



***CareVista Superspeciality Hospital***

*Contact Number: 2233-0404/0808*

*Email Us @careVista@gmail.com*

*Kolkata, WB, India*

**DECEASED DONOR CARD**



***Directed By General of Health Services***

***Ministry of Family Welfare***

***Govt. Of India***

# DONOR DETAILS



**Date:** 22-12-2002

**Donor Registration Number:** ODD62076ead06375

***I, Rajashree Ghosh, S/O, D/O Raja Ghosh,***

***Age 21 years, hereby pledge to donate the following from my body for therapeutic purpose as a Deceased Donor after my death(Brain Stem/Cardiac).***

***Organ(s): Heart, Two Lungs, Pancreas, Liver (2 recipients), Two Kidneys,***

***Tissue(s): Corneas (the part of the eye in front of the iris), Bones, Skin, Veins, Heart Valves, Ligaments, Tendons,***

***Blood Group:*** O RhD positive (O+)

***Contact Number:*** 8910227830

***Emergency Contact Name:*** Srabanti Ghosh

***Adhaar Card Number:*** 123456781234

***E-mail ID:*** rajo@gmail.com

***Emergency Contact Number:*** 8981325373