

2nd March 2021

de

Dr. Dharmendra Gupta
Nodal Officer
Delhi Organ Transplant Cell
Room No.531, D-Block
G.B. Pant Institute of Post Graduate Medical Education &
Research (formerly G.B. Pant Hospital)
New Delhi – 110 002

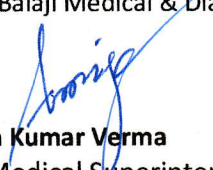
Dear Sir,

Subject : Monthly Report of Kidney Transplantation in our Hospital –
Max Super Speciality Hospital (a unit of Balaji Medical & Diagnostic
Research Centre), 108-A, I.P. Extn., Patparganj, Delhi-110 092

Attached herewith monthly Report in the prescribed format, with respect to Renal
Transplant carried out in our Hospital for the month of **FEBRUARY - 2021**.

Kindly acknowledge receipt thereof.

Yours faithfully,
For MAX SUPER SPECIALITY HOSPITAL
(a unit of Balaji Medical & Diagnostic Research Centre)


Dr. Amiya Kumar Verma
Deputy Medical Superintendent

Encl: as above




Delhi Organ Transplant Cell
Room No. 531, D-Block
G.B. Pant Institute of Post Graduate
Medical Education & Research, New Delhi

Name of the Hospital : Max Super Speciality Hospital (a unit of Balaji Medical & Diagnostic Research Centre)
 108-A, Indraprastha Extension, Patparganj, Delhi - 110 092

Name of Organ : Kidney
 Month : FEBRUARY - 2021

Serial number	Date of Transplant mm/dd/yy	RECIPIENT			LIVE			DONOR			Cadaver Yes / No	
		Name & address	Age & Sex	CR No. / IP No. / Regn. No.	Diagnosis or indication of transplant	Name & address	Age & Sex	CR No. / IP No. / Regn. No.	Relation with patient	If unrelated live donor whether approved by Authorisation Committee		

NIL

(Signature)
 Authorised Signatory with name & Designation
 Deputy Medical Superintendent
 Max Super Speciality Hospital
 (A unit of Balaji Medical & Diagnostic Research Centre)
 108-A, I.P. Extn., Patparganj, Delhi-110092