

SCHEDULE 1

Regulation 4

REMOVAL OF TRANSPLANTABLE MATERIAL

Information about removal

1. Name and address of the hospital or other place at which the transplantable material was removed from the donor.
2. Full name of registered medical practitioner or person who removed the transplantable material, the appointment he holds and the place at which he holds it.
3. In any case where the transplantable material is considered unsuitable for transplanting after removal, a statement of—
 - (a) the reason for the unsuitability, and
 - (b) the manner of disposal of the material.

Information about transplantable material and donor

4. Description of the transplantable material.
5. Whether the donor was living or deceased at the time of its removal.
6. Date and time of its removal.
7. Full name of the donor and, where applicable, his hospital case note number.