



R.V. Institute of Management

RVIM Centre for Social Responsibility

CA-17,36th Cross,26th Main, Jayanagar 4th 'T' Block, Bangalore 560041

Ph: 080-42540300 Fax:080-26654920 E Mail: contact@rvim.edu.in Web: www.rvim.edu.in

TITLE OF THE EVENT:

EYE DONATION PLEDGE

Category : Awareness

Date : January 12,2016

Location : Campus

Time : 11.00 am

Partnering

Institution/Supported by :

Shankar Anand Singh Eye Bank,
Narayana Nethralaya &
Sister Niveditha Foundation'

Participation breakup

TOTAL : 42 Students : 30 Staff: 2 Public/Others: 10

Objectives to be achieved

To celebrate Youths Day by way of pledging to donate eye as per rules and procedures.

Report Summary

Representatives of Sister Niveditha Foundation addressed the students on Youths Day and requested to perform one good cause. Accordingly after briefing about eye donation 30 students responded to the call. They filled up the pledge form of Narayana Nethralaya /Shankar Anand Singh Eye Bank to donate eye after life-generally called as anatomical gift. One Faculty also pledged the day.

IMPACT NOTES-

The importance of eye was understood along with motivation to do a good job for a good cause on the birthday of Swami Vivekananda-celebrated as National Youths Day

Organising Student leaders:

1.Anusha

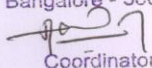
2.Akshay

Faculty coordination:

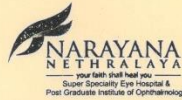
1.A.Chandran

2.Pradeep

R.V. Institute of Management
Bangalore - 560041


Coordinator

RVIM Centre for Social Responsibility



SHANKAR ANAND SINGH EYE BANK

UNIFORM DONOR PLEDGE

In the hope that I may help others, I hereby make this anatomical gift, if medically acceptable, to take effect upon my death.

The words and the marks below indicate my desire.

I give my eyes for the purpose of transplantation, medical research or education.

I further direct my next-of-kin herein named to execute this gift after my death.

Date 12-01-16

I would like my next-of-kin notified of my pledge to donate.

Mr./Ms. Anusha Nekkanti

E-mail ID nekkantianusha85@gmail.com

(Name of Donor)

(Name of next-of-kin)

Address of the Donor B-5, Suryanagar Camp

Address

Bagalwad - Post - R. N. Taluk

Roschur - Dist. PIN - 584123

(City, State, Pin Code)

Phone Number

Blood Group O +ve

Signature of Witness & Address

Phone Number 88-130776

Date of birth 05-09-93

Signature

SHANKAR ANAND SINGH EYE BANK
NARAYANA NETHRALAYA II

Narayana Health City (Narayana Hrudayalaya Campus)
258/A, Bommasandra, Hosur Road, Bangalore - 560 099, INDIA.

Tel : 91-80-66660655-0658, Fax : 91-80-66660650

Eye Bank No : +91-80-66660693, Emergency : 9902821128

E-mail : eyebanknn2@narayananeethralaya.com Website : www.narayananeethralaya.org

NN2/R/EB-02/0



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Date 12.01.2016

I would like my next-of-kin notified of my pledge to donate.

Mr./Ms. AKSHAY MALGI

E-mail ID akshmalgi@yahoo.in

(Name of Donor)

(Name of next-of-kin)

Address of the Donor MULGUND HOUSING

Address

COLONY, BANAR ROAD,

SIRSI, KARNATAKA

(City, State, Pin Code) 581-401

Phone Number

Blood Group O +ve

Signature of Witness & Address

Phone Number 99-130776

Date of birth 29-09-91

Signature

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Narayana Health City (Narayana Hrudayalaya Campus)
258/A, Bommasandra, Hosur Road, Bangalore - 560 099, INDIA.

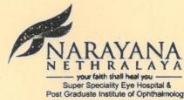
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Please Note: Personal identity is protected by shading
Eye donation Form Filled by students



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Date: 12-01-16

I would like my next-of-kin notified of my pledge to donate.

Mr./Ms. Anusha Nekkanti

E-mail ID: nekkananusha85@gmail.com

(Name of Donor)

(Name of next-of-kin)

Address of the Donor: Sanyanagar Camp
Bagalwad - Taluk
R... - Dist. PIN - 584133

Address

(City, State, Pin Code)

Phone Number

Blood Group: O +ve

Signature of Witness & Address

Phone Number: 889... 0746

Date of birth: 25-09-...

Signature

SHANKAR ANAND SINGH EYE BANK NARAYANA NETHRALAYA II

Narayana Health City (Narayana Hrudayalaya Campus)
258/A, Bommasandra, Hosur Road, Bangalore - 560 099, INDIA.
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Mr./Ms. AKSHAY MALGI

E-mail ID: aksaymalgi@yahoo.in

(Name of Donor)

(Name of next-of-kin)

Address of the Donor: MULGA HOUSING
COLONY, B... ASI ROAD,
SIRSI, KARNATAKA

Address

(City, State, Pin Code) 581-401

Phone Number

Blood Group: O +ve

Signature of Witness & Address

Phone Number: 93288 Mobile: 994... 8213

Date of birth: 29-09-91

Signature

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Anatomical Gift of Eye

"Anatomical gift" means a donation of all or part of a human body to take effect after the donor's death for the purpose of transplantation, therapy, research or education.

It takes courage, understanding societal problems and legal implications, support from family members, awareness, empathy and compassion to step forward in signing the documents.

All the classes were briefed about the procedures adopted for anatomical gift. This class worked as a team and as a part of class efforts and encouragement from the concerned faculty members engaging the sessions, it was a great success and became a role model for all.

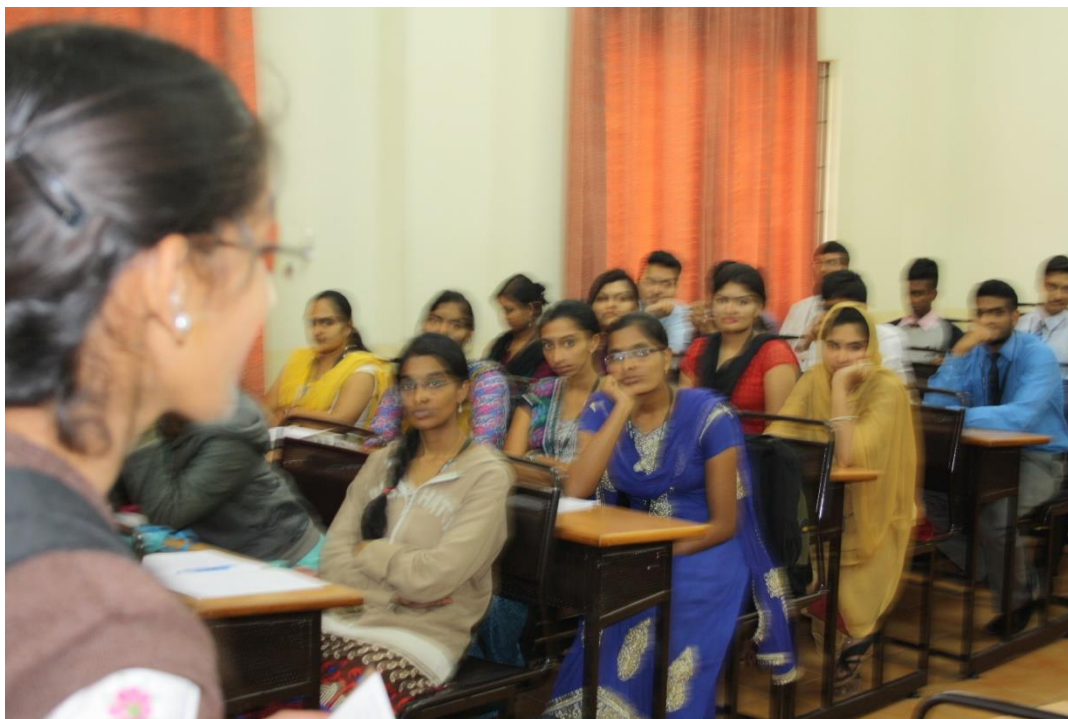
Thirty student donors and one faculty signed the document for desire to provide anatomical gift after life and in accordance with the legal parameters and medical procedures .The papers were signed in a uniform donor pledge application form and submitted Narayana Nethralaya, Shankar Anand Singh Eye Bank. The donors are to keep their family members informed about the desire of anatomical gift. Every student was briefed about the voluntary donation of eye after life .Representatives from 'Sister Niveditha Foundation' visited the campus on January 12, 2016, that marks Swami Vivekananda Jayanthi,celebrated as 'National Youth Day' .



Student donors with faculty display their signed documents



Volunteers from 'Sister Niveditha Foundation' addressing the students



Awareness Programme for the Classes

Additional Information:

National Programme for Control of Blindness & Visual Impairment

Directorate General of Health Services

Ministry of Health and Family Welfare

Government of India

To view website

Use Link: <http://npcb.nic.in/index2.asp?slid=123&sublinkid=48&langid=1>

For supporting opportunities : <http://npcb.nic.in/index1.asp?linkid=32&langid=1>

-Report Concludes