**April 15, 2024**

**Monday**

**APPROVAL STATUS OF PROSPECTIVE PATIENT FOR**

**ORGAN TRANSPLANTATION**

**Date of Transplant Meeting April 12, 2024**

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

**(By Competent Authority)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No** |  **Reg. No. of Recipient**  | **Reg. No. of Donor** | **Organ**  | **Status**  |
| **1.** | 3335946 | 3339549 | Liver | **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”.***