**March 16, 2024**

**Saturday**

**APPROVAL STATUS OF PROSPECTIVE PATIENT FOR**

**ORGAN TRANSPLANTATION**

**Date of Transplant Meeting March 15, 2024**

**Time 03:30 p.m.**

**(By Competent Authority)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No** |  **Reg. No. of Recipient**  | **Reg. No. of Donor** | **Organ**  | **Status**  |
| **1.** | 3044192 | 3044399 | Kidney | **Approved** |
| **2.** | 3048707 | 3318135 | Kidney | **Approved** |
| **3.** | 3323235 | 3323392 | Kidney | **Approved** |
| **4.** | 3306115 | 3306357 | Kidney | **Approved** |
| **5.** | 3326538 | 3326599 | Kidney | **Approved** |

***“This approval of Competent Authority is valid for a period of one year from the date of issue, only at Sir Ganga Ram Hospital”.***