

**APPROVAL STATUS OF PROSPECTIVE PATIENT FOR  
ORGAN TRANSPLANTATION**

**Date of Hospital Based Authorization Committee**

**January 2, 2018**

**Time**

**03:30 pm**

S.No	File No	Organ	Status
1	AC/Ext/2018/001312	Kidney	Approved
2	AC/Ext/2018/001313	Liver	Approved

**“This approval of Authorisation Committee is valid for a period of one year from the date of issue, only at Medanta – The Medicity.”**