



सत्यमेव जयते

Standards of EYE BANKING in India 2020



NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS & VISUAL IMPAIRMENT

Directorate General of Health Services

Ministry of Health & Family Welfare

Government of India

New Delhi-110108

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राष्ट्रीय स्वास्थ्य मिशन

Eye Banking Standards of India 2020

We are thankful to the following people for their time and effort in making this a joint review document on Indian Eye Banking Standards.

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दिनांक/Dated..... 24 June 20

FOREWORD

I am happy to announce that the Manual on "Standards of Eye Banking in India", published by National Programme for Control of Blindness and Visual Impairment [NPCBVI], Directorate General of Health Services, Ministry of Health and Family Welfare, New Delhi in 2009 has now been revised and is being published as a new module on "Standards of Eye Banking in India, 2020" so as to establish & communicate quality standards to all stake holders involved at various level of eye banking and Eye Donation services.

With the help of this revised guideline, beyond 12th five-year plan period of NPCBVI (2017-20), a new thrust and vigor will be infused for improvement in eye donation, collection, processing, maintenance of quality standards, equitable distribution of the scarce corneal tissue, strengthening of institutional capacity for undertaking corneal transplantation, community awareness and training of health personnel.

I hope that the valuable information given in the revised module will guide the programme managers, eye surgeons, and NGOs in establishing, strengthening, maintaining and delivering highest level of quality services in eye banking activities, both in private and public institutions.

I appreciate the efforts & contributions of the entire team from governmental and non-governmental sector efficiently led by Dr. Promila Gupta, Principal Consultant, in producing this visionary document.

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FOREWORD

Over the last three decades, the country has seen a phenomenal rise in socio-economic, industrial, information-technology, infrastructural development fields, with far reaching consequences on health. This development has helped the Eye Care Health Delivery System tremendously. We have reached a very commendable stage of Cataract Surgical Rate and the momentum thus generated would continue in future also. In this context, National Programme for Control of Blindness and Visual Impairment [NPCBVI] has taken a lead in addressing other causes of avoidable blindness as well in a comprehensive manner.

Corneal blindness has now emerged as the second most common cause of blindness (7.4%) in our country. Thus the focus has also to be shifted to prevention of corneal blindness as well as obtaining healthy and optical qualities corneas from the deceased persons. Eye banking activities become a critical component and pillar for managing corneal blindness wherein infrastructure, human resource, logistics & service delivery should match international quality standards and the needs of patients in an effective and efficient manner, as the demand for the corneal tissue outweighs the supply.

In order to implement the plan as per current scenario the revision of Eye Banking Standard manual felt essential. Though it has taken a long time in being revised and added, the final version quit comprehensive and incorporates the precautions against the latest menace of COVID 19 infections. It would not have been possible without constant support and inputs from Prof. Atul Kumar, Chief Dr. RP Centre, AIIMS, New Delhi, Dr. Radhika Tandon, Dr. Namrata Sharma and the members of the screening and executive committee for revising these standards and the staff of NPCBVI Division. I am also grateful to Dr. Rajiv Garg, DGHS who was a source of constant guidance and encouragement for this initiative.


Dr. Promila Gupta

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Introduction and Purpose

1.1 Scope

These standards are intended to apply to any and all of the eye banks and Eye Retrieval/ Donation Centers (ERCs) with reference to their essential Manpower, functions and equipment. They also include other technical guidelines with respect to the following:

1. Corneal Donor screening and eligibility determination
2. Cornea/ Eyeball Retrieval
3. Processing and Storage of corneal tissue
4. Corneal tissue evaluation
5. Distribution of Corneal Tissue (algorithm for distribution, as per NOTTO guidelines)



Eye Banking Systems

2.1 General

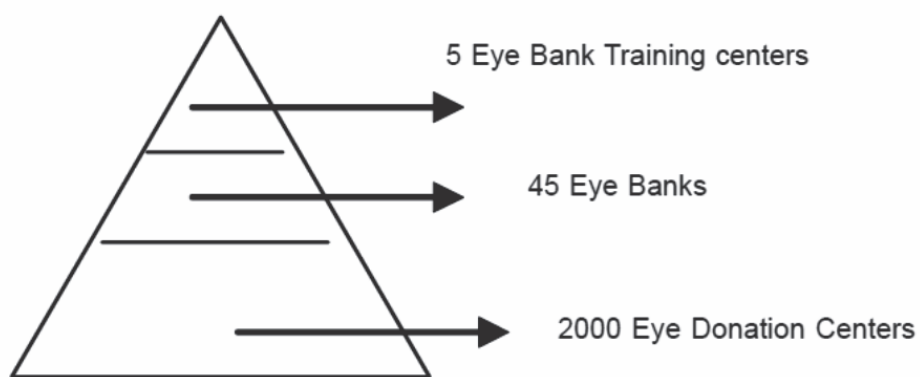
Eye Banking is a system of Collection (harvesting) of Corneas/Eyeballs from Cadaveric or Brain Dead persons, their storage, processing and distribution to Corneal Graft Surgeons in a timely and efficiently coordinated manner.

For an efficient eye banking system, a three tier organization structure has been recommended. At the top of the pyramid is the Eye Bank Training Center followed by Eye Banks and at the base of the pyramid is the eye retrieval/Donation center. Activities, responsibilities, manpower required for each of the above viz., Eye Bank Training Center (EBTC), Eye Bank (EB) and Eye Retrieval Center (ERC) have been dealt in detail under Part 3

2.2 Objective

The objective of this section is to standardize all non-technical activities of eye banking like administration, awareness and Human Resource development so that management becomes simple. This section also clearly defines the ideal and preferred eye banking system and lays down specific responsibilities and scope of each of the component of the eye banking system.

For efficient functioning of eye banking system, a three tier structure should be developed. At the top are Eye Bank Training Centers, preferably situated in every RIO, followed by eye banks in major medical colleges and/or tertiary Eye Care Centers. These eye banks and eye bank training centers should be networked with eye donation/retrieval centers. All large hospitals in metros with mortality rate of more than 50 per month (1-2 per day) should be set up as donation/retrieval centers and linked to the nearest eye bank. A tentative model is depicted below



In developing countries such as India, one has to develop a system that is effective, efficient and financially relevant. A 3-tier structure encompassing all activities of eye banking will address this issue rather well and the determinants will be the infrastructure and manpower available with a profile of functions covered.

2.3 Eye Retrieval Center (ERC)

Eye Retrieval Center has to be affiliated to a registered eye bank, and should provide the following services:

- (1) Public and professional awareness about eye donation
- (2) Co-ordination with donor families and hospital patients to motivate them eye donation
- (3) Harvesting corneal tissue (from the community and the hospital where they are based) along with collection of blood from the Cadaver, for serology
- (4) Safe storage and transportation of tissue to the parent eye bank.

2.4 Eye Bank (EB) is an institution that should

Provide a round-the-clock public response system regarding Eye Donation Queries over the telephone and conduct public awareness programs on eye donation.

Co-ordinate with donor families and hospital patients to motivate eye donation under the Hospital Cornea Retrieval Program (HCRP)

To harvest corneal tissues from Cadavers/Brain dead persons.

To process, preserve and evaluate the collected tissue

To distribute the corneal tissue in an equitable manner for Keratoplasty

To ensure safe transportation of tissue to the Keratoplasty Center.

2.5 Eye Bank Training Centre (EBTC)

All of the eye bank functions plus training for all levels of personnel in eye banking and research.

2.6 Awareness

The main activity of an eye retrieval center, eye bank or eye bank training center is to create awareness about eye donation and also educate public about the need for eye donation. In the present scenario awareness campaigns have to be planned in such a way that the overall objective is achieved. Awareness campaigns can be General awareness campaigns and Focused awareness campaigns.

2.6.1 General Awareness

In general awareness various media like Print, Electronic and Movie are used and the message about eye donation is spread among the general public. This form of awareness though does not yield immediate results, helps in changing the mindset of the people gradually. EBTC, EB and ERCs in all their awareness programs and campaigns should ensure that:

1. Public are educated about magnitude of corneal blindness, cure for corneal blindness and the need for eye donation.
2. Only published statistics of NPCB or EBAI should be quoted so that there is consistency.
3. Education for formalities related to eye donations. Public is educated about precautions to be taken after death and after decision for eye donation is made, till the eye bank team reaches the spot

4. Public are educated that eyes cannot be removed in certain medical contraindications.
5. Families are educated about the need to arrange for death certificate etc before the eye bank team arrives.

2.6.2 Focused Awareness Campaigns (HCRP)

Voluntary eye donation is a result of realization of one's social responsibility towards the corneal blind. However, in moments of grief this realization may not materialize into actual eye donation. Eye donation counselling or grief counselling is a motivational approach whereby the family members of the deceased are directly motivated for an eye donation. This process provides direct access to the family members of the deceased to attempt counselling. Moreover, several advantages follow tissue retrieval from hospitals. Availability of medical history, availability of tissues from younger individuals, reduction in the time interval between death and enucleation / corneal excision and cost effectiveness are some of these. The program also allows the Eye Donation Counsellors to get to know of potential eye donors within the hospital.

Only Eye Banks shall have the Hospital Cornea Retrieval Program. In cases where the hospital is far from the eye bank and is closer to an eye retrieval center, the eye retrieval center shall offer all necessary assistance like retrieve eyes and transport to the eye bank but nevertheless the Eye Donation Counselor shall be under direct control of the eye bank.

Choice of hospital

An important step in the initiation of HCRP is identification of the hospitals to be included in the program. Ideally the hospitals to be chosen are Large multispecialty hospitals with a high mortality rate (3 to 4 per day or more) >3000/year. Medium multispecialty hospitals with moderate mortality rate (of 1 to 2 per day or more) > 2000/year. An automated system of alerting the nearest eye bank/eye donation counselor should be set up to make sure the family of every suitable donor is approached. A mandatory request note should be there to be signed by doctor certifying the death in the hospital that he/she has requested the relatives for eye donation if medically suitable.

2.7 Link between the hospital and the eye bank

The Director of the Eye Bank shall initially meet the Hospital management and sign a memorandum of understanding.

The eye bank Directors or equivalent committee members shall meet the hospital authorities (Administrators, Public Relations Officer, Medical Officer and Nurses) and educate them on the basics of eye banking and the HCRP.

They shall seek permission for the display of publicity materials and posters about eye donation in the wards and patient lounges in the hospitals.

The administrative and medical staff of the hospital shall be requested to cooperate well with the eye donation counsellor (EDC), and provide information regarding the potential eye donor.

The eye bank Directors shall periodically meet the hospital authorities to make enquiries about the progress / problems encountered during counselling and to strengthen the bond between the eye bank and the hospital.

Staff and Training

3.1 General

Eye Bank Training Centers, Eye Banks and Eye Retrieval Centers should have at least the following personnel. Government eye banks should also set up a team within their administrative framework and designate the responsibilities as per the requirements and at the discretion of the head of the hospital or institute as applicable.

Man Power (Staffs)	EBTC	EB	ERC
Board of Directors	Yes	Yes	No
Medical Director and Back Up Medical Director	Yes	Yes	No
In-charge/Director	No	No	Yes
Executive Director/Eye Bank Manager/Equivalent Post	Yes	Yes	No
Eye Bank Technician	Yes (2-3)	Yes (2)	Yes (1)
Eye Donation Counsellor	Yes (2-4)	Yes (2)	Yes
An Eye Bank can designate and delegate multiple responsibilities to a person as appropriate if necessary			

The eye bank training center, eye bank and eye retrieval center should have a HR policy for regular appraisal of performance, in house skill upgrading & training programs, recruitment policies, and incentives for performance and counseling of all personnel.

3.2 Board of Directors

All EBs and EBTCs need to have a board of directors or equivalent committee composed of medical professionals and other professionals who could contribute to the smooth functioning of the organization. In the case of Eye Banks & Eye Bank Training Centers attached to Government hospitals, Director of Eye Hospital, Main Hospital with administrators from Health Department of the State to serve as board of directors

3.3 Executive Director/Eye Bank Manager

The Executive Director/Eye Bank Manager or designated equivalent will be responsible for managing the entire operations of the eye bank. It is the responsibility of the Executive Director to follow the policies of the Board or committee and wherever necessary shall consult the Medical Director/Eye Bank in-charge or other specialists for discharging the responsibilities. This person will be responsible for the day to day functioning of the eye bank and ensure compliance with the set standards. Non-compliance should be noted and brought to the attention of the MD.

3.4 Medical Director

The Medical Director (MD) must be an Ophthalmologist who has completed a corneal fellowship or who has demonstrated expertise in external eye disease, corneal surgery, research

or teaching in cornea and/or external disease or has an experience in corneal transplantation. If the eye bank does not have such a person it should have a consulting relationship with an ophthalmologist who satisfies the above criteria. All policies and procedures of each eye bank shall be under the supervision of the MD.

The MD shall provide all staff members with adequate information to perform their duties safely and completely.

He shall oversee and provide advice on all medical aspects of Eye Bank operations. These include but are not limited to: Formulation, approval, and implementation of medical policies and procedures. Participate in training and supervision of technical staff with regard to tissue procurement, preservation, and evaluation. He shall also participate in the establishment and operation of a quality assurance programme.

The MD may delegate responsibility for tissue procurement, preservation, and tissue evaluation to qualified eye bank personnel; however, he shall ensure that the eye bank operates in compliance with the "Existing Medical Standards". Ultimate responsibility of determining the suitability of donor tissue for transplantation is of the transplant eye surgeon.

The Medical Director shall undergo regular continuing education in Eye Banking and related issue. The eye bank shall provide written documentation of such attendance at the time of the eye bank site inspection. A newly appointed medical director shall attend an eye banking symposium/ training within one year of appointment. An eye bank shall have three months to replace a medical director who has resigned.

3.5 Technical and Non-Technical Staff

3.5.1. Eye Bank Technician

*He/She shall be responsible for the entire activities of eye banking such as retrieval, processing, evaluation, documentation, distribution of tissue and maintenance of the laboratory, instruments and equipment. **He / She shall be Higher Secondary or 12th pass qualified with Science or Higher Secondary education with experience in a diagnostic or similar lab or experience in operation theatre procedures.** He / she shall undergo training and qualify from designated training centers for Eye Bank Technicians. Training locations are defined in the Transplantation of Human Organs and Tissues Rules, 2014, (Published in Gazette of India, 27 March 2014) (2014 THOTA Rules), as a, "registered, authorized, and functional eye bank or government medical college."*

3.5.2. Eye Donation Counselor (EDC)

He/She shall be responsible for counseling the families at Hospitals and coordinate with eye bank and hospital for retrieval of cornea. He/She shall also be responsible for awareness campaigns regarding Eye Donation, both within the hospital and outside the hospital. Trained Eye Bank Technicians trained in counselling can also perform these duties if the situation warrants.

3.5.2. a. Attributes of an Eye Donation Counsellor

The EDC shall be initially told and taught the concept of eye banking through classes comprising of both theory and demonstration. A candidate selected to the post of eye donation counsellor shall be committed to the cause of eye donation.

He/She shall have good communication skill and shall be well conversant with the regional language and shall be dressed professionally (a white apron and an identity card).

The EDC shall initially be posted in the Eye Bank for one week in order to acquaint himself/herself with all aspects of eye bank functioning.

3.5.2 b. Grief counselling techniques

The EDC shall approach the family members of the deceased at an appropriate time. The EDC shall not present the matter in a hurry to the family members. He/she shall wait until the family members are found mentally relaxed. The EDC shall initially introduce himself/herself by name and the eye bank he/she belongs to.

The EDC shall talk to limited family members in an ideal surrounding.

The EDC shall provide comfort, moral support and sympathy to the family members while attempting to motivate them for an eye donation respecting the feelings of the family members.

EDC should listen to the bereaved family members patiently and address the fears and queries raised by the family members (Frequently Asked Questions – Appendix 13).

The EDC should have adequate knowledge about the myths and facts about eye donation (Facts & Myths about Eye Donation – Appendix -14).

The EDC should be aware of the procedure to be followed in Medico-legal cases. It is important that the EDC gets written approval from the police personnel before alerting the eye bank.

The EDC shall assure the family members that there will be no delay caused in making funeral arrangements.

The EDC shall give adequate time for the family members to discuss and decide about eye donation and only suggest eye donation to the family members and not force them to make an eye donation.

3.5.2. c. Alerting the eye bank team

The EDC shall alert the eye bank soon after obtaining consent for eye donation. He/She shall inform the eye bank team where exactly the body is placed so as to enable the team to reach the site without delay. The EDC shall keep a copy of the death certificate ready before the eye bank team reaches the site as it is mandatory to have a death certificate prior to proceeding for corneal excision.

3.5.2. d. Expression of gratitude

The EDC shall express gratitude to the family members of the deceased after obtaining the consent for eye donation as well as after performing corneal excision and even in the absence of obtaining consent for eye donation.

3.5.2. e. Documentation of case reports

On a daily basis, the EDC shall document relevant details of every case approached and motivated during the work period in the form designed for the purpose (HCRP Daily Report – Appendix – 15). The daily reports will be analyzed at the closure of every month and recorded (HCRP Monthly Report – Appendix – 17.)

The eye bank Management have to make arrangements for training the eye donation counsellor on grief counselling techniques.

The eye bank Directors shall periodically verify the records of EDCs and advise the counsellor on improving the counselling techniques.

3.6 Training and Human Resource Development

As per Transplantation of Human Organs and Tissues Rules, 2014, (Published in Gazette of India, 27 March 2014), the definition of a technician includes one who is awarded a training certificate which must indicate that the technician "has acquired the required skills to independently conduct enucleation of the eye or removal of cornea from cadaver."

It is essential that eye bank personnel are abreast of the latest developments in eye banking and corneal transplantation. Each eye bank shall ensure that their personnel are adequately trained and their skills are constantly upgraded.

Eye Bank Technician shall undergo a refresher training module at an eye bank at least once a year.

The Executive Director and / or Eye Bank Manager shall undergo a refresher training module at least once a year.

To attend Annual CME: By rotation, each staff will attend a CME on Eye Banking – once in 3 years to update his/her knowledge.

Training Period for initial recruitment:

EB Technician: Training period-4-8 weeks depending upon the Eye Bank's volume. Each technician should be able to perform – 15 Enucleations and Lab excisions and/or 15 in-situ excisions within the time frame.

Eye Donation Counsellor: On job Training period – 1 month in local language. This training period would include both in-house (1 week) and in the field (3 weeks) training components in following aspects:

Ocular anatomy (Theory & demonstration).

Corneal anatomy and physiology (Theory & demonstration)

Corneal blindness (Theory).

Corneal transplantation (Theory & Video demonstration).

Eye bank and its level of operation (Theory).

Corneal excision (Theory & demonstration).

Grief counselling (Theory).

3.7 Technician Annual Competency

The Eye Bank shall institute and document a competency assessment program for all technical staff performing eye bank functions. The Medical Director or their designated staff trainer is responsible for performing these competency reviews. This program should also include any action to be taken if expected competence was not achieved.

Facilities and Equipment

4.1 General

The Eye Bank or eye retrieval center should have adequate space, equipment, and supplies to perform the required laboratory and tissue transportation services with accuracy, efficiency, asepsis, timeliness and safety.

Documented procedures should be established to maintain all equipment that may affect the safety and/or quality of tissue or reagents (critical equipment).

Each eye bank must have the following equipment and facilities to perform the volume of laboratory services with optimal accuracy, efficiency, sterility, timelines, and safety.

A table illustrating the required infrastructure for eye bank training centres (EBTC), Eye Bank (EB) and Eye Retrieval Centre (ERC) is given below: -

INFRASTRUCTURE	EBTC	EB	ERC
Equipments:			
1. Slit lamp and Specular Microscope for tissue evaluation	Required	Required	Not required
2. Refrigerator for storing donor tissue, blood samples and kits	Required	Required	Required
3. Laminar Flow Hood/Bio hazard cabinet	Required	Required	Not required
4. Autoclave for sterilizing	Required	Required	Not required
5. Retrieval instruments sets	Required	Access	Access
		Required	Required
Serology Lab	Required	Access to accredited testing lab	Not required
Tissue processing lab	Required	Required	Not required
Instrument cleaning lab and storage area	Required	Required	Required

4.2 Refrigerator

Each eye bank laboratory shall have a refrigerator with a device, internal or external for continuously recording temperature. Current temperature shall be monitored and recorded daily and remain within the range appropriate to the stored items. This range shall be specified in the Eye Bank's Standard Operating Procedures (SOP) Manual. The continuous temperature device shall be calibrated against a reference thermometer as defined by the appropriate regulatory agency at least once a year.

Eye Banks shall detail required cleaning intervals and documentation in their Standard Operating Procedures Manual.

In the event of a power failure or malfunction, there shall be provision for immediate notification and action to be taken or an emergency power supply to maintain essential storage temperatures within the range specified.

The refrigerator should be maintained exclusively for use by the eye bank. It must contain clearly defined and labeled areas for all tissues stored (i.e. surgical tissue awaiting distribution/released, quarantined tissue, tissue rejected, tissue for research), and defined areas for non-tissue items (e.g. reagents).

4.3 Laminar Airflow Hood

A HEPA-filtered biohazard safety cabinet used for the processing of eye tissue in the laboratory shall be cleaned before and after each use and at regularly scheduled intervals to prevent cross-contamination. The laminar air flow hood must meet ISO Class 5 standards or documented annually to have less than 25 colony forming units per 90 mm settle plate per one-hour exposure. Calibration, including settle-plate air culturing, must be performed annually.

Tissue must be processed in such a way as to prevent cross-contamination and labeling mix-ups (e.g., tissue from different donors may not be processed simultaneously).

4.4 Slit Lamp

Each eye bank must have routine access to a functioning Slit Lamp with the ability to accurately and adequately evaluate donor corneas. The Slit Lamp shall have variable features including magnification, light-beam width and length, and light intensity. Maintenance, calibration, and cleaning should be as per the manufacturer's recommendations.

4.5 Specular Microscope

Each eye bank laboratory shall have a specular microscope to capture an image of donor cornea endothelium and calculating endothelial cell density. Maintenance, calibration, and cleaning should be as per the manufacturer's recommendations.

4.6 Recovery Instruments

Adequate sterile instruments must be available to provide for aseptic retrieval of whole eye and corneas.

Corneal excision set

1. Drapes, torch, loupe
2. Disposable Syringes (5 ml - 1, 10 ml - 1) with disposable needles (21 G & spinal needle) with 2 test tubes or plain vials to collect blood sample.
3. Conjunctival Scissors
4. Corneal scissors (Right & Left)
5. Fixation forceps
6. Iris forceps
7. Spring or Wire Speculum
8. Bard Parker handle with sterile surgical blade (no. 11 or 15)

Enucleation set

1. Torch
2. Disposable Syringes (5 ml-1, 10 ml - 1) with disposable needles (21 G & spinal needle) with 2 test tubes or plain vials to collect blood sample.
3. Conjunctival Scissors
4. Fixation forceps
5. Artery forceps
6. Muscle hook
7. Enucleating spoon
8. Strabismus Scissor
9. Wire or Spring Speculum
10. Bard Parker Handle with sterile surgical blade (no. 11 or 15)

Cleaning, Packing and Sterilization of Instruments

Instruments must be inspected frequently enough to assure that they function properly, and shall be suitably decontaminated and cleaned prior to sterilization and re-use.

All sterilized instruments, supplies and reagents, such as corneal preservation medium, must contain sterilization dates and expiry dates that are current at all times.

4.7 Eye Bank Laboratory

The laboratory(s) shall be a separate area(s) with limited access in which activities directly related to eye tissue processing are carried out. The laboratory shall have a sink with a drain and running water and a dedicated hand-washing sink. There shall be adequate counter space for processing of donor material. The room including walls, floor and sink must be kept clean. Appropriate documentation of regular laboratory cleaning schedules shall be retained for a minimum of three years.

The Eye Bank laboratory shall have an adequate stable electrical source and a sufficient number of grounded outlets for operating laboratory equipment.

4.8 Equipment Maintenance and Cleaning

The Eye Bank shall:

- a. Identify all critical equipment that may affect tissue safety and/or quality to include a tissue storage refrigerator with a continuous temperature monitoring device, laminar flow hood, recovery instruments, slit lamp, and specular microscope. Optional equipment may include a centrifuge and an autoclave depending on the individual eye banks operations. Eye Retrieval Centers which only perform tissue recovery need only equipment that is relevant for tissue recovery and shipping to a fully-equipped eye bank.
- b. Specify details of the equipment type, unique identification, location, and frequency of checks, check method, acceptance criteria, and the action to be taken when results are unsatisfactory.
- c. Specify cleaning and routine maintenance schedules and procedures for each piece of critical equipment in the appropriate Standard Operating Procedure (SOP).

4.9 Standard Operating Procedures (SOP) Manual

Each eye bank shall maintain its own procedures manual (SOP) that details all aspects of its specific retrieval, processing, testing, storage, distribution and quality assurance practices. Each procedure must be initially approved signed and dated by the Medical director or Officer-in-charge of the eye bank. An annual review of each eye bank's procedures manual with signing and dating by the Medical director or Officer-in-charge is required. Each eye bank must maintain copies of each procedure it uses and the length of time the procedure was in use. The current standards of eye banking document can be used as the procedures manual with a document detailing any deviations or modifications with justification as required.

4.10 Bio-hazardous Waste Disposal

Human tissue and waste items shall be disposed of in such a manner as to minimize any hazard to eye bank personnel and the environment and comply with applicable regulations. Dignified and proper disposal procedures shall be used to obviate recognizable human remains.

4.11 Infection Control and Personnel Safety

Care must be taken that eye bank resources are utilized optimally and eye bank personnel are not exposed to any health hazards. The following guidelines ensure that resources are put to optimum use and that eye bank personnel are not exposed to any health hazards.

All eye bank personnel must operate under the universal precautions for health care workers. These written procedures must be included in the eye bank's procedure manual. All technical personnel should receive Hepatitis B vaccination and any other recommended vaccination that may be announced from time to time.

- a. Maintain appropriate maintenance, certification, monitoring, sterilization, and cleaning records on each piece of critical equipment. These records shall show dates of inspection, performance evaluations and any maintenance procedures or repairs performed. These records shall be kept for a minimum of three years.
- b. Identify the calibration status of critical measuring equipment, and ensure that calibration is performed against a traceable standard.
- c. Ensure that the handling and maintenance of critical equipment is such that the accuracy and fitness for use are maintained.

Consent, Donor Screening and Contraindications

5.1 General

Eye tissues for transplant are almost invariably derived from cadaveric donors; therefore, discussions regarding consent for donation are usually undertaken with the next of kin of a deceased person. Donation of eye tissue cannot proceed unless legal authority to remove tissue is established under the relevant Central and State legislation and regulations. Details of this authority shall be documented in the Standard Operating Procedures (SOP) Manual. In most instances, this authority is obtained by the receiving of informed consent from the potential donor, the donor's next-of-kin, or authorization by a Designated Officer or Forensic Expert (when they are legally in possession of the body).

Obtaining of legal consent prior to eye tissue retrieval is mandatory.

5.2 Consent Documentation

Consent shall be obtained in writing (by a signed Consent Form), as determined by local or national legislation (including, but not limited to 1994 THOA Act, 1995 THOA Rules, and 2014 THOA Rules). In all cases, documentation of the consent shall be made and the consent retained as part of the donor records. A Consent Form shall be maintained in the donor's medical records at the retrieving facility (if applicable to that facility), and a copy retained for inclusion in the donor record at the Eye Bank. Information contained on the Consent Form should follow the requirements of the local, State, or National health authority and shall be defined in the Standard Operating Procedures (SOP) Manual. The exact procedure for obtaining consent will also follow the legal requirement and should be defined in the SOP manual.

5.3 Donor Serologic Testing

This section specifies required serologic tests which must be performed on each donor from which tissue is designated for surgical use. Eye Banks must use a serology testing laboratory, or test kits approved for use by the appropriate authority.

A blood sample from the donor must be tested - this sample may be either:

1. a post-mortem sample drawn as soon as practicable after the time of death, or at the time of tissue recovery, or
2. a pre-mortem sample drawn within 7 days prior to death

A hard copy of serological results shall be received and assessed by the Eye Bank prior to release of tissue designated for surgical use. Eye tissue from the donor may be released for transplantation if the donor's sample is nonreactive when tested for required infectious disease, and all other requirements are met. If the approved testing methodology is only approved for pre-mortem serology samples and no post mortem testing kits are approved for use, these pre-mortem test kits may be utilized for testing cadaveric samples.

Minimum Testing: Blood (serum or plasma) must test non-reactive to the following **required** infectious diseases:

1. Human Immunodeficiency Virus Types 1 and 2: anti -HIV-1 , anti-HIV-2
2. Hepatitis C Virus (HCV): anti-HCV
3. Hepatitis B Virus (HBV): HBsAg
4. Syphilis
5. COVID-19

All tissue intended for transplantation shall be stored in quarantine until results of all serology testing are complete.

Syphilis screening

All eye banks must have operational syphilis screening programme using an approved test for all donors. If the screening test is positive, a negative confirmatory test must be documented before tissue is released.

5.3.1 Non-required Laboratory Results

If laboratory results of non-required test for infectious disease are available for tissue, for transplantation, they must be taken into account and/or acted upon by the MD. Any relevant information shall be provided to the transplanting surgeon.

If donor screening for HTLV-I and/or HTLV-II has been performed, a negative screening test must be documented prior to release of tissue for transplantation.

5.3.2 Non-surgical Donor Eye Tissue

If donor tissue is provided for purposes other than surgery, e.g., research, practice surgery, etc., that donor tissue should also have been screened for HIV and Hepatitis B and Hepatitis C. In case the donor has not been screened for some unavoidable reason and the tissue has to be sent for research or other purpose, then a label stating that screening for HIV-antibody, Hepatitis B or Hepatitis C has not been carried out or stating "Potentially hazardous biological material" or some other indication must be attached to the container used for the donor tissue storage and/or transport.

5.4 Plasma Dilution / Hemodilution

The testing of plasma or serum samples shall take into account any factors which may cause dilution sufficient to alter tests results. In particular, recognition shall be given to the transfusion of blood and other fluids within 48 hours of the sample being taken. In these instances, either:

1. A pre-transfusion/infusion sample shall be obtained and tested. It is recommended that testing be done on the most recent pre-transfusion/infusion specimen for which identity and quality can be ensured, or
2. The Eye Bank shall use an algorithm for calculating the effect of plasma dilution on the donor sample and demonstrate that it is less than the designated limit. This plasma dilution algorithm shall be defined by the eye bank's SOP, and meet appropriate regulatory standard.

5.5 Donor Screening

The suitability of a specific individual for eye tissue donation shall be documented and shall be based on medical and social history, clinical status, physical assessment, testing and Post Mortem (if performed). All donors shall be identified by name. Each Eye Bank shall have a consistent policy for examination and documentation of the prospective donor's available medical record and death investigation. Review of all available records on each donor shall be performed by an individual who is qualified by profession, education or training to do so, and who is familiar with the intended use of the tissue.

Useful sources for determining eligibility can be found on donor screening forms and / or copies of medical charts, medical and social histories, Forensic Expert review and initial Post Mortem reports as well as adequate donor evaluation which include:

1. Serologic testing
2. Physical assessment of the donor
3. Eye tissue evaluation

Prior to distribution of tissue for transplantation, the MD or his/her designee shall review and document the medical and laboratory information in accordance with medical standards.

5.6 Contraindications

Tissue from donors with the following are potentially health threatening and also affect the success of the surgery and shall not be offered for surgical purposes. In conditions considered absolute contraindications for transplantation, donor family should be informed clearly and made fully aware of this fact. Eyes should not be harvested unless the donor family is fully aware of this and still wishes to donate.

Tissue from donors with the following is potentially hazardous to eye bank personnel and harvesting eyes should be strictly avoided.

1. Active Viral Hepatitis
2. Acquired immunodeficiency syndrome (AIDS) of HIV
3. Active viral encephalitis or encephalitis of unknown origin
4. Creutzfeldt-Jakob disease
5. Suspected rabies and persons who, within the past six months, were bitten by an animal suspected to be infected with rabies

Contraindications for transplantation:

Conditions with potential risk of transmission of local or systemic communicable disease from donor to recipient

1. Death of unknown cause and likelihood of exclusionary criteria as outlined in this list
2. Death with progressive neurodegenerative disease of unknown etiology, including but not limited to the following:
 - a. Chronic idiopathic demyelinating polyneuropathy

- b. Amyotrophic lateral sclerosis
 - c. Multiple sclerosis
 - d. Huntington's chorea
 - e. Alzheimer's disease
 - f. Dementia (exceptions include dementia due to CVA, brain tumor, head trauma, or medication or drug-induced)
 - g. Myasthenia gravis
 - h. Parkinson's syndrome
 - i. Parkinson's like disease
 - j. Creutzfeldt-Jakob disease
3. Active meningitis (viremia, bacteremia, tubercular)
 4. Active viral encephalitis of unknown origin or progressive encephalopathy (including but not limited to subacute sclerosing panencephalitis, and progressive multifocal leukoencephalopathy)
 5. Active septicemia at the time of death
 - a. Clinical evidence of sepsis (including, but not limited to, bacteremia, viremia, fungemia, septicemia, sepsis syndrome, systemic infection, systemic inflammatory response syndrome (SIRS), or septic shock):
 - b. Clinical evidence of infection; and
 - c. Two or more of the following systemic features if highly suggestive of active infection if unexplained by other disease processes:
 - i. Temperature of $> 38^{\circ} \text{C}$ (100.4°F);
 - ii. WBC $>12,000$ cells/mm³, $<4,000$ cells/mm³, or $>10\%$ immature (band) forms.
 - d. Positive (pre-mortem) blood cultures
 6. The following are examples of specific exclusions for systemic viral disease (viremia) which is active at the time of death: Active Chikungunia, Active H1N1 Influenza, Active Dengue Fever
 7. Active viral hepatitis
 8. Congenital rubella
 9. Reye's syndrome
 10. Suspected rabies and persons who, within the past six months, were bitten by an animal suspected to be infected with rabies
 11. Active miliary tuberculosis
 12. Hepatitis B surface antigen positive donors
 13. HTLV-I or HTLV-II infection

14. Hepatitis C seropositive donors
15. HIV seropositive donors
16. Active syphilis or seropositive for syphilis. It is acceptable to transplant an “RPR reactive” donor tissue only if a subsequent FTA confirmatory test on the same blood sample results “FTA negative.” In this case, the donor is considered seronegative for Syphilis.
17. Leprosy
18. COVID-19 Infection

Conditions with potential risk of transmission of non-communicable disease from donor to recipient

1. Intrinsic eye disease:
 - a. Active ocular or intraocular inflammation conjunctivitis, scleritis, iritis, uveitis, vitreitis choroiditis, keratitis, and retinitis (at the time of death).
 - b. Retinoblastoma.
 - c. Malignant tumours of the anterior ocular segment.
 - d. Known adenocarcinoma in the eye of primary or metastatic origin.
2. Snake bites specific for neurotoxins

Conditions that will affect graft outcome

Congenital or acquired disorders of the eye that would preclude a successful outcome for the intended use

- **NOT suitable for PKP or ALK:**
 - superficial disorders of the conjunctiva or corneal surface involving the central optical area of the corneal button
 - Prior surgery which compromises the corneal stroma
 - Local eye disease, disorder, or pathology affecting the anterior stroma
- **NOT suitable for PKP or EK:**
 - Local eye disease, disorder, or pathology affecting the posterior stroma or corneal endothelium
 - Endothelial density below 2000 cells per square millimeter
- **Therapeutic / Tectonic Tissue**
 - Tissue not suitable for optical use may be used for therapeutic or tectonic use. All other medical exclusionary criteria apply also to therapeutic tissue
- **Sclera tissue for transplantation:**
 - Medical exclusionary criteria are the same, except that tissue with local eye disease, disorder, or pathology affecting only the cornea (listed above) is acceptable for use.

Structural defects will not be acceptable for use

Behavioral / History, Laboratory and Medical Exclusion Criteria.

1. HIV or high risk for HIV corneas from: persons meeting any of the following criteria should not be offered for transplantation
 - a) Men who have had sex with other men in the preceding 5 years (homosexual behavior)
 - b) Persons who report nonmedical intravenous, intramuscular, or subcutaneous injection of drugs in the preceding 5 years (IV drug abuse)
 - c) Persons with hemophilia or related clotting disorders who have received human-derived clotting factor concentrate
 - d) Men and women who have engaged in sex for money or drugs in the preceding 5 years (commercial sex workers)
 - e) Persons who have had sex in the preceding 12 months with any person described in item 26-29 above or with a person known or suspected to have HIV infection
 - f) Persons who have been exposed in the preceding 12 months to known or suspected HIV-infected blood through percutaneous inoculation or through contact with an open wound, or mucous membrane
2. Children meeting any of the exclusionary criteria listed above for adults should not be accepted as donors
3. Children born to mother with HIV infection or mothers who meet the behavioral or laboratory exclusionary criteria for adult donors regardless of their HIV status should not be accepted as donors unless HIV infection and be definitely excluded in the child as follows:
 - a. children >18 months of age who are born to mothers with or at risk for HIV infection, who have not been breast fed within the last 12 months and whose HIV antibody tests, physical examination, and review of medical records to not indicate evidence of HIV infection can be accepted as donors
 - b. Children <18 months of age who are born to mothers with or at risk for HIV infection or children of mothers with or at risk of HIV infection who have been breast fed within the past 12 months should not be accepted as donors regardless of their HIV test results
4. Persons who cannot be tested for HIV infection because of refusal, inadequate blood samples (e.g. haemodilution that could result in false-negative tests), or any other reasons
5. Persons with a repeatedly reactive screening assay for HIV-1 or HIV-2 antibody regardless of the results of supplemental assays
6. Persons whose history, physical examination, medical records, or Post Mortem reports reveal other evidence of HIV infection or high-risk behavior, such as diagnosis of AIDS, unexplained mucous membranes hemorrhages kaposi's sarcoma, unexplained lymphadenopathy lasting >1 month, unexplained temperature > 100.5F (38.6 C) or >10 days, unexplained persistent diarrhea, male-to-male sexual contact, sexually transmitted diseases, or needle tracks or other signs of parenteral drug abuse
7. Physical evidence of recent tattooing, ear piercing, or body piercing. Persons who have undergone tattooing, ear piercing, or body piercing in the preceding 12 months, in which sterile procedures were not used (e.g., contaminated instruments and or/ink were used), or instruments that had not been sterilized between uses were used

5.7 Donor Age

Donor age criteria are determined individually by each eye bank. The criteria must be written in the eye bank's SOP.

5.8 Interval between death, enucleation, excision, and preservation

Death-to-Preservation time varies according to circumstances of death, storage of the body after death, and storage of tissue between enucleation and preservation in media.

- If ambient temperature is hot (e.g. summer weather), then eyes must be preserved or refrigerated within six (6) hours of death
- If ambient temperature is not hot (e.g. winter weather), then eyes must be preserved or cooled within eight (8) hours of death
- If ocular area including eyes, or the entire body, or enucleated eyes are continuously cooled within the above constraints of 6 or 8 hours, respectively, then tissue can be preserved up to 12 hours from time of death
- In cases such as road accident/hanging in case the exact time of death is unknown, the hours passed should be estimated depending on information available, keeping in view the higher risk of infection with longer intervals

With documentation, the above time requirements may be waived on a case-by-case basis if tissue is continuously refrigerated and deemed medically suitable by the medical director. Factors to consider include mortuary cleanliness and documentation of cooling / temperature log.

5.9 Eye maintenance prior to recovery

The prospective donor's corneal integrity should be maintained prior to tissue recovery. The recommended procedure for eye maintenance prior to recovery will be clearly documented in the eye banks standards operating procedures (SOP). This procedure shall be determined by the Medical Director.

Recovery, Processing and Preservation

6.1 Recovery Procedures

Retrieval procedure could be either enucleation of the whole globe or Corneoscleral rim excision. The retrieval procedures should be documented in detail in each eye bank in their Standard Operative procedure manual. The Medical and Executive director / Eye Bank manager are responsible to ensure that all eye bank staffs as well as those of related eye collection centers are well trained in the SOP. All eye bank technicians should take universal precautions to avoid getting exposed to infection during the retrieval process.

The donor should be identified either by verifying the tabs attached or by a relative / hospital/ mortuary staff. After obtaining appropriate consent, details about time and cause of death, availability of death certificate should be confirmed. Donor's personal and medical history or medical records if available should be collected. A detailed gross physical examination to rule out possible contraindications should be carried out. Tissue retrieval either as whole globe enucleation or in-situ corneoscleral rim excision should be done under strict aseptic conditions as per guidelines. Gross examination of the eye should be done and documented in case of in-situ corneo-scleral excision. The corneo-scleral rim excision later can be done in a laminar flow hood cabinet or in an operating room.

6.2 In Situ, Enucleation and Laboratory Excision

Someone authorized as per current THOTA legislation trained in enucleation / excision from an Eye Bank is only allowed to retrieve eyes/corneas from the donor. In absence of death certificate, a Medical Practitioner must satisfy self that life is extinct prior to recovery.

Individuals specifically trained for in situ retrieval and/or laboratory removal of the corneal scleral segment shall perform removal of the corneal scleral rim using sterile technique. If the procedure is done in a laboratory the removal must be performed in a laminar flow hood, cabinet or in an operation room. For corneal scleral removal, the eye shall be examined with the use of a penlight preferably and a slit lamp prior to excision.

6.3 Tissue Processing.

Processing must be performed in

- a) a laminar air flow hood which meets ISO Class 5 standards,
- b) in an accredited operating room, or
- c) in another environment documented annually to have less than 25 colony forming units per 90 mm settle plate per one-hour exposure.

Tissue must be processed in such a way as to prevent cross-contamination and labelling mix-ups (e.g., tissue from different donors may not be processed simultaneously).

Tissue Evaluation

7.1 General

The ultimate responsibility for determining the suitability of the tissue for transplantation rests with the transplanting surgeon.

7.2 Gross Examination

The corneal-scleral segment shall be initially examined grossly for clarity, epithelial defects, foreign objects and contamination and scleral color. e.g., jaundice. Refer Section III, H8.800 for details.

7.3 Slit Lamp Examination

The cornea shall be examined for epithelial and stromal pathology and in particular endothelial disease.

Enucleated globes shall be examined in the laboratory prior to distribution and/or corneal excision. If in situ corneal excision is performed, examination of the donor eye anterior segment with a penlight or a portable slit lamp is required. After corneal excision, the corneal-scleral rim shall be evaluated by slit lamp biomicroscopy, even if the donor eye has been examined with the slit lamp prior to excision of the corneal-scleral rim, to ensure that damage to the corneal endothelium or surgical detachment of Descemet's membrane did not occur.

Slit lamp examination and evaluation shall be documented on the donor records.

7.4 Specular Examination

Determination of endothelial cell density via specular microscopy shall be a standard method of corneal tissue evaluation for all Eye Banks. When it is impossible to obtain an endothelial cell count this requirement may be waived on a case-by-case basis by the MD.

Calibration of the eye banks specular microscope shall be performed following manufacturer's guidelines and records shall be maintained.

Storage, Packaging and Shipping

8.1 Storage of Tissue

All surgical tissue shall be stored in quarantine until results of HIV, HbsAg, HCV, Syphilis and any other relevant donor screening tests have been recorded as non-reactive. All tissue shall be stored aseptically at a temperature appropriate to the method of preservation used. Eye banks must precisely document their procedures for storage of corneal tissue, whether it is in the form of the whole eye or the cornea only in an appropriate medium.

Eye Bank shall use approved corneal storage medium (such as MK, Optisol GS, EUSOL, etc) from a reliable source. The medium shall be used and stored according to the manufacturer's recommendations for temperature, date and other factors. The manufactured medium purchased and shipped to the eye bank shall be inspected for damage upon arrival and the lot number of medium used for each cornea shall be recorded on the tissue tracking and recall.

8.2 Long term preservation

Some eye banks employ long-term preservation of corneal tissue, such as glycerin preservation or organ culturing. An eye bank that uses long-term preservation shall carefully document the procedure in their procedure manual, and adhere to rigid aseptic technique.

8.3 Whole globe preservation

Eye Banks that store whole eyes shall employ aseptic practice. The selected preservation method must be documented in the eye bank's own procedures manual.

8.4 Sclera preservation

Eye banks shall preserve scleral tissue aseptically. The selected preservation method must be documented in the eye bank's own procedure manual. A preservation date for scleral tissue shall be indicated.

8.5 Packaging and Shipping of Tissue

Procedures shall be established and maintained to ensure that:

1. The tissue is distributed and received aseptically in a container designed to maintain quality and prevent contamination.
2. Each tissue shall be individually packaged and sealed with a tamper-evident seal.
3. Packaging shall be done so that the packaging insert and tissue label do not become wet.
4. The Eye Bank shall use a packaging method that will maintain a cool temperature while in transit, i.e. packaged with wet ice/gel packs.

8.6 Transport

The Eye bank shall establish and maintain procedures that account for the different modes of transport used, to ensure that the quality of the tissue is maintained. These procedures shall take account of the factors such as time in transit, temperature conditions and tracking of the shipment from distributing eye bank to the consignee.

Distribution

9.1 General

Eye Banks shall establish and document a system of eye tissue distribution that is applicable to their service area that follows all relevant Central and State legislation and regulations, local rules or guidelines, and that is just, equitable and fair to all surgeons and recipients served by the Eye Bank.

Distribution of donor tissue by the Eye Banks or centralized distribution network would follow the priority norms of patients awaiting the transplants and the actual waiting list of patients in that area/city/State/Country and as per the cornea distribution algorithm prescribed by NOTTO (This is available on the NOTTO website) Tissue for transplantation shall only be distributed to registered ophthalmologist/institutes and to other Eye Banks. Ultimate responsibility for the suitability of each tissue for transplantation rests with the transplanting surgeon. Access to tissue shall be provided without regard to recipient sex, age, religion, race, creed, color or national origin. Documentation of distribution of tissue shall be available for inspection by applicable regulatory agencies.

Eye Banks shall require receipt of specific recipient identification details for all tissues transplanted, and retain these as part of the records to enable traceability from a named donor to a named recipient. Requests for eye tissue shall be taken only for a specific named potential recipient. However, if in the event of unforeseen medical reasons, the surgeon is not able to perform the transplant on this named recipient and the tissue may be transplanted into another individual, the Eye Bank shall require the surgeon to notify them of this information. The Eye Bank shall request that each unit of tissue distributed shall be only transplanted into a single patient. If a unit is used for more than one recipient, then the eye bank shall request recipient information for all pieces used.

The Eye Bank shall ensure anonymity of the donor to any individual or institution receiving tissue for surgical use, and that any details which may identify the donor are not provided. If tissue is transferred to another Eye Bank for distribution (e.g. excess to requirements, for emergency surgery), the Eye Bank sending the tissue (the source Eye Bank) shall provide all donor screening and testing information as required by the receiving Eye Bank (the distributing Eye Bank) to ensure they are satisfied as to the adequacy of the processes performed by the source Eye Bank.

Eye banks to establish network in particular zone and share requisition for tissue/demand for corneal disuse or availability of corneal tissue, to ensure maximum usage of transplantable tissue within the city/zone/State for a patient waiting for Keratoplasty. (The government policies as declared by NOTTO/ROTTA/SOTTO should be complied with.)

9.2 Recipient Follow-Up Information

The distributing Eye Bank shall request from the transplanting surgeon post-operative outcome and recipient follow-up information concerning possible adverse reactions on all eye tissue used

for transplantation. Eye Banks may request that provision of this, and any additional follow-up information required, is mandatory for the supply of tissue.

This information shall include the following (as a minimum):

1. Recipient's name
2. Date of birth (or year of birth if a precise date of birth is unknown) or Age
3. Diagnosis i.e. indication for transplant
4. Name of surgeon receiving/transplanting tissue
5. Date of surgery
6. Location of surgery

9.3 Adverse Reactions

The Eye Bank shall establish and document a procedure in their SOP Manual for the receiving surgeon to notify the Eye Bank of any adverse reactions arising from the transplantation of eye tissue.

The Eye Bank shall establish a procedure for investigating, documenting and reporting on all adverse reaction notifications. The Medical Director shall receive and review such reports on each adverse reaction and authorize a response to the transplanting surgeon. As part of this process, the Medical Director shall also determine if any corrective/preventative actions are required. These shall be documented and reviewed as part of regular quality management review processes as required by the Eye Bank's Quality System and regulatory agencies (if applicable).

9.4 Tissue Processing Charges

There should be no commercial dealing or profiteering in the supply of donated human tissues. Service fees may be levied by the Eye Bank to recover costs related to tissue retrieval, processing, storage and distribution. This will apply to only those private eye banks that are not seeking grant-in Aid from NPCBVI for eye ball collection or if the grant in aid is less than the actual expenditure if properly documented. The policy for charging and the amount to be charged should be duly approved by the competent authority (THOTA registration committee/NPCBVI/NHM/relevant government body).

Tissue processing charge may vary depending upon the type of media and pre-cut donor tissue used.

9.5 Tissue Returned to Eye Banks

For transplant tissue returned and redistributed, tissue transportation and storage information must be documented and made available to the transplanting surgeon.

Records, Labeling and Traceability

10.1 Labeling

Each corneal or scleral tissue container shall be clearly and indelibly labeled to include at least the information below:

- Name of source eye bank
- Tissue identification number. There must be unique identification number for each ocular tissue or fraction thereof that is distributed for surgical use.
- Type of tissue
- Date and time of donor's death
- Date and time of Cornea/scleral preservation
- Preservation date for scleral tissue and long-term preserved tissue
- A statement that the tissue is intended for single patient application only and that it is not to be considered sterile and culturing or re-culturing is recommended.
- Type of preservation medium

10.2 Length of Record Storage

All records shall be kept for a minimum of ten years (or comply with appropriate laws) from the date of transplantation/implantation.

10.3 Confidentiality

All eye bank records and communications between the eye bank and its donors and recipients shall be regarded as confidential and privileged.

Quality Assurance

11.1 General

The Eye Bank shall have a formally established quality assurance program (hereafter called Quality System) that defines and documents a series of systematic processes that shall to be followed by all those working in the organization. These processes shall be designed to ensure that quality is evident in every part of the organization and to effect continuous quality improvement. A major objective is to avoid errors, however, if an error does happen, the cause should be identified, a risk assessment performed, and the process amended if necessary so that the error is not repeated.

The Eye Bank shall define and document how the requirements for quality will be met. The Medical Director of the Eye Bank (as defined in part 3.4) shall have overall responsibility for the Quality System. The Quality System shall include ongoing monitoring and evaluation of activities, identification of problems, and implementation of plans for corrective actions. The aim of using a Quality System in Eye Banks is to maximize the safety and quality of the eye tissues and services provided. The Standards defined in this document shall provide the basis for the development of the Quality System. A Quality System is based on adherence to effective and adequate documentation. The Eye Bank shall establish and maintain relevant documents relating to all aspects and stages of the Eye Bank's work practices and services.

11.2 Quality Control

The MD shall prescribe tests and procedures for measuring, assaying or monitoring properties of tissues essential to the evaluation of their safety for transplantation, e.g., hepatitis B surface antigen and human immunodeficiency virus (HIV) antibody, and conform to legal and regulatory requirements. Results of all such tests or procedures, together with evaluations based on these findings, shall become part of the permanent record of all tissue processed.

Testing --- If an eye bank performs its own microbiologic or serologic testing it must meet applicable accreditation requirements.

Microbiologic Culturing --- Culturing of Eye Bank donor eyes is advised despite the recognition by many that bacteriologic contamination of donor eyes does not necessarily lead to infection and that pre-surgical or surgical cultures may not correlate with postoperative infection if it should occur. Cultures may be performed either before and/or at the time of surgery.

A. Pre-surgical cultures (Optional)

Eye Banks may elect to perform corneal-scleral rim cultures at the time of corneal preservation in tissue culture medium. Positive culture reports shall be reported to the receiving surgeon or recipient eye bank.

B. Surgical culturing

Each eye bank shall recommend culturing of the corneal scleral rim for corneal transplantation, or a piece of sclera for scleral implantation at the time of surgery.

Positive results in cases of postoperative infection shall be reported to the eye bank/or eye retrieval center that procured the tissue as well as to the eye bank that distributed the tissue.

11.3 Approval, Review and Audit

Procedures, documents and forms shall be reviewed and approved by the Quality Manager or other authorized person before they are issued. Current documents shall be readily identifiable to ensure that invalid or obsolete documents are not used. The Quality System shall be reviewed at appropriate regular intervals by the Quality Manager in conjunction with Eye Bank management to ensure its suitability and effectiveness. The Eye Bank shall establish and document a procedure for the scope and frequency of routine and/or focused internal Quality Assurance audits of at least the critical Eye Bank functions and records. These should be performed at least annually, and by a person familiar with, but not directly responsible for the processes being audited.

11.4 Control of Materials

There shall be a system of defining and documenting the requirements for critical materials such as reagents used in the processing and storage of eye tissues. There shall be a record of receipt of all critical materials, and methods for inspection to determine conformity with specifications and fitness for use. Critical materials shall be stored and used according to the manufacturer's instructions, or if materials are produced within the Eye Bank, that they are stored and used according to validated procedures. Critical supplies not in current use shall be clearly distinguishable from those in current use. Critical supplies shall be stored in a manner that ensures package integrity is maintained. These critical supplies shall not be used if expired.

11.5 Process Controls and Changes

Eye Banks shall document in their Standard Operating Procedures (SOP) Manual details of all critical processes that affect safety and quality of tissues and ensure that they are carried out under controlled conditions, as appropriate to the particular process being performed. Processing, preservation and storage procedures shall be validated, to ensure that they shall not render the tissues harmful or clinically ineffective to the recipient. This validation shall be based on demonstration of one or more of the following:

- a. performance of specific tests, trials or procedures
- b. risk assessment for potential effect on safety and quality
- c. previously published studies
- d. retrospective evaluation of the Eye Bank's own data

Modifications to a critical process should be evaluated for their potential effect on safety and quality of tissue (risk assessment). Modifications considered significant to critical processes shall be validated as to ensure no significant detrimental effect on safety and quality of tissues. Deviations to a procedure that are necessary or unavoidable shall be assessed for risk to quality and safety of the tissue and be documented. Any non-conformance shall have a risk assessment performed and an appropriate response implemented and documented that is relative to the assessed risk. Tissue(s) from more than one donor shall be processed separately through all stages of retrieval, testing, sampling and evaluation to avoid errors or cross-contamination. Separate instruments, supplies and reagents shall be used on tissues from different donors.

11.6 Tissue Recall

Eye banks must have a policy and procedure for potential recall of tissue. Positive test results or information about behavioral risks or medical history, received after release of tissue, that indicate a risk for transmission of a communicable disease must be reported to the:

1. Eye bank's medical director
2. Consignee (i.e. the transplanting surgeon, processor or distributing eye bank), within 45 days.

Registration and Accreditation

12.1 General

Each eye bank unit, should be registered under 1994 Transplantation of Human Organs Act/ 2014 THOTA Rules and also should undergo the Accreditation appraisal.

12.2 Registration

Eye Bank Training Centers and Eye Banks should apply to their respective state government health authorities and get registered under the 1994 Transplantation of Human Organs Act / 2014 THOTA Rules. **Form 15 is required to be completed in full by all applicants for all registration/ renewal of eye bank/eye retrieval centers. The application form for getting registered is the form 15 in THOTA 2014 rules which also mentions the prescribed fee (at Annexure 4.)** They should perform their activities as prescribed in the applicable law like 1994 Transplantation of Human Organs Act / 2014 THOTA Rules until the registration is completed.

Eye Retrieval Centres need not apply for a THOTA Registration, however, they must seek a consent from the State Health Authorities before functioning. They should have the required manpower, infrastructure and documentation as described in previous pages and should be affiliated/have a MoU with an accredited eye bank.

12.3 Accreditation (Desirable)

After registration the eye bank units should offer themselves for appraisal by an Accreditation Authority (AA) within one year to obtain valid accreditation documents before they are declared as fully operational to the public.

Accreditation will include evaluation of the following:

- o Demonstrate compliance with Medical Standards
- o Demonstrate compliance of all requirements during site inspection.
- o Demonstrate proficiency in all aspects of eye banking viz. procuring, processing and distributing corneal tissue. The eye bank should collect at least 25 surgical grade tissues (i.e. tissues for optical keratoplasty) annually and provide documentation of their performance.
- o Certify compliance with applicable laws and regulation. Once accredited, an eye bank must be inspected and reaccredited at a frequency as defined by the accreditation authority.
- o In cases of non-compliance a reasonable time period will be given to rectify deficiencies and satisfy accreditation requirements.
- o If the eye bank does not meet the standards within the deadline it may not receive accreditation as an eye bank and may be re-designated as an eye retrieval center.

The State Registration Authority shall be informed about failure to meet accreditation requirements and to cancel registration under Transplantation of Human Organs Act.

12.4 Accreditation Authority

This shall be a body comprising of nominees by Government of India, State Government, any other nominated by NPCBVI and EBAI.

12.5 Eye Bank Inspection

The Accreditation/Inspection Committee shall be responsible for inspecting each Eye Bank as outlined in the written procedures of the EBAI and the Government of India.

Accreditation and reaccreditation site inspections shall be scheduled following written notification of the impending inspection. Unannounced inspections may be conducted in case of receipt of any allegation of violation of "Medical Standards" by any eye bank. Failure to permit an inspection will result in suspension or revocation of an eye bank's accreditation and registration under Transplantation of Human Organs Act.

12.6 Procurement of Eye Bank Essentials

The Eye Bank should have a policy and procedure for maintaining sufficient stocks of essential eye bank supplies and also a procedure for procuring eye bank supplies. Procurement procedure has to be documented and produced at the time of site inspection.

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7. EU Directive 2006/17/EC of 8 February 2006 implementing Directive 2004/23/EC with regards to certain technical requirements for the donation, procurement and testing of human tissues and cells.
8. EU Directive 2006/86/EC of 24 October 2006 implementing Directive 2004/23/EC with regards to certain technical requirements for the coding, processing, preservation, storage and distribution of human cells and tissues.
9. GUIDANCE DOCUMENT FOR CELL, TISSUE AND ORGAN ESTABLISHMENTS, Safety of Human Cells, Tissues and Organs for Transplantation, Health Canada, Published by authority of the Minister of Health, 6/18/2013
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भारत का राजपत्र The Gazette of India

असाधारण

EXTRAORDINARY

भाग II—खण्ड 3—उप-खण्ड (i)

PART II—Section 3—Sub-section (i)

प्राधिकार से प्रकाशित

PUBLISHED BY AUTHORITY

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स्वास्थ्य और परिवार कल्याण मंत्रालय

अधिसूचना

नई दिल्ली, 27 मार्च, 2014

सा.का.नि.218(अ).— केन्द्रीय सरकार, मानव अंग प्रतिरोपण अधिनियम, 1994 (1994 का 42) की धारा 24 द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए और मानव अंग प्रतिरोपण नियम, 1995 को उन बातों के सिवाय अधिक्रांत करते हुए जिन्हें ऐसे अधिक्रमण से पूर्व किया गया है या करने का लोप किया गया है, निम्नलिखित नियम बनाती है, अर्थात् :-

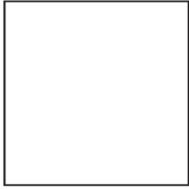
1. **संक्षिप्त नाम और प्रारंभ** - (1) इन नियमों का संक्षिप्त नाम मानव अंग और उत्तक प्रतिरोपण नियम, 2014 है ।
(2) ये राजपत्र में प्रकाशन की तारीख को प्रवृत्त होंगे ।
2. **परिभाषाएं** - इन नियमों में जब तक कि संदर्भ से अन्यथा अपेक्षित न हो.-
(क) “अधिनियम” से मानव अंग प्रतिरोपण अधिनियम, 1994 अभिप्रेत है ;
(ख) “शव/शवों”, “अंग/अंगों” और “उत्तक/उत्तकों” से क्रमशः मानव शव, मानव अंग और मानव उत्तक अभिप्रेत हैं ;
(ग) “सक्षम प्राधिकारी” से प्रतिरोपण करने वाली संस्था या अस्पताल का प्रधान या इस प्रयोजन के लिए संस्था या अस्पताल के प्रधान द्वारा गठित की गई समिति अभिप्रेत है ;
(घ) “प्ररूप” से इन नियमों से उपाबद्ध प्ररूप अभिप्रेत हैं ;
(ङ) “राष्ट्रीय परीक्षण और अंश शोधन प्रयोगशाला प्रत्यायन बोर्ड (एनएबीएल)” से सरकार, विनियामकों और उद्योग को प्रयोगशालाओं की तकनीकी सक्षमता को औपचारिक रूप से मान्यता प्रदान करने के लिए तृतीय पक्षकार निर्धारण के माध्यम से प्रयोगशाला प्रत्यायन की कोई स्कीम प्रदान करने के उद्देश्य से भारत सरकार के विज्ञान और प्रौद्योगिकी विभाग के तत्वाधान में स्थापित की गई स्वायत्त निकाय अभिप्रेत है और प्रत्यायन सेवाएं, अंतरराष्ट्रीय मानकीकरण संगठन (आईएसओ) मानकों के अनुसार चिकित्सीय प्रयोगशालाओं के परीक्षण और अंश शोधन के लिए प्रदान की जाती है ;
(च) “तकनीकी जो कार्निया निकाल सकता है” से निम्नलिखित किसी अर्हता और अनुभव वाला तकनीकी अभिप्रेत है जो (नेत्र गोलक को निकालना या कार्निया को काटना) कार्निया काट सकता है, अर्थात् :-
i. ऐसा नेत्र विज्ञानी जिसके पास नेत्र विज्ञान में डाक्टर ऑफ मेडिसिन (एम.डी.) या मास्टर ऑफ सर्जरी (एम.एस.) या नेत्र विज्ञान में डिप्लोमा (डी.ओ.) हो ; और
ii. आयुर्विज्ञान की सभी मान्यताप्राप्त प्रणालियों से रजिस्ट्रीकृत डाक्टर, आयुर्विज्ञान की सभी मान्यताप्राप्त प्रणालियों से मान्यताप्राप्त अर्हता रखने वाली नर्स, पराचिकित्सा नेत्र विज्ञान सहायक, नेत्र विज्ञान सहायक, दृष्टिमितिज्ञ, अपवर्तन विज्ञानी, पराचिकित्सा कर्मकार या चिकित्सा तकनीकी अभिप्रेत है परंतु यह तब जब कि व्यक्ति रजिस्ट्रीकृत, प्राधिकृत और

विदेशी व्यक्तियों की दशा में दाता और प्रापक के बीच संबंध का प्रमाणपत्र
(संबद्ध दूतावास द्वारा जारी किया जाए)

[नियम 20(क)]

भारत में.....(देश का नाम) के दूतावास को मानव अंग प्रत्यारोपण अधिनियम, 1994 (1994 का 42) के अधीन चिकित्सीय प्रयोजनों के लिए प्रापक.....(प्रापक का नाम) को जीवित दाता.....
(दाता का नाम) से.....(अंग या उत्तक के नाम) के दान की सुविधा के लिए.....(मूल के देश के सरकारी विभाग का नाम) द्वारा सिफारिश की गई(तारीख) को.....(अंग दाता और प्रापक का नाम) से आवेदन प्राप्त हुआ है दाता और प्रापक के ब्यौरे तथा फोटो नीचे दी गई हैं ।

प्रापक के ब्यौरे	दाता के ब्यौरे
नाम.....	नाम.....
आयु.....	आयु.....
लिंग	लिंग
पिता या पति का नाम.....	पिता या पति का नाम.....
.....
पता	पता
.....
.....



प्रापक



दाता

(फोटो चिपकाने के पश्चात् प्रापक और दानदाता के फोटो हस्ताक्षरित एवं आरपार स्टांपित होना चाहिए)

1. यह प्रमाणित किया जाता है कि दाता और प्रापक बीचका संबंध है ।
2. निम्नलिखित संलग्न पहचान और सत्यापन दस्तावेजों की अधिप्रमाणिकता प्रमाणित की जाती है ।
क.....
ख.....

मेरी सर्वोत्तम जानकारी के अनुसार, अनापत्ति प्रमाणपत्र प्रदान किया जाता है, दाता प्रापक के प्रति स्नेह और अनुराग या मोह के कारण दान कर रहा है और प्रापक तथा दाता के बीच कोई वित्तीय संव्यवहार नहीं है और दाता पर कोई दबाव या जबरदस्ती नहीं है ।

(ज्येष्ठ दूतावास पदाधिकारी के हस्ताक्षर)

तारीख :

नाम :

स्थान :

पदनाम.....

[फा. सं. एस-12011/28/2012-एमजी/एमएस]

अरुण के.पण्डा, संयुक्त सचिव

**MINISTRY OF HEALTH AND FAMILY WELFARE
NOTIFICATION**

New Delhi, the 27th March, 2014.

G.S.R. 218 (E).— In exercise of the powers conferred by section 24 of the Transplantation of Human Organs Act, 1994 (42 of 1994) and in supersession of the Transplantation of Human Organs Rules, 1995, except as respects things done or omitted to be done before such supersession, the Central Government hereby makes the following rules, namely:-

1. **Short title and commencement** — (1) These rules may be called the Transplantation of Human Organs and Tissues Rules, 2014.

(2) They shall come into force on the date of their publication in the Official Gazette.

2. **Definitions:** - In these rules unless the context otherwise requires,—

- (a) “Act” means the Transplantation of Human Organs Act, 1994;
- (b) “cadaver(s)”, “organ(s)” and “tissue(s)” means human cadaver(s), human organ(s) and human tissue(s), respectively;

- (c) “competent authority” means the Head of the institution or hospital carrying out transplantation or committee constituted by the head of the institution or hospital for the purpose;
 - (d) “Form” means a Form annexed to these rules;
 - (e) National Accreditation Board for Testing and Calibration Laboratories (NABL) means the autonomous body established under the aegis of Department of Science and Technology, Government of India with the objective to provide Government, Regulators and Industry with a scheme of laboratory accreditation through third-party assessment for formally recognising the technical competence of laboratories and the accreditation services are provided for testing and calibration of medical laboratories in accordance with International Organisation for Standardisation (ISO) Standards;
 - (f) “the technician who can enucleate cornea” means the technician with any of the following qualifications and experience who can harvest corneas (enucleate eyeballs or excise corneas), namely:-
 - (i) Ophthalmologists possessing a Doctor of Medicine (M.D) or Master of Surgery (M.S) in Ophthalmology or Diploma in Ophthalmology (D.O.); and
 - (ii) registered Doctors from all recognised systems of medicine, Nurses, Paramedical Ophthalmic Assistant, Ophthalmic Assistant, Optometrists, Refractionists, Paramedical Worker or Medical Technician with recognised qualification from all recognised systems of medicine, provided the person is duly trained to enucleate a donated cornea or eye from registered, authorised and functional eye Bank or Government medical college and, the training certificate should mention that he has acquired the required skills to independently conduct enucleation of the eye or removal of cornea from a cadaver;
 - (g) words and expressions used and not defined in these rules, but defined in the Act, shall have the same meanings, respectively, assigned to them in the Act.
3. **Authority for removal of human organs or tissues.**—Subject to the provisions of Section 3 of the Act, a living person may authorise the removal of any organ or tissue of his or her body during his or her lifetime as per prevalent medical practices, for therapeutic purposes in the manner and on such conditions as specified in Form 1, 2 and 3.
4. **Panel of experts for brain-stem death certification.**—For the purpose of certifying the brain-stem death, the Appropriate Authority shall maintain a panel of experts, in accordance with the provisions of the Act, to ensure efficient functioning of the Board of Medical Experts and it remains fully operational.
5. **Duties of the registered medical practitioner.**— (1) The registered medical practitioner of the hospital having Intensive Care Unit facility, in consultation with transplant coordinator, if available, shall ascertain, after certification of brain stem death of the person in Intensive Care Unit, from his or her adult near relative or, if near relative is not available, then, any other person related by blood or marriage, and in case of unclaimed body, from the person in lawful possession of the body the following, namely:-
- (a) whether the person had, in the presence of two or more witnesses (at least one of who is a near relative of such person), unequivocally authorised before his or her death as specified in Form 7 or in documents like driving license, etc. wherein the provision for donation may be incorporated after notification of these rules, the removal of his or her organ(s) or tissue(s) including eye, after his or her death, for therapeutic purposes and there is no reason to believe that the person had subsequently revoked the aforesaid authorisation;
 - (b) where the said authorisation was not made by the person to donate his or her organ(s) or tissue(s) after his or her death, then the registered medical practitioner in consultation with the transplant coordinator, if available, shall make the near relative or person in lawful possession of the body, aware of the option to authorise or decline the donation of such human organs or tissues or both (which can be used for therapeutic purposes) including eye or cornea of the deceased person and a declaration or authorisation to this effect shall be ascertained from the near relative or person in lawful possession of the body as per Form 8 to record the status of consent, and in case of an unclaimed body, authorisation shall be made in Form 9 by the authorised official as per sub-section (1) of section 5 of the Act;
 - (c) after the near relative or person in lawful possession of the body authorises removal and gives consent for donation of human organ(s) or tissue(s) of the deceased person, the registered medical practitioner through the transplant coordinator shall inform the authorised registered Human Organ Retrieval Centre through authorised coordinating organisation by available documentable mode of communication, for removal, storage or transportation of organ(s) or tissue(s).
- (2) The above mentioned duties shall also apply to the registered medical practitioner working in an Intensive Care Unit in a hospital not registered under this Act, from the date of notification of these rules.
- (3) The registered medical practitioner shall, before removing any human organ or tissue from a living donor, shall satisfy himself –
- (a) that the donor has been explained of all possible side effects, hazards and complications and that the donor has given his or her authorisation in appropriate Form 1 for near relative donor or Form 2 for spousal donor or Form 3 for donor other than near relative;

- (b) that the physical and mental evaluation of the donor has been done, he or she is in proper state of health and it has been certified that he or she is not mentally challenged and that he or she is fit to donate the organ or tissue:

Provided that in case of doubt regarding mentally challenged status of the donor the registered medical practitioner may get the donor examined by a psychiatrist and the registered medical practitioner shall sign the certificate as prescribed in Form 4 for this purpose;

- (c) that the donor is a near relative of the recipient, as certified in Form 5, and that he or she has submitted an application in Form 11 jointly with the recipient and that the proposed donation has been approved by the competent authority as defined at rule 2(c) and specified in Form 19 and that the necessary documents as prescribed and medical tests, as required, to determine the factum of near relationship, have been examined to the satisfaction of the registered medical practitioner and the competent authority;
- (d) that in case the recipient is spouse of the donor, the donor has given a statement to the effect that they are so related by signing a certificate in Form 2 and has submitted an application in Form 11 jointly with the recipient and that the proposed donation has been approved by the competent authority under the provisions of sub-rule (2) of rule 7;
- (e) that in case of a donor who is other than a near relative and has signed Form 3 and submitted an application in Form 11 jointly with the recipient, the permission from the Authorisation Committee for the said donation has been obtained;
- (f) that if a donor or recipient is a foreign national, the approval of the Authorisation Committee for the said donation has been obtained;
- (g) living organ or tissue donation by minors shall not be permitted except on exceptional medical grounds to be recorded in detail with full justification and with prior approval of the Appropriate Authority and the State Government concerned.

(4) A registered medical practitioner, before removing any organ or tissue from the body of a person after his or her death (deceased donor), in consultation with transplant coordinator, shall satisfy himself the following, namely:-

- (a) that caution has been taken to make inquiry, from near relative or person in lawful possession of the body of a person admitted in Intensive Care Unit, only after certification of Brain Stem death of the person that the donor had, in the presence of two or more witnesses (at least one of whom is a near relative of such person), unequivocally authorised before his or her death as specified in Form 7 or in documents like driving license etc. (wherein the provision for donation may be incorporated after notification of these rules), the removal of his or her organ(s) or tissue(s) after his or her death, for therapeutic purposes and it has been ascertained that the donor has not subsequently revoked the aforesaid authorisation, and the consent of near relative or person in lawful possession of the body shall also be required notwithstanding the authorisation been made by deceased donor:

Provided that if the deceased person who had earlier given authorisation but had revoked it subsequently and if the person had given in writing that his organ should not be removed after his death, then, no organ or tissue will be removed even if consent is given by the near relative or person in lawful possession of the body;

- (b) that the near relative of the deceased person or the person lawfully in possession of the body of the deceased donor has signed the declaration as specified in Form 8.
- (c) that in the case of brain-stem death of the potential donor, a certificate as specified in Form 10 has been signed by all the members of the Board of Medical Experts referred to in sub-section (6) of section 3 of the Act:

Provided that where a neurologist or a neurosurgeon is not available, an anesthetist or intensivist who is not part of the transplant team nominated by the head of the hospital duly empanelled by Appropriate Authority may certify the brain stem death as a member of the said Board;

- (d) that in the case of brain-stem death of a person of less than eighteen years of age, a certificate specified in Form 10 has been signed by all the members of the Board of Medical Experts referred to in sub-section (6) of section 3 of the Act and an authority as specified in Form 8 has been signed by either of the parents of such person or any near relative authorised by the parent.

6. Procedure for donation of organ or tissue in medicolegal cases.— (1) After the authority for removal of organs or tissues, as also the consent to donate organs from a brain-stem dead donor are obtained, the registered medical practitioner of the hospital shall make a request to the Station House Officer or Superintendent of Police or Deputy Inspector General of the area either directly or through the police post located in the hospital to facilitate timely retrieval of organs or tissue from the donor and a copy of such a request should also be sent to the designated post mortem doctor of area simultaneously.

- (2) It shall be ensured that, by retrieving organs, the determination of the cause of death is not jeopardised.
- (3) The medical report in respect of the organs or tissues being retrieved shall be prepared at the time of retrieval by retrieving doctor (s) and shall be taken on record in postmortem notes by the registered medical practitioner doing postmortem.

- (4) Wherever it is possible, attempt should be made to request the designated postmortem registered medical practitioner, even beyond office timing, to be present at the time of organ or tissue retrieval.
- (5) In case a private retrieval hospital is not doing post mortem, they shall arrange transportation of body along with medical records, after organ or tissue retrieval, to the designated postmortem centre and the post mortem centre shall undertake the postmortem of such cases on priority, even beyond office timing, so that the body is handed over to the relatives with least inconvenience.

7 Authorisation Committee.—(1) The medical practitioner who will be part of the organ transplantation team for carrying out transplantation operation shall not be a member of the Authorisation Committee constituted under the provisions of clauses (a) and (b) of sub-section(4) of section 9 of the Act.

(2) When the proposed donor or recipient or both are not Indian nationals or citizens whether near relatives or otherwise, the Authorisation Committee shall consider all such requests and the transplantation shall not be permitted if the recipient is a foreign national and donor is an Indian national unless they are near relatives.

(3) When the proposed donor and the recipient are not near relatives, the Authorisation Committee shall,-

- (i) evaluate that there is no commercial transaction between the recipient and the donor and that no payment has been made to the donor or promised to be made to the donor or any other person;
- (ii) prepare an explanation of the link between them and the circumstances which led to the offer being made;
- (iii) examine the reasons why the donor wishes to donate;
- (iv) examine the documentary evidence of the link, e.g. proof that they have lived together, etc.;
- (v) examine old photographs showing the donor and the recipient together;
- (vi) evaluate that there is no middleman or tout involved;
- (vii) evaluate that financial status of the donor and the recipient by asking them to give appropriate evidence of their vocation and income for the previous three financial years and any gross disparity between the status of the two must be evaluated in the backdrop of the objective of preventing commercial dealing;
- (viii) ensure that the donor is not a drug addict;
- (ix) ensure that the near relative or if near relative is not available, any adult person related to donor by blood or marriage of the proposed unrelated donor is interviewed regarding awareness about his or her intention to donate an organ or tissue, the authenticity of the link between the donor and the recipient, and the reasons for donation, and any strong views or disagreement or objection of such kin shall also be recorded and taken note of.

(4) Cases of swap donation referred to under subsection (3A) of section 9 of the Act shall be approved by Authorisation Committee of hospital or district or State in which transplantation is proposed to be done and the donation of organs shall be permissible only from near relatives of the swap recipients.

(5) When the recipient is in a critical condition in need of life saving organ transplantation within a week, the donor or recipient may approach hospital in-charge to expedite evaluation by the Authorisation Committee.

8. Removal and preservation of organs or tissues.—The removal of the organ(s) or tissue(s) shall be permissible in any registered retrieval or transplant hospital or centre and preservation of such removed organ(s) or tissue(s) shall be ensured in registered retrieval or transplant centre or tissue bank according to current and accepted scientific methods in order to ensure viability for the purpose of transplantation.

9. Cost for maintenance of cadaver or retrieval or transportation or preservation of organs or tissues.—The cost for maintenance of the cadaver (brain-stem dead declared person), retrieval of organs or tissues, their transportation and preservation, shall not be borne by the donor family and may be borne by the recipient or institution or Government or non-Government organisation or society as decided by the respective State Government or Union territory Administration.

10. Application for living donor transplantation.— (1) The donor and the recipient shall make jointly an application to grant approval for removal and transplantation of a human organ, to the competent authority or Authorisation Committee as specified in Form 11 and the papers for approval of transplantation would be processed by the registered medical practitioner and administrative division of the Institution for transplantation.

(2) The competent authority or Authorisation Committee shall take a decision on such application in accordance with the rule 18.

(3) If some State wants to merge Form 11 with Form 1, Form 2 or Form 3, they may do so, provided the content of the recommended Forms are covered in the merged Form and the same is approved by the State Government concerned.

11. Composition of Authorisation Committees.—(1) There shall be one State level Authorisation Committee.

(2) Additional Authorisation Committees in the districts or Institutions or hospitals may be set up as per norms given below, which may be revised from time to time by the concerned State Government or Union territory Administration by notification.

(3) No member from transplant team of the institution should be a member of the respective Authorisation Committee.

(4) Authorisation Committee should be hospital based if the number of transplants is twenty five or more in a year at the respective transplantation centres, and if the number of organ transplants in an institution or hospital are less than twenty-five in a year, then the State or District level Authorisation Committee would grant approval(s).

12. **Composition of hospital based Authorisation Committees.**— The hospital based Authorisation Committee shall, as notified by the State Government in case of State and by the Union territory Administration in case of Union territory, consist of,—

- (a) the Medical Director or Medical Superintendent or Head of the institution or hospital or a senior medical person officiating as Head - Chairperson;
- (b) two senior medical practitioners from the same hospital who are not part of the transplant team - Member;
- (c) two persons (preferably one woman) of high integrity, social standing and credibility, who have served in high ranking Government positions, such as in higher judiciary, senior cadre of police service or who have served as a reader or professor in University Grants Commission approved University or are self-employed professionals of repute such as lawyers, chartered accountants, doctors of Indian Medical Association, reputed non-Government organisation or renowned social worker - Member;
- (d) Secretary (Health) or nominee and Director Health Services or nominee from State Government or Union territory Administration - Member.

13. **Composition of State or District Level Authorisation Committees.**— The State or District Level Authorisation Committee shall, as notified by the State Government in case of State and by the Union territory Administration in case of Union territory, consist of,—

- (a) a Medical Practitioner officiating as Chief Medical Officer or any other equivalent post in the main or major Government hospital of the District - Chairperson;
- (b) two senior registered medical practitioners to be chosen from the pool of such medical practitioners who are residing in the concerned District and who are not part of any transplant team- Member;
- (c) two persons (preferably one woman) of high integrity, social standing and credibility, who have served in high ranking Government positions, such as in higher judiciary, senior cadre of police service or who have served as a reader or professor in University Grants Commission approved University or are self-employed professionals of repute such as lawyers, chartered accountants, doctors of Indian Medical Association, reputed non-Government organisation or renowned social worker - Member;
- (d) Secretary (Health) or nominee and Director Health Services or nominee from State Government or Union territory Administration—Member :

Provided that effort shall be made by the State Government concerned to have most of the members' ex-officio so that the need to change the composition of Committee is less frequent.

14. **Verification of residential status, etc.**—When the living donor is unrelated and if donor or recipient belongs to a State or Union territory, other than the State or Union territory where the transplantation is proposed to be undertaken, verification of residential status by Tehsildar or any other authorised officer for the purpose with a copy marked to the Appropriate Authority of the State or Union territory of domicile of donor or recipient for their information shall be required, as per Form 20 and in case of any doubt of organ trafficking, the Appropriate Authority of the State or Union territory of domicile or the Tehsildar or any other authorised officer shall inform police department for investigation and action as per the provisions of the Act.

15. **Quorum of Authorisation Committee.**— The quorum of the Authorisation Committee should be minimum four and the quorum shall not be complete without the participation of the Chairman, the presence of Secretary (Health) or nominee and Director of Health Services or nominee.

16. **Format of approval of Authorisation Committee.**— The format of the Authorisation Committee approval should be uniform in all the institutions in a State and the format may be notified by the respective State Government as per Form 18.

17. **Scrutiny of applications by Authorisation Committee.**— (1) Secretariat of the Authorisation Committee shall circulate copies of all applications received from the proposed donors and recipients to all members of the Committee along with all annexures, which may have been filed along with the applications.

(2) At the time of the meeting, the Authorisation Committee should take note of all relevant contents and documents in the course of its decision making process and in the event any document or information is found to be inadequate or doubtful, explanation should be sought from the applicant and if it is considered necessary that any fact or information requires to be verified in order to confirm its veracity or correctness, the same be ascertained through the concerned officer(s) of the State Government or Union territory Administration.

18. **Procedure in case of near relatives.**— (1) Where the proposed transplant of organs is between near relatives related genetically, namely, grandmother, grandfather, mother, father, brother, sister, son, daughter, grandson and granddaughter, above the age of eighteen years, the competent authority as defined at rule 2(c) or Authorisation Committee (in case donor or recipient is a foreigner) shall evaluate;

- (i) documentary evidence of relationship e.g. relevant birth certificates, marriage certificate, other relationship certificate from Tehsildar or Sub-divisional magistrate or Metropolitan Magistrate or

Sarpanch of the Panchayat, or similar other identity certificates like Electors Photo Identity Card or AADHAAR card; and

- (ii) documentary evidence of identity and residence of the proposed donor, ration card or voters identity card or passport or driving license or PAN card or bank account and family photograph depicting the proposed donor and the proposed recipient along with another near relative, or similar other identity certificates like AADHAAR Card (issued by **Unique Identification Authority of India**).
- (2) If in the opinion of the competent authority, the relationship is not conclusively established after evaluating the above evidence, it may in its discretion direct further medical test, namely, Deoxyribonucleic Acid (DNA) Profiling.
- (3) The test referred to in sub-rule (2) shall be got done from a laboratory accredited with National Accreditation Board for Testing and Calibration Laboratories and certificate shall be given in Form 5.
- (4) If the documentary evidences and test referred to in sub-rules (1) and (2), respectively do not establish a genetic relationship between the donor and the recipient, the same procedure be adopted on preferably both or at least one parent, and if parents are not available, the same procedure be adopted on such relatives of donor and recipient as are available and are willing to be tested, failing which, genetic relationship between the donor and the recipient will be deemed to have not been established.
- (5) Where the proposed transplant is between a married couple the competent authority or Authorisation Committee (in case donor or recipient is a foreigner) must evaluate the factum and duration of marriage and ensure that documents such as marriage certificate, marriage photograph etc. are kept for records along with the information on the number and age of children and a family photograph depicting the entire family, birth certificate of children containing the particulars of parents and issue a certificate in Form 6 (for spousal donor).
- (6) Any document with regard to the proof of residence or domicile and particulars of parentage should be relatable to the photo identity of the applicant in order to ensure that the documents pertain to the same person, who is the proposed donor and in the event of any inadequate or doubtful information to this effect, the Competent Authority or Authorisation Committee as the case may be, may in its discretion seek such other information or evidence as may be expedient and desirable in the peculiar facts of the case.
- (7) The medical practitioner who will be part of the organ transplantation team for carrying out transplantation operation shall not be a competent authority of the transplant hospital.
- (8) The competent authority may seek the assistance of the Authorisation Committee in its decision making, if required.
19. **Procedure in case of transplant other than near relatives.—**
Where the proposed transplant is between other than near relatives and all cases where the donor or recipient is foreign national (irrespective of them being near relative or otherwise), the approval will be granted by the Authorisation Committee of the hospital or if hospital based Authorisation Committee is not constituted, then by the District or State level Authorisation Committee.
20. **Procedure in case of foreigners.—**
When the proposed donor or the recipient are foreigners;
 - (a) a senior Embassy official of the country of origin has to certify the relationship between the donor and the recipient as per Form 21 and in case a country does not have an Embassy in India, the certificate of relationship, in the same format, shall be issued by the Government of that country;
 - (b) the Authorisation Committee shall examine the cases of all Indian donors consenting to donate organs to a foreign national (who is a near relative), including a foreign national of Indian origin, with greater caution and such cases should be considered rarely on case to case basis:
Provided that the Indian living donors wanting to donate to a foreigner other than near relative shall not be considered.
21. **Eligibility of applicant to donate.—** In the course, of determining eligibility of the applicant to donate, the applicant should be personally interviewed by the Authorisation Committee which shall be videographed and minutes of the interview shall be recorded.
22. **Precautions in case of woman donor.—**
In case where the donor is a woman, greater precautions ought to be taken and her identity and independent consent should be confirmed by a person other than the recipient.
23. **Decision of Authorisation Committee.—** (1) The Authorisation Committee (which is applicable only for living organ or tissue donor) should state in writing its reason for rejecting or approving the application of the proposed living donor in the prescribed Form 18 and all such approvals should be subject to the following conditions, namely:-
 - (i) the approved proposed donor would be subjected to all such medical tests as required at the relevant stages to determine his or her biological capacity and compatibility to donate the organ in question;
 - (ii) the physical and mental evaluation of the donor has been done to know whether he or she is in proper state of health and it has been certified by the registered medical practitioner in Form 4 that he or she is not mentally challenged and is fit to donate the organ or tissue:

Provided that in case of doubt for mentally challenged status of the donor the registered medical practitioner or Authorisation Committee may get the donor examined by psychiatrist;

- (iii) all prescribed forms have been and would be filled up by all relevant persons involved in the process of transplantation;
- (iv) all interviews to be video recorded.
- (2) The Authorisation Committee shall expedite its decision making process and use its discretion judiciously and pragmatically in all such cases where, the patient requires transplantation on urgent basis.
- (3) Every authorised transplantation centre must have its own website and the Authorisation Committee is required to take final decision within twenty four hours of holding the meeting for grant of permission or rejection for transplant.
- (4) The decision of the Authorisation Committee should be displayed on the notice board of the hospital or Institution immediately and should reflect on the website of the hospital or Institution within twenty four hours of taking the decision, while keeping the identity of the recipient and donor hidden.

24. Registration of hospital or tissue bank.— (1) An application for registration shall be made to the Appropriate Authority as specified in Form 12 or Form 13 or Form 14 or Form 15, as applicable and the application shall be accompanied by fee as specified below, payable to the Appropriate Authority by means of a bank draft, which may be revised, if necessary by the Central or State Government, as the case may be:-

- (i) for Organ or Tissue or Cornea Transplant Centre: Rupees ten thousand;
- (ii) for Tissue or Eye Bank: Rupees ten thousand;
- (iii) for Non-Transplant Retrieval Centre: Nil.
- (2) The Appropriate Authority shall, after holding an inquiry and after satisfying itself that the applicant has complied with all the requirements, grant a certificate of registration as specified in Form 16 and it shall be valid for a period of five years from the date of its issue and shall be renewable.
- (3) Before a hospital is registered under the provisions of this rule, it shall be mandatory for the hospital to appoint a transplant coordinator.

25. Renewal of registration of hospital or tissue bank.— (1) An application for the renewal of a certificate of registration shall be made to the Appropriate Authority at least three months prior to the date of expiry of the original certificate of registration and shall be accompanied by a fee as specified below, payable to the Appropriate Authority by means of a bank draft, which may be revised, if necessary by the Central or State Government, as the case may be,-

- (i) for Organ or Tissue or Cornea Transplant Centre: Rupees five thousand;
- (ii) for Tissue or Eye Bank: Rupees five thousand;
- (iii) for Non-Transplant Retrieval Centre: Nil.
- (2) A renewal certificate of registration shall be as specified in Form 17 and shall be valid for a period of five years.
- (3) If, after an inquiry including inspection of the hospital or tissue bank and scrutiny of its past performance and after giving an opportunity to the applicant, the Appropriate Authority is satisfied that the applicant, since grant of certificate of registration under sub-rule (2) of rule 24 has not complied with the requirements of the Act and these rules and the conditions subject to which the certificate of registration has been granted, shall, for reasons to be recorded in writing, refuse to grant renewal of the certificate of registration.

26. Conditions and standards for grant of certificate of registration for organ or tissue transplantation centres.— (1) No hospital shall be granted a certificate of registration for organ transplantation unless it fulfills the following conditions and standards, namely:-

A. General manpower requirement specialised services and facilities:

- (a) Twenty-four hours availability of medical and surgical, (senior and junior) staff;
- (b) twenty-four hours availability of nursing staff (general and specialty trained);
- (c) twenty-four hours availability of Intensive Care Units with adequate equipment staff and support system, including specialists in anesthesiology and intensive care;
- (d) twenty-four hours availability of blood bank (in house or access) , laboratory with multiple discipline testing facilities including but not limited to Microbiology, Bio-Chemistry, Pathology,-Hematology and Radiology departments with trained staff;
- (e) twenty-four hours availability of Operation Theater facilities (OT facilities) for planned and emergency procedures with adequate staff, support system and equipment;
- (f) twenty-four hours availability of communication system, with power backup, including but not limited to multiple line telephones, public telephone systems, fax, computers and paper photo-imaging machine;
- (g) experts (other than the experts required for the relevant transplantation) of relevant and associated specialties including but not limited to and depending upon the requirements, the experts in internal medicine, diabetology, gastroenterology, nephrology, neurology, pediatrics, gynecology, immunology and cardiology, etc., shall be available in the transplantation centre;

- (h) one medical expert for respective organ or tissue transplant shall be available in the transplanting hospital; and
- (i) Human Leukocyte Antigen (HLA) matching facilities (in house or outsourced) shall be available.

B. Equipments:

Equipments as per current and expected scientific requirements specific to organ (s) or tissue (s) being transplanted and the transplant centre should ensure the availability of the accessories, spare-parts and back-up, maintenance and service support system in relation to all relevant equipments.

C. Experts and their qualifications:

- (a) Kidney Transplantation:
M.S. (Gen.) Surgery or equivalent qualification with three years post M.S. training in a recognised transplant center in India or abroad and having attended to adequate number of renal transplantation as an active member of team;
- (b) Transplantation of liver and other abdominal organs:
M.S. (Gen.) Surgery or equivalent qualification with three years post M.S. experience in the speciality and having one year training in the respective organ transplantation as an active member of team in an established transplant center;
- (c) Cardiac, Pulmonary, Cardio-Pulmonary Transplantation:
M.Ch. Cardio-thoracic and vascular surgery or equivalent qualification in India or abroad with at least three years' experience as an active member of the team performing an adequate number of open heart operations per year and well-versed with Coronary by-pass surgery and Heart-valve surgery;
- (d) the hospital registered under Clinical Establishment (Registration and Regulation) Act, 2010 (23 of 2010) shall also follow the minimum standards prescribed in respect of manpower, equipment, etc., as prescribed under that Act;
- (e) the hospital registered shall have to maintain documentation and records including reporting of adverse events.
- (2) No hospital shall be granted a certificate of registration for tissue transplantation under the Act unless it fulfills the following conditions and standards, namely:-
 - (a) Cornea Transplantation:
M.D. or M.S. or Diploma (DO) in ophthalmology or equivalent qualification with three months post M.D. or M.S or DO training in Corneal transplant operations in a recognised hospital or institution;
 - (b) Other tissues such as heart valves, skin, bone, etc.:
Post graduate degree (MD or MS) or equivalent qualification in the respective specialty with three months post M.D. or M.S training in a recognised hospital carrying out respective tissue transplant operations and for heart valve transplantation, and the qualification and experience of expert shall be MCh degree in Cardiothoracic and Vascular Surgery (CTVS) or equivalent qualification with three months post MCh training in a recognised hospital carrying out heart valve transplantation;
 - (c) the Hospital registered under Clinical Establishment (Registration and Regulation) Act, 2010(23 of 2010) shall also follow the minimum standards prescribed in respect of manpower, equipment, etc., as prescribed under that Act;
 - (d) the Hospital registered shall have to maintain documentation and records including reporting of adverse events.

27. Conditions and standards for grant of certificate of registration for organ retrieval centres.—

- (1) The retrieval center shall be registered only for the purpose of retrieval of organ from deceased donors and the organ retrieval centre shall be a hospital having Intensive Care Unit (ICU) facilities along with manpower, infrastructure and equipment as required to diagnose and maintain the brain-stem dead person and to retrieve and transport organs and tissues including the facility for their temporary storage.
- (2) All hospitals registered as transplant centres shall automatically qualify as retrieval centres.
- (3) The retrieval centre should have linkages with nearby Government hospital designated for post-mortem, for retrieval in medico-legal cases.
- (4) Registration of hospital for surgical tissue harvesting from deceased person and for surgical tissue residues, that are routinely discarded, shall not be required.

28. Conditions and standards for grant of certificate of registration for tissue banks.—

A. Facility and premises:

- (1) Facilities must conform to the standards and guidelines laid down for the purpose and the States and Union territories may have separate registration fee and procedure to keep track of their tissue bank activities.
- (2) The respective State or Union territory Appropriate Authority may constitute an expert committee for advising on the matter related to tissue specific standards and related issues.
- (3) The tissue bank must have written guidelines and standard operating procedures for maintenance of its premises and facilities which include-
 - (a) controlled access;
 - (b) cleaning and maintenance systems;
 - (c) waste disposal;

- (d) health and safety of staff;
- (e) risk assessment protocol; and
- (f) follow up protocol.

- (4) Equipments as per scientific requirements specific to tissue (s) being procured, processed, stored and distributed and the tissue bank should ensure the availability of the accessories, spare-parts and back-up, maintenance and service support for all equipments.
- (5) Air particle count and microbial colony count compliance shall be ensured for safety where necessary.
- (6) Storage area shall be designated to avoid contact with chemicals or atmospheric contamination and any known source of infection.
- (7) Storage facility shall be separate and distinguish tissues, held in quarantine, released and rejected.

B. Donor screening:

- (8) Complete screening of donor must be conducted including medical or social history and serological evaluation for medical conditions or disease processes that would contraindicate the donation of tissues and the report of corneas or eyes not found suitable for transplantation and their alternate use shall be certified by a committee of two Ophthalmologists.

C. Laboratory tests:

- (9) Facility for relevant Laboratory tests for blood and tissue samples shall be available and testing of blood and tissue samples shall begin at Donor Screening and continue during retrieval and throughout processing.

D. Procurement and other procedures:

- (10) Procurement of tissue must be carried out by registered health care professionals or technicians having necessary experience or special training.
- (11) Consent for the procurement shall be obtained.
- (12) Procurement records shall be maintained.
- (13) Standard operating procedure for following shall be followed, namely :-
 - (a) procurement or Retrieval and transplantation;
 - (b) processing and sterilisation;
 - (c) packaging, labeling and storage;
 - (d) distribution or allocation;
 - (e) transportation; and
 - (f) reporting of serious adverse reactions.

E. Documentation and Records:

- (14) A log of tissue received and distributed shall be maintained to enable traceability from the donor to the tissue and the tissue to the donor and the records shall also indicate the dates and the identities of the staff performing specific steps in the removal or processing or distribution of the tissues.

F. Data Protection and Confidentiality:

- (15) A unique donor identification number shall be used for each donor, and access to donor records shall be restricted.

G. Quality Management:

- (16) The Quality Management System shall define quality control procedures that include the following, namely:-
 - (a) environmental monitoring;
 - (b) equipment maintenance and monitoring;
 - (c) in –process controls monitoring;
 - (d) internal audits including reagent and supply monitoring;
 - (e) compliance with reference standards, local regulations, quality manuals or documented standard operating procedures; and
 - (f) monitoring work environment.

H. Recipient Information:

- (17) All tissue recipients shall be followed up and prompt and appropriate corrective and preventive actions taken in case of adverse events.

29. Qualification, role, etc., of transplant coordinator.— (1) The transplant coordinator shall be an employee of the registered hospital having qualification such as:

- (a) graduate of any recognised system of medicine; or
 - (b) Nurse; or
 - (c) Bachelor's degree in any subject and preferably Master's degree in Social work or Psychiatry or Sociology or Social Science or Public Health
- (2) The concerned organisation or institute shall ensure initial induction training followed by retraining at periodic interval and the transplant coordinator shall counsel and encourage the family members or near relatives of the

deceased person to donate the human organ or tissue including eye or cornea and coordinate the process of donation and transplantation.

- (3) The transplant coordinator or counselor in a hospital registered for eye banking shall also have qualification specified in sub-rule (1).

30. Advisory committee of the Central or State Government to aid and advise appropriate authority.— (1) The Central Government and the State Government, as the case may be, shall constitute by notification an Advisory Committee under Chairpersonship of administrative expert not below the rank of Secretary to the State Government for a period of two years to aid and advise the Appropriate Authority and the two medical experts referred to in clause(b) of sub-section(2) of section 13A of the Act shall possess a postgraduate medical degree and at least five years' experience in the field of organ or tissue transplantation.

(2) The terms and conditions for appointment to the Advisory Committee are as under:

- (a) the Chairperson and members of the Committee shall be appointed for a period of two years;
- (b) the Chairperson and members of the Committee shall be entitled to the air fare and other allowances to attend the meeting of the Committee equivalent to the officer of the level of the Joint Secretary to the Government of India;
- (c) the Central Government or State Government or Union territory Administration shall have full powers to replace or remove the Chairperson and the members in cases of charges of corruption or any other charges after giving a reasonable opportunity of being heard;
- (d) the Chairperson and members can also resign from the Committee for personal reasons;
- (e) there shall not be a corruption or criminal case pending against Chairperson and members at the time of appointment;
- (f) the Chairperson or any of the members shall cease to function if charges have been framed against him or her in a corruption or criminal case after having been given a reasonable opportunity of being heard.

31. Manner of establishing National or Regional or State Human Organs and Tissues Removal and Storage Networks and their functions.— (1) There shall be an apex national networking organisation at the centre, as the Central Government may by notification specify.

(2) There shall also be regional and State level networking organisations where large number of transplantation of organ(s) or tissue (s) are performed as the Central Government may by notification specify.

(3) The State units would be linked to hospitals, organ or tissue matching laboratories and tissue banks within their area and also to regional and national networking organisations.

(4) The broad principles of organ allocation and sharing shall be as under,—

- (a) The website of the transplantation center shall be linked to State or Regional cum State or National networks through an online system for organ procurement, sharing and transplantation.
- (b) patient or recipient may get registered through any transplant centre, but only one centre of a State or region (if there is no centre in the State) and his or her details shall be made available online to the networking organisations, who shall allocate the registration number, which shall remain same even if patient changes hospital;
- (c) the allocation of the organ to be shared, is to be decided by the State networking organization and by the National networking organization in case of Delhi;
- (d) all recipients are to be listed for requests of organs from deceased donors, however priority is to be given in following order, namely:-
 - (i) those who do not have any suitable living donor among near relatives;
 - (ii) those who have a suitable living donor available among near relatives but the donor has refused in writing to donate; and
 - (iii) those who have a suitable living donor available and who has also not refused to donate in writing;
- (e) sequence of allocation of organs shall be in following order: State list---Regional List----National List----Person of Indian Origin ----Foreigner;
- (f) the online system of networking and framework and formats of national registry as mentioned under rule 32 shall be developed by the apex networking organisation which shall be followed by the States Governments or Union territory Administrations and the allocation criteria may be State specific which shall be finalised and determined by the State Government, in consultation with the State level networking organisation, wherever such organisation exists:

Provided that the organ sharing and networking policy of States or locations of hospitals shall not be binding on the Armed Forces Medical Services (AFMS) and the armed forces shall be free to have their own policy of organ or tissue allocation and sharing, and the Director General Armed Forces Medical Services shall have its own networking between the Armed Forces Medical Services hospitals, who shall be permitted to accept organs when available from hospitals within their State jurisdiction.

- (5) The networking organisations shall coordinate retrieval, storage, transportation, matching, allocation and transplantation of organs and tissues and shall develop norms and standard operating procedures for such activities and for tissues to the extent possible.
- (6) The networking organisations shall coordinate with respective State Government for establishing new transplant and retrieval centres and tissue banks and strengthening of existing ones.
- (7) There shall be designated organ and tissue retrieval teams in State or District or institution as per requirement, to be constituted by the State or Regional networking organisation.
- (8) For tissue retrieval, the retrieval teams shall be formed by the State Government or Union territory Administration where ever required.
- (9) Networking shall be e-enabled and accessible through dedicated website.
- (10) Reference or allocation criteria would be developed and updated regularly by networking organisations in consultation with the Central or State Government, as the case may be.
- (11) The networking organisation(s) shall undertake Information Education and Communication (IEC) Activities for promotion of deceased organ and tissue donation.
- (12) The networking organisation(s) shall maintain and update organ or tissue Donation and Transplant Registry at respective level.

32. Information to be included in National Registry regarding donors and recipients of human organ and tissue.— The national registry shall be based on the following, namely:-

Organ Transplant Registry:

- (1) The Organ Transplant Registry shall include demographic data about the patient, donor, hospitals, recipient and donor follow up details, transplant waiting list, etc., and the data shall be collected from all retrieval and transplant centers.
- (2) Data collection frequency, etc., will be as per the norms decided by the Advisory Committee which may preferably be through a web-based interface or paper submission and the information shall be maintained both specific organ wise and also in a consolidated format.
- (3) The hospital or Institution shall update its website regularly in respect of the total number of the transplantations done in that hospital or institution along with reasonable detail of each transplantation and the same data should be accessible for compilation, analysis and further use by authorised persons of respective State Governments and Central Government.
- (4) Yearly reports shall be published and also shared with the contributing units and other stakeholders and key events (new patients, deaths and transplants) shall be notified as soon as they occur in the hospital and this information shall be sent to the respective networking organisation, at least monthly.

Organ Donation Registry:

- (5) The Organ Donation Registry shall include demographic information on donor (both living and deceased), hospital, height and weight, occupation, primary cause of death in case of deceased donor, associated medical illnesses, relevant laboratory tests, donor maintenance details, driving license or any other document of pledging donation, donation requested by whom, transplant coordinator, organs or tissue retrieved, outcome of donated organ or tissue, details of recipient, etc.

Tissue Registry:

- (6) The Tissue Registry shall include demographic information on the tissue donor, site of tissue retrieval or donation, primary cause of death in case of deceased donor, donor maintenance details in case of brain stem dead donor, associated medical illnesses, relevant laboratory tests, driving license or any other document pledging donation, donation requested by whom, identity of counsellors, tissue(s) or organ(s) retrieved, demographic data about the tissue recipient, hospital conducting transplantation, transplant waiting list and priority list for critical patients, if these exist, indication(s) for transplant, outcome of transplanted tissue, etc.
- (7) Yearly reports in respect of National Registry shall be published and also shared with the contributing units and other stakeholders

Pledge for organ or tissue donation after death:

- (8) Those persons, who, during their lifetime have pledged to donate their organ(s) or tissue(s) after their death, shall in Form 7 deposit it in paper or electronic mode to the respective networking organisation(s) or institution where the pledge is made, who shall forward the same with the respective networking organisation and the pledger has the option to withdraw the pledge through intimation.
- (9) The Registry will be accessible on-line through dedicated website and shall be in conformation to globally maintained registry (ies), besides having national, regional and State level specificities.
- (10) National or regional registry shall be compiled based on similar registries at State level.
- (11) The identity of the people in the database shall not be put in public domain and measures shall be taken to ensure security of all collected information.
- (12) The information to be included shall be updated as per prevalent global practices from time to time.

33. Appeal.— (1) Any person aggrieved by an order of the Authorisation Committee under sub-section (6) of section 9 or by an order of the Appropriate Authority under sub-section (2) of section 15 or sub-section (2) of section 16 of the Act, may, within thirty days from the date of receipt of the order, prefer an appeal to the Central Government in case of the Union territories and respective State Government in case of States.

Annexure – 1

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)

Registration Number (To be allotted by Organ Donor Registry).....
 I,.....S/o,D/o,W/o.....
 aged.....and date of birth.....resident of.....
 in the presence of persons mentioned below hereby unequivocally authorise the removal of following organ(s) and/or tissue(s), from my body after being declared brain stem dead by the board of medical experts and consent to donate the same for therapeutic purposes.

Please tick as applicable

(Following tissues can also be donated after
brain stem death as well as cardiac death)

Heart
 Lungs
 Kidneys
 Liver
 Pancreas

Corneas/Eye Balls
 Skin
 Bones
 Heart Valves
 Blood Vessels

Any Other Organ (Pl. specify).....
 All Organs

Any other Tissue (Pl. specify).....
 All Tissues

My blood group is (if known).....

Signature of Pledger.....
 Address for correspondence.....
 Telephone No.....
 Email :
 Dated:.....

(Note: In case of online registration of pledge, one copy of the pledge will be retained by pledger, one by the institution where pledge is made and a hard copy signed by pledger and two witnesses shall be sent to the nodal networking organisation.)

(Signature of Witness 1)

1. Shri/Smt./Km.....S/o,D/o,W/o.....aged.....resident
 of.....Telephone No.....
 Email:.....

(Signature of Witness 2)

2. Shri/Smt./Km.....S/o,D/o,W/o.....aged.....resident
 of.....Telephone No.....
 Email:..... is a near relative to the donor as

Dated.....
 Place

Note:

- (i) 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.

Annexure 2

FORM 8

For Declaration cum consent

(To be filled by near relative or lawful possessor of brain-stem dead person)

[See rules 5(1)(b), 5(4)(b) and 5(4)(d)]

DECLARATION AND CONSENT FORM

I.....S/o,D/o,W/o.....aged.....resident of.....
in the presence of persons mentioned below, hereby declare that:

1. I have been informed that my relative (specify relation)
S/o,D/o,W/o.....aged.....has been declared brain-stem dead/dead
2. To the best of my knowledge (Strike off whichever is not applicable):
 - a) He/She. (Name of the deceased) had / had not, authorized before his/her death, the removal of(Name of organ/tissue/both) of his/her body after his/her death for therapeutic purpose. The documentary proof of such authorizations is enclosed/not available
 - b) He/ She (Name of the deceased) had not revoked the authority as at No. 2 (a)above (If applicable) .
 - c) There are reasons to believe that no near relative of the said deceased person has objection to any of his/her organs/tissue being used for therapeutic purposes.
3. I have been informed that in the absence of such authorization, I have the option to either authorize or decline donation of organ /tissue /both including eye / cornea of (Name of the deceased) for therapeutic purposes. I also understand that if corneas/eyes are not found suitable for therapeutic purpose, then may be used for education/research.
4. I hereby authorize / do not authorize removal of his/her body organ(s) and/or tissue(s), namely (Any organ and tissue/ Kidney /Liver /Heart /Lungs /Intestine /Cornea /Skin /Bone /Heart Valves /Any other; please specify) for therapeutic purposes. I also give permission for drawing of a blood sample for serology testing and am willing to share social/behavioral and medical history to facilitate proper screening of the donor for safe transplantation of the organs/ tissues.

Date.....

Signature of near relative /person
in lawful possession of the dead body,
and address for correspondence*.

Place Telephone No.....Email:

* in case of the minor the declaration shall be signed by one of the parent of the minor or any near relative authorised by the parent. In case the near relative or person in lawful possession of the body refuses to sign this form, the same shall be recorded in writing by the Registered Medical Practitioner on this Form.

(Signature of Witness 1)

1. Shri/Smt./Km.....S/o,D/
o,W/o.....
aged..... resident of..... Telephone No.....
Email:

(Signature of Witness 2)

2. Shri/Smt./Km.....S/o,D/o,W/o.....aged.....
resident ofTelephone No.....Email:

Annexure 3

FORM 9

For unclaimed body in a hospital or prison

(To be completed by person in lawful possession of the unclaimed body)

[see rule 5(1)(b)]

I.....S/o,D/o,W/o.....
aged..... resident ofhaving lawful possession
of the dead body of Shri/Smt./Km.....
S/o,D/o,W/o..... aged.....resident of
.....and having known that no person has come forward
to claim the body of the deceased after 48 hours of death and there being no reason to believe
that any person is likely to come to claim the body I hereby, authorize removal of his/her body
organ(s) and/or tissue(s), namely..... for therapeutic purposes.

Signature, Name, designation and Stamp of person
in lawful possession of the dead body.

Dated..... Place.....

Address for correspondence.....
Telephone No Email

(Signature of Witness 1)

1.Shri/Smt./Km.....S/o,D/o,W/o.....aged.....
resident of..... Telephone No.....Email

(Signature of Witness 2)

2.Shri/Smt./Km.....S/o,D/
o,W/o.....
aged..... resident of Telephone No.....
Email

Annexure 4

FORM 15

APPLICATION FOR REGISTRATION OF EYE BANK, CORNEAL TRANSPLANTATION CENTRE, EYE RETRIEVAL CENTRE UNDER TRANSPLANTATION OF HUMAN ORGANS ACT

[Refer rule 24(1)]

I. EYE BANKING:

A.	EYE BANK and institution affiliated Ophthalmic / General Hospital	
	<ol style="list-style-type: none"> 1. Name 2. Address 3. Government/Private/Voluntary 4. Teaching /Non- teaching 5. IEC for Eye Donation 	
B.	REMOVAL OF EYE BALLS AND STORAGE:	
	1. Availability of adequate trained and qualified personnel for removal of whole globe or corneal (annex detail)	Yes/No
	2. Names, qualification and address of the designated staff who will be doing removal of whole globe / cornea retrieval. (annex details)	Yes/No
	3. Availability of following as per requirement: <ol style="list-style-type: none"> a) Whether register maintained for tissue request received from surgeon of corneal transplant centre. b) Telephone arrangement available. (Dedicated Telephone Number.....) c) Transport facility for collecting Eyeballs from outside: d) Sets of instruments for removal of whole globe /cornea as per requirement e) Special bottles with stands for preservation of Eye balls/ cornea during transit. f) Suitable preservation media g) Biomedical Waste Management. h) Uninterrupted Power supply. 	Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No
C	Manpower	
	1. Incharge / Director (Ophthalmologist) -1	
	2. Eye Bank Technician- 2	
	3. Eye Donation Counselors (ERC)-2 per attached HCRP (Hospital Cornea Retrieval Cornea Programme) Hospital, who will be posted at eye Bank.	
	4. Multi task Staff(MTS) -2	
D.	Space requirement for eye Banks (400sqft minimum)	Yes/No
E.	RECORDS	
	1. Arrangement for maintaining the records	Yes/ No
	2. Arrangement for registration of pledges,/ donors and maintenance of utilization report	Yes/ No
	3. Computer with internet facility and Printer	Yes/ No

F.	EQUIPMENT: 1. Slit Lamp Biomicroscope-1 2. Specular Microscope for Eye Bank-1 3. Laminar flow(Class II)-1 4. Sterilization facility (In-house or outsourced) 5. Refrigerator with temperature monitoring for preservation of eye balls/ Cornea-1	Yes/No
G.	LABORATORY FACILITIES 1. Facility for HIV, Hepatitis B and C testing. 2. If no where do you avail it? Please mention Name and address of institute. 3. Facility for culture and sensitivity of Corneoscleral ring.	Yes/No Yes/No Yes/No
H.	RENEWAL OF REGISTRATION: Period of renewal 5years after last registration. Minimum of 50 corneas to be collected in 5 years. Maintenance of eye bank standards (as per Guidelines)	
II. EYE RETRIEVAL CENTRE (ERC):		
A.	RETRIEVAL CENTRE– A Centre affiliated to an Eye Bank 1. Name 2. Address 3. Government/Private/Voluntary 4. Teaching /Non- teaching 5. Information, Education and Communication Activities for Eye Donation 6. Name of Eye Bank to which ERC is affiliated.	
B.	REMOVAL OF EYE BALLS AND STORAGE: 1. Manpower : Adequate trained and qualified personnel for removal of eye balls/cornea (annex detail): a. Incharge / Director) -1 b. Technician -1 c. MTS (Multi task Staff) -1 2. Transport facility(or outsource) with storage medium	
C	Names, qualification and address of the personnel who will be doing enucleation/ removal of cornea. (annex details)	
D	AVAILABILITY OF FOLLOWING: 1. Telephone (Number.....) 2. Ambulance/ vehicle or funds to pay taxi for collecting eyeballs from outside: 3. Sets of instruments for removal of Eye Balls/cornea 4. Special bottles with stands for preservation of 5. Eye balls/ cornea during transit: 6. Suitable preservation media 7. Waste Disposal (Biomedical waste Management) 8. Space requirement: Designated area	
E	RECORDS 1. Arrangement for maintaining the records	

F	EQUIPMENT: 1. Sterilization facility 2. Refrigerator temperature control 24 hrs for preservation of Eye balls/ Cornea.(power back up) - 1 3. The retrieval centre is affiliated with an Eye bank and Eye Bank is only authorised to distribute corneas.	
III. CORNEAL TRANSPLANTATION CENTRE		
A	1. Name of the Transplant Centre /hospital: 2. Address: 3. Government/Private/Voluntary: 4. Teaching /Non- teaching: 5. IEC for Eye Donation: Yes/No 6. Name of the registered Eye Bank for procuring tissue:	
B	Staff details: 1. No. of permanent staff member with their designation. 2. (Note : Eye Surgeon's Experience : 3 month post MD/MS/DNB/DO) 3. No. of temporary staff with their designation 4. Trained persons for Keratoplasty and Corneal Transplantation with their names and 5. qualifications: 2 (one Corneal Transplant surgeon should be on the pay roll of the Institute)	
C	Equipment : Slit lamp, Clinical Specular, Keratoplasty or intraocular instruments	
D	OT facilities	
E	Safe Storage facility	
F	Records Registration and follow up	
G	Any other information	

The above said information is true to the best of my knowledge and I have no objection to any scrutiny of our facility by authorised personnel. A Bank draft/cheque of Rs. 10000/- for new registration and Rs 5000/- for renewal of registration drawn in favour of

..... is enclosed.

Head of the Institute
(Name and designation)

Annexure 5

FORM 16
CERTIFICATE OF REGISTRATION FOR PERFORMING ORGAN/TISSUE
TRANSPLANTATION/RETRIEVAL AND/OR TISSUE BANKING

(See rule 24(2))

This is to certify that Hospital/Tissue Bank located at..... has been inspected and certificate of registration is granted for performing the organ/tissue retrieval/ transplantation/ banking of the following organ(s)/tissue(s) (mention the names) under the Transplantation of Human Organs Act, 1994 (42 of 1994):-

- 1.
- 2.
- 3.
- 4.

This certificate of registration is valid for a period of five years from the date of issue.

This permission is being given with the current facilities and staff shown in the present application form. Any reduction in the staff and/or facility must be brought to the notice of the undersigned.

Signature of Appropriate Authority.....

Seal:

Date.....

Place.....

Annexure 6

FORM 17

Certificate of Renewal of Registration

(To be given by the appropriated authority on the letter head)

[See rule 25(2)]

This is with reference to the application dated..... from..... (Name of the hospital/tissue bank) for renewal of certificate of registration for performing organ(s)/tissue(s) retrieval/transplantation/banking under the Transplantation of Human Organs Act, 1994 (42 of 1994).

After having considered the facilities and standards of the above-said hospital/tissue bank, the Appropriate

Authority hereby renews the certificate of registration of the said hospital/tissue bank for a period of five years.

This renewal is being given with the current facilities and staff shown in the present application form.

Any reduction in the staff and/or facility must be brought to the notice of the undersigned.

Signature of Appropriate Authority.....

Seal.....

Place.....

Date.....

Annexure 7

ALLOCATION CRITERIA FOR CORNEAS

Cornea transplant is supported by cornea donation from a deceased donor. Recipient allocation needs to be standardized. The allocation of organs/tissues is a complex process, influenced by a number of factors including medical urgency, capacity to best benefit, donor/recipient matching and logistical factors. Following facts related to cornea transplantation needs to be kept in mind while making a standard policy for allocation:

CERTAIN FACTS

1. There is disparity between number of recipients requiring transplant and the availability of corneas suitable for transplantation.
2. Some patients need corneal transplant on priority basis because of their medical condition, as delay in transplant may lead to considerable morbidity.
3. Corneas not suitable for transplantation for optical purpose may sometimes be useful for emergency therapeutic or tectonic use or for anterior lamellar keratoplasty, but it is not necessary for all such corneas to be used as there may not be a suitable patient for such purpose at the appropriate place or time.

REGISTRATION, WAIT LISTING and SCORING of PATIENTS for CORNEA TRANSPLANT

1. Patient can be of any age or gender.
2. Patient should be a case of corneal disease treatable by keratoplasty.
3. Patient should be an Indian National until the local backlog is cleared as per THOTA distribution policy in letter and spirit (refer page para).
4. Each patient is to be registered in ONE hospital which is registered for corneal transplant under THOTA.
5. Patients' complete details including multiple IDs are to be put by the respective hospital through an online registration form on www.notto.gov.in.
6. One recipient can be registered ONLY IN ONE HOSPITAL, though he/she can change the hospital at any stage and his allocation scoring will not change. Recognition of the patient with new hospital will be applicable only after one month of change in hospital.
7. Status of patient must be updated by the registering hospital EVERY YEAR into active, inactive i.e. still to remain on waiting list or to be removed due to any reason.
8. Patients should be registered by a corneal transplant surgeon through a registered transplant centre.
9. Non optical grade corneas are generally more easily available and often do not get

transplanted so any demand for such corneas should be encouraged as they can be utilized for anterior lamellar keratoplasty and emergency therapeutic or tectonic keratoplasty.

10. SCORING SYSTEM FOR PRIORITIZATION IN ALLOCATION OF OPTICAL GRADE TRANSPLANTABLE CORNEA

S. N	Criteria for scoring	Points allotted
1	Visual Disability bilateral blindness i.e. BCVA in better eye < 3/60 economic blindness i.e. BCVA in better eye < 6/60 visual disability i.e. BCVA better eye < 6/18	+ 3 + 2 + 1
2	Bullous Keratopathy or endothelial failure such as Fuchs Dystrophy eligible for endothelial keratoplasty with good visual prognosis	+ 3
3	Primary donor failure	+ 4
4	Age of recipient	+ 3 < 6 years + 2 6-12 years +1 12-18 years
5	Associated diseases affecting inferior outcome Healed keratitis with deep vascularization in > 2 quadrants or adherent leucoma Associated with uncontrolled glaucoma Expected Poor visual potential due to posterior segment pathology/ Squint	- 2 - 2 - 2
6	Emergency Graft with potential for good prognosis* Impending perforation Perforation Progressive infective keratitis *If poor prognosis then non optical grade cornea can be directly utilized without waiting	+4

BROAD PRINCIPLES FOR ALLOCATION

Considering the above facts, donated corneas should be used in a way that balances medical need of patient with the likelihood of successful transplantation outcome, taking into account the following general criteria in considering potential recipient for allocation of organs.

1. No transplantable cornea should go waste for the want of best allocation.
2. Transplantable optical grade corneas must be allocated in a timely manner so that they can be suitably transplanted. Non optical grade corneas cleared for anterior lamellar, therapeutic or tectonic keratoplasty should be matched with best suited recipient and utilized as best possible. General public and donor families should be made aware that sometimes these corneas may not be utilized due to various reasons. Eye Banks should focus efforts on collecting transplantable optical grade corneas and avoid wastage.
3. **First priority (Top priority)** of cornea is for emergency graft with good potential and bilateral blindness because of the seriousness of the corneal condition and extent of visual disability of the patient respectively. "Urgent Listed Patient" will be the way to register a case that requires an emergency surgery; however, this may not necessarily

mean that an optical grade tissue must be arranged. Primary donor failure can also be listed in this category.

- Criteria for urgent listing for cornea transplant
 - Advanced corneal ulcers/infectious keratitis with progressive worsening/relentless progression/impending perforation/perforation
 - Priority list should be reviewed every 3 months by the State Organ and Tissue Transplant Organization (SOTTO) Cornea Transplant Monitoring Committee/Regulatory Authority
 - If there is a priority patient listed in the CITY WAITING LIST, then the first available transplantable optical grade cornea should go to the priority patient. If there are many patients listed on priority list, then the next criteria of selecting the patient will be allocation scoring.
4. **Second priority** is for visually handicapped BCVA < 6/60 and > 3/60 or endothelial keratoplasty with good prognosis.
 5. **Third priority** is for unilateral blindness with good prognosis for visual gain and graft survival
 6. **Fourth priority** is for unilateral blindness with poor prognosis for vision and graft survival Allocation in any of the above priority categories will be given to patient having highest score generated out of computerized scoring system. If more than one patient has same score in that category, then allocation will be in order of chronological sequence.
 7. Cornea from Pediatric donor first will be offered for to pediatric patient. If no paediatric patient eligible, then to adult patient.
 8. Cornea retrieved from a government hospital will be allocated as follows
Patients listed in Government hospitals list, then Patient listed out of private hospital list
 9. Cornea retrieved from a private hospital will be allocated as follows:

Patients listed in private hospitals list, then Patient listed out of government hospital list
 10. In order to minimize wastage, most donated corneas should be allocated within the state, where retrieval has been done.
 11. Allocation will be done first based on city (NCR of Delhi) waiting list. If no recipient eligible in city waiting list, then allocation will be done to nearby state in the ROTTO and then to other ROTTO nationally.
 12. In case of hospital which is transplant hospital that does retrieval as well as transplant. One cornea retrieved will be used locally and one should be shared if there is a pressing need in any other center.
 13. In view of the complexity involved in allocating corneas, the short storage time and the large volumes in comparison with other organs it is best that allocation etc. be done by the individual eye banks following the prescribed pattern. SOTTO and NOTTO can play monitoring and regulatory roles respectively as is done by the government administered FDA in USA.

RECIPIENT REGISTRATION, LISTING AND SCORING SYSTEM ON THE WAITING LIST

(to be prepared by corneal transplant surgeon and sent by transplant centre to NOTTO and in house eye bank or CDS)

1. Patient is to be registered by the concerned hospital through online registration form on www.notto.gov.in.
2. Patient should be meeting standard criteria for need for Cornea Transplant and should be Indian citizen till the national waiting list especially of bilaterally blind is cleared
3. International Patient can be registered on humanitarian grounds. Can be considered by the respective SOTTOs, with due permission from competent authority, if there is no local/ National patient waiting for the same or if a situation of surplus tissue exists locally at the time so that there is no wastage. They can also be registered and undergo emergency keratoplasty with non-optical grade cornea as these may be in surplus.
4. Patient should be registered Only in One hospital registered under THOTA.
5. Corneal Transplant Centres can submit their waiting list to in house eye bank if available, nearest eye bank and also CDS (Centralized Distribution System).
6. Status of patient must be updated by the hospital monthly for non-urgent and daily for urgent cases

ALLOCATION ALGORITHM

Once there is a transplantable optical grade cornea available in eye bank cleared for release, the eye bank should follow the steps outlined below

- STEP-1:** Check waiting list and follow principle of allocation based on criteria of age/emergency/urgency/government or private hospital
- STEP-2:** If there is a suitable recipient in local in-house waiting list as emergency/top priority, as per accepted criteria and registered as such, then available cornea will be offered to transplant surgeon/centre responsible for the patient. If there are more than two recipients eligible, preference will be given according to the priority number and ease of access. If two recipients are in similar situation, then allocation will be done in chronological order. If there is no in-house patient, then it should be transferred to central cornea repository for centralized distribution.
- STEP-3:** If there is no emergency/top priority case, then cornea will go to the recipient in the next priority sequentially i.e. second, third and then fourth.
- STEP-4:** If there is no locally listed case, then it should be offered to state and then nationally. SOTTO and ROTTO should keep NOTTO updated about priority list in their jurisdiction. Each hospital to maintain their own waiting list which should be notified to the NOTTO.

Reference Notes:

- Cornea retrieved from a government hospital will be allocated as follows
 - o Government hospitals by rotation.

- o If there are no takers in the government hospitals then it will be offered to private hospitals as per the Rota,

-Cornea retrieved from a private hospital will be allocated as follows:

- o Rota of private hospitals and then
- o Rota of government hospitals

-If there is a cornea of borderline grade or status for example age above 80 years and endothelial count near 2000 that has been refused by other center then the center which agrees to use the cornea will not lose its priority in the next round of allocation.

-Patients (recipients) registered for NCR will need to provide proof of residence within NCR

-Foreign Nationals will be considered only after the cornea is not to be used for any Indian patient in compliance with the law. This will not be applicable for non-optical grade corneas as these are in surplus in India

-If a patient is offered surgery and refuses more than two times then the patient will be pushed back by 2 months.

INTER-STATE ISSUES

1. It is expected that all SOTTOs will broadly follow the same guidelines /protocols for cornea allocation.
2. The appropriate authority of state government in consultation with SOTTO should approve the inter-state transport of corneas for transplantation. As corneas have a limited shelf life a blanket approval should be taken and not required for each and every such situation.

All States should agree to share the surplus tissues Nationally to avoid wastage

Appendix - 1

DONOR CALL – INITIAL INFORMATION

Time _____ Date _____

Name of the donor _____ \

Age and Sex of the donor _____

Time of death _____ Cause of death _____

Name of the caller _____

Relationship with the donor _____ Contact Phone _____

Address (where the body is available) _____

Death Certificate Available Not available

Receiver's Name _____ Designation _____

Case# _____ Month _____ Year _____

Signature

Appendix - 2

EYE DONOR MEDICAL PARTICULARS

1. Name of the Deceased : _____
2. Age & Sex : _____
3. Permanent address : _____

4. Date of Death : _____
5. Time of Death : _____
6. Place of Death : _____
7. Manner of Death : Natural Accident Suicide Homicide
 Pending investigation
8. Cause of Death: _____
9. Secondary Causes : _____
10. Visible Identification Marks : _____
11. Information given by next-of-kin : & Relationship with the donor _____
12. Death Certificate : Available _____ Not Available _____
Reason for not obtaining death certificate copy: _____
13. The certificate is under process & will be submitted later _____

Signature _____

Name of Next-of-kin _____

I hereby certify the death of Mr. / Mrs. / Ms. _____

Signature
Doctor attending Eye donation call)

Date:

Name: _____

Place:

Regn. No. _____

Appendix - 3

DONOR INFORMATION SHEET

For Hospital donor

Eye Bank No _____

Name of the donor _____

Institution _____

Post Mortem / History Number _____

Medical Examiner / Attending Physician _____

Age : _____ Religion: _____ Sex : _____

Date of injury / Admittance :

Death : Date _____ Hours _____

Enucleation / In situ Excision : Date _____ Hours _____

Type of Tissue : _____

Type of Preservation:- _____

Lot Number: _____

Death to Preservation: _____

Immediate cause of death: _____

Medical / Case History: _____

Physical Appearance of Body

PATHOLOGIST'S COMMENTS concerning Post Mortem & Date of Interview _____

If Pathologist observed signs of IV drug use or infection? Yes / No _____

Donor visited a hospital? Yes / No if yes, length of stay _____

Hospital chart available to examine: Yes / No _____

Donor on a respirator? Yes / No if Yes, how long _____

Donor received blood products within 48 hours of death? Yes / No _____

If yes : _____ : Number of Units : _____ Last date / time obtained _____

In Situ Observation : _____ : Check, if any of the following apply: DO NOT USE FOR SURGERY

AIDS OR HIGH RISK GROUP _____ LYMPHOMAS / LYMPHOSARCOMA _____

ACTIVE HEPATITIS _____ INTRINSIC EYE DISEASE _____

BACTEREMIA SEPTICEMIA _____ CONGENITAL RUBELLA _____

COVID 19 INFECTION _____

BLAST FORMS _____ RABIES _____

CNS DISEASE OF UNKNOWN ETIOLOGY _____ REYES SYNDROME _____

CREUTZFELD / JACOB DISEASE _____ ACTIVE SYPHILLIS _____

ENCEPHALITIS _____ CONJUNCTIVITIS _____

MULTIFOCAL LEUKOENCEHALOPATHY _____ DEMENTIA _____

JAUNDICE / except when due to non-infectious causes _____

SUBACUTE SCLEROSING PANENCEPHALITIS _____

Donor refrigerated? Yes / No, If Yes : Date & Time of refrigeration _____

NA : NOT APPLICABLE NRA : NO REPORT AVAILABLE

DEATH TO REFRIGERATION TIME : _____

LAB TEST RESULTS:

WBC/ DATES / COUNT: _____

Temp, trends _____ : _____

CULTURE TYPE _____ : Blood _____ Date _____ Growth _____

CULTURE TYPE _____ : Blood _____ Date _____ Growth _____

MEDICATIONS _____ : _____

Name & Signature of fellow

HARVESTED DONOR EYE DATE

EYE DONATION Voluntary []

Motivated [] Motivated by : _____

Designation : _____

DONOR DATA

Consent taken at : _____ a.m. / p.m.

Consent given by : _____

Position of body _____ : _____

Phakic : _____ Aphakic : _____

of tissues : [] Blood sample obtained : Yes / No []

During the procedure : Problems : _____

: Solutions : _____

Procedure done by: _____ Time _____ a.m./ p.m. Procedure done at: _____

Assisted by: _____

Team members _____ : _____

Mode of transport: Eye Bank to donor site _____

Donor site to Eye Bank _____

Case # _____ Month _____ Year _____

Date received _____ Time received _____

Appendix - 4

IMMUNOLOGY LABORATORY SEROLOGY REPORT

Name : _____ Date : _____

MR. No : _____ Serology No : _____

Age & Sex : _____ Category : Eye Bank _____

Nature of specimen : Blood :

Referring Eye Bank :

Reference No.:

Tests Done

Report

1. HIV:

2. HBs Ag :

3. VDRL:

Date :

Note :

1. The results relate only to items tested

2. This report shall not be reproduced except in full without written approval of the laboratory.

Technician :

Microbiologist :

Appendix - 5

TISSUE EVALUATION REPORT

Eye Bank No : _____/_____/_____/_____/ (Right / Left) Size of cornea _____mm

1. Intact surface : Yes / No
2. Haze : Yes / No
Degree : Light / Moderate / Heavy
3. Exposure Keratitis: Yes / No
Amount _____% (of surface)
Degree Light / Moderate / Heavy Location
Central / Periphery / Mid-periphery Type Diffuse / Band
4. Sloughing : Yes / No
Amount _____% (of surface) Degree
Light / Moderate / Heavy Location
Central / Periphery / Mid-periphery
5. Other defects Yes / No
Type _____
Location Central / Periphery / Mid-periphery Dimension _____mm

STROMA

1. Clear : Yes / No
2. Cloudiness : Yes / No
Degree : Light / Moderate / Heavy
3. Arcus Senilis : Yes / No
Amount _____mm (form limbus)
4. Opacities : Yes / No
Comments _____

DESCEMET'S MEMBRANE

1. Folds
Amount : None / Few / Several / Numerous
Degree : Light / Moderate / Heavy
Location : Periphery / Central / Mid-periphery/ Diffuse (total surface)

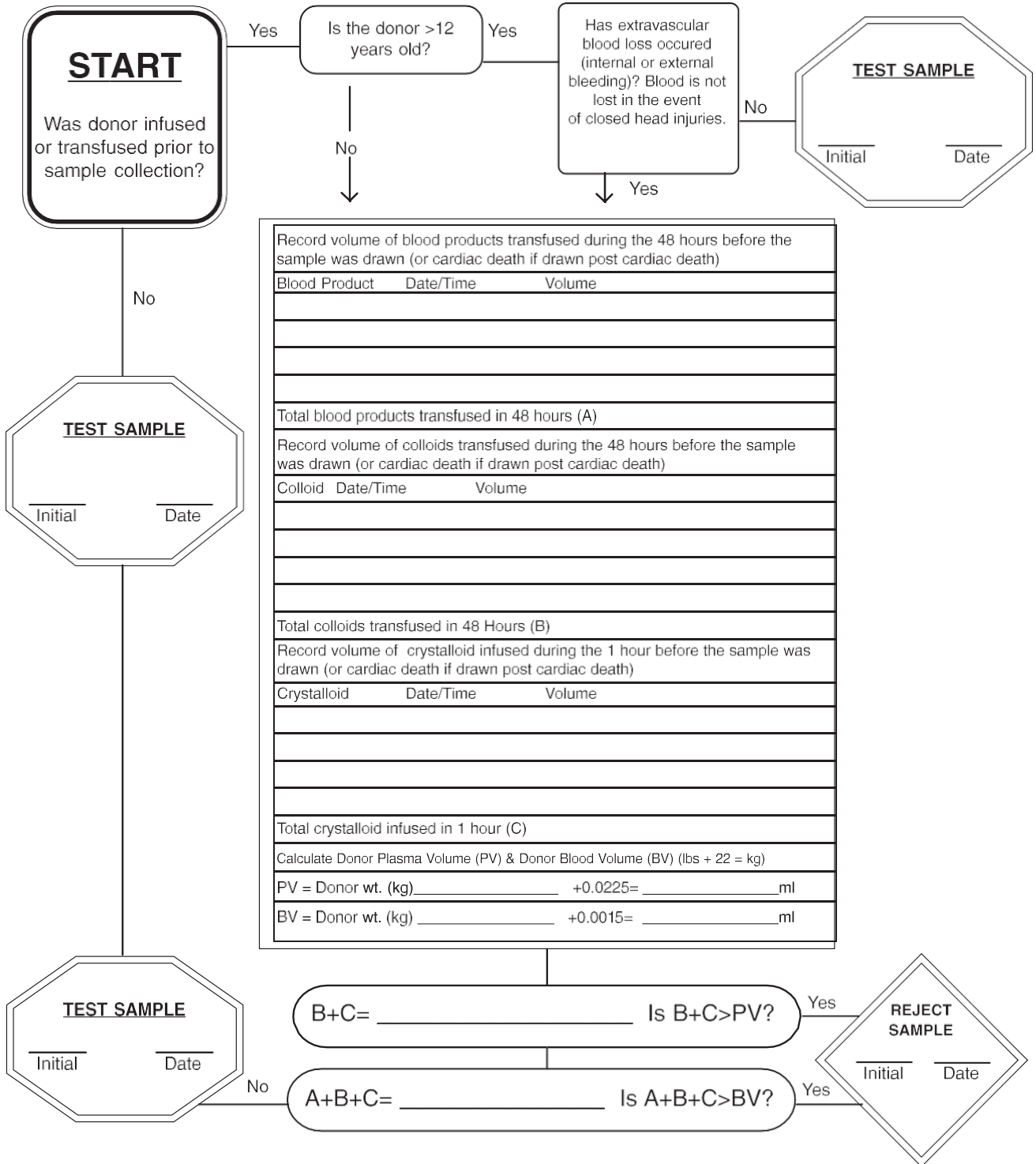
ENDOTHELIUM

Excellent / Very Good / Good / Fair / NSFS

Comments _____ Cells per mm _____

Appendix - 6

Hemodilution Assessment		Donor Name or Number	
Sample Drawn	Date	Time	By



Final Review Hemodilution has been reviewed and determined acceptable	Signature _____	Date _____
--	-----------------	------------

Appendix - 7

(To be filled in duplicate)

Case #

Month

Year

TISSUE DISTRIBUTION INFORMATION

Eye Bank No : / / / / (Right / Left)

Age :

Religion :

Sex:

Injury / Admittance

Date

Hour

Death :

Date

Hour

Enucleation / Excision :

Date

Hour

Preservation :

Date

Hour

Cause of Death :

Medical History :

Ocular History :

Medications :

ORIGINAL

Should be filed and kept in the eye bank

TISSUE PRESERVATION AND CORNEAL STATUS INFORMATION

Death – Preservation: (Time) _____ Hrs. ____ Mins.

Tissue Type : _____ Storage Method: _____

Lot Number:

Status:

Corneal Rating :

Epithelium :

Stroma :

Desceme't :

Endothelium :

Count : _____ Cells / mm

Serology test for : HIV Antibody

(Performed –Yes / No) Results _____

(Hepatitis B Surface Antigen test

(Performed – Yes / No) Results _____

Test for : HCV

(Performed – Yes / No) Results _____

Test for : Syphilis

(Performed – Yes / No) Results _____

General Comments : _____

Research only –

Name & Signature of EB Tech

RECIPIENT DATA (TO BE FILLED AT THE TIME OF SURGERY)

M.R. No. _____ Name: _____ Age: _____

Eye/Diagnosis _____

Time lapse between Enucleation and Utilization _____ Hours

Date of Surgery/Time _____

Operating Surgeon's Name _____

Surgical Procedure _____

Name & Signature of the Surgeon

Appendix - 8

1 DONOR TISSUE TENTATIVE UTILITY DATA & ADVERSE REPORT FORM

ID #: _____ Date: _____ Time : _____

Age: _____ Death : _____

Sex: _____ Preservation : _____

Received: _____

Tissue sent by: _____

Proposed date to use the tissue: _____

Name of the Surgeon: _____

Name of the Patient: _____

Hospital registration /Medical records I.D. no. of Patient: _____

Date of Surgery: _____

Date: _____

ORIGINAL

(Should be sent
back to the eye
bank)

COUNSELLOR'S SIGNATURE & NAME

ADVERSE REPORT

Details of adverse findings:

Likely Reasons for adverse findings:

Suggestions:

Signature of Operating Surgeon / Team

ID #: _____ Date: _____ Time : _____

Age: _____ Death : _____

Sex: _____ Preservation : _____

Received: _____

Tissue sent by: _____

DONOR TISSUE TENTATIVE UTILITY DATA & ADVERSE REPORT FORM

Proposed date to use the tissue: _____

Name of the Surgeon: _____

Name of the Patient: _____

Hospital registration /Medical records I.D. no. of Patient: _____

Date of Surgery: _____

Date: _____

COUNSELLOR'S SIGNATURE & NAME

ADVERSE REPORT

Details of adverse findings:

Likely Reasons for adverse findings:

Suggestions:

Signature of Operating Surgeon / Team

Appendix - 11

LABORATORY CLEANING LOG

Month : / Year :

	Week 1	Week 2	Week 3	Week 4
Initials of person (s) performing cleaning				
Cleaning Agent Used				
Date of Cleaning				
Counters				
Sink (s)				
Light Switches / Donor and Cabinet Handles				
HEPA Hood / Biosafety Cabinet				
Floors Mopped				
Instrument Lubricant Solution Changed				
Other _____				
Other _____				
Cabinets (monthly cleaning only)				
Centrifuge (-do-)				
Slit Lamp Microscope (-do-)				
Specular Microscope (-do-)				
Centrifuge (-do-)				
Refrigerator (Internal & External) (-do-)				
Freezer (External) (-do-)				
Other _____				
Other _____				

Appendix - 12

LABORATORY EQUIPMENT CLEANING LOG

Year

EQUIPMENT	DATE OF MAINTENANCE	STATUS (Pass or Fail)	PERSON PERFORMING MAINTENANCE
Laminar Air Flow hood / Biosafety Cabinet Requires annual re-certification			
Transplant Tissue Storage Refrigerator. Check Temperature recorder device for accuracy against an NIST calibrated thermometer. De-ice and clean interior and exterior			
Non-Transplant tissue storage Refrigerator and Freezer. Clean refrigerator (internal and external) and de-ice freezer. Check the working condition			
Specular Microscope. Requires annual re-calibration			
Centrifuge. Inspect for proper function ability according to manufactures handbook			
Serology equipment to be certified by the manufacturer (In case of ELISA) Incubator/ Reader			
UV Lights. Inspect the effectiveness of all UV lights in lab or change annually			
Transplant Tissue Storage Freezer Cheque the working condition. De-ice and clean interior and exterior			

Appendix - 13

FREQUENTLY ASKED QUESTIONS ABOUT EYE DONATION

Q. What is an eye bank?

A. It is the link between donor and recipient/eye surgeon. It is an organization recognized by the government to collect and distribute human eyes to those requiring corneal transplantation.

Q. Who can be an eye donor?

A. Anyone can be a donor irrespective of age, sex or blood group.

Q. Do religious authorities approve of donating one's eyes?

Yes, all religious faiths support this vital sight restoration program.

Q. Is the whole eye used for transplant?

No. Only the thin transparent layer in front of the iris called the cornea is used for transplant.

Q. What is a cornea?

A. Cornea is a transparent tissue without any blood vessels. A clear cornea enables one to have a good vision.

Q. How is the tissue harvested from a donor?

A. Tissue is retrieved either through enucleation (whole eye ball removal) or corneal excision. Presently many eye banks in the country, retrieve cornea by IN SITU CORNEAL EXCISION PROCEDURE. This procedure involves removing just the cornea from the whole eye of the deceased/donor.

During corneal excision, the cornea along with the white part of the eye known as the sclera is excised out. Two to three mm scleral rim is excised 360 degrees. The procedure takes 20 to 30 minutes.

The excised cornea is introduced into a preservative medium, the Mc Carey Kaufman medium (MK medium) which is prepared by the Rotary Club of Hyderabad, Cornea Preservation Center of the RIEB and distributed to all eye banks in the country and South East Asian countries. The MK medium allows preservation of the cornea for a period of 4 days.

Q. What is meant by corneal transplantation?

A. It is a surgical procedure whereby an impaired cornea of the patient is replaced by a healthy cornea from a donor for gaining the lost vision.

Q. How quickly should the corneas/eyes be removed after death?

Corneas/eyes should be removed within 6 hours of demise.

Q Is it necessary to transport the donor to the hospital after death for donating eyes?

A. No. The eye bank personnel will go to the donor's residence and remove the eyes. The procedure takes approximately 20 to 30 minutes.

Q Do cataracts or the use of spectacles render the corneas unfit?

A. No. Both these conditions relate to the lens of the eye and not the cornea.

Q Does eye donation disfigure the donor's face?

A. No. The removal of corneas/eyes does not cause disfigurement.

Q Is there any delay in funeral arrangements?

A. No. Tissue procurement is performed within 20 to 30 minutes. Therefore family members of the deceased may proceed as planned with funeral arrangements.

Q What conditions render corneas unfit for donations?

A. Corneas of persons suffering from AIDS, jaundice, rabies, syphilis, tetanus, septicemia and viral diseases are considered unfit for donation.

Q What about diabetes or hypertension?

A. Even donors with these conditions can donate their eyes.

Q Does the human body reject the transplanted donor cornea?

A. A cornea does not have direct blood supply. Therefore the risk of rejection is very low. If rejection occurs, it can be suppressed by timely medication.

Q How will the donated eyes be used?

A. After the cornea is removed from the whole eye, it is evaluated and then supplied to the eye surgeon for use in a patient.

Q Is there any use of corneas that are for some reason not utilised for surgery?

A. Corneas that are rejected for technical reasons may be used for research or education purposes.

Q Will the donor or recipient family be told who donated or received the cornea?

A. No. The Donor - recipient information is maintained confidential.

Q Will the donor family be given fees?

A. No. It is illegal to buy or sell human eyes, organs or tissues. Any cost involved with cornea retrieval is borne by the eye bank.

Appendix - 14

FACTS AND MYTHS ABOUT DONATING EYES

- Myth** - Eyes can be removed out of living human beings.
- Fact** - Eyes are removed only after death.
- Myth** - Eyes can be donated even by a live person.
- Fact** - Eyes can only be pledged by a live person. Eyes can be donated only after death.
- Myth** - Removal of eyes causes disfigurement of the face.
- Fact** - Removal of eyes does not produce any disfigurement of the face.
- Myth** - Eye donation interferes with, or delays customary final rites.
- Fact** - Eye donation does not interfere with or delay final rites, as the corneal excision procedure takes less than 20 minutes.
- Myth** - Eyes of aged donors are not acceptable.
- Fact** - All donor eyes are acceptable irrespective of the donor's age, including eyes of premature/ still-born babies.
- Myth** - Indian eyes are not good to be used for corneal transplantation.
- Fact** - Eyes of any deceased person anywhere in the world can be used for corneal transplantation following evaluation.
- Myth** - An entire eye can be transplanted.
- Fact** - Only the cornea is used for transplantation.
- Myth** - Corneal transplantation is an experimental procedure.
- Fact** - Corneal transplantation is a proven, routinely performed surgery and is a successful procedure.
- Myth** - Corneal transplantation is not effective and successful in Indian eyes.
- Fact** - Corneal transplantation is effective in all eyes, if performed under optimal conditions.
- Myth** - Human eyes can be bought or sold.
- Fact** - Selling or buying of human eyes is illegal.
- Myth** - Only those who have pledged their eyes can donate them after death.
- Fact** - Pledging of eyes is not important, because even in the case of a pledgee, the consent of the family member is essential, without which an eye cannot be removed.

Appendix - 15

Eye Donation Counsellor (EDC)

DAILY REPORT FORM

1. DATE/MONTH/YEAR : _____

2. HOSPITAL ATTENDED : _____

3. PLACE : _____

4. NO. OF HRS WORKED : _____

FROM: _____ TO: _____

5. NO. OF DEATHS DECLARED : _____

FROM 6.00 AM TO 6.00 PM : _____

FROM 6.00 PM TO 6.00 AM : _____

6. NO. OF DEATHS DECLARED : _____

WITHIN THE WORK PERIOD

7. NO. OF CASES APPROACHED : _____

8. NO. OF CASES NOT : _____

APPROACHED

(Give reasons)

9. NO. OF CASES SUCCEEDED : _____

10. NO. OF CASES NOT : _____

SUCCEEDED

11. Donors: Male : Nos Female: Nos

NAME OF THE EDC/TRAINEE : _____

SIGNATURE WITH DATE : _____

SIGNATURE OF THE EYE BANK MANAGER / DIRECTOR

Appendix - 16

Eye Donation Counsellor (EDC) Report

CASE SUMMARY

1. Date / Month / Year : _____
2. Case No : _____
3. *Particulars of the Donor :*
Name : _____
Religion : _____
Age & Sex : _____
Cause of death : _____
Pledge : Yes _____ No _____

4. *Particulars of the Donor Family:*
No. of family members present
at The time of motivation : _____
Family Educated : Yes _____ No _____
Awareness about eye donation: Yes _____ No _____
Encountered difficulty in convincing : Yes _____ No _____

Questions raised by the family members:

5. Time Lapse Between death and Motivation: _____
6. Time taken for motivation : _____
7. Motivation outcome : _____
8. Consent Given by : _____
9. Briefly describe how motivation was carried Out : _____
10. Reasons for getting the consent (Describe): _____

11. Reasons for not getting the consent (Describe): _____

Appendix - 17

Eye Donation Counsellor (EDC)

MONTHLY REPORT FORM

01. MONTH/YEAR : _____
02. HOSPITAL ATTENDED : _____
03. PLACE : _____
04. NO. OF DAYS WORKED : _____
05. NO. OF HOURS WORKED PER DAY : _____
06. NO. OF DEATHS DECLARED
IN THE MONTH (DAY & NIGHT) : _____
07. NO. OF DEATHS DECLARED
WITHIN THE WORK PERIOD : _____
08. NO. OF CASES APPROACHED : _____
09. NO. OF CASES NOT APPROACHED : _____
(Give reasons)
10. PARTICULARS OF THE CASES
APPROACHED : _____

Religion :Hindu:_____ ; Muslim:_____ ; Christian:_____ Age_____

Group: 0 – 9 _____ ; 10 – 19 _____ ;
20 – 29 _____ ; 30 – 39 _____ ;
40 – 49 _____ ; 50 – 59 _____ ;
60 – 69 _____ ; 70 – 79 _____ ;
80 and above _____

O. OF CASES NOT APPROACH

Sex : Male _____ ; Female _____

Cause of Death : Heart Disease _____

Cancer _____

Trauma _____

Brain Disease _____

Infectious Disease _____

Others _____

Pledges : No. of Pledges _____

Not pledges _____

Family educated : _____

Awareness about eye donation : _____

Encountered difficulty in counselling : _____

11. AVERAGE TIME LAPSE BETWEEN DEATH & MOTIVATION : _____

12. AVERAGE TIME TAKEN FOR MOTIVATION : _____

13. NO. OF CASES SUCCEEDED (DONORS) : _____

14. NO. OF CASES NOT SUCCEEDED : _____

15. PARTICULARS OF DONORS : Religion :Hindu: ; Muslim: ; Christian:

Religion :Hindu:_____ ; Muslim:_____ ; Christian:_____ Age_____

Group: 0 – 9 _____ ; 10 – 19 _____ ;

20 – 29 _____ ; 30 – 39 _____ ;

40 – 49 _____ ; 50 – 59 _____ ;

60 – 69 _____ ; 70 – 79 _____ ;

80 and above _____

Sex : Male _____ ; Female _____

Cause of Death : Heart Disease _____

Cancer _____

Trauma _____

Brain Disease _____

Infectious Disease _____

Others _____

difficulty in cou

Family educated : _____

Awareness about eye donation : _____

Encountered difficulty in counselling:

Utilisation: Op.PK Th.PK L.K Others

Appendix - 18

TEMPERATURE RECORD REFRIGERATOR No.

Month : _____

Year : _____

Date	7.00 A.M.	1.00 P.M	7.00P.M
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Appendix - 19

Financial Assistance available under NPCBVI

Non-recurring grant-in-aid for Eye Banks in Government (upto maximum Rs. 40.00 lakhs)

The objective of this scheme is to promote Eye banking activity in the country through Government facilities, NGOs and other stake holders to get adequate tissue for corneal transplantation for treatment of corneal blindness.

1. **Financial assistance:** Under the scheme, financial assistance will be provided up to a maximum of Rs. 40 Lakh for purchase of equipment, furniture and fixtures (list attached)
2. **Eligibility criteria:** Eye Banks functioning under the Public Sector only are eligible for the scheme.
3. *Infrastructure Requirement:*
 - a. *Manpower Requirement:*

Ophthalmic Surgeons (Full time / on Panel)	1
Ophthalmic Technician	1
Eye Donation Counselor / Social Worker / Health Educator / Clerk	2

4. *Expected Output for Eye Banks receiving non-recurring grants shall:*
 - i. Utilize the entire grant within period of 12 months from receipt of grant after following due procedures
 - ii. Provide & maintain detailed records of Eye Balls collected and utilized in the prescribed format and submit monthly report to the District Health Society.
 - iii. The Eye Bank should be committed to collect at-least 200 eye balls in the next two years. In case of difficult terrain (e.g. North eastern states), relaxed criteria of 100 cataract operation including other eye disease operations shall be applicable.
5. *Procedure for Approval of Grants*

Application would be submitted by applicant Eye Bank along with necessary documents in support of qualifying criteria to the State Programme Officer (SPO), NPCB&VI. The SPO would examine the proposal in terms of eligibility criteria, and depute a team of expert(s) (2-3) from the State to visit the Eye Bank for assessing present facilities and requirements. This entire work should be completed within maximum of three months from the date of receipt of applications complete in all respects. The SPO may thereafter, forward his recommendation in the State PIP to the competent authority for final disposal.

List of equipment for Eye Banks/Keratoplasty centers

S.No	Equipment/Furnishing
1.	Slit Lamp Microscope
2.	Specular Microscope
3.	Laminar Flow
4.	Serology Equipment
5.	Instruments for corneal excision and enucleation including containers
6.	Autoclave
7.	Keratoplasty instruments
8.	Transport Facility (One 2 Wheeler)
9.	Refrigerator
10.	Computer & Accessories
11.	Telephone Line
12.	Air-Conditioner
13.	Renovation, Repair, Furniture & Fixtures
Maximum Assistance = Rs. 40 Lakh	

II Non-recurring grant-in-aid for Eye Donation Centers (ERC) in Government (upto a maximum Rs. 1.00 lakh)

1. Eye Retrieval Centre: For the purpose of the above scheme, an Eye Retrieval Centre will mean an organization that is:

- i) Is affiliated to a registered Eye Bank
- ii) Harvest corneal tissue and collect blood for serology;
- iii) Ensure safe transportation of tissue to the parent eye bank
- iv) Provide a round the clock public response system for eye donation;
- v) Coordinate with donor families and hospitals to motivate eye donation;
- vi) Conduct Public and professional awareness on eye donation;

2 *Financial Assistance:*

Under the scheme, financial assistance will be provided up to a maximum of Rs. 1 Lakh (Rupees One Lakh Only) for the purchase of equipment.

3 *Eligibility criteria:*

- vii) Should satisfy general eligibility conditions mentioned. (except the 2-year clause, i.e. new organization can also apply)
- viii) The organization should have the following staff as a minimum requirement:

Sl. No	Personnel	Number
1	Ophthalmic Technician	1
2	Eye Donation Counselor/ Social Worker / Health Educator	1

4 *Expected Output for EDCs receiving non-recurring grants shall:*

- i. Utilize the entire grant within period of 12 months from the receipt of grant after following due procedures
- ii. Provide & maintain detailed records of Eye Balls collected and deposited in linked Eye Bank in the prescribed format and submit monthly report to the District Health Society.
- iii. The EDC should be committed to collect at-least 20 eye balls in the next two years.

LIST OF EYE BANKS/EDCs/KERATOPLASTY CENTERS

ANDHRA PRADESH

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Kalyan magatapalli Eye Collection Center,Srikakulam.	Jagannadam	9299906298	ERC
Arogyavaram Eye Collection Center,Sompeta.	Butchanna	9849232907	ERC
OEU Lions Eye Hospital Eye Bank, Shreeramnagar, Garividi, Vizianagaram Disitric-535101	Dr. S.K. Thangaraj, M.S. Sri.m.khan (O.T.Asst)	8179173808 9032230068 O-08952 -282471	Eye Bank
Mohsin Eye Bank, Visakhapatnam (Managed by VEBART trust) L.V.Prasad Eye Institute #11-113/1,Hanumanthwaka Jn.,Visakhapatanam-40.	Dr.A.V.N. Chetty Chairman	9848353832. O-9246624000, 9440821919, 0891-2714000.	Eye Bank
Badam Bala Krishna Eye Bank, Door No.70-10-4, NFCL Road Kakinada-533003	Ln.P.KaknakaRaju	9440176110	Eye Bank
Swetcha Gora Eye Bank,Vijayawada.	Dr.G. Samaram Exec. Dir Sri. Dondapati Ravi Kumar, Manager	9848124977 9704020303	Eye Bank
Tej Kohli Eye Bank L.V.Prasad Eye Institute, Tadigadapa, Penamaluru, Vijayawada	Sri.P. Uma chand Manager, Dr.Aravind Roy ,Med. Dir.	9666883620 8978463965	Eye Bank
Sankara Eye Hospital, Pedakakani - Guntur	K. Ashok reddy	9951604126	Eye Bank
Government General Hospital, Guntur	Sumathi	9618605879	ERC
Lvp- Government General Hospital, Guntur	Venugopal	9177704321	ERC
Smitha (Sudharshini Eye Hospital)	Rajesh	9394101616	ERC
ACSR Govt. Medical College & Govt. General Hospital, Dargamitta, Nellore, 524 004.	Dr.A.Srihari	9440333221	Eye Bank
Modern Eye Hospital & Research Centre, D.No.16/II/101, Beside Venkataramana Hotel Lane, Pogathota, Nellore-524 001., 2306015.	G.V.T.R.Suresh Kumar	9989004715 08612324868	ERC
Agarwal Eye Hospital, Opp.Bollineni Super Speciality Hospital (KIMS), Dargamitta, Nellore - 524004	V.Yugandhar	8886399923	ERC

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Kadapa Eye Bank, Yerramukkapalli, Kadapa.	Dr.N.Swaroopa Rani	8897630630 08562-257089	Both
SnehaSeva Samathi, H,N 6/9 Eswar Reddy Nagar, Kadapa.	B.Madhusudhana Reddy	9885339306	ERC
R.I.M.S General Hospital, Kadapa.	HOD , Ophthalmology,	9848078724	ERC
PES Medical College Hospital Kuppam, Chittoor Dist. A.P	Dr.Narayanan, Prof & HOD, Dept of Ophtal. PESIMSR	9866597359	Eye Bank
SVMC SVRRH Tirupathi	Gurukumar Eye bank Technician	9885944822	Eye bank
Ongole Eye Bank, C/o Aluri Eye Hospital, Near RTC Bus Stand, ONGOLE – 523001, Prakasam District, Andhra Pradesh	Dr.Aluri Bhaskara Rao	9440211566	ERC
Govt. Regional Eye Hospital, Eye Bank Kurnool	Dr.G.Narendranath Reddy	9849903115 9640692299	Eye bank
Vasan Eye Bank Kurnool	Mr.John Paul	8125244113	ERC
Santhiram Eye Bank,Nandyal	Dr.Sanjeev Kumar	9440208303	ERC
Sai Jyothi Nethradanam Eye bank Adoni	Mr.K.Sreedhar	9440554568	ERC
R.R.Lions Eye Hospital Nidadavolu	Prakash	9440318345	ERC
R.R. Lions Eye Hospital Palakollu	Dr.Krishnaji	9849394394	ERC
Govt. General Hospital, Ananthapuramu	Rangareddy E.D, Counsellor (2)Dr.K.Bhaskar, DPM, GGH,ATP	09666236240 9491030324	ERC
Safe Eye Care Society (Swapna Nursing Home, NGO)	Dr.G.V.S.Sharma	9246900530	ERC
DR.Akbar Eye Hospital, Atp (NGO)	Dr.Akbar	94402890091	ERC
Balaji Eye Care Society, ATP(NGO)	Dr.Venkata Ramana Reddy	9908240930	ERC
Your's Foundation, Dharmavaram(NGO)	Dr.Subba Rao	9391720719	ERC
ASSAM			
Regional Institute of Ophthalmology(R.I.O.), Gauhati Medical College & Hospital, Bhangagarh, Guwahati – 32 , Assam	Dr. (Mrs) Dipali Deka , Director	+919864067474 Email : riogmch@yahoo.in	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Assam Medical College & Hospital (AMCH), Barbari, Dibrugarh Assam, PIN-786002	Dr. Bharti Sarma Pujari	Phone- (0373)2300080/ Mobile +919435030024	Eye Bank
Silchar Medical College & Hospital (SMCH), Ghungoor, Silchar-788014, Cachar , Assam	Dr.(Mrs) Ruma Das	Phone – 03842-229110 Mobile – 9435554832	Eye Bank
Sri Sankardeva Nethralaya 96, Basistha Road, Guwahati – 781028, Kamrup(M) , Assam	Dr. Harsa Bhattcharjee, Med. Dir.	Tele – 0361-2228922 Mobile - 9435140999	Eye Bank
Jeuti Eye Bank K.K. Handique Path, Jorhat Assam	Dr. Narayan Bordoloi, Med. Dir.	+919207410570 Tele – 0376- 2330835/2371545	Eye Bank
Lion K.K. Saharia Eye Hospital, Lions Care Center Building, A.T. Road, Dibrugarh -786001 , Assam	Dr. Arundhati Tamui, CMO	Phone – 03732321835 Mob. +91 94350 30101	Eye Bank
Jorhat Lions Eye Hospital M.G. Road, Na-Ali, Jorhat	Dr. Pulakesh BHagawati, CMO	+9181154528/ 9181347357	Eye Bank
Nalbari Eye Hospital Nalbari, Assam	Dr. S. Goswami,	+919435028248	ERC
Lions Eye Hospital, Chatribari, Guwahati, Assam	Lion Ramesh Malhotra	+919435115685	ERC
Netrajyoti Eye Retrieval Centre, Sibsagar	Dr. Bimanda Saikia	+919435057560	ERC
BIHAR			
Eye Bank Of Bihar RIO, IGIMS, PATNA-14		0612-2297099(264) mohannilesh@yahoo. com	
CHHATTISGARH			
Pt. JNM Medical College, Jail Road, Raipur (C.G)	Dr. M.L. Garg	9826198883	Eye Bank
Chhattisgarh Institute of Medical Sciences, Gond Para, Bilaspur(C.G.)	Dr. Suchita Singh	9926386523	Eye Bank
MGM Eye Institute 5th Mile Vidhansabha Road, Raipur (C.G.)	Dr. Deepsikha Agarwal	9425206296	Eye Bank
Shri Ganesh Vinayak Eye Hospital, Pachpedi Naka, Raipur (C.G.)	Dr.Anil Gupta	9977018984, 0771- 4077741	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Sai Baba Eye Hospital, Near Chhoti Line, Fafadih, Raipur (C.G.)	Dr.Ashish Mohobia	9329117979, 0771-4037979	EyeTransplant Center
Pt. JNM Medical College, Jail Road, Raipur (C.G)	Dr. M.L. Garg	9826198883	Eye Bank
GOA			
Rotary Eye Bank of Goa, OPD Block, Goa Medical College, Bambolim.	Vijay Priyolkar, Chairman	9822485556 0832- 2458121	Eye bank
GUJRAT			
C.S. Samariya red cross international Eye Bank, Sarkhej, Ahmedabad	Gautam Mazmudar	079-27450633 9825885233	Eye Bank
M & J Institute of Ophthalmology (RIO), Ahmedabad	Dr.Jagruti Jadeja	079-22680314/ 22681010	Eye Bank
C.H. Nagari Eye Reaserch Foundation, Ahmedabad	Dr.Dipali Satani	079-26466724, 26460176	Eye Bank
Asopalav Eye Hospital, Ahmedabad	Aagja Vipulbhai J.	079-65449919 9327009919	Eye Bank
Diva Eye Institute, Ahmedabad	Dr.Dipen Desai	079-26562006	ERC
Arohi cornea center, Ahmedabd	Dr.Beena Desai	9426759090	ERC
GMERS Medical College & Hospital, Sola, Ahmedabad	Dr.Deepika Singhal	9426541167	Eye Bank
Krishna Shalby Hospital, Ghuma, Ahmedabad	Dr.Nishita Shukla	8140013337/ 9574023456	ERC
Cornea Clinic, Ahemadabad	Dr.Geet Mayur Shah	9898896424	
G.C.S.Medical college & Resarch centre, Bada Park Society, Naranpura, Ahmedabad	Dr. Kirti M.Patel	079 -66048120	Eye Bank
Eye Care Hospital,Polytechnic Road, Ambavadi, Ahmedabad	Dr.Shashank Rathod	079-26446133 079-26430503 9824360097	ERC
Polio Foundation, Ahmedabad	Desai Rohanbhai A.	079-26610801	ERC
Shree Krishna Hospital & P.S. Medical college, Karmsad	Dr.Harsha Jani	2692-222130 9925473945	Eye Bank
Sankara Eye Hospital, Anand	Dr Zarna shah	02692-280240/60	Eye Bank
Kasturba Hospital,Sewa rural, Jhagadia	Dilipbhai	9898747006	ERC
Indian Red Cross Society, Bhavnagar	Maheshbhai Raval	9426582237	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Sir.T.Hospital,Bhavnagar	A.D.Chuahan	9033119211	Eye Bank
Drashti Natralaya Dahod	Dr.Shreya Shah	9227136459	Eye Bank
Muni Sant Balji eye bank & Hariba Mehta corneal trasplant,Veraval	Dilipbhai mehta	851114570 3 02875- 221072 02875- 221482	Eye Bank
City Eye Hospital, City eye, Hospital, Opposite new G.K General hospital,Lotus colony, BHUJ	Dr.Fahim Lala	9825812060	ERC
Gujarat Adani Institute of Medical Sciences, (GAIMS) G K General Hospital, Bhuj - 370001. KUTCH.Bhuj	Director	91 -2832- 246417/18 & 258071	Eye Bank
Jyoti Eye Hospital,Visnagar	Mahendrabhai Patel	9725728038	Eye Bank
Sant Punit Chaksu Bank, Navsari	Dr.Falguniben Mehta	02637-258920, 258931	Eye Bank
Nature Club	Dr.Kamal Mehta	9409683000 9825409500	ERC
P.D.U. Hospital, Rajkot	Dr.Kamal Dodiya	8000212012 9824292295	Eye Bank
Keshubhai Mehta Memorial Trust Eye Hospital, Rajkot	Dr. Ajay Mehta	02812239659 02812237296 9408665646	
Kansagara Hospitla,Rajkot	Dr.Hemal Kansagra	02812490324 9825236767	Eye Bank
Medical College, Surat	Dr.Priti Kapadia	0261-2244147/ 9825858940	Eye Bank
Surat Municipal Institute of Medical education &Research, surat	Dr. Manisha Shashtri	9825244467 0261-2368030	Eye Bank
Divija Eye Hospital& cornea care center, Surat	Dr.Hetal R.Solanki	8141473969	ERC
Vasan Eye Care Hospital, Golden Square Building, Nr Sargam, shopping centre Parle Point, Surat	Ashvin Agrawal	0261 3989030/ 9913989000/ 9925199925	ERC
Tejas Eye Hosepital, Mandavi, Surat	Dr.Uday Gajiwala	9426125947 02623- 221180	Eye Bank
C.U.Shah Medical College & Hospital Surendranagar	Dr.Arunakumari R.Gupta	9426772620	ERC

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Medical Care Centre Trust, Elemex Eye Bank, Baroda	Dr.Jayant Doshi	0265-2461272, 2463906	ERC
Thakorbbhai V.Patel Eye Insti, Baroda	Dr H.R.dholakiya	0265-2410932/ 2426311	ERC
Samip Eye & Corneal centre, Baroda	Dr Parash Maheta	0265-2564436	ERC
Dr.Kadam Eye hospital, Baroda	Dr Manisha Kadam	0265-2335506	ERC
K.G.Patel Children Hospital CHILDREN HOSPITAL, Karelibaug, Vadodara 390018	Dr.Jagdish N.Patel	+91-265-2463906, +91- 265-2462404	ERC
Orbit Eye Hospital, Sahyog Complex, Above Bank of Baroda, In front of passport office, Nizampura, Vadodara	Dr.Santosh Suman	9624650880	ERC
Mungle Eye Hospital, Baroda	Dr Meeta Mungle	0265-6580311	Eye Bank
HARYANA			
Haryana State Eye Bank, Regional Institute of Ophthalmology, Pt. B. D. Sharma PGIMS Rohtak		01262 – 211307 director.pgims@gmail.com	Eye Bank
Shanti Smriti Shri Madhav Eye Bank, Shanti Samriti Eye and General Hospital, Canal Road, Narwana, Jind 126116		09476061621 bansalvasudev@gmail.com	Eye Bank
Jeevan Eye Bank, Jindal Chowk, Hisar		01662-223052 09896033553 tanwarbrijesh@yahoo.com	Eye Bank
Lions Eye Bank, Munjal Hospital and Maternity Home, Arya Samaj Road, Sirsa 125055		01666-221900 9896028334 pkarora7@ahoo.co.in	Eye Bank
Eye Bank Command Hospital, Western Command, Chandimandir, Panchkula		0172-2867591 0172-2867592 colvjmathur@yahoo.com	Eye Bank
Y.P. Mahindru Nirmaya Eye Bank, Nirmaya Charitable Trust, 560/1, Dayanand Colony, New Railway Road, Gurgaon 122001		0124-2321234, 2254848,2250280 contact@nirmayatrust.org www.nirmayatrust.org	Eye Bank
Sewa Samiti Charitable Hospital & Research Centre, Market No. 1, NIT, Faridabad - 121001		0129-4024061 09910452355	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Poojneeya Mata Kartar Kaur Ji International Eye Bank, Shah Satnam Ji Speciality Hospitals, Near Shah Satnam Ji Dham, Sirsa - 125055		01666-238659 www.derasachasauda.org pmkkjieb@gmail.com	Eye Bank
Shri Shakti Netra Bank, Shri Shakti Sewa Dal, Shakti Netra Eye Bank and Hospital, Chimani Bai Dharmshalla No. 3, NIT Faridabad – 121001`		0129-2421047, 0129-4051047 shaktieyebank@rediffmail.com	Eye Donation Center
Madhav Netra Bank, C/o Kapil Eye Hospital, Madhav Netra Jyoti Society, 240, Vivek Vihar, Ambala city -134003		09215864800 09354835065 madhavnetrabank@yahoo.com	Eye Bank
Reveria Eye Retrieval Centre, Chadha Hospital, Sarni Chowk, Model Town, Yamunanagar 135001		08295400400 sheeshynr@gmail.com	Eye Donation Center
Madhav Netra Bank, C/o Thakur Eye & Maternity Hospital, Near Head Post Office, Kunjpura Road, Karnal 132001		09996199242, 09466182888 bkt20042003@yahoo.com	Eye Bank
NC Jindal Institute of Medical Care and Research, Model Town, Hisar-125005		01662-221169 01662-220169 8199940318 info@ncjims.org.co www.ncjims.org	Eye Donation Center
MMIMSR Mullana Eye Bank, Ambala City -133207		01731-304439 08059932100 eyebank@mmumullana.org	Eye Bank
Jain Eye Retrieval Centre, Bharti Psychiatric Hospital, Gobindpuri Road, Yamunanagar		9896011077 sheeshynr@gmail.com	Eye Donation Center
Maharaja Agrasen Medical College Eye Bank, Agroha, Hisar		9888006026. dpvatsgeneral@gmail.com	Eye Bank
HIMACHAL PRADESH			
IGMC SHIMLA	Dr. Ram Lal Sharma	94182-00098 rls_10@rediffmail.com	Eye Bank
DR RPGMC Tanda , Kangra	Dr. R.K. Sharma	94180-68123 ebdrpgmc@gmail.com	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
JAMMU & KASHMIR			
Upgraded Department of Ophthalmology, Govt. Medical College, Bakshi Nagar, Jammu	Dr. Dinesh Gupta, Prof. & Head	9419238013 drdinesh098@gmail.com	Keratoplasty Centre
RIO, Govt. Medical College, Shri Nagar	Dr.Sajad Khanday		Eye Bank & Keratoplasty Centre
JHARKHAND			
Eye Bank RIMS, Bariatu Road Ranchi	Dr. Rajiv kumar Gupta	09431168169	Eye Bank
PMCH Dhanbad	Dr. Rajni K Sinha	09431120856	Eye Bank
Kashyap Memorial Eye Bank Purulia Road, Ranchi 834001	Dr. Bharti Kashyap	0651253125	Eye Bank
Jamshedpur Eye Hospital Sakshi Jamshedpur, Roshni Eye Retrieval Centre	Sri Praminder Kapoor	09835363219/ 9097366104	Eye Bank
Bihar Eye Bank Trust Bariatu Road Ranchi Jharkhand 834009	Dr. P Sinha	06512545333	Eye Bank
Eye Bank & Corneal Transplantation Centre Bakaro General Hospital Bakaro	Dr. Ranjana Pandey ranjanadmch@gmail.com	8986873011	Eye Bank
KARNATAKA			
KISHINCHAND CHELLARAM EYE BANK & CORNEA GRAFTING CENTRE (GOVT) Alur Venkat Rao Road, Chamrajpete, Bangalore-560018	Dr. Nagaraj 9845011294	26701398 / 26707176	Eye Bank
LIONS INTERNATIONAL EYE BANK, No. 5, Lions Eye Hospital Raod, (Off. J.C. Road) Bangalore- 560 002	sowmya 7975375605	22237628 / 22235005	Eye Bank
Dr. RAJKUMAR EYE BANK, Bangalore (Narayana Nethralaya- 1) 121`/C, Chord Road, Rajajinagar, 1st `R' Block, Bangalore 560 010 .	Viresh 9945403178	080-66121300 / 121305	Eye Bank
Narayana Nethralaya- 2(Shankar Anand Singh Eye Bank) #258/A, Narayana Health City, Bommasandra, Hosur Raod, Bangalore. 560099		66660655 / 66660693	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Kempegowda institute of Medical Sciences and Research Center KR Road, Vishveshwarapuram Bangalore - 560 004			Eye Bank
NETRA ENTERPRISES, Prabha Eye Clinic, 504. 04th Cross, 8th Block, Jayanagar, Bangalore		080-26659595 / 26659090	Eye Bank
SHRADDHA EYE BANK, # 256/14, Kanakapura main Road, 7th Block, Jayanagar, Bangalore		26634200 / 26088000	Eye Bank
Vittala International Institute of Ophthalmology, CA Site Hosakerehalli, Banashankri 3rd Stage, Bangalore Sri Kanchi Kannakoti Medical Trust, Varthur Road, Kundalahalli Gate. Bangalore		26722214/26722215	Eye Bank
Sankara Eye Hopital		080-28542727/28/29	Eye Bank
Rajarajeswari Medical College & Hospital # 202, Kambipura, Mysore Road, Bangalore-560 074.		65666768 / 6566670	Eye Bank
St. John Medical College Sarjapura Road, Koramangala, Bangalore-560034		22065169 / 22065013	ERC
MV Jayaraman Meidcal College Hoskote, Bangalore			ERC
Nayana Super Speciality Eye Hospital & Research Center 1st Main, MCC "B" B;pcl, Davamgere-577004.		08192-220088	Eye Bank
Shankara Eye Bank Harakere, Thirthahalli Road, Shivamogga	Dr. Mallikarjuna. M.H	0812-222123	Eye Bank
J.S.S. Hospital Mysore		9738460133	Eye Bank
Mysore Medical College, K R Hospital (Govt) Mysore		9844234471 2427550	Eye Bank
Justice K.S. Hegde Charitable Hospital Eye Bank Deralakatte, Mangalore 575018		0824-2204471 / 76	Eye Bank
Father Muller Midical College Father Muller Road,Kankanady Mangalore-575002		0824-2238186 / 2238000	Eye Bank
Prasad Nethralaya A.J. Alse Road, Behind Alankar Theatre, Udupi		0820-2593323/2593324	Eye Bank
KLE Hospital Medical Research Center Neharunagar, Belgaum-590 010.		0831-2473777	Eye Bank
Eye Bank, District Hospital OF BIMS (Govt) Belgaum			Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Shri B.M. Patil Medical College Bangaramma Sajjan Campus Bijapur-586103		08352-262770	Eye Bank
S.Nijalingappa Medical College & Hangal Kumareshwara Research Centre Navanara ,Bagalkot		08354-324999 / 235400	Eye Bank
Shri Guru Mahipathiraj Eye Bank M.M. Joshi Eye Instute. Someshwar Heights, Old DSP Office, Near K.C.Park, P.B. Road. Dharwad	Manjula 8123699997	0836-3247486 / 9686129377	Eye Bank
MR Medical College Gulbarga		08472-220307 / 9448716700	Eye Bank
Nithya Jyothi Eye Bank Vijaynagar Institute of Medical Sciences(VIMS) Govt Bellary		9483414824	Eye Bank
Navodaya Medical College Navodaya Nagar, Raichur 584103		08532-223448	Eye Bank
KERALA			
District Hospital Kollam, Kollam(Dist)	District Ophthalmic Surgeon	0474-2750206, 2742004	ERC
General Hospital Pathanamthitta, Pathanamthitta(Dist)	District Ophthalmic Surgeon	0468-2222364	ERC
Amrita Institute of Medical Science, Ernakulam(Dist)	Dr. Gopal Pillai	0484-2801234, 2851234	Eye Bank
Dr. Tony's Eye Hospital, Angamaly, Ernakulam(Dist)	PRO	0484-2922547, 9037400400	ERC
Pariyaram Medical College, Kannur (Dist)	PRO	9048600970	Eye Bank
District Hospital Kollam, Kollam(Dist)	District Ophthalmic Surgeon	0474-2750206, 2742004	ERC
MADHYA PRADESH			
Dr.Narula Eye Hospital & Eye Bank,77,Vikas Nagar,Neemuch	Dr.Narula	07423-224050	Eye Bank
Lions District Eye Bank,Indore Eye Hospital Society, M O G Lines,Dhar Road,Indore	Dr.S.Mahasabde	0721-2380554	Eye bank
Chhavi Eye Bank,Gita Bhawan Eye Hospital,Manoramaganj,Indore	Dr.Sudha hansh Bhatia	0721-2534782	Eye bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Lions Club Neemuch Central Eye Bank, Mahavir Netra Chikitsalaya, 3, Bihar baghm Neemuch		07423-221515	Eye bank
Department of Ophthalmology, M.G.M. Medical College, M.Y. Hospital Indore	Dr. Puspa Verma	0721-752001	Eye bank
Khushi Eye Bank, C/o Subhishi Hospital Pvt. Ltd. Diversion Road, Gouridham, Khargoen		07282-234786	Eye bank
Kasyap Rotary Eye Bank & Corneal Clinic, 101-B Nahar pura, gali No.1 Ratlam	Dr. Shyam Kabra	07412-236299	Eye bank
Department of Ophthalmology, Bhopal Memorial Hospital & Research Centre, Raisen Bypass Road, Karond, Bhopal		0755-2742212	Eye bank
Smt. Anusuyadevi Eye Bank, Rotary Club of Indore Magdhoot, 4/7, Lasudia Mori, Indore			Eye bank
Netra Jyoti Microsurgery Eye Hospital, Birla Road, Satna		07672-251077	Eye bank
Arihant Eye Bank, Arihant Hospital & Research Centre, 283-A Gumasta Nagar, Indore		2785173	Eye bank
Murlidhar Kripa Eye Bank, Murlidhar Kripa Hospital & Research Centre Ujjain Road Maski		07363-233426	Eye bank
Dada Virendra Puri ji Maharaj Eye Bank C/o Jan Jyoti Eye Hospital 1051, Golbazaar, Jabalpur	Dr. Pavan Sthapak	2404608	Eye bank
Suraj Vision & Dental Center, 117-18 G, Yasvant Plaza, Railway Station, Indore	Dr. Manish Gujrati		Eye bank
Vision Center, 102 Silver Sever, R.N.T. Road Modi Petrol Pump, Indore	Dr. Anurag Shrivastava		Eye bank
Gokuldas Hospital 11 Sarju Prasad Road Indore	Dr. Sanjay. Gokuldas		Eye bank
Rohit Eye Hospital & Child Center Sapna Sangita Road, Indore	Dr. O.P. Agarawal		Eye bank
Choitram Netralay Shriram Talabali Dhar Road, Indore	Dr. Sardini Vyas	2362491	Eye bank
P.S. Hardiya Eye Hospital Rao, Indore	Dr. P.S. Hardiya	25020429	Eye bank
Rajas Eye & Retina Research Center Kanchanbag Indore	Dr. R.S. Choudhry		Eye bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Arvindo Institute of Medical Science Indore	Dr.Sherya Thatte	537774	Eye bank
Bhandari Hospital & Research Cneter,Indore	Dr.Sherya Thatte		Eye bank
Bombe Hopital,indore	Dr.Prasant Bharti		Eye bank
Shrimati Laxmi devi Eye Hospital & Research Center Gora Kund,Indore	Dr.Mahesh Garg		Eye bank
Grater Kailash Hospital,Indore	Dr.Radhika Bandi	2491425	Eye bank
Mahashbde Netralay & Child Care Center R.T.O Road,Indore	Dr.S.Mahasabde		Eye bank
Dr.Laxmi Memorial Hopital & Research Centrer,Indore	Dr.P.K.Sethi		Eye bank
Sewa Sadan Eye Hospital (Trust) Sant Hirdaram Nagar,Bhopal	Dr.Prena Upadhyaya	2521156	Eye bank
M.K.International Eye Bank Sai Sampada, Terrace Floor 16,Choti Khajrani M.R.-9,Indore	Dr.S.Mahasabde	0731-2403013	Eye bank
Ratan Jyoti Charitable, Foundation ,Gwalior	Dr.Pratik Gurjar	0755-2423350	Eye bank
Sadguru Netra Chikitsalay Janki kund,Chitrakoot,Satna	Dr.Sushil kumar Trapathi		Eye bank
Gomabai Netralay,Neemuch	Dr.Pradeep Jain	221526	Eye bank
Jivan Jyoti Eye Bank, Krishna Giri Enclave,Gayatri Mandir,Civil Line,Sagar	Dr.Pradum Bhargava		Eye bank
R.D.GARDI Medical College		261215	
Maharaja Yashwantrao Holkar Hospital, Eye Bank,Indore	Dr.Pushpa Verma	0731-2427301	
Gandhi Medical College Eye Bank,Bhopal		0755-2739303	
Netaji Shubhash chandra bose medical college Eye Bank,Jabalpur		0761-223688	
S.S.Medical College Rewa Eye Bank,Rewa Medical College,Gwalior,	Dr.D.K.Sakya		
MAHARASHTRA			
Shroff eye Hospital, 222, S.V.Road, Bandra (W), Mumbai-400 050. 66921000,	Dr. Shroff	66 921000, 26431006 Email-shroffeye@vsnl.com	Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Dr.Vikhe Patil Memorial Hospital, Opp. Govt. Milk Dairy, Vadagaon Gupta, M.I.D.C. Ahmednagar-414111,	Dr. Nair	02 41-2778042, 2777059 Email- vpfamch@ sancharnet.in	Eye Bank & Keratoplasty Centre
Drushti Eye Bank (Vision Eye Foundatiion) Nal Stop, Karve Road, Eradavan, Pune-411 004.		020-25466808, 25431395	Eye Bank & Keratoplasty Centre
Shroff eye Hospital 222, S.V.Road, Bandra (W), Mumbai-400 050.	Dr. Shroff	66 921000, 26431006 Email-shroffeye@vsnl. com	Eye Bank
Civil Surgeon, District Hospital Ratnagiri	Civil Surgeon	02 352-222363, Email:npcb. ratnagiri@gmail.com, cs.ratnagiri@gmail. com	ERC
Noble Hospital, 153, Magarpatta City Road, Pune-411 013.		02 0-66285000, 66295000	Keratoplasty Centre
Grant Medical Foundation, Ruby Hall Clinic, 40, Sassoo Road, Pune-411 001.	Smt. Joshi	020-26123391, Email- pmrf@giaspn01.vsnl. net.in	Eye Bank & Keratoplasty
Padmashree Dr.D.Y.Patil medical College, Pimpri, Pune-411 018.		27420605/27420307 Email- meddyppc@ vsnl.net	Eye Bank
Saifee Hospital, Post Box no. 3771, 15/17 Maharshi Karve Marg, Mumbai-400 004.		67570111 Email-write@ saifeehospital.com	ERC & Keratoplasty Centre
PBMA'S H.V. Desai Eye Hospital S.No. 93, Tarawade Vasti, Mohammadwadi, Hadapsar, Pune- 411 028	Shri.Kuldeep Purandare / Shri.Satish Kurpad	26870043/26874144 / 8007383000 / 9922893988 Email- desaieyehospital@ vsnl.net	Corneal Transplant Center
Gokhale Eye Hospital & Eye Bank, Gokhale Road (south), Dadar (W), Mumbai-400 028.		24221820, 24227425 Email-nikgokhale@ yahoo.com	Keratoplasty Centre
Dr. S.Narayani Fortis Hospitals Ltd. Mulund Goregaon Link Road, Mumbai-400 078.	Dr. S.Narayani	67994444, 67994242	Keratoplasty Centre
Gomati Eye Centre 101, Maa Durgamata, Hanuman Chowk, Navghar Road, Mulund (E), Mumbai-400 081. Email-gomathieye@hotmail.com	Dr. Raghu Krishnan	9819339587, 022- 21631482 Email- gomathieye@hotmail. com	Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
K.E.M. Hospital, Parel, Mumbai-400012. 24107000	Dr. Sheela Kerkar	9820297576	Eye Bank & Keratoplasty Centre
Kapoor Eye Centre 409 Om chambers, Kemp's Corner, Mumbai-400 036.	Dr.Shashi Kapoor	23681009, 23643513Email- kapshashi@gmail.com	ERC, Eye Bank & Keratoplasty centre
Dr. D.M. Kamble Director, Miraj Medical Center Wanless Hosptal, Miraj, Dist. Sangli- 416410	Dr. D.M. Kamble Director,	0233-2222548, 222329-95 email- wanlesshospital@ datatone.in	ERC
Dean, Lokmanya Tilak Mun.Gen.Hospital & Medical College, Sion, Mumbai-400 022.	Dr. Chhaya Shinde	24076381/ 9833581142 email drchhaya9@ gmail.com	ERC, Eye bank & Keratoplasty Centre
Rajiv Gandhi Medical College & Chhatrapati Shivaji Maharaj Hospital, Belapur Road, Kalwa, Dist. Thane	HOD	25372774 to 79 Email-rgmc@hotmail.com	ERC, Eye bank & Keratoplasty Centre
Dr. Vikas Mahatme Mahatme Eye Bank & Eye Hospital 16, Central Excise Colony, Near Sai Mandir, Ring Road, Nagpur-440 015	Dr. Vikas Mahatme	0712-2289101 to 104 email-manager@ mahatmehospital.com	ERC, Eye bank & Keratoplasty Centre
Parekh Eye Hospital 1st floor, Diamond Palace, Hill Road, Opp. Bandra Police Station, Bandra (W), Mumbai-400050.	Dr.Parekh	26404966 Email-contact@ parekheyehospital.com	Keratoplasty Centre
Smt. Tarabai Paranjpe Eye bank Trust & Research Foundation Sangali, Gulmohar Colony, South Shivajinagar, Sangli-416416.		0233-2620205,2325980 shekhar_paranjpe 1@ rediffmail.com	ERC, Eye Bank & Keratoplasty centre
Drushtidan Eye bank c/o Anuradha Eye Hospital, 100 ft. Road, Vishrambag, Sangli-416415.	Dr. Killedar	0233-2301939, 2305723	Eye Bank & Keratoplasty Centre
Govt. Medical College, Pandharpur Road, Miraj, Dist. Sangali	Dr.A.B.Patil	0233-2232091 to 95 0233-2601592, 2601593, 2601594 / 0233-2212777	Eye Bank & Keratoplasty centre
National Institute of Ophthalmology 1187/30, opp. Gokhale Road, Near Phule Museum, Shivajinagar, Pune-5.	Shri Vijay	020-25536369, 25536324, 9922747228	Eye Bank & Keratoplasty centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Eye Bank Co-ordination & Research Centre, 56/60, Jehangir Street, Near KEM Hospital, Parel, Mumbai-400 012.	Mr. Rupesh	24164342, 24162929 ebcrc@vsnl.com	Eye Bank
K.J. Somaiya Medical College & Research Centre, Everard Nagar, Sion, Mumbai- 400022.	Dr. Sarvesh	24091855/ Email- smaiymedical@ rediffmail.com	ERC & Keratoplasty Centre
K K Eye Institute 7-9, Koregaon Park, Pune-411 001.	Dr. Paswani	020-66099950 Email_kkeyeinstitute@ sadhivaswani.org	Keratoplasty Centre
Dr. D.K. Zarekar, Chief Executive Director Tulsi Eye Hospital, Happy Home Colony, Near Gen Vaidya Nagar, Nashik-422011.	Dr. Dr. D.K. Zarekar, Chief Exec Director	2411039, 2415201 email- tech_nsk@ sancharnet.in	Eye Bank, ERC & Keratoplasty centre
Bhakti Vedanta Hospital, Shrishti Complex, Bhaktivedanta swami marg, Mira Road (E), Thane-401107	Dr. Anil Patil	28459888, 29452500	Keratoplasty center
Bharati vidyapeeth University medical college & hospital Wanlesswadi, Sangli-416414.	Dr.A.B.Patil	0233 2212777, 2601592-94 Email- www.bvulib@ dataone.in	Eye Bank, Keratoplasty centre
Sahiyara Eye Bank (Matushri Gomtiben Ratanshibhai Chheda Eye Bank) 305-B, manas residency, teen petrolpump, L.B.S. Road, Thane- 400 602.	Mrs. Supriya	93206 11919, 9321311919 sahiyaraeyebank@ gmail.com	Eye Bank
Civil Surgeon, General Hospital, Main Road, Chandrapur	Dr. Ulhas Sarode	Phone No 07172- 250400/ 9420641797	Keratoplasty Centre
Shree Eye Care 101, 'A' Wing, Pranav Commercial Plaza, M.G. Road, Mulund (W)	Dr. Priya	drpriya@ shreeeyecare.com 25601700	Keratoplasty Centre
Dr. Ulhas Patil, Godavari Foundation Rotary Club of Bhusaval Eye Bank, Plot No. 315,316,321 & 305, Jalgaon-425309.	Dr. Ulhas Patil	0257-3058557 email- dupmcj@yahoo.in	Eye Bank & Keratoplasty Center
Dr. Shah's Eye & Laser Centre Asara Apt., Plot No. 33, Station Road, Ambemath (E), Dist. Thane		2601074 email- drshahlasereye@ yahoo.in	ERC & Keratoplasty centre
Kandivali Eye Retrieval Centre, Nishita Apt., Dahanukarwadi, M.G.Road, Kandivali (W), Mumbai-400067.	Dr. Kapadiya	Phone-29670476 email-kandivali.eyebank@ gmail.com	ERC

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Tarun Mitra Mandal, C/o VLN High School, Dr. B.A. Road, Chinchpokli, Mumbai-12.	Smt. Kusum	240794140-41	ERC
Civil Surgeon, Dist. Hospital, Tembi naka, Thane.	Civil Surgeon	Phone-25474935 email npcsthane@ gmail.com	ERC
Dean, Govt. Medical College & Hospital, Suare Nagpur	Dr. A.H.Madan	Phone -0712-2701502 / Mob No.9422101484 /0712-2701502	Eye Bank & Keratoplasty Centre
Pravara Medical Trust Pravara Rural Hospital, Loni, Ta: Rahata, Dist. Ahmednagar-413736.	Dr. Mrs. S. V. Bangal	02422-273600 /918888718981 email- ophthalmology@ pmpims.org	Eye Bank & Keratoplasty Centre
Govt. Medical College & Hospital Medical Square, Nagpur.	Dean	Phone -0712-2701502	Eye Bank & Keratoplasty Centre
Doctor Eye Hospital S.V.Road, Andheri (w), Mumbai-400058.	Dr. Urmi Shah	26280777/66950329 email- drkumardr@ vsnl.com	Keratoplasty Centre
Drushti Eye Hospital New Ashvini Co.op. Hsg. Soc., Near Vijay Medical, Station Road, Kulgaon, Badalapur-421503.		0251-2690871 email- drishtieyebadlapur@ gmail.com	ERC & Keratoplasty Centre
Manorama Eye Clinic 44-A Gokulpeth, Hill Road, Nagpur-10	Dr. Ajay Kulkarni	Phone -2546533, email-dr.ajaykulkarni@ gmail.com	Keratoplasty Centre
Smt. Kashibai Navale Medical College & General Hospital, Sr. No. 49/1, Narhe, off. Mumbai-pune Bypass, Pune-411041.	Dr. Rajendra Bangal	Phone- 020- 24106271/104 email-dean@ sknmcgh.org	Eye Bank & Keratoplasty Centre
Shri Bhahusaheb Hire Govt. Medical College & Hospital, Sakri Road, Dhule.	Dr.M G Khan	2562-239407-08 9823127141 Pho.02562-	Eye Bank, & Keratoplasty centre
Vasan Eye Care Hospital, Plot No. 113, Mahavir Ratan Sector-12, Navi Mumbai.	Dr. Ashih Bachchav	022-39890000 email- vashi.mah@ vasaneyeye.in	Keratoplasty Centre
Dr. Nikunj Shah The Eye Super Speciality, 201, Punit Plaza, Near Rajawadi Post office ,Ghatkopar (W), Mumbai-77.	Dr. Urmi Shah	21025070	Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
P.D.Hinduja National Hospital & Medical Research Centre, Veer Savarkar Marg, Mahim, Mumbai-400 016.	Dr. Rajaram Amrut Bhalerao	Phone: 24451515/2222	ERC & Keratoplasty Centre
Nandadeep Eye Hospital, Near Patidar Bhavan, Madhavnagar Road, Sangali.	Dr.Saurabh Patwardhan	Phone- 02332621726/27 email- nandadeepeyehospital@gmail.com	Eye Bank & Keratoplasty Centre
Hiranandani Hospital Plot No. 28, Sector 10-A, Miniseashore Road, Vashi, Navi Mumbai- 400 703.	Dr. Harshvardhan Ghorpade	Phone- 39199222/220 email-vashi@vashihospital.com	ERC & Keratoplasty Centre
Dr.Shah's Laser Eye Insitute, C-wing, Rathod Nagar, Behind Raja Hotel, Nr. K.D.M.C. Kalyan (W)- 301.	Dr. Sonal Shah	Phone- 2311084/2319905 email- drshahlasereye@yahoo.in	ERC & Keratoplasty Centre
M.V.P.'s Dr. Vasant Rao Pawar Medical College, Hospital & Research Centre, Vasantdada Nagar, Adgaon, Nashik-422003.	Dr. Mrs. Patil Vidya	phone - 0253-2303802 email- admin@mvpmcn.com	Keratoplasty Centre Eye Bank
Civil Surgeon, Dist. Hospital, Akola Naka, Washim.	Civil Surgeon	Email-npcb.washim@gmail.com	ERC
Neelvasant medical foundation & Research Centre., New Pandit colony, Sharanpur Road, Nashik-422001.	Dr Mrs Prachi Pawar	0253-2577717 email- neelvasant@yahoo.com	Eye Bank
Saswade Eye Clinic & Laser Centre, Plot No. 3, Jay Vishwabharati colony, Chetak Ghoda Chowk, Tilak Nagar, Aurangabad-431005.	Dr. Manoj R. Saswade	0240-2335189 email-saswade.hospital@gmail.com	Eye Bank, ERC & Keratoplasty centre
Wagh Eye Clinic 1 Mugut Apt., 1194, Ghole Road, Shivajinagar, Pune.	Dr. Wagh	25538090 email-sangeeta.wagh@gmail.com	Keratoplasty Centre
Smt. Shakunidevi Multanji Mehta Eye Bank, Jain Social Group (Dailana), Room No.88, 1st Flr, Peparmentwala Estate, L.B.S.Marg, Station Road, Bhandup (W), Mumbai-78.	Smt. Shakunidevi Multanji	25953785/25946052 jsgdailana@gmail.com	ERC
Vyawahare Netralaya, V.M.V.Road, Rathni Nagar, Amravati.	Dr.Pravin Vyawahare	0721-2664880 email- vyawahareyehospital@yahoo.com	Eye bank/ Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Akola Netradan & Netraruplan Sanshodhan Kendra, Netra Kamalanjali Charitable Hospital, Rallis Jeen Compound, Old Cotton Mkt., Akola-444 001.	Dr. Sham Panpaliya	0724-2441919 email- shyampalpaliya@gmail.com	Eye Bank
Pramukh Swami Eye Hospital Near Chuna Bhatti Railway Station, Sion, Mumbai-72.	Dr. Sanjeev Shaw	24055151	Eye Bank & Keratoplasty Centre
Natasha Eye Care & Research Centre, Eye Light Laser & Eye Care Pvt. Ltd., Bldg. A Sai Saheb Pimple Saudagar, Pune-2	Dr. Kishor Ahuja	020-30202610 email-info@eyelight.in	Eye Bank & Keratoplasty Centre
Civil Surgeon, General Hospital Buldhana	Civil Surgeon,	Phone-07262-241646 email npcb.bulhdhan@gmail.com	ERC
Comfot Clinic Nursing Home, Maskati corner Bldg., 2nd flr, 37, Altamount Road, Kemp corner, Mumbai-400 026.	Mr. Shinde	Phone-23814076/79 email- comfortclinicnusinghome@gmail.com	Keratoplasty Centre
Kabra Eye Hospital & Cornea centre, Chatrapati Shivaji Complex, Santoshi Mata Road, Jalna-431203.	Dr.Amit Kabra	Phone-02482-238638 email-dramitkabra@yahoo.co.in	Keratoplasty Centre
MGM New Bombay hospital, Plot No. 35, Sector 3, Vashi, Navi Mumbai-400 703.	Dr.Vandana Jain	Phone-27822203/1659 email-mgmbhvh@bom3.vsnl.net.in	Keratoplasty Centre
Shri Ganpati Netralaya Devalgaon Raja, Mantha Road, Jalna- 431203.	Shri Raut	Phone- 02482-239001-03 email-admin@netralaya.org	Eye Bank & Keratoplasty Centre
Acharya Vinoba Bhave Rural Hospital, sawangi Meghe, Wardha.	Dr.Pradeep Sune	Phone-07152-287701-05 email-medical_wda@sancharnet.in	Eye Bank & Keratoplasty Centre
Deenanath Mangeshkar Hosp. & Reserach Centre, Venu Madhav Eye Bank, Yerandwane, Pune-411 004.	Smt Phaltankar	Phone 66023000/40151000 email-jpmt@vsnl.com	Eye Bank, & Keratoplasty centre
Rotary Club of Borivali Charitable Trust Eye bank, E-3, Dwarkesh Apt., L.T.Road, Borivali (W), Mumbai-92.	Mr. Tushar	Phone- 28990707 email-admin@rotaryeyebank.com	Eye bank
Infinite Eye Hospital, Jaymahal Bldg., Ground Flr., French Bridge, Opera House, Mumbai-40007.	Dr. Mehta	Phone-23670246, email-contactus@infiniteye.com	Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Dr.JK shah's eye clinc & Laser cetnre A-1, Agarwal Apt., 145 Four Bunglow Road, Andheri (w), Mumbai-53	Dr. Nimish Shah	Phone- 26354617 email-dnimisha15@ yahoo.co.in	Keratoplasty Centre
Advanced Eye Hospital & Institute, 30, The affairs, Palm Beach Road, Sector-17, Sanpada, Navi Mumbai-400705.	Dr.Vandana Jain	Phone-67313636 email-contactus@ advancedeyehospital. com	Keratoplasty Centre
Shree Teke eye clinic & sight ccare society eye, Shiv Pavillion, 1st flr, Ram Mandir chowk, Sangali-416416	Dr.Ramakant Teke	Phone 0233-2376330, email- teke. ramakant@gmail.com	Keratoplasty Centre
KamalNayan Bajaj Hospital, Gut No. 43, Satara parisar, Bajaj Marg, Beed Bypass Road, Aurangabad-431005.	Dr. Nalgikar	Phone 0240-2377999 email-kbh@ bajajhospital.com	Eye Bank & Keratoplasty Centre
Madhav netrapedi, 16 Devdatta Bhawan, Rana Pratap Nagar, Nagpur-440 022	Mr. Vinay Nijsure	Mob No.9890046791/ 0712-2244918	Eye Bank
Netra Seva, 13, Priyanka Residency, Mantha Square, Jalna.	Dr.Pradip Jain	Phone- 02482-238202 email-netraseva@ gmail.com	Eye Bank & Keratoplasty Centre
Armed Forces Medical College, Pune Wanaworie PO Pune-411040.	Col Apoorv Dixit	phone- 020-26026035 email- ahluwalia_ts@ hotmail.com	Eye Bank & Keratoplasty Centre
Anjani Eye Hospital 20, Farmland Near Lokmat Sq. New, Ramdaspath, Nagpur-10	Dr.Shweta Mokadam	7875554699/ 7875554697	Keratoplasty Centre
Sushila Eye Hospital & Brahma Laser centre, P-10, Satpur, M.I.D.C. Near P.F. Office, Nashik-422 007.	Dr Sharad Patil	0253-2579791 email-sharadeye@ rediffmail.com	Eye Bank & Keratoplasty Centre
Shri V.N. Govt. Medical College & Hospital, Yeotmal,	Dean	0723-244148 email- deanvngmc@ rediffmail.com	ERC
Mahatme & Happiness Hospital, Saukhya Jairamkrishna Co.op.Hsg. Soc., Deshmukhwadi, Mithagar Road, Mulund (E) Mumbai-81	Dr. Vikas Mahatme	21633893/21633890 email- manager@ mahatmehospital. com	Keratoplasty Centre
Suraj Eye Institute-Om Drishti Trust, 559, New colony, Nagpur.	Dr.Vinay B. Nangia	-0712-2515636/2595796 email-nagpursuraj@ gmail.com	Eye Bank, & Keratoplasty centre
Aditya Birla Memorial Hospital, Aditya Birla Memo Hosp.Marg, P.O. Chinchwad-411033.	Dr. Ramesh Murthy	Phone-02030717755 email- healthcare@ adityabirla`.com	Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Swami vivekanand Medical Mission, Parsodi Khopri, Wardha Road, Nagpur.	Mr.Mohan Joshi	07103-275547, 275757 email- svmmkhapri@gmail.com	Keratoplasty Centre
Krishna Institute of Medical Sciences, Malkapur, Karad, Dist. Satara.	Dr. B.S. Joshi	02164-241555, 242170 email-medicaldirector.kh@gmail.com	Eye Bank, & Keratoplasty centre
NkP salve Institute of Medical Sciences & Lata Mangeshkar Hospital, Digdoha Hills, Hingana Road, Narput-440019.	Dr.Rekha Khandelwal	0714-2362901-02/9823261794 email- icareenkpsims@gmail.com	Keratoplasty Centre
Deesha Eye Bank 464, Deesha Villa, Shri Gajanan Township No. 2, Kathora Road, Amravati.	Swapnil Arun Gawande or Sunil Sharma	Mob.8275539754/ 9423424450 email-deeshagroup@gmail.com	ERC
Akshar Eye Clinic, Radha Vishwar Bldg., 1st Floor, Narsigh Lane, Malad (W), Mumbai-64.	Mr. Nitin	28030469 / akshareyeclinic@gmail.com	Keratoplasty Centre
Krishna Eye Centre, 2nd floor, Trust House, Global Hospital Annex, Opp. Shirodkar High School, Parel, Mumbai.	Dr. Sonia	Tel No. 66576666 drsonia@krishnaeyecentre.com	Keratoplasty Centre
Civil Surgeon, District Hospital Osmanabad	Civil Surgeon,	02382-243374 email- npcb.osmanabad@gmail.com	ERC
Rotary EDC, C/o Chirania Eye Hospital & Maternity Home, Near Ramdevbaba mandir, Akola - 440001.	Dr.Jugalkishor Chiraniya	0724-2439092, 9822366332 email- jugal chirania@gmail.com	ERC
INHS Avini, Near R.C. Church, Colaba, Mumbai-400005	Nikhil Sardar	22163500	Eye Bank & Keratoplasty Centre
Kenia Eye Hospital, 1st floor, C-101, D-101/102, Rizvi nagar, next to Milan Mall, Santacruz (w), Mumbai-400 054.	Dr. Pallavi	26138088, 26144013, email-keniaeye@gmail.com	Keratoplasty Centre
Shah Eye Clinic & Nursing Home 79, Kailas Nagar, Gr. Floor, 658, Tardeo Road, Mumbai-400 007.	Dr. Hemendra	Phone No. 23534458 email- drhemendra@hotmail.com	Keratoplasty Centre
Misribai Gulabchand Toshniwal eye bank trust & research centre foundation, Navneet Hospital, 165/1 Railway Lines, Solapur-413001.	Dr. Navneet Toshniwal	Phone no. 0217-2310345 email- navneeth@bsnl.in	Eye Bank, EDC & keratoplasty centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
MIT Hospital & Research Institute Sector-F, Plot No. 144, Near Kamgar chowk, N-4, Cidco, Aurangabad.	Dr. Shrirang Deshpande	Tel No. 0240-2473740, email-mit.hospitl4u@ gmail.com	Keratoplasty Centre
Dr. Bapaye Hospital Behind N.D.C.C. Bank, Old Agra Road, Nashik-1.	Dr Manish Bapaye	Tel No. 0253-2506505 email- drbapayehospital@ rediffmail.com	Keratoplasty Centre
Padmabhushan Vasantdada Patil Govt. Hospital Ambedkar Road, Sangali.	Director	Tel No. 0233-2375025 email-dbcssangali@ yahoo.com	ERC
Shivam Eye foundation Sec. 25, Plot No. 14, Near Seawood Station, Nerul East, Navi Mumbai-706.	Dr. Sonali Varade	Tel No.022-27706762 email- shivameyefoundation@ gmail.com	Keratoplasty Centre
K.T.S. General Hospital , Civil Lines, Gondia,	Civil Surgeon	Tel No. 01782-234130 email-npcb.gondia@ gmail.com	ERC
Dr. L.H.Hiranandani Hospital, Hillside Avenue, Hiranandani Garden, Powai, Mumbai-76.	Dr. Pravin Bhatt	Tel. 25763300/3333 email- info@ hiranandanihospital. org	ERC & Keratoplasty Centre
Civil Surgeon, District Hospital Bhandara	Civil Surgeon	Phone- 07184-252247 email- npcbbhandara@ gmail.com	ERC
Udaigiri Lions Eye Hospital Behind Uday Colony, Lion Nagar, Nanded Road, Udgir, Dist. Latur.	Dr.R.N. Lakhotiya	02325-255245/253774 email-lionseyeudgir@ yahoo.co.in	Eye Bank & Keratoplasty Centre
Aditya Jyot Eye Hospital Pvt. Ltd., Plot No. 153, Road No.9, Opp. SIWS College, Wadala (W), Mumbai-400031.	Mr. Joseph	24177600/02/013 Email-qjeh1990@ gmail.com	ERC & Keratoplasty Centre
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Clear Vision Eye Centre & Research foundation, 1/A, Ashoka, 15 S.V.Road, Opp. St.Terraces Convent School, Santacruz (W), Mumbai-400054.	Dr. Jyoti	26046898/41847 email-drvinay. agarwal@gmail.com	Eye Bank & Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Ojas Laser Eye Surgery Centre, Rose Land Bldg., 180 Waterfield Road, Bandra (W), Mumbai-50.	Dr. Ranjita	26405951/26514066 email-ndedhia@vsnl. com	Keratoplasty Centre
Diya Drushti Eye Care Centre, B-12/13/15/19, Laxmi Niwas, Pai nagar, Nr.Gokul Hotel, Mandpeshwar Road, Borivali (W) Mumbai -400092	Dr. Nimish	28904788, 28956841 email- drnimesh@ divyadrashtieaeyecare. com	Keratoplasty Centre
Shrushrasha Citizens Co-op. Hospital Ltd., 698/B, Ranade Road, Dadar, Mumbai-28.	Dr. Kunjal Sejpal	24449161-64 email- shushrushahospital@ yahoo.com	Keratoplasty Centre
General Hospitl Wardha Main Road, Wardha	Civil Hospital	07152-243066, email- npcw.wardha@ gmail.com	ERC.
Mumbai Eye Care Cornea & Lasik Centre, 101/102, Sai Vaibhav CHS Ltd., Zulelal Chowk, Ghatkopar (E), Mumbai-400 077.	Minakshi	8451045934-35 email- drjatinashar@ gmail.com	Keratoplasty Centre
Conwest & Manjula S. Badani Jain Hospital, Conwest Jain Clinic Chowk, 8/10, S.V. Sovani Path, Khadilkar Road, Mumbai-04.	Sweta	Phone- 23820909 conwestjainclinic@ gmail.com	ERC & Keratoplasty Centre
Lotus Eye Hospital, 13th North South Road, Vithal Nagar Society, Juhu, Mumbai-400 049.	Tejal Brid	26207352/26207534 email- lotuseyehospital@mtnl. net.in	Eye Bank & Keratoplasty Centre
Wavikar Eye Hospital, Wavikar Eye Insitute, Level 4 & 5, Amber Arcade, Bhiwandi Bypass Road, Majiwade, Thane (W).	Dr. Shrivali Kaza	Phone No.- 399183001 email- contact@ wavikareye.com	ERC & Keratoplasty Centre
Nirmay Eye Care, 2nd floor, P.P.Chambers, Behind KDMC Bldg., Dombivali (East)	Dr. Sheetal Deolekar	Mob No. 9930053031 email-platinumback@ live.com	ERC & Keratoplasty Centre
Kokilaben Dhirubhai Ambani Hospital & medical Research Institute, Achyutrao Patwardhan Mar, 4 Bungalow, Andheri (W), Mumbai-400 053	Dr. Seema Behl	Phone no.- 230666666 email-contact.kh@ relianceada.com	Keratoplasty Centre
St.George Hospital, Shahi Bhagatsingh Road, Nr.G.P.O. Opp. CST Railway Station, Mumbai-400001.	Dean	22620242 email- saint. georges083@gmail. com	Keratoplasty Centre
Late Krantsingh Nana Patil General Hospital, Sadar bazar, Satara.	Civil Surgon	02162-233377, 238494 email- npcbsatara@ gmail.com	ERC

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
General Hospital Akola, Collector Office Road, Akola-444001.	Dr.Rajesh Pawar	0724-2434401, 2435018 email- cs_akola@rediffmail.com	ERC
Dr. Mahohar Dole Medical Foundation, Narayangaon, Tal. Junnar, Dist. Pune	Dr S.Dole	02132-243140, 244398 email- sandeepdole@yahoo.co.in	Eye Bank, & Keratoplasty centre
Asian Eye Institute & Laser Center, 101/201, Satyanarayan Apartment, Opp. G.H. School, M.G.Road, Borivali (E), Mumbai -400066	Dean Dr. Raghini Parekh	3735555 email- deangmcjjh@gmail.com	Keratoplasty centre
Govt. Medical College & Hospital Latur, Signal Camp, Latur	Dr.B.N.Dole	02382-247676, 249292	Eye Bank & Keratoplasty centre
Aditya Eye Bank Sanjyot Netralaya Near Shahu Putala, Ichalkaranji	Dr.Sanjay Rasal	Phone No. 0230-2431552 email- drsanjayrasal@yahoo.com	Eye Bank & Keratoplasty centre
Netranjali Eye Care Clinic, Deeparchan road, Balaji Plot, Near Rajapeth Square, Amravati.	Dr.Navin D.Soni	7212560500/ 2572967 email-netranjalclinic@gmail.com	Keratoplasty centre
Mangilalji Bafna Eye Bank & Eye Hospital, Near Ashvini Medico, Opp. Bhaskar Mkt., Dist. Jalgaon.	Smt.Rajshree A. Dolhare	Phone No. 0257-2217069	Eye Bank & Keratoplasty centre
Shrusrusha Clinic, Late Pramod Agrawal Memorial trust, Gaddatoli, Shivaji nagar, Gondia - 441 601.	Shri Jugalkishor Agrawal	07182-251587, 9326182049 email- agrawalps@rediffmail.com	ERC
Social Service League Charitable Eye & General Hospital, Opp. ICICI Bank, Shankarrao Chowk, Kalyan (W),	Dr.Sameer Parab	Phone- 0251-2205148, 2201633	ERC & Keratoplasty centre
Shanti Saroj Netralay, 901/902, Near Sundar Nagar, Anand Nursing Home Road, Miraj-416410.	Dr. Pooja Bhomaj	0233-2212646, 6422946 email- sharadbhomaj@rediffmail.com	Keratoplasty centre
Vasan Eye Care Hospital, Near Hariniwas Circle, LBS Marg, Thane	Dr.Mitesh Jain	0251-3989000 email- sachinj.vasan@gmail.com	ERC & Keratoplasty centre
Civil Surgeon, Dist. Hospital Beed	Civil Surgeon	02442-222618 email-npcb.beed@gmail.com	ERC
Sir J.J. Group of Hospital, Byculla, Mumbai-400008.	Dean Dr. Raghini Parekh	3735555 email- deangmcjjh@gmail.com	Eye Bank & Keratoplasty Centre

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Swastik Netralaya Inside Kothi Chowk , Station Road, Ahmednagar-414001.	Dr. Prafull Chaudhari	8888099987 , 886202777 email- prafulchaudhary@ gmail.com	Eye Bank & Keratoplasty Centre
Mehta Eye Clinic, Jayant Arcade, 3rd floor, Above Shamrao Vithal Bank, M.G.Road, Ghatkopar (E), Mumbai-400077.	Dr. Mehta	022-2102364	Keratoplasty Centre
Drushti Eye Institute, 139, Samarth Nagar, Aurangabad.	Dr. Sunil Kasbekar	2240990, 2333456	Eye Bank & Keratoplasty Centre
Sunder Netralaya, Chaupati Karanja, Ahmednagar.	Dr. Sundar Gore	0241-2345499 email- sundernetralaya@ gmail.com	Eye Bank & Keratoplasty Centre
Jehangir Hospital, 32, Sassoon Road, Pune-411001.	Dr. E. K. Bharucha	Tel no. 020-66819999 email-info@ jehangirhospital.com	Keratoplasty Center
Shri Ramkrishna Netralaya, A-101-03, Shri Balaji Apartment, L.B.S. Road, Makhmali Talao, Thane-400601.	Dr. Jatin Ashar	Tel no. 25391599 email- shreeramkrishnanetralaya@ gmail.com	Keratoplasty Center
Vision Care Center, Superspeciality eye hospital, A/P Shirur, Tal. Shirur, Dist. Pune- 412210	Dr. Bhalekar	02138-224211 email-drbhalekarsb@ gmail.com	Keratoplasty Center
Dr.Sudhir Dagaonkar, Roshani Eye Bank, Lilavti hospital & Research Center, A-791, Bandra Reclamation, Bandra (W) Mumbai-50.	Dr.Sudhir Dagaonkar,	022- 26751000/26568000 email-sewa@ lilavatihospital.com	Eye Bank & Keratoplasty Center
Civil Surgeon, Dist. Hospital Jalna	Civil Surgeon,	Phone 02482-224381 email-npcb.jalna@ gmail.com, cs_jalna@ rediffmail.com	ERC
Medical Supdt., Sub Dist. Hospital Akluj, Dist. Solapur	Medical Supdt.,	Tel No. 02185-222789 email-sdhakluj@ yahoo.co.in	ERC
Dr. Sachin S.Kolhe Eye N.I. A2, 108/109, Kailash Complex, Bhandup (W), Mumbai-78.	Dr. Sachin S.Kolhe	22-25958412 , 25958413	Keratoplasty Center
Dr. A.G.Shroff, Dean MGM Medical College & Hospital, N-6 CIDCO, Aurangabad.	Dr. A.G.Shroff, Dean	0240-6601100, 2483401 email- mgmdeptofophthalmology@ gmail.com hodophthal@mgmmcha.org	ERC

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Dr. Swaranjit Singh Batti Bhatti Eye Clinic 22, Amar Mansion, Opp. Deonar Bus Depot, ST Road, Mumbai-400 088.	Dr. Swaranjit Singh Batti	eyedoc@bhattiye. com Mob No.- 9867227177	Keratoplasty Center
Medical Supdt., V.C.Gandhi & M.S.Vora Rajawadi Municipal Gen.Hospital, Ghatkopar (E), Mumbai- 400 077.	Medical Supdt.,	022-21024151	Keratoplasty Center
Dr.Swapnesh Sawant, Anideep Eye Hospital & Institute Pvt. Ltd., Plot No.414, Opp. Saint Joseph School, Near Golden Tobacco, S.V.Road, Vile Parle (W), Mumbai-56.	Dr.Swapnesh Sawant,	022-26251111	ERC & Keratoplasty Center
Dr. R.Bharmal Dean, B.Y.L.Nair Hospital, Dr. A.L.Nair Road, Mumbai Central, Mumbai-400 008.	Dr. R.Bharmal Dean,	022-23027646/648	ERC & Keratoplasty Center
Dr. Hanumant Karad Netrapratishthan D.S. Karad Eye Bank Kaushalya Hospital Campus, P-66, M.I.D.C. Area, Kalamb Road, Latur - 413512	Dr. Hanumant Karad	02382-222919 email- dskarad. eyeinstitute@gmail. com	Eye Bank & Keratoplasty Center
Dr. Phiroze Patel, Jaslok Hospital & Research Center, 15, Dr. G. Deshmukh Marg, Mumbai-400 026.	Dr. Phiroze Patel,	Tel: 665733333 email - infor@ jaslokhospital.net	ERC & Keratoplasty Center
Dr. Parul Deshpande, Sarvodaya Eye Hospital & Cornea Clinic, 106, 1st Floor, Dina Bldg., Station Road, Santacruz (W), Mumbai-54.	Dr. Parul Deshpande,	26046245/65152905 email- parul72@ yahoo.com	Keratoplasty Center
Shri Varad Netralay and Maternity Home, New Doctors Lane, Near Hirani Hosp. Pusad, Yeotmal.	Dr. Jay Bhopi	07233-248848 email: jaybhopi04@ gmail.com	ERC
Joag Netra Rughnalaya Fonix Gangadhar Hsg. Society, Hotagi Road, Solapur.	Dr. Yashashree Joag	0217-2602005, 2601977 email:yashashreejoag@ hotmail.com	ERC & Keratoplasty Center
Anu Eye Clinic, Karve Naka, Godeshwar Road, Karad-415110	Dr. Shrikrishna Dhage	02164-223337, 9423033721 email: anu.eyebank@ gmail.com	Keratoplasty Center
Dr.Suhas Haldipurkar Laxmi Charitable Trust Eye Hospital & Laxmi eye Bank, Uran Road, Panvel Dist. Raigad	Dr.Suhas Haldipurkar	022-27452228/ 27453147 email-info@laxmieye. org	Eye Bank & Keratoplasty Center

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Deesha Eye Bank Rohanlal Plot, Mahadev Mandir Rd., Sanjivani Multispecialty Hosp. & Research Institute Campus, Yeotmal	Dr.Ashish Potphode	8275539754/9423424450 email- deeshagroup@ gmail.com	ERC
Dr. Rohit Bang, Shrikrishna Netralaya, 50, Mahesh Nagar, Jalna Rd., Aurangabad.	Dr. Rohit Bang,	0240-2325211 email-drohitbang@ gmail.com	Eye Bank, & Keratoplasty Center
Walvekar Eye Hospital 560/58, South Sadar Bazar, Solapur-413003.	Dr. Madhuri Walvekar	0217-23118112 email- madhuriwalvekar@ yahoo.com	ERC & Keratoplasty Center
Dr. Nita Shah Aayush Eye Clinic Microsurgery & Laser Center, 201/202, Coral Classic, 20th Rd., Chembur, Mumbai-400 071.	Dr. Nita Shah	23881775/ 22078823	Keratoplasty Center
Pradhan Eye Hospital 50, Railway Lines, Mayur Bunglow Solapur.	Dr. Uma Pradhan	0217-2720350/2724622 email- drumapradhan@ gmail.com	Eye Bank & Keratoplasty Center
Dr. Ranade Eye Hospital Pvt Ltd., 215/216, Prestigne Princet, Nifin Company, Almeda Road, Pachpakhadi, Thane-400602.	Dr.Matangi Chari	25425411/25425422 0217-2720350/2724622	Keratoplasty Center
Dr. Manish Tote Tote Eye Hospital and Polyclinic Rathi Nagar, Amravati	Dr. Manish Tote	8275539754/9423424450 email-deeshagroup@ gmail.com	Eye Bank & Keratoplasty Center
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Dear, Shri Chh. Shivaji Maharaj S. Rughnalay & Dr. V.M. Govt. Medical College, Dist. Court, Solapur.	Dr.Suhas Sarvade	Phone-0217-2310766 email-deansolapur@ gmail.com	Eye Bank, & Keratoplasty Center
Dear, Govt. Medical College & Hospital Panchakki, Aurgangabad	Dean	Phone-0240-2402412	Eye Bank, & Keratoplasty Center
Anuradha Eye Hospital & Polyclinic, Drushtidan Eye Bank run by Netraseva Foundation, Near Walchand college of Engineering, 100 ft.Rd., Vishrambaug, Sangali- 416415	Dr.Milind Killedar	0233-2301939, 2304770 email-info@ anuradhaeye.com	Eye Bank, & Keratoplasty Center
Dr. A. M. Jogalekar Prgati Netra Rughnalay 9th Lane, Rajarampuri, Kolhapur	Dr. A. M. Jogalekar	0231-2529348 email-drmajogalelar@ gmail.com	Eye Bank, & Keratoplasty Center

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
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Dr. R.V.Ramani Sri Kanchi Kamakoti Medical Trust-Bhojraj Chanarai Sankara Eye Hospital, 401/402, Sej Plaza, Near Nutan High School, Marve Rd., Off.S.V.Rd., Malad (W), Mumbai-64	Dr. R.V.Ramani	022-28093855 email-mumbai@ sankaraeye.com	Keratoplasty Center
Dr. Irfan Khatib, Khatib Eye Clinic Honda Mansion, 332 Sir J.J. Road Byculla	Dr. Irfan Khatib	022-23078659, 9821138125	Keratoplasty Center
Dr. Bhaidas Patil Jawahar Medical Foundation Annasaheb Chudamal Patil Memorial medical College, Morane, Sakri Road Dhule	Dr. Bhaidas Patil	Phone-02562-276317-19	Keratoplasty Center
Kasturba Hospital, Mahatma Gandhi Inst. Of Medical Sciences, Sevagram Wardha-442 102	Dr. B.S.Garg Dean	07152-284341 to 55 email- dean@mgims. ac.in	Eye Bank, & Keratoplasty centre
Shri Satishbhai Dattani Shri Kandivali Hitvardhak Mandal (BABT Eye Hosp.) S.V.Road/S.M. Road Corner, Kandivali (W), Mumbai-67.	Shri Satishbhai Dattani	28021073/28072896 email- hitwardhakmandal@ yahoo.com	Keratoplasty centre
C.E.O. Jupiter Netralaya, Jupiter Life Line Hospital, Eastern Express Highway, JCIU Unit, Thane (W).	Dr.Ravindra Karanjkar	21725555/6666 email- info@ jupiterhospital.com	ERC & Keratoplasty centre
Dr. Rajeev Raut, S.S. R. Surgicenter,22 Manisha Terrace, 2A Moledina Road, Camp Pune.	Dr.Swapnil Bhalekar	020- /26138558/26134441/ 26131363 email- eyecove@ gmail.com	Keratoplasty Center
Dr. D.A.Chandanwale Dean B.J. Govt.Medical College & Sassoon Hospital, Pune Station, Pune-411001.	Dean	020-2602359	Eye Bank & Keratoplasty Center
Dr. Shaik Nursing Home, 110 Natawala Bldg., S.V.S. Marg, Near Darga Mahim (W), Mumbai- 400016.	Dr. Shoukat Ali Shaikh	9820358200/02224440806 email- dr.shoukatalishaikh@ email.com	Keratoplasty Center
K.K. Eye Institute, 7-9, Lane-1, Koregaon Park, Behind St. Mira's College, Near Osho Ashram, Pune-411001.	Ms. Renu Wadhwa C.E.O	020-66099950/1 email kkeyeinstitute@ sadhivaswani.org	Keratoplasty Center

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Shree Netralaya, 301, City Center complex, Panchavti Radha Nagar, Amravati-444603.	Dr. Pankaj Lande	Phone-7776099911 email-pankajlande@ gmail.com	Eye Bank
Shri V.N. Govt. Medical College & Hospital, Yeotmal,	Dean	0723-244148 email- deanvngmc@ rediffmail.com	Eye Bank & Keratoplasty Center
Shri K.V.O. Jain Manav Seva Kendra, Navneet Hospital, Road No. 5 S.T. corner, Daulat Nagar, Dahisar.	Dr. Shradha Surekh	Email- navneethospital@ gmail.com	Keratoplasty Center
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Divyadrishiti Lasers Pvt. Ltd. 482 A/3 Sadarbazar, Near Old R.T.O. Satara-415001.	Dr. Jayant Sarvate	02162-238180/229101 email-jayantsarvate@ gmail.com	Keratoplasty Center
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Dr. Shyam C. Agarwal Agarwal Eye Hospital Multispeciality Eye Clinic, Maharaja Apt., 1st floor, Opp. Telephone exchange, S.V.Road, Malad (W) Mumbai-97	Dr. Shyam C. Agarwal	022-82201201/02 email- drshyamagarwal12@ gmil.com	Corneal Transplant Center
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Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Eyeheal complete vision care, Sangeeta Solitaire, above ICICI Bank, Sarvoday Nagar, Mulund (W), Mumbai-400 080.	Dr. Kaushal Shah		Keratoplasty center
Rushabh Eye Hospital & Laser Centre Pvt. Ltd., "Rushabh" 18th Road, Chembur, Mumbai-400 071.	Dr.Savita Shah	25280061/25282232 infor@ rushabhneyehospital. com	Keratoplasty center
Rotary Charitable Trust, near market yard, Behind Wear House, Malegaon Camp 423105	Dr. Savita Shah		Eyebank, & Keratoplasty center
Rotary Bhuvan charitable Trust. Dondaicha Dist. Dhule	Dr. Ketati Shah		Eyebank, & Keratoplasty center
Cardinal Garcias Hospital, Vasai			ERC
Orbit Eye Hospital, Jogeshwari	Dr. Hemal kenia		Keratoplasty center
Leela Eye Institute Kalyan	Dr. Abhijit Wadekar		Keratoplasty center
Sahyadri Hospital, Pune	Dr. Pranav More		Keratoplasty center
Shree Guruji Rugnalaya , Nashik	Dr. Kishor Patil		ERC & Keratoplasty Center
Shree Bidada Sarvodaya Trust Bombay , Maru Hospital, Mumbai	Dr. Hema Kenia		Keratoplasty Center
Ankur eye Hospital, Kolhapur			ERC
MANIPUR			
Jawahar Lal Nehru Institute of Medical Sciences (JNIMS) Eye Bank Porompat, Imphal East 795010	R.K. Victor	9862897709	Eye Bank
MIZORAM			
Mizoram Eye Bank, Civil Hospital, Aizawl, Mizoram – 796001	Miss Grace S. Sailo	09436354701	Eye Bank
Synod Hospital (ERC), Durtlang, Mizoram -796025	Dr. Lalramengmawi	09862326383	ERC

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
ODISHA			
MKCG MCH, Berhampur	Dr.B.N.R.Subudhi,		
Prof. & HoD(Ophth	9437069633	Eye Bank	
VSS MCH, Burla	Dr.Jayashree Dora,		
Prof.,HoD(Ophth.)	9437134920	Eye Bank	
SCB MCH, Cuttack(RIO)	Dr.Sumita Mohapatra,		
Prof. & HoD(Ophth.)	9439750945	Eye Bank	
Eye Bank IMS & SUM Hospital, Bhubaneswar	B.M.Pradhan		
Eye Bank Manager	7381036065	Eye Bank	
ECOs Eye Hospital, Berhampur	Dr.Mihir Ku. Bal	9438769535	ERC
Jana Jagaran, Ganjam	Satyabadi Choudhry	9438114676	ERC
Servants of People society, Odisha "The Samaja", DHH, PPC, Keonjhar	Mrs. Rajashree Upadhyay	8763879266	ERC
Drushti Daan, LV Prasad Eye Institue, Bhubaneswar	Smt. Nalini Sharma,		
Secretary	9337121272	Eye Bank	
SCB Medical College & Hopital ,Cuttack ,Odisha	Mss. Gayatri Nayak	7978580055	ERC
Capital Hospital,Bhubaneswar ,Odisha	Niladri Bihari Das	9337704637	ERC
Puri - District Head Quarter Hospital , Puri, Odisha	Ashwini Kumar Jena	7978876053	ERC
Balasore - District Head Quarter Hospital , Balasore , Odisha.	Digambar Behera	7978890372	ERC
Baripada - District Head Quarter Hospital Dist: Mayurbhanj , Odisha	Itishree Tripathy	8018773030	ERC
Ispat Drushtidaan Eye Bank, Ispat General Hospital, M/s SAIL, Rourkela, Sunder Garh, Odisha.	Chandragupta Das	9438091767	
2433095, 09438091676	ERC		
Rourkela Government Hospital , Rourkela	Chandragupta Das	9438091767	ERC

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
PUNJAB			
Govt. Medical Collage, Amritsar, Punjab	Dr. Karamjit Singh,		
Prof and Head	9815980844	Eye Bank	
Govt. Medical College Patiala	Dr.Sachin Walia Professor & Head Eye Deptt.	9876388829	Eye Bank
Govt. Medical College Faridkot	DR N R GUPTA	9417341191	Eye Bank
Rotary eye Bank The Mall, Amritsar	Dr. V.P. Lakahanpal	99883-84436	ERC
Shree Guru Harkishan Charitable Hosp. Sohana Mohali	Dr. G.S.Mangat	9814011841	
8146554989	Eye Bank		
Punarjot Eye Bank, Ludhiana	Dr. Ramesh MD (OPHTH)	9 7 8 0 0 1 5 7 1 5 , 9814331433	
9417387457	Eye Bank		
Daya Nand Medical College, Ludhiana	Dr. G.S.Bajwa	9 8 1 4 0 3 1 1 0 5 8872070025	Eye Bank
Christian Medical College Ludhiana	Dr. Gurvidner Kaur/Dr. Satish	9 8 7 2 2 1 0 1 0 3 9646001314	ERC
Thind Eye Hospital, 701, Mall Road, Jalandhar	Col. Ghuman, Dr.J.S Thind	88720-70025	Eye Bank
Guru Nanak Mission Trust, Jalandhar	Dr. Kapalmeet, Dr. Navneet Garg	9779955569	Eye Bank
Mahajan Eye Hospital, 111-Shaheed Udham Singh Nagar, Jalandhar	Dr. Vijay Mahajan (Director)	9 3 1 6 5 1 1 2 2 2 , 9 9 8 8 5 9 3 3 1 7 , 9915158543	Eye Bank
RAJASTHAN			
Eye Bank Society of Rajasthan 429, Adrash Nagar, Jaipur	Sh. B.L. Sharma	0141-2375111 0141-2604117	Eye Bank
Alakh Nayan Mandir, Ashok Nagar, Udaipur	Dr. Laxman Singh Jhala	0294-2528895	ERC
Ramavtar Eye Hospital & Glaucoma Pavilion, C-17 Tilak Nagar, Jaipur	Dr. Sunil Gupta	9829061448 0141-2621448	Keratoplasty
Sir Jagdamba Eye Bank, Andhvidyalaya Campus, Sri Ganganagar	Dr. Nikhil Dixit	0154-2464358	Keratoplasty

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Rajasthan Nursing Home & Eye Center, 20, Gopalpura Bypass, Jaipur.	Dr. B.G. Shukla	0141-2503015	Keratoplasty
Anand Hospital & Eye Center 21, JLN Marg, C- Scheme, Jaipur.	Dr. Sonu Goyal	0141-2220204	Keratoplasty
Lion's Eye Bank 27, Ashwini Bazar, Udaipur.	Dr. Alok Vyas	0294-2524255	ERC
National Institute of Medical Sciences Jaipur Delh National Highway, Near Achrol, Jaipur.	Dr. Swati Tomar	9829061021 0141-2605050	Keratoplasty
A.S.G. Eye Hospital A-32 Shastri Nagar, Jodhpur	Dr. Gorav Choudhary	0291-2638824	Keratoplasty
Sahai Hospital & Research Center Jaipur, Bhabha Marg, Vijay Path, Mooti Doongri, Jaipur.	Dr. Anshu Sahai	9660041909 0141-2621444	Keratoplasty
Shah Satnamji Gen. Hospital Shri Gurusar Modia, Shriganganagar.	Dr. Rajkumar	01509-260002	Keratoplasty
Global Hospital Insittution of Ophth. Abu Road Sirohi.	Dr. V.C. Bhatnagar	02974-2286100 9414096040	Eye Bank
Mahatma Gandhi Medical College & Hospital RIICO Institutional Area Sitapura, Tonk Road, Jaipur.	Dr. Indu Arora	9001896579 0141-2770677	Keratoplasty
Kota Eye Hospital & Research Foundation 88 Shakti Nagar Kota.	Dr. Mahesh Panjabi	0744-3230044	Keratoplasty
Ram Snehi Eye Bank Ram Dawara Bhilwara.	Sh. Suresh Bhadida	01482-234100	Keratoplasty
Govt. Medical College & M.B.S. Hospital Nayapura, Kota.	Prof. Ashok Meena	0744-2470674 9414596822	ERC
Dr. Virendra laser Phaco Surgary Center Near Sahara Chamber, Tonk Road, Jaipur.	Dr. Virendra Agarwal	0141-2707580 9829017147	Keratoplasty
Center for Sight at Ram Rishi Laser Center 562,7 C- Road Near Satsang Bhawan, Jodhpur.	Dr. Ratan Purohit	0291-2613344	Keratoplasty
Kothari Eye Care Center B-427 Pradhan Marg Malviya Nagar, Jaipur.	Dr. Siddhart Kothari	0141-2521100	Keratoplasty
Chakshu Chikista Sewa Samiti Chandi Hall, Jodhpur.	Dr. Kamal Dhariwal	0291-2628438	Keratoplasty
D.D. Netra Seva Foundation Nagar Nohara, Kota.	Dr. D.D. Verma	9194509797	Keratoplasty
Thareja Nursing Home, Company Bagh Road, Alwar.	Dr. M.N. Thareja	0144-2700184	Keratoplasty

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
ASG Hospital Ltd. D- 247 Bihari Marg Bani Park, Jaipur.	Dr. Bhanu Pratap Singh	0141-2630790	Keratoplasty
Dr. Khunger's Eye Care & Research Center 1109, Near Post Office, Opp. PNB. Rangang, Ajmer.	Dr. Khungar	0145-2442000 9829070265	Keratoplasty
Kabra Eye Hospital, Jamuma Dairy, Sodala, Jaipur	Dr. J.P. Kabra	0141-2220929 9887469598	Keratoplasty
Ratan Natralaya,A-7 Vijay Path, Tilak Nagar, Jaipur.	Dr. Ratan	9828072585	Keratoplasty
Center for Sight,34-35 Mauji Colony, Pradhan Marg, Pterol Pump, Jaipur.	Dr. Mukesh Sharma	0141-4010713	Keratoplasty
Geetanjali Medical College & Hospital, Hiran Magri Ext. Udaipur	Dr. Nagar	0294-2500000	Keratoplasty
Eye Bank Society of Rajasthan,9, Pratap Colony, Kalka Mata Road, Udaipur.	Dr. P. Saklecha	9799495514	ERC
Jaipur Calgary Eye Hospital,Malviya Nagar, Jaipur.	Sh. S.N. Bhargava	0141-2521384	Keratoplasty
Department of Ophthalmology, RNT Medical College Chetak Circle, Udaipur.	Dr. A.K. Bairwa	0294-2418258 0141-2390304	ERC
ASG Hospital Pvt. Ltd. 7C2 Meera Marg Opp. RSMM Office, Near Meera Girls College, Madhuban, Udaipur.	Sh. Khurshid Ahmed	8875005681	Keratoplasty
Khetrapal Eye Hospital & Lasik Laser Center, Kutchery Road, Ajmer.	Dr. Arun Khetrapal	0145-2622111	Keratoplasty
Jai Drishiti Eye Hospital, 78 Tagore Nagar, Sec-04, Udaipur.	Dr. Jai Drishiti	0294-2464178	Keratoplasty
Dr. Shroff's Charity Eye Hospital,1st Floor, Apex Hospital Building, Plot No. 138, Subhash Nagar, Alwar.	Dr. Dharam Singh	0144-2370560 7821820678	Keratoplasty
Dr. Agarwal's Eye Hospital Ltd.21 Shubham Enclave, opp. Jamna Lal Bajaj Marg, Civil Lines, Jaipur.	Dr. Amit Mishra	0141-3980200	Keratoplasty
Suvi Eye Hospital & Research Center,C-13 Talwandi, Suvi Eye Hospital Road, Kota.	Dr. Jai Shree	9214205668 9214205668	Keratoplasty
Viyas Eye Care Centre A-22 Shastri Nagar, Bikaner	Dr. Suresh Kr. Pandey	8559900953 9414138010	Keratoplasty
Dr. Pawan Eye Hospital & Research Centre, Ranthombar, Swai Madhopur	Dr. Abhishek	9529156909 7462220349	Keratoplasty

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
SMS Hospital, J.L.N. Marg, Narayan Singh Circle, Jaipur	Dr. J.K. Chuhan	0141-2604117 9829093202	Eye Bank
Jain Eye Clinic & Hospital, K-4 A M.D. Road Adarsh Nagar, Jaipur	Dr. M.R. Jain	0141-2611211	Keratoplasty
NIMS City Centre Hospital 4-A Govind Marg Rajapark, Jaipur	Dr. Swati Tomar	0141-2605050, 2604040 9829061021	Keratoplasty
K.C. Memorial Eye Hospital Malviya Marg C-Scheme Jaipur	Dr. Rohit Charan	0141-2378811	Keratoplasty
Pacific Institute of Medical Science, Umarda, Udaipur	Dr. Alok Vyas	9587890170	Keratoplasty
Dr. Kothari Eye Hospital, Patel Circle, Udaipur	Dr. Anil Kothari	0294 248 4896	Keratoplasty
Indira Gandhi Eye Bank, J.L.N. Hospital, Ajmer	Dr. Rakesh Porwal	9414004414	Eye Bank
Mathura Das Mathur Hospital, Shastri Nagar, Jodhpur	Dr. Arvind Chauhan	0291-2434374 9414075664	Eye Bank
Patel Eye Bank SP Medical College Bikaner	Dr. Murli Manohar	9413468777	Eye Bank
Raghudeep Eye Hospital A-16, Shanti Path, Tilak Nagar, Jaipur	Dr. Shelash	0141-4043901	Keratoplasty
Kapoor Hospital & Eye Centre 94/8, Papad ka Hanuman ji Road Vidhyadhar Nagar Jaipur	Dr. Ajay Kapoor	0141-2339846	Keratoplasty
Tibra Eye Hospital & Retina Center, 1st Floor, Vinayak City Plex, Bajaj Circle Sikar	Sh. Nand Kishor Tibra	1572-241411 9636406143	Keratoplasty
Santokba Durlabhji Memorial Hospital, Bhawani Singh Road Jaipur	Dr. Anil Marai	0141-2566251, 5196666	Keratoplasty
Saraf Eye Hospital Plot No. 35-36 Opp. Krishna Kripa Tower No. 3 T.B. Hospital Road Subhash Nagar Shopping Centre Shastri Nagar Jaipur	Dr. Abhishek Saraf	0141-4901180	Keratoplasty
Dr. Kamdar Eye Hospital 123,2nd Floor Polo Opp. Ship House Karni Marg Paota Jodhpur	Dr. Gulam Kamdar	9680499400 02912551111	Keratoplasty
Jaipur National University Institute for Medical Science & Research Centre, Jagatpura, Jaipur	Dr. Sanjeev Verma	9461892220 0141-3063199	Keratoplasty
Pacific Medical Collewge & Hospital (PMCH) Bhilo Ka Bedla Prarapura Amberi N.H. 24 Udaipur -313001	Dr. Virendra Luda	0294-3920000	Keratoplasty
ASG Hospital Pvt. Ltd. Near Khadi Emporium Opp. Khatnra House Rani Bazar, Bikaner-334001	Dr. Narayan Purohit	074120 39300	Keratoplasty

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Contra Care Eye Hospital, C-23 A Shakun Emporia Near Ahinsa Circle Ashok Marg, C-Scheme, Jaipur	P. Singh	0141-3989000 9509765136	Keratoplasty
TAMIL NADU			
Medical Research Foundation, Sankara Nethralya, New No.41/Old No.18, College Road, Chennai.600006.	Dr.Ramarajagopal	04428254180, 04428271616	Eye Bank
Chennai Lions Eye Bank Trust & RIO GOH research foundation, lions Corneal Block, Govt. Ophthalmic Hospital, Egmore, Chennai	Lion Dr.N.R.Dve, Founder & Managing Trustee	04428553840, 044 28555281	Eye Bank
Agarwals Eye Hospitl, 19,Cathedral road, chennai	Dr.Amar Agarwal	4428112811, 04433008800	Eye Bank
Jnki Natarajan Vision Research & Visual Rehabilitation Charities, No.781, T.H.Road, Tondiarpet, Chennai.21	Dr.Madhivanan Natarajan	4425956403	Eye Bank
Rajan Eye Care No.5, Vidyodaya 2nd Street, T.Nagar, Chennai	Dr.Mohan Rajan	04428340500/300	Eye Bank
Coimbtore Medical College Hospital, Coimbatore	Dr.C.Jeevakala	0422-2970026	Eye Bank
Aravind Eye Hospital, Avinasi Road, Civil Aerodrome Post, Coimbatore-641014.	DR.Anitha Raghavan	0422-43600400	Eye Bank
Sankara Eye hospital, Sathy Road, Sivanandapuram, Coimbatore-641035	D.K.S.Siddarthan	9442257665, 0422- 4236789	Eye Bank
The Eye Foundation, D>B.Rod, R.S.Puram, Coimbtore-641002	Dr.Shreesh Kumr	0422-4242000	Eye Bank
PSG Hospital, Avinashi Road, Peelamedu, Coimbatore-641004	Dr.Divya	0422-2570170, 0422- 2598899 Fax 0422- 2594400	Eye Bank
Medical College Hospital, Dharmapuri-636701	Dr.T.Kumravel	9487235454	Eye Bank
EDC - Krishnagiri kan dan maiym, lalitha Annaa jo Hospital, jakkappan nagar, 8th Cross, Krishnagiri - 1 (ASSOCIATED WITH Snkara Eye Centre, Coimbtore)	Mr.Prabhakran, Dr.Jo. Annachi	9443512111	Not Registered
Govt. Rajaji Hospital, No.1, Panagal Road, Goripalym, Madurai-625020	Dr.K.Kavitha	9443459330	Eye Bank
Trotary Aravind International Eye Bank, No.1, Anna nagar, Maduri-625020	D.Saravanan	9894179067	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Raja Mirasudhar Hospital, Thanjavur Medical College Hospital, Thanjavur.	Dr.J.Gnaselvam	9443122003	Eye Bank
KAPV. Govt. Medical College, Hospital, Tiruchirapalli	Dr.Parthiban Purushothaman	8012988222	Eye Bank
Sri Ramachandra Medical College & research Centre, Porur.600116.	Dr.Latha	9790707570	Eye Bank
CMC Schell Eye Hospital, Vellore		0416-2281201, 0416-2281309	Eye Bank
Govt. Tiruvarur medical College Hospital, Tiruvarur-610004	Dr.R.Raja	9842192330	Eye Bank
Sankara Eye Bank, Pammal Sankara Eye Hospital, Pammal, Chennai-600075.	Mr.S.Prasanna Venkatesan	044-22484799/22485299	Eye Bank
SRM Eye Bnk, SRM Medical College Hospital & ResearCH Centre, Potheri, Village, Kttankulthur Kancheepuram – 603203	Dr.S.V.Swamy Raj	044-47432338/47432333	Eye Bank
J.M.Charitable Trust, Dr.Bejansingh Eye Hospital, Vettoornimdam, Nagercoil, KK District	Mr.Morison	9443580014	Eye Bank
Eye Bank, Head Quarters Hospital, Erode	Dr.S.Ravichandar	9843109679	Eye Bank
Sve Sight Foundation, No.5, Kumaraswamy Street, SKC Rod, Ner Surampatti Nal Road, Erode-1	Dr.Panneerselvam	9843027696	Eye Bank
Govt. Medical College Hospital, Tirunelveli	Dr.S.B.Sivathanu	9976254745	Eye Bank
Aravind Eye Care System, Rotary Aravind Eye Bank, Tirunelveli	Dr.R.Ramakrishnan	9443112853	Eye Bank
Dr.Agarwal's Health care Ltd , Eye Bank, Tirunelveli	Dr.Lional Raj	9445392745	Eye Bank
TELANGANA			
Ramayamma International Eye Bank, C/o. L.V. Prasad Eye Institute, Kallam Anji Reddy Campus, Road No.2, Banjara Hills, Hyderabad.	Sri K. Hariharan, Eye Bank Manager,	9177288881 9849545822 rieb@lvpei.org	
Vasan Eye Bank, C/o. Vasan Eye Care Hospital, Janaki Plaza; Opp: Clock Tower, Secunderabad-500 003.	Mr. Arvind Kumar, Manager,	7799281919, 8886331161 vasaneyebankhyd@gmail.com	

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Chirangeevi Eye & Blood Bank Research and Development Centre, D.No.8-2-293/82/A/CEBB, Road No.1 Jubilee Hills Check Post, Hyderabad-500 003	Sri K. Krishna, Incharge Chirangeevi Eye Bank	9440055777 Admin.ccfonline@gmail.com	
Sorojini Devi Eye Hospital, (RIO), Humayun Nagar, Hyderabad-500 028.	Superintendent Mr. Sreenu. M,	9849903019 040-23540454\	
Kamineni Institute of Medical Sciences Eye Bank, Sreepuram, Marketpally, Nalgonda-508 254.	Mr. Sreenu. M, Incharge Eye Bank,	9912981999 eyebank@kimsmedicalcollege.org	
TRIPURA			
Eye Bank ,IGM Hospital,Agartala,West Tripura-799001,	BivasKanti Bhowmik, Dipak Purakayastha (ERC)	9436462800 03812320059	Eye Bank
UTTAR PRADESH			
Eye Bank Society, Medical College, Merrut	Dr.Sandeep Mittal HOD-Med.col	0121-2258827, 9450771991 0121-2770403 (O), 2641133 info@llmmedicalcollege.org, drsandeep_mithal@ Yahoo.co.in	Eye Bank
Eye Bank at Ophthalmics Department KGMU Medical College, Lucknow	Dr. Vinita Singh HOD	0522-2780879, profvinsingh@hotmail.com	Eye Bank
Shah Morden Eye Care Hospital Eye Bank, Varanasi	Dr. Sunil Kumar Shah	9415228475,0542-2202263-64	Eye Bank
Eye Bank at I- Care Hospital, Noida, G.B. Nagar	Dr. Uma Sridhar Incharge Eye Bank	0120-2477600-02, Fax-911202556389 , Helpline-09811880015, 9312641433 eyebank@eyecarehospital.org	Eye Bank
Lucknow Eye Bank, C-28, Alkapuri, Sector-C, Aliganj, Lucknow.	Dr. Hemant Kumar Eye Bank Incharge	0522-2332525, 2335122	Eye Bank
Eye Bank at IMS Ophthalmics Department BHU Medical College Varanasi	Dr. M K Singh	91-542-3216787, 9415812264 mksingh_oph@yahoo.co.in	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Eye Bank at Ophthalmics Department AMU. Medical College, Aligarh	Dr. Raghav Ram HOD-Eye-Med.col	0571-2504576, 0571-2406455, 9412272009 amuio2011@gmail.com	Eye Bank
Rio-Sitapur Eye Hospital Sitapur.	Dr. Madhu Bhadauria CMO	05862-242884, 9628627326, 8005085685	Eye Bank
BRD Medical College, Gorakhpur.	Dr. A Ghosh HOD-Eye	0551 - 2501736 Fax 2501736 http://brdmed.up.nic.in/	Eye Bank
Eye Bank at Ophthalmics Department Medical College Allahabad (Md Eye Hosp.)	Dr. S P Singh Director M.D.Eye	91-532-2600507 Fax No: +91-532-2600507 contact@mlnmc.org	Eye Bank
Eye Bank at Ophthalmics Department S.N. Medical College, Agra	Dr. S K Satsangi HOD-Eye	0562- 2260353 info@snmcagra.in, admin@snmcagra.in	Eye Bank
Eye Bank at Ophthalmics Department G.S.V.M. Medical College, Kanpur	Dr. R C Gupta HOD-Eye	0512-2535483, 0512-2535881 Fax No: +91-0512-2535881, 9415050918	Eye Bank
Deoria Eye Hospital and Research Centre, 187, Raghav Nagar through Late Sri Ran Bhadur Singh Smarak Jan Kalyan Seva Sansthan, Deoria	Dr. K.Singh		Eye Bank
Shri Ram Moorti Eye Bank, National Road, Ram Moorti Puram, Bareilly.	Dr. Neelam Mehrotra	09897801256	Eye Bank
C.L.Gupta, Eye Institute and research, Vivekanand Hospital, Kanth Road, Muradabad	Dr. Ashi Khurana	0591-2477800-804 fax-0591-2477891, clguptaeyebank@clgei.org, ingo@clgei.org	Eye Bank
Eras Medical College and Hospital, Sarfarazganj, Hardoi Road, Lucknow.			Eye Bank
Rishab Netra, Chikitsalaya (Karmanya Seva Samiti, Kanpur), saket nagar, kanpur		0512-6523048, 9305573696	Eye Bank
Bhartendu Agarwal Smarak Lucknow Eye Bank. 82/40ka, Guru Govind Singh Marg, Gurudwara Road, LKO			Eye Bank
Khairabad Eye Hospital and Mahendra Eye Research Centre, Swaroopnagar Kanpur.			Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Perfect Vision Cilinic Pvt. Ltd. Lucknow Eye Hospital LKO, Guru Govind Singh Marg, Lucknow			Eye Bank
Manav Hospital and Laser Eye Surgery Centre, B-Block, Kavinagar, Ghaziabad.			Eye Bank
Dr. Y.D. Gupta, Eye relief Society 94-Civil, Lines Sitapur.			Eye Bank
Sunita Eye Centre Private Ltd, K.C.-120, Kavinagar Ghaziabad.			Eye Bank
Tirthankar Mahaveer Hospital and Research Centre, NH-24, Bagapur, Delhi road, Moradabad			Eye Bank
Centre for Sight, Ashok plaza. Ist and lind floor NH-2, Jawahar Nagar, SRK Mall- Agra-282002			Eye Bank
Centre for Sight, Vivek Hospital and Research Centre, Kanth Road, Moradabad			Eye Bank
SUN eye Hospital and Lezar Centre PVT. LTD. 57-B, Singar Nagar, Alambagh lko.			Eye Bank
Dr. Shroff's Charitable Eye Hospital, Mohamadi Kheri.			Eye Bank
Tripupati Eye Care Centre, C-53 C, Sector-33 Noida, G.B.Nagar-UP 201301			Eye Bank
Tiwari Eye Care Centre, 5/699A, Vaishali, Gaziabad, UP.			Eye Bank
BHRC- Dr. Shroff's Charitable Eye Care Institute, Mathura Vrandavan Road, Vrandavan-281121			Eye Bank
KGMU-UP Community Eye Bank, 5th Flore Trauma Center KGMU-Chowk, Luckonw. 0522-2253366 and 9453000049	Mr. Vasantha Kumar, Project Managar Rahul Yadav-Awareness Coordinator.		Eye Bank
Indira Ghandhi Eye Hospital, Kaisarbagh- Lucknow.	Sri Subhankar Rai Adm. Head		Eye Bank & Keratoplasty Centre
UTTRAKHAND			
Himalayan Institute of Medical Sciences SRHU, Swami Ram Nagar, (Jolly Grant) Dehradun	Dr. Renu Dhasmana Prof. & HOD-Eye	09456333000 0135-2471355/2471440	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Nirmal Ashram Eye Institute, Rishikesh	Dr. Vishal Vohra Cornea Consultant Dr. Asif Khan Medical Supdt.	09999040254 08881241721	ERC
Shri. Guru Ram Rai Institute of Medical & Health Sciences Shri Mahant Indiresch Hospital Dehradun	Dr. Tarannum Shakeel Associate Professor, Eye Dept.	09045853871	ERC
WEST BENGAL			
Eye Bank, RIO, Kolkata.700073	Dr. Indrani Banerjee	033/22143853fax-2366350/ 9433094973,9433085756	Eye Bank
Prova Eye Bank,Disha eye hospital, Barrackpure, North 24-Parganas, 88(63A) Ghosh Para Rd.700120	Dr. Bani Basak	Ph-25931729/3737/fax-91-2335928106 email: disha@cal2.vsnl.net.in	Eye Bank
Vanmukta Eye Bank, Susrut eye foundation, Salt Lake, Kolkata, HB-36/A/1sector-3 salt lakekol-700106	Dr. Abhijit Chatterjee	23580201,23341628/1632 Fax 91-033-23340651 Email-susrut36@cal3.vsnl.net.in	Eye Bank
Greater Lions Eye hospital, 2nd mile,sevak rd (behind vishal cinemapo-Siliguri, PO-734402 Dist-Dargeeling	Kalyan Baruah	phno. 0353-2543301/2543457 email-sgleh@sify.com	Eye Bank
Siliguri Lions Netralaya Eye Bank.,near Mahananda Bridge,HC Rd,siliguri, PO-Siliguri-734403	Miss. Bindi Chetri (Hosp. Admin)	2511004/2519793/fax-0353-2511004 E-Mail-siligurilionsnetralaya@sancharnet.in	Eye Bank
Eye bank, Durgapur Blind Relief Society & Durgapur Steel Plant Hospital, Durgapur, P.o Durgapur District- Burdwan	Kajol Roy	Mobile- 9434388503, 9434189464, Phone - (0343) 2545141	Eye Bank
Vivekananda Mission Asram; Netra Niramay Niketan, Viveknagar, P.O. Chaitanyapur (Haldia), Dist. - Purba Medinipure; West Bengal; Pin- 721 645	Dr. Asim sil	Phone (03224) 286221/ 28608; Fax - 286106; Email : vmarsb@rediffmail.com	Eye Bank
Atul Ballav Eye Bank, Nil Ratan Sarkar Medical College & Hospital, 138, Acharya J.C. Bose Rd., Kolkata 700014	Prof. Somnath Mukhopadhyay	(033) 22274001	Eye Bank
Command Hospital (Eastern Command), Alipore, Kolkata – 700 027	Col. Avinash Mishra	9073127998 Email:- avim27@yahoo.com	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
Rotary Narayan Nethralaya, CN – 5, Sector V, Salt Lake, Kolkata – 700 091;	Asish Prohoraj	2367 3312 to 14, 3011 5103 & 3011 5106, mob: 9007006247	Eye Bank
M. P. Birla Eye Bank, 8th Floor, Maruti Building, 12, Dr. U.N. Brahmachari Street, Kolkata - 700 017	Ramesh Kumar	2281 7780, 2281 7781; Fax - 2281 7782; mob: 9831810101 email:- mpbeyeclinic@sify.com	Eye Bank
Sankara Nethralaya, 147, Mukundapur, E.M. Bypass, Kolkata - 700 099	Administrator:- Komal Dashora	33 4101 3000; Fax 033 4101 3199; email:- snk@snmail.org; www.sankaranethralaya.org; Mob: 9831256896	Eye Bank
Aliporeduar Lions Eye Bank	Sajib Bhowmik	3564255938, 9434165051, 9893868519	Eye Bank
ANDAMAN & NICOBAR ISLANDS			
G. B. Pant Hospital	Dr. Anita Shah	9474212727	ERC
CHANDIGARH			
Eye Bank Society, GMCH-32, Chd. Govt. Medical College, Sector-32, Chandigarh		aryasudesh@gmail.com	Eye Bank
Eye Bank Society, PGIMER Sector-12, UT, Chandigarh		drmangatdogra@gmail.com	Eye Bank
Eye Bank Society Bharat Vikas Parishad Sector-24, Chandigarh		Parishad.bharat@gmail.com	Eye Bank
DELHI			
National Eye Bank, R.P. Centre, for OphthalmicScience (AIIMS) Ansari Nagar, Delhi 110029	Dr. Radhika Tandon	26593060 nationaleyebank_rpc.yahoo.co.in radhikatandon@aiims.ac.in rdhika_tan@yahoo.com	Eye Bank
Eye Bank, Sir Ganga Ram Hospital, IIND Floor Old Rajinder Nagar Delhi-110060		9811083026, 42254000 akgrover55@yahoo.com gagaram@sgrh.com	Eye Bank

Name and Address of Eye Bank / ERC	Contact person	Contact Number	Registered as
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Guru Nanak Eye Centre Maharaja Ranjit Singh Marg New - Delhi-110002	Dr. B.Gosh	9868604325, 01123236931 3299502110 gneccdir@ gmail.com	Eye Bank
Safdarjang Hospital Eye Bank (Dept.of Ophthalmology OPD BLOCK, New Delhi-29	Dr. V.S.Gupta	26198126 me_vsgupta@yahoo. com	Eye Bank
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Army Hospital(R& R) Eye Bank,(Deptt. of Ophthalmology) Subroto Park, Delhi Cantt-10	HOD (Eye)	23338181, 23338199, 23338190 ddg1d.afmc@nic.in	Eye Bank
Guru Nanak Govind singh International Eye Bank 31, Defence Enclave Vikas Marg Delhi-110092	Dr Gurubaksh Singh Dir.	9810155682, 22542325 ggsibank@yahoo.com	Eye Bank
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PUDDUCHERRY			
JIPMER EYE BANK, Dhanvantri Nagar, Gorimedu, Puducherry-605 006	Dr. Ramesh	97877-38787	Eye Bank
ARAVIND EYE BANK, Cuddalore Main Road, Thavalakuppam, Puducherry-7	Dr. Shivanand	76398-29012	Eye Bank
JOTHI EYE BANK, 152 & 154, Calve Subraya Chetty Street, Puducherry-1	Dr. Vanaja	98947-91142	Eye Bank
Indira Gandhi Government General Hospital. & Post Graduate Institute, Victor Simonal Street, Puducherry – 605 001	Dr. Amudhavalli	94880-75222	ERC
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NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS & VISUAL IMPAIRMENT

Directorate General of Health Services

Ministry of Health & Family Welfare

Government of India

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