**October 01, 2024**

**Tuesday**

**APPROVAL STATUS OF PROSPECTIVE PATIENT FOR**

**ORGAN TRANSPLANTATION**

**Date of Transplant Meeting October 01, 2024**

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

**(By Competent Authority)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No** |  **Reg. No. of Recipient**  | **Reg. No. of Donor** | **Organ**  | **Status**  |
| **1.** | 3412051 | 3413697 | Kidney | **Approved** |
| **2.** | 3047052 | 3429599 | Kidney | **Approved** |
| **3.** | 3413635 | 3413531 | Kidney | **Approved** |
| **4.** | 3191017 | 3422544 | 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”.***