

Center Code: NYMS Transplant Program (Organ): Heart Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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User Guide

This report contains a wide range of useful information about the heart transplant program at Mount Sinai Medical Center (NYMS). The report has three main sections:

- A. Program Summary
- B. Waiting List Information
- C. Transplant Information

The Program Summary is a one-page summary highlighting characteristics of the program, including the number of candidates on the waiting list, the number of transplants performed at the program, the number of patients being cared for by the program, and patient outcomes, including outcomes while on the waiting list (the transplant rate and the death rate while on the waiting list) and outcomes after transplant (patient and graft survival probabilities). If the program performed transplants in both adults and children, survival probabilities for adults and children (pediatrics) are provided separately. For each of the outcomes measures presented, a comparison is provided showing what would be expected at this program if it were performing as similar programs around the country perform when treating similar patients. More details regarding these outcome measures are provided in Sections B and C of the report.

The Waiting List Information section contains more detailed information on how many candidates are on the waiting list at the program, the types of candidates on the waiting list, how long candidates typically have to wait for a transplant at this program, how frequently candidates successfully receive a transplant, and how often candidates on the waiting list die before receiving a transplant.

Table B1 shows the activity on this program's waiting list during two recent 1-year periods and provides comparisons to all programs within this program's OPTN region (see http://optn.transplant.hrsa.gov/members/regions.asp for information on OPTN regions) and the nation as a whole. Tables B2 and B3 describe the candidates on the waiting list at this program, with comparisons to candidates waiting in the same donor service area (OPO/DSA) the OPTN region, and the nation as a whole.

Table B4 shows how many candidates were removed from the waiting list because they received a transplant. The program's transplant rate is calculated as the number of candidates who received a transplant divided by the person-years observed at the program (person-years is a combination of how many candidates were on the waiting list along with how long each candidate was followed since some candidates are not on the waiting list for the entire year). The transplant rate and comparisons to what would be expected at this program are presented in Figures B1 and B2. Figure B1 shows the transplant rate compared to what was expected at this program. The expected transplant rate is an estimate of what we would expect at this program if it were performing transplants at rates similar to other programs in the US with similar candidates on their waiting lists. The expected rate is only an estimate, and is made with a certain level of uncertainty. This uncertainty is shown in Figure B2. Figure B2 displays the ratio of the observed to the expected transplant rate. A ratio of 1 indicates that the observed transplant rate was equal to the expected transplant rate, while a ratio less than 1 indicates the observed rate was lower than expected rate and a ratio greater than 1 indicates the observed rate was higher than the expected rate. However, the level of uncertainty must be considered when interpreting these numbers. The 95% interval is also shown on Figure B2. This interval provides a range within which the true ratio of observed to expected transplant rates is likely to be. If this



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confidence interval includes (crosses) 1.0, then we cannot say that this program's observed transplant rate is different from what would be expected. The observed deceased donor transplant rate at this program was 28.2 per 100 person-years. Transplant rates are also provided for adult and pediatric patients separately along with comparisons to adult and pediatric rates in the DSA, the OPTN region, and the nation. Please refer to the PSR Technical Methods documentation available at http://www.srtr.org for more detail regarding how expected rates are calculated.

The death rate (also known as the mortality rate) for candidates on the waiting list is presented in Table B5 and Figures B4-B6. These data are presented in the same way as the transplant rate data in the previous section. The intent of these tables and figures is to describe risk of death once candidates are listed rather than while they are listed. Therefore, time at risk and deaths after removal from the waiting list for reasons other than transplant, transfer to another transplant program, or recovery (no longer needing a transplant), and before any subsequent transplant, are included. As with transplant rates, mortality rates should be interpreted carefully taking into consideration the interval displayed in Figure B5. For a complete description of how observed and expected mortality rates are calculated, please refer to the technical documentation available at http://www.srtr.org.

Table B6 presents information on what happens to candidates on the waiting list by three different time points after listing: 6 months, 12 months, and 18 months. The table displays percentages of candidates who have died, been removed from the waiting list, been transplanted, or been transferred or lost-to-follow-up. Tables B7 and B8 provide more detail regarding how many candidates have received a deceased donor transplant by certain time points during the first 3 years after being put on the transplant waiting list. Each row of Tables B7 and B8 presents the percent of candidates who received a deceased donor transplant by each time point. Table B9 presents data on the time it took for different percentages of patients to be transplanted for candidates added to the list between 07/01/2013 and 12/31/2018. The time it took for 5% (the 5th percentile) of patients to receive a transplant at this program was 1.7 months. If "Not Observed" is displayed in the table, then too few candidates received transplants before 06/30/2019 to calculate a particular percentile of transplant times.

Table B10 contains a summary of the offer acceptance practices of the program. The offer acceptance ratio indicates whether the program is more or less likely to accept offers than the average program. If the offer acceptance ratio is greater than 1.0, then the program tends to accept more offers than average; if the offer acceptance ratio is less than 1.0, then the program tends to accept fewer offers than average. Figures B7 shows the distribution of program offer acceptance rates as well as the offer acceptance rate for this program. Figures B8 - B12 similarly show offer acceptance rates for subsets of offers.

The Transplant Information section begins with descriptions of transplant recipients in Tables C1 and C2. Data on recipients of deceased donor transplants are presented (Tables C1D and C2D); if applicable, data on recipients of living donor transplants are presented separately (Tables C1L and C2L). Comparisons to the region and the nation as a whole are provided. A description of the deceased donors used at this program is provided in Table C3D, along with characteristics of living donors in Table C3L, if applicable. Finally, information on the transplant procedure for deceased and living donor transplants is presented in Tables C4D and C4L, respectively.



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Starting with Table C5, transplant outcomes are presented along with comparisons to what would be expected at this program and what happened in the nation as a whole. Tables C5-C10 present information on graft survival (survival of the transplanted organ), with data presented separately for adult and pediatric recipients. Patients are followed from the time of transplant until either failure of the transplanted organ or death, whichever comes first. Please refer to the technical methods for more information on these calculations (http://www.srtr.org).

While Tables C5-C10 present data on graft survival, Tables C11-C16 present information on patient survival. For these tables, patients are followed from the time of transplant until death, regardless of whether the transplant is functioning or the patient required another transplant to survive.

Tables C17 and C18 summarize the multiorgan transplant outcomes at this program. The summary statistics in these tables are descriptive and are not risk-adjusted for different donor and candidate characteristics.

Additional information regarding the technical methods and the risk adjustment models used to estimate expected event rates is available on the SRTR website at http://www.srtr.org. We welcome and encourage feedback on these reports. Please feel free to share feedback with the SRTR at the following e-mail: srtr@srtr.org.



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A. Program Summary

Figure A1. Waiting list and transplant activity

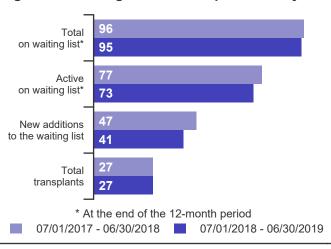


Table A1. Census of transplant recipients

Recipients	07/01/2017- 06/30/2018	07/01/2018- 06/30/2019
Transplanted at this center	27	27
Followed by this center*	321	313
transplanted at this program	n 231	225
transplanted elsewhere	90	88

^{*} Recipients followed are transplant recipients for whom the center has submitted a post-transplant follow-up form for a transplant that took place before the 12-month interval for each column.

Figure A2. Transplant rates 07/01/2017 - 06/30/2019

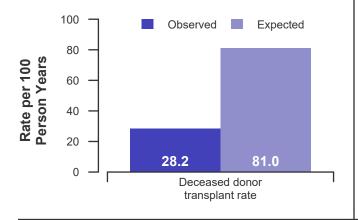


Figure A3. Waiting list mortality rates 07/01/2017 - 06/30/2019



Figure A4. First-year adult graft and patient survival: 07/01/2016 - 12/31/2018

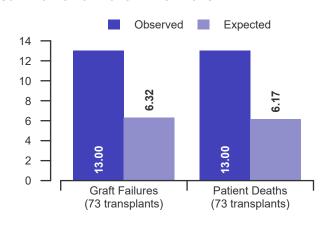
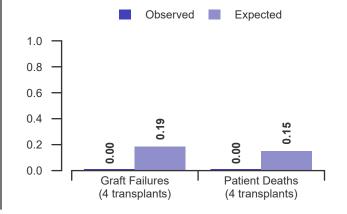


Figure A5. First-year pediatric graft and patient survival: 07/01/2016 - 12/31/2018





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Table B1. Waiting list activity summary: 07/01/2017 - 06/30/2019

		its for center	Activity for 07/01/2018 to 06/30/2019 as percent of registrants on waiting lis on 07/01/2018			
Waiting List Registrations	07/01/2017- 06/30/2018	07/01/2018- 06/30/2019	This Center (%)	OPTN Region (%)	U.S. (%)	
On waiting list at start Additions	102	96	100.0	100.0	100.0	
New listings at this center	47	41	42.7	85.6	116.4	
Removals						
Transferred to another center	8	0	0.0	1.6	2.8	
Received living donor transplant*	0	0	0.0	0.0	0.0	
Received deceased donor transplant*	27	27	28.1	70.7	87.8	
Died	11	4	4.2	2.7	6.6	
Transplanted at another center	1	3	3.1	1.4	1.3	
Deteriorated	3	3	3.1	4.3	7.7	
Recovered	2	2	2.1	3.5	6.2	
Other reasons	1	3	3.1	7.9	9.2	
On waiting list at end of period	96	95	99.0	93.5	94.8	

^{*} These patients were removed from waiting list with removal code indicating transplant; this may not equal the number of transplants performed at this center during the specified period.



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Table B2. Demographic characteristics of waiting list candidates
Candidates registered on the waiting list between 07/01/2018 and 06/30/2019

Domographic Characteristic		ting List Regis 018 to 06/30/20		All Waiting List Registrations on 06/30/2019 (%)			
Demographic Characteristic	This Center (N=41)	OPTN Region (N=316)	U.S. (N=4,673)	This Center (N=95)	OPTN Region (N=345)	U.S. (N=3,804)	
AII (%)	100.0	100.0	100.0	100.0	100.0	100.0	
Ethnicity/Race (%)*							
White	41.5	58.2	60.8	45.3	54.2	59.8	
African-American	39.0	22.8	23.7	33.7	24.6	26.3	
Hispanic/Latino	14.6	13.3	10.5	18.9	17.4	10.6	
Asian	4.9	5.7	3.8	2.1	3.2	2.3	
Other	0.0	0.0	1.1	0.0	0.6	1.1	
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	
Age (%)							
<2 years	0.0	1.9	5.8	4.2	2.3	3.4	
2-11 years	0.0	4.1	4.7	0.0	1.7	4.2	
12-17 years	0.0	4.7	4.2	1.1	1.2	3.0	
18-34 years	9.8	9.8	9.4	10.5	10.7	11.6	
35-49 years	17.1	18.0	18.8	24.2	25.5	22.4	
50-64 years	53.7	42.4	42.1	40.0	40.6	44.6	
65-69 years	12.2	13.3	12.5	16.8	15.1	9.7	
70+ years	7.3	5.7	2.5	3.2	2.9	1.1	
Gender (%)							
Male	68.3	69.3	70.0	70.5	72.8	74.6	
Female	31.7	30.7	30.0	29.5	27.2	25.4	

^{*} Race and ethnicity are reported together as a single data element, reflecting their data collection (either race or ethnicity is required, but not both). Patients formerly coded as white and Hispanic are coded as Hispanic. Race and ethnicity sum to 100%.



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Table B3. Medical characteristics of waiting list candidates
Candidates registered on the waiting list between 07/01/2018 and 06/30/2019

		ting List Regi 018 to 06/30/2			All Waiting List Registrations on 06/30/2019 (%)			
Medical Characteristic		OPTN Region	` '		OPTN Region	,		
	(N=41)	(N=316)	(N=4,673)	(N=95)	(N=345)	(N=3,804)		
All (%)	100.0	100.0	100.0	100.0	100.0	100.0		
Blood Type (%)								
0	53.7	44.0	44.9	49.5	50.1	58.3		
A	29.3	38.0	36.1	27.4	32.2	28.9		
В	12.2	13.3	14.5	17.9	13.6	11.2		
AB	4.9	4.7	4.5	5.3	4.1	1.6		
Unknown	0.0	0.0	0.0	0.0	0.0	0.0		
Previous Transplant (%)								
Yes	12.2	4.7	4.1	5.3	4.1	3.8		
No	87.8	95.3	95.9	94.7	95.9	96.2		
Unknown	0.0	0.0	0.0	0.0	0.0	0.0		
Primary Disease (%)								
Cardiomyopathy	56.1	59.8	58.1	51.6	55.1	56.9		
Coronary Artery Disease	29.3	24.7	25.3	31.6	31.0	27.5		
Retransplant/Graft Failure	12.2	3.8	3.7	5.3	3.2	3.2		
Valvular Heart Disease	2.4	2.2	0.9	2.1	1.7	0.9		
Congenital Heart Disease	0.0	7.9	10.9	5.3	7.2	10.8		
Other	0.0	1.6	1.2	4.2	1.7	0.7		
Missing	0.0	0.0	0.0	0.0	0.0	0.0		
Medical Urgency Status at Listing	g (%)							
Status 1A	2.4	17.7	16.3	8.4	14.5	9.3		
Status 1B	9.8	13.6	13.8	32.6	29.9	24.9		
Status 2	4.9	6.3	8.8	29.5	23.5	27.7		
Adult Status 1	0.0	3.2	2.5	0.0	0.0	0.2		
Adult Status 2	9.8	11.1	10.4	1.1	1.2	1.6		
Adult Status 3	7.3	7.3	7.4	2.1	2.3	2.8		
Adult Status 4	39.0	25.9	23.4	13.7	18.6	18.2		
Adult Status 5	0.0	0.9	1.3	0.0	0.3	1.0		
Adult Status 6	26.8	13.9	13.1	11.6	9.6	10.4		
Temporarily Inactive	0.0	0.0	2.9	1.1	0.3	3.8		



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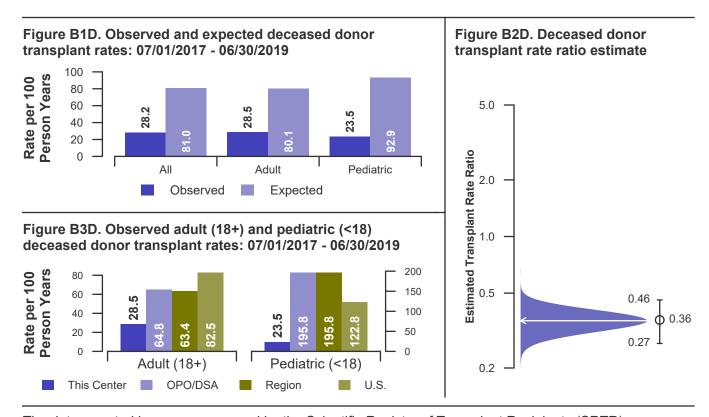
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Table B4D. Deceased donor transplant rates: 07/01/2017 - 06/30/2019

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	102	325	352	4,000
Person Years**	191.4	628.2	692.5	7,886.3
Removals for Transplant	54	453	486	6,833
Adult (18+) Candidates				
Count on waiting list at start*	94	306	333	3,606
Person Years**	178.7	593.0	657.2	7,082.8
Removals for transpant	51	384	417	5,846
Pediatric (<18) Candidates				
Count on waiting list at start*	8	19	19	394
Person Years**	12.7	35.2	35.2	803.5
Removals for transplant	3	69	69	987

^{*} Counts in this table may be lower than similar counts in other waiting list tables, such as Table B1. A small percentage (~1%) of patients are found to have died or been transplanted before being removed from the waiting list, so these patients are excluded if the event occurs prior to the start of the study period. Inactive time on the waiting list is included in the calculations for this table.

^{**} Person years are calculated as days (converted to fractional years). The number of days from July 1 or from the date of first wait listing until death, transplant, removal from the waiting list or June 30.





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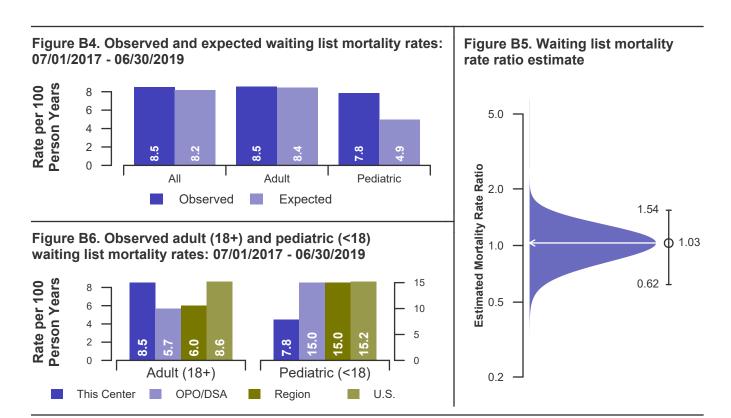
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Table B5. Waiting list mortality rates: 07/01/2017 - 06/30/2019

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	102	325	352	4,000
Person Years**	200.4	689.4	770.0	9,064.5
Number of deaths	17	43	50	840
Adult (18+) Candidates				
Count on waiting list at start*	94	306	333	3,606
Person Years**	187.6	649.3	729.9	8,160.4
Number of deaths	16	37	44	703
Pediatric (<18) Candidates				
Count on waiting list at start*	8	19	19	394
Person Years**	12.7	40.1	40.1	904.1
Number of deaths	1	6	6	137

^{*} Counts in this table may be lower than similar counts in other waiting list tables, such as Table B1. A small percentage (~1%) of patients are found to have died or been transplanted before being removed from the waiting list, so these patients are excluded if the event occurs prior to the start of the study period. Inactive time on the waiting list is included in the calculations for this table.

^{**} Person years are calculated as days (converted to fractional years). The number of days from July 1 or from the date of first wait listing until death, transplant, 60 days after recovery, transfer or June 30.





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B. Waiting List Information

Table B6. Waiting list candidate status after listing Candidates registered on waiting list between 01/01/2017 and 12/31/2017

Waiting list status (survival status)		Center (Nns Since L	,	U.S. (N=4,536) Months Since Listing			
	6	12	18	6	12	18	
Alive on waiting list (%)	72.4	55.2	41.4	40.9	25.3	16.9	
Died on the waiting list without transplant (%)	6.9	13.8	13.8	4.9	5.4	5.9	
Removed without transplant (%):							
Condition worsened (status unknown)	1.7	1.7	3.4	4.2	5.3	5.9	
Condition improved (status unknown)	0.0	0.0	0.0	1.1	2.0	2.8	
Refused transplant (status unknown)	0.0	0.0	0.0	0.1	0.3	0.4	
Other	0.0	0.0	0.0	1.4	2.9	3.9	
Transplant (living or deceased donor) (%):							
Functioning (alive)	12.1	19.0	17.2	43.7	51.5	38.3	
Failed-Retransplanted (alive)	0.0	0.0	0.0	0.0	0.0	0.0	
Failed-alive not retransplanted	0.0	0.0	0.0	0.0	0.1	0.1	
Died	1.7	1.7	5.2	2.4	3.9	5.3	
Status Yet Unknown*	1.7	1.7	10.3	0.6	2.1	18.9	
Lost or Transferred (status unknown) (%)	3.4	6.9	8.6	0.7	1.1	1.6	
TOTAL (%)	100.0	100.0	100.0	100.0	100.0	100.0	
Total % known died on waiting list or after transplant	8.6	15.5	19.0	7.3	9.4	11.2	
Total % known died or removed as unstable	10.3	17.2	22.4	11.5	14.7	17.2	
Total % removed for transplant	15.5	22.4	32.8	46.8	57.6	62.7	
Total % with known functioning transplant (alive)	12.1	19.0	17.2	43.7	51.5	38.3	

^{*} Follow-up form covering specified time period not yet completed, and possibly has not become due.



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Table B7. Percent of candidates with deceased donor transplants: demographic characteristics Candidates registered on the waiting list between 07/01/2013 and 06/30/2016

Characteristic	-	nted at t	ime per	iods sir	nce listi ited Sta	_				
	N		nis Cent 1 year		3 years	N				3 years
All	153	2.0	36.6	54.9	62.1	13,020	14.9	52.5	60.9	64.0
Ethnicity/Race*										
White	61	0.0	31.1	49.2	55.7	8,038	15.2	52.7	61.2	64.2
African-American	41	2.4	34.1	51.2	58.5	3,032	12.6	48.1	57.3	60.8
Hispanic/Latino	37	2.7	40.5	56.8	67.6	1,318	15.2	56.8	63.8	67.1
Asian	14	7.1	57.1	85.7	85.7	496	22.8	61.9	69.0	71.8
Other	0					136	18.4	61.0	66.2	67.6
Unknown	0					0				
Age										
<2 years	4	0.0	50.0	50.0	50.0	804	18.0	61.3	62.6	62.8
2-11 years	7	14.3	57.1	57.1	57.1	587	13.3	63.0	69.3	72.2
12-17 years	4	0.0	100.0	100.0	100.0	506	23.9	72.1	77.7	79.1
18-34 years	9	0.0	11.1	33.3	66.7	1,207	13.3	48.6	57.0	60.6
35-49 years	32	3.1	31.2	53.1	56.2	2,378	12.8	46.3	57.3	61.2
50-64 years	67	1.5	35.8	53.7	62.7	5,556	14.0	51.0	60.5	64.2
65-69 years	20	0.0	35.0	60.0	65.0	1,672	15.7	52.5	59.7	62.0
70+ years	10	0.0	40.0	60.0	60.0	310	27.7	66.8	69.0	69.0
Gender										
Male	115	0.9	37.4	58.3	64.3	9,328	13.8	51.3	60.5	64.0
Female	38	5.3	34.2	44.7	55.3	3,692	17.7	55.6	61.8	64.0

^{*} Race and ethnicity are reported together as a single data element, reflecting their data collection (either race or ethnicity is required, but not both). Patients formerly coded as white and Hispanic are coded as Hispanic. Race and ethnicity sum to 100%.



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B. Waiting List Information

Table B8. Percent of candidates with deceased donor transplants: medical characteristics Candidates registered on the waiting list between 07/01/2013 and 06/30/2016

Characteristic	Percent transplanted at time periods since listing stic United States							_		
	N	30 day	1 year	2 years	3 years	N	30 day	1 year	2 years	3 years
All	153	2.0	36.6	54.9	62.1	13,020	14.9	52.5	60.9	64.0
Blood Type										
Ο	80	0.0	26.2	45.0	52.5	5,842	9.4	43.9	53.4	57.2
A	46	2.2	47.8	63.0	69.6	4,708	18.2	58.0	65.7	68.5
В	23	4.3	43.5	65.2	73.9	1,845	17.7	58.9	66.9	69.3
AB	4	25.0	75.0	100.0	100.0	624	32.1	72.9	76.9	78.0
Previous Transplant										
Yes	8	12.5	50.0	62.5	62.5	553	12.1	45.0	50.3	52.8
No	145	1.4	35.9	54.5	62.1	12,467	15.0	52.8	61.4	64.5
Primary Disease										
Cardiomyopathy	89	0.0	34.8	53.9	64.0	7,314	15.5	53.9	63.2	66.4
Coronary Artery Disease	45	4.4	40.0	62.2	66.7	3,665	13.9	50.6	58.8	62.5
Retransplant/Graft Failure	7	0.0	42.9	57.1	57.1	483	12.0	45.1	50.7	53.2
Valvular Heart Disease	5	20.0	20.0	20.0	20.0	144	19.4	55.6	61.8	63.9
Congenital Heart Disease	5	0.0	40.0	40.0	40.0	1,259	14.5	53.1	58.4	60.1
Other	2	0.0	50.0	50.0	50.0	155	14.2	44.5	51.0	52.3
Missing	0					0				
Medical Urgency Status at Lis	sting									
Old Status 1	0					0				
Status 1A	33	0.0	75.8	78.8	81.8	4,143	28.4	66.8	70.2	71.6
Status 1B	80	2.5	25.0	52.5	60.0	5,046	11.4	53.2	63.8	67.2
Status 2	40	2.5	27.5	40.0	50.0	3,384	4.4	35.8	47.1	52.0
Unknown	0					447	7.6	38.5	46.3	49.2



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B. Waiting List Information

Table B9. Time to transplant for waiting list candidates*

Candidates registered on the waiting list between 07/01/2013 and 12/31/2018

		Months to	Γransplant**	
Percentile	Center	OPO/DSA	Region	U.S.
5th	1.7	0.4	0.4	0.3
10th	3.1	0.7	0.8	0.5
25th	7.6	2.3	2.5	1.8
50th (median time to transplant)	21.6	9.2	10.2	8.0
75th	Not Observed	Not Observed	Not Observed	Not Observed

^{*} If cells contain "Not Observed" fewer than that percentile of patients had received a transplant. For example, the 50th percentile of time to transplant is the time when 50% of candidates have received transplants. If waiting times are long, then the 50th percentile may not be observed during the follow-up period for this table. Also, if more than 50% of candidates are removed from the list due to death or other reasons before receiving transplants, then the 50th percentile of time to transplant will not be observed.

^{**} Censored on 06/30/2019. Calculated as the months after listing, during which the corresponding percent of all patients initially listed had received a transplant.



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B. Waiting List Information

Table B10. Offer Acceptance Practices: 07/01/2018 - 06/30/2019

Offers Acceptance Characteristics	This Center	OPO/DSA	Region	U.S.
Overall				
Number of Offers	839	3,722	4,074	45,104
Number of Acceptances	23	222	235	3,219
Expected Acceptances	53.0	211.2	233.1	3,216.8
Offer Acceptance Ratio*	0.45	1.05	1.01	1.00
95% Credible Interval**	[0.29, 0.65]			
PHS increased infectious risk				
Number of Offers	259	1,252	1,352	13,883
Number of Acceptances	11	91	94	1,033
Expected Acceptances	19.3	79.2	85.8	1,031.5
Offer Acceptance Ratio*	0.61	1.15	1.09	1.00
95% Credible Interval**	[0.32, 0.98]			
Ejection fraction < 60				
Number of Offers	290	1,223	1,353	15,179
Number of Acceptances	8	60	64	908
Expected Acceptances	13.6	53.9	62.9	905.7
Offer Acceptance Ratio*	0.64	1.11	1.02	1.00
95% Credible Interval**	[0.31, 1.10]			
Donor Age >= 40				
Number of Offers	445	1,960	2,124	21,232
Number of Acceptances	6	70	72	748
Expected Acceptances	18.1	61.0	65.4	755.0
Offer Acceptance Ratio*	0.40	1.14	1.10	0.99
95% Credible Interval**	[0.17, 0.72]			
Hard-to-Place Hearts (Over 50 Offers)				
Number of Offers	317	1,489	1,595	13,632
Number of Acceptances	3	23	23	178
Expected Acceptances	3.9	18.7	20.2	181.8
Offer Acceptance Ratio*	0.84	1.21	1.13	0.98
95% Credible Interval**	[0.27, 1.72]			
Donor more than 500 miles away				
Number of Offers	117	873	986	12,917
Number of Acceptances	4	58	61	609
Expected Acceptances	6.4	41.7	47.9	605.7
Offer Acceptance Ratio*	0.72	1.37	1.26	1.01
95% Credible Interval**	[0.26, 1.39]			

^{*} The offer acceptance ratio estimates the relative offer acceptance practice of Mount Sinai Medical Center (NYMS) compared to the national offer acceptance practice. A ratio above one indicates the program is more likely to accept an offer compared to national offer acceptance practices (e.g., an offer acceptance ratio of 1.25 indicates a 25% more likely to accept an offer), while a ratio below one indicates the program is less likely to accept an offer compared to national offer acceptance practices (e.g., an offer acceptance ratio of 0.75 indicates a 25% less likely to accept an offer).

^{**} As an example, the 95% Credible Interval for the overall offer acceptance ratio, [0.29, 0.65], indicates the location of NYMS's true offer acceptance ratio with 95% probability. The best estimate is 55% less likely to accept an offer compared to national acceptance behavior, but NYMS's performance could plausibly range from 71% reduced acceptance up to 35% reduced acceptance.



Center Code: NYMS

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Figure B7. Offer acceptance: Overall

NYMS

0.1

0.4

Lower

National Average

Negational Average

Figure B8. Offer acceptance: PHS increased infectious risk

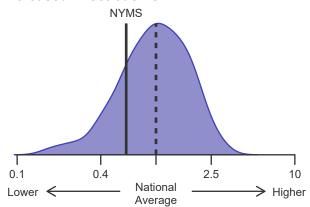
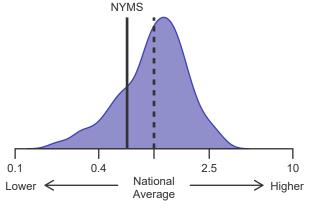


Figure B9. Offer acceptance: Ejection fraction < 60

Figure B10. Offer acceptance: Donor age >= 40



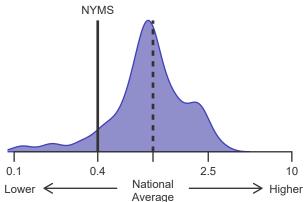


Figure B11. Offer acceptance: Offer number > 50

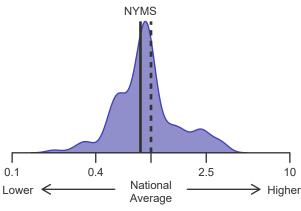
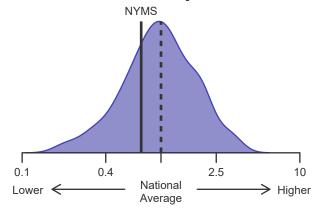


Figure B12. Offer acceptance: Donor more than 500 miles away





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C. Transplant Information

Table C1D. Deceased donor transplant recipient demographic characteristics Patients transplanted between 07/01/2018 and 06/30/2019

	Percei	Percentage in each category		
Characteristic	Center (N=27)	Region (N=261)	U.S. (N=3,525)	
Ethnicity/Race (%)*				
White	48.1	54.8	62.5	
African-American	25.9	23.0	21.7	
Hispanic/Latino	22.2	15.7	10.7	
Asian	3.7	6.5	4.2	
Other	0.0	0.0	0.9	
Unknown	0.0	0.0	0.0	
Age (%)				
<2 years	0.0	2.3	5.1	
2-11 years	0.0	5.4	4.6	
12-17	0.0	5.4	4.6	
18-34	0.0	9.2	9.8	
35-49 years	22.2	14.9	17.7	
50-64 years	48.1	42.9	40.7	
65-69 years	18.5	14.9	14.2	
70+ years	11.1	5.0	3.2	
Gender (%)				
Male	77.8	72.0	69.4	
Female	22.2	28.0	30.6	

^{*} Race and ethnicity are reported together as a single data element, reflecting their data collection (either race or ethnicity is required, but not both). Patients formerly coded as white and Hispanic are coded as Hispanic. Race and ethnicity sum to 100%.



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C. Transplant Information

Table C2D. Deceased donor transplant recipient medical characteristics Patients transplanted between 07/01/2018 and 06/30/2019

	Percentage in each category		
Characteristic	Center (N=27)	Region (N=261)	Ü.S. (N=3,525)
Blood Type (%)			
0	37.0	42.5	40.4
A	33.3	37.5	38.4
В	22.2	14.9	15.7
AB	7.4	5.0	5.5
Previous Transplant (%)			
Yes	3.7	4.2	3.9
No	96.3	95.8	96.1
Body Mass Index (%)			
0-20	7.4	19.5	20.7
21-25	33.3	27.6	27.3
26-30	37.0	33.3	28.4
31-35	22.2	16.5	18.5
36-40	0.0	2.7	4.1
41+	0.0	0.4	0.5
Unknown	0.0	0.0	0.6
Primary Disease (%)			
Cardiomyopathy	66.7	67.0	61.5
Coronary Artery Disease	29.6	20.7	24.5
Retransplant/Graft Failure	0.0	0.0	0.0
Valvular Heart Disease	3.7	1.9	1.0
Congenital Heart Disease	0.0	9.6	11.5
Other	0.0	0.8	1.5
Missing	0.0	0.0	0.1
Medical Urgency Status at Transplant (%)			
Status 1A	37.0	36.8	30.6
Status 1B	11.1	5.7	9.0
Status 2	0.0	0.0	1.4
Adult Status 1	0.0	4.2	5.0
Adult Status 2	22.2	24.9	26.2
Adult Status 3	14.8	17.6	14.6
Adult Status 4	14.8	10.0	10.5
Adult Status 5	0.0	0.0	0.3
Adult Status 6	0.0	0.8	2.5
Recipient Medical Condition at Transplant (%)			
Not Hospitalized	55.6	33.7	37.4
Hospitalized	25.9	24.1	17.5
ICU [']	18.5	42.1	44.8
Unknown	0.0	0.0	0.3
Recipient Mechanical, Ventilated or Organ-Perfusion Supp		splant (%)	
No Support Mechanism	11.1	9.6	19.5
Devices*	74.1	69.3	59.1
Other Support Mechanism	14.8	21.1	21.2
Unknown	0.0	0.0	0.2

^{*} Devices include ventricular assist devices (VAD), extracorporeal membrane oxygenation (ECMO), intraaortic balloon pump (IABP), and total artificial heart (TAH).



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C. Transplant Information

Table C3D. Deceased donor characteristics
Transplants performed between 07/01/2018 and 06/30/2019

	Percentage in each category		
Donor Characteristic	Center (N=27)	Region (N=261)	U.S. (N=3,525)
Cause of Death (%)			
Deceased: Stroke	22.2	17.2	14.0
Deceased: MVA	11.1	13.0	18.9
Deceased: Other	66.7	69.7	67.0
Ethnicity/Race (%)*			
White	63.0	64.0	62.5
African-American	18.5	18.4	16.7
Hispanic/Latino	18.5	15.3	17.2
Asian	0.0	1.5	1.8
Other	0.0	8.0	1.8
Not Reported	0.0	0.0	0.0
Age (%)			
<2 years	0.0	2.3	4.0
2-11 years	0.0	4.6	4.6
12-17	3.7	5.4	7.5
18-34	44.4	42.1	48.4
35-49 years	48.1	33.7	28.4
50-64 years	3.7	11.9	7.0
65-69 years	0.0	0.0	0.0
70+ years	0.0	0.0	0.0
Gender (%)			
Male	81.5	65.5	68.4
Female	18.5	34.5	31.6
Blood Type (%)			
0	48.1	52.1	51.3
A	29.6	33.3	34.9
В	14.8	12.3	11.5
AB	7.4	2.3	2.4
Unknown	0.0	0.0	0.0

^{*} Race and ethnicity are reported together as a single data element, reflecting their data collection (either race or ethnicity is required, but not both). Patients formerly coded as white and Hispanic are coded as Hispanic. Race and ethnicity sum to 100%.



Center Code: NYMS

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C. Transplant Information

Table C4D. Deceased donor transplant characteristics Transplants performed between 07/01/2018 and 06/30/2019

Percentage		ntage in each ca	ategory
Transplant Characteristic	Center (N=27)	Region (N=261)	U.S. (N=3,525)
Total Ischemic Time (Minutes): Local (%)			
Deceased: 0-90 min	16.7	15.2	8.8
Deceased: 91-180 min	75.0	77.3	59.4
Deceased: 181-270 min	8.3	7.6	27.9
Deceased: 271-360 min	0.0	0.0	1.9
Deceased: 361+ min	0.0	0.0	0.7
Not Reported	0.0	0.0	1.3
Total Ischemic Time (Minutes): Shared (%)			
Deceased: 0-90 min	0.0	0.5	0.3
Deceased: 91-180 min	20.0	21.5	13.8
Deceased: 181-270 min	80.0	66.2	71.1
Deceased: 271-360 min	0.0	10.3	12.2
Deceased: 361+ min	0.0	1.0	1.0
Not Reported	0.0	0.5	1.5
Procedure Type (%)			
Heart alone	88.9	92.0	92.2
Heart and another organ	11.1	8.0	7.8
Sharing (%)			
Local	44.4	25.3	39.5
Shared	55.6	74.7	60.5
Median Time in Hospital After Transplant*	25.0 Days	20.0 Days	17.0 Days

^{*} Multiple organ transplants are excluded from this statistic.



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C. Transplant Information

Table C5D. Adult (18+) 1-month survival with a functioning deceased donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

NYMS	U.S.
73	6,572
95.89%	96.42%
96.20%	
3	235
2.80	
1.04	
[0.34, 2.13]	
	73 95.89% 96.20% 3 2.80 1.04

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected graft failure rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

Figure C1D. Adult (18+) 1-month deceased donor graft failure HR estimate

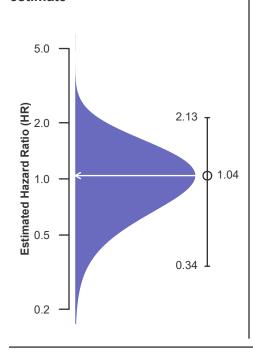
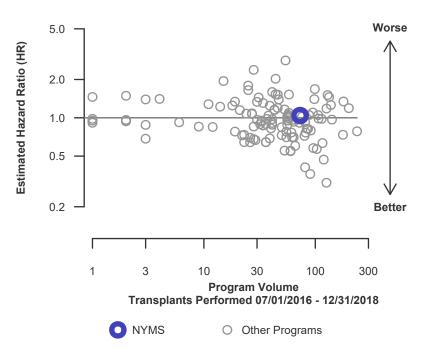


Figure C2D. Adult (18+) 1-month deceased donor graft failure HR program comparison



^{**} The 95% credible interval, [0.34, 2.13], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 4% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 66% reduced risk up to 113% increased risk.



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C. Transplant Information

Table C6D. Adult (18+) 1-year survival with a functioning deceased donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

Deaths and retransplants are considered graft failures	NYMS	U.S.
Number of transplants evaluated	73	6,572
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	80.37%	91.30%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	90.59%	
Number of observed graft failures (including deaths) during the first year after transplant	13	547
Number of expected graft failures (including deaths) during the first year after transplant	6.32	
Estimated hazard ratio*	1.80	
95% credible interval for the hazard ratio**	[1.01, 2.82]	

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected graft failure rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

Figure C3D. Adult (18+) 1-year deceased donor graft failure HR estimate

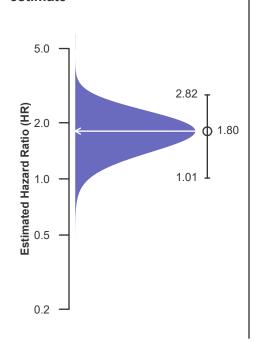
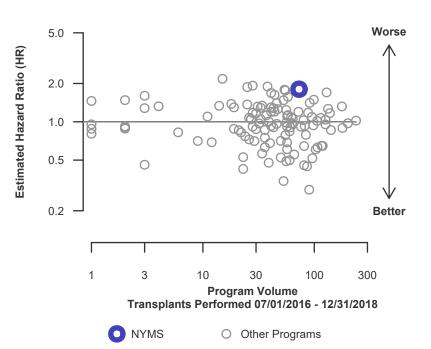


Figure C4D. Adult (18+) 1-year deceased donor graft failure HR program comparison



^{**} The 95% credible interval, [1.01, 2.82], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 80% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 1% increased risk up to 182% increased risk.



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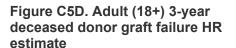
C. Transplant Information

Table C7D. Adult (18+) 3-year survival with a functioning deceased donor graft Single organ transplants performed between 01/01/2014 and 06/30/2016 Deaths and retransplants are considered graft failures

Deaths and retransplants are considered graft failures	NYMS	U.S.
Number of transplants evaluated	60	5,552
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	73.33%	84.69%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	83.91%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	16	850
Number of expected graft failures (including deaths) during the first 3 years after transplant	8.90	
Estimated hazard ratio*	1.65	
95% credible interval for the hazard ratio**	[0.98, 2.50]	

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected graft failure rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

^{**} The 95% credible interval, [0.98, 2.50], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 65% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 2% reduced risk up to 150% increased risk.



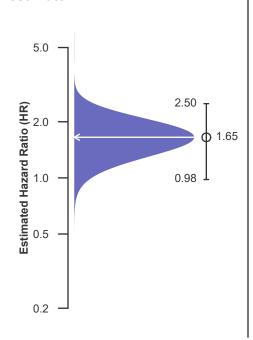
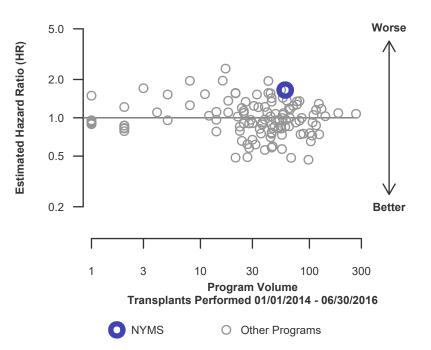


Figure C6D. Adult (18+) 3-year deceased donor graft failure HR program comparison





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C. Transplant Information

Table C8D. Pediatric (<18) 1-month survival with a functioning deceased donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

Deaths and retransplants are considered graft failures	NYMS	U.S.
Number of transplants evaluated	4	1,134
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	97.88%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	98.66%	
Number of observed graft failures (including deaths) during the first month after transplant	0	24
Number of expected graft failures (including deaths) during the first month after transplant	0.05	
Estimated hazard ratio*	0.97	
95% credible interval for the hazard ratio**	[0.12, 2.71]	

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected graft failure rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

^{**} The 95% credible interval, [0.12, 2.71], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 3% lower risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 88% reduced risk up to 171% increased risk.



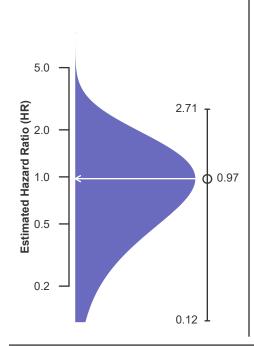
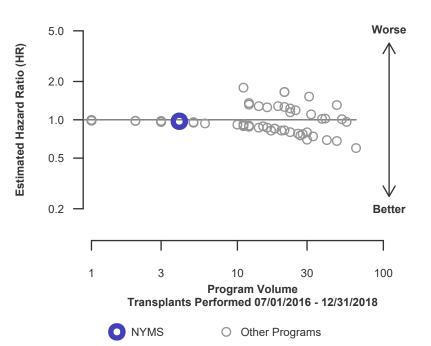


Figure C8D. Pediatric (<18) 1-month deceased donor graft failure HR program comparison





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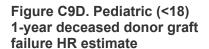
C. Transplant Information

Table C9D. Pediatric (<18) 1-year survival with a functioning deceased donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

Deaths and retransplants are considered graft failures	NYMS	U.S.
Number of transplants evaluated	4	1,134
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	100.00%	92.98%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	95.47%	
Number of observed graft failures (including deaths) during the first year after transplant	0	76
Number of expected graft failures (including deaths) during the first year after transplant	0.19	
Estimated hazard ratio*	0.92	
95% credible interval for the hazard ratio**	[0.11, 2.55]	

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected graft failure rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

^{**} The 95% credible interval, [0.11, 2.55], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 8% lower risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 89% reduced risk up to 155% increased risk.



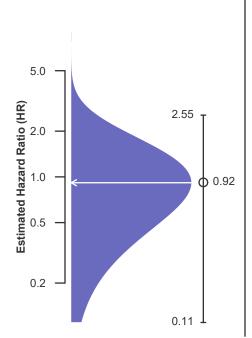
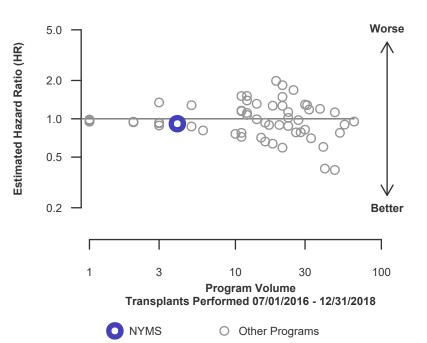


Figure C10D. Pediatric (<18) 1-year deceased donor graft failure HR program comparison





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C. Transplant Information

Table C10D. Pediatric (<18) 3-year survival with a functioning deceased donor graft Single organ transplants performed between 01/01/2014 and 06/30/2016 Deaths and retransplants are considered graft failures

Deaths and retransplants are considered graft failures	NYMS	U.S.
Number of transplants evaluated	11	1,120
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	81.82%	88.30%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	88.31%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	2	131
Number of expected graft failures (including deaths) during the first 3 years after transplant	1.14	
Estimated hazard ratio*	1.27	
95% credible interval for the hazard ratio**	[0.35, 2.79]	

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected graft failure rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

Figure C11D. Pediatric (<18) 3-year deceased donor graft failure HR estimate

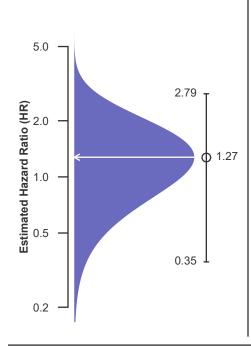
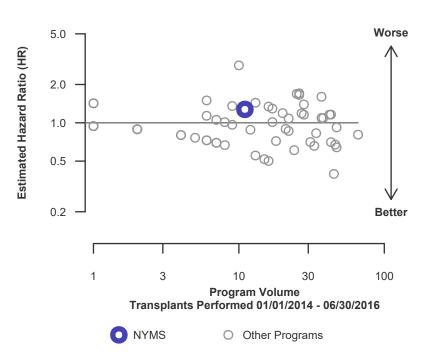


Figure C12D. Pediatric (<18) 3-year deceased donor graft failure HR program comparison



^{**} The 95% credible interval, [0.35, 2.79], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 27% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 65% reduced risk up to 179% increased risk.



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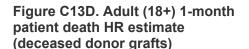
C. Transplant Information

Table C11D. Adult (18+) 1-month patient survival (deceased donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018

Retransplants excluded	NYMS	U.S.
Number of transplants evaluated	73	6,420
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	95.89%	96.71%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	96.43%	
Number of observed deaths during the first month after transplant	3	211
Number of expected deaths during the first month after transplant	2.63	
Estimated hazard ratio*	1.08	
95% credible interval for the hazard ratio**	[0.35, 2.21]	

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected patient death rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected patient death rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

^{**} The 95% credible interval, [0.35, 2.21], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 8% higher risk of patient death compared to an average program, but NYMS's performance could plausibly range from 65% reduced risk up to 121% increased risk.



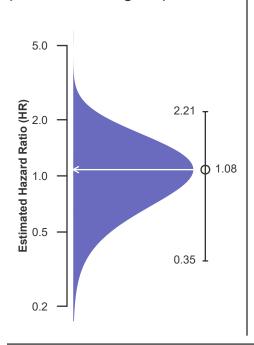
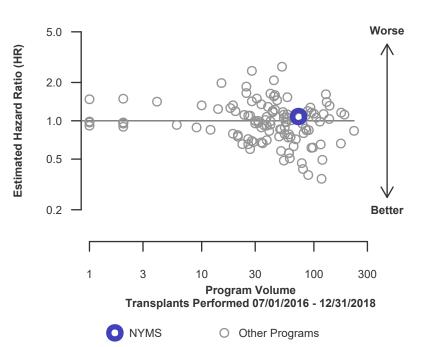


Figure C14D. Adult (18+) 1-month patient death HR program comparison (deceased donor grafts)





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C. Transplant Information

Table C12D. Adult (18+) 1-year patient survival (deceased donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018

Retransplants excluded	NYMS	U.S.
Number of transplants evaluated	73	6,420
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	80.37%	91.60%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	90.74%	
Number of observed deaths during the first year after transplant	13	515
Number of expected deaths during the first year after transplant	6.17	
Estimated hazard ratio*	1.84	
95% credible interval for the hazard ratio**	[1.03, 2.88]	

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected patient death rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected patient death rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

Figure C15D. Adult (18+) 1-year patient death HR estimate (deceased donor grafts)

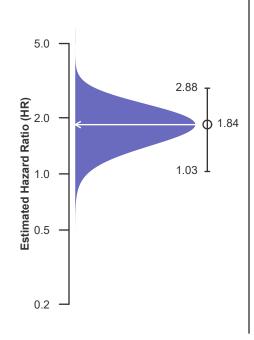
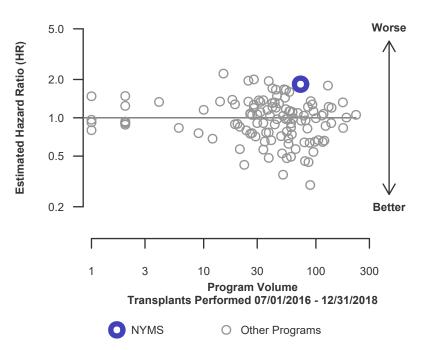


Figure C16D. Adult (18+) 1-year patient death HR program comparison (deceased donor grafts)



^{**} The 95% credible interval, [1.03, 2.88], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 84% higher risk of patient death compared to an average program, but NYMS's performance could plausibly range from 3% increased risk up to 188% increased risk.



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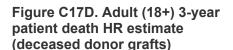
C. Transplant Information

Table C13D. Adult (18+) 3-year patient survival (deceased donor graft recipients) Single organ transplants performed between 01/01/2014 and 06/30/2016

Retransplants excluded	NYMS	U.S.	
Number of transplants evaluated	58	5,427	
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	72.41%	85.19%	
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	84.68%		
Number of observed deaths during the first 3 years after transplant	16	804	
Number of expected deaths during the first 3 years after transplant	8.04		
Estimated hazard ratio*	1.79		
95% credible interval for the hazard ratio**	[1.06, 2.71]		

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected patient death rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected patient death rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

^{**} The 95% credible interval, [1.06, 2.71], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 79% higher risk of patient death compared to an average program, but NYMS's performance could plausibly range from 6% increased risk up to 171% increased risk.



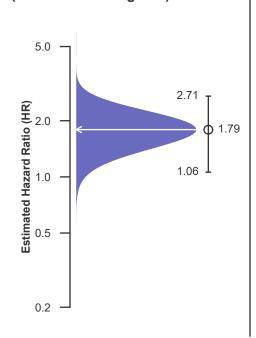
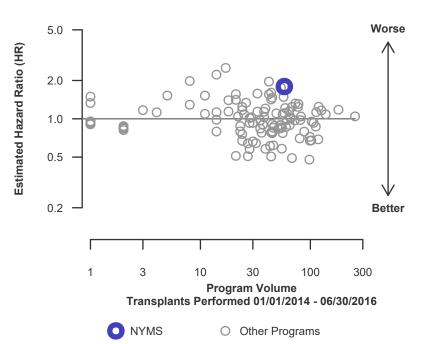


Figure C18D. Adult (18+) 3-year patient death HR program comparison (deceased donor grafts)





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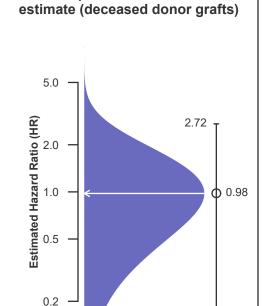
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C. Transplant Information

Table C14D. Pediatric (<18) 1-month patient survival (deceased donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018

Retransplants excluded	NYMS	U.S.	
Number of transplants evaluated	4	1,090	
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	97.80%	
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	98.83%		
Number of observed deaths during the first month after transplant	0	24	
Number of expected deaths during the first month after transplant	0.05		
Estimated hazard ratio*	0.98		
95% credible interval for the hazard ratio**	[0.12, 2.72]		

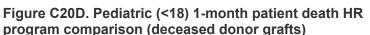
^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected patient death rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected patient death rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

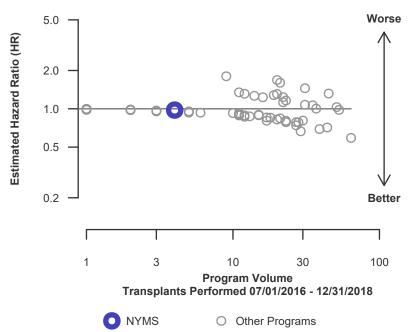


0.12

Figure C19D. Pediatric (<18)

1-month patient death HR





^{**} The 95% credible interval, [0.12, 2.72], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 2% lower risk of patient death compared to an average program, but NYMS's performance could plausibly range from 88% reduced risk up to 172% increased risk.



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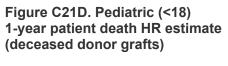
C. Transplant Information

Table C15D. Pediatric (<18) 1-year patient survival (deceased donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018
Retransplants excluded

Retransplants excluded	NYMS	U.S.	
Number of transplants evaluated	4	1,090	
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	100.00%	93.23%	
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	96.30%		
Number of observed deaths during the first year after transplant	0	71	
Number of expected deaths during the first year after transplant	0.15		
Estimated hazard ratio*	0.93		
95% credible interval for the hazard ratio**	[0.11, 2.59]		

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected patient death rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected patient death rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

^{**} The 95% credible interval, [0.11, 2.59], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 7% lower risk of patient death compared to an average program, but NYMS's performance could plausibly range from 89% reduced risk up to 159% increased risk.



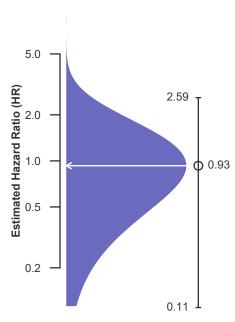
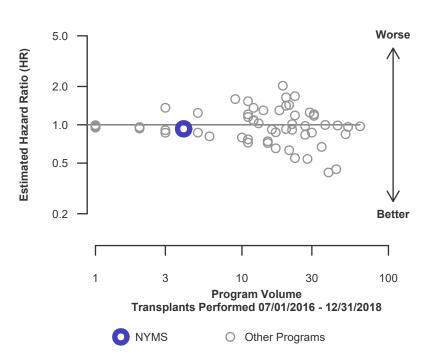


Figure C22D. Pediatric (<18) 1-year patient death HR program comparison (deceased donor grafts)





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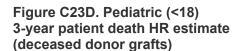
C. Transplant Information

Table C16D. Pediatric (<18) 3-year patient survival (deceased donor graft recipients) Single organ transplants performed between 01/01/2014 and 06/30/2016

Retransplants excluded	NYMS	U.S.	
Number of transplants evaluated	10	1,064	
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	80.00%	88.91%	
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	88.92%		
Number of observed deaths during the first 3 years after transplant	2	118	
Number of expected deaths during the first 3 years after transplant	0.96		
Estimated hazard ratio*	1.35		
95% credible interval for the hazard ratio**	[0.37, 2.96]		

^{*} The hazard ratio provides an estimate of how Mount Sinai Medical Center (NYMS)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected patient death rates (e.g., a hazard ratio of 1.5 would indicate 50% higher risk), and a ratio below 1 indicates lower than expected patient death rates (e.g., a hazard ratio of 0.75 would indicate 25% lower risk). If NYMS's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

^{**} The 95% credible interval, [0.37, 2.96], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 35% higher risk of patient death compared to an average program, but NYMS's performance could plausibly range from 63% reduced risk up to 196% increased risk.



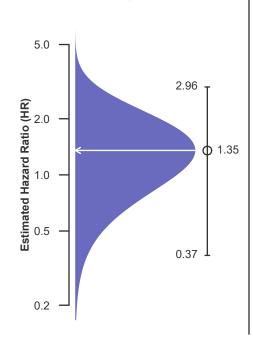
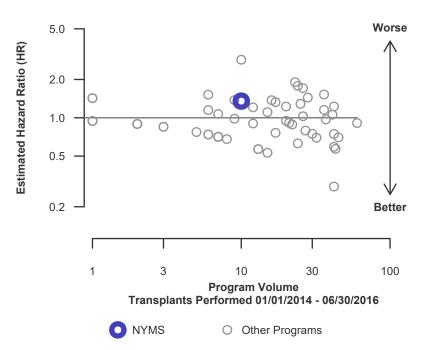


Figure C24D. Pediatric (<18) 3-year patient death HR program comparison (deceased donor grafts)





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C. Transplant Information

Table C17. Multi-organ transplant graft survival: 07/01/2016 - 12/31/2018

Adult (18+) Transplants First-Year Outcomes

Transplant Type	Transplants Performed		Heart Graft Failures		Estimated Heart Graft Survival	
	NYMS-TX1 US	A NYMS-TX	1 USA	NYMS-TX1	USA	
Kidney-Heart	8 46	3 1	44	87.5%	90.1%	

Pediatric (<18) Transplants

No pediatric (<18) multi-organ transplants were performed

Table C18. Multi-organ transplant patient survival: 07/01/2016 - 12/31/2018

Adult (18+) Transplants First-Year Outcomes

Transplant Type	-	Transplants Performed Patient De		eaths	Estimated s Patient Survival		
	NYMS-TX1	USA	NYMS-TX1	USA	NYMS-TX1	USA	
Kidney-Heart	8	463	1	43	87.5%	90.3%	

Pediatric (<18) Transplants

No pediatric (<18) multi-organ transplants were performed