



**Specify reasons for claim rejection (Death/complication/failure)**

**Status of Death Audit**

| <b>Name of State</b>  | <b>Number of Death reported</b> | <b>Number of death audits conducted</b> | <b>Number of deaths attributed to sterilization</b> | <b>Reason of death</b> | <b>Action taken</b> |
|-----------------------|---------------------------------|---|---|------------------------|---------------------|
| <b><u>HARYANA</u></b> | <b><u>0</u></b>                 | <b><u>0</u></b>                         | <b><u>0</u></b>                                     | <b><u>0</u></b>        | <b><u>0</u></b>     |