Deceased donor transplantation in India: Experiences of Telangana



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Do we need a deceased donor transplantation programme?



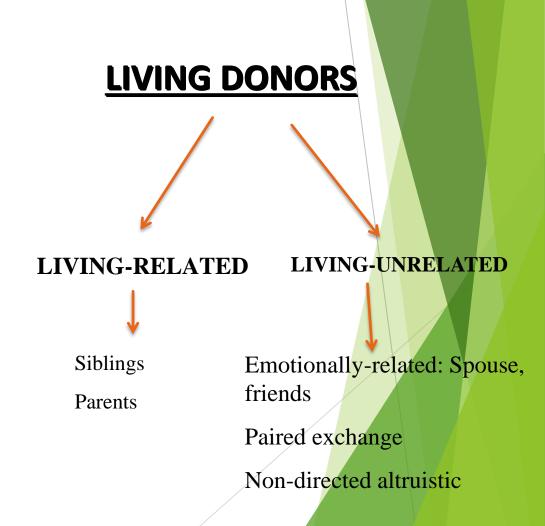
	2005		2006-2015 (cumulative)			
Geographical regions (WHO classification)	Total deaths (millions)	NCD deaths (millions)	NCD deaths (million s)	Trend: Death from infectious disease	Trend: Death from NCD	
Africa	10.8	2.5	28	+6%	+27%	
Americas	6.2	4.8	53	-8%	+17%	
Eastern Mediterranean	4.3	2.2	25	-10%	+25%	
Europe	9.8	8.5	88	+7%	+4%	
South-East Asia	14.7	8.0	89	-16%	+21%	
Western Pacific	12.4	9.7	105	+1	+20%	
	58.2	35.7	388	-3%	+17%	

WHO projects that over the next 10 years, the largest increase in deaths from cardiovascular disease, cancer, respiratory disease and diabetes will occur in developing countries.

The Organ Shortage

Every 10 minutes, someone is added to the national organ transplant waiting list.

Organ shortage — the main limitation to saving lives of critically ill patients.



Illegal Organ Trafficking Poses A Global Problem



SAVES
LIVES

Register as an organ, eye, and tissue donor. Share this and share life.

http://www.kidney-international.org

© 2013 International Society of Nephrology

Evolution of deceased-donor transplantation in India with decline of commercial transplantation: a lesson for developing countries

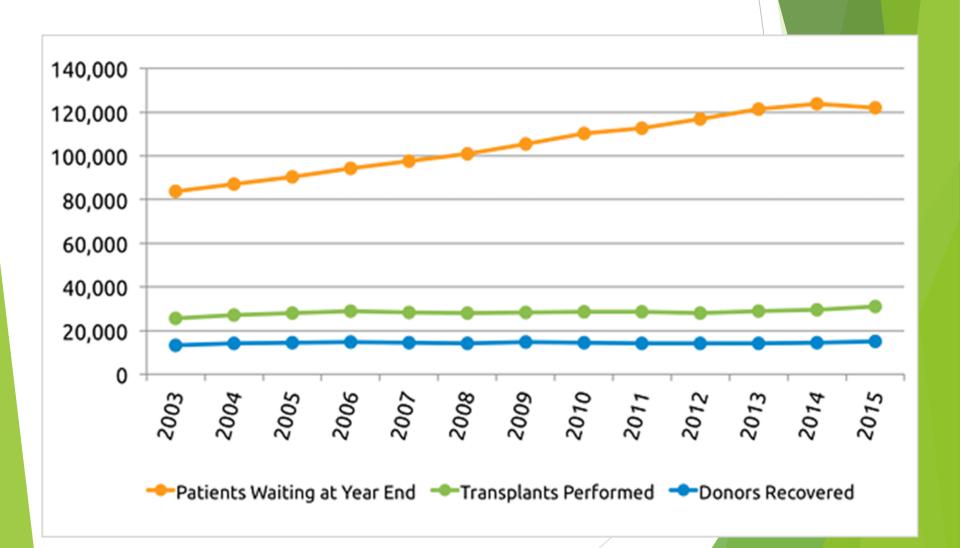
Georgi Abraham¹, Yuvaram N.V. Reddy¹, Yogesh N.V. Reddy¹, Sunil Shroff¹, Milly Mathew¹ and Sundarajan Saravanan¹

¹Pondicherry Institute of Medical Sciences and Madras Medical Mission Hospital, Chennai, India

- •Worldwide organ trade has become very popular
- In many underdeveloped countries people sell their organs to make money.
- India -almost 500 million people sell their kidneys to just survive.

NATIONAL HEALTH CRISIS

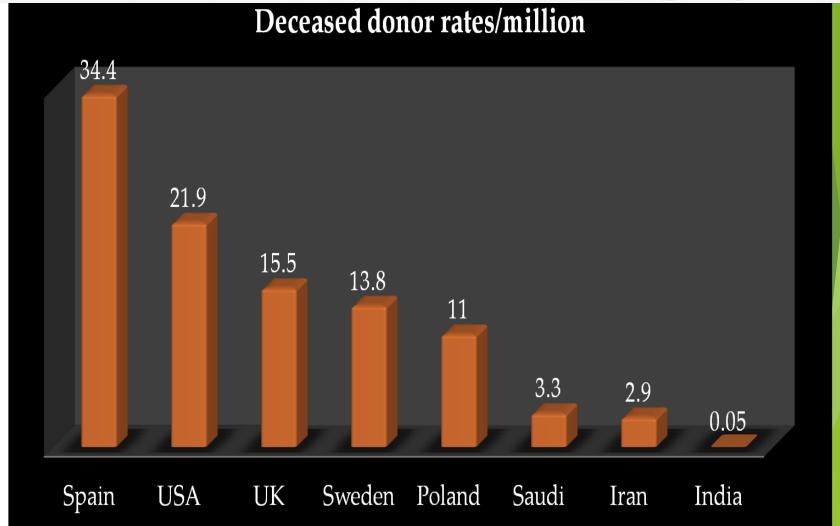






Jeevandan Cadaver Transplantation Programme Donating







Current Status of India

Dialysis patients in Telangana - new cases and surviving cases

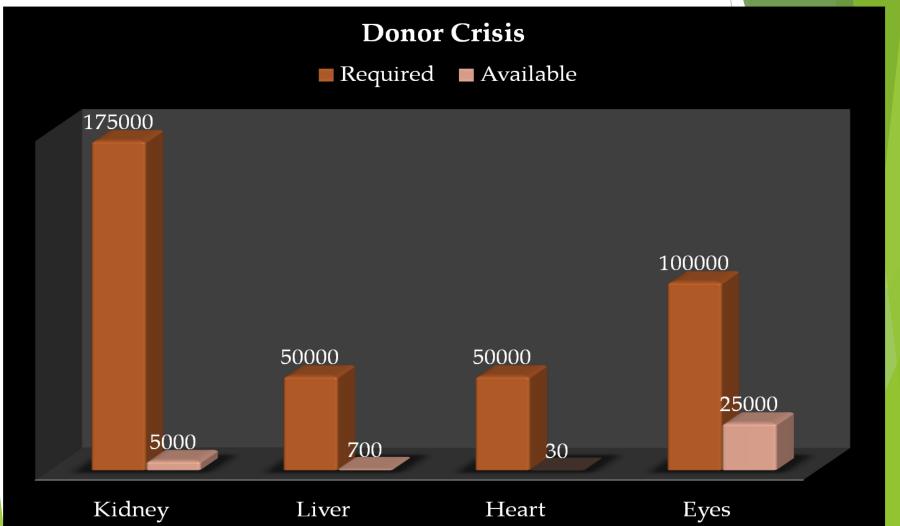
2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
511	243	144	99	87	60	53	39
	714	420	248	176	108	76	46
		1035	595	382	238	178	95
			1633	1033	578	372	166
				2800	834	845	463
					3347	1371	596
						3673	2023
							3172
511	957	1599	2575	4478	5165	6568	6600

► Non availability of donor.



Jeevandan Cadaver Transplantation Programme Donating





Southern- Western strip

(source: Indian transplant news letter)



"Deceased organ donation is yet to be streamlined in the country. Some states have taken the initiative, but a centralized registry in the form of an electronic database readily available to personnel involved in organ donation is missing

Need of hour



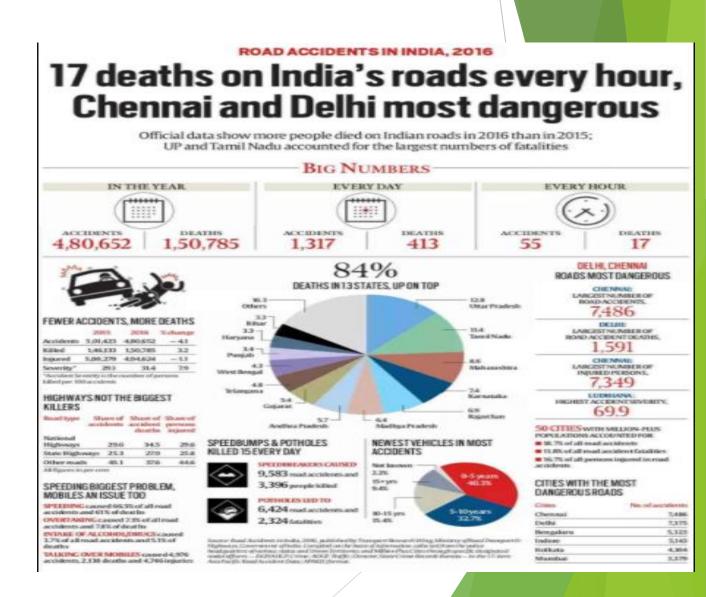
Deceased Transplantation



Jeevandan

Road Accidents in India, 2016, published by Transport Research Wing, Ministry of Road Transport & Highways, Government of India.

- > 1.4 lakh people die in road accidents every year (65% brain injuries)
- 95,000 potential organs
- A donation rate of just 3-5 per million would meet all of India's present organ needs! (current: 0.26 per million)





Key steps involved

Critical pathways for organ donation

Possible deceased organ donor

A patient with a devastating brain injury or lesion or a patient with circulatory failure and apparently medically suitable for organ donation

Donation after circulatory death (DCD)

Treating physician to identify/refer a potential donor

Potential DCD donor

 A person whose circulatory and respiratory functions have ceased and resuscitative measures are not to be attempted or continued.

10

B. A person in whom the cessation of circulatory and respiratory functions is anticipated to occur within a time frame that will enable organ recovery.

Eligible DCD donor

A medically suitable person who has been declared dead based on the irreversible absence of circulatory and respiratory functions as stipulated by the law of the relevant jurisdiction, within a time frame that enables organ recovery.

Actual DCD donor

A consented eligible donor:

 In whom an operative incision was made with the intent of organ recovery for the purpose of transplantation.

or

From whom at least one organ was recovered for the purpose of transplantation.

Utilized DCD donor

An actual donor from whom at least one organ was transplanted.

Reasons why a potential donor does not become a utilized donor

System

- Failure to identify/refer a potential or eligible donor
- Brain death diagnosis not confirmed
 (e.g. does not fulfill criteria) or completed
 (e.g. lack of technical resources or clinician to make diagnosis or perform confirmatory tests)
- Circulatory death not declared within the appropriate time frame.
- Logistical problems (e.g. no recovery team)
- Lack of appropriate recipient (e.g. child, blood type, serology positive)

Donor/Organ

- · Medical unsuitability (e.g. serology positive, neoplasia)
- Haemodynamic instability/unanticipated cardiac arrest
- Anatomical, histological and/or functional abnormalities of organs
- · Organs damaged during recovery
- · Inadequate perfusion of organs or thrombosis

Permission

- Expressed intent of deceased not to be donor
- · Relative's refusal of permission for organ donation
- Refusal by coroner or other judicial officer to allow donation for forensic reasons

Donation after braindeath (DBD)

Potential DBD donor

A person whose clinical condition is suspected to fulfill brain death criteria.

Eligible DBD donor

A medically suitable person who has been declared dead based on neurologic criteria as stipulated by the law of the relevant jurisdiction.

Actual DBD donor

A consented eligible donor:

- In whom an operative incision was made with the intent of organ recovery for the purpose of transplantation.
 - or
- From whom at least one organ was recovered for the purpose of transplantation.

Utilized DBD donor

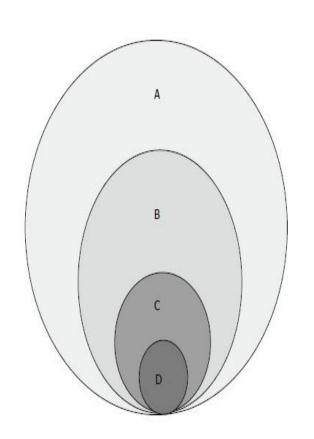
An actual donor from whom at least one organ was transplanted.

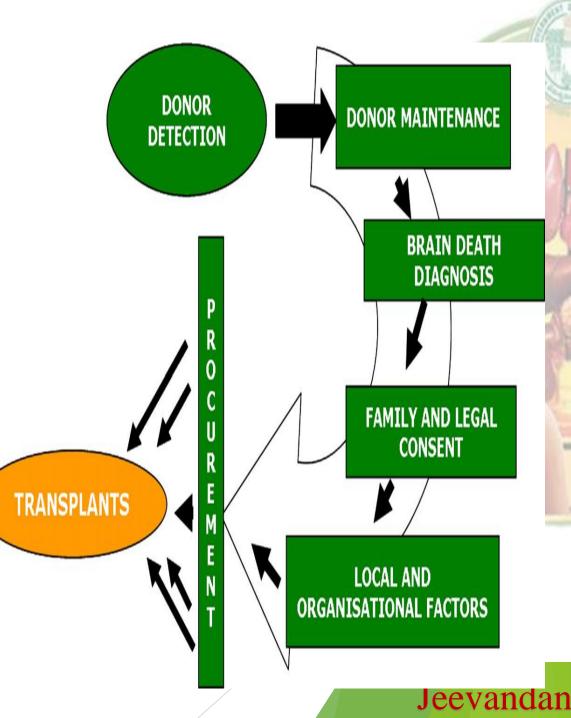
^{*}The "dead donor rule" must be respected That is, patients may only become donors after death, and the recovery of organs must not cause a donor's death

1. System

2. Donor/organ

3. Permission





Common Problems & Platforms



Media and Scandals

Neurology, Neuro surgeon, Intensivist

Transplant Coordinator

Decease of the Conor

Hospital Registration

Public Awareness & Professionals Attitude

Police department & Forensic

Organ
Allocation
Registry

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Public Attitude and Organ donation in India

- Less than 50% overall positive response in favor of donating solid organs
- ▶ 72% were willing for "Eye" donation and carry a "Donor Card"
- All major religions were willing to consider organ donation

after their death.

they want to leave

a legacy of life for

others. There are

5 Lakh Of 9Cr **New Drivers** Are Donors

Dipak.Dash@timesgroup.com

ess than 1% of persons with driving licences have pledged to donate their organs in case they meet with a fatal accident. The government expects this share to increase as it has introduced a new provision in the driving licence application, which allows an applicant to pledge his/her organ donation.

A source said about 5 lakh out of the 9 crore new licence holders have pledged to donate their organs. Though the change in application form came into force from April 1, some regional transport offices (RTOs), in collaboration with advocacy groups, have already been reaching out to people.

"We are compiling organ donors' data. As we have changed the application format, which every RTO across the country has to follow, there will be an increase in the number of such pledges," a central government official said.

Priyanka Shylendra, chief executive officer of Gift Your Organ Foundation, which pursued the change in driving licence application format, said this will bring more awareness. "When we interacted with people from different walks of life, we found they are keen to donate organs. What is needed is awareness and making the process simple," she added.

Shylendra said her founda tion undertook an awareness initiative from 2012 to 2015 at nine RTOs in Bangalore, "We made 1.72 lakh people aware and through this initiative, 62,000 people pledged. The initiative was introduced at a Mumbat RTO in 2013 and 15,000 people were made aware," she said.

Organizations working in this sector have also been pushing for a seamless mechanism for quick transfer of accident victims to specialised hospitals to complete the organ donation process. Last month, while inaugurating the National Road

The NOTTO Organ Donor Register

It is a computerized database which records the wishes of people who have pledged for organ and tissue donation and decided that,

many hospitals and organizations that maintain a list of persons who have pledged organ donation with them, All the lists are passed to NOTTO website for the **National Register**

Who can join the register

Everyone, irrespective of their age or health, can join the NOTTO Organ Donor Register. Joining the register expresses a wish to help others by donating organs or tissues after death but importantly, joining the register also is a way to give legal consent or authorization for donation to take place

Although pledging doesn't have a legal standing, it is an effective tool to spread awareness about cadaver donation

Vimal Bhandari DIRECTOR, NATIONAL ORGAN AND TISSUE TRANSPLANT ORGANISATION (NOTTO)

Why does Indian require a donor registry?

It is an essential part of understanding who and where the potential In last 2 years. donors are. NOTTO has got The registry gives a planner enough information to

the organ donation process

co-operation and commitment towards organ donation. The registry allows

doctors and transplant coordinators to check if a brain dead person wished to donate and then, approaching the family for consent becomes easier. It helps save crucial time in If I have a donor card, will my organs be taken without my family's consent?

SIGN UP, INDIA HAS

A MASTER REGISTER

Since 2005, over three million deaths have been

register can help the govt track potential donors

recorded due to non-availability of organs. A

No. Even if you carry a donor card, your immediate family members and close relatives will be asked for donation of organs and tissues. The consent for organ donation is mandatory from the person lawfully in possession of the body

nister Nitin Gadkari said Tata Group's arm TCS is keen to join hands with the government in an initiative to harvest organs from mad crash victims as well as facilitate emergency servi-

ces using heliconters. He added that the government is developing 750 roadside amenities, which will have helipads in addition to other facilities for travellers. Organ donation gains importance as at present, there is less than one organ donor in a million in India and over three million deaths recorded since 2005 due to non-

devise strategies

to get more public

To sign up as an organ donor, log on to Or give a missed call www.organdonationday.in on 8826262626



TIMES CITY

No. of Indians who have pledged their organs jumps from 9k to 15L in 2 years

tatistics show that Spain records 36 donors for every miltion population, but India has less than one organ donor for every million citizens. Doctors and experts however belteve India's youth can help change this abysmal organ

The reason for their optimism is the increased awareness about organ donation among the young. Unlike ageing India that still looks at organ donation with suspicion, the youth seem to have adopted it. A recently published study that looked at the attitudes towards organ donation of final-year students of medical, dental, engineering, and arts and science students in Chennal and Thiruvallur found an overwhelming 94% of those interviewed knew about organ donation. Only 31 out of the 496 students hadn't beard about it.

The study published in the Indian Journal of Transplantation said that 54% of the interviewed students were aware about the transplantation act". Indeed, when TOI spoke to youngsters across the country, their empathy for the cause was apparent. Eighteen-year-old Siddharth R Chaube from Somaiya College, Vidyavihar in Mumbai, believes organ donation is a "divine concept" as it forges a lasting bond between two, often unrelated, people, "Science has remarkably progressed over the last couple of years, but it still hasn't found a way to create new organs out of scratch. This is whereorgan donation steps in," said

Social media marketing executive Kruthika Rayindran (23) signed a pledge to donate her organs after attending a seminar last year. "People do not know what organ donation is. Hence, we need to make people aware of the what where when, why and how," Ravindran said, adding that educating people is the only

Freelance photographer Nihar Salvekar (23) wants schools to start talking about organ donation, "The voYOUTH LEAD THE WAY, CALL FOR AWARENESS

HOW OTHER COUNTRIES FARE

has one of the best donation rates in the world at 36 donors per million. They have a system of presumed consent where all citizens are potential donors unless someone opts out

has the opt-in model similar to India but donation rate is much higher at 26 per million. Around 1,20 lakh people are on the transparent waitlist. Certain states provide tax incentives

DROUTE became EU's emerging player with a donation rate of 32 per million. Dedication of health professionals and good organ isational structure were touted as some of the main factors

GERMANY has an organ donation rate of 12 per million, one of the poorest in the EU. An organ donation scandal that rocked the country in 2012 contributed to a dip in numbers. Currently, over 800 donations are registered every year

It is the only country that has legalised the selling of a kidney and wiped off its waiting list since 1999. The donors are compensated by the state as well as the recipient

People should be made aware about organ donation. The govt must ask colleges to hold awareness program-



uth would then be able to

understand it and decide

accordingly," he said. Sig-

ning donor cards, too, would

fasten the organ donation

In fact, National Organ

process in case of untimely

and Tissue Transplant Or-

ganisation (NOTTO) direc-

tor Dr Vimal Bhandari advo-

cates pledging as the instru-

Pledging doesn't have a

legal standing, it is one of

the most effective tools to

spread awareness of cada-

ver donation in a country

where people know little

"In merely two years, the

ment of change

about the concept.

Neha Tetali (22) | sru-CENT AT BY, GAMDHENAGAN **DONORS PER MILLION CITIZENS** 3 Poland

INDIA HAS A DISMAL RECORD

85,000 liver failure patients are added to the country's waitlist every year, but less than 3% get an organ

2 lakh fresh registrations for kidneys a year. But only 8,000 manage to get

a transplant Despite cadaveric organ donations zooming 4 fold in last 5 yrs, demand & supply disparity remains grave

Celebrities need to

ve pledged organs has jum-

ped from 9,000 to 15 lakh to-

day," said Dr Bhandari.

network of 60 NGOs.

ges," he said.

of the thousands

waiting for heart or

lungs in India

get an organ

spread the word. The govt could give incentives or health insurance after

60 years to people who pledged organs, Awareness should focus on removing religious and cultural stigma around the act. Signing donor cards is a start, but India needs a more efficient system for organ donation

Dr Mishin Commen (26) BAIABAJISWAR MEDICAL COLLEGE, BANGALDRE

tion, it will find an appeal among the youth. "Pledging

for individuals to discuss

that you could let a part

of yourself live and give

someone else a chance to lead a life

even as you depart. It is the best way

Arya Halde (18) PSYCHOLOGY STUDEN

Modules could be included in school

every adult is a donor after his/

Rvan D'Souza (27)

STUDENT AT GOVERNMENT

syllabus, Donor cards could prove

to let the world know

how much you value

life, not just yours

but even another's.

Youth needmake a

difference, to try and

helpful as they give a

history, Netherlands

adults donors unless

they opt out. In Mexico,

her death

recently passed a

bill, making all

save lives



Jeevandan





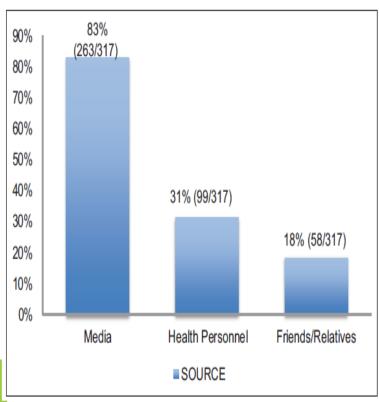




Awareness and Attitudes toward Organ Donation in Rural Puducherry, India

Balajee KL, Ramachandran N, Subitha L

Department of Preventive and Social Medicine, Jawaharlal Institute of Postgraduate Medical Education and Research, Puducherry, India



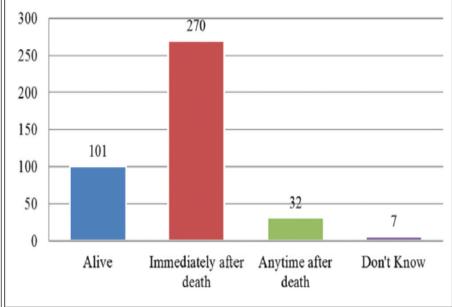


Figure 2: Awareness* regarding time of organ donation among those who were aware about organ donation (n = 317). *Multiple responses

Physicians Attitude to Organ Donation

There was a <u>lack of knowledge by health professionals</u> surrounding brain death and the organ procurement process.

A large proportion of Physicians are indifferent to organ donation process.

Reason cited for this were -

- ▶ Lack of information regarding the donation process (28.7%),
- Concerns about the sale of organs (22.1%),
- Islamic religious beliefs (21.6%)

Journal of Transplantation Volume 2014 (2014), Article ID 296912, 6 pages http://dx.doi.org/10.1155/2014/296912

Research Article

Attitude of Healthcare Professionals: A Major Limiting Factor in Organ Donation from Brain-Dead Donors

Abstract

Public attitude toward deceased donor organ recovery in Poland is quite positive, with only 15% opposing to donation of their own organs, yet actual donation rate is only 16/pmp. Moreover, donation rate varies greatly (from 5 to 28 pmp) in different regions of the country. To identify the barriers of organ donation, we surveyed 587 physicians involved in brain death diagnosis from regions with low (LDR) and high donation rates (HDR). Physicians from LDR were twice more reluctant to start diagnostic procedure when clinical signs of brain death were present (14% versus 5.5% physicians from HDR who would not diagnose death, resp.). Twenty-five percent of LDR physicians (as opposed to 12% of physicians from HDR) would either continue with intensive therapy or confirm brain death and limit to the so-called minimal therapy. Only 32% of LDR physicians would proceed with brain death diagnosis regardless of organ donation, compared to 67% in HDR. When donation was not an option, mechanical ventilation would be continued more often in LDR regions (43% versus 26.7%; P < 0.01). In conclusion, low donation activity seems to be mostly due to medical staff attitude.

RELIGIOUS & CULTURAL ASPECTS

Religion plays major role in promoting Organ Donation. Major religions in India include -

- Hinduism
- Islam
- Buddhism
- Christianity
- Sikhism
- Judaism

Govt. Problem

No Funding for programme

Hospital problem

No efforts to identify & maintain "Brain Dead" donors

Government's initiatives

- A series of Govt.orders promulgated 2010
- Provided a boost to the programme
- To ensure transparency
- ► To streamline the procedure
- To co ordinate the public & private institutions



United Network for Organ Sharing (UNOS) is the private, non-profit organization that manages the nation's organ transplant system under contract with the federal government.

Bring together hundreds of transplant and organ procurement professionals and thousands of volunteers.

Make **79 life-saving organ transplants** possible each day.

Serves as the **model for transplant** systems around the world.

Is there any programme in India?



JOURNAL OF CURRENT TRENDS IN CLINICAL MEDICINE & LABORATORY BIOCHEMISTRY

SHORT REVIEW

Deceased Donor Transplantation – An Indian Scenario

Hemachandar Radhakrishnan*

The Tamil Nadu model:

A private-public partnership in Tamilnadu promoting deceased donor transplantation has effectively eliminated commercialization in transplantation in the state of Tamil Nadu with a population of 72 million which is a model for other regions of South Asia and developing countries. A central transplant coordinator appointed by the government oversees legitimate and transparent allocation of deceased organs both in the public and

Medical College Hospitals in Chennai - Orders Issued. Health & Family Welfare (Z1) Department G.O.(Ms) No.6 - 2038, Sarvajith, Margazhi Matham -1) Dated: 08.01.2008

Chennai that could have been utilized by other patients who are not in a similar state and have a better chance of recovery. It is also known that failure to declare brain death even when all the conditions are evident has led to prolonged anxiety for all family members and friends of the patients.

- 2. Due to the lack of clarity on this issue and the optional nature of the current situation, it is necessary to issue orders making it mandatory to declare "Brain death" and certify it accordingly.
 - 3. The following orders are therefore issued in the matter:-

It is now made mandatory that whenever the medical condition (clinical and medical criteria have been met for) of a patient has reached a brain death stage, brain death certification is to be done by the authorized medical personnel.

4. The above order shall come into force in the three Government Medical College Hospitals in Chennai, viz., Government General Hospital, Government Stanley Hospital, and Government Kilpauk Medical College Hospital (Inclusive of Government Royapettah Hospital) with immediate

Dedicated Deceased Donor Maintenance Unit





Jeevandan Cadaver Transplantation Programme Donating Life

What do we have?

GOVERNMENT OF ANDHRA PRADESH <u>ABSTRACT</u>

HM&FW Dept. – The Andhra Pradesh Transplantation of Human Organs Act, 1995 and the Andhra Pradesh Transplantation of Human Organs Rules, 1995 – Cadaver Transplantation Advisory Committee – Report approved – Jeevandan Scheme Orders – Issued.

HEALTH, MEDICAL & FAMILY WELFARE (M1) DEPARTMENT

G.O.Ms.No. 184

Dated: 16-08-2010.

Read the following: -

G.O.Ms.No.107, HM&FW (M1) Department, dated: 18-03-1995.
 G.O.Rt.No.1462, HM&FW(M1) Department, dated: 11.11.2009

<<0>>>

<u>ORDER</u>: -

Parliament had enacted the Human Organs Transplantation Act, 1994 with the objective of promoting and regulating the transplantation of human organs like kidney, liver and heart - both live as well as cadaver. The Legislative Assembly of Andhra Pradesh had also adopted the aforesaid Central Act in the form of Andhra Pradesh Transplantation of Human Organs Act, 1995. The Government of Andhra Pradesh had also framed the "Andhra Pradesh Transplantation of Human Organs Rules 1995",



Jeevandan Cadaver Transplantation Programme

Donating Life

5.2. The CTAC shall comprise of the following members:-

1. Spl. Chief Secretary / Prl. Secretary / Secretary, HM & FW		Chairman
Director, Medical Education		Member
Superintendent, Osmania General Hospital		Member
4. Prof. of Surgical Gastroenterology, Osmania Medical College	e (OM	C).Member
Professor of Nephrology, O.M.C.		Member
Professor of Urology, O.M.C.		Member
Superintendent, Gandhi General Hospital		Member
Professor of Nephrology, Gandhi Medical College		Member
Professor of Urology, KGH, Visakhapatnam.		Member
 Professor of Nephrology, Kurnool Medical College 		Member
 Prof. of Urology/Nephrology, SVIMS, Tirupathi 		Member
12.A representative of an NGO working in the area of		
Organ Transplantation to be nominated by the Govt.		Member
A Senior Police Officer of the rank of DIG or above		
to be nominated by the DGP		Member
Director, Nizam's Institute of Medical Sciences, Hyderabad.	Me	ember-Convener



Jeevandan Cadaver Transplantation Programme Donating Life

6.2. Composition of AACT:

The composition of AACT shall be as shown below.

(i) Director, Medical Education ... Chairman

(ii) Director, NIMS, Hyderabad .. Co-Chairman

(iii) Chief Transplantation Coordinator Member-Convener

AACT can co-opt another member who is a multi-organ transplantation expert to assist it, subject, however, to the condition that that such a person shall not have any affiliation to any hospital registered as a OTC or NTOHC.



Jeevandan Cadaver Transplantation Programme

Donating Life

11.2. Declaration of brain death:

- (a) The procedure prescribed under Section(3) & (4) of the APTHOA Act, 1995 shall be strictly followed;
- (b) The medical board comprising of the following members shall be constituted by the NTOHC or OTC as the case may be for the declaration of brain death, in each case:
 - (i) Medical Superintendent of the Hospital
 - (ii) An independent Registered Medical Practitioner, i.e. Post graduate with 5 years post PG experience (Physician / Surgeon / Intensivist) (specialist to be nominated by the Medical Superintendent of the Hospital from the panel of names approved by the AACT)
 - (iii) A Neurologist or Neurosurgeon (to be nominated by the Medical Superintendent of the Hospital from the panel of names approved by the AACT)
 - (iv) The doctor on-duty treating the patient



Jeevandan Cadaver Transplantation Programme Donating Life





Jeevandan

Organ Allocation Registry

www.jeevandan.gov.in



https://twitter.com/Jeevanda



		(313)
DonorCou	nt	
1	Aayush Hospitals	2
1	Andhra Hospital	2
1	Guntur City Hospital	3
1	Nikhil Hospital	3
1	Sunshine Hospital	3
1	Manipal Hospital	4
1	Care Hospital,	4
1	Care Hospital	5
1	NRI General Hospital	6
1	Mediciti Hospital	7
1	Continental Hospitals	8
1	OGH	8
1	Care Hospitals	10
1	Care Hospitals	11
1	Yashoda Hospital	14
1	NIMS	15
1	Kamineni Hospitals	22
1	Global Hospital	23
1	Yashoda Hospital	45
1	Aware Global Hospital	49
1	Yashoda Hospital	56
1	Apollo Hospitals	96
2	KIMS	97
2	Total	521
2		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 Andhra Hospital 1 Guntur City Hospital 1 Nikhil Hospital 1 Sunshine Hospital 1 Manipal Hospital 1 Care Hospital 1 NRI General Hospital 1 Mediciti Hospital 1 Continental Hospitals 1 Care Hospitals 1 Care Hospitals 1 Mediciti Hospital 1 Continental Hospitals 1 Care Hospitals 1 OGH 1 Care Hospitals 1 Hospitals 1 Care Hospitals 2 Care Hospitals 3 Care Hospitals 4

Organ Transport:



99			
B 100		yimages	
	Hindust	an Times	
483375470			

Organ	Accepted CIT Hours
Heart	3-4
Lung	3-5
Liver	<24
Kidney (CS)	24-36
Kidney (MP)	72
Pancreas	12-24
Intestine	6

Jeevandan Deceased Donor Organ allocation

Registered Recipients: 0.1 score per months

Dialysis Score

: 0.1 Per month from the initiation of dialysis

Identical Age Group (+10 of donor age): 2 will be added

Age Score

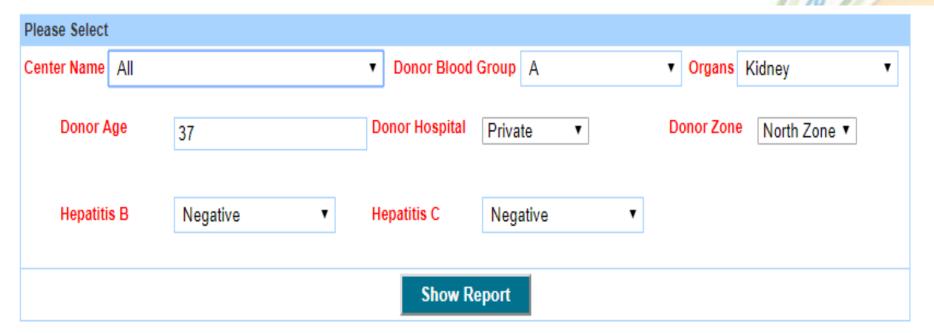
- 1. 3-5 Years 3 points
- 2. 6-10 years 2 points
- 3. 11-45 years 1 point

Fistula Failure- For each fistula 0.5 will be added



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Kidney Organ Waitlist





<u>kample of Priority</u>

IdenticalAgeGroupScore - 2



Organ Waiting List - (This is a Priority List only)





Jeevandan Cadaver Transplantation Programme Donating Life

Waiting List for Organ - Kidney

Center Name :Nizam's Institute of Medical Sciences Donor Blood Group: A

Hepatitis B: Negative Donor Age: 37

As per the criteria specified by Sub Committe - Kidney , AACT : State - Multi Organ - Blood Group - Score - Registered Date

Score: AV Failure Score + Synthetic Graft Failure Score + Dialysis Score + Primary Graft Failure Score + DateofRegistration Score + Previous KidneyDonor Score + Age Score + Identical AgeGroup Score

s.NO	Recipient Name	Blood Group	Age	Required Organs	State	Address	Contact No	Score	Registered Date
	28536000200317 / Sunitha Natuva	А	37	Kidney	ANDHRA PRADESH	H.No.57/48-Ab-1,ramarao gate,Kurnool,Andhrapradesh , Kurnool	9885666504	12.5	Jan 28 2016 12:00AM
	AVFailureScore - 1 , synt IdenticalAgeGroupScore		FailureS	core - 0 , DialysisSco	re - 3.2 , Primary	GraftFailureScore - 3 , RegistrationScore - 2.3 , F	PreviousKidneyD	onorScor	e - 0 , AgeScore - 1
!	28536000200374 / Raju Poonam	Α	45	Kidney	TELANGANA	2-5-49,Ram Gopal Pet,Nallagutta,Secunderabad,Hyderabad- 500003, Hyderabad	7207761135	10.6	May 21 2016 12:00AM
			FailureS	core - 0 , DialysisSco	re - 6.7 , Primary	GraftFailureScore - 0 , RegistrationScore - 1.9 , F	PreviousKidneyD	onorScor	e - 0 , AgeScore -
	IdenticalAgeGroupScore	- 2							
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Common Pool Liver allotment

Liver Organ Can Be allotted in Rota System Jeevandan Jeevandan Has 11 Registered hospitals

Liver Rota Sequence

Krishna Institute of Medical Sciences
Global Hospital
Max Cure Mediciti Hospital
Asian Institute of
Gastroenterology
Apollo Hospitals
Continental Hospitals
Osmania General Hospital

Nizam's Institute of Medical Sciences Sai Vani Super speciality Hospital Care Hospitals Yashoda Hospital

Secunderahad

Making transplants accessible to poor

It is now possible to have free transplant surgeries at all three State-run tertiary hospitals
— NIMS, OGH, Gandhi Hospital — for needy patients

M. SAI GOPAL

Ever since the launch of Jeevandan organ donation scheme in January 2013, over 90 per cent of the organ transplantations in Telangana have taken place in private hospitals. While the typical cost of a kidney transplant is between Rs 5 lakh and Rs 7 lakh, the liver transplant surgery costs nothing less than Rs 20 lakh.

transplant surgery costs nothing less than Rs 20 lakh.

The high costs of transplant surgeries meant that patients in the lower and middle-income bracket did not have access to such hi-tech surgeries. There was a clear disparity, as those who could afford treatment at corporate hospitals opted for transplantation.

While others were left to raise funds by different means, including taking loans from private moneylenders at a high-interest rate. High transplant cost coupled with the reluctance of government hospitals to step up and conduct transplant surgeries had taken away the option of organ transplantation for poor patients in the State.



Despite challenges, we have continued to conduct livingrelated kidney transplants and even cadaver kidney transplants free of cost to poor patients

— DR B NAGENDER.
Superintendent, OGH

For instance, out of 434 organs, which were taken up for transplantation between January and December of 2017, only 22 were done at State-run hospitals i.e. NIMS and Osmania General Hospital.

Acknowledging these disparities, the health authorities introduced a series of measures to strengthen transplant services at government hospitals. It is now possible to have free transplant surgeries at all three State-run tertiary hospitals (NIMS, OGH, Gandhi Hospital) for needy patients.

Despite challenges in infrastructure, live liver transplant surgeries and caliver kidney donations are well developed at OGH. In e., since the 1980s, the State-run tertiary hospital managed to conduct over 660 living-related kidney trasplantations and nearly 34 cadaver organ donatios.

were the first in the country to conduct free kidney transplantation in a government hospital in 1982. Despite challenges, we have continued to conduct living-related kidney transplants and even cadaves kidney transplants free of cost to poor patients," says Superintendent, OGH, Dr B Nagender. As far as kidney transplants are concerned, the Nizam's Institute of Medical Sciences (NIMS) has remained at the forefront with over 1,000 kidney transplant surgeries. The kidney transplant protocols at NIMS are highly evolved, which is why recently the department received the status of "Sister Renal Centre' from International Society of Nephrology (ISN).

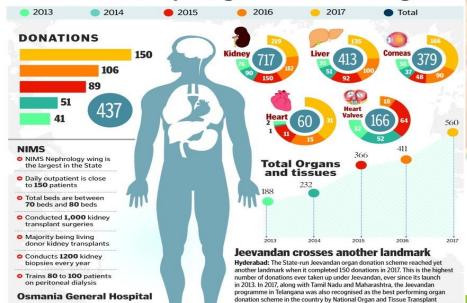
Gandhi to turn into a transplantation hub

In the coming months, Gandhi Hospital is all set to become a transplantation hub with an ability to take up kidney, liver and heart transplantations on a regular basis. The State government has given its nod to construct a centralised operation theatre block at a cost of Rs 33 crore. Authorities are setting up anywhere between five and six hi-tech modular operation theatres that will allow surgeons to conduct simultaneous multiple organ transplants. Already, the surgeons from Nephrology, Urology and Anaesthesia have successfully conducted three cadaver kidney transplant surgeries for poor patients in the last one month.

"We are hoping to conduct our first liver transplant this month. We have put in place a team that will oversee all the transplant surgeries. We have definitely made a start and we are keen on continuing with it," says Superintendent, Gandhi Hospital, Dr P Sravan Kumar.



Year-wise break up of organ donations in Telangana



Organisation (NOTTO), Ministry of Health and Family Welfare. The 150 donations

in 2017 enabled the Jeevandan officials to collect 560 organs this year while last

year the Jeevandan completed 106 donations and collected 411 donor organs.

which includes kidney, heart, liver, heart valves, cornea, lungs and pancreas

Hyderabad Main Page No. 2 Jan 02, 2018 Powered by: erelego.com

kidney

transplants

34

Kidney transplants: 600

transplants: 12

Haemodialysis

patients per

Stories of Organ Transplan

Success

101 and counting: Mother of twins gives life in death |



Hyderabad: The state-run Jeed the 100-mark in 2016 after relatives of 22-year-old N inga gave consent for her orhe was declared brain dead

Ganga, a mother of twins, gans will be harvested this ve age in Wanaparthy district, she delivered healthy twins hrough a C-section at a hospital in Kurnool on December 14 ut developed complications. slater and was declared brain day Heragriculturist bushand lenngonal Reddy gave consent harvest two kidneys and liver on the sameday "My twin babi s, a male and female, may have ost their mother, but I wanted

tients get a new lease of life"

The remaining seven donors hailed from Karnataka, Maha-

rashtra and Andhra Pradesh. "Unlike kin of patients 3 cult to convince urban, highlyeducated and elite families to tion when one of their family ad by treating doctors," said Dr GSwarnalatha, coordinator of

still left this year, this is the best performance for Jeevandan in its four-year track record. Its 2015 and 101 in 2016. The 100th ran 49 a school teacher who aid Reddy "I do not know the was declared brain dead on Denames of the three recipients cember 18 after a head injury.

wo organ donor ew lease of life

yderabad: Two organ dor addam Lavanya, 36, reside. gtyal district, and S Padma sident of Karimnagar distr. ere declared brain-dead at ospitals, gave a new lease of ven patients.

ne two were undergoing trea Apollo Hospital and Nizam' stitute of Medical Sciences spectively. Their condition teriorated and they were de ain-dead by treating

eurosurgeons. bsequently, their relatives ithorised Jeevandan to harve eir kidneys, livers and heart t daver transplants. TNN



5 organs retrieved from 55-year-old

CITY BUREAU

Hyderabad

Relatives of a 55-year-old Bandi Padma, who was declared brain dead by attending neuro-physicians of Aware Global Hospitals, LB Nagar on Monday, have decided to donate her organs under the State-run Jeevandan organ donation scheme.

On Sunday, Bandi Mallaiah and wife Bandi Padma were returning to their native Rampur village of Warangal district. Mallaih lost control of the bike near a speed breaker and both of

Bandi Padma

The neurosurg tors said Padma would Prashanth brain d never recover fully from the ich his father, Mr S , agreed to donate head injury.

neys and liver to The transplant co-ordinaan scheme.

JU-year-old's ool far organs donated re har

Hyderabad: The family of Madanu Sagar Kumar, 30, a resident of Kunoor village, Bhongir, donated his organs to Jeevandan two days after he was

MLA pledges organs under Jeevandan **D DONATES**

Jeevan Reddy of TRS wins accolades

SPECIAL CORRESPONDENT HYDERABAD

GANS OF

AD SON

PRRESPONDENT

ABAD, MARCH 4

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Telangana Rashtra Samithi MLA A. Jeevan Reddy won a pat from Health Minister Laxma Reddy for pledging his organs under the Jeevandan programme.

Mr. Jeevan Reddy raised the question in the Assembly here on Friday during the Question Hour, in response to the programme to promote cadaver organ donations in the State. Due to lack of facilities in the district centres, organ donations could not be promoted.



He disclosed that he had pledged his organs under the Jeevandan, and emphasised that awareness should be generated among people in all districts. Another TRS MLA. D. Chinnaiah, said that because of superstitions



Jeevan Reddy

many do not come forward to donate organs. One brain dead person could donate seven organs and give life to seven persons.

In all the district hospitals, awareness should be created on the importance of organ donation, he said. Dr. Laxma Reddy, appreciating Jeevan Reddy's gesture, appealed to all the MLAs to create awareness about the Jeevandan scheme in their constituencies.

He said organ transplant surgeries were conducted in Osmania Hospital and Gandhi Hospitals in the city.

Liver transplant saves sexagenarian

ROHIT P.S.

After being counselled,

ll organs retrieved from three brain dead person.

CITY BUREAU Hvderabad

Relatives of three persons who were declared brain dead agreed to donate organs of the deceased under State-run Jeevandan organ donation scheme. In all, the three donations led to retrieval of 11 donor organs, which were sent to various hospitals in Hyderabad for

transplantation. On Sunday, 38-year-old E

and the consent to donate was given by wife E Venkata Rajeshwari and brother E Balaji. The surgeons retrieved two kidneys, a liver, and two corneas for transplantation.

for the his family members

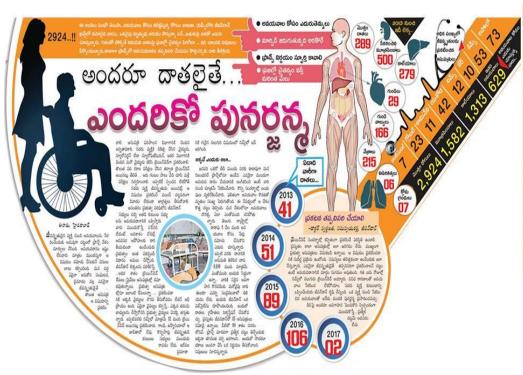
Falls to death

A 55-year-old housewife Ramanjunamma, from Kalapuram village, Anantapur district, slipped and fell down at her house team retrieved a kidney, Jeevandan officials said.

Bike mishap

On Friday, Kalavela Sampath, a 30-year-old farmer and a resident of Kothapalli, Karimnagar district, was travelling on his twowheeler when his bike skid and he suffered serious head

injuries. He was shifted to a local hospital and later to Karimnagar Government Hospital



ఇద్దలకి జన్హనిచ్చి..! మరో ముగ్గులకి పునర్జన్హనిచ్చి..!!

ఆంధ్రజ్యోతి, హైదరాబాద్సిటీ: ఇద్దరికి జన్మనిచ్చి... మరో ముగ్మరికి ప్రనర్జన్మ ఇచ్చి తనువు చాలించింది ఆ ఇలాలు. నవమోసాలు మోసీ ఇదరికి... అవయవదానంతో ముగురికి ఆ మహిళ ఊపిరినిచ్చింది. మహబూబ్నగర్ జిల్లా మనిగిళ్ల ఎన్.గంగ(22), భర వేణగోపాల్రెడి వ్వవసాయం చేసుకుని జీవిస్తున్నారు. గంగకు పురిటి నొప్పులు రావడంతో సానికంగా ఉన్న స్థావేట్ ఆస్పతిలో చేర్చించారు. ఈ నెల 14న గంగ కవలలకు జన్మనిచింది. మగ ఆడ శిశువులు జన్నించారు. మొదటికాన్పులోనే ఇదరు పుటడంతో దంపతులు సంతోష పడ్డారు. ఆ ఆనందాన్ని బంధువులు, స్పేహితులతో పంచుకున్నారు. కానీ వారి సంతోషం నిలువలేదు. స్థాపనించిన రెండు రోజులకే గంగ ఆరోగ్యపరిస్థితి

ఆందోళనకరంగా మారింది. 16న గంగ ఆకస్పాత్మగా కోమాలోకి వెళింది. కుటుంబ సభ్యులు ఆమెను మెరుగైన చికిత్తకు హైదరాబాద్లోని ఓ (ఫైవేట్



- 🎍 ప్రస్తవం అనంతరం కోమాలోకి పెళ్లన బాలింత
- అవయవదానంతో ముగ్తురి జీవితాల్లో వెలుగులు

ఆమె వైద్యులు నిర్మారించారు. నిమ్స్ట్ ట్రాన్ఫ్ పాంటేషన్ เชียางอ์ అవయవదానంపై అవగాహన కర్పించారు. వేణుగోపాలొరెడి అంగీకారంతో గంగ మూతపిండాలు, కాలేయం

సేకరించారు. నిమ్మ్లో ఒకరికి కిడ్బీ మరొక్కరికి కాలేయం మార్చిడి చేశారు. మరో కిడ్పీని ఉస్మానియా ఆస్పత్రిలో బాధితుడికి అమర్చారు

ఆస్పతికి తరలించారు. పరిసితి విషమించడంతో 18న నిమ్-కు

కమిటీ కూడా ఉంటుంది. కమిటీ నిరయం తీసు కున్న తర్వాత జేవన్డాన్ కో ఆరినేటర్ రోగి కుటుంబ నభ్యులకు అవయవదా నంపైన అవగాహన కల్పిస్తారు. ఆస్తి లాంఫనాలు షార్హయిన తర్వా తనే కుటుంబ నభ్యుల అనుమ මත් වංසිවිතර නිතරයට ඒව నుంచి అవయవాలను సేకరి స్వారు. ఒకవైపు రోగి, వారి బంధువులను ప్రోత్రహీ స్తూనే మరోవైప మరణా నంతరం అవయవ మా ర్కిడి టీమ్ ను అన్రమ తంగా ఉందుతారు.

బైయిన్డేడ్ అనగా..

స్రమాధాల్లో తలకు బలమైన గాయాలు తగలడం, ఆరోగ్యవంతు

లైన వారు అకస్పాత్మగా అనారోగ్యానికి గురవడం, బతకడానికి అవకాశం లేని

పరిస్తితుల్లో అవయవాలు డానం చేయవచ్చు. 1998 కన్నా ముందు వరకు ఒక

వ్వక్తి ఊపిరితిత్తులు, గుండె పని చేయడం ఆగిపోయినప్పడే మాత్రమే వారి మర

డాన్ని ద్రువీకరించేవారు. తర్వాత జ్రమంలో పరిస్తితుల్లో మార్పులు వద్చాయి. రోగి నాడీ

వ్యవస్థకు ప్రమాదం ఏర్పడి మొదదు పని తీరు ఆగిపోతే వారిని జ్రెయిన్ఏడిగా ప్రకటిస్తారు.

రోగికి ఎబ్జివరిస్తితులోనైగా మరణం తప్పనినరి బ్రెయిన్డ్ చేగులు అవయవ దానానికి ఆరులు.

వెంటిలేటర్ సహాయంతో లేదా కోమాలో ఉందడం, జెయిన్స్మామ్ పని వేయని వారిని జెయిన్



 ස්ජන් ස්කශාණ් వెలుగులు నింపుతున

ఉంటున్న కొందరు

 బెయినీడెడ్ మరణాలో ఇలాంటి కేసులు

హైదరాబాద్ 🏺 గురువారం 24 ఆగస్సు 2017

• ప్రజల్లో లవగాహన కర్పిస్తున్న జీవనీదాన్

ఇప్పటి వరకు 372 మంది నుంచి 1529 లవయవాల సేకరణ

మరణానంతరం అవయవ మార్కిడి..

రుచూస్తున్న వారి సంఖ్య ద్రమంగా పెరు ప్రవంద వ్యాప్తంగా కారేయం, మ్యూతపించాలు, గుండి, తదితర వ్యాధులతో బాధపరుతున్నవారి గుతోంది. మ్యూతపిందాలు, కాలేయం సంఖ్య క్రమంగా పెరుగుతోంది. ఆహారష్ట్ర అలవాట్కు ఇతర కారణాలతో ఆయా అవయవాలు పూర్తిగా కోసం ఎక్కువ మంది బాధితులు ఎదురు డెబ్బతింటున్నాయి. ఆవయవాలను మార్చిడి చేస్తే జీవన ప్రమాణాన్ని మరికొన్ని రోజులు పెంచవచ్చు చూస్తున్నారు. ఉమ్మడి కాష్టం (2018)లో డేశంలో కొంతే కాలం నుంచి అవయవ మారి-డి జరుగుతోంది. అవయవ మారి-డిపె చజలో అవగా జీవన్డాన్ (మరణాంతరం అవయవ హన లేక చాలా మంది వ్యాధిగ్రస్తులు అవయవ మార్కిడి కోసం ఎదురురూస్తున్నారు. కొంత మందికి మార్చిడి) కార్యక్రమాన్ని అప్పటి ఆవయవమారిండి ఒక కలగానే మిగిలిపోతోంది. ఆవయవాలు దౌరకక పోవదమ్ పరాన ఆదంకిగా ప్రభుత్వం చేపట్టింది. కొన్ని సంవత్సరా లుగా జీవనదానీలో ఎంతో మంది మారుతోంది. విదేశాలతో పోల్పుకుంటే మన దేశంలో అవగాహన చాలా తక్కువ అవయన మార్కిడి చేయాలంటే బ్రెయిన్డెడ్ అయిన వారి నుంచి కుటుంబ నభ్యుల అనుమతి, నిబంధనల సహరం అవ రోగులు అవయవాల కోసం తమ పేర్లను యవాలు సేకరించవము నమోదు చేసుకుంటున్నారు. నిమ్మ్ జీవన్ దాన్ పోన్ నెం. గాండీ, ఉస్పానియాతో పాటు తెలంగాణ అవయవాలు ఇలా సేకలిసారు..

రాష్ట్రంలోని మరో 21కి పైగా అస్పత్తులు జీవన్డాన్లో నహిచై ఉన్నాయి.

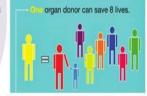
బెయిన్డెత్ లోగి నుంచి ఆవయవాలు తీసిన රෙලර නති නතුරුරු, නති දීමට විධුන www.ieevandan.gov.in లైన వైద్యులు పరిశ్ీలిస్తారు. వాటిన్ నిబంధనల ప్రకారం జ్యాగత్త పరిచి వెంటనే ఆయా అస్వతు

లకు తరలిస్వారు. కొన్ని నంచర్కాల్లో గ్రీన్ థానల్ కూడా ఏర్పాటు చేస్తారు. గుండె, ఊపిరతిత్వలు శ నుంచి 6 గంటలు, కాలేయం 12 నుంచి 30 గంటలు, మ్యూతపిండాలు 48 గంటలు, కోమ గ్రంథి 12 నుంచి 24 గంటల మధ్య సమయం ఉంటుంది. ఆ సమయంలోనే ఆస్వతికి తరలించి ఆమరా-లి.

ఎలా దానం చేయారి..

అవయవాలు కావార్సిన వారు నిమ్స్ అస్పతిలోని జీవన్డాన్ కేంద్రంలో తమ పేర్ను నమోదు చేసుకోవాలి. అక్కడ దోనార్ కార్లు దోరుకుతుంది. తమ పేరు, రిరునామా, సెల్ ఫోన్ నంబరు, బ్లడ్మోగాపు నమోదు చేసుకోవాలి. ఏ అవయవం అవనరమో అందులో పొందువరరాల్, ఆరోగంగీ కింద ఆరులైన పారికి ఉచితంగాను, మిగతా పారు సేవేలు రెల్లిండాల్స్ ఉంటుంది. ఎక్కడ పేరు నమోదు చేసుకున్నా మోడల్ కేండ్రానికి ఆ డెడ్గా పరిగజిస్తారు. ఒక వ్యక్తి బ్రెయిన్డిడ్ ఆది నిర్మారించడానికి ప్రత్యేకంగా నలుగురు వైద్యులతో సమాచారం చేరుతుంది. జీవన్ దాన్ పోన్ నం. 040-23489494 నంబరులో

(పంజాగుట)



- బైయిన్డెడ్ అయిన వ్యక్తుల నుంచి 1,529 అవయవాలను సేకరించారు
- వాటిలో మూత్రపించాలు 829, కాలేయం 357, riod 47, riod saveren 166, sod තරුණත 315, සංඛර්මණුත 8, එලෙස්
- ఇప్పటి వరకు 3,800 మందికి పైగా రోగులు ఆవయవాల కోసం తమ పేరను నహిదు వేసుకున్నారు.
- మ్యూత పిందాల కోసం 2,025 నుంది కాలేయం కోసం 1,716 మంది ఎదురు
- 2013♂ 41 మంద, 2014♂ 51, 2015♂ 8 2016ේ 106, 2017ේ ඉන්කි ජරක 85
- మంది తమ అవయవాలను దానం చేశారు. 2013లో 41 మంది దాతల నుంచి 188 ಅವಯವಾಲಾ, 2014ರ್ 52 ಮಂದಿ ನುಂದಿ 232, 2015లో 89 మంది నుంచి 366 2016లో 106 మంది నుంచి 411, 2017లో

ఇప్పటి వరకు 85 మంది నుంచి 332 అవ

యవాలను సేకరించారు. ఈ సంవత్సరం జనవరి నెలలో 11 మంది పిల్లపరిలో 13, మార్చిలో 14, ఏప్రిల్లో 15 మేలో 11. జూన్లో 15. జూలెలో అరుగురు అవయవాలను దానం చేశారు.

దాతలు ముందుకు రావాలి..

అవయవాల కోసం ఎదురుచూస్తున్నవారు పేల సంఖలో ఉన్నారు. దాతలు మాత్రం రా లా తక్కువ ఆవయవదానంపై ప్రజల్లో అవగా హన కల్లించడానికి వివిధ కార్యకమాలను నిర్వహిస్తున్నాం. ప్రతి సంవత్సరం ఆగస్టు 2వ వారంలో అవగాహన కార్యకమాలు, నవంబర్ 27. 28 తేదీలో జాతీయ అవయవడానం దినో త్వవం నిర్వహిస్తున్నాం. అవయవడానం చేసిన వారి కుటుంబ సభ్యులను, ఆవయవాలన పొందిన పారిని సమావేశ పరుస్తున్నాం. పారి అనుభవాలను తెలుపుతున్నారు. వివిధ కార్య మాలను కూడా చేపడుతున్నాం. ఆవయవాల డానం చేయాలని అనుకునేవారు. కావాశ్

అనుకునేవారు తమ పేర్లను నమోదు రేసు కోవర్సు ముందుగా ఎవరైతే పేర్లు నహిదు దేసుకుంటాలో వారికే ఆవయవాలను అందజే యదం జరుగుతుంది.

-డాక్టర్ జి.స్వర్థలత, ఇన్రదార్థి జీవన్దాన్

පරලින්§ම Wed, 21 December 2010 epaper.andhrajyothy.com//c/15540816

Public Awareness

- 1. Awareness programs conducted in various sectors eg. Schools, Colleges, Marathons.
- 2. CME Programs













Jeevandan







Transplant Coordinator Training Programme Coordinator Training Programme Programme Programme Programme

Jeevandan
Cadaver Transplantation
Programme
Government Of Telangana

Ground floor, Specialty Block NIMS Hospital , Panjagutta, Hyderabad

Email: ctcjeevandan-ts@nic.in, Jeevandan.telangana@gmail.com Ph.no:040-2348 9494, 8885060093 web site: www.ieevandan.gov.in

Course objective:

Jeevandan is a cadaver Transplantation programme of Government of Telangana. Transplant coordinators play a key role in successful cadaver transplantation programme. Jeevandan in association with Osmania General Hospital has started the training programme for Transplant Coordinators in the years 2015. The 3rd batch of training is starting in October 2017

Chairman of Coordinator Committee:

Superintendent of Osmania General Hospital

Convener: Dr. Manisha Sahay Professor and Head,

Nephrology, OGH.

Co Convener: Dr. Kiranmai Ismail, I/c Professor, Nephrology, OGH

Total No of Seats: Maximum 100 seats per year Duration of Course:

- 1. 1 year course
 - 2. One session per month
 - 3. Each session contain 5 classes

Course Material:

Soft Copies of Teaching material ,Guide book of Transplant coordinators, Hand book of Transplantation and THOA act ,rules and amendments

Qualification:

Any graduate from recognized system of medicine/ Nurse/ any bachelor degree in any science degree/ in social work / psychiatry / sociology / social science / public health

Registration fee:

Candidates should have to pay Rs. 1000/- in the form of Demand Draft drawn in favour of "O.G.H. Cadaver Transplant A/C" payable at Hyderabad.

Selection:

Faculty

On submission of application. If more than 100 application are received, selection will be made by conducting entrance exam of 25 marks on multiple choice

Syllabus : Annexure I

: Annexure II

Internship:

- A. Practical Training in any of the Hospitals registered under Jeevandan.
- B. To attend minimum 5 brain dead donation and 5 cases on Organ Transplantation

Project:

Project submission on the concept of Organ Donation or paper presentation in any of national or state conferences

Examination:

Total: 100 marks

Theory	50 Marks
Short notes	15*2=30
Multiple choice	10 Marks
Fill in the blanks	10 Marks
Practical	50 Marks

Issue of Certificate:

Certificate shall be Issued after completing of course and fulfilling the following conditions

- 1. Attendance should have minimum 80%
- 2. Paper presentation
- 3. Intern ship: To attend minimum 5 Brain dead cases and 5 transplant cases
- 4. Pass marks in Examination Minimum 50

Registration Process:

Submit your filled in application with all necessary documents on or before 15/11/2017 to Jeevandan Office. For further details please contact Jeevandan office.



Transplant

Coordinator

Training

Certificate

distribution



Donor Felicitation Programme















Jeevandan





Donor condolence Programme

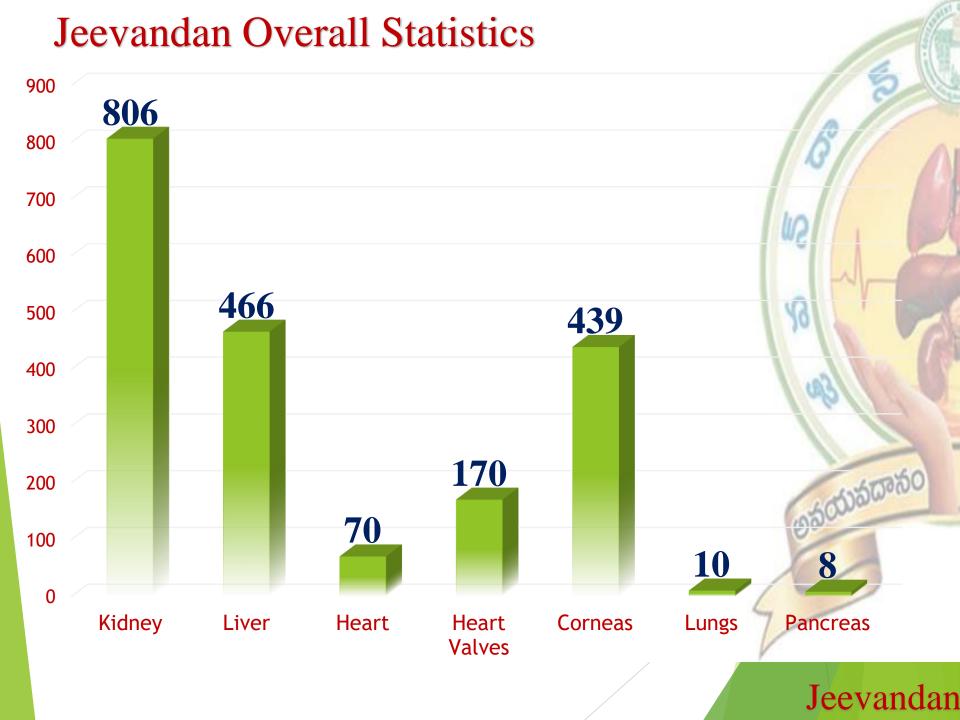








මන්ಯන්ධමන්ට



Year Wise donations

Year	Donations
2013	41
2014	51
2015	89
2016	106
2017	150
2018	63
Total	502



Donation rate of Jeevandan in 2016: 3.01 Donation/million Donation rate of Jeevandan in 2017: 4.26 Donation/million

Donation rate of Jeevandan in 20178 up to date: 5.25 Donation/million

About Jeevandan in 10th Class

from brain dead patients. The process of transplantation of organs from brain dead patients to another is called cadaver transplantation. If you are willing to donate organs and get organs. Those who need organs must register their names in transplantation facility hospitals. Those who are willing to donate their organs have to sign in an application form at transplantation facility hospital. Some voluntary organisation also working on this corner.

Collect information about voluntary organisation for organ donation and make a report on them.

There is very less awareness among people about organ donation. Society needs much awareness in organ donation, so that we can save many lives who are in need of different organs for their survival. Instead of living in their memories, let them live in others for one more life. We must show humanity, after all we are humans.

We can live even after death

Five organs of 18 year old youth donated

Dc correspondent, Hyderabad, 20 June 2013

Five organs of 18 year old H.S. YASWANTH KUMAR were donated by his father H V Shiva kumar to the organ donation wing of jeevandan scheme on Thursday. Yaswanth had met an accident

on June 15 while he was travelling in a shared Autorikshaw from Jagadgirigutta. He was rushed to Nizam Institute of Medical Sciences (NIMS). The Nuero surgeons at NIMS declared him brain dead. Jeevandan counsellors obtained the

consent of Mr. Shiva kumar, who agreed to donate Yaswanth's kidneys, two heart valves, liver. These organs were retrieved and sent to various Hospitals for Transplantaion. Dr. Swarnalatha in-charge of Jeevandan scheme, said in a statement. Think how much great yaswanth's parents are?

Other path ways of excretion (accessory excretory organs)

You have learnt about kidney, chief excretory organ of our body. What are the other excretory organs of human body? Lungs, skin, liver have their own specific functions but carry out excretion as a secondary function.



Jeevandan

Jeevandan Got One of the best State in Cadaver Donations from NOTTO



Jeevandan web site got Smart Governance Skoch award













Cadaver Transplant - Conclusion

Organ Shortage is a Crisis, however the Crisis has a Cure

- In India we need to Network and start thinking of sharing resources, expertise and organs
- Set up Collaborative projects
- Use Media for Promotion
- Get Religious heads to Participate
- Have Transparency in programme
- Set up regional Transplant co-ordinators Forums
- Social appreciation of donor family.

Success of Cadaver Transplantati Programme



The Loss of one Life could be the Begining of another....

Become an "ORGAN DONOR"

Phone: 040-23489494, Cell: 8885060093, 8885060092, 8885060095, 8885060096

website: www.jeevandan.gov.in

facebook: www.facebook.com/jeevandants

contact address: Jeevandan Office, Speciality Block, NIMS Hospital, Punjagutta, Hyderabad.





THANK YOU!!