

**TATA MEDICAL CENTER**

14, Major Arterial Road (EW)

New Town, Rajarhat

Kolkata – 700 156

Tel.: +91 33 6605 7579/8146;

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To

The Head of Institution

The Institution Review Board

Tata Medical Center,

14, MAR (EW), New Town, Rajarhat,

Kolkata 700160

Dated: 07/05/2026

**Subject:** Request for approval of DNB thesis for NBEMS

Dear Sir/Madam,

This is to inform you that I will be undertaking a study titled "Assessing the motivation and barriers for Living and Non-living Organ donation among Blood donors" as my DNB thesis for National Board of Examination of Medical Sciences (NBEMS). Organ donation is a critical component of modern healthcare, yet the gap between organ demand and availability persists globally especially in low-to-middle income countries.<sup>1</sup> Blood donors represent a unique population with demonstrated altruistic behavior, making them potential advocates and participants in both living and non-living organ donation. The aim is to evaluate the level of awareness and knowledge regarding organ donation among blood donors and to establish a structured registry of donors for potential organ donation.

The study will be conducted on blood donors visiting the blood centre of Tata Medical Center, Kolkata. There are no requirements of additional laboratory infrastructure or reagents for the same.

I am submitting a project proposal along with the following documents required by the IRB for the above mentioned study adhering to NBEMS guidelines for your kind perusal with a view of sending it to NBEMS and conducting the same upon obtaining your approval. Thanking you.

Yours sincerely,

Dr. Suvro Sankha Datta

Senior Consultant

Department of Transfusion Medicine

Tata Medical Center, Kolkata

Dr Suvro Sankha Datta  
HOD & Senior Consultant  
Dept. of Immunohematology & Blood Transfusion  
Tata Medical Center, Kolkata

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Sunna Sanjiv Datta

Signature of Principal Investigator  
(with date)

(07/05/26)

I, acknowledge the receipt of above mentioned document(s) on behalf of the Ethics Committee

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of the Personnel