**August 13, 2024**

**Tuesday**

**APPROVAL STATUS OF PROSPECTIVE PATIENT FOR**

**ORGAN TRANSPLANTATION**

**Date of Transplant Meeting August 13, 2024**

**Time 12:00 p.m.**

**(By Competent Authority)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No** |  **Reg. No. of Recipient**  | **Reg. No. of Donor** | **Organ**  | **Status**  |
| **1.** | 3403781 | 3406214 | Kidney | **Approved** |
| **2.** | 3381387 | 3396446 | Kidney | **Approved** |
| **3.** | 3300685 | 3405143 | 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”.***