

BRISTOL AND WESTON HEALTH AUTHORITY

Affix Patient Identification Label

Operation Note

Surname	ECCLESHARE	Unit No.	704147
Forenames	Gareth	Sex	Ch M.S.W.
Address	[REDACTED]		
Date of Birth	25.7.75	Consultant	Mr J D Wisheart

Surgeon	Wisheart/Dhasmana/Osmani
Anaesthetist	Masey/Turtle
Operation	Attempted Fontan operation. Take down of Fontan operation and central shunt between aorta and pulmonary artery.
Date	10.12.84

Diagnosis: Tricuspid atresia. Transposition of the great arteries.
Pulmonary atresia. Previous right Blalock-Taussig shunt.

Perfusion data: Cardiopulmonary bypass time - (1) 1 hr 31 mins
Cardioplegia & topical hypothermia (2) 45 mins
(3) 1 hr 03 mins
3hrs 19 mins

Period of aortic cross clamp - (1) 32 mins
(2) 05 mins
37 mins

Perfusion temperature - 25°C
Septal temperature - 10°C-18°C
Oxygenator - CAPIOX II 1.6

Approach: Median sternotomy.

Findings: The position of the heart was substantially to the right with the apex looking towards the right. The right atrium was hidden behind the ventricular mass whereas the left atrium was much more accessible and was quite large. The large aorta lay anteriorly, the main pulmonary artery was relatively small and posterior. On external examination there was no obvious localisation of a rudimentary right ventricle.

Procedure: Cardiopulmonary bypass was established using an SVC catheter and a second venous cannula at the IVC/RA junction and a 4 mm metal aortic cannula. The temperature was reduced, the aorta cross clamped and cardiac action stopped by infusion of an aliquot of the cardioplegic solution. Together with topical cooling this maintained the myocardial temperature at a satisfactory level during the period of aortic cross clamp. Having gone on bypass the Blalock-Taussig shunt, which had been dissected previously with some difficulty was snared.

The right atrium was opened with an incision in the appendage. The inter-atrial anatomy was confirmed, in particular the communications with the cavae, the presence of a coronary sinus and the absence of any tricuspid valve. The ASD was