

S C I E N T I F I C R E G I S T R Y 약 TRANSPLANT Mount Sinai Medical Center Center Code: NYMS

TRANSPLANT RECIPIENTS Based on Data Available: Oct 31, 2021 SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

COVID-19 Guide

Adjustments to Transplant Program and OPO Evaluation Metrics

The Scientific Registry of Transplant Recipients (SRTR), under contract from the Health Resources and Services Administration (HRSA), is charged with evaluating the performance of the nation's transplant system through publication of semi-annual transplant program-specific reports (PSRs) and organ procurement organization (OPO)-specific reports (OSRs). These reports contain performance metrics covering various time periods. For OPOs, these metrics include eligible death conversion rates and deceased donor organ yield. For transplant programs, they include pre-transplant mortality rates (formerly called waitlist mortality rates), transplant rates, organ offer acceptance rates, patient mortality after listing, and 1-month, 1-year, and 3-year posttransplant outcomes including graft survival and patient survival.

In response to the current global pandemic, SRTR modified the evaluation metrics for transplant programs and OPOs for the reports released in January 2021 and July 2021. Theses reports made adjustments to transplant program and OPO performance metrics so that data beyond the declaration of a national public health emergency on March 13, 2020, were not included in the metrics.

Modifications for the January 2022 reporting cycle were considered at the Analytic Methods Subcommittee of the SRTR Review Committee (SRC) at its meeting on March 24, 2021, and the full SRC meeting on April 27, 2021. Both the Analytic Methods Subcommittee and the full SRC recommended an ongoing carve out of the first quarter of the pandemic (March 13, 2020 through June 12, 2020) from adjusted performance metrics, as detailed below. These recommendations were reviewed by HRSA's Division of Transplantation, which oversees SRTR. HRSA approved these recommendations, which SRTR will implement for the January 2022 reporting cycle. These changes will remain in force beyond the January 2022 reporting cycle, unless otherwise amended:

Posttransplant Outcomes (including 1-month, 1-year, and 3-year graft and patient survival): Evaluation cohorts will exclude transplants performed between March 13, 2020 and June 12, 2020, inclusive of March 13 and June 12. Patients given transplants before March 13, 2020 will have follow-up censored on March 12, 2020. Patients given transplants after June 12, 2020 will resume normal follow-up. Follow-up will not resume for patients given transplants before March 13, 2020 who are alive with function on June 12, 2020; however, this may be reconsidered as SRTR continues to explore moving to a period-prevalent methodology:

1-month & 1-year Patient and Graft Survival Evaluations: Transplants 7/1/2018-3/12/2020, follow-up through 3/12/2020. Transplants 6/13/2020-12/31/2020, follow-up through 6/30/2021.

3-year Patient and Graft Survival Evaluations: Transplants 1/1/2016-6/30/2018; follow-up through 3/12/2020.

Pre-Transplant Mortality Rate (formerly called Waitlist Mortality Rate): Evaluation cohorts will exclude March 13, 2020 through June 12, 2020, inclusive of March 13 and June 12:

Days after listing (and before transplant) between 7/1/2019-3/12/2020 and 6/13/2020-6/30/2021.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). See COVID-19 Guide for pandemic-related follow-up limits.



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Transplant Rate: Evaluation cohorts will exclude March 13, 2020 through June 12, 2020, inclusive of March 13 and June 12:

Candidates on the waitlist 7/1/2019-3/12/2020 and 6/13/2020-6/30/2021.

Overall Rate of Mortality After Listing: Evaluation cohorts will exclude March 13, 2020 through June 12, 2020, inclusive of March 13 and June 12:

Evaluation period: 7/1/2019-3/12/2020 and 6/13/2020-6/30/2021.

Offer Acceptance Rate: These evaluations are based on normal reporting cohorts.

Offers received 7/1/2020-6/30/2021.

These decisions will apply to the evaluations released in the SRTR's semi-annual program-specific reports scheduled for release on January 6, 2022. These changes have been communicated to the leadership of the Organ Procurement and Transplantation Network's (OPTN) Membership and Professional Standards Committee (MSPC). These decisions will then be re-evaluated as more information becomes available in preparation for the release scheduled for July 2022.

As with the July 2021 reports, SRTR will continue to report descriptive data beyond March 12, 2020, e.g., waitlist counts, transplant counts, recipient characteristics, donor counts, donor characteristics, etc., but will alter data for performance evaluation metrics as described above.



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

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

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

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

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

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



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confidence interval includes (crosses) 1.0, then we cannot say that this program's observed transplant rate is different from what would be expected. The observed deceased donor transplant rate at this program was 115.4 per 100 person-years. Transplant rates are also provided for adult and pediatric patients separately along with comparisons to adult and pediatric rates in the DSA, the OPTN region, and the nation. Please refer to the PSR Technical Methods documentation available at http://www.srtr.org for more detail regarding how expected rates are calculated.

The pre-transplant mortality rate (previously called the waiting list 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 this table and figures is to describe risk of death once candidates are listed rather than while they are listed, but before they are transplanted. 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.

Survival from listing is presented in Table B6 and Figures B7-B9. These data are presented in the same way as the pre-transplant mortality rate data in the previous section. The intent of this table and figures is to describe risk of death once candidates are listed rather than while they are listed, including after a transplant. As with transplant rates, mortality rates should be interpreted carefully taking into consideration the interval displayed in Figure B8. 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 B7 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 B8 and B9 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 B8 and B9 presents the percent of candidates who received a deceased donor transplant by each time point. Table B10 presents data on the time it took for different percentages of patients to be transplanted for candidates added to the list between 07/01/2015 and 12/31/2020. The time it took for 5% (the 5th percentile) of patients to receive a transplant at this program was 0.3 months. If "Not Observed" is displayed in the table, then too few candidates received transplants before 06/30/2021 to calculate a particular percentile of transplant times.

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.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). See COVID-19 Guide for pandemic-related follow-up limits.



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

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

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

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



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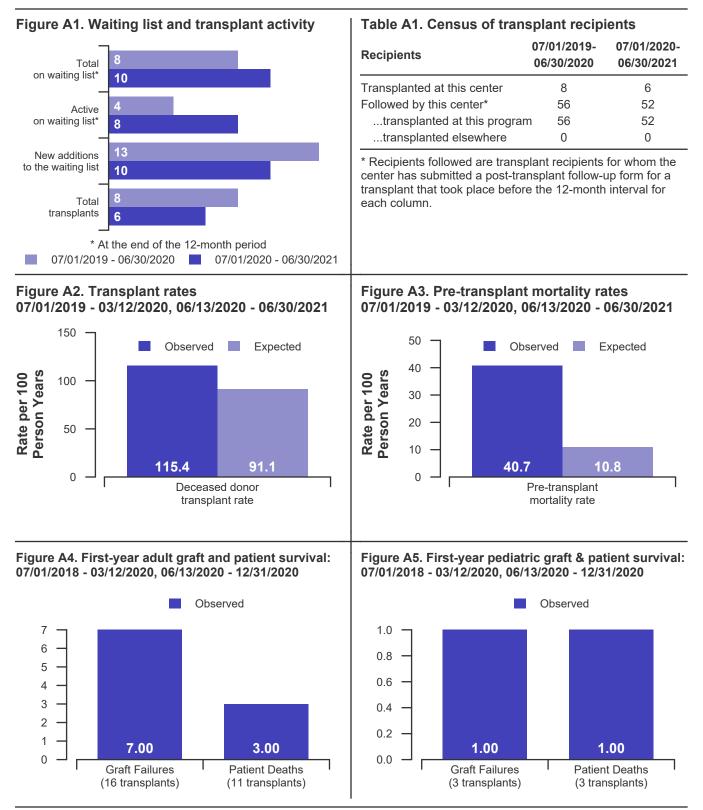
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A. Program Summary





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B. Waiting List Information

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Table B1. Waiting list activity summary: 07/01/2019 - 06/30/2021

		ts for enter	Activity for 07/01/2020 to 06/30/2021 as percent of registrants on waiting lis on 07/01/2020			
Waiting List Registrations	07/01/2019- 06/30/2020	07/01/2020- 06/30/2021	This Center (%)	OPTN Region (%)	U.S. (%)	
On waiting list at start Additions	8	8	100.0	100.0	100.0	
New listings at this center	13	10	125.0	136.4	55.2	
Removals						
Transferred to another center	0	0	0.0	0.0	0.4	
Received living donor transplant*	0	0	0.0	0.0	0.0	
Received deceased donor transplant*	8	6	75.0	100.0	37.7	
Died	4	2	25.0	27.3	4.8	
Transplanted at another center	0	0	0.0	0.0	0.4	
Deteriorated	0	0	0.0	0.0	3.2	
Recovered	1	0	0.0	0.0	15.1	
Other reasons	0	0	0.0	9.1	7.9	
On waiting list at end of period	8	10	125.0	100.0	85.7	

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



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B. Waiting List Information

Table B2. Demographic characteristics of waiting list candidatesCandidates registered on the waiting list between 07/01/2020 and 06/30/2021

Demographic Characteristic		ting List Regi 020 to 06/30/2		All Waiting List Registrations on 06/30/2021 (%)			
	This Center (N=10)	OPTN Region (N=15)	U.S. (N=139)	This Center (N=10)	OPTN Region (N=11)	U.S. (N=216)	
All (%)	100.0	100.0	100.0	100.0	100.0	100.0	
Ethnicity/Race (%)*							
White	30.0	33.3	55.4	50.0	45.5	54.6	
African-American	30.0	20.0	25.2	10.0	9.1	21.3	
Hispanic/Latino	10.0	26.7	14.4	10.0	18.2	17.6	
Asian	30.0	20.0	4.3	30.0	27.3	5.6	
Other	0.0	0.0	0.7	0.0	0.0	0.9	
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	
Age (%)							
<2 years	0.0	0.0	7.9	10.0	9.1	19.4	
2-11 years	10.0	26.7	21.6	0.0	0.0	27.8	
12-17 years	0.0	0.0	6.5	0.0	0.0	7.4	
18-34 years	60.0	46.7	23.0	50.0	54.5	19.4	
35-49 years	10.0	13.3	18.0	10.0	9.1	13.9	
50-64 years	20.0	13.3	18.7	30.0	27.3	10.6	
65-69 years	0.0	0.0	3.6	0.0	0.0	0.9	
70+ years	0.0	0.0	0.7	0.0	0.0	0.5	
Gender (%)							
Male	60.0	40.0	54.0	60.0	54.5	56.9	
Female	40.0	60.0	46.0	40.0	45.5	43.1	

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



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B. Waiting List Information

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Table B3. Medical characteristics of waiting list candidatesCandidates registered on the waiting list between 07/01/2020 and 06/30/2021

Medical Characteristic		ting List Regis 020 to 06/30/20		All Waiting List Registrations on 06/30/2021 (%)			
	This Center (N=10)	OPTN Region (N=15)	U.S. (N=139)	This Center (N=10)	OPTN Region (N=11)	U.S. (N=216)	
All (%)	100.0	100.0	100.0	100.0	100.0	100.0	
Blood Type (%)							
0	10.0	20.0	42.4	30.0	27.3	46.8	
A	60.0	53.3	39.6	50.0	45.5	37.5	
В	30.0	26.7	14.4	20.0	27.3	12.5	
AB	0.0	0.0	3.6	0.0	0.0	3.2	
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	
Previous Transplant (%)							
Yes	20.0	20.0	18.0	20.0	18.2	15.3	
Νο	80.0	80.0	82.0	80.0	81.8	84.7	
Unknown	0.0	0.0	0.0	0.0	0.0	0.0	
Primary Disease (%)*							
Short Gut Syndrome	40.0	53.3	56.1	40.0	36.4	61.1	
Functional Bowel Problem	0.0	0.0	13.7	0.0	0.0	17.6	
Other	60.0	46.7	28.1	60.0	63.6	20.4	
Missing*	0.0	0.0	2.2	0.0	0.0	0.9	

* 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.



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B. Waiting List Information

Table B4D. Deceased donor	transplant rates: 07/01/2019	- 03/12/2020 06/13	/2020 _ 06/30/2021
	transplant rates. 01/01/2015	- 00/12/2020, 00/10	

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	8	10	10	230
Person Years**	12.1	15.9	15.9	399.1
Removals for Transplant	14	19	19	161
Adult (18+) Candidates				
Count on waiting list at start*	7	7	7	71
Person Years**	9.9	10.1	10.1	146.7
Removals for transpant	11	12	12	97
Pediatric (<18) Candidates				
Count on waiting list at start*	1	3	3	159
Person Years**	2.2	5.8	5.8	252.4
Removals for transplant	3	7	7	64

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

** Person years are calculated as days (converted to fractional years). The number of days from July 1 or from the date of first wait listing until death, transplant, removal from the waiting list or June 30. Person years excludes time on the waiting list between March 13, 2020 and June 12, 2020.

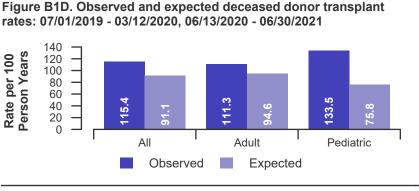


Figure B2D. Deceased donor transplant rate ratio estimate

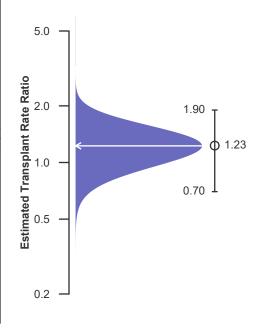
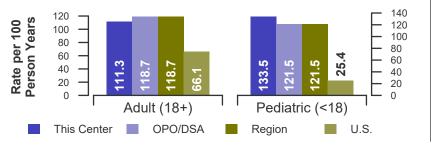


Figure B3D. Observed adult (18+) and pediatric (<18) deceased donor transplant rates: 07/01/2019 - 03/12/2020, 06/13/2020 - 06/30/2021





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Table B5. Pre-transplant mortality rates: 07/01/2019 - 03/12/2020, 06/13/2020 - 06/30/2021

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	8	10	10	230
Person Years**	12.3	16.4	16.4	429.2
Number of deaths	5	6	6	26
Adult (18+) Candidates				
Count on waiting list at start*	7	7	7	71
Person Years**	10.0	10.3	10.3	156.9
Number of deaths	4	4	4	20
Pediatric (<18) Candidates				
Count on waiting list at start*	1	3	3	159
Person Years**	2.2	6.1	6.1	272.4
Number of deaths	1	2	2	6

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

** Person years are calculated as days (converted to fractional years). The number of days from July 1 or from the date of first wait listing until death, transplant, 60 days after recovery, transfer or June 30. Person years excludes time on the waiting list between March 13, 2020 and June 12, 2020.

Figure B4. Observed and expected pre-transplant mortality rates: 07/01/2019 - 03/12/2020, 06/13/2020 - 06/30/2021

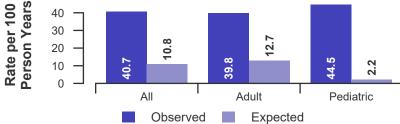


Figure B5. Pre-transplant mortality rate ratio estimate

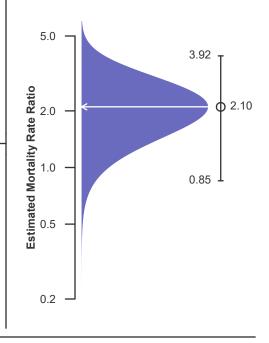
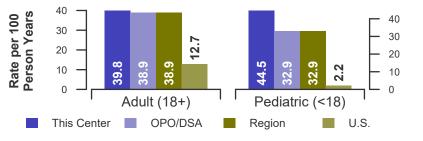


Figure B6. Observed adult (18+) and pediatric (<18) pre-transplant mortality rates: 07/01/2019 - 03/12/2020, 06/13/2020 - 06/30/2021





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B. Waiting List Information

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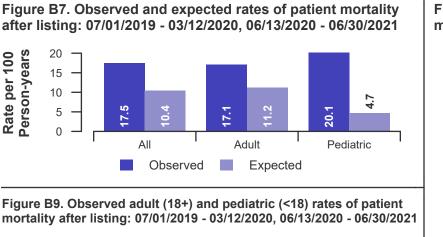
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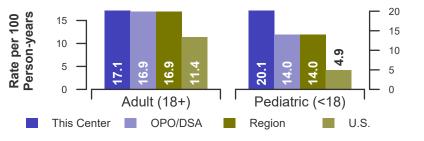
Table B6. Rates of	natient mortality	after listing.	07/01/2019 -	03/12/2020	06/13/2020 - 0	06/30/2021
	pationt mortanty	antor nothing:				

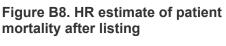
Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Patients				
Count at risk during the evaluation period	68	86	86	841
Person-years*	74.3	93.7	93.7	941.6
Number of Deaths	13	15	15	80
Adult (18+) Patients				
Count at risk during the evaluation period	59	61	61	479
Person-years*	64.3	65.2	65.2	517.3
Number of Deaths	11	11	11	59
Pediatric (<18) Patients				
Count at risk during the evaluation period	9	25	25	362
Person-years*	10.0	28.5	28.5	424.3
Number of Deaths	2	4	4	21

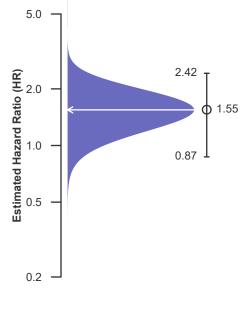
* Person-years are calculated as days (converted to fractional years). The number of days from 07/01/2019, or from the date of first wait listing until death, reaching 5 years after listing or June 30, 2021. Person years excludes time on the waiting list between March 13, 2020 and June 12, 2020.

** Patient mortality after listing describes the relative survival experience of patients after listing. It depends on many factors, some of which are outside of the control of the transplant program. For example, availability of organs may not be the same in every part of the country.











SCIENTIFIC REGISTRY 약

Center Code: NYMS Transplant Program (Organ): Intestine Release Date: January 6, 2022 RECIPIENTS Based on Data Available: Oct 31, 2021 SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

B. Waiting List Information

TRANSPLANT

Table B7. Waiting list candidate status after listing Candidates registered on waiting list between 01/01/2019 and 12/31/2019

Waiting list status (survival status)		Center (I s Since L	,	U.S. (N=103) Months Since Listing		
	6	12	18	6	12	18
Alive on waiting list (%)	37.5	0.0	0.0	48.5	32.0	24.3
Died on the waiting list without transplant (%)	25.0	25.0	25.0	7.8	8.7	8.7
Removed without transplant (%):						
Condition worsened (status unknown)	0.0	0.0	0.0	1.9	1.9	3.9
Condition improved (status unknown)	0.0	0.0	0.0	1.9	1.9	1.9
Refused transplant (status unknown)	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	1.0	2.9	2.9
Transplant (living or deceased donor) (%):						
Functioning (alive)	37.5	50.0	50.0	31.1	38.8	28.2
Failed-Retransplanted (alive)	0.0	0.0	0.0	1.0	1.0	1.0
Failed-alive not retransplanted	0.0	0.0	0.0	1.0	0.0	0.0
Died	0.0	0.0	0.0	4.9	8.7	11.7
Status Yet Unknown*	0.0	25.0	25.0	1.0	3.9	16.5
Lost or Transferred (status unknown) (%)	0.0	0.0	0.0	0.0	0.0	1.0
TOTAL (%)	100.0	100.0	100.0	100.0	100.0	100.0
Total % known died on waiting list or after transplant	25.0	25.0	25.0	12.6	17.5	20.4
Total % known died or removed as unstable	25.0	25.0	25.0	14.6	19.4	24.3
Total % removed for transplant	37.5	75.0	75.0	38.8	52.4	57.3
Total % with known functioning transplant (alive)	37.5	50.0	50.0	31.1	38.8	28.2

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



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B. Waiting List Information

TRANSPLANT

Table B8. Percent of candidates with deceased donor transplants: demographic characteristics Candidates registered on the waiting list between 07/01/2015 and 06/30/2018

Characteristic			ercent t his Cent	-	nted at ti	me pe		nce listi ited Sta	-	
onaracteristic	Ν				3 years	Ν				3 years
All	45	13.3	71.1	77.8	80.0	545	16.1	57.8	63.5	65.5
Ethnicity/Race*										
White	26	7.7	65.4	69.2	73.1	346	16.5	59.2	65.6	67.1
African-American	11	18.2	81.8	100.0	100.0	97	12.4	59.8	62.9	64.9
Hispanic/Latino	6	16.7	66.7	66.7	66.7	80	18.8	52.5	58.8	62.5
Asian	2	50.0	100.0	100.0	100.0	16	25.0	50.0	50.0	50.0
Other	0					6	0.0	33.3	50.0	66.7
Unknown	0					0				
Age										
<2 years	0					84	11.9	41.7	46.4	48.8
2-11 years	4	25.0	100.0	100.0	100.0	120	10.8	55.8	62.5	62.5
12-17 years	0					27	7.4	44.4	63.0	70.4
18-34 years	16	6.2	56.2	68.8	75.0	112	17.9	62.5	67.9	71.4
35-49 years	14	21.4	71.4	71.4	71.4	105	21.0	67.6	69.5	71.4
50-64 years	9	11.1	88.9	100.0	100.0	89	22.5	62.9	69.7	70.8
65-69 years	2	0.0	50.0	50.0	50.0	8	12.5	50.0	50.0	50.0
70+ years	0					0				
Gender										
Male	27	14.8	74.1	77.8	77.8	292	15.4	60.6	66.1	67.5
Female	18	11.1	66.7	77.8	83.3	253	17.0	54.5	60.5	63.2

* 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 RECIPIENTS Based on Data Available: Oct 31, 2021 SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

B. Waiting List Information

 Table B9. Percent of candidates with deceased donor transplants: medical characteristics

 Candidates registered on the waiting list between 07/01/2015 and 06/30/2018

Characteristic			ercent t nis Cent	-	nted at ti	me pe		nce listii ited Sta	•	
	Ν	30 day	1 year	2 years	3 years	Ν	30 day	1 year	2 years	3 years
All	45	13.3	71.1	77.8	80.0	545	16.1	57.8	63.5	65.5
Blood Type										
0	26	7.7	61.5	73.1	73.1	259	17.8	57.5	65.6	68.0
A	17	23.5	82.4	82.4	88.2	198	14.1	59.6	62.1	63.6
В	1	0.0	100.0	100.0	100.0	66	12.1	51.5	57.6	60.6
AB	1	0.0	100.0	100.0	100.0	22	27.3	63.6	68.2	68.2
Previous Transplant										
Yes	9	22.2	66.7	88.9	100.0	90	14.4	64.4	73.3	78.9
No	36	11.1	72.2	75.0	75.0	455	16.5	56.5	61.5	62.9
Primary Disease*										
Short Gut Syndrome	23	17.4	87.0	91.3	91.3	329	16.4	62.0	67.2	69.0
Functional Bowel Problem	1	0.0	100.0	100.0	100.0	63	7.9	44.4	57.1	60.3
Other	20	10.0	55.0	65.0	70.0	152	19.1	54.6	58.6	60.5
Missing*	1	0.0	0.0	0.0	0.0	1	0.0	0.0	0.0	0.0

* 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.



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B. Waiting List Information

Table B10. Time to transplant for waiting list candidates*Candidates registered on the waiting list between 07/01/2015 and 12/31/2020

	Months to Transplant**			
Percentile	Center	OPO/DSA	Region	U.S.
5th	0.3	0.3	0.3	0.3
10th	1.2	0.6	0.6	0.5
25th	2.5	2.1	2.1	1.9
50th (median time to transplant)	5.8	4.8	4.8	7.6
75th	20.0	18.5	18.5	Not Observed

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

** Censored on 06/30/2021. Calculated as the months after listing, during which the corresponding percent of all patients initially listed had received a transplant.



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C. Transplant Information

TRANSPLANT

Table C1D. Deceased donor transplant recipient demographic characteristics Patients transplanted between 07/01/2020 and 06/30/2021

	Percentage in each category		
Characteristic	Center (N=6)	Region (N=11)	U.S. (N=95)
Ethnicity/Race (%)*			
White	50.0	36.4	55.8
African-American	33.3	36.4	23.2
Hispanic/Latino	16.7	27.3	16.8
Asian	0.0	0.0	2.1
Other	0.0	0.0	2.1
Unknown	0.0	0.0	0.0
Age (%)			
<2 years	0.0	0.0	5.3
2-11 years	16.7	36.4	26.3
12-17	0.0	9.1	9.5
18-34	50.0	27.3	17.9
35-49 years	16.7	18.2	18.9
50-64 years	16.7	9.1	17.9
65-69 years	0.0	0.0	4.2
70+ years	0.0	0.0	0.0
Gender (%)			
Male	66.7	45.5	47.4
Female	33.3	54.5	52.6

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



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C. Transplant Information

Table C2D. Deceased donor transplant recipient medical characteristicsPatients transplanted between 07/01/2020 and 06/30/2021

	Percentage in each category		
Characteristic	Center (N=6)	Region (N=11)	U.S. (N=95)
Blood Type (%)			
0	16.7	18.2	49.5
A	33.3	45.5	32.6
В	33.3	27.3	14.7
AB	16.7	9.1	3.2
Previous Transplant (%)			
Yes	33.3	36.4	17.9
No	66.7	63.6	82.1
Body Mass Index (%)			
0-20	33.3	45.5	44.2
21-25	66.7	45.5	42.1
26-30	0.0	9.1	9.5
31-35	0.0	0.0	0.0
36-40	0.0	0.0	0.0
41+	0.0	0.0	0.0
Unknown	0.0	0.0	4.2
Primary Disease (%)*			
Short Gut Syndrome	66.7	72.7	66.3
Functional Bowel Problem	0.0	0.0	12.6
Other	33.3	27.3	18.9
Missing*	0.0	0.0	2.1
Recipient Medical Condition at Transplant (%)			
Not Hospitalized	83.3	72.7	73.7
Hospitalized	16.7	18.2	15.8
ICU	0.0	9.1	6.3
Unknown	0.0	0.0	4.2

* 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.



SCIENTIFIC REGISTRY OF

REGISTRY OFCenter Code: NYMSTRANSPLANTTransplant Program (Organ): Intestine
Release Date: January 6, 2022RECIPIENTSBased on Data Available: Oct 31, 2021

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C. Transplant Information

Table C3D. Deceased donor characteristicsTransplants performed between 07/01/2020 and 06/30/2021

	Percentage in each category		
Donor Characteristic	Center (N=6)	Region (N=11)	U.S. (N=95)
Cause of Death (%)			
Deceased: Stroke	50.0	27.3	12.6
Deceased: MVA	0.0	9.1	14.7
Deceased: Other	50.0	63.6	72.6
Ethnicity/Race (%)*			
White	16.7	45.5	57.9
African-American	33.3	27.3	23.2
Hispanic/Latino	50.0	27.3	16.8
Asian	0.0	0.0	2.1
Other	0.0	0.0	0.0
Not Reported	0.0	0.0	0.0
Age (%)			
<2 years	0.0	9.1	15.8
2-11 years	50.0	54.5	34.7
12-17	33.3	18.2	13.7
18-34	16.7	18.2	28.4
35-49 years	0.0	0.0	6.3
50-64 years	0.0	0.0	1.1
65-69 years	0.0	0.0	0.0
70+ years	0.0	0.0	0.0
Gender (%)			
Male	66.7	45.5	52.6
Female	33.3	54.5	47.4
Blood Type (%)			
0	16.7	27.3	61.1
A	33.3	36.4	28.4
В	50.0	36.4	10.5
AB	0.0	0.0	0.0
Unknown	0.0	0.0	0.0

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



SCIENTIFIC REGISTRY OF TRANSPLANT

RECIPIENTS

Center Code: NYMS Transplant Program (Organ): Intestine Release Date: January 6, 2022 Based on Data Available: Oct 31, 2021 SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

C. Transplant Information

Table C4D. Deceased donor transplant characteristicsTransplants performed between 07/01/2020 and 06/30/2021

	Percer	Percentage in each category		
Transplant Characteristic	Center (N=6)	Region (N=11)	U.S. (N=95)	
Total Ischemic Time (Hours): Local (%)				
Deceased: 0-5 hr	0.0	0.0	58.8	
Deceased: 6-10 hr	100.0	100.0	41.2	
Deceased: 11-15 hr	0.0	0.0	0.0	
Deceased: 16-20 hr	0.0	0.0	0.0	
Deceased: 21+ hr	0.0	0.0	0.0	
Not Reported	0.0	0.0	0.0	
Total Ischemic Time (Hours): Shared (%)				
Deceased: 0-5 hr	0.0	30.0	32.1	
Deceased: 6-10 hr	100.0	70.0	61.5	
Deceased: 11-15 hr	0.0	0.0	0.0	
Deceased: 16-20 hr	0.0	0.0	0.0	
Deceased: 21+ hr	0.0	0.0	0.0	
Not Reported	0.0	0.0	6.4	
Procedure Type (%)				
Single organ	50.0	36.4	45.3	
Multi organ	50.0	63.6	54.7	
Donor Location (%)				
Local Donation Service Area (DSA)	16.7	9.1	17.9	
Another Donation Service Area (DSA)	83.3	90.9	82.1	
Median Time in Hospital After Transplant	56.5 Days	47.0 Days	38.5 Days	



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C. Transplant Information

Table C5D. Adult (18+) 1-month survival with a functioning deceased donor graftIntestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only)Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020Deaths and retransplants are considered graft failuresFollow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	16	111
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	93.75%	88.17%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	88.32%	
Number of observed graft failures (including deaths) during the first month after transplant	1	13
Number of expected graft failures (including deaths) during the first month after transplant	1.96	
Estimated hazard ratio*	0.76	
95% credible interval for the hazard ratio**	[0.16, 1.83]	

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

** The 95% credible interval, [0.16, 1.83], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 24% lower risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 84% reduced risk up to 83% increased risk.

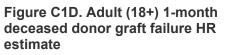
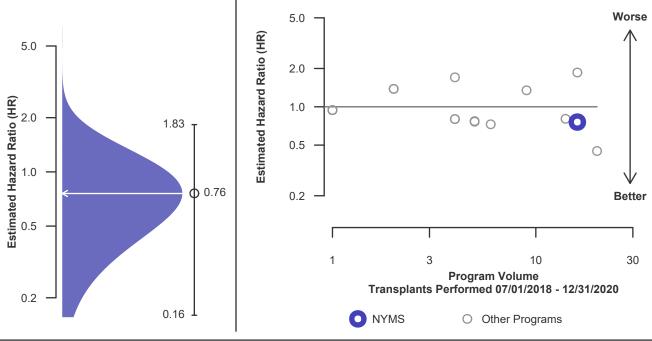


Figure C2D. Adult (18+) 1-month deceased donor graft failure HR program comparison





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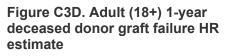
C. Transplant Information

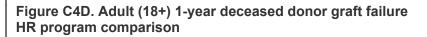
Table C6D. Adult (18+) 1-year survival with a functioning deceased donor graft Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only) Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020 Deaths and retransplants are considered graft failures Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

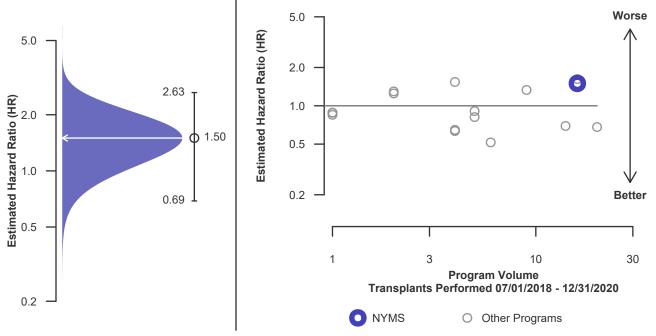
	NYMS	U.S.
Number of transplants evaluated	16	111
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	56.25%	69.83%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	70.12%	
Number of observed graft failures (including deaths) during the first year after transplant	7	28
Number of expected graft failures (including deaths) during the first year after transplant	4.00	
Estimated hazard ratio*	1.50	
95% credible interval for the hazard ratio**	[0.69, 2.63]	

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

** The 95% credible interval, [0.69, 2.63], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 50% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 31% reduced risk up to 163% increased risk.









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C. Transplant Information

Table C7D. Adult (18+) 3-year survival with a functioning deceased donor graft Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only) Transplants performed between 01/01/2016 and 06/30/2018 Deaths and retransplants are considered graft failures Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	22	168
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	54.55%	55.43%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	55.59%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	10	73
Number of expected graft failures (including deaths) during the first 3 years after transplant	9.25	
Estimated hazard ratio*	1.07	
95% credible interval for the hazard ratio**	[0.55, 1.75]	

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

** The 95% credible interval, [0.55, 1.75], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 7% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 45% reduced risk up to 75% increased risk.

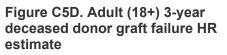
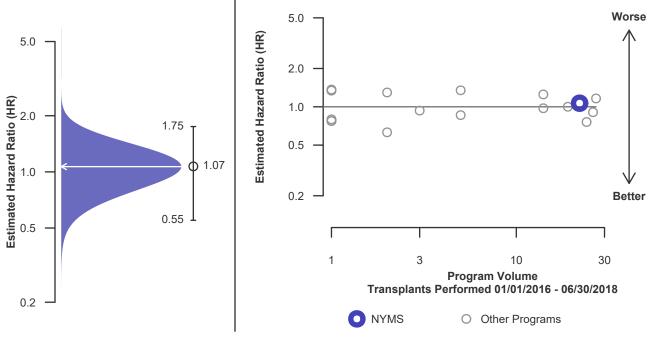


Figure C6D. Adult (18+) 3-year deceased donor graft failure HR program comparison





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C. Transplant Information

Table C8D. Pediatric (<18) 1-month survival with a functioning deceased donor graft</th>

Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only)

Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020

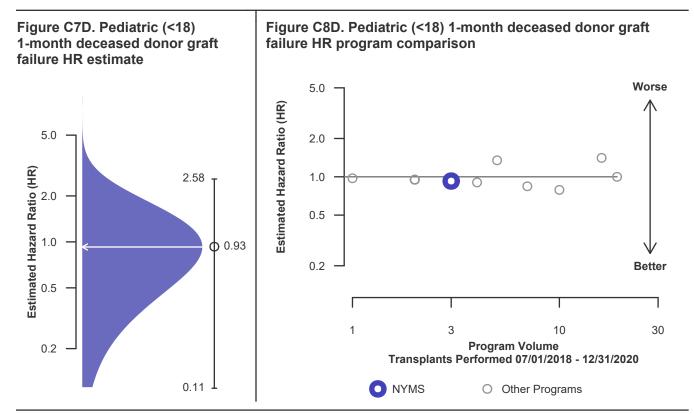
Deaths and retransplants are considered graft failures

Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	3	76
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	94.74%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	94.79%	
Number of observed graft failures (including deaths) during the first month after transplant	0	4
Number of expected graft failures (including deaths) during the first month after transplant	0.16	
Estimated hazard ratio*	0.93	
95% credible interval for the hazard ratio**	[0.11, 2.58]	

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

** The 95% credible interval, [0.11, 2.58], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 7% lower risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 89% reduced risk up to 158% increased risk.





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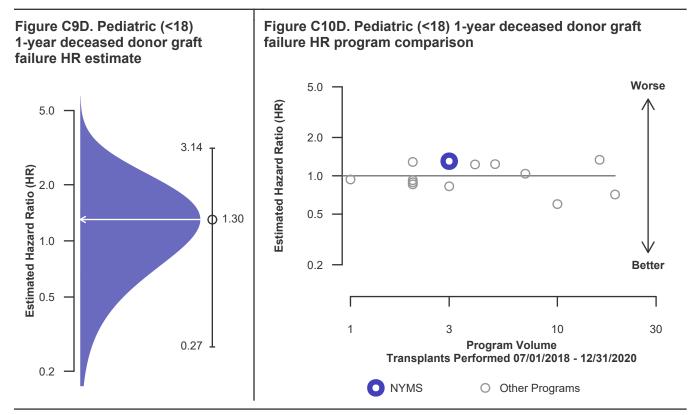
C. Transplant Information

Table C9D. Pediatric (<18) 1-year survival with a functioning deceased donor graft</th>Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only)Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020Deaths and retransplants are considered graft failuresFollow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	3	76
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	50.00%	84.38%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	84.55%	
Number of observed graft failures (including deaths) during the first year after transplant	1	9
Number of expected graft failures (including deaths) during the first year after transplant	0.30	
Estimated hazard ratio*	1.30	
95% credible interval for the hazard ratio**	[0.27, 3.14]	

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

** The 95% credible interval, [0.27, 3.14], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 30% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 73% reduced risk up to 214% increased risk.





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C. Transplant Information

Table C10D. Pediatric (<18) 3-year survival with a functioning deceased donor graft</th>

Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only) Transplants performed between 01/01/2016 and 06/30/2018

Deaths and retransplants are considered graft failures

Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	5	119
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	60.00%	68.68%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	68.83%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	2	36
Number of expected graft failures (including deaths) during the first 3 years after transplant	1.29	
Estimated hazard ratio*	1.21	
95% credible interval for the hazard ratio**	[0.33, 2.66]	

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

** The 95% credible interval, [0.33, 2.66], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 21% higher risk of graft failure compared to an average program, but NYMS's performance could plausibly range from 67% reduced risk up to 166% increased risk.

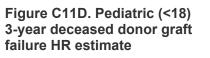
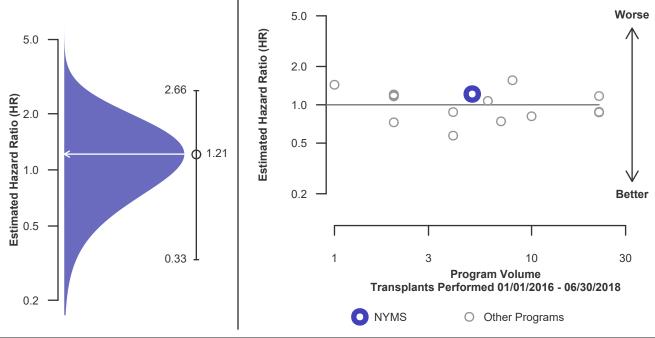


Figure C12D. Pediatric (<18) 3-year deceased donor graft failure HR program comparison





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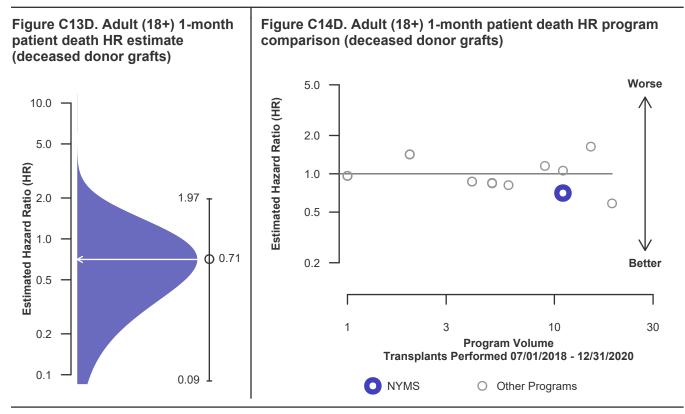
C. Transplant Information

Table C11D. Adult (18+) 1-month patient survival (deceased donor graft recipients) Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only) Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020 Retransplants excluded Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	11	96
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	92.63%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	92.70%	
Number of observed deaths during the first month after transplant	0	7
Number of expected deaths during the first month after transplant	0.83	
Estimated hazard ratio*	0.71	
95% credible interval for the hazard ratio**	[0.09, 1.97]	

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

** The 95% credible interval, [0.09, 1.97], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 29% lower risk of patient death compared to an average program, but NYMS's performance could plausibly range from 91% reduced risk up to 97% increased risk.





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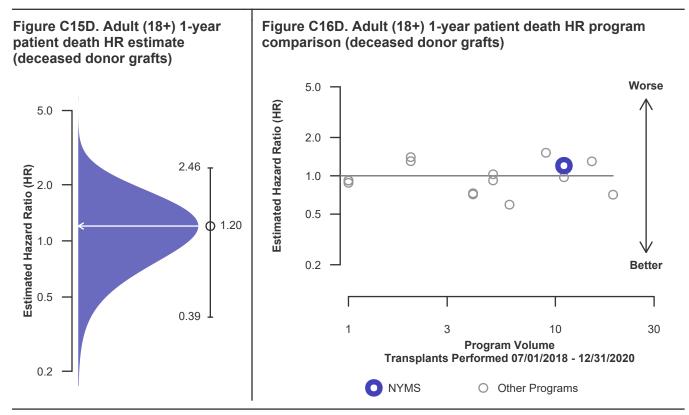
C. Transplant Information

Table C12D. Adult (18+) 1-year patient survival (deceased donor graft recipients) Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only) Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020 Retransplants excluded Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

NYMS	U.S.
11	96
72.73%	75.92%
76.15%	
3	18
2.16	
1.20	
[0.39, 2.46]	
	11 72.73% 76.15% 3 2.16 1.20

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

** The 95% credible interval, [0.39, 2.46], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 20% higher risk of patient death compared to an average program, but NYMS's performance could plausibly range from 61% reduced risk up to 146% increased risk.





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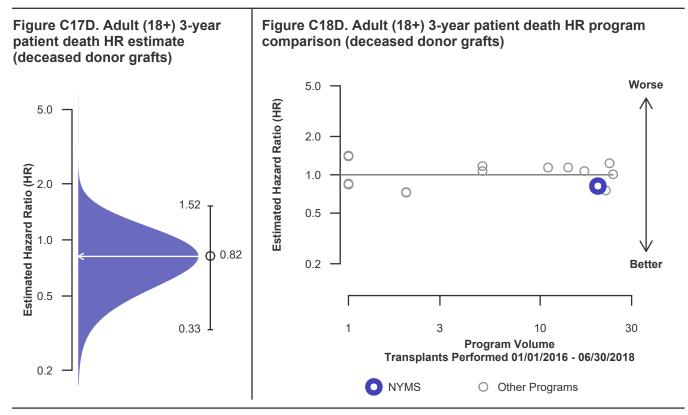
C. Transplant Information

Table C13D. Adult (18+) 3-year patient survival (deceased donor graft recipients)Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only)Transplants performed between 01/01/2016 and 06/30/2018Retransplants excludedFollow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	20	151
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	75.00%	68.25%
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	68.37%	
Number of observed deaths during the first 3 years after transplant	5	47
Number of expected deaths during the first 3 years after transplant	6.58	
Estimated hazard ratio*	0.82	
95% credible interval for the hazard ratio**	[0.33, 1.52]	

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

** The 95% credible interval, [0.33, 1.52], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 18% lower risk of patient death compared to an average program, but NYMS's performance could plausibly range from 67% reduced risk up to 52% increased risk.





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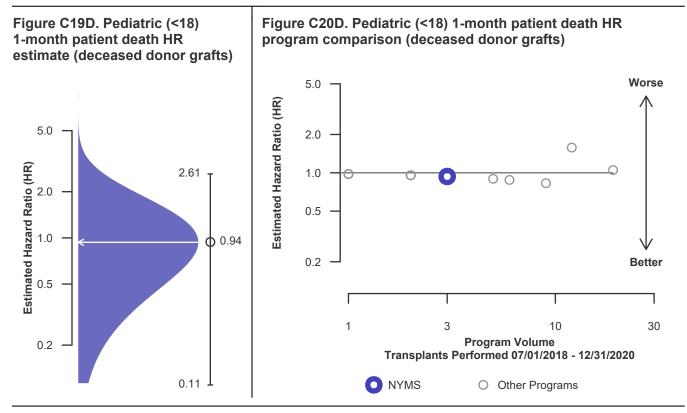
C. Transplant Information

Table C14D. Pediatric (<18) 1-month patient survival (deceased donor graft recipients) Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only) Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020 Retransplants excluded Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	3	66
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	95.45%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	95.51%	
Number of observed deaths during the first month after transplant	0	3
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]	

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

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





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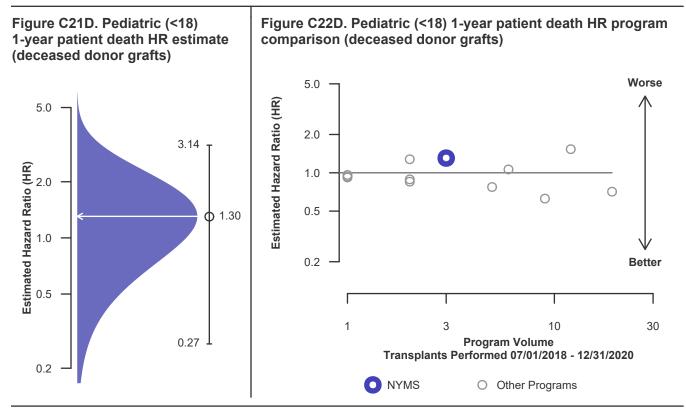
C. Transplant Information

Table C15D. Pediatric (<18) 1-year patient survival (deceased donor graft recipients) Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only) Transplants performed between 07/01/2018 and 03/12/2020, and 06/13/2020 and 12/31/2020 Retransplants excluded Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
		0.0.
Number of transplants evaluated	3	66
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	50.00%	83.79%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	83.99%	
Number of observed deaths during the first year after transplant	1	8
Number of expected deaths during the first year after transplant	0.30	
Estimated hazard ratio*	1.30	
95% credible interval for the hazard ratio**	[0.27, 3.14]	

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

** The 95% credible interval, [0.27, 3.14], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 30% higher risk of patient death compared to an average program, but NYMS's performance could plausibly range from 73% reduced risk up to 214% increased risk.





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C. Transplant Information

Table C16D. Pediatric (<18) 3-year patient survival (deceased donor graft recipients)</th>

Intestine (Single-Organ and Intestine with Liver and/or Pancreas Transplants Only)

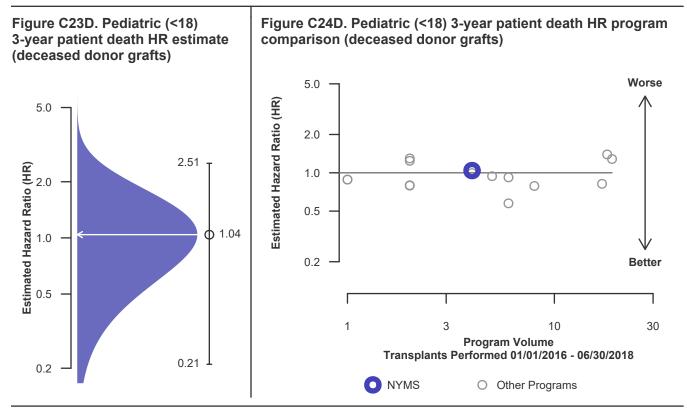
Retransplants excluded

Follow-up ends on 3/12/2020 for recipients transplanted prior to 3/13/2020

	NYMS	U.S.
Number of transplants evaluated	4	97
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	75.00%	76.84%
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	76.97%	
Number of observed deaths during the first 3 years after transplant	1	22
Number of expected deaths during the first 3 years after transplant	0.88	
Estimated hazard ratio*	1.04	
95% credible interval for the hazard ratio**	[0.21, 2.51]	

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

** The 95% credible interval, [0.21, 2.51], indicates the location of NYMS's true hazard ratio with 95% probability. The best estimate is 4% higher risk of patient death compared to an average program, but NYMS's performance could plausibly range from 79% reduced risk up to 151% increased risk.



Transplants performed between 01/01/2016 and 06/30/2018



RECIPIENTS

Center Code: NYMS Transplant Program (Organ): Intestine Release Date: January 6, 2022 Based on Data Available: Oct 31, 2021 SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 1.877.970.SRTR (7787) http://www.srtr.org

C. Transplant Information

Table C17. Multi-organ transplant graft survival: 07/01/2018 - 12/31/2020

Adult (18+) Transplants	First-Year Outcomes					
Transplant Type	ant Type Transplants Intestine NYMS-TX1 USA NYMS-TX1 USA		ilures	Estimated Graft So NYMS-TX1	urvival	
Kidney-Intestine	2	7	0	0	100.0%	100.0%
Kidney-Pancreas-Intestine	1	1	1	1	0.0%	0.0%
Pancreas-Intestine	2	14	1	5	50.0%	61.2%
Pancreas-Liver-Intestine	3	42	3	17	0.0%	58.4%
Pediatric (<18) Transplants	First-Year Outcomes					

Transplant Type	Transp Perfor NYMS-TX1	med	Intest Graft Fa NYMS-TX1	ilures	Estimated Graft Su NYMS-TX1	ırvival
Kidney-Pancreas-Liver-Intestine Pancreas-Liver-Intestine	1 1	7 52	0 1	3 8	100.0% 0.0%	47.6% 82.9%

Table C18. Multi-organ transplant patient survival: 07/01/2018 - 12/31/2020

Adult (18+) Transplants	First-Year Outcomes					
Transplants Transplant Type Performed Patient Deaths				Estim Patient		
	NYMS-TX1	USA	NYMS-TX1	USA	NYMS-TX	I USA
Kidney-Intestine	2	7	0	0	100.0%	100.0%
Kidney-Pancreas-Intestine	1	1	1	1	0.0%	0.0%
Pancreas-Intestine	2	14	1	4	50.0%	69.8%
Pancreas-Liver-Intestine	3	42	3	16	0.0%	60.8%

Pediatric (<18) Transplants

Transplant Type	Transp Perfor NYMS-TX1	med	Patient D NYMS-TX1		Estima Patient S NYMS-TX1	urvival
Kidney-Pancreas-Liver-Intestine	1	7	0	3	100.0%	47.6%
Pancreas-Liver-Intestine	1	52	1	8	0.0%	82.9%

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

First-Year Outcomes