

**Qtrly Report: January'18 to March'18****Organ - Kidney**

| <b>HOSPITAL ID NO.</b>                                 | <b>COMMITTEE</b>                                            | <b>DATE OF SURGERY</b> | <b>PERMISSION NO. &amp; DATE</b>        |
|--------------------------------------------------------|-------------------------------------------------------------|------------------------|-----------------------------------------|
| Recipient ID - IP/18/001019<br>Donor ID - IP/18/001025 | Directorate of Medical Education, Swasthya Bhawan, W.Bengal | 05.02.2018             | CE/916-2001/M/2131<br>1(4) Dt: 14.12.17 |
| Recipient ID - IP/18/001215<br>Donor ID - IP/18/001213 | Directorate of Medical Education, Swasthya Bhawan, W.Bengal | 12.02.2018             | CE/916-2001/M/30<br>1(4) Dt: 09.01.18   |
| Recipient ID - IP/18/002107<br>Donor ID - IP/18/002105 | Directorate of Medical Education, Swasthya Bhawan, W.Bengal | 15.03.2018             | CE/916-2001/M/161<br>1(4) Dt: 29.01.18  |