

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

**Date of Hospital Based Authorization Committee**

**January 05, 2018**

**Time**

**3:30 pm**

S.No	File No	Organ	Status
1	AC/Ext/2018/001314	Kidney	Approved
2	AC/Ext/2018/001315	Kidney	Approved
3	AC/Ext/2018/001316	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.”**