

Handout

Congenital Heart Surgery for Interpreters

This handout is designed to support interpreters participating in the training session on congenital heart surgery. It provides an overview of key medical concepts, common congenital heart defects, roles of healthcare providers, and important terminology interpreters may encounter during patient encounters.

Overview of Congenital Heart Disease (CHD)

- CHD affects approximately 1 in 110 babies born in the U.S. each year.
- About 25% of these babies have a critical CHD requiring surgery.
- CHD is the most common birth defect and a leading cause of death in infancy due to birth defects.

The Journey from Diagnosis to Surgery

- Begins with prenatal screening (ultrasound, fetal echocardiogram).
- Pediatric cardiologist evaluates symptoms: sweating, fatigue, cyanosis, poor weight gain.
- Diagnostic tools include chest X-ray, EKG, echocardiogram, and four-limb blood pressure.

Common Congenital Heart Defects

- Patent Ductus Arteriosus (PDA)
- Atrial Septal Defect (ASD)
- Ventricular Septal Defect (VSD)
- Tetralogy of Fallot
- Coarctation of the Aorta
- · Aortic Stenosis
- Transposition of the Great Vessels
- Hypoplastic Left Heart Syndrome (HLHS)

Healthcare Professionals You May Encounter

- · Pediatric Cardiologist: Diagnosis, ongoing care
- · Pediatric Heart Surgeon: Performs surgical repair
- Cardiovascular Anesthesiologist: Anesthesia management
- Nurse Practitioners & Clinicians: Support care coordination
- CVICU Team: Intensivists, nurses, therapists, child life, social workers

Common Medications in CHD Treatment

- · ACE Inhibitors: Captopril, Enalapril
- Beta Blockers: Metoprolol, Atenolol
- · Antiarrhythmics: Amiodarone, Flecainide
- · Anticoagulants: Warfarin, Heparin
- Antiplatelets: Aspirin, Plavix
- · Diuretics: Lasix, Aldactone
- Digoxin, Sildenafil

Tips for Interpreters

- Be familiar with cardiac anatomy and terminology.
- Use appropriate register depending on audience (patient, family, clinician).
- Clarify unfamiliar terms during prep sessions with providers if possible.
- Maintain accuracy and neutrality, especially in emotionally sensitive situations.
- Avoid assumptions; always ask for clarification if unsure.