**August 22, 2025**

**Friday**

**APPROVAL STATUS OF PROSPECTIVE PATIENT FOR**

**ORGAN TRANSPLANTATION**

**Date of Transplant Meeting August 22, 2025**

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

**(By Competent Authority)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S. No** |  **Reg. No. of Recipient**  | **Reg. No. of Donor** | **Organ**  | **Status**  |
| **1.** | 3588386 | 3592896 | Kidney | **Approved** |
| **2.** | 3526788 | 3593545 | Kidney | **Approved** |
| **3.** | 3588161 | 3603408 | Kidney | **Approved** |
| **4.** | 2814623 | 2197516 | 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”.***