KIDNEY HOSPITAL & LIFELINE MEDICAL INSTITUTIONS PMF TRUST

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REPORT FOR KIDNEY TRANSPLANTATION FOR THE MONTH OF JUN 2019

No. of Cases: NIL

S.NO	RECIPIENT'S NAME	AGE	DONOR'S NAME	AGE	DATE OF ADMISSION	DATE OF DISCHARGED	DATE OF SURGERY
1.							
2.							
3.							
4.							
5.							