



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: 15-02-2022

Donor Registration Number: ODD620ba2033ce9d

*I, **Subham Bhattacharjee**, S/O, D/O **Pradip Kumar Bhattacharjee**,
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, Liver (2 recipients),

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

Blood Group: AB RhD positive (AB+)

Contact Number: 8902764506

Emergency Contact Name: Suparna Bhattacharjee

Adhaar Card Number: 456789012345

E-mail ID: subham040800@gmail.com

Emergency Contact Number: 8723648074