

**OFFICE OF THE DIRECTORATE, MEDICAL EDUCATION AND RESEARCH-
Cum-CHAIRMAN PUNJAB STATE LEVEL AUTHORIZATION COMMITTEE**

UNDER TRANSPLANTATION OF HUMAN ORGANS ACT-1994, Rules-1995 & 2008, Amended Act-2011 & Rules 2014

(Medical Education Bhawan, Sector-69, SAS Nagar, Mohali-160069)

(Phone No. 0172-5287760, E-Mail drmpunjab5me3@gmail.com, dir_mer@punjab.gov.in)

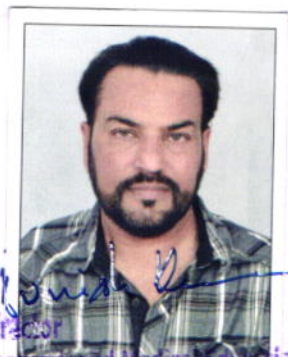
No Objection Certificate

No. 1/15/2017-PB-5ME3/1808.

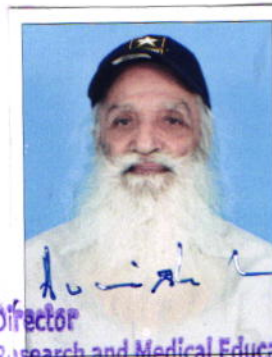
Dated: 30/1/2018

This is to certify that as per application in form-11 for transplantation of **Kidney** (Name of Organ/Tissue) from living donor, other than near Relative / Swap donation cases / all foreigner under the Transplantation of Human Organs Act-1994 (42 of 1994) submitted on **16-01-2018** by the donor and recipient, whose details and photographs are given below, along with their identifications and verification documents, the case was considered after the personal interview of donor and recipient (if medically fit to be interviewed) and their relatives as applicable by the Authorization Committee in the meeting held on dated **30-01-2018**.

Details of Recipient	Details of Donor
Name : Mr. Jagjit Singh	Name : Mr. Gurdev Singh Droga
Age : 39 Years	Age : 70 Years
Sex : Male	Sex : Male
Father Name : S/o Sh. Gurdev Singh Droga	Father Name : S/o Late Sh. Jaswant Singh
Address : R/o V.P.O-Mithapur, District-Jalandhar / 1714 9 th Avenue SW, Watertown, SD 57201-5013, USA.	Address : R/o V.P.O-Mithapur, District-Jalandhar / 1714 9 th Avenue SW, Watertown, SD 57201-5013, USA.
Hospital Reg. Patel Hospital, Super-Specialty Hospital, Civil Lines, Jalandhar.	Hospital Reg. Patel Hospital, Super-Specialty Hospital, Civil Lines, Jalandhar.
Relation of donor with recipient	Related (Father)



Director
Research and Medical Education, Punjab
S.A.S. Nagar (Mohali)
Recipient



Director
Research and Medical Education, Punjab
S.A.S. Nagar (Mohali)
Donor

Permission is granted, as to the best of knowledge of the members of the committee, donation is out of love and affection and there is no financial transaction between recipient and donor and there is no pressure on / coercion of the donor.

Member	Member	Member	Member	Member	Member
Dr. Prabhjit Kaur, Nominee Secretary, Department of Medical Education & Research, Punjab, Chandigarh	Dr. Jaspreet Kaur, Assistant Civil Surgeon, Nominee Civil Surgeon, Mohali.	Dr. Ardaman Singh, Professor Department of Medicine & Rep. Principal, Govt. Medical College, Patiala	Dr. Bharti, Nominee, DHS, Health & Family Welfare Punjab, Chandigarh	Dr. Kanwardeep Singh, Nodal Officer, Office of the Director, Medical Education & Research.	Dr. Gurdeep Singh Kalyan, Joint Director, Medical Education & Research, Punjab.

Avnish Kumar
(Dr. Avnish Kumar)
Chairman Punjab State Authorization Committee
-Cum-
Director, Medical Education & Research, Punjab

Director
Research and Medical Education, Punjab
S.A.S. Nagar (Mohali)

CHECK_LIST

Check list for file to be submitted to authorization committee. All the pages in the file are to be numbered. The file cover must indicate name of the recipient, name of the donor, name of the consultant.

1. Checklist(Total No of pages-(118)
2. Application for renal Transplant (3)
3. Family Tree(Page:4)
4. Blood group of all relatives (Page:5)
5. Family Photograph(Page:6)
6. Forwarding letter by processing consultant (Page: 7-8)
7. Letter of counsellor (Page 9)
8. Documentary proof of identity/ relationship of donor (Page:10-12)
9. Documentary proof of identity/relationship of recipient (Page:13-16)
- 10.Documentary proof of identity/relationship of recipient & donor (Page 17-28).
- 11.Affidavit on stamp paper(from the recipient) along with attested photo pasted on the affidavit signed by SDM/Notary. (Page:29-30)
- 12.Affidavit on stamp paper (from the donor) along with attested photo (both patient and donor) pasted on the affidavit signed by notary. (Page:31-32)
- 13.Affidavit on stamp paper (consent from the close relative of the donor and recipient) attested by SDM/ Notary (Page: 33-37)
- 14.Duly completed recipient performa including blood group of all relatives(counter signed by the processing consultant) (Page: 38-39)
- 15.Duly completed donor performa (counter signed by the processing consultant) (Page:40)
- 16.Duly completed Form-1 by the consultant concerned with rubber stamp(Page:41-43)
- 17.Duly completed Form 8 & 20 by the patient and counter signed by the concerned with rubber stamp (Page: 44-46)
- 18.Investigation chart (Page: 47-50)
- 19.Donor reports (Page: 51-72)
- 20.HLA & Form 5 & Cross Match report (Page: 73-88)
- 21.Form No-11 Application for approval of transplantation from living donor (Page: 89-90)
22. Permission of transplant (Page:91-92)
- 23.Donor Recipient Medical Fitness Certificate (Page:93)
- 24.Recipient Reports (Page: 94-152)