**March 05, 2025**

**Wednesday**

**APPROVAL STATUS OF PROSPECTIVE PATIENT FOR**

**ORGAN TRANSPLANTATION**

**Date of Transplant Meeting March 05, 2025**

**Time 04:00 p.m.**

**(By Competent Authority)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No** |  **Reg. No. of Recipient**  | **Reg. No. of Donor** | **Organ**  | **Status**  |
| **1.** | 3464536 | 3464525 | Kidney | **Approved** |
| **2.** | 3460743 | 3495772 | Kidney | **Approved** |
| **3.** | 3473625 | 3492410 | Kidney | **Approved** |
| **4.** | 3340861 | 3499789 | Kidney | **Approved** |
| **5.** | 3485762 | 3507430 | 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”.***