

**PERFORMA FOR MONTHLY REPORTING OF TRANSPLANT OF ORGAN**

Appropriate Authority Reg. Valid Up to: **02/01/2017**

Name of Organ: **KIDNEY**

Name of the Hospital: **Satguru Partap Singh HOSPITAL**

Month-August 2016

State: **Punjab**

S. No.	Type	Date of Transplant	Name	Address	Nationality	Age & Sex	CR No	Basic Diagnosis of Recipient	Donor relation with recipient a) Near Related b) Other then near related	Authorization Authority Approval Date & No.
1	Recipient	07/08/2016	Kulwinder Singh	S/o Sh Kehar Singh Village Wahid, P.O-Dhak Manak, Tehsil Phagwara, Distt Kapurthala, Punjab	INDIAN	41yrs male	400357	HYPERTENSIVE Chronic Kidney Disease Stage 5	wife(a)	Office of the Principal Punjab Distt Level Authorization Committee under Transplantation of Human Organ Act , Govt Medical College, Amritsar, approval date-30/06/2016, letter no-6378
	Donor	07/08/2016	Amarjit Kaur	W/o Sh Kulwinder Singh Village Wahid, P.O-Dhak Manak, Tehsil Phagwara, Distt Kapurthala, Punjab	INDIAN	35yrs female	402309		husband	Office of the Principal Punjab Distt Level Authorization Committee under Transplantation of Human Organ Act , Govt Medical College, Amritsar, approval date-30/06/2016, letter no-6378

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Recipient	07/08/2016	Ankur Rawat	S/o Late Sh Hobat Singh Rawat H.no-622-L, Model Town, Ludhiana, Punjab	INDIAN	37yrs male	414213	Diabetes HYPERTENSIVE, Chronic Kidney Disease Stage 5	wife(a)	AA-Office of the Principal Punjab Distt Level Authorization Committee under Transplantation of Human Organ Act , Govt Medical College, Patiala, approval date-03/08/2016, letter no-14690
Donor	07/08/2016	Jyoti Rawat	W/o Ankur Rawat H.no-622-L, Model Town, Ludhiana, Punjab	INDIAN	34yrs female	424579		husband	AA-Office of the Principal Punjab Distt Level Authorization Committee under Transplantation of Human Organ Act , Govt Medical College, Patiala, approval date-03/08/2016, letter no-14690