مدينة الشيخ خليفة الطبية

MRN: SK00-882-563 Day Surgery/Surgical Sho
BALFAQIH, MOHAMMED GHASSAN MA
DOB: 07/04/2014 3Y M NON
Dr: Ahmad , Rana
Health #:
Location: SK Surg Day Care Unit SDC (B1)
FIN: 012-062-398 Reg. Date: 01/03/18

MEDICAL EVALUATION

DATE: 01 March 2018

This report is dictated at the request of the patient's family.

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BACKGROUND MEDICAL PROBLEMS

1. Angelman syndrome (confirmed by genetic testing).
2. Congenital glaucoma.
3. Generalized hypotonia.
4. Severe developmental delay.
5. Congenital heart defect including PDA and ASD.
6. Dysmorphic features.
7. Microcephaly.
8. Sleep apnea awaiting adenotonsillectomy.
9. Failure to thrive.
10. Nasogastric tube feeding. Parents refusing gastrostomy and hoping to stop nasogastric tube feeding at some point and to keep the child on full feeds.
11. Constipation.
12. Pain on feeding.
13. Barium swallow and abdominal ultrasound scan normal.
14. Allergy RAST tests for milk 2.2, peanut 1.05, gluten 1.06, soya 1.34, amylase normal, Helicobacter pylori negative, rash on the skin when exposed to sesame.

Mohammed has been referred to me since November 2016. He has been referred because of poor weight gain, used on PRN basis. He was on PediaSure at the time when I first met him but investigations revealed high RAST's to milk and soya, so he was changed to Neocate, however, his mother changed him back to PediaSure because he was not tolerating it.

Speech and Language Therapy assessment performed in August 2015 demonstrated poor oral phase, no sucking on bottle, prolonged mastication with pureed food, no aspiration with thin liquids and pureed foods. The patient can continue feeding.

Upper GI endoscopy 01 March 2018 normal, awaiting histology.

Mother would not give him Omeprazole because she did not feel it improved his symptoms. Despite multiple attempts to keep him on PPIs, she refused that. Multiple discussions with the mother on gastrostomy feeding has failed and she prefers to keep him on NG-tube feeding because she is aiming long term for him to be fully orally fed.

MEDICAL EVALUATION

He is currently taking PediaSure milk three to four bottles per day in addition to two pureed meals per day. He can vomit about 2 to 3 times per week but his mom associates his vomiting to be mainly when he strains and needs to open his bowels.

Growth, his weight is on the 3rd centile, his length is on the 25th centile and his head is below the percentile chart about two standard deviations.

Mohammed's parents are very keen to normalize his feeding, I cannot see this young boy having normal feeds orally and I cannot see him showing appropriate weight gain without the help of nasogastric tube/gastrostomy feeds.

Rana Riyad Ahmad, MBBS, RCPCH, CCT
Consultant, Pediatric Gastroenterology

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c: CMO, Sheikh Khalifa Medical City

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