Mason was born June 8, 2017, with a congenital heart defect known as congenitally corrected transposition of the great arteries and a leaky valve. Around a month old he began showing signs that his valve was causing issues and needed surgery. We were sent to Boston Children's Hospital for a valve repair and PA banding surgery at 3 months old. The PA band was to prepare Masons heart for a surgery known as the double switch. During surgery Mason almost didn't survive, he was much sicker than anyone knew. His recovery was difficult and lasted us 30 days in Boston Children's Hospital. Once we returned home we were told that Mason was in heart failure. We treated him with medications in hopes his heart function would return. Unfortunately, Masons heart was too sick from his initial valve leak mixed with his transposition and was no longer a candidate for the double switch and there were no more surgical options left aside from transplant. On May 15, 2018 Mason was officially listed for transplant. During the summer of 2018 Mason began showing signs of worsening heart failure and required g tube surgery to help him grow. During this surgery it was discovered he was in intermittent heart block. Just a week and a half after discharge from his q tube surgery we were admitted back to the hospital indefinitely until a heart came. His g tube site would not properly heal which led us to discover his body was too weak to heal because his heart was using all it had to just keep him alive. Mason battled trouble with his g tube and it had to be pulled. Eventually he quit eating completely and lived on lipids and TPN for nutrition. He also caught an extremely rare infection while waiting. After only 34 days of waiting inpatient, Mason received his hero heart. Since transplant Mason has become the normal wild toddler that we always longed to have. His hero heart saved his life and has allowed him to flourish.