2 WITH MVA # TAYLORS 25 RING	DR. VARGHESE T.PANICKER
277			56	M	4-Feb-2014	CAD, TVD, GR I DIASTOLIC DYSFUNCTION, SR, DM, HTN & DLP	CABG X 43 (LIOMA TO LAD; RSVG TO D2, LATERAL BRANCH OF MAJ OM & LPDA)	DR. JAYAKUMAR K
278			57	M	5-Feb-2014	MVP P2 SEGMENT, SEV.MR, MILD TR, SEV PAH, GOOD LV, SR, NC	MV REPAIR (TRIANGULAR RESECTION + ANNULOPLASTY WITH # 27 TAYLOR RING)	DR. PRAVEEN VARMA P.K.
279			47	F	6-Feb-2014	RHD,S/P CMV,SEV RE MS,MILD MR,MOD AS,MILD AR,MILD TR,MOD PAH,CAD,DVD,GDLV,SR,HT N	DVR(MVR #25 CHVP+PMLP+AVR #17 SJR)+ AORTOPLASTY+ CABG X 2 GRAFTS(RSVG TO OM1 & PDA)	DR. PRAVEEN VARMA P.K.
280			24	M	7-Feb-2014	MARFAN'S SYNDROME, ASCENDING AORTIC ANEURYSM, TYPE A AORTIC DISSECTION, SEVERE AR, MILD LVD, SR	MODIFIED BENTALL'S PROCEDURE WITH 267MM ALBOGRAFT & 25 CHVP + WRAP AORTOPLASTY	DR. JAYAKUMAR K
281			46	F	7-Feb-2014	S/P MVR #27CHVP, PE	SUBXIPHOID PERICARDIAL DRAINAGE	DR. PRAVEEN VARMA P.K.
282			49	M	15-Feb-2014	SEV CAL AS, LVH, SR	AVR# 21CHVP	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
283			41	M	25-Feb-2014	RHD,SEV MS,MILD AR,MILD TR,MOD PAH,AF,NC	MVR # 25 CHVP +PMLP+ LA CLOT EXTRACTION.	DR. VARGHESE T.PANICKER
284			51	M	26-Feb-2014	CAD, TVD, GDLV, SR, DM, HTN, DLP	CABG X 4GRAFTS(LIMA-LAD & RSVG-D1,TERM OM,PDA)	DR. JAYAKUMAR K
285			42	F	28-Feb-2014	RHD,S/P BMV,SEV RE MS,MILD PAH,LA CLOT,FAIR LV,AF,NC	MVR #23 CHVP +PMLP +LAA EXCLUSION	DR. VARGHESE T.PANICKER
286			46	M	28-Feb-2014	CAD, TVD, GD LV, SR, HTN, DLP	CABGX6 GRAFTS(LIMA-LAD AND RSVG TO D1,OM1,OM2,TERM OM & PDA)	DR. JAYAKUMAR K
287			56	F	3-Mar-2014	RHD,S/P CMV,RE-SEV MS,MILD MR,MILD AR,MOD PAH,GDLV,AF,NC	MVR#27CHVP AND TV ANNULOPLASTY #30 MC3 RING	DR. PRAVEEN VARMA P.K.
288			62	M	3-Mar-2014	CAD,TVD,GDLV,SR,DM,HTN, DLP	CABG X 3 GR(LIMA TO LAD,RSVG TO TER OM,RPDA)	DR. PRAVEEN VARMA P.K.
289			44	M	4-Mar-2014	RHD,SEV MS,SEV AS,MODAR,MODMR,,MILD TRMODPAH,SR,GDLV,NC, SEIZUREDISORDER	MVR #25 CHVP + PMLP +AVR #21 CHVP	DR. PRAVEEN VERMA P. K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
290			30	M	5-Mar-2014	RHD, SEVERE MS, MODERATE MR, MODERATE TR, MODERATE PAH, SR	MVR # 27 CHVP + PMLP	DR. BINEESH K.R.
291			49	M	6-Mar-2014	BAV, SEVERE AR, DILATED LV, SR, NC	AVR # 21 CHVP	DR. BINEESH K.R.
292			45	F	7-Mar-2014	RHD,SEV MR,MILD TR,DIL LV,MILD PAH,GDLV,AF,DM	MVR #29 CHVP + PMLP	DR. VARGHESE T.PANICKER
293			48	M	10-Mar- 2014	CAD,TVD,OLD IWMI,S/P PCI TO RCA,GDLV,SR	CABG X 3 GRAFTS(LIMA TO LAD,RSVG TO OM1,OM2)	DR. JAYAKUMAR K
294			48	M	10-Mar- 2014	CAD, TVD, GDLV, SR, DM	CABGX6G (LIMA-LAD, RSVG- D1, OM1, RI, RPDA &RPLB)	DR. JAYAKUMAR K
295			17	F	11-Mar- 2014	POST IE A2 PERFORATION WITH PML PROLAPSE WITH SEVERE MR, MODERATE TR, SEVERE PAH, RV DYSFUNCTION, SR, LEFT HEMIPLEGIA FOLLOWING CEREBRAL ABSCESS	MVR # 27 CHVP WITH PMLP + TVA WITH 28MM MC3 RING	DR. VIVEK V. PILLAI
296			74	M	12-Mar- 2014	CAD,TVD,OLD IWMI,GDLV,SR,CHRONIC CAL CHOLECYSTITIS,BPH S/PTURP,VARICOSEVEINS	CABG X 5 GRAFTS(LIMA TO LAD,RSVG TO D1,OM1,TER OM,RPDA)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
297			64	F	13-Mar-2014	CAD, TVD, RECENT MI, MODERATE LV DYSFUNCTION, SR, DM	CABG X 4 (LIMA TO LAD; RSVG TO MAJ D, MAJ OM & RPDA)	DR. JAYAKUMAR K
298			47	M	14-Mar-2014	RHD, SEVERE MS, MILD MR, TR & AR, SEVERE PAH, AF, LA CLOT	MVR # 25 CHVP WITH PMLP + LA CLOT EXTRACTION	DR. VARGHESE T.PANICKER
299			27	M	18-Mar-2014	ACHD, SVASD WITH PAPVC OF RUPV & RMPV	DOUBLE PATCH REPAIR	DR. BINEESH K.R.
300			60	M	19-Mar-2014	ASCENDING AORTIC ANEURYSM, SEV AR, CAD, TVD, DILATED LV, MILD LVD	MODIFIED BENTALL'S PROCEDURE (25 CHVP + 28 ALBOGRAFT) + CABG X 3 (RSVG TO LAD, MAJ OM & D1)	DR. JAYAKUMAR K
301			61	F	20-Mar-2014	CAD, TVD, RECENT IWMI, GOOD LV, SR, HTN, DLP	CABG X 5 (LIMA TO LAD; RSVG TO MAJ DIAG, RAMUS, MAJ OM & RPDA)	DR. JAYAKUMAR K
302			37	M	21-Mar-2014	VALVE THROMBOSIS WITH SUBMITRAL ANEURYSM, S/P MVR + SUB MITRAL ANEURYSM REPAIR, SEVERE PARAVALVULAR AR, MILD LV DYSFUNCTION, MOD TR, SR	MVR # 21 CHVP + AVR # 21 CHVP+ TV BICUSPIDISATION WITH SUBMITRAL ANEURYSM REPAIR	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
303			48	F	24-Mar-2014	RHD, SEV MR, MILD PAH, AF, NC	MVR # 27CHVP + PMLP	DR. PRAVEEN VARMA P.K.
304			47	M	25-Mar-2014	RHD, SEV MR, MILD PAH, AF, NC	MVR # 27CHVP + PMLP	DR. BINEESH K.R.
305			61	M	25-Mar-2014	CAD, LMCA, TVD, GOOD LV, SR, HTN	CABG X 4 (LIMA TO LAD; RSVG TO D1, OM1 & RPDA)	DR. VIVEK V. PILLAI
306			46	F	26-Mar-2014	ACHD, SV ASD, PAPVC, MILD PAH, SR, NC	DOUBLE PATCH REPAIR OF SV ASD	DR. BINEESH K.R.
307			79	M	27-Mar-2014	SEV CAL AS, MILD AR, LVH, NC, SR, RENAL DYS	AVR # 21 PM MAGNA	DR. VARGHESE T.PANICKER
308			17	M	28-Mar-2014	ACHD, SVASD WITH PAPVC OF RUPV & RMPV, PFO, SR	DOUBLE PATCH REPAIR + DIRECT CLOSURE OF PFO	DR. BINEESH K.R.
309			37	F	31-Mar-2014	RHD, SEV REMS (S/P BMV), MILD MR, MILD PAH, SR	MVR # 27 CHVP + PMLP	DR. BINEESH K.R.
310			41	M	1-Apr-2014	CAD, TVD, GOOD LV, SR, HTN,	CABG X 5 (LIMA TO LAD; RSVG TO D1, OM2, DISTAL LAD & RPDA)	DR. VIVEK V. PILLAI
311			43	M	2-Apr-2014	CAD, TVD, LVD, SR, DM	CABGX 5 GRAFT(LAD, MAJ DIAG, ACUTE MARGINAL, RPDA, RPLP	DR. VIVEK V. PILLAI

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
312			57	M	3-Apr-2014	CAD,TVD,GDLV,SR,DM	CABG X 6 GRAFTS(LIMA TO LAD,RSVG TO D1,RI,MAJ OM,RPDA,RPLB)	DR. JAYAKUMAR K
313			56	M	4-Apr-2014	FLAIL PML, SEV MR, CAL MITRL ANN, GDLV, SR, MOD PAH, DLP, NC	MV REPAIR,ARTIFICIAL CHORDOPLASTY OF P2 SEGMENT WITH B/L COMMISUROPLASTY	DR. VARGHESE T.PANICKER
314			62	M	7-Apr-2014	CAD,REC NSTEMI ,TVD, SR, HTN,DLP	CABGX4 GR,LIMA-LAD,RSVG-D1,MAJ OM,RPADA	DR. JAYAKUMAR K
315			67	M	9-Apr-2014	CAD TVD GDLV SR HTN DLP	CABGX 7 GR,LIMA-LAD,RSVG-D1,RI,OM1,DISTALOM,RPDA,AM	DR. JAYAKUMAR K
316			51	F	11-Apr-2014	CAD TVD GDLV SR DM HTN	CABGX 4 GRAFTS,LIMA-LAD,RSVG-D1,DISTAL OM,AM	DR. JAYAKUMAR K
317			62	M	22-Apr-2014	CAD, DVD, MOD- SEV LV DYSFUNCTION, SEV PAH, SR, DM(RECENT MI) SEV MR	CABGX 1GRAFT(RSVG- DISTAL OM) + MVR 25 PM	DR. VIVEK V. PILLAI
318			54	F	23-Apr-2014	CAD,LMCA,TVD,GDLV,SR,D M,HTN,DLP	CABG X 5 GRAFTS(LIMA TO LAD,RSVG TO D1, OM1,RPDA,RPLB)	DR. JAYAKUMAR K
319			53	F	24-Apr-2014	CAD,TVD,MOD LVD,SR,DM	CABG X 5 GRAFTS(LIMA TO LAD,D1,D2,RPDA,RPLB)	DR. JAYAKUMAR K

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
320			56	F	25-Apr-2014	RHD, SEVERE MS, MILD MR, MILD TR, MILD PAH, GOOD LV, AF, NC	MVR # 23 CHVP + PMLP	DR. BINEESH K.R.
321			57	F	28-Apr-2014	RHD, S/P CMV RE-MS, MILD MR, SEV CALCIFIC AS, MOD AR, SEVERE TR, SEV PAH, GDLV, AF	DVR (MVR # 23CHVP WITH PMLP + AVR # 17 CHVP) + TVA # 28MM MC3 RING	DR. VARGHESE T.PANICKER
322			28	F	29-Apr-2014	OSASD,SEV PAH,BIDIRECTIONAL SHUNT,GDLV,SR	TPP CLOSURE OF ASD+PULMONARY VALVE INSPECTION	DR. BINEESH K.R.
323			51	F	30-Apr-2014	SEV CAL AS,MOD AR,GDLV,SR,NC,BRONCHIAL ASTHMA	AVR#19 CHVP	DR. VARGHESE T.PANICKER
324			49	F	2-May-2014	RHD,SEV AS,MOD AR, MILD MR,MILD MS, GDLV, SR	AVR 19 CHVP+ MV REPAIR	DR. VARGHESE T.PANICKER
325			41	M	5-May-2014	ANNULO AORTIC ECTASIA ASC AORTIC ANEURYSM, SEV AR, DILATED LV, SR, NC	MODIFIED BENTALLS(25 CHVP + 28 MM ALBOGRAFT)	DR. JAYAKUMAR K
326			58	M	6-May-2014	CAD, TVD, OLD MI, ACS, MOD LVD, SR	CABG X6 GRAFTS LIMA-LAD, RSVG-MAJ OM, MAJ DIAG, RI, RPDA & RPLB	DR. VIVEK V. PILLAI

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
327			60	M	8-May-2014	CAD,TVD,OLD AWMI,GDLV,SR,DM,HTN,DLP	CABG X 7 GR(LIMA TO LAD,RSVG TO D3,RI,OM1,OM2,RPDA,RPLB)	DR. JAYAKUMAR K
328			51	M	9-May-2014	CAD,TVD,LMCA,MILD LV DYSFUN,DM,SR	CABG X 6 GRATFTS LIMA-LAD, RSVG- MAJ DIAG, OM1, TERM OM, RPDAAND RPLB	DR. JAYAKUMAR K
329			61	M	12-May- 2014	CAD,OLD IWMI,TVD,DLP,OLD CVA,GDLV,SR,COPD, VV B/L	CABGX4 GRAFTS LIMA-LAD, RSVG- MAJ DIAG, MAJ OM& RPDA	DR. JAYAKUMAR K
330			70	M	12-May- 2014	CAD, OLD IWMI,TVD, GDLV, DLP, SR, DM, HTN, COPD	CABG X 5 GRAFTS RSVG TO D1,D2,OM2,OM3 & RPDA	DR. JAYAKUMAR K
331			42	M	13-May- 2014	CAD,DVD,ISCHEMIC MR, MILD-MOD LVD	MVR # 27 CHVP WITH TOTAL CHORDAL PRESERVATION	DR. PRAVEEN VARMA P.K.
332			58	M	15-May- 2014	CAD,TVD,MOD LV DYSFUNCTION,MILD MR,SR	CABG X 4GRAFTS(LIMA-- >LAD,RSVG-->RI,DIST RCA & DIST LAD)	DR. PRAVEEN VARMA P.K.
333			46	M	16-May- 2014	CAD, TVD, REC AWTMI, MOD LV DYSFUNCTN, SR, HTN, DLP	CABGX 4GRAFTS (LIMA-LAD AND RSVG- OM3, OM4 & RPDA)	DR. PRAVEEN VARMA P.K.
334			52	M	16-May- 2014	S/P MVR #29 CHVP + PMLP WITH DISCHARGING SINUS DISCHARGE	WOUND DEBRIDMENT AND STERNAL WIRE REMOVAL	DR. PRAVEEN VARMA P.K.

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
335			60	M	19-May-2014	CAD,TVD,FAIR LV,MILD PAH,MILD MR,SR,DM	CABG X 5 GRAFTS,LIMA-LAD,RSVG-D1,OM1,POST CRUX RCA,PDA	DR. JAYAKUMAR K
336			53	M	29-May-2014	RHD, BAV, SEV AR, MODERATE MR, DILATED LV WITH MODERATE LVD	AVR # 27 CHVP	DR. PRAVEEN VARMA P.K.
337			67	F	30-May-2014	RHD, SEV MR, MOD PAH, WIDE QRS TACHYCARDIA	MVR # 25 PM + PMLP	DR. VARGHESE T.PANICKER
338			2	M	2-Jun-2014	CCHD, TOF, GOOD PA , SR, NC, SPELLS	ICR	DR. SABARINATH MENON
339			12	F	3-Jun-2014	ACHD, SA VSD, MILD PAH, GD LV, SR	GORTEX PATCH CLOSURE OF VSD	DR. SABARINATH MENON
340			1	M	4-Jun-2014	CCHD,TOF,CONF PA, GD LV, SR, SPELLS	ICR+ TAP+MONOCUSP RECONSTRUCTION OF RVOT	DR. SABARINATH MENON
341			0	M	5-Jun-2014	S/P NORWOODS STAGE 1 WITH STENTED STERNUM	DSC	DR. BAIJU S.DHARAN
342			5	M	5-Jun-2014	CCHD, SA, LC, LEFT ATRIAL ISOMERISM, NON OBSTRUCTIVE CORTRIATRIUM, ,SV(LV),COMMON AVV WITH MODERATE AVVR, LSVC, INTERRUPTED IVC	KAWASHIMA PROCEDURE+ AVVR REPAIR(CLEFT REPAIR + COMMISSUROPLASTY + REDUCTION ANNULOPLASTY) RACHS 4	DR. BAIJU S.DHARAN

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
343			0	M	6-Jun-2014	CCHD, DORV, MILD PS, MODERATE MS, SEVERE PAH, SR	PA BANDING # 26 MM ----- >DEBANDING	DR. SABARINATH MENON
344			11	F	9-Jun-2014	CCHD,TOF,P/LMBTS(2003), P/BPV(2009)P/BDG+LMBTS INTRPN(2010),LAD CROSSINGRVOT CONFLUENT PA, SR	ICR+27 PULMONARY HOMOGRAFT+BDG TAKEDOWN + PFO OPEN	DR. BAIJU S.DHARAN
345			5	M	10-Jun-2014	ACHD,OS ASD,GD LV, SR	TPP CLOSURE OF OS ASD	DR. SUDIP DUTTA BARUAH
346			1	F	10-Jun-2014	TOF WITH DCVSD, INFUN & VAL PS, RPA STENOSIS.	ICR+MPA AND RPAPLASTY	DR. SABARINATH MENON
347			4	F	12-Jun-2014	TOF, INF & PS, GOOD PA, ADD MM VSD	ICR,RVOT PATCH,ADDITIONAL MID MUSCULAR VSD CLOSURE	DR. SABARINATH MENON
348			3	F	13-Jun-2014	CCHD,PA,SA VSD,CONF PA,MAPCAS,SR	UNIFOCALIZATION OF MAPCA'S + ICR + #23 PULMONARY HOMOGRAFT FOR RV-PA + RPA AUGMENTATION WITH HOMOGRAFT PATCH)	DR. BAIJU S.DHARAN
349			1	M	16-Jun-2014	CCHD,TOF,GOOD PA	ICR(DR. SABARINATH MENON
350			0	F	17-Jun-2014	PA VSD, CONF PA, P/PDA STENTING, LPASTENOSIS,	BDG+CONFLUENCE AND LPA PLASTY WITH BPP	DR. SABARINATH MENON

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
351			4	M	18-Jun-2014	ACHD,SUPRA VALVULAR AS,CONFL PA,LVH,SR	DOTTY'S AORTOPLASTY WITH BPP	DR. BAIJU S.DHARAN
352			3	F	18-Jun-2014	ACHD,SV ASD, PAPVC RUPV & RMPV, GD LV, SR	DOUBLE PATCH REPAIR OF SV ASD	DR. SUDIP DUTTA BARUAH
353			4	F	20-Jun-2014	ACHD, SAVSD, PDA, SEVERE PAH, SR	GORETEX PATCH CLOSURE VSD + PDA LIGATION WITH PFO KEPT OPEN	DR. SABARINATH MENON
354			11	F	20-Jun-2014	ACHD,OS ASD,MILD PAH,SR	PP CLOSURE OF OS ASD	DR. REENUS DEMEL X
355			0	M	21-Jun-2014	ACHD, POST SUBCLAVIAN SEVERE COA, MODERATE TO SEVERE LVD, MILD MR, SR	RESSECTION & EXTENDED END TO END ANASTOMOSIS	DR. SABARINATH MENON
356			0	M	23-Jun-2014	CCHD, IC-TAPVC, PA WITH RPA & LPA ORIGIN STENOSIS, SV(LV), LARGE PDA,OSASD, MAPCAS, B/L SVC, SR, NC WITH HIATUS HERNIA	B/L BDGS+ IC TAPVC REPAIR (PRIMARY SUTURELESS TECHNIQUE)	DR. BAIJU S.DHARAN
357			3	F	24-Jun-2014	ACHD, SVASD WITH PAPVC OF RUPV & RMPV, SR	WARDEN'S PROCEDURE	DR. SABARINATH MENON

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
358			0	F	25-Jun-2014	ACHD, JUXTADUCTAL SEVERE COA, PFO, GD LV, SR	RESSECTION & EXTENDED END TO END ANASTOMOSIS	DR. BAIJU S.DHARAN
359			0	M	26-Jun-2014	CCHD, D-TGA WITH IVS, GD LV, 1L2CXR, PDA, SR, S/P BAS	ASO	DR. BAIJU S.DHARAN
360			0	M	27-Jun-2014	CARDIAC ARREST S/P BDG + ATRIAL SEPTECTOMY, CCHD, DORV, SAVSD, SEV PS, CONF PA, SR, RCA FROM LAD CROSSING RVOT	SUPPORTIVE BYPASS	DR. SABARINATH MENON
361			0	F	27-Jun-2014	CCHD CARDIAC TAPVC (UNOBS), OS ASD, MILD PAH, SR, NC	TAPVC REPAIR (CS CUTBACK TECHNIQUE) WITH PFO KEPT OPEN	DR. SABARINATH MENON
362			0	F	30-Jun-2014	CCHD, TOF WITH INFUNDIBULAR PS, CONF PA ANATOMY, SR, NC, H/O SPELLS	ICR WITH RVOT PATCH	DR. SABARINATH MENON
363			8	F	30-Jun-2014	ACHD, OS ASD, MILD PAH, SR	ASD CLOSURE	DR. SUDIP DUTTA BARUAH
364			9	F	1-Jul-2014	ACHD, OSASD, SR	ASD CLOSURE	DR. SUDIP DUTTA BARUAH

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
365			0	M	2-Jul-2014	CCHD, TYPE 1 TRUNCUS ARTERIOSUS, SEVERE PAH, CONF PA, PFO, SR, NC, ABSENT THYMUS	TRUNCUS ARTERIOSUS REPAIR WITH PFO OPEN	DR. BAIJU S.DHARAN
366			2	M	3-Jul-2014	CCHD, TOF, CONF PA, RT ARCH, OSASD, SR, NC, SPELLS	ICR WITH TAP WITH MONOCUSP RECONSTRUCTION OF RVOT + BPP CLOSURE OF ASD	DR. SABARINATH MENON
367			1	M	4-Jul-2014	CCHD, PA, VSD, SMALL CALIBRE LPA & RPA (HYPOPLASTIC RPA), PAD, S/P PDA STENT, NC, SR	ICR (GORETEX PATCH CLOSURE OF SAVSD + RV TO PA CONDUIT # 19 AORTIC HOMOGRAFT) + RPA & LPA PLASTY BY TPP + PDA INTERRUPTION	DR. BAIJU S.DHARAN
368			27	M	7-Jul-2014	DORV, DCVSD, INFUNDIBULAR & VALVULAR PS, ANEURYSMAL LPA, S/P LMBTS	ICR WITH TAP WITH MONOCUSP RECONSTRUCTION OF RVOT WITH LPA & CONFLUENCE PLASTY + LMBTS TAKEDOWN	DR. SABARINATH MENON
369			1	M	8-Jul-2014	POSTERIOR MALALIGNED VSD, LVOTO, SINGLE LPV WITH OSTIAL STENOSIS, DCRV, B/L SVC WITH UNROOFED CORONARY SINUS, PFO, SR, NC	ICR (GORETEX PATCH CLOSURE VSD + LVOT RESECTION + SEPTOPARIETAL BAND EXCISION) + V-Y PLASTY OF LPV OSTIUM + LSVC INTERRUPTION	DR. THOMAS MATHEW

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
370			0	F	9-Jul-2014	D-TGA,MULTIPLE VSIDS, HYPOPLASTICTV,PAH	PA BANDING # 28MM + ATRIAL SEPTECTOMY	DR. BAIJU S.DHARAN
271			1	F	10-Jul-2014	CCHD,SI,DC,SV(RV),DIRV,D ORV,SV(RV),PA,PDA,OS ASD,NC,SR	BDG+ ATRIAL SEPTECTOMY+ PDA INTERRUPTION	DR. THOMAS MATHEW
372			1	M	11-Jul-2014	S/P ICR WITH CHB FOR POSTERIOR MALALIGNED VSD, LVOTO, PV STENOSIS, UNROOFED CS, SR	EPICARDIAL PPI	DR. THOMAS MATHEW
373			0	M	11-Jul-2014	TOF,CONF PA ANATOMY,NC,SR	ICR(GP CLOSURE OF VSD+INF RESECTION+RVOT PATCH AND MPA PATCH AUGMENTATION	DR. THOMAS MATHEW
374			12	M	14-Jul-2014	CCHD, TOF WITH INFUNDIBULAR PS, GD CONF PA, NC, SR, SPELLS+, SEIZURE DISORDER	ICR + RVOT PATCH	DR. THOMAS MATHEW
375			0	M	16-Jul-2014	S/P ASO WITH STENTED STERNUM	DSC	DR. THOMAS MATHEW
376			3	M	18-Jul-2014	CCHD, SV (LV) PHYSIOLOGY, L POSED AORTA, S/P PA BANDING, 2:1 HB, NC	BDG WITH ATRIAL SEPTECTOMY + PPI	DR. BAIJU S.DHARAN

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
377			2	M	21-Jul-2014	CCHD, TOF WITH DCVSD, CONFLUENT PA,SR, NC	ICR + TAP	DR. THOMAS MATHEW
378			0	M	29-Jul-2014	ACHD, PV STENOSIS,SA VSD,OSASD,MILD PS, SEV PAH,SR	PV PLASTY+ TPP CLOSURE OF ASD& VSD+ INFUNDIBULAR RESECTION	DR. THOMAS MATHEW
379			1	F	30-Jul-2014	TOF,FAIR CONF PA, DUAL LAD CROSSING RVOT,B/L SVC,SR,SPELLS	ICR+TRANSANNULAR PATCH	DR. THOMAS MATHEW
380			0	M	31-Jul-2014	TYPE B IAA WITH ABR RSCA, PERIMEMBRANOUS VSD, OSASD, PAH, SR, NC	IAA REPAIR WITH BPP CLOSURE VSD + ADDITIONAL ASD CLOSURE WITH PFO OPEN	DR. BAIJU S.DHARAN
381			0	M	1-Aug-2014	SP/IAA REPAIR, STENTED STERNUM	DSC	DR. THOMAS MATHEW
382			16	M	4-Aug-2014	CCHD, DORV WITH JUXTAARTERIAL VSD, INF & VALVAR PS	RASTELLI PROCEDURE	DR. BAIJU S.DHARAN
383			12	M	5-Aug-2014	CCHD, D-TGA, SPVSD,LVOTO, GOOD LV, SR, NC	ASO + VSD CLOSURE + LVOT RESSECTION	DR. BAIJU S.DHARAN
384			0	M	6-Aug-2014	LONG SEGMENT PA,SA VSD,B/L PDA, GOOD LV ,SR	BT SHUNT (# 3.5 MM PTFE GRAFT)	DR. THOMAS MATHEW
385			3	F	6-Aug-2014	ACHD, OSASD, SR	ASD CLOSURE	DR. SABARINATH MENON

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
386			0	M	7-Aug-2014	S/P LMBTS WITH STENED STERNUM	DSC	DR. SABARINATH MENON
387			2	M	7-Aug-2014	PERIMEMBRANOUS VSD WITH INLET EXTENSION, SEVERE PAH	VSD CLOSURE	DR. SABARINATH MENON
388			3	M	8-Aug-2014	ACHD, SVASD, MILD PAH	WARDENS PROCEDURE	DR. THOMAS MATHEW
389			2	M	11-Aug-2014	CCHD, VALVULAR PA, VSD, PDA, SEV PAH, SR	ICR + RVOT PATCH	DR. BAIJU S.DHARAN
390			5	F	14-Aug-2014	CCHD, DILV, SVLV, SEV PS, CONF PA, PDA, REC SPELLS+	BDG + ATRIAL SEPTECTOMY	DR. SABARINATH MENON
391			20	M	18-Aug-2014	S/P VSD+AV REPAIR (2007), SEV AR, DIL LV, MILD RVD, SR	REDOSTERNOTOMY+AVR # 29 CHVP	DR. BAIJU S.DHARAN
392			12	M	20-Aug-2014	SEVERE PR, DILATED RV, SR, S/P ICR+TAP FOR TOF(2003)	REDOSTERNOTOMY + PVR # 23 PM	DR. BAIJU S.DHARAN
393			14	M	21-Aug-2014	ACHD, SV ASD, PAPVC OF RUPV AND RMPV, SR	DOUBLE PATCH REPAIR	DR. SUDIP DUTTA BARUAH
394			8	M	22-Aug-2014	S/P ICR FOR TOF, SEV INF PS, GD LV, MODRVD, SR	REDO ICR WITH MPA PLASTY	DR. THOMAS MATHEW

Sl. No.	HNO	NAME	AGE	SEX	DOS	DIAGNOSIS	PROCEDURE	SURGEON
395			0	F	25-Aug-2014	SA, DORV WITH INLET VSD, CAVCD, PA WITH CONFLUENCE & LPA STENOSIS WITH PDA DEPENDENT CIRCULATION, RIGHT ARCH, SR	BDG WITH CONFLUENCE & LPA PLASTY	DR. SABARINATH MENON
396			0	M	26-Aug-2014	OBSTRUCTED SC TAPVC, SEVERE PAH, SR	PRIMARY SUTURELESS REPAIR	DR. BAIJU S.DHARAN

INTERESTING CASES

INTERESTING CASES

- f* TRAUMATIC AR WITH PSEUDOANEURYSM ASCENDING AORTA
- f* ANEURYSM EXCISION & REPAIR
- f* PULMONARY VALVE REPLACEMENT
- f* ENDOANEURYSMORRAPHY FOR CONTAINED RUPTURE OF ABDOMINAL AORTIC ANEURYSM

- f* CORONARY ARTERIOVENOUS (RA-LCX) FISTULA
- f* MOD-SEV PARAVALVULAR MR FOLLOWING VALVE DEHISCENCE, SEV PAH, S/P DVR
- f* EMERGENCY MODIFIED BT SHUNT WITH PDA STENT EXTRACTION UNDER TCA

- f* DIFFERENTIAL SATURATIONS IN 4 LIMBS, AN UNUSUAL PRESENTATION IN ANOMALOUS ORIGIN RPA FROM AORTA

- f* BLAISDELL PROCEDURE

- f* ENTANGLED GUIDE WIRE EXTRACTION

TRAUMATIC AR WITH PSEUDOANEURYSM ASCENDING AORTA

DIAGNOSIS : FOREIGN BODY PENETRATING ASCENDING AORTA WITH SACCULAR PSEUDOANEURYSM ASCENDING AORTA WITH RCC TEAR WITH ACUTE AR, MILD MR, SEV TR, SEV PAH, GD LV, SR

PROCEDURE: FOREIGN BODY EXTRACTION WITH EMERGENCY AVR # 19 CHVP WITH EXCISION OF ANEURYSM & AORTOPLASTY

HISTORY: 22 years old male with h/o fracture right clavicle presented with DOE FC- III x 2 months & swelling B/L legs x 1 month. H/o K wire fixation for fracture clavicle 7 months prior onset of DOE.

PHYSICAL EXAMINATION: B/L pedal edema (+). Pulse: 100/min-regular, high volume. BP: 130/40mmHg. JVP raised. CVS - S1 S2 (+), MDM (+) 3/6 at apex, EDM (+) 3/6 at aortic area. RS - NVBS (+), occ crups (+).

INVESTIGATIONS:

Blood investigations : Normal.

CXR : Foreign body in anterior mediastinum (K wire) in relation to great vessels. CTR 55%. Mild right pleural effusion

ECHO : Hyperechoic shadow in the ascending Aorta which was tenting the RCC causing severe AR

Flouroscopy : Pin to be moving with each heart beat

SURGICAL FINDINGS: No pericardial effusion. Dilated LV. Externally the point of entry was at the right sterno-clavicular joint, internally the nail had penetrated the pericardium above the SVC and the Ascending Aorta on its anterior surface forming a saccular pseudoaneurysm of 3X2 cm approx. 3cm from STJ. 4cm long metallic pin within Aorta penetrating RCC with evidence of Acute Sev AR; others valvular structure normal. Coronary ostia normal. LV contractility good. B/L pleura intact.

Aorto – RA Cannulation

CPB time: 90 mins. ACC time: 62 mins

PROCEDURE: Median sternotomy. Pericardium incised in inverted T shape and hitched. Purse string suture placed around pseudoaneurysm, aorta opened within purse string; FB extracted, Evaluated with TEE for AR and decided to replace AV. Aorto-RA bypass instituted. Aorta cross clamped, Aortotomy done and ostial cardioplegia given achieving prompt diastolic arrest. Aortic leaflets assessed and excised, pledgeted 2-0 ethibond sutures placed from Ao to LV, valve sized to and replaced with 19 CHVPV valve tested. Aortotomy closed with 4-0 prolene in two layers, Pseudoaneurysm excised with tying of purse string suture. Additional pledgeted suture taken and reinforced the wall in 2 layers, Heart deaired & Aorta declamped. Patient came off bypass with adequate filling pressures with adrenaline & NA of 0.1mics/kg/min. Protamine started. Decannulated in stages. Two mediastinal drains kept. Hemostasis achieved and confirmed. Incision closed in layers.



Figure 1: AP view showing the foreign body and right pleural effusion.



Figure 2: Lateral chest x ray showing the foreign body within the cardiac silhouette.

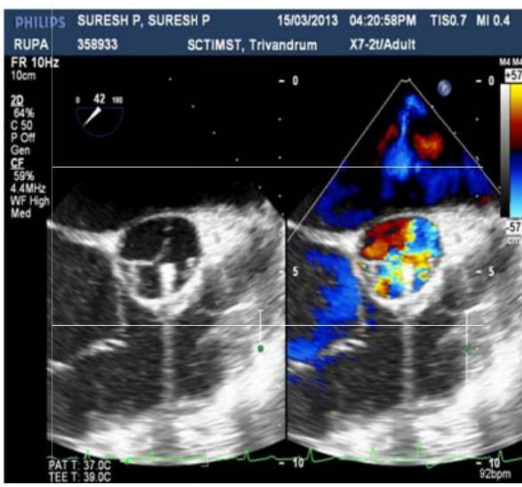


Figure 3: Intraop TEE showing the foreign body tenting the RCC and causing AR

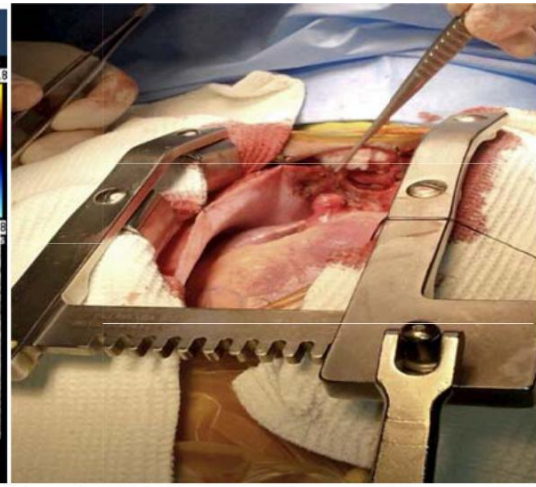
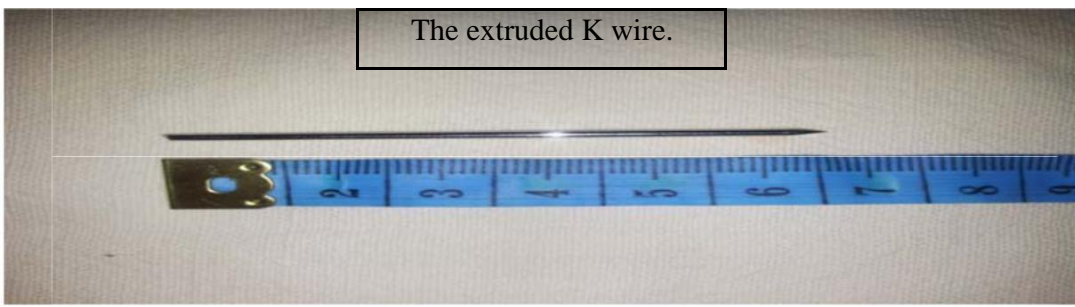


Figure 4: Intraop picture showing the point of entry just a point of entry into the aorta.



ANEURYSM EXCISION & REPAIR

DIAGNOSIS: SACCULAR ANEURYSM ASCENDING AORTA + DTA ANEURYSM, GOOD LV, SR

PROCEDURE: EXCISION OF ANEURYSM WITH DACRON PATCH REPAIR OF AORTA

HISTORY: 64 year old male with h/o angina on rest for 6 months. H/o shoulder pain present. No other relevant history.

PHYSICAL EXAMINATION: PR: 76/min. BP: 126/78mmHg. CVS - precordium normal. AI 5th ICS lat to MCL. S1 S2(+). No murmur. RS-AEBE, clear, PA: Soft, no organomegaly. CNS - NAD.

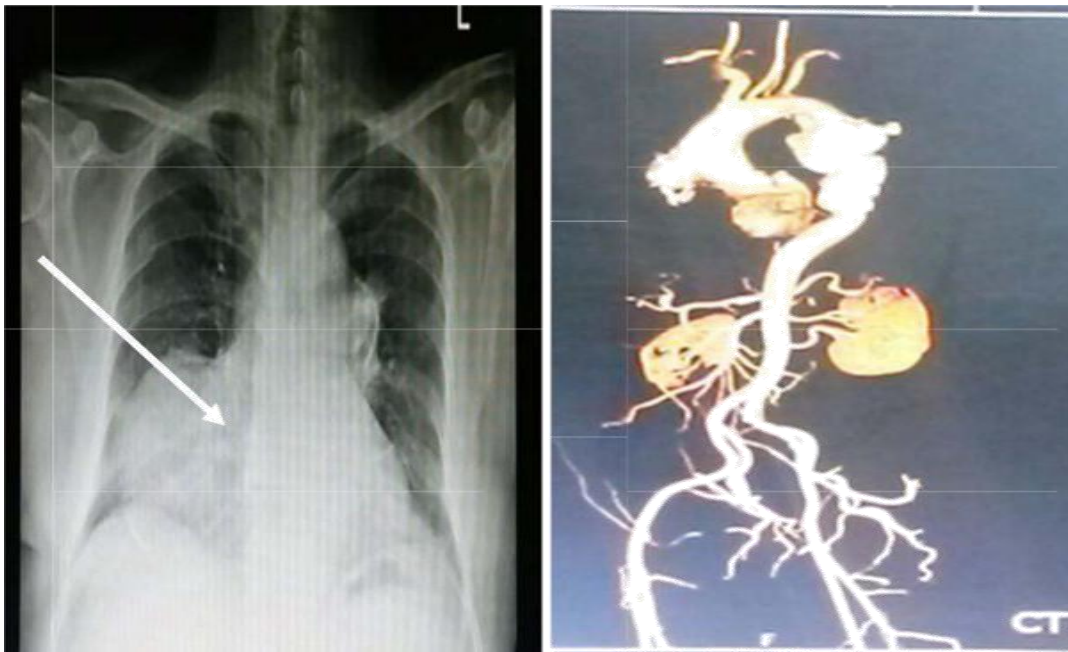
INVESTIGATIONS:

Blood investigations: ESR 70mm/hr; rest normal.

CXR: CTR- 0.55, aneurysm shadow (+) extending onto right hemithorax with calcific wall.

ECHO: LV- 45/20, EF- 77%, LA/Ao- 32/32, no RWMA, Good LV function

CT Chest: Thrombosed peripherally calcified saccular aneurysm from proximal and mid ascending Ao with narrow neck. A fusisaccular aneurysm from proximal and mid DTA with 2 small saccular outpouchings, one of which is thrombosed and other showing peripheral calcification.



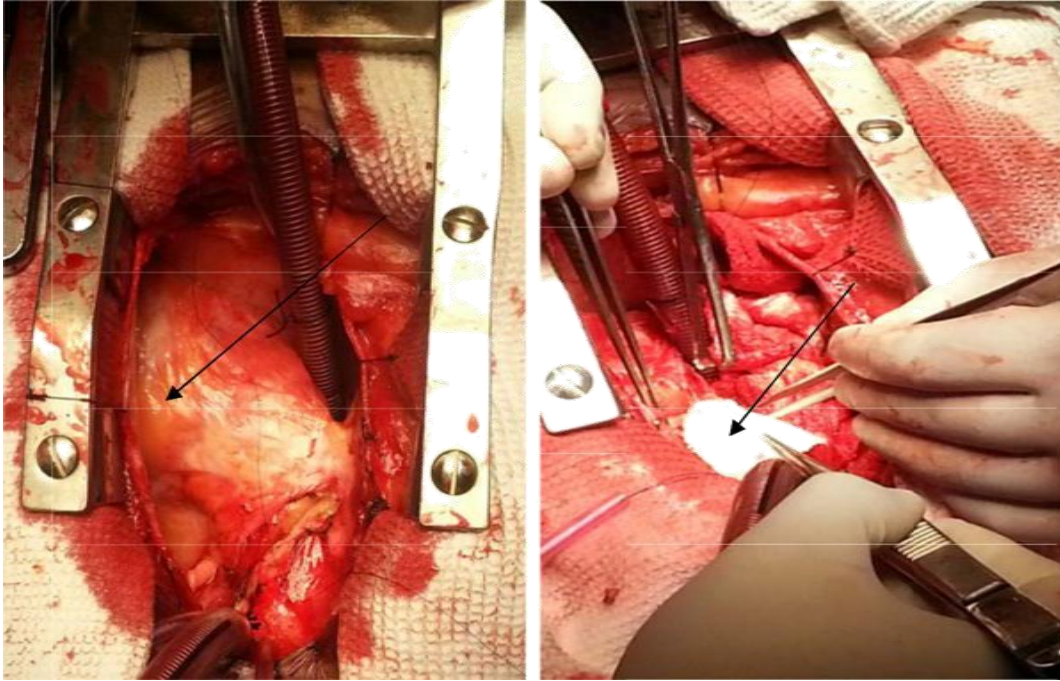
CX R : Aneurysm shadow (+) extending onto right hemithorax with calcific wall.
CT Angio: Calcified saccular aneurysm from proximal and mid ascending Ao with narrow neck. A fusiform aneurysm from proximal and mid DTA with 2 small saccular outpouchings

SURGICAL FINDINGS: Pericardial effusion absent, No cardiomegaly. Aorta dilated just distal to sinus with saccular aneurysm arising from right anterolateral wall with 10 X 5 cm at neck with extension towards the right pleural cavity & compressing the right middle lobe. The wall of aneurysm partly calcific & the aneurysmal sac filled with old thrombus. Suspected ulceration of aortic wall in ascending aorta. Normal tricuspid Aortic valve. Coronary ostia normal. LV contractility good. B/L pleura intact. Pericardium closed over aorta and RV.

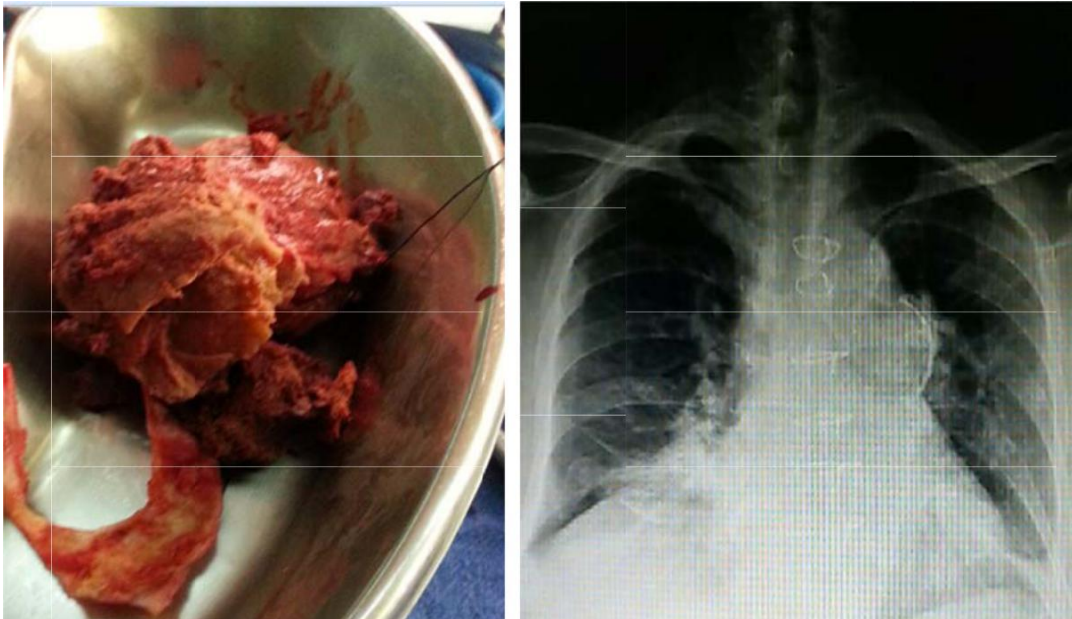
Aorto RA cannulation.

CPB time: 74 mins ACC time: 25 mins. TCA time : 30sec.

PROCEDURE: Median sternotomy. Pericardium incised in inverted T shape and hitched. Aortic, RA bypass instituted. Cardioplegia cannula inserted. Aorta cross clamped, antegrade cardioplegia given & prompt diastolic arrest achieved. The aneurysmal sac at neck transected & cleared of old thrombus. Patient cooled & went on TCA and the distal ascending aorta & proximal arch cleared of suspected clot. Came off TCA & clamp reapplied. The defect in Aorta repaired with Dacron patch with 4-0 prolene continuous suture. Heart vented through the root. Aorta declamped. Patient came off bypass with adequate filling pressures with adrenaline of 0.1mcg/kg/min. The aneurysmal sac protruding onto right pleural cavity cleared of old thrombus & plicated. 1 RV pacing wire placed. Protamine started. Decannulated in stages. Two mediastinal drains kept. Hemostasis achieved and confirmed. Incision closed in layers.



Surgical pictures showing the saccular aneurysm & Dacron patch repair of the aorta



Surgical specimen: Thrombus evacuated from the ascending aorta. **CXR :** Post surgery xray showing normal expanded right lung.

PULMONARY VALVE REPLACEMENT

DIAGNOSIS: SEVERE PR, DILATED RV, SR, S/P ICR+TAP FOR TOF (2003)

PROCEDURE: PVR # 23 PM

HISTORY: A 12 year old male born of NCM, 1st in birth order with birth weight 3kg. Underwent ICR + TAP (2004) for TOF presented with DOE for 3-4 months. No other relevant history.

PHYSICAL EXAMINATION: PR: 108/min. SpO2- 98%. BP: 90/60mmHg. CVS: S1-Normal, S2- (+), 3/6 EDM (+) PA.

INVESTIGATIONS:

Blood investigations: Normal.

CXR: CTR 0.7, RAE, RV apex

ECG: SR, RBBB, PR- 140ms, QRS Axis- + 90'

ECHO: Normal coronary origin, MPA- 20mm, RPA- 16mm, LPA- 16mm, No VSD/PDA, PR- 4+, RVSP- 20 + RA, MR- 1+, TR- 1+, EDV- 96, ESV- 39, EF- 59%, PV annulus- 24

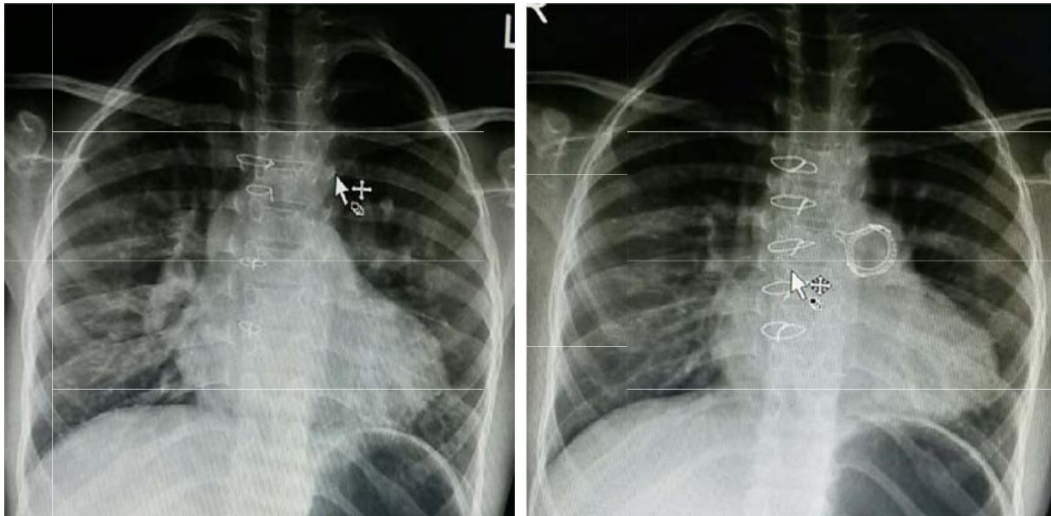
MRI: Significant PR, confluent PA, RV enlarge

SURGICAL FINDINGS: Sternotomy scar (+) with 4 sternal wires, adhesion between RV, RA with retrosternum, Cardiomegaly (+), SS, LC, NRTGA, RV dilated, R VOT patch extending onto the MPA with dilated MPA, Branch PAs adequate size, Pulmonary valve : Annulus dilated with evidence of severe PR. B/L pleura open.

CPB time: 73 min

PROCEDURE: Right femoral vessels exposed. Redosternotomy. Adhesion between RA, RV & retrosternum released. Aorta, MPA upto confluence, IVC & SVC dissected. Heparinised, Aorto-bicaval bypass instituted. LA vent put through RUPV. Transannular incision placed over the R VOT patch & pulmonary valve exposed. Anotomy assessed. Valve leaflets excised.

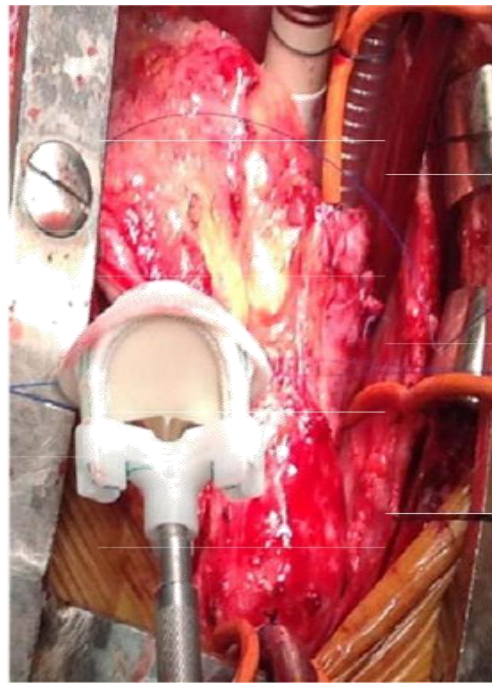
Annulus sized to 23 PM. 23# PM(Aortic) placed at pulmonary annulus (posterior layer) using 4-0 prolene continuous suture using parachute technique. Anterior wall augmented using BPP. Decannulated in stages. 1 RA and 1 RV pacing wire taken. Heparin reversed. Left pleural, mediastinal & right pleuropericardial drains inserted. Hemostasis achieved. Chest closed in layers.



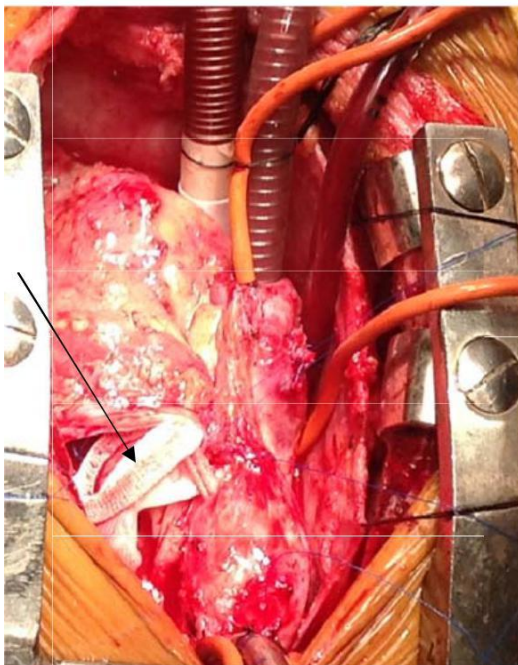
CXR: Preop CXR & post op CXR (PM valve placed at pulmonary position)



A



B



C



D

A. After redosternotomy showing adhesions over the anterior surface. **B -C.** Previous TAP excised & PVR with 23Peri mount (Aortic). **D.** Anterior layer augmented with BPP.

ENDOANEURYSMORRAPHY FOR CONTAINED RUPTURE OF ABDOMINAL AORTIC ANEURYSM

DIAGNOSIS : CONTAINED RUPTURE OF ABDOMINAL AORTIC ANEURYSM (JUXTARENAL) WITH LT.COMMON ILIAC ARTERY OCCLUSION; HYPERTENSION; CORONARY ARTERY DISEASE-STATUS POST PTCA TO RIGHT CORONARY ARTERY

PROCEDURE: ENDOANEURYSMORRAPHY (AORTO TO RIGHT COMMON ILIAC TO LEFT FEMORAL) USING 16X8 MM ABSORBABLE BOVINE GELATIN COATED KNITTED POLYESTER GRAFT + LEFT RENAL VEIN DIVISION + INFERIOR MESENTERIC ARTERY REIMPLANTATION UNDER INTERRENAL CLAMP

HISTORY: 50years old male with abdominal pain x 3months of vague dull aching character. No relation to food intake. No vomiting/ altered bowel habits. No back pain/chest pain/dyspnoea. No claudication/rest pain. No h/o stroke/ TIA/ MI/ angina. HTN (+). Recently detcted CAD-TVD for which he underwent PTCA to RCA. ExSmoker.

PHYSICAL EXAMINATION: Moderately built. Tall and thin frame. No pallor/icterus/cyanosis/edema. Pulse: 68/min. BP: Rt UL: 120/70mmHg

PERIPHERAL PULSES:

	C	B	R	U	Fem	Pop	PT	DP
Lt:	4+	2+	2+	2+	2+	----	----	2+
Rt:	4+	4+	4+	4+	3+	3+	3+	----

ABI - Lt = 0.6/Rt = 0.9. Lt femoral bruit (+).

No carotid bruit. Bounding pulses felt over Lt supraclavicular area.

P/A - soft, pulsatile vague mass felt in epigastrium ~ 4 x 3cm well above umbilicus. Upper border not distinct. Chest/CVS/CNS - NAD.

INVESTIGATIONS:

Blood investigations: Normal.

CT Angiogram: Juxtarenal AAA of max. diameter 6.9cm. L2 vertebral erosion. Lt CIA occlusion. Saccular aneurysm of Lt SCA origin ~3.5cm with distal occlusion. Ectatic DTA. Mod stenosis of celiac A & SMA

Neck vessel doppler: Normal carotids. Reversal of flow in Lt vertebral due to subclavian steal.

Renal Doppler: Normal

CAG: LAD - prox 60%. RCA - 90% distal. LCX - 90% distal

Echo: EF - 60%. No RWMA, grade I diastolic dysfunction

SURGICAL FINDINGS:

1. Contained rupture (posterior wall)
2. Inferior Mesenteric artery patent with good back bleed

3. Polar artery present on right side
4. Large bowel: normal in colour and peristalsis following anastomosis
5. Left Femoral artery: good caliber with minimal disease

PROCEDURE :

GROIN EXPLORATION: Curvilinear incision placed over left groin (around 6-8 cm) with 2 cm incision above the inguinal ligament. Subcutaneous tissue ligated with 2-0 Polyglactin suture. Deep tissues ligated with 3-0 Silk. Left common, superficial and deep femoral arteries dissected and looped

LAPAROTOMY: Midline incision from Xiphoid process to pubic symphysis. Position of nasogastric tube confirmed. Abdominal retractor placed and held in position. Transverse colon retracted up and held in moist pads. Small bowel retracted to right and wrapped in wet towels.. Retroperitoneum dissected over the infrarenal abdominal aorta starting from right common iliac artery and proceeded towards the renal vein. The dissection was maintained onto the right of the aorta. The dissection was maintained between Inferior mesenteric vein on the left and duodenum on the right. Lymphatics were suture ligated with 3-0 Silk suture. DJ flexure mobilised. Left Renal vein was identified, dissected and looped. The neck of the aneurysm was proximal to the left Renal vein. Vascular clamps applied to the left Renal vein. Left Renal vein divided preserving the Left gonadal vein and left Suprarenal vein. The divided ends of left Renal vein was repaired using 5-0 Polypropylene suture (Sweet's technique). Infrarenal and interrenal aorta dissected. Interrenal clamp space created. Dissection performed over the right common iliac artery (CIA). Clamp space over right CIA created. Tunnelling done from Aortic bifurcation to left groin was performed taking adequate precautions for lifting the ureter. Systemic Heparinization done (1 mg/kg). Graft length measured. Renoprotective measures administered (Mannitol and Frusemide). Inahara-Pruitt shunt kept

ready for administration of Renoplegia solution. 16x8 mm Polyester graft cut to the desired length and fashioned

PROXIMAL ANASTOMOSIS: Interrenal clamp (DeBAKEY aneurysm clamp) placed. Bull dog clamp placed over the right CIA. Aneurysm opened. Aneurysm wall was scored using cautery at the proposed site of incision. Stay sutures were placed on the either side of the proposed site of incision using 3-0 Polyester sutures. Aneurysm opened & the thrombus extracted. A Foley's catheter was passed distally into the right CIA, inflated and gently pulled out. Inferior Mesenteric artery was dissected and double looped. A arterial embolectomy catheter (FOGARTY) was passed into IMA and inflated. Bleeding lumbar arteries were suture closed using 3-0 Polyester sutures. T cut made at the proposed level of anastomosis. Stay sutures were placed at the "T"cut end using 3-0 Silk sutures. Inahara-Pruitt (IP) shunt inserted into the left Renal artery orifice. Renoplegia instilled through the IP shunt. Anastomosis between the aorta and the 16 mm polyester graft started from the posterior wall using 4-0 polypropylene (25mm needle) continuous suture, buttressed with Teflon felt and completed (END TO END). Prior to the completion of anastomosis, IP shunt removed. Right lower polar artery was included in the anastomosis. Left Renal artery orifice was bevelled and preserved during the proximal anastomosis. Suture line checked by shifting clamp to graft. . The left limb of the graft tunnelled to the left groin after checking the proper lie of the grafts. The limbs of the graft were fashioned allowing a good play on the graft

DISTAL ANASTOMOSIS (RIGHT CIA): The right CIA was looped. The right CIA was ligated using umbilical tape supplemented by 1-0 braided silk. Arteriotomy made in the right CIA (3-4 cms). The right limb of the graft was anastomosed to the right CIA using 5-0 Polypropylene suture (END TO SIDE), double strand technique. Prior to the completion of the right side anastomosis. Blood was allowed to flow through the left limb. Backbleeding allowed through the right CIA. The right limb of the

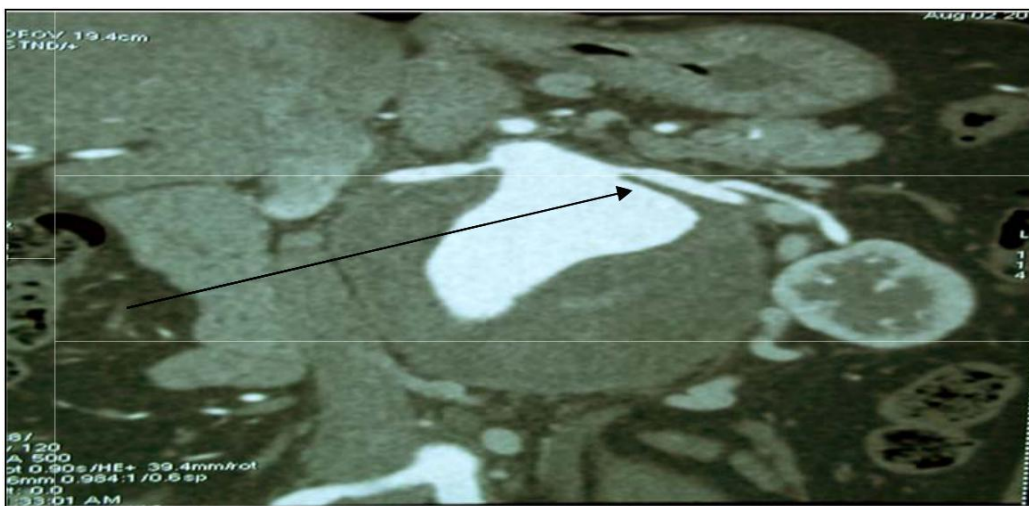
bifurcated graft was opened momentarily. Adequate deairing was performed prior to the completion of the anastomosis

INFERIOR MESENTERIC ARTERY (IMA) REIMPLANTATION :

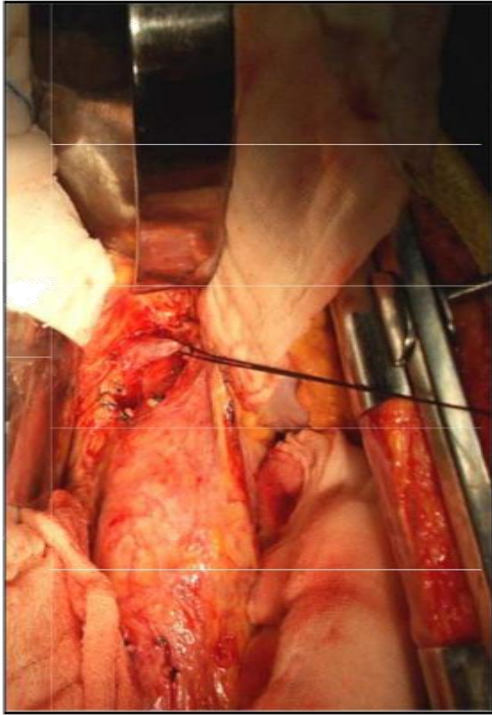
The left limb of the graft's lie and position verified. IMA was clamped. A rim of the circumference of the left limb was removed. An anastomosis performed between the clamped IMA and the graft using 6-0 Polypropylene suture (SIDE TO SIDE), double strand technique. Adequate deairing was performed prior to the completion of the anastomosis.

DISTAL ANASTOMOSIS (LEFT CFA): Left CFA, SFA and PFA arteries were clamped. Arteriotomy made in the left CFA extending onto the Profunda Femoris artery. Left limb of the graft fashioned. The left limb of the graft were anastomosed to the common femoral artery onto the left Profunda Femoris artery using 5-0 Polypropylene suture (END TO SIDE), double strand technique. Prior to the completion of the anastomosis, adequate deairing was performed. Hemostasis ensured

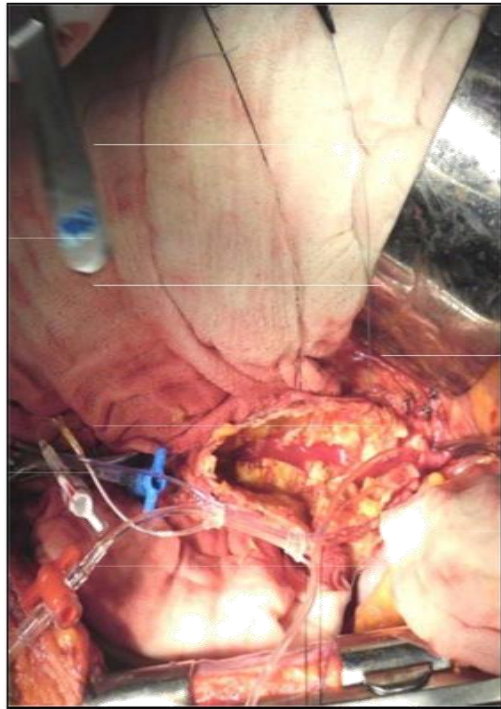
Interrenal clamp time:45 minutes. Post clamp release: good urine output



CT ANGIO : Infrarenal AAA of max. diameter 6.9cm. Ectatic DTA. Mod stenosis of celiac A & SMA



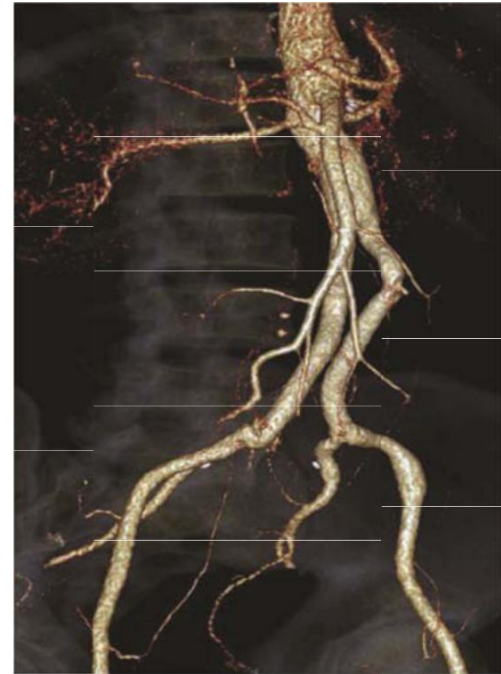
A.



B.



C.



D.

A. Surgical picture showing extent of aneurysm with looping of left renal vein. **B.** At the time of delivering of renoprotection. **C.** After completion of repair. **D.** Post-operative reconstructed CT angiogram.

CORONARY ARTERIOVENOUS (RA-LCX) FISTULA

DIAGNOSIS: CORONARY ARTERIOVENOUS (RA-LCX) FISTULA,
MOD-SEVERE TR, GD LV, SR

PROCEDURE: FISTULA LIGATION WITH DIRECT CLOSURE OF
FISTULOUS OPENING

HISTORY: 56years old female, postmenopausal, non diabetic, presented
with DOE FC- II & AOE FC- II-III for 3-4years. No other relevant history.

PHYSICAL EXAMINATION: HR: 75/min. BP: 135/80mmHg. CVS -
precordium normal, scar (-), apex left 5th ICS, S1 S2 (+).

INVESTIGATIONS:

Blood investigations: Normal

CXR: CTR 0.5, LV apex

ECG: AF with incomplete RBBB.

CAG: LMCA-marginally dilated with large channel draining into RA, LAD
normal, LCX normal, LCA normal.

ECHO: LV- 52/37, EF- 55%, septal motion normal, , No clot/RWMA/PE,
arch (L), no CoA, MR 1+, TR 3+, AR 2+, LCA - origin dilated, A-V fistula
gradient = 31/15mmHg origin to BVL + PA origin, coronary AV fistula mod
TR, good LV function.

PRE OP TEE: LMCA, proximal LAD & LCX dilated, dilated tortuous communication between LCX opening to RA with IAS. Saccular opening into RA. RA/ RV Volume overload. Sev TR.

SURGICAL FINDINGS: RAE (+), RV enlarged, PA soft. Enlarged & dilated origin of LCA. Dilated and tortuous abnormal vessel arising from LCA branch draining into RA near SVC-RA junction.

Aorto-bicaval cannulation.

CPB: 55 min, ACC: 13min.

POST OP TEE: No drainage from the fistulous communication to RA. No RWMA

PROCEDURE: Median sternotomy, minimal thymus dissection, pericardiotomy done. Patient Heparinised. Aorto-SVC-IVC cannulation, bypass instituted. Aortic root dissected and origin of LCA visualised. Abnormal vessel arising from LCA branch identified and skeletonised and double looped with 2-0 silk. Aorta cross clamped. Cardioplegia given, heart arrested promptly in diastole. SVC and IVC snugged, went on total bypass. RA opened & fistulous opening identified. Opening closed with pericardial patch. RA closed in two layers. Origin of the fistulous tract transfixed with 6-0 prolene. SVC and IVC desnugged. Cardioplegia cannula removed after confirming no intra cardiac air. Gradually came off bypass in stages. Protamine given. Aorta decannulated. Adequate hemostasis achieved and confirmed. Two mediastinal drains inserted. Chest closed in layers.

MOD-SEV PARAVALVULAR MR
FOLLOWING VALVE DEHISCENCE,
SEV PAH, S/P DVR

DIAGNOSIS: MOD-SEV PARAVALVULAR MR, VALVE DEHISCENCE, SEV PAH, P/DVR (MAR&MAY 05) , RHD, PPI(VVI 05), GDLV , NC

PROCEDURE: REDOSTERNOTOMY + MVR # 31SJM

HISTORY: A 55 year old male who underwent double valve replacement in 2005, following which he developed pseudomonas aeruginosa infective endocarditis and underwent a re-double valve replacement with in a period of 45 days. He was asymptomatic for 5 years. The patient was re-admitted with features of pulmonary edema & diagnosed with paravalvular MR.

PHYSICAL EXAMINATION: No Pallor, Cyanosis, Clubbing, pedal oedema. P- 76/min, BP- 130/80 mm of Hg. CVS- VC + mitral area, ESM + in Aortic area, PSM radiating to interscapular area at apex.RS : B/l normal BS, basal creps (+) b/l.

INVESTIGATIONS:

Blood investigations: Normal

CXR: cardiomegaly, prosthtic valve seen, PPI leads in situ

ECG: Paced beats @75/m

ECHO: AV grad- 34/18mmHg, MV grad 12/ 4mmHg @76/m , GD LV /RV function. Severe paravalvular MR.

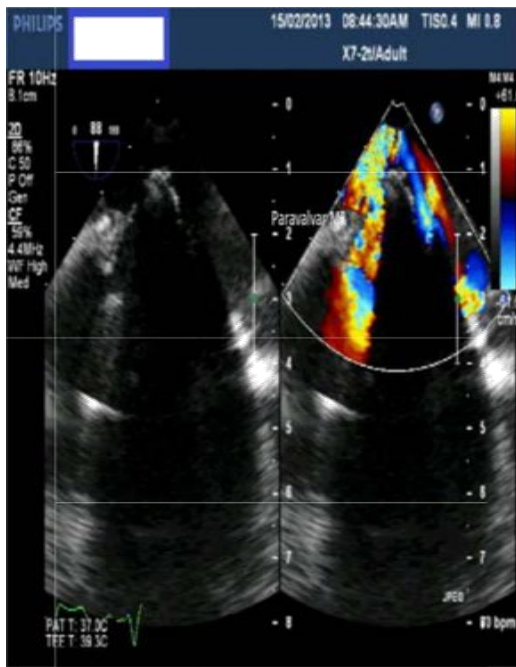
Fluroscopy: Rocking movements of the Starr Edward (SEP) valve at mitral position

SURGICAL FINDINGS: Median Sternotomy scar. Dense adhesions present between sternum and heart (+), between right pleura and LA, RA & IVC (+). Adhesion between right lung & pleura (+). Adhesions surrounding aortic root & MPA (+). LA normal. No LA/LAA clot. 32 # SEP valve in situ at mitral position with evidence of paravalvular MR (+) with dehiscence of more than 70% circumference. Pannus surrounding the sewing ring (+).

Aorto-bicaval cannulation

CPB time: 110 mins. Aortic cross clamp time: 60mins

Procedure: Left Femoral exposed. Redo sternotomy with ocillation saw. Adhesions between sternum, pericardium and heart released. Pericardial stays. Heparinization. Aorto - Bicaval cannulation, went on CPB. Aorta cross clamped. Antegrade root tepid blood cardioplegia given. Heart arrested in diastole. LA opened. MV assessed, SEP valve dissected out with blunt & sharp dissection. Explantation of valve done. MV replaced with # 31 SJM (SN 86376461) mechanical valve prosthesis using 16 2-0 ethibond sutures. 3 additional 2-0 ethibond sutures were taken at Aorto- Mitral region for reinforcement. LA closure. De-airing done. Aortic cross clamp removed. 1 RV and 1 skin wire placed. Came off bypass with support of NA at 0.1mics/kg/min. Protamine, decannulation. Hemostasis secured. 2 mediastinal drain and B/L pleural drain placed. Sternum closed in layers.



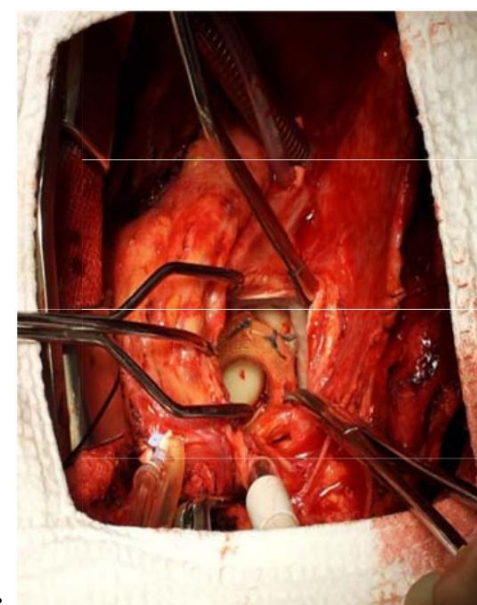
A.



B.



C.



D.

A. Mid esophageal 2 chamber view, the SEP has dehisced near the inferior wall of left ventricle creating a large para-valvular space. In color flow Doppler, this space was filled by a large eccentric jet seen originating from outside the sewing ring. **B.** Modified 4 chamber view, the SEP in mitral position showed the characteristic rocking motion suggestive of dehiscence. **C.** 3D view of SEP using 3D zoom showing attachment of the valve only at the aortic root and dehiscence of three-fourths of the circumference of the sewing ring. The characteristic rocking motion is diagnostic of extensive prosthetic valve dehiscence. **D.** Per-op confirmed the TEE reconstruction of the dehiscence; the valve was extruded and replaced with a 31 St. Jude MastersTM (St. Jude Inc., Minneapolis, USA)

EMERGENCY MODIFIED BT SHUNT
WITH PDA STENT EXTRACTION
UNDER TCA

DIAGNOSIS: PA, IVS, PDA DEP PUL CIR S/P PDA STENT, PDA SPASM, ARCH INJURY(LACERATION OF LEFT SUBCLAVIAN A ORIGIN)

PROCEDURE: EMERGENCY RMBTS (3MM PTFE) + LPA BOVINE PERICARDIAL PATCH PLASTY + LEFT SCA LIGATION + PDA STENT EXTRACTION + PDA INTERRUPTION UNDER TCA

HISTORY: 12 day old child, born at 36 wk of pregnancy, 2nd of twin born, Wt 2.1 kg, detected to have cyanosis at birth evaluated, diagnosed of complex congenital heart disease with PDA dependent circulation. Underwent PDA stenting with improved saturation. Patient presented again with desaturation and hypotension after 2 days & tried for PDA stenting, failed and suspected of PDA spasm and considered for emergency RBTS.

PHYSICAL EXAMINATION: HR 116/min, RR 36/min, saturation 48%, CVS- S1 N, S2 single, No CE, 3/6 SM at PA, LLSB, Faint CM+. Chest clear. PA- situs solitus.

INVESTIGATIONS:

Blood investigations: Normal

CXR: CTR 0.6, oligemic lung fields.

ECG: SR, PR 120, QRS axis +135, RAE, RVH, J point elevation in inferior leads.

ECHO: SS, LC, Pulmonary atresia, Intact IVS, hypoplastic RV and TV, apex formed by LV, 2ASDs R to L (each 2.5mm), Lt arch, No CoA, 3mm PDA L to R, gr 30/10, PDA dependent Pulmonary circulation, MV annulus 9.5, TV annulus 6.5, DTA at dia 5.7, RPA 3.9, LPA 3.4.

SURGICAL FINDINGS: Child taken up for emergency surgery with borderline haemodynamics, SpO₂ of 60%, and on Adrenaline 0.1 mics/kg/min.

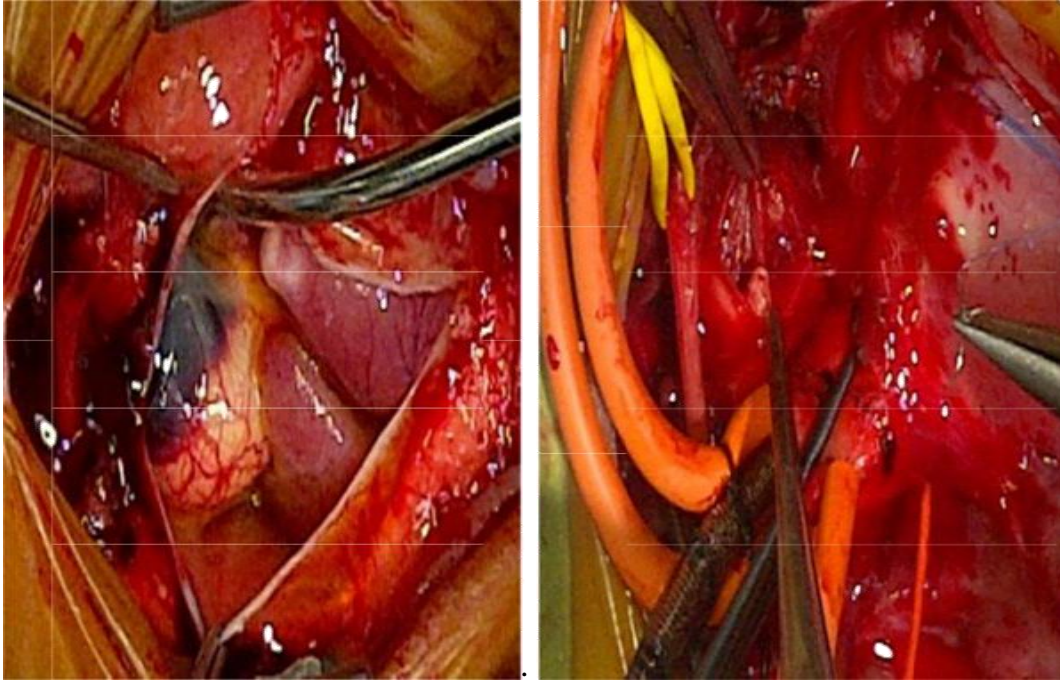
Hematoma extending from root of neck upto the Superior Mediastinum, involving Ascending Aorta to origin of PDA. SS, LC, Left Arch, NRGAs. Transection of Left SCA at origin with active bleed. Laceration with active bleed from the Aortic end of PDA. Pulmonary Atresia with small MPA with fair sized confluent PA. Normal sized RPA. PDA stent extending into RPA upto level of SVC. Aortic end of PDA not covered with stent. Intra luminal shelf at the origin LPA causing LPA origin stenosis with normal size distal LPA.

Aorto-bicaval cannulation

CPB time : 220 min; ACC time: 84 min; TCA time : 35 min.

PROCEDURE: Median sternotomy. Right lobe of thymus dissected and excised. Hematoma surrounding the ascending aorta & Arch cleared Pericardium opened and cradled. The Arch with the major branches dissected & skeletonized. Right Pulmonary artery and innominate vein were skeletonized & mobilised. PDA skelatonization tried but could not be

done due to friable tissues. Heparinized, Aorto bical cannulation done and Patient cooled to 18 Degree C. Went into total bypass. Arch vessels clamped, body drained, and went into TCA. Aortic end of Left SCA overswen with 7-0 prolene and distal end of Left SCA overswen with 7-0 prolene. MPA opened, stent extracted; incision on MPA extended over to origin of LPA and bovine pericardial patch plasty done upto LPA origin. PDA divided between transfixation sutures. Went onto low flow & hemostasis established. Came off TCA, rewarming started. Dearing done & cross clamp released, and on partial bypass markers sutures taken on Innominate artery and RPA. Side biting clamp was placed on Innominate artery and was opened. The proximal anastomosis of 3mm PTFE shunt was made to innominate artery with 8-0 prolene. The shunt was placed posterior to innominate vein and lie was checked. Side biting clamp applied to RPA & opened RPA along the superior surface. The distal end of the the shunt was anastmosed to RPA with 8-0 prolene. Side biting clamps were released. Shunt flow checked. Came off bypass in stages. Hemostasis was obtained. 2 atrial and 2 ventricular pacing wires were placed. Pericardium kept opened. 1 mediastinal and 1 pericardial drains were placed. Sternum stented and wound covered with sterile membrane. Child was shifted to ICU with Inotropic support of Adrenaline 0.05mics for elective ventilation.



Surgical picture: Avulsion of LSCA from Aorta causing hematoma over the neck vessels



Surgical Picture: Shelf in the LPA which prevented the engagement of stent.

DIFFERENTIAL SATURATIONS IN 4 LIMBS, AN UNUSUAL PRESENTATION IN ANOMALOUS ORIGIN RPA FROM AORTA

DIAGNOSIS: ANOMALOUS ORIGIN RPA FROM AORTA, PDA, PFO, SEVERE PAH, SR

PROCEDURE: REIMPLANTATION OF RPA TO MPA + PDA INTERRUPTION

HISTORY: 2 1/2 month old male child, 1st born of NCM birth at term by LSCS (mal presentation), birth weight 3kg detected to have CHD at 8th day of life. H/o bluish discoloration of skin & mucus membrane noticed while crying. H/o respiratory distress on feeding. Failure to thrive (+), feeding difficulty (+). No h/o spells/ squats/ RTI/ forehead sweating.

PHYSICAL EXAMINATION: Conscious, alert crying. No facial dysmorphia. No oedema/icterus/pallor/cyanosis/clubbing. Body weight- 3.7kg. The lower limb saturations were 55 % and left upper limb saturations were 73 % and right upper limb saturations were 84 %. HR: 136/min. peripheral pulses B/L equal. CVS- precordium normal. AI at 5th ICS at lat to MCL. S1 S2 (+), 3/6 ESM at PA. P2 loud. RS- clear AEBE. CNS- NAD.

INVESTIGATIONS:

Blood investigations: Normal.

CXR: CTR-0.55, PVH (+)

ECHO: LV-23/14, EJ Fr- 71%, AV- trileaflet, LA/Ao- 13/10, MV- 2 papillary muscles- normal, SS, LC, PVs- LA turbulence in Rt PVS (+) (?)

increased flow). AVVA concordance, NREGA? Small LSVC, prox coronaries dilated, PDA R-L gradient 26/3mmHg. 2.3mm PDA. LA?LV volume overload (+), Lt arch . No CoA. MPA continues as LPA (7.9mm). RPA arising from ASc Ao7.2mm, RPA-9mm,RPA origin gradient of 16mmHg. DTA diam 6.8mm, flow reversal noted in DTA. TR 3-4 (+). RVSP- 126 + RA.

Discussion: For understanding this concept, the aorta can be divided into 3 segments, from the valve to the origin of the RPA, from RPA to the insertion of the PDA and the third segment being from insertion of PDA onwards. The right lung was getting its supply from the systemic run off via the ascending aorta and the left lung was being supplied by the right ventricle, due to the severely raised Rp, the child was shunting right to left shunt at the level of the PDA causing preferential flow of desaturated blood maximally in the descending thoracic aorta. The flow reversal in the aorta during diastole caused it to flow back into the arch and ascending aorta. Due to the run off into the RPA this flow reversal was augmented resulting in sequential lower saturations in the left and right upper limbs

SURGICAL FINDINGS: SS,LC, NREGA, Aorta normal in calibre till RPA origin site; beyond small in calibre, MPA dilated & tense continuing distally as LPA, Dilated RPA arising from right posterolateral aspect of distal Ascending Aorta, short tense PDA 0.5 X 1cm, normal pulmonary and systemic venous drainage, RA enlarged, PFO (+), RV enlarged and hypertrophied.

Aorto-bicaval cannulation

CPB: 98min, ACC: 9min.

PROCEDURE: Median sternotomy & Thymectomy done. Patch harvesting pericardiotomy done & set aside for tanning and well created. Minimal Aorta, PA, SVC and IVC dissected. Aortic, RA and IVC purse-strings taken, heparinised, cannulated and Ao-bicaval bypass instituted. MPA &

branch PAs dissected up to hilum. Ascending Aorta dissected up to origin of arch vessels. PDA dissected & skeletonised. Clamp applied on LPA & under low flow, PDA interruption done & transfixed. Marker stays taken on RPA & MPA (MPA opened between the stays). Aorta clamped at RPA - Aorta origin & distal RPA, divided & aortic end oversewn. RPA-MPA anastomosis done with 7-0 maxon continuous suture. Aortic cardioplegia purse-string taken and cannulated. Aorta clamped, antegrade aortic root cardioplegia given, heart arrested promptly in diastole, myocardium protected with topical cold saline. SVC and IVC snugged, total bypass instituted. Right atriotomy done, stays sutures taken. PFO identified & dilated. Rewarming started. Deaird through root, Aorta declamped. RA closed in single layer. SVC and IVC snares taken out. Heart picked up in SR, Atrial & ventricular pacing wires taken. Came off bypass in stages with optimal filling pressures on AAI pacing with Dobutamine 5mics. Heparin reversed with protamine. Decannulated in stages. Right pleuro-pericardial & mediastinal drains inserted, haemostasis secured. Chest closed in layers.

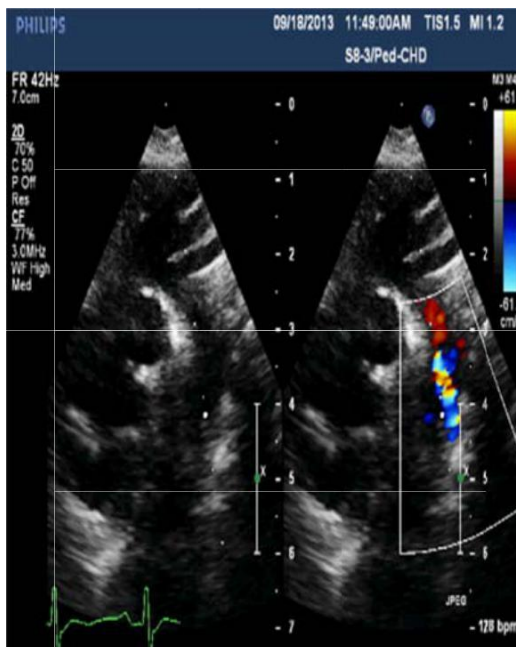


Figure 1: Colour Doppler image on flow reversal in proximal descending aorta.

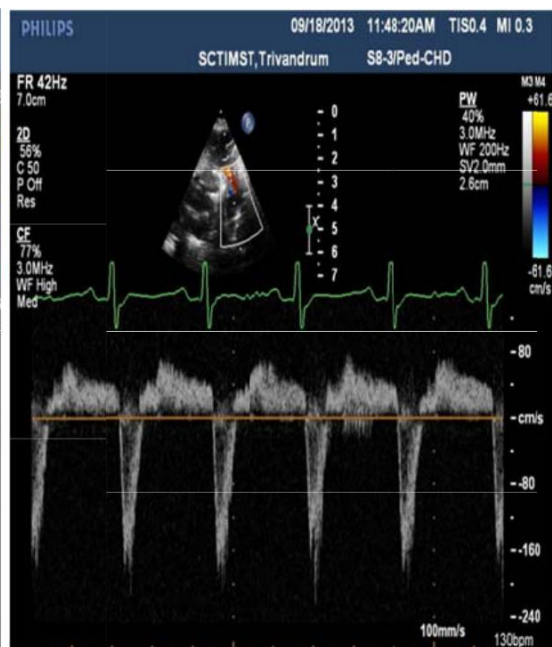
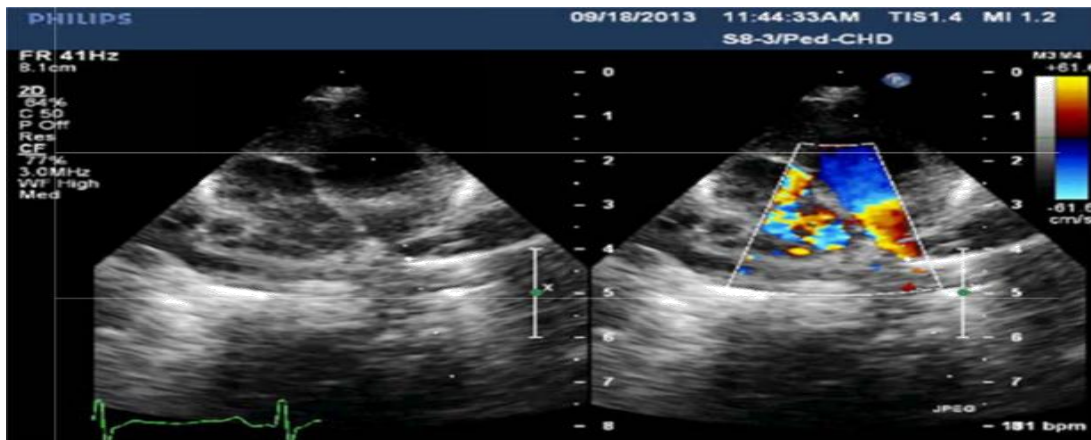
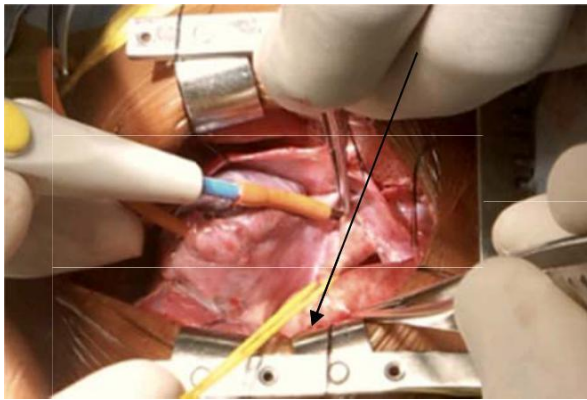


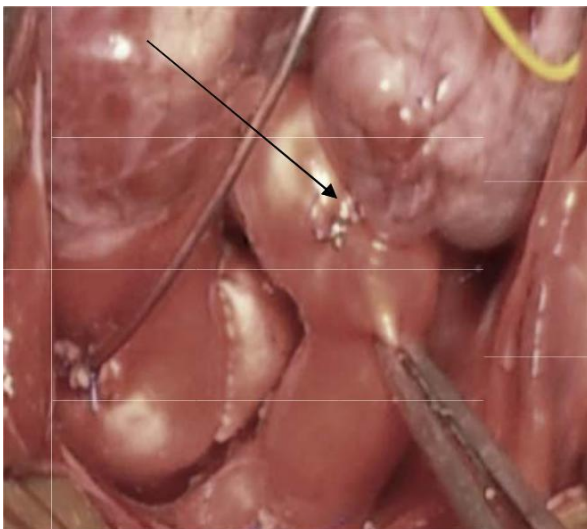
Figure 2: Pulse wave Doppler with diastolic flow reversal in descending aorta.



Colour compare image showing the origin of the RPA from aorta and MPA continuing as LPA



Surgical picture showing looping of RPA



Reimplanted RPA to MPA

BLAISDELL PROCEDURE

DIAGNOSIS: INFRA RENAL AORTIC OCCLUSION, S/P RT AXILLO-FEMORAL BYPASS,DM,HTN MILD CAD

PROCEDURE: BLAISDELL PROCEDURE (DESCENDING THORACIC AORTA TO BIFEMORAL BYPASS)

HISTORY: 66 year old lady, retired nurse c/o worsening of lower limbs pain x 1 1/2 months. Patient is a k/c/o infra renal short segment aortic stems occlusive lesion & underwent Axillo- right femoral bypass in 2009 for CLI. Patient was asymptomatic since surgery since till 5 years when symptoms recurred and started worsening. At present she is having severe claudication & rest pain in B/L lower limbs from buttock to foot. Associated disturbed sleep present. H/o DM & HTN x 10 months/ Hypothyroidism (+) on Tab Eltoxin regularly. No ulceration/dyscoloration/gangrene. No h/o TIA/stroke/UL claudication.

PHYSICAL EXAMINATION: Nourished short stature. PR: 70/min. BP: right UL- 160/90mmHg, Left UL- 120mmHg.

PERIPHERAL PULSES:

	C	B	R	Fem	Pop	PT	DP
Lt:	4+	3+	3+	---	---	---	---
Rt:	4+	4+	2+	---	---	---	---

ABI- 0.5 B/L with HHD subcutaneously graft palpable along mid clavicular line (1) non pulsatile

Per Abdomen: Soft, obese, no pulsatile mass, BS (+). Chest/CVS/CNS-WNL

INVESTIGATIONS:

Blood investigations: Normal

CT Angio: Infra renal short Segment Aortic Occlusion. Thrombosed Axillo - Rt femoral graft.

ECHO -EF-68%, No RWMA, no clot/PE/Vegetation

SURGICAL FINDINGS:

1. Descending Thoracic Aorta: Free of disease
2. Right femoral artery dissected distal to previous graft anastomosis and it was atherosclerotic, plaque present, and tacking sutures placed before anastomosis
3. Left Common femoral artery healthy and supple

POSITION: Stoney's position(shoulder 80 degree to table edge and left hip 60 degree)

GROIN EXPLORATION

Curvilinear incision placed over both groins (around 6-8 cm) with 1/3rd incision above the inguinal ligament. Subcutaneous tissue ligated with 2-0 Polyglactin suture. Deep tissues ligated with 3-0 Silk. Left common femoral, and right superficial femoral artery dissected and looped

THORACOTOMY

Anterolateral Thoracotomy performed along 7th intercostal space. Muscles cut in the line of skin incision with coagulation mode of diathermy, anaesthetist communicated for taking lung down. Left pleural cavity entered. Suction applied to the nasogastric tube. Diaphragm retracted inferiorly. Left lung retracted superiorly after release inf pulmonary ligament. Mediastinal pleura over the Descending Thoracic aorta (DTA) incised and dissected. DTA dissected circumferentially and looped

TUNNELLING

"Curvilinear" shaped incision placed in the left flank (around 10cms). Muscles of the abdominal wall cut along the line of of incision using cautery. Peritoneum reflected off the retroperitoneum using sharp and blunt dissection. Tunnel created in the peripheral part of diaphragm. Tunnell created from left pleural cavity to left flank (retroperitoneum). Tunnel extended from left flank to left groin and for second limb tunnel created from left flank to right groin. 14/7 bifurcated Dacron gelatin coated Uni graft (woven polyester graft) chosen. Graft length measured. Systemic Heparinization done (1 mg/kg). Renoprotective measures administered (Mannitol and Frusemide)

ANASTOMOSIS

Side biting Leemole clamp used for distal DTA clamping. Longitudinal Aortotomy performed in the DTA (12-14mmcms). Arteriotomy widened by applying aortic punch. Anastomosis performed using 5-0 Polypropylene double needle hemoseal suture suture in double stranded tech (END TO SIDE), Graft both limbs tunneled from left pleural cavity to right and left groin in proper lie and with adequate play to prevent any tension on anastomosis with extreme of movements

Post DTA clamp release: Good urine output

ENTANGLED GUIDE WIRE EXTRACTION

DAGNOSIS: STUCK GUIDE WIRE IN RT COMMON ILIAC ARTERY FOLLOWING BAV FOR ACHD-BICUSPID AORTIC VALVE, SEVERE AORTIC STENOSIS

PROCEDURE: EXTRACTION OF ENTANGLED GUIDE WIRE FROM RCIA & INTIMAL FLAP REPAIR

HISTORY: 2 yr 1 month old child first born out of NCM admitted with DOE-FC II diagnosed with BAV with severe AS underwent BAV. Post BAV, while attempting to take pullback gradient by Tracker catheter, V18 wire was pulled out from LV. On attempting to withdraw the wire, the wire got entangled at common iliac artery bifurcation. Attempts of extraction of wire with various catheter failed (cut pigtail, GL, dilator, snare)

PHYSICAL EXAMINATION: Patient conscious, oriented, alert. No pallor, icterus, cyanosis, clubbing. P-90/min, BP-100/70, JVP NE, CVS: S1 N S2 N split, ESM 4/6 at RUSB. Chest b/l NVB.

INVESTIGATIONS:

Blood investigations: Normal

CXR: CTR 0.5, LV apex.

ECG: SR, PR 160, QRS +45, R/S V1 8/12, V6 35/2.

ECHO: SS, LC, bicuspid aortic valve, AR O AO annulus 12mm, AS gradient 73/37mm.

Ascending Aortic Angiogram (LAO 60 Cr 20): No AR. Aortic annulus measured 12mm. Normal proximal coronaries. LVSP 156 Ed5. Ascending Aorta 80/50. LV entered with AL -1 catheter and Terumo wire. Exchanged for V18 wire. BAV done with 10 Tyshak - 3 dilatations given. Post BAV gradient (pull back) was 60mmHg. BAV done with 12 Tyshak balloon - 2 dilatation given. Post BAV, while attempting to take pullback gradient by Tracker catheter, V18 wire was pulled out from LV. On attempting to withdraw the wire, the wire got entangled at RCIA bifurcation. Descending Aortic Angiogram (through LFA access) showed dissection flap in Rt common iliac artery. Rt internal iliac artery has suspicious thrombus with reduced flow.

SURGICAL FINDINGS:

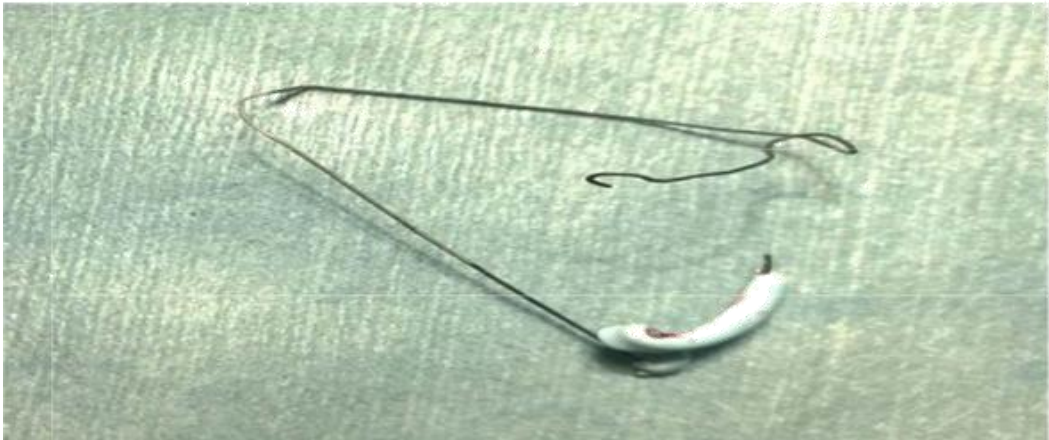
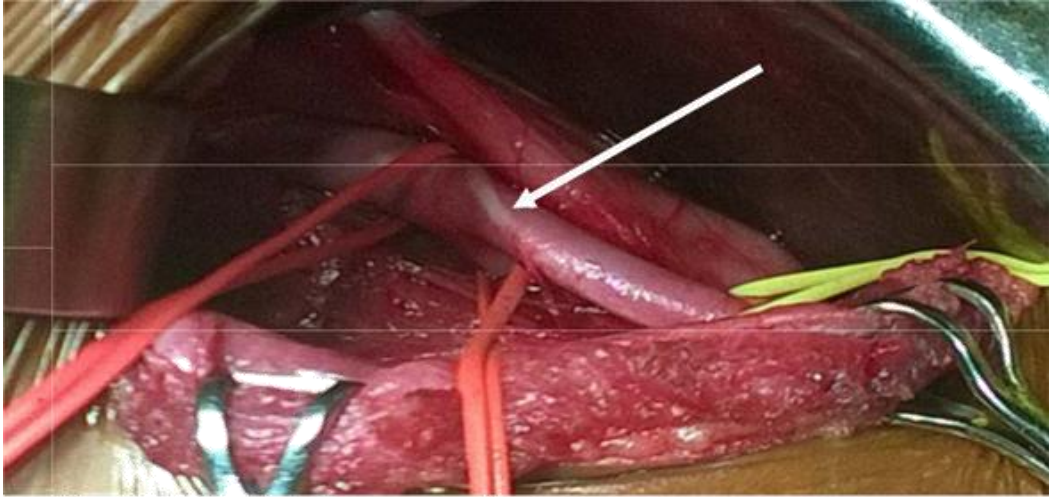
- 1) The guide wire was found to be coiled & entangled within the Rt CIA and IIA
- 2) There was a small intimal dissection flap within the distal Rt CIA

PROCEDURE: 7cm horizontal incision about 2cm above and parallel to the inguinal ligament & a vertical groin incision just above and below the sheath. A plane was created above the peritoneum along the preperitoneal fatty layer. The peritoneum was retracted to expose the retroperitoneal structures. Aortic bifurcation was identified and the Rt common iliac artery was traced along its course. The coiled part of catheter could be palpable within the CIA. Common iliac artery was dissected and looped and adequate tissues were mobilised for proper space for iliac artery clamping. Internal iliac artery was also dissected and looped. For proper distal control, a vertical rt groin incision was made proximal and distal to the femoral sheath which was inserted to the Rt Femoral artery. Dissection was proceeded

along the sheath and the Rt femoral artery was dissected out both proximally and distally. Rt femoral artery was looped with a vascular sling. Systemic heparinisation was done. Clamps were placed in Rt CIA, IIA and Rt CFA. A longitudinal arteriotomy was made along the Rt CIA extending upto Rt EIA. The guide wire was found to be coiled and entangled within the lumen of Rt IIA. The femoral sheath was removed and the guide wire was cut at the puncture site. Later the remaining guide wire was extracted via the arteriotomy. There was a small intimal flap in the distal part of the Rt CIA and a tagging suture was applied using Prolene 7-0 to stabilise the flap. Thromboembolectomy done till all clots were evacuated and fresh jet of blood spurted out from both proximal and distal end of arteriotomy. The vessels were flushed with heparinised saline. Arteriotomy was closed using Prolene 5-0 (continuous) suture. Hemostasis secured and gauze counts were tallied. Incision was closed in layers.



Angiographic clips showing entangled guide wire & attempts to retrieve the guide wire.



Peri operative photographs showing a) skeletonisation of right CIA b) showing guidewire within the lumen c) showing the entangled portion of guide wire