

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### **User Guide**

This report contains a wide range of useful information about the kidney transplant program at The Christ Hospital (OHTC). 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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http://www.srtr.org

### **User Guide**

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 transplant rate at this program was 59.6 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. Transplant rates are also presented excluding transplants from a living donor (Table B4D and Figures B1D-B3D). 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 0.9 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 - B11 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.



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### **User Guide**

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.

Table D1 shows the rates of follow-up for living donors.

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.



Center Code: OHTC
Transplant Program (Organ):

Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

## **Table of Contents**

Section	Page
User Guide	i
A. Program Summary	
Program Summary	1
B. Waiting List Information	
Waiting list activity	2
Demographic characteristics of waiting list candidates	3
Medical characteristics of waiting list candidates	4
Transplant rates	5
Deceased donor transplant rates	6
Waiting list mortality rates	7
Waiting list candidate status after listing	8
Percent of candidates with deceased donor transplants: demographic characterist	ics 9
Percent of candidates with deceased donor transplants: medical characteristics	10
Time to transplant for waiting list candidates	11
Offer acceptance practices	12
C. Transplant Information	
Deceased donor transplant recipient demographic characteristics	14
Living donor transplant recipient demographic characteristics	15
Deceased donor transplant recipient medical characteristics	16
Living donor transplant recipient medical characteristics	17
Deceased donor characteristics	18
Living donor characteristics	19
Deceased donor transplant characteristics	20
Living donor transplant characteristics	21
Graft survival	22
Patient survival	40
Multi-organ transplant graft survival	58
Multi-organ transplant patient survival	58
D. Living Donor Information	
Living donor follow-up summary	59



Center Code: OHTC Transplant Program (Organ): Kidney Release Date: January 7, 2020

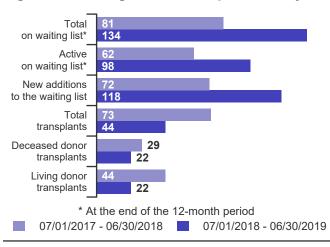
Based on Data Available: October 31, 2019

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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	73	44
Followed by this center*	668	703
transplanted at this program	n 640	674
transplanted elsewhere	28	29

<sup>\*</sup> 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

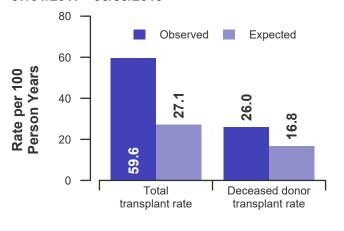


Figure A3. Waiting list mortality rates 07/01/2017 - 06/30/2019

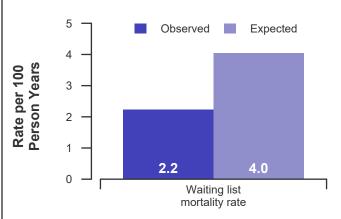


Figure A4. First-year adult graft and patient survival: 07/01/2016 - 12/31/2018

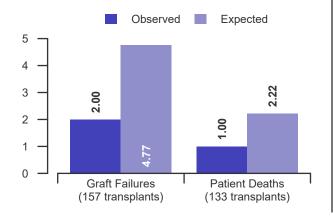


Figure A5. First-year pediatric graft and patient survival: 07/01/2016 - 12/31/2018

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Center Code: OHTC

Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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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	106	81	100.0	100.0	100.0	
New listings at this center	72	118	145.7	49.4	41.0	
Removals						
Transferred to another center	4	2	2.5	1.0	1.3	
Received living donor transplant*	44	22	27.2	9.6	6.6	
Received deceased donor transplant*	29	22	27.2	22.0	15.4	
Died	0	3	3.7	3.4	3.8	
Transplanted at another center	4	6	7.4	4.0	3.6	
Deteriorated	11	6	7.4	5.5	4.2	
Recovered	0	0	0.0	0.2	0.2	
Other reasons	5	4	4.9	4.8	5.6	
On waiting list at end of period	81	134	165.4	99.0	100.4	

<sup>\*</sup> 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.



Center Code: OHTC

Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

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

Domographia Characteristic		iting List Regis 018 to 06/30/2		All Waiting List Registrations on 06/30/2019 (%)			
Demographic Characteristic	This Center (N=118)	OPTN Region (N=2,851)	U.S. (N=41,372)	This Center (N=134)	OPTN Region (N=5,713)	U.S. (N=101,268)	
All (%)	100.0	100.0	100.0	100.0	100.0	100.0	
Ethnicity/Race (%)*							
White	66.9	63.3	41.5	63.4	57.4	35.5	
African-American	27.1	27.9	28.8	29.9	34.2	32.3	
Hispanic/Latino	1.7	4.5	19.5	0.7	3.8	20.7	
Asian	4.2	3.5	8.4	6.0	3.6	9.8	
Other	0.0	8.0	1.8	0.0	1.1	1.7	
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	
Age (%)							
<2 years	0.0	0.1	0.1	0.0	0.0	0.1	
2-11 years	0.0	1.4	1.0	0.0	0.5	0.6	
12-17 years	0.0	1.6	1.5	0.0	0.6	0.9	
18-34 years	9.3	10.6	10.8	8.2	10.3	10.6	
35-49 years	22.9	24.3	24.9	24.6	27.6	27.5	
50-64 years	43.2	40.2	41.0	42.5	42.7	43.4	
65-69 years	16.9	14.0	13.2	18.7	12.6	11.8	
70+ years	7.6	7.8	7.4	6.0	5.7	5.1	
Gender (%)							
Male	61.9	61.5	62.1	56.0	60.4	61.9	
Female	38.1	38.5	37.9	44.0	39.6	38.1	

<sup>\*</sup> 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%.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

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

Medical Characteristic	07/01/2	iting List Regis 2018 to 06/30/2	019 (%)	All Waiting List Registrations on 06/30/2019 (%)			
medical characteristic	This Center (N=118)	OPTN Region (N=2,851)	U.S. (N=41,372)	This Center (N=134)	OPTN Region (N=5,713)	U.S. (N=101,268)	
All (%)	100.0	100.0	100.0	100.0	100.0	100.0	
Blood Type (%)							
0	51.7	45.6	49.1	50.0	50.5	53.3	
A	32.2	35.7	32.0	26.1	30.0	27.4	
В	13.6	15.1	15.0	21.6	16.8	16.7	
AB	2.5	3.5	3.9	2.2	2.7	2.5	
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	
Previous Transplant (%)							
Yes	11.9	15.7	12.8	13.4	17.6	13.7	
No	88.1	84.3	87.2	86.6	82.4	86.3	
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	
Initial CPRA (%)							
0-9%	82.2	79.8	79.5	80.6	76.9	80.2	
10-79%	8.5	11.8	12.8	10.4	13.0	12.4	
80+%	9.3	8.4	7.7	9.0	10.2	7.4	
Unknown	0.0	0.0	0.1	0.0	0.0	0.0	
Primary Disease (%)*							
Glomerular Diseases	34.7	20.6	19.5	34.3	20.3	19.0	
Tubular and Interstitial Diseases	5.1	5.4	3.9	6.0	5.5	3.6	
Polycystic Kidneys	5.9	8.9	7.2	4.5	8.4	6.9	
Congenital, Familial, Metabolic	1.7	2.4	2.1	2.2	2.1	1.8	
Diabetes	27.1	32.0	35.3	31.3	31.7	36.4	
Renovascular & Vascular Diseases	s 0.0	0.0	0.2	0.0	0.1	0.1	
Neoplasms	0.0	0.3	0.4	0.0	0.2	0.3	
Hypertensive Nephrosclerosis	19.5	20.2	19.2	18.7	23.1	21.5	
Other	5.9	9.5	11.8	2.2	7.9	9.9	
Missing*	0.0	0.7	0.5	0.7	0.8	0.5	

<sup>\*</sup> When "retransplant" is indicated, the primary disease is passed forward from the prior transplant in order to indicate the initial primary disease causing organ failure. "Missing" may include some patients for whom retransplant is indicated but no prior diagnosis can be found.



Center Code: OHTC

Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

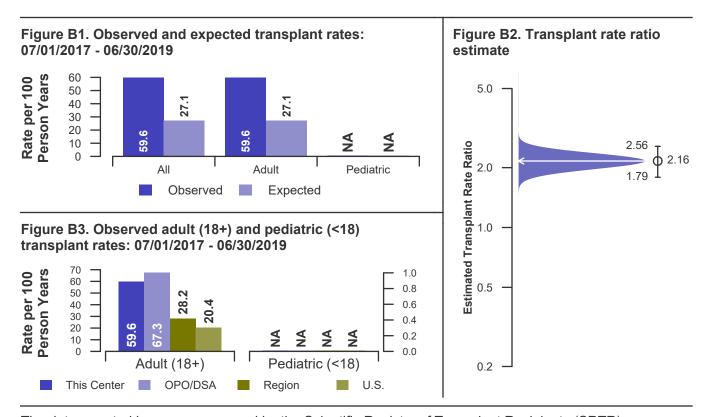
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Table B4. Transplant rates: 07/01/2017 - 06/30/2019

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	106	360	6,187	102,722
Person Years**	196.2	733.7	11,857.9	202,385.3
Removals for Transplant	117	506	3,454	42,479
Adult (18+) Candidates				
Count on waiting list at start*	106	334	6,119	101,204
Person Years**	196.2	686.4	11,720.8	199,309.9
Removals for transpant	117	462	3,305	40,758
Pediatric (<18) Candidates				
Count on waiting list at start*				
Person Years**				
Removals for transplant				

<sup>\*</sup> 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.

<sup>\*\*</sup> 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.





Center Code: OHTC

Transplant Program (Organ): Kidney Release Date: January 7, 2020

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SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

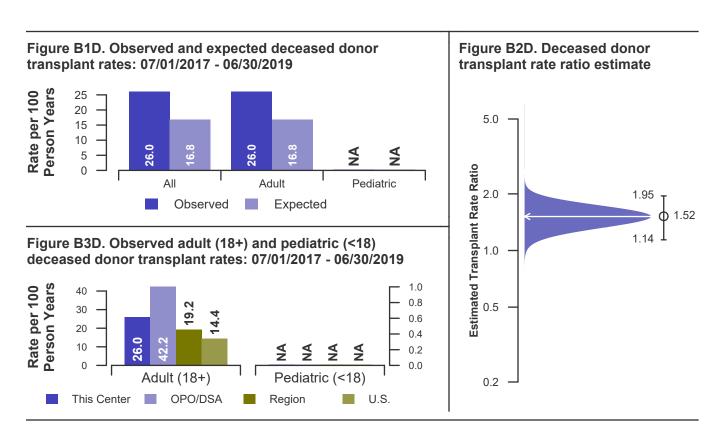
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Table B4D. Deceased donor transplant rates: 07/01/2017 - 06/30/2019

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	106	360	6,187	102,722
Person Years**	196.2	733.7	11,857.9	202,385.3
Removals for Transplant	51	312	2,338	29,769
Adult (18+) Candidates				
Count on waiting list at start*	106	334	6,119	101,204
Person Years**	196.2	686.4	11,720.8	199,309.9
Removals for transpant	51	290	2,248	28,607
Pediatric (<18) Candidates				
Count on waiting list at start*				
Person Years**				
Removals for transplant				

<sup>\*</sup> 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.

<sup>\*\*</sup> 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.





Center Code: OHTC

Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

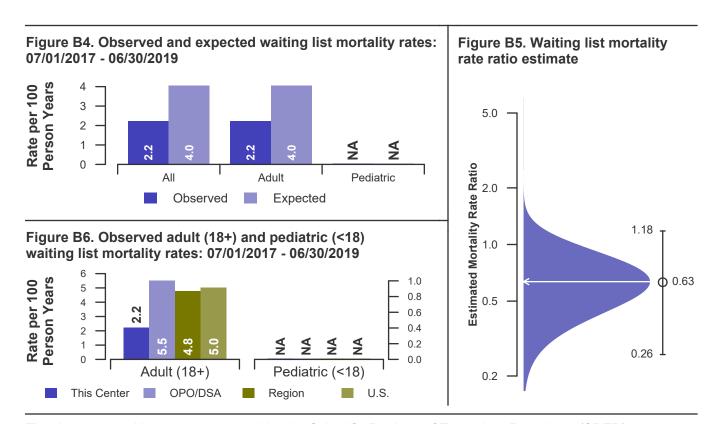
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Table B5. Waiting list mortality rates: 07/01/2017 - 06/30/2019

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	106	360	6,187	102,722
Person Years**	223.5	812.8	13,104.1	220,767.9
Number of deaths	5	42	623	10,969
Adult (18+) Candidates				
Count on waiting list at start*	106	334	6,119	101,204
Person Years**	223.5	764.5	12,961.4	217,592.8
Number of deaths	5	42	621	10,931
Pediatric (<18) Candidates				
Count on waiting list at start*				
Person Years**				
Number of deaths				

<sup>\*</sup> 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.

<sup>\*\*</sup> 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.





Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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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 (N ns Since L 12	,	U.S. (N=36,696) Months Since Listing 6 12 18		
Alive on waiting list (%)	49.2	30.2	20.6	77.9	64.9	55.0
Died on the waiting list without transplant (%)	0.0	1.6	1.6	1.2	2.2	3.1
Removed without transplant (%):						
Condition worsened (status unknown)	1.6	1.6	3.2	0.7	1.5	2.4
Condition improved (status unknown)	0.0	0.0	0.0	0.1	0.2	0.2
Refused transplant (status unknown)	0.0	0.0	1.6	0.0	0.1	0.2
Other	0.0	0.0	1.6	8.0	1.7	2.8
Transplant (living donor from waiting list only) (%):						
Functioning (alive)	36.5	46.0	22.2	6.6	10.0	8.4
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	0.0	0.0
Died	0.0	0.0	0.0	0.0	0.1	0.1
Status Yet Unknown**	0.0	1.6	27.0	0.1	0.4	3.9
Transplant (deceased donor) (%):						
Functioning (alive)	11.1	14.3	9.5	10.4	14.2	12.6
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	0.1	0.1	0.0
Died	0.0	0.0	0.0	0.2	0.4	0.7
Status Yet Unknown*	0.0	1.6	9.5	1.6	3.6	9.4
Lost or Transferred (status unknown) (%)	1.6	3.2	3.2	0.3	0.7	1.2
TOTAL (%)	100.0	100.0	100.0	100.0	100.0	100.0
Total % known died on waiting list or after transplant	0.0	1.6	1.6	1.5	2.7	3.9
Total % known died or removed as unstable	1.6	3.2	4.8	2.1	4.2	6.3
Total % removed for transplant	47.6	63.5	68.3	18.9	28.7	35.1
Total % with known functioning transplant (alive)	47.6	60.3	31.7	17.0	24.2	21.0

<sup>\*</sup> Follow-up form covering specified time period not yet completed, and possibly has not become due.



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SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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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

	Percent transplanted at time periods since listing					ng				
Characteristic		TI	nis Cen	ter			Un	ited Sta	ates	
	N	30 day	1 year	2 years	3 years	N	30 day	1 year	2 years	3 years
All	91	4.4	12.1	19.8	26.4	94,041	2.8	13.4	20.1	25.4
Ethnicity/Race*										
White	56	5.4	14.3	25.0	32.1	37,492	3.2	14.7	21.5	26.6
African-American	32	3.1	9.4	12.5	15.6	30,238	2.4	12.7	19.6	24.8
Hispanic/Latino	0					17,228	2.8	12.9	19.5	24.9
Asian	2	0.0	0.0	0.0	0.0	7,575	1.6	10.0	16.4	21.9
Other	1	0.0	0.0	0.0	100.0	1,508	2.7	15.7	22.1	27.5
Unknown	0					0				
Age										
<2 years	0					145	6.2	31.7	49.0	62.1
2-11 years	0					807	7.2	47.5	62.5	70.6
12-17 years	0					1,365	7.5	49.1	61.7	67.7
18-34 years	4	0.0	25.0	25.0	50.0	9,544	2.3	13.4	22.3	29.9
35-49 years	23	8.7	13.0	17.4	30.4	23,967	2.4	12.1	19.1	24.9
50-64 years	44	0.0	9.1	13.6	15.9	40,579	2.9	12.5	18.6	23.3
65-69 years	15	13.3	20.0	33.3	40.0	12,055	2.7	12.5	18.3	22.7
70+ years	5	0.0	0.0	40.0	40.0	5,579	2.4	13.1	18.7	22.5
Gender										
Male	45	6.7	13.3	17.8	22.2	58,154	2.9	13.1	19.4	24.5
Female	46	2.2	10.9	21.7	30.4	35,887	2.6	13.9	21.3	26.8

<sup>\*</sup> 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%.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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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			ercent to		nted at	time per		ice listi	_	
	N	30 day	1 year	2 years	3 years	N	30 day	1 year	2 years	3 years
All	91	4.4	12.1	19.8	26.4	94,041	2.8	13.4	20.1	25.4
Blood Type										
Ο	49	4.1	6.1	12.2	18.4	46,674	2.5	11.5	17.2	21.7
A	25	8.0	20.0	28.0	40.0	29,604	3.3	16.0	24.3	30.9
В	16	0.0	12.5	25.0	25.0	14,235	2.0	10.8	16.5	21.0
AB	1	0.0	100.0	100.0	100.0	3,528	4.6	26.5	38.3	45.3
Previous Transplant										
Yes	11	0.0	9.1	9.1	18.2	13,106	2.3	13.5	21.8	27.5
No	80	5.0	12.5	21.2	27.5	80,935	2.8	13.4	19.8	25.0
Peak PRA/CPRA										
0-9%	76	5.3	11.8	21.1	26.3	76,518	2.9	12.9	19.2	24.4
10-79%	8	0.0	12.5	12.5	25.0	10,354	2.0	13.4	21.0	26.8
80+%	7	0.0	14.3	14.3	28.6	7,085	2.2	17.8	28.1	33.7
Unknown	0					8	100.0	100.0	100.0	100.0
Primary Disease*										
Glomerular Diseases	19	5.3	21.1	31.6	36.8	16,899	2.1	14.2	22.6	29.4
Tubular & Interstitial Diseases	5	0.0	40.0	40.0	40.0	3,337	4.2	17.4	25.4	30.6
Polycystic Kidneys	9	0.0	0.0	0.0	11.1	6,182	1.6	11.9	19.4	26.3
Congenital, Familial, Metabolic	1	0.0	0.0	0.0	0.0	1,818	3.8	26.6	37.6	45.0
Diabetes	34	2.9	8.8	14.7	17.6	33,115	1.7	9.6	14.5	18.5
Renovascular & Vascular Diseases	1	0.0	0.0	0.0	0.0	135	4.4	15.6	23.7	28.9
Neoplasms	0					292	2.7	18.2	26.0	30.8
Hypertensive Nephrosclerosis	20	10.0	10.0	25.0	40.0	20,970	2.3	12.6	19.6	25.1
Other	2	0.0	0.0	0.0	0.0	10,890	8.0	22.4	30.1	35.0
Missing*	0					403	1.0	9.7	15.6	19.9

<sup>\*</sup> When "retransplant" is indicated, the primary disease is passed forward from the prior transplant in order to indicate the initial primary disease causing organ failure. "Missing" may include some patients for whom retransplant is indicated but no prior diagnosis can be found.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

## **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 Transplant**								
Percentile	Center	OPO/DSA	Region	U.S.					
5th	0.9	0.7	1	1.1					
10th	1.4	1.3	2.4	2.9					
25th	4.2	3.8	8.5	11.1					
50th (median time to transplant)	13.5	12.4	33.8	50.3					
75th	Not Observed	51.3	Not Observed	Not Observed					

<sup>\*</sup> 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.

<sup>\*\*</sup> 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.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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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	1,273	4,317	73,198	1,657,991
Number of Acceptances	23	138	1,169	14,558
Expected Acceptances	16.7	101.0	1,139.3	14,546.9
Offer Acceptance Ratio*	1.34	1.36	1.03	1.00
95% Credible Interval**	[0.86, 1.91]			
Low-KDRI Donors (KDRI < 1.05)				
Number of Offers	192	718	10,426	231,877
Number of Acceptances	11	59	441	4,979
Expected Acceptances	7.6	45.3	429.8	4,980.4
Offer Acceptance Ratio*	1.36	1.29	1.03	1.00
95% Credible Interval**	[0.72, 2.19]			
Medium-KDRI Donors (1.05 < KDRI < 1.75)				
Number of Offers	802	2,474	52,131	1,056,662
Number of Acceptances	10	69	628	7,967
Expected Acceptances	7.2	47.4	615.7	7,955.4
Offer Acceptance Ratio*	1.31	1.44	1.02	1.00
95% Credible Interval**	[0.68, 2.14]			
High-KDRI Donors (KDRI > 1.75)				
Number of Offers	279	1,125	10,641	369,452
Number of Acceptances	2	10	100	1,612
Expected Acceptances	2.0	8.3	93.7	1,611.1
Offer Acceptance Ratio*	1.01	1.16	1.07	1.00
95% Credible Interval**	[0.28, 2.22]			
Hard-to-Place Kidneys (Over 100 Offers)				
Number of Offers	986	2,999	54,474	1,398,185
Number of Acceptances	0	4	64	2,091
Expected Acceptances	1.4	4.2	90.6	2,096.5
Offer Acceptance Ratio*	0.58	0.97	0.71	1.00
95% Credible Interval**	[0.07, 1.63]			

<sup>\*</sup> The offer acceptance ratio estimates the relative offer acceptance practice of The Christ Hospital (OHTC) 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).

<sup>\*\*</sup> As an example, the 95% Credible Interval for the overall offer acceptance ratio, [0.86, 1.91], indicates the location of OHTC's true offer acceptance ratio with 95% probability. The best estimate is 34% more likely to accept an offer compared to national acceptance behavior, but OHTC's performance could plausibly range from 14% reduced acceptance up to 91% higher acceptance.



0.1

Lower ←

### **The Christ Hospital**

Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020 Based on Data Available: October 31, 2019

10

Higher

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## **B.** Waiting List Information

Figure B7. Offer acceptance: Overall

ОНТС

2.5

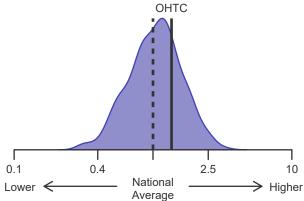


Figure B9. Offer acceptance: Medium-KDRI

National

Average

0.4

Figure B10. Offer acceptance: High-KDRI

Figure B8. Offer acceptance: Low-KDRI

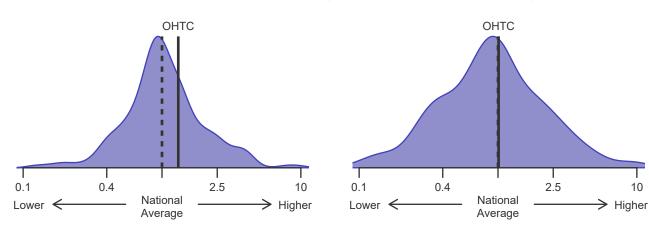
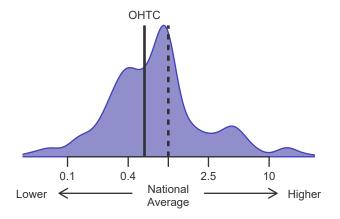


Figure B11. Offer acceptance: Offer number > 100





Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

## C. Transplant Information

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

	Perce	entage in each category		
Characteristic	Center (N=22)	Region (N=1,271)	U.S. (N=15,530)	
Ethnicity/Race (%)*				
White	63.6	58.0	37.2	
African-American	27.3	33.5	33.2	
Hispanic/Latino	4.5	4.4	19.5	
Asian	0.0	2.8	8.1	
Other	4.5	1.3	1.9	
Unknown	0.0	0.0	0.0	
Age (%)				
<2 years	0.0	0.2	0.1	
2-11 years	0.0	1.3	1.2	
12-17	0.0	1.7	1.8	
18-34	13.6	9.5	9.7	
35-49 years	31.8	23.6	23.8	
50-64 years	36.4	41.7	40.7	
65-69 years	18.2	12.6	13.5	
70+ years	0.0	9.5	9.3	
Gender (%)				
Male	63.6	60.7	60.0	
Female	36.4	39.3	40.0	

<sup>\*</sup> 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%.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

## C. Transplant Information

### Table C1L. Living donor transplant recipient demographic characteristics Patients transplanted between 07/01/2018 and 06/30/2019

	Perce	ntage in each c	ategory
Characteristic	Center (N=22)	Region (N=557)	U.S. (N=6,687)
Ethnicity/Race (%)*			
White	95.5	81.3	63.7
African-American	4.5	12.6	12.6
Hispanic/Latino	0.0	3.8	16.1
Asian	0.0	2.0	6.2
Other	0.0	0.4	1.4
Unknown	0.0	0.0	0.0
Age (%)			
<2 years	0.0	0.0	0.1
2-11 years	0.0	3.9	2.0
12-17	0.0	1.6	1.7
18-34	13.6	18.0	16.2
35-49 years	31.8	23.0	26.2
50-64 years	40.9	35.4	35.9
65-69 years	0.0	9.0	9.9
70+ years	13.6	9.2	7.9
Gender (%)			
Male	68.2	62.3	62.6
Female	31.8	37.7	37.4

<sup>\*</sup> 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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Center Code: OHTC

Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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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

	Perce	Percentage in each category		
Characteristic	Center (N=22)	Region (N=1,271)	U.S. (N=15,530)	
Blood Type (%)				
0	50.0	44.9	46.4	
A	36.4	36.6	33.7	
В	9.1	13.3	14.5	
AB	4.5	5.2	5.4	
Previous Transplant (%)				
Yes	22.7	11.8	13.0	
No	77.3	88.2	87.0	
Peak PRA/CPRA Prior to Transplant (%)				
0-9%	50.0	62.9	59.3	
10-79%	31.8	24.3	22.8	
80+ %	18.2	12.8	17.9	
Unknown	0.0	0.0	0.0	
Body Mass Index (%)				
0-20	4.5	8.1	9.7	
21-25	27.3	27.2	27.9	
26-30	40.9	29.2	30.6	
31-35	18.2	22.8	21.0	
36-40	9.1	10.4	8.0	
41+	0.0	2.0	1.4	
Unknown	0.0	0.2	1.5	
Primary Disease (%)*				
Glomerular Diseases	18.2	21.6	21.6	
Tubular and Interstitial Disease	4.5	5.2	4.2	
Polycystic Kidneys	13.6	9.8	7.5	
Congenital, Familial, Metabolic	4.5	3.0	2.6	
Diabetes	9.1	28.1	29.0	
Renovascular & Vascular Diseases	0.0	0.3	0.2	
Neoplasms	0.0	0.2	0.4	
Hypertensive Nephrosclerosis	31.8	21.7	23.4	
Other Kidney	18.2	10.0	10.8	
Missing*	0.0	0.1	0.2	

<sup>\*</sup> When "retransplant" is indicated, the primary disease is passed forward from the prior transplant in order to indicate the initial primary disease causing organ failure. "Missing" may include some patients for whom retransplant is indicated but no prior diagnosis can be found.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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## C. Transplant Information

### Table C2L. Living donor transplant recipient medical characteristics Patients transplanted between 07/01/2018 and 06/30/2019

	Percei	Percentage in each category		
Characteristic	Center (N=22)	Region (N=557)	U.S. (N=6,687)	
Blood Type (%)				
0	45.5	45.4	44.5	
A	45.5	39.7	37.8	
В	9.1	12.4	13.5	
AB	0.0	2.5	4.2	
Previous Transplant (%)				
Yes	13.6	11.5	10.9	
No	86.4	88.5	89.1	
Peak PRA/CPRA Prior to Transplant (%)				
0-9%	95.5	74.3	75.0	
10-79%	4.5	21.4	20.2	
80+ %	0.0	4.1	4.7	
Unknown	0.0	0.2	0.1	
Body Mass Index (%)				
0-20	9.1	12.6	12.5	
21-25	31.8	25.0	29.2	
26-30	36.4	33.2	30.2	
31-35	18.2	20.3	19.0	
36-40	4.5	8.3	7.0	
41+	0.0	0.7	1.3	
Unknown	0.0	0.0	0.7	
Primary Disease (%)*				
Glomerular Diseases	40.9	28.9	30.0	
Tubular and Interstitial Disease	13.6	5.4	5.6	
Polycystic Kidneys	13.6	13.3	12.3	
Congenital, Familial, Metabolic	0.0	4.5	3.4	
Diabetes	22.7	21.4	23.2	
Renovascular & Vascular Diseases	0.0	0.2	0.3	
Neoplasms	0.0	0.2	0.6	
Hypertensive Nephrosclerosis	9.1	18.0	15.1	
Other Kidney	0.0	8.3	9.2	
Missing*	0.0	0.0	0.3	

<sup>\*</sup> When "retransplant" is indicated, the primary disease is passed forward from the prior transplant in order to indicate the initial primary disease causing organ failure. "Missing" may include some patients for whom retransplant is indicated but no prior diagnosis can be found.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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## C. Transplant Information

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

	Perce	ntage in each ca	ategory
Donor Characteristic	Center (N=22)	Region (N=1,271)	U.S. (N=15,530)
Cause of Death (%)			
Deceased: Stroke	18.2	19.8	23.5
Deceased: MVA	13.6	12.2	14.2
Deceased: Other	68.2	68.0	62.2
Ethnicity/Race (%)*			
White	86.4	79.6	67.6
African-American	9.1	13.8	13.7
Hispanic/Latino	0.0	4.9	14.8
Asian	4.5	1.4	2.6
Other	0.0	0.3	1.3
Not Reported	0.0	0.0	0.0
Age (%)			
<2 years	0.0	0.3	0.9
2-11 years	0.0	1.3	2.9
12-17	0.0	6.1	4.1
18-34	31.8	32.4	32.8
35-49 years	45.5	34.5	32.1
50-64 years	22.7	24.2	24.5
65-69 years	0.0	1.1	2.0
70+ years	0.0	0.2	0.6
Gender (%)			
Male	63.6	59.9	61.2
Female	36.4	40.1	38.8
Blood Type (%)			
0	54.5	47.2	48.3
A	36.4	39.7	36.2
В	9.1	10.7	12.0
AB	0.0	2.4	3.5
Unknown	0.0	0.0	0.0
No	90.9	88.4	86.3

<sup>\*</sup> 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%.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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## C. Transplant Information

Table C3L. Living donor characteristics Transplants performed between 07/01/2018 and 06/30/2019

	Percei	ntage in each c	ategory
Donor Characteristic	Center (N=22)	Region (N=557)	U.S. (N=6,687)
Ethnicity/Race (%)*			
White	95.5	84.9	69.8
African-American	0.0	6.5	8.9
Hispanic/Latino	4.5	5.6	15.1
Asian	0.0	1.3	4.6
Other	0.0	1.8	1.6
Not Reported	0.0	0.0	0.0
Age (%)			
0-11 years	0.0	0.0	0.0
12-17	0.0	0.0	0.0
18-34	18.2	24.4	26.3
35-49 years	45.5	39.1	38.9
50-64 years	31.8	32.1	30.2
65-69 years	4.5	3.8	3.5
70+ years	0.0	0.5	1.1
Gender (%)			
Male	40.9	36.4	34.9
Female	59.1	63.6	65.1
Blood Type (%)			
0	68.2	62.5	63.0
A	27.3	28.0	27.7
В	4.5	9.2	8.1
AB	0.0	0.4	1.2
Unknown	0.0	0.0	0.0

<sup>\*</sup> 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%.



Based on Data Available: October 31, 2019

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## **C. Transplant Information**

Table C4D. Deceased	donor transpla	ant characteristics	S
Transplants performe	d between 07/0	01/2018 and 06/30	/2019

Transplants performed between 07/01/2018 and 06/30/2019	Percentage in each category		
Transplant Characteristic	Center (N=22)	Region (N=1,271)	U.S. (N=15,530)
Cold Ischemic Time (Hours): Local (%)			
Deceased: 0-11 hr	35.3	31.9	34.8
Deceased: 12-21 hr	52.9	46.9	47.4
Deceased: 22-31 hr	11.8	15.0	14.4
Deceased: 32-41 hr	0.0	2.8	1.8
Deceased: 42+ hr	0.0	3.5	0.7
Not Reported	0.0	0.0	0.9
Cold Ischemic Time (Hours): Shared (%)			
Deceased: 0-11 hr	40.0	15.2	8.7
Deceased: 12-21 hr	0.0	39.4	39.7
Deceased: 22-31 hr	60.0	39.1	35.8
Deceased: 32-41 hr	0.0	3.6	11.5
Deceased: 42+ hr	0.0	2.4	3.6
Not Reported	0.0	0.3	8.0
Level of Mismatch (%) A Locus Mismatches (%)			
0	9.1	11.7	11.7
1	31.8	37.5	38.4
2	59.1	50.7	49.3
Not Reported	0.0	0.1	0.5
B Locus Mismatches (%)			
0	9.1	7.9	7.5
1	45.5	24.7	24.2
2	45.5	67.3	67.8
Not Reported	0.0	0.1	0.5
DR Locus Mismatches (%)			
0	18.2	16.9	16.6
1	59.1	49.7	47.4
2	22.7	33.3	35.4
Not Reported	0.0	0.1	0.5
Total Mismatches (%)			
0	4.5	4.2	4.7
1	0.0	1.7	1.3
2	4.5	4.9	4.6
3	22.7	13.7	13.5
4	40.9	29.4	27.7
5	13.6	31.5	32.5
6	13.6	14.5	15.2
Not Reported	0.0	0.1	0.5
Procedure Type (%)	-		
Kidney alone	100.0	92.6	94.1
Kidney and another organ	0.0	7.4	5.9
Dialysis in First Week After Transplant (%)	-		
Yes	22.7	18.2	29.6
No	77.3	81.8	70.1
Not Reported	0.0	0.0	0.4
Sharing (%)			
Local	77.3	74.0	68.1
Shared	22.7	26.0	31.9
Median Time in Hospital After Transplant*	6.0 Days	5.0 Days	5.0 Days

<sup>\*</sup> Multiple organ transplants are excluded from this statistic.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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## **C.** Transplant Information

### Table C4L. Living donor transplant characteristics Transplants performed between 07/01/2018 and 06/30/2019

Percentage in each categ			ategory
Transplant Characteristic	Center	Region	U.S.
	(N=22)	(N=557)	(N=6,687)
Relation with Donor (%)			
Related	36.4	38.1	40.0
Unrelated	63.6	61.9	59.8
Not Reported	0.0	0.0	0.1
Level of Mismatch (%)			
A Locus Mismatches (%)			
0	4.5	17.4	16.9
1	63.6	47.4	48.9
2	31.8	29.1	30.8
Not Reported	0.0	6.1	3.4
B Locus Mismatches (%)			
0	4.5	10.2	10.3
1	40.9	39.1	41.9
2	54.5	44.5	44.5
Not Reported	0.0	6.1	3.4
DR Locus Mismatches (%)			
0	18.2	13.1	15.8
1	54.5	47.6	48.1
2	27.3	33.2	32.8
Not Reported	0.0	6.1	3.4
Total Mismatches (%)			
0	0.0	4.5	5.2
1	4.5	2.3	3.6
2	13.6	12.4	12.4
3	31.8	22.3	22.5
4	4.5	19.9	18.0
5	31.8	20.8	22.5
6	13.6	11.7	12.5
Not Reported	0.0	6.1	3.4
Procedure Type (%)	0.0	• • • • • • • • • • • • • • • • • • • •	<b>.</b>
Kidney alone	100.0	100.0	100.0
Kidney and another organ	0.0	0.0	0.0
Dialysis in First Week After Transplant (%)	0.0	3.0	0.0
Yes	0.0	3.4	3.1
No	100.0	96.6	96.4
Not Reported	0.0	0.0	0.5
Median Time in Hospital After Transplant*	4.0 Days	4.0 Days	4.0 Days

<sup>\*</sup> Multiple organ transplants are excluded from this statistic.



Center Code: OHTC Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

## C. Transplant Information

Table C5. Adult (18+) 1-month survival with a functioning graft Single organ transplants performed between 07/01/2016 and 12/31/2018

Deaths and retransplants are considered graft failures	OHTC	U.S.
Number of transplants evaluated	157	46,453
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	98.61%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	98.91%	
Number of observed graft failures (including deaths) during the first month after transplant	0	645
Number of expected graft failures (including deaths) during the first month after transplant	1.73	
Estimated hazard ratio*	0.54	
95% credible interval for the hazard ratio**	[0.07, 1.50]	

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

graft failure HR estimate 10.0 5.0 Estimated Hazard Ratio (HR) 2.0 1.50 1.0 ሰ 0.54 0.5 0.2 0.1 0.07

Figure C1. Adult (18+) 1-month

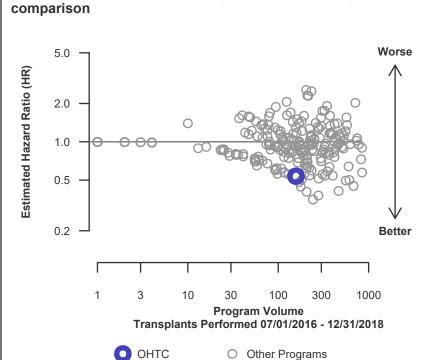


Figure C2. Adult (18+) 1-month graft failure HR program

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA).

<sup>\*\*</sup> The 95% credible interval, [0.07, 1.50], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 46% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 93% reduced risk up to 50% increased risk.



Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020 Based on Data Available: October 31, 2019 SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

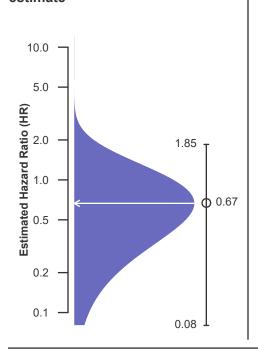
## C. Transplant Information

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

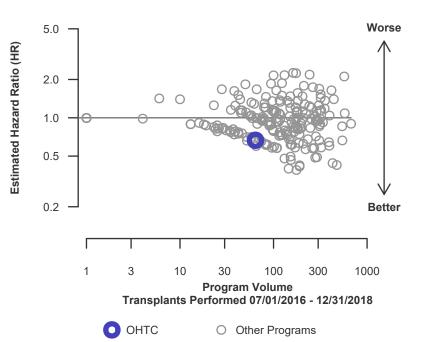
Deaths and retransplants are considered graft failures	OHTC	U.S.
Number of transplants evaluated	64	31,966
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	98.32%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	98.44%	
Number of observed graft failures (including deaths) during the first month after transplant	0	538
Number of expected graft failures (including deaths) during the first month after transplant	1.01	
Estimated hazard ratio*	0.67	
95% credible interval for the hazard ratio**	[0.08, 1.85]	

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC'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



<sup>\*\*</sup> The 95% credible interval, [0.08, 1.85], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 33% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 92% reduced risk up to 85% increased risk.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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## C. Transplant Information

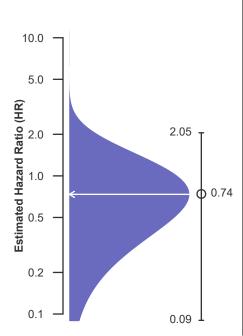
Table C5L. Adult (18+) 1-month survival with a functioning living donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018

Deaths and retransplants are considered graft failures	OHTC	U.S.
Number of transplants evaluated	93	14,487
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	99.26%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	99.23%	
Number of observed graft failures (including deaths) during the first month after transplant	0	107
Number of expected graft failures (including deaths) during the first month after transplant	0.72	
Estimated hazard ratio*	0.74	
95% credible interval for the hazard ratio**	[0.09, 2.05]	

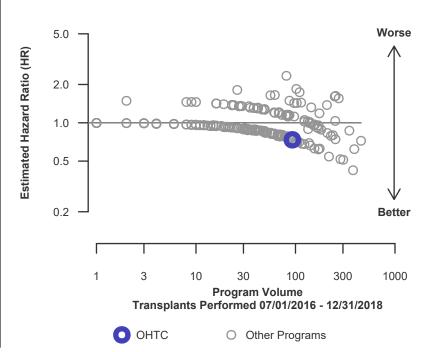
<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.09, 2.05], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 26% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 91% reduced risk up to 105% increased risk.





### Figure C2L. Adult (18+) 1-month living donor graft failure HR program comparison





Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020 Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

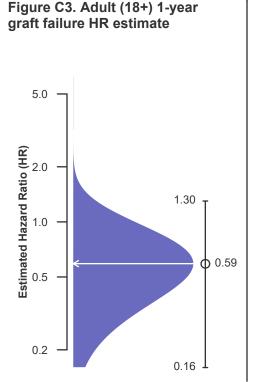
## C. Transplant Information

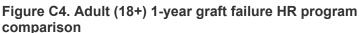
Table C6. Adult (18+) 1-year survival with a functioning graft Single organ transplants performed between 07/01/2016 and 12/31/2018

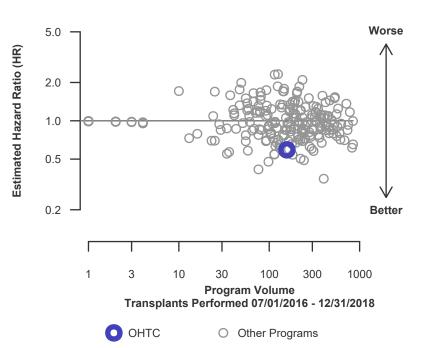
OHTC	U.S.
157	46,453
98.63%	95.90%
96.88%	
2	1,787
4.77	
0.59	
[0.16, 1.30]	
	157 98.63% 96.88% 2 4.77 0.59

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.16, 1.30], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 41% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 84% reduced risk up to 30% increased risk.









Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020 Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

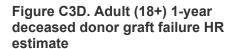
## C. Transplant Information

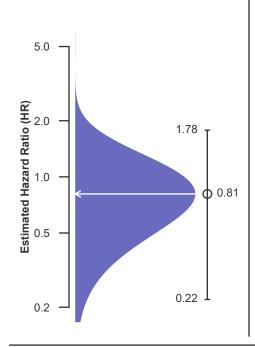
Table C6D. Adult (18+) 1-year survival with a functioning deceased donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018

Deaths and retransplants are considered graft failures	OHTC	C U.S.	
	ОПС	0.3.	
Number of transplants evaluated	64	31,966	
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	96.54%	94.91%	
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	95.26%		
Number of observed graft failures (including deaths) during the first year after transplant	2	1,529	
Number of expected graft failures (including deaths) during the first year after transplant	2.94		
Estimated hazard ratio*	0.81		
95% credible interval for the hazard ratio**	[0.22, 1.78]		

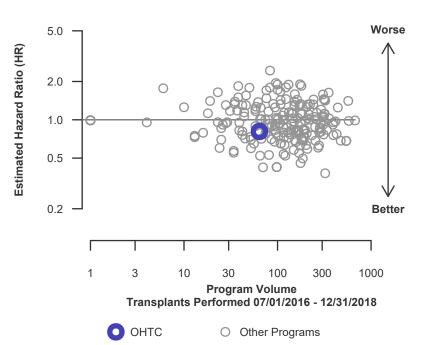
<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.22, 1.78], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 19% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 78% reduced risk up to 78% increased risk.





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





Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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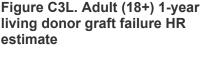
## C. Transplant Information

Table C6L. Adult (18+) 1-year survival with a functioning living donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018

OHTC	U.S.
93	14,487
100.00%	98.09%
98.00%	
0	258
1.83	
0.52	
[0.06, 1.46]	
	93 100.00% 98.00% 0 1.83 0.52

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.06, 1.46], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 48% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 94% reduced risk up to 46% increased risk.



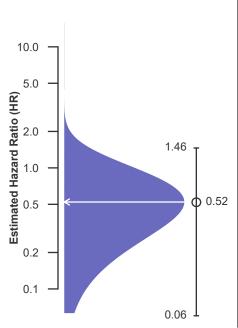
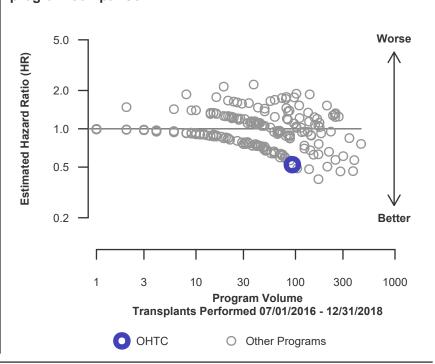


Figure C4L. Adult (18+) 1-year living donor graft failure HR program comparison





Center Code: OHTC Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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## C. Transplant Information

Table C7. Adult (18+) 3-year survival with a functioning graft Single organ transplants performed between 01/01/2014 and 06/30/2016

Deaths and retransplants are considered graft failures	OHTC	U.S.
Number of transplants evaluated	107	40,310
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	91.59%	89.02%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	90.98%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	9	4,426
Number of expected graft failures (including deaths) during the first 3 years after transplant	9.76	
Estimated hazard ratio*	0.94	
95% credible interval for the hazard ratio**	[0.47, 1.56]	

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

Figure C5. Adult (18+) 3-year graft failure HR estimate

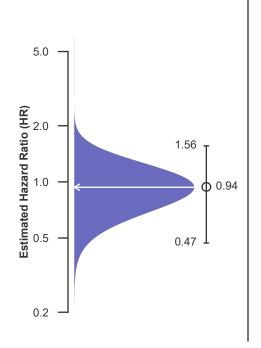
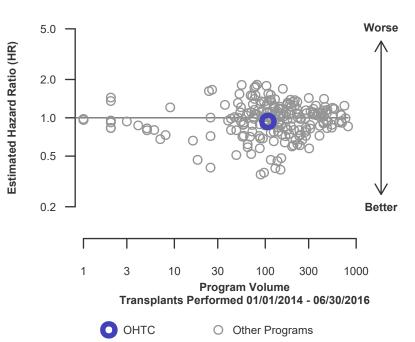


Figure C6. Adult (18+) 3-year graft failure HR program comparison



<sup>\*\*</sup> The 95% credible interval, [0.47, 1.56], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 6% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 53% reduced risk up to 56% increased risk.



Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

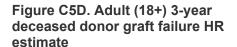
## C. Transplant Information

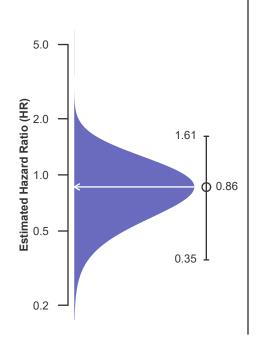
Table C7D. Adult (18+) 3-year survival with a functioning deceased donor graft Single organ transplants performed between 01/01/2014 and 06/30/2016

Deaths and retransplants are considered graft failures	OHTC	U.S.
Number of transplants evaluated	46	27,101
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	89.13%	86.62%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	86.99%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	5	3,626
Number of expected graft failures (including deaths) during the first 3 years after transplant	6.12	
Estimated hazard ratio*	0.86	
95% credible interval for the hazard ratio**	[0.35, 1.61]	

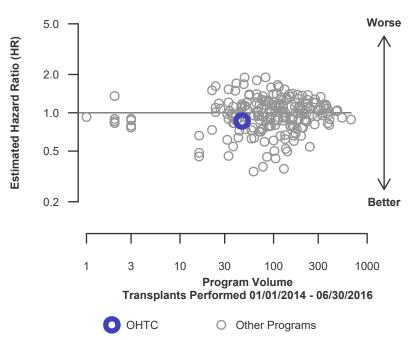
<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.35, 1.61], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 14% lower risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 65% reduced risk up to 61% increased risk.





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





Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

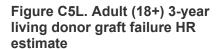
## C. Transplant Information

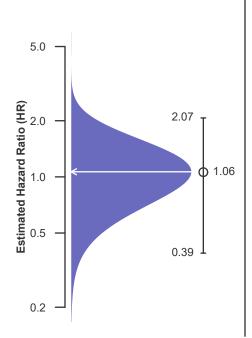
Table C7L. Adult (18+) 3-year survival with a functioning living donor graft Single organ transplants performed between 01/01/2014 and 06/30/2016

Deaths and retransplants are considered graft failures	OHTC	U.S.
Number of transplants evaluated	61	13,209
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	93.44%	93.94%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	93.99%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	4	800
Number of expected graft failures (including deaths) during the first 3 years after transplant	3.63	
Estimated hazard ratio*	1.06	
95% credible interval for the hazard ratio**	[0.39, 2.07]	

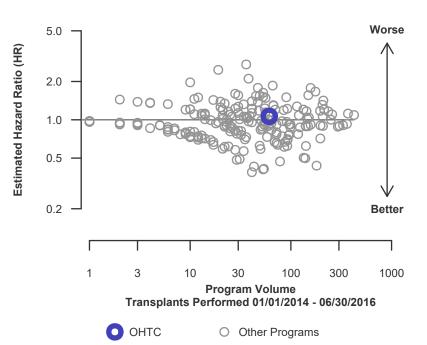
<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected graft failure rates (e.g., a hazard ratio of 1.5 would indicate 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 OHTC's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.39, 2.07], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 6% higher risk of graft failure compared to an average program, but OHTC's performance could plausibly range from 61% reduced risk up to 107% increased risk.





### Figure C6L. Adult (18+) 3-year living donor graft failure HR program comparison





Center Code: OHTC Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

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## C. Transplant Information

Table C8. Pediatric (<18) 1-month survival with a functioning graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

### Figure C7. Pediatric (<18) 1-month graft failure HR estimate

Figure C8. Pediatric (<18) 1-month graft failure HR program comparison

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Center Code: OHTC Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

## 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

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C7D. Pediatric (<18) 1-month deceased donor graft failure HR estimate

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

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

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### C. Transplant Information

Table C8L. Pediatric (<18) 1-month survival with a functioning living donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C7L. Pediatric (<18) 1-month living donor graft failure HR estimate

Figure C8L. Pediatric (<18) 1-month living donor graft failure HR program comparison

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C9. Pediatric (<18) 1-year survival with a functioning graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C9. Pediatric (<18) 1-year graft failure HR estimate

Figure C10. Pediatric (<18) 1-year graft failure HR program comparison

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### 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

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C9D. Pediatric (<18) 1-year deceased donor graft failure HR estimate

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

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C9L. Pediatric (<18) 1-year survival with a functioning living donor graft Single organ transplants performed between 07/01/2016 and 12/31/2018 Deaths and retransplants are considered graft failures

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C9L. Pediatric (<18) 1-year living donor graft failure HR estimate

Figure C10L. Pediatric (<18) 1-year living donor graft failure HR program comparison

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

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### C. Transplant Information

Table C10. Pediatric (<18) 3-year survival with a functioning graft Single organ transplants performed between 01/01/2014 and 06/30/2016 Deaths and retransplants are considered graft failures

> This center did not perform any transplants relevant to this table during 01/01/2014-06/30/2016

### Figure C11. Pediatric (<18) 3-year graft failure HR estimate

Figure C12. Pediatric (<18) 3-year graft failure HR program comparison

This center did not perform any transplants relevant to this figure during 01/01/2014-06/30/2016



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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

> This center did not perform any transplants relevant to this table during 01/01/2014-06/30/2016

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

This center did not perform any transplants relevant to this figure during 01/01/2014-06/30/2016



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### C. Transplant Information

Table C10L. Pediatric (<18) 3-year survival with a functioning living donor graft Single organ transplants performed between 01/01/2014 and 06/30/2016 Deaths and retransplants are considered graft failures

> This center did not perform any transplants relevant to this table during 01/01/2014-06/30/2016

Figure C11L. Pediatric (<18) 3-year living donor graft failure **HR** estimate

Figure C12L. Pediatric (<18) 3-year living donor graft failure HR program comparison

This center did not perform any transplants relevant to this figure during 01/01/2014-06/30/2016



Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020 Based on Data Available: October 31, 2019

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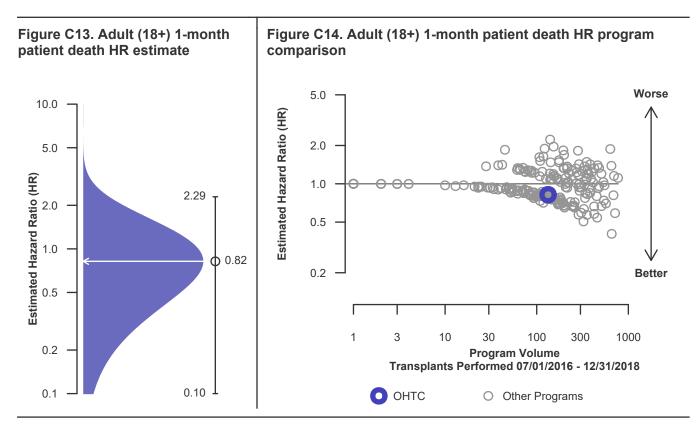
### C. Transplant Information

Table C11. Adult (18+) 1-month patient survival Single organ transplants performed between 07/01/2016 and 12/31/2018

Retransplants excluded	OHTC	U.S.
Number of transplants evaluated	133	40,946
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	99.57%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	99.67%	
Number of observed deaths during the first month after transplant	0	178
Number of expected deaths during the first month after transplant	0.44	
Estimated hazard ratio*	0.82	
95% credible interval for the hazard ratio**	[0.10, 2.29]	

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.10, 2.29], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 18% lower risk of patient death compared to an average program, but OHTC's performance could plausibly range from 90% reduced risk up to 129% increased risk.





Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

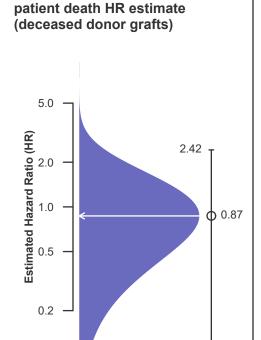
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### C. Transplant Information

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

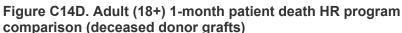
Retransplants excluded	OHTC	U.S.	
Number of transplants evaluated	56	27,873	
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	99.44%	
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	99.46%		
Number of observed deaths during the first month after transplant	0	155	
Number of expected deaths during the first month after transplant	0.30		
Estimated hazard ratio*	0.87		
95% credible interval for the hazard ratio**	[0.11, 2.42]		

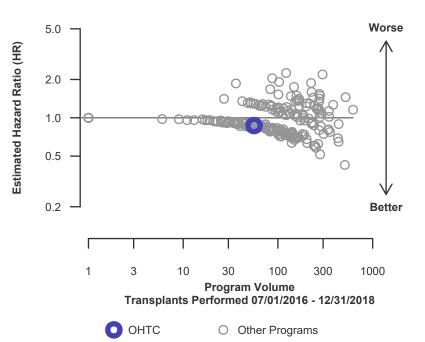
<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'s results compare with what was expected based on modeling the transplant outcomes from all U.S. programs. A ratio above 1 indicates higher than expected patient death rates (e.g., a hazard ratio of 1.5 would indicate 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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.



0.11

Figure C13D. Adult (18+) 1-month





<sup>\*\*</sup> The 95% credible interval, [0.11, 2.42], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 13% lower risk of patient death compared to an average program, but OHTC's performance could plausibly range from 89% reduced risk up to 142% increased risk.



Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C11L. Adult (18+) 1-month patient survival (living donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018

Retransplants excluded	OHTC	U.S.	
Number of transplants evaluated	77	13,073	
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	99.82%	
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	99.82%		
Number of observed deaths during the first month after transplant	0	23	
Number of expected deaths during the first month after transplant	0.14		
Estimated hazard ratio*	0.94		
95% credible interval for the hazard ratio**	[0.11, 2.61]		

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

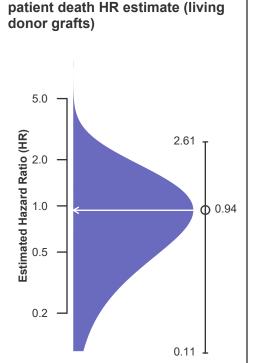
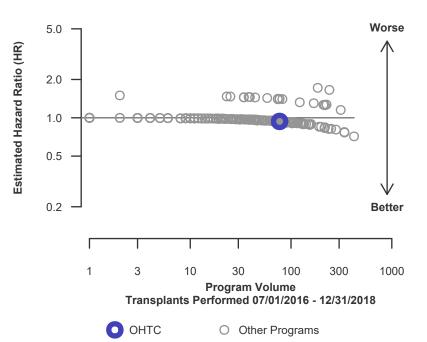


Figure C13L. Adult (18+) 1-month





<sup>\*\*</sup> The 95% credible interval, [0.11, 2.61], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 6% lower risk of patient death compared to an average program, but OHTC's performance could plausibly range from 89% reduced risk up to 161% increased risk.



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

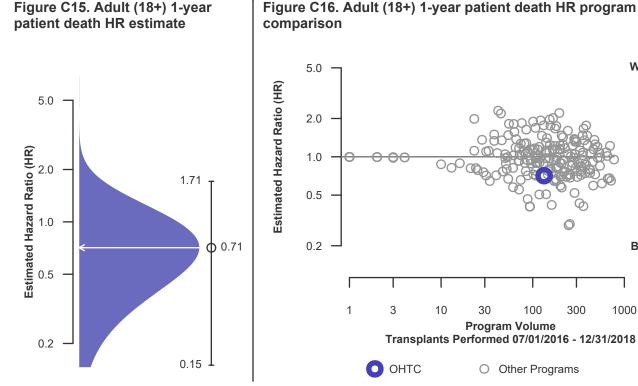
### C. Transplant Information

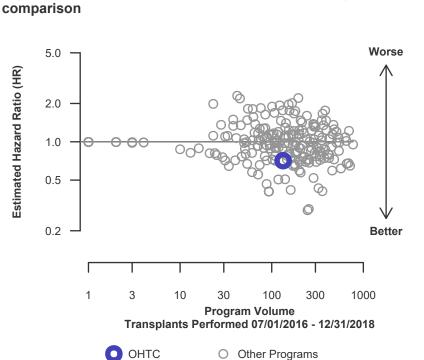
Table C12. Adult (18+) 1-year patient survival Single organ transplants performed between 07/01/2016 and 12/31/2018

OHTC	U.S.
133	40,946
99.15%	97.71%
98.28%	
1	856
2.22	
0.71	
[0.15, 1.71]	
•	133 99.15% 98.28% 1 2.22 0.71

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.15, 1.71], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 29% lower risk of patient death compared to an average program, but OHTC's performance could plausibly range from 85% reduced risk up to 71% increased risk.







Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

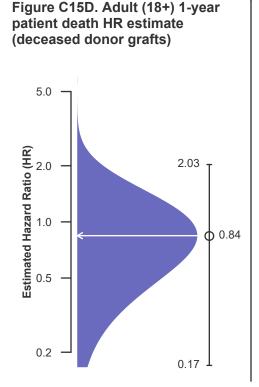
### C. Transplant Information

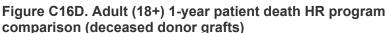
Table C12D. Adult (18+) 1-year patient survival (deceased donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018 Retransplants excluded

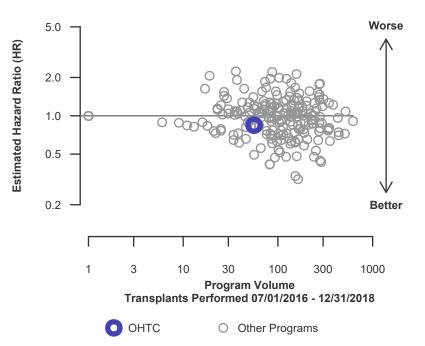
Retransplants excluded	OHTC	U.S.
Number of transplants evaluated	56	27,873
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	97.92%	97.05%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	97.14%	
Number of observed deaths during the first year after transplant	1	751
Number of expected deaths during the first year after transplant	1.56	
Estimated hazard ratio*	0.84	
95% credible interval for the hazard ratio**	[0.17, 2.03]	

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.17, 2.03], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 16% lower risk of patient death compared to an average program, but OHTC's performance could plausibly range from 83% reduced risk up to 103% increased risk.









Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

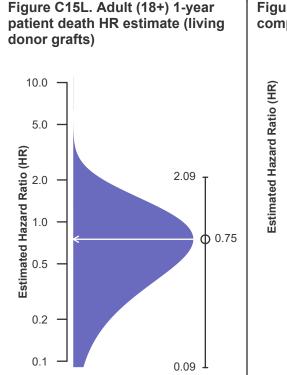
### C. Transplant Information

Table C12L. Adult (18+) 1-year patient survival (living donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018

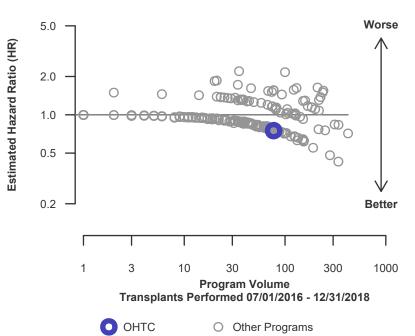
Retransplants excluded	OHTC	U.S.
Number of transplants evaluated	77	13,073
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	100.00%	99.12%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	99.11%	
Number of observed deaths during the first year after transplant	0	105
Number of expected deaths during the first year after transplant	0.67	
Estimated hazard ratio*	0.75	
95% credible interval for the hazard ratio**	[0.09, 2.09]	

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.09, 2.09], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 25% lower risk of patient death compared to an average program, but OHTC's performance could plausibly range from 91% reduced risk up to 109% increased risk.









Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020 Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

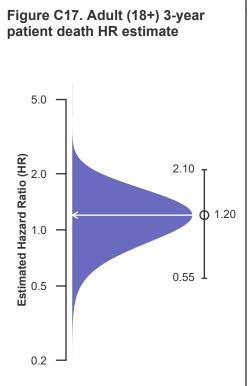
### C. Transplant Information

Table C13. Adult (18+) 3-year patient survival Single organ transplants performed between 01/01/2014 and 06/30/2016

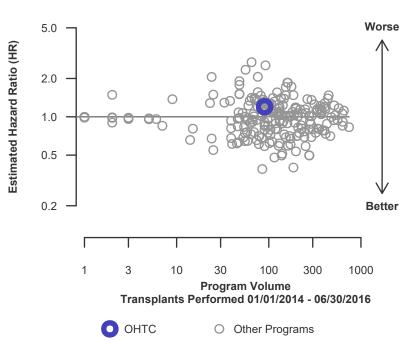
Retransplants excluded	OHTC	U.S.	
Number of transplants evaluated	90	34,940	
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	92.22%	93.49%	
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	93.76%		
Number of observed deaths during the first 3 years after transplant	7	2,276	
Number of expected deaths during the first 3 years after transplant	5.50		
Estimated hazard ratio*	1.20		
95% credible interval for the hazard ratio**	[0.55, 2.10]		

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.55, 2.10], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 20% higher risk of patient death compared to an average program, but OHTC's performance could plausibly range from 45% reduced risk up to 110% increased risk.









Center Code: OHTC Transplant Program (Organ): Kidney

Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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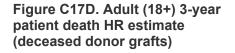
### C. Transplant Information

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

Retransplants excluded	OHTC	U.S.	
Number of transplants evaluated	43	23,108	
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	90.70%	91.86%	
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	90.86%		
Number of observed deaths during the first 3 years after transplant	4	1,880	
Number of expected deaths during the first 3 years after transplant	3.91		
Estimated hazard ratio*	1.02		
95% credible interval for the hazard ratio**	[0.37, 1.97]		

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

<sup>\*\*</sup> The 95% credible interval, [0.37, 1.97], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 2% higher risk of patient death compared to an average program, but OHTC's performance could plausibly range from 63% reduced risk up to 97% increased risk.



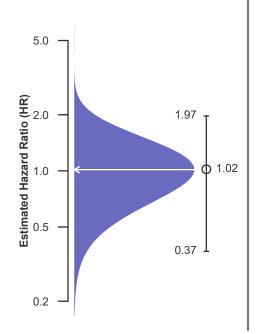
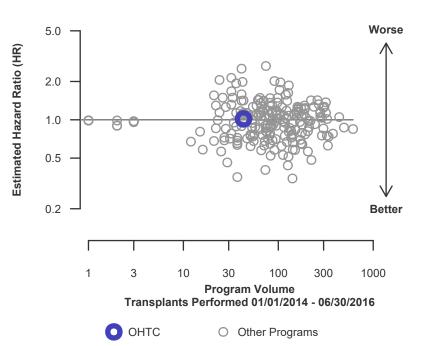


Figure C18D. Adult (18+) 3-year patient death HR program comparison (deceased donor grafts)





Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C13L. Adult (18+) 3-year patient survival (living donor graft recipients) Single organ transplants performed between 01/01/2014 and 06/30/2016

Retransplants excluded	OHTC	U.S.	
Number of transplants evaluated	47	11,832	
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	93.62%	96.65%	
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	96.42%		
Number of observed deaths during the first 3 years after transplant	3	396	
Number of expected deaths during the first 3 years after transplant	1.60		
Estimated hazard ratio*	1.39		
95% credible interval for the hazard ratio**	[0.45, 2.85]		

<sup>\*</sup> The hazard ratio provides an estimate of how The Christ Hospital (OHTC)'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 OHTC's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

Figure C17L. Adult (18+) 3-year patient death HR estimate (living donor grafts)

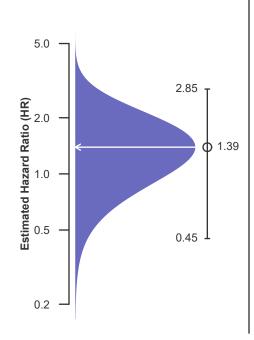
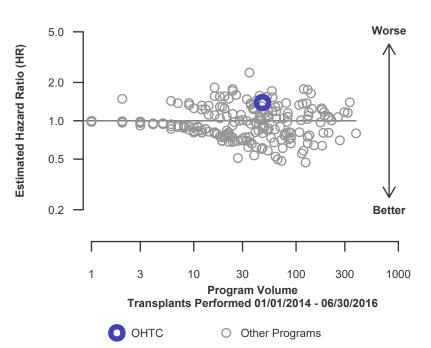


Figure C18L. Adult (18+) 3-year patient death HR program comparison (living donor grafts)



<sup>\*\*</sup> The 95% credible interval, [0.45, 2.85], indicates the location of OHTC's true hazard ratio with 95% probability. The best estimate is 39% higher risk of patient death compared to an average program, but OHTC's performance could plausibly range from 55% reduced risk up to 185% increased risk.



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### C. Transplant Information

Table C14. Pediatric (<18) 1-month patient survival Single organ transplants performed between 07/01/2016 and 12/31/2018 Retransplants excluded

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C19. Pediatric (<18) 1-month patient death HR estimate

Figure C20. Pediatric (<18) 1-month patient death HR program comparison

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### 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

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C19D. Pediatric (<18) 1-month patient death HR estimate (deceased donor grafts) Figure C20D. Pediatric (<18) 1-month patient death HR program comparison (deceased donor grafts)

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C14L. Pediatric (<18) 1-month patient survival (living donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018 Retransplants excluded

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C19L. Pediatric (<18) 1-month patient death HR estimate (living donor grafts) Figure C20L. Pediatric (<18) 1-month patient death HR program comparison (living donor grafts)

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C15. Pediatric (<18) 1-year patient survival Single organ transplants performed between 07/01/2016 and 12/31/2018 Retransplants excluded

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C21. Pediatric (<18) 1-year patient death HR estimate

Figure C22. Pediatric (<18) 1-year patient death HR program comparison

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### 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

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C21D. Pediatric (<18) 1-year patient death HR estimate (deceased donor grafts)

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

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C15L. Pediatric (<18) 1-year patient survival (living donor graft recipients) Single organ transplants performed between 07/01/2016 and 12/31/2018 Retransplants excluded

> This center did not perform any transplants relevant to this table during 07/01/2016-12/31/2018

Figure C21L. Pediatric (<18) 1-year patient death HR estimate (living donor grafts)

Figure C22L. Pediatric (<18) 1-year patient death HR program comparison (living donor grafts)

This center did not perform any transplants relevant to this figure during 07/01/2016-12/31/2018



Based on Data Available: October 31, 2019

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### C. Transplant Information

Table C16. Pediatric (<18) 3-year patient survival Single organ transplants performed between 01/01/2014 and 06/30/2016 Retransplants excluded

> This center did not perform any transplants relevant to this table during 01/01/2014-06/30/2016

Figure C23. Pediatric (<18) 3-year patient death HR estimate

Figure C24. Pediatric (<18) 3-year patient death HR program comparison

This center did not perform any transplants relevant to this figure during 01/01/2014-06/30/2016



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### 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

> This center did not perform any transplants relevant to this table during 01/01/2014-06/30/2016

Figure C23D. Pediatric (<18) 3-year patient death HR estimate (deceased donor grafts)

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

This center did not perform any transplants relevant to this figure during 01/01/2014-06/30/2016



Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

### C. Transplant Information

Table C16L. Pediatric (<18) 3-year patient survival (living donor graft recipients) Single organ transplants performed between 01/01/2014 and 06/30/2016 Retransplants excluded

> This center did not perform any transplants relevant to this table during 01/01/2014-06/30/2016

Figure C23L. Pediatric (<18) 3-year patient death HR estimate (living donor grafts)

Figure C24L. Pediatric (<18) 3-year patient death HR program comparison (living donor grafts)

This center did not perform any transplants relevant to this figure during 01/01/2014-06/30/2016



Based on Data Available: October 31, 2019

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## C. Transplant Information

Table C17. Multi-organ transplant graft survival: 07/01/2016 - 12/31/2018 Adult (18+) Transplants

No adult (18+) multi-organ transplants were performed

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

No adult (18+) multi-organ transplants were performed

Pediatric (<18) Transplants

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



Transplant Program (Organ): Kidney Release Date: January 7, 2020

Based on Data Available: October 31, 2019

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787)

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# **D. Living Donor Information**

Table D1. Living donor summary: 07/01/2016 - 06/30/2019

	This Center		United States			
Living Donor Follow-Up	07/2016- 06/2017	07/2017- 06/2018	07/2018- 12/2018	07/2016- 06/2017	07/2017- 06/2018	07/2018- 12/2018
Number of Living Donors	40	40	9	5,722	6,153	3,303
<b>6-Month Follow-Up</b> Donors due for follow-up	40	40	9	5,719	6,152	3,298
Timely clinical data	39 97.5%	39 97.5%	9 100.0%	5,100 89.2%	5,392 87.6%	2,864 86.8%
Timely lab data	38 95.0%	39 97.5%	9 100.0%	4,876 85.3%	5,210 84.7%	2,743 83.2%
<b>12-Month Follow-Up</b> Donors due for follow-up	40	40		5,719	6,150	
Timely clinical data	38 95.0%	38 95.0%		4,817 84.2%	5,087 82.7%	
Timely lab data	38 95.0%	39 97.5%		4,565 79.8%	4,811 78.2%	
<b>24-Month Follow-Up</b> Donors due for follow-up	40			5,718		
Timely clinical data	37 92.5%			4,368 76.4%		
Timely lab data	37 92.5%			4,002 70.0%		

Follow-up completion standards through 2 years post-donation were implemented in policy on February 1, 2013.