## FORM 7

## FOR ORGAN OR TISSUE PLEDGING

(To be filled by individual of age 18 year or above)  $[Refer\ rule\ 5(4)(a)]$ 

## ORGAN(S) AND TISSUE(S) DONOR FORM

(To be filled in triplicate)

		or Registry)
		S/o,D/o,W/o
in the pr	resence of persons mentioned below hereby un	resident of requivocally authorise the removal of following organ(s) and/or tissue(s), from my body after experts and consent to donate the same for therapeutic purposes.
Please ti	ck as applicable	
		(Following tissues can also be donated after brain stem death as well as cardiac death)
	Heart	Corneas/Eye Balls
	Lungs	Skin
	Kidneys	Bones
	Liver	Heart Valves
	Pancreas	Blood Vessels
	Any Other Organ (Pl. specify)	Any other Tissue (Pl. specify)
	All Organs	All Tissues
	My blood group is (if known)	
		Signature of Pledger
		Address for correspondence
		Telephone No
		Email:
		Dated:
		ne copy of the pledge will be retained by pledger, one by the institution where pledge is made nall be sent to the nodal networking organisation.)
and a na	rd copy signed by piedger and two witnesses si	ian be sent to the nodal networking organisation.)
(Signatu 1.	re of Witness 1)	S/o,D/o,W/oagedresident
1.		Telephone No
		Telephone No.
(Signatu	re of Witness 2)	
2.	Shri/Smt./Km	S/o,D/o,W/o aged resident Telephone No
		is a near relative to the donor as
Dated		
Note:		
	<ol> <li>Organ donation is a family decision. Therefore</li> </ol>	ore, it is important that you discuss your decision with family members and loved ones so that

- Organ donation is a family decision. Therefore, it is important that you discuss your decision with family members and loved ones so that
  it will be easier for them to follow through with your wishes.
- (ii) One copy of the pledge form/pledge card to be with respective networking organisation, one copy to be retained by institution where the pledge is made and one copy to be handed over to the pledger.
- (iii) The person making the pledge has the option to withdraw the pledge.