



# SAVE HEART STENT BANK

SSID: \_\_\_\_\_

## STENT SPONSOR DETAILS

STENT SPONSOR ID		
NAME		
FATHERS NAME		
ADDRESS		
DESIGNATION		
PLACE OF WORK		
EMAIL		
MOBILE NUMBER		

## PATIENT DETAILS

DATED / /

NAME / AGE/ SEX			
DIAGNOSIS			
ADDRESS			
HOSPITAL			
ATTENDING DOCTOR			
MOBILE NUMBER			
RELATIVE NAME/CONTACT			

## IMPORTANT POINTS

1. SAVE HEART STENT BANK runs on voluntary support for poorest people who can't afford a stent post MI.
2. The STENT BANK only registers sponsors naming them as "STENT SPONSORS "and giving them their unique registration numbers.
3. There are LEAST financial transactions involved in the SAVE HEART STENT BANK.
4. The stent Sponsor will be paying the stent supplier directly after reliable confirmation details by the cathlab teams that stent has been utilised.
1. The Stent sponsor will be informed about the patient for whom the stent was utilised in detail.

AUTHORISED SIGNATURES \_\_\_\_\_ - \_\_\_\_\_