MAX HEALTHCARE

2nd March 2020

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 Renal 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 - 2020.**

Kindly acknowledge receipt thereof.

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

Dr. Mohita Chandra
Medical Superintendent

Encl: as above

03/03/2020

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, Indraprashta Extension, Patparganj, Delhi - 110 092

Name of Organ : Kidney

Month : FEBRUARY 2020

Serial number	Date of Transplant	RECIPIENT				DONOR					
						LIVE					
		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	Cadaver Yes / No
	mm/dd/yy										
	NIL										

Authorised Signatory with name & Des ignation

Dr. Mohita Chandra
Medical Superintendent
Max Super Speciality Hospital
(A unit o Balaji Medical & Diagnostic Resear Cent
108-A, I. P. Extn., Patparganj, Delhi-110 09

Medical Education & Research,New Delhi