

DEPARTMENT OF ANATOMY
All India Institute of Medical Sciences
Ansari Nagar, New Delhi-110029

INFORMATION FOR THE PROSPECTIVE DONORS OF BODY AFTER DEATH

1. The All India Institute of Medical Sciences, accepts donation of body after death for teaching and scientific advancement.
2. The WILL FORM duly completed by the donor should be returned to the office of Head of the Department of Anatomy, AIIMS, New Delhi for registration. Registration Card will be returned after registering the individual.
3. A self-attested copy of any one Identity Proof (Aadhar, PAN Card, Driving License, Voter Card or Government approved Identity Proof) of the prospective donor may be provided along with the WILL FORM.
4. Two recent passport size photographs of the donor should be attached to the Will Form.
5. After the death of the donor, the information should be conveyed to Department of Anatomy, AIIMS, New Delhi. The telephone numbers are indicating below :
 - (a) During office hours (9:30 AM – 5:00 PM) : 26593216, 9818917906
Monday – Friday : (9:30 AM – 5:00 PM)
Saturday : (9:30 AM – 1:00 PM)
 - (b) After office hours & on holidays : 9868310293, 011-26184364
6. The dead body with a death certificate, from a competent medical personal, should be handed over by the next of kin, to the Department of Anatomy, AIIMS.
7. Body After accident, medico-legal case or any other form of unnatural death will not be used for teaching and scientific advancement. HIV, Infective hepatitis, gas gangrene, tetanus infected and putrefied bodies are not accepted.
8. The information of death should be sent as early as possible so that the Department of Anatomy can make necessary arrangements to obtain the Donation.
9. The body donation can be obtained by AIIMS from within the radius of 60 km of its area Delhi National Capital Region (NCR) and not from outside.
10. There is no provision for donating each organ separately expect the cornea, for which organ Retrieval Banking Organisation (ORBO) should be contacted.

APPROVED TEXT OF WILL FOR DONATION OF HUMAN BODIES TO THE AIIMS FOR RESEARCH AND SCIENTIFIC PURPOSES

WILL

I _____ son/daughter/wife of
_____ Resident of (full postal address) _____

Hereby make this as my last Will regarding the disposal of my dead body after my death, thereby revoking all other Wills and Codicils heretofore make by me context hereto.

WHEREAS I am of sound mind and do so of my own free accord will and act, and

WHEREAS I am desirous of donating my body after my death for the good cause of humanity and progress of Medical Sciences.

AND WHEREAS I have expressed my desire of donating my dead body after death to my next of kins and other members of my family and they have no objection to such donation of my dead body after my death for the said cause.

I hereby, by this Will, bequeath my body after death to All India Institute of Medical Sciences, Ansari Nagar, NEW DELHI absolutely with full powers to use it or dispose it as they like , and appoint the Director of the said Institute as the Executor.

In witness thereof, I have signed this Will hereunder on this _____ day of
(month) _____ Year _____ as the Testator in the presence of next of kin as the Witness.

Signed by the above named Testator in my presence

on the same day and each of us has in Presence of the

Testator signed his name hereunder as attesting witness.

(SIGNATURE OF THE DONOR)

Phone No. _____

Witness :-

Signature : _____

Name : _____

Relationship : _____

Address : _____

Phone No. _____

Signature : _____

Name : _____

Relationship : _____

Address : _____

Phone No. _____