

REGISTRY OFCenter Code: FLUFSITRANSPLANTTransplant Program (Organ): LungFRelease Date: July 6, 2021 (Corrected July 16, 2021)RECIPIENTSBased on Data Available: April 30, 2021

Correction Notice

The lung risk-adjustment models for patient mortality after listing were updated on July 16, 2021, following initial release on July 6, 2021. Previously, the models included candidate pCO2 captured on the transplant candidate registration (TCR) form. This variable was removed in 2015 from the TCR form, but was kept in the risk-adjustment models resulting in a significant amount of missing values. As a result, the expected number of events for most lung patients was unrealistically low due to the least beneficial value adjustment for missing data.

Now, the lung risk-adjustment models no longer include the pCO2 variable captured on the TCR form, resulting in a better evaluation of patient mortality after listing for lung transplant candidates. This correction affects Figures B7 and B8.



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Transplant Program (Organ): Lung F Release Date: July 6, 2021 (Corrected July 16, 2021) Based on Data Available: April 30, 2021

COVID-19 Guide

TRANSPLANT

RECIPIENTS

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. The reports released in January 2021 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.

The SRTR Review Committee (SRC) reviewed the metrics at its meetings on January 20, 2021, and February 9, 2021, with the goal of determining whether continued adjustments are necessary, or if the SRTR should resume regular reporting of transplant program and OPO performance metrics. The committee reviewed data on how the pandemic has affected the nation's transplant system, and the extent to which the effects varied geographically and temporally. The committee made the following recommendations to SRTR. These recommendations were reviewed by the Health Resources and Services Administration's (HRSA's) Division of Transplantation, which oversees the SRTR. HRSA approved of these recommendations which the SRTR will implement for the July 2021 reporting cycle:

Posttransplant Outcomes (including 1-month, 1-year, and 3-year graft and patient survival): Evaluations cohorts will continue to exclude transplants and follow-up time beyond March 12, 2020.

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

3-year Patient and Graft Survival Evaluations: Transplants 1/1/2015-12/31/2017; follow-up through 3/12/2020.

Pre-Transplant Mortality Rate (formerly called Waitlist Mortality Rate): Evaluation cohorts will be modified on an organ-specific basis:

Kidney and Lung: Candidates on the waitlist 1/1/2019-3/12/2020.

Liver, Heart, Pancreas, and Intestine: Candidates on the waitlist 1/1/2019-12/31/2020.

Transplant Rate: The first quarter following declaration of a national emergency will be excluded from the transplant rate evaluations for all organ types.

Candidates on the waitlist 1/1/2019-3/12/2020 and 6/13/2020-12/31/2020.



COVID-19 Guide

Overall Rate of Mortality After Listing: Patient follow-up will continue to be truncated on 3/12/2020:

Evaluation period: 1/1/2019-3/12/2020.

Offer Acceptance Rate: These evaluations will return to normal reporting cohorts.

Offers received 1/1/2020-12/31/2020.

These decisions will apply to the evaluations released in the SRTR's semi-annual program-specific reports scheduled for release on July 6, 2021. These changes have been communicated to the leadership of the Organ Procurement and Transplantation Network's 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 January 2022.

As with the January 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.



REGISTRY OFCenter Code: FLUFSITRANSPLANTTransplant Program (Organ): LungFRelease Date: July 6, 2021 (Corrected July 16, 2021)RECIPIENTSBased on Data Available: April 30, 2021

User Guide

This report contains a wide range of useful information about the lung transplant program at UF Health Shands Hospital (FLUF). 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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REGISTRY OFCenter Code: FLUFSiTRANSPLANTTransplant Program (Organ): Lung
Release Date: July 6, 2021 (Corrected July 16, 2021)FRECIPIENTSBased on Data Available: April 30, 2021

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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 deceased donor transplant rate at this program was 616.7 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 01/01/2015 and 06/30/2020. The time it took for 5% (the 5th percentile) of patients to receive a transplant at this program was 0.1 months. If "Not Observed" is displayed in the table, then too few candidates received transplants before 12/31/2020 to calculate a particular percentile of transplant times.

Table B11 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. Figure B10 shows the distribution of program offer acceptance rates as well as the offer acceptance rate for this program. Figures B11 - B15 similarly show offer acceptance rates for subsets of offers.

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RECISTRY OFCenter Code: FLUFSFTRANSPLANTTransplant Program (Organ): LungFRelease Date: July 6, 2021 (Corrected July 16, 2021)Based on Data Available: April 30, 2021

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User Guide

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.

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.



REGISTRY OF
TRANSPLANTCenter Code: FLUFSF
Transplant Program (Organ): Lung
Release Date: July 6, 2021 (Corrected July 16, 2021)RECIPIENTSBased on Data Available: April 30, 2021

Table of Contents

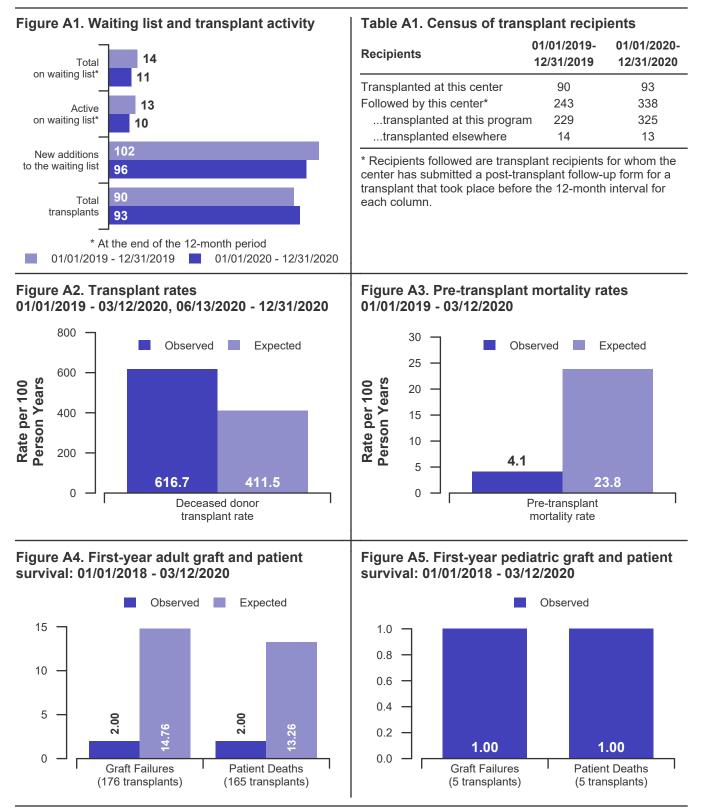
Section	Page
Correction Notice	i
COVID-19 Guide	ii
User Guide	iv
A. Program Summary	
Program Summary	1
B. Waiting List Information	
Waiting list activity	2
Demographic characteristics of waiting list candidates	3
Medical characteristics of waiting list candidates	4
Deceased donor transplant rates	5
Pre-transplant mortality rates (formerly called Waiting list mortality rates)	6
Patient survival from listing	7
Waiting list candidate status after listing	8
Percent of candidates with deceased donor transplants: demographic characteris	
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	4.4
Deceased donor transplant recipient demographic characteristics	14
Deceased donor transplant recipient medical characteristics	15
Deceased donor characteristics	16
Deceased donor transplant characteristics	17
Deceased donor graft survival	18
Deceased donor patient survival	24
Multi-organ transplant graft survival	30
Multi-organ transplant patient survival	30



REGISTRY OF Cen TRANSPLANT RECIPIENTS Bas

Center Code: FLUFSRTR Program-Specific ReportTransplant Program (Organ): LungFeedback?: SRTR@SRTR.orgRelease Date: July 6, 2021 (Corrected July 16, 2021)1.877.970.SRTR (7787)Based on Data Available: April 30, 2021http://www.srtr.org

A. Program Summary





B. Waiting List Information

Table B1. Waiting list activity summary: 01/01/2019 - 12/31/2020

		its for center	Activity for 01/01/2020 to 12/31/20 as percent of registrants on waiting on 01/01/2020			
Waiting List Registrations	01/01/2019- 12/31/2019	01/01/2020- 12/31/2020	This Center (%)	OPTN Region (%)	U.S. (%)	
On waiting list at start Additions	12	14	100.0	100.0	100.0	
New listings at this center	102	96	685.7	312.2	190.0	
Removals						
Transferred to another center	1	0	0.0	1.0	1.4	
Received living donor transplant*	0	0	0.0	0.0	0.0	
Received deceased donor transplant*	90	93	664.3	271.4	180.3	
Died	0	1	7.1	11.2	10.6	
Transplanted at another center	0	1	7.1	7.1	2.3	
Deteriorated	3	1	7.1	12.2	9.2	
Recovered	4	1	7.1	9.2	4.6	
Other reasons	2	2	14.3	13.3	11.4	
On waiting list at end of period	14	11	78.6	86.7	70.1	

* 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.



UF Health Shands Hospital

Center Code: FLUF SI Transplant Program (Organ): Lung F Release Date: July 6, 2021 (Corrected July 16, 2021) Based on Data Available: April 30, 2021

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 2021) 1.877.970.SRTR (7787) http://www.srtr.org

B. Waiting List Information

TRANSPLANT

RECIPIENTS

Table B2. Demographic characteristics of waiting list candidates Candidates registered on the waiting list between 01/01/2020 and 12/31/2020

Demographic Characteristic		iting List Regi 020 to 12/31/2			ng List Regist 12/31/2020 (%	
	This Center (N=96)	OPTN Region (N=306)	U.S. (N=2,675)	This Center (N=11)	OPTN Region (N=85)	U.S. (N=987)
All (%)	100.0	100.0	100.0	100.0	100.0	100.0
Ethnicity/Race (%)*						
White	74.0	70.9	73.2	72.7	67.1	65.7
African-American	10.4	13.1	10.2	18.2	15.3	13.8
Hispanic/Latino	12.5	13.7	12.6	0.0	12.9	15.8
Asian	3.1	1.6	3.3	9.1	2.4	3.7
Other	0.0	0.7	0.8	0.0	2.4	1.0
Unknown	0.0	0.0	0.0	0.0	0.0	0.0
Age (%)						
<2 years	0.0	0.0	0.6	0.0	0.0	0.8
2-11 years	0.0	0.0	0.3	0.0	0.0	0.6
12-17 years	0.0	0.7	0.9	0.0	0.0	0.4
18-34 years	5.2	5.2	6.5	9.1	4.7	9.1
35-49 years	9.4	10.5	10.4	9.1	9.4	13.6
50-64 years	39.6	47.4	45.5	36.4	54.1	48.0
65-69 years	21.9	22.5	23.9	27.3	23.5	20.3
70+ years	24.0	13.7	12.0	18.2	8.2	7.2
Gender (%)						
Male	58.3	62.1	59.7	72.7	54.1	41.4
Female	41.7	37.9	40.3	27.3	45.9	58.6

* 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%.



UF Health Shands Hospital

REGISTRY OFCenter Code: FLUFSITRANSPLANTTransplant Program (Organ): LungFRelease Date: July 6, 2021 (Corrected July 16, 2021)RECIPIENTSBased on Data Available: April 30, 2021

SRTR Program-Specific Report Feedback?: SRTR@SRTR.org 2021) 1.877.970.SRTR (7787) http://www.srtr.org

B. Waiting List Information

Table B3. Medical characteristics of waiting list candidatesCandidates registered on the waiting list between 01/01/2020 and 12/31/2020

Medical Characteristic		ting List Regi 020 to 12/31/2			ng List Regis 12/31/2020 (
	This Center (N=96)	OPTN Region (N=306)	U.S. (N=2,675)	This Center (N=11)	OPTN Region (N=85)	U.S. (N=987)
All (%)	100.0	100.0	100.0	100.0	100.0	100.0
Blood Type (%)						
0	52.1	50.0	47.0	63.6	57.6	59.5
A	32.3	33.7	37.8	27.3	30.6	29.2
В	7.3	10.5	11.5	0.0	3.5	9.3
AB	8.3	5.9	3.7	9.1	8.2	2.0
Unknown	0.0	0.0	0.0	0.0	0.0	0.0
Previous Transplant (%)						
Yes	7.3	6.2	5.0	18.2	7.1	3.6
No	92.7	93.8	95.0	81.8	92.9	96.4
Unknown	0.0	0.0	0.0	0.0	0.0	0.0
Primary Disease (%)						
Idiopathic Pulmonary Arterial Hypertension	1.0	1.6	8.0	0.0	0.0	10.1
Cystic Fibrosis	0.0	1.6	2.7	0.0	2.4	5.4
Idiopathic Pulmonary Fibrosis	75.0	72.5	67.0	72.7	56.5	48.0
Emphysema/COPD	19.8	19.6	19.6	27.3	31.8	31.4
Other	4.2	4.6	2.8	0.0	9.4	5.1
Missing	0.0	0.0	0.0	0.0	0.0	0.0



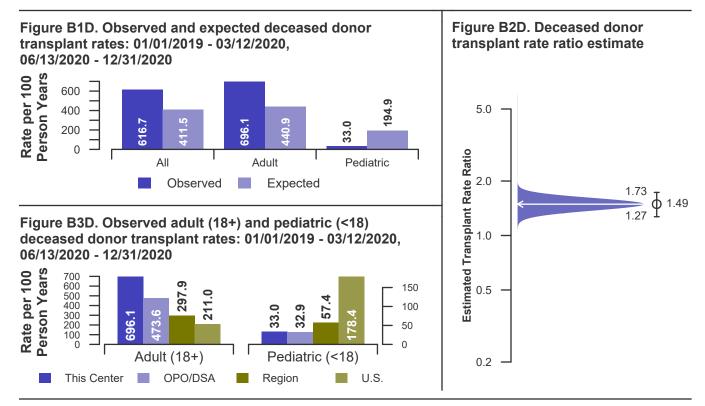
B. Waiting List Information

Table B4D Deceased donor	r transplant rates: 01/01/2019	- 03/12/2020 0	6/13/2020 - 12/31/2020

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	12	30	104	1,445
Person Years**	25.3	51.6	164.6	2,280.2
Removals for Transplant	156	231	482	4,795
Adult (18+) Candidates				
Count on waiting list at start*	8	26	99	1,407
Person Years**	22.3	48.6	161.1	2,231.4
Removals for transpant	155	230	480	4,708
Pediatric (<18) Candidates				
Count on waiting list at start*	4	4	5	38
Person Years**	3.0	3.0	3.5	48.8
Removals for transplant	1	1	2	87

* 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 January 1 or from the date of first wait listing until death, transplant, removal from the waiting list or December 31.





REGISTRY OF Center C TRANSPLANT RECIPIENTS Based or

Center Code: FLUF SRTR Program-Specific Report Transplant Program (Organ): Lung Feedback?: SRTR@SRTR.org Release Date: July 6, 2021 (Corrected July 16, 2021) 1.877.970.SRTR (7787) Based on Data Available: April 30, 2021 http://www.srtr.org

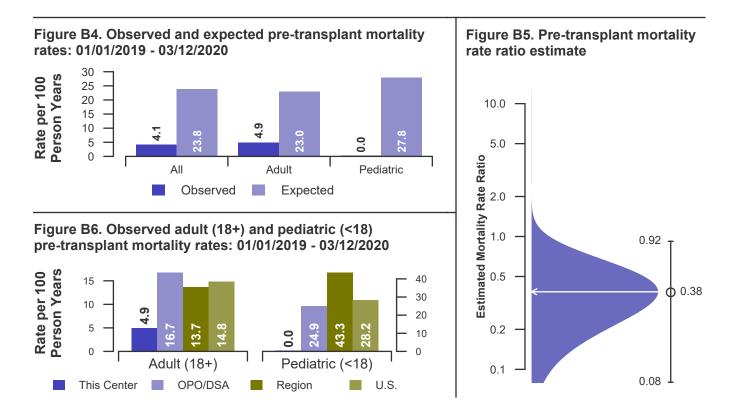
B. Waiting List Information

Table B5. Pre-transplant mortality rates: 01/01/2019 - 03/12/2020

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	12	30	104	1,445
Person Years**	24.5	46.0	150.9	1,882.1
Number of deaths	1	8	22	285
Adult (18+) Candidates				
Count on waiting list at start*	8	26	99	1,407
Person Years**	20.5	41.9	146.3	1,839.5
Number of deaths	1	7	20	273
Pediatric (<18) Candidates				
Count on waiting list at start*	4	4	5	38
Person Years**	4.0	4.0	4.6	42.6
Number of deaths	0	1	2	12

* 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 January 1 or from the date of first wait listing until death, transplant, 60 days after recovery, transfer or March 12, 2020.





B. Waiting List Information

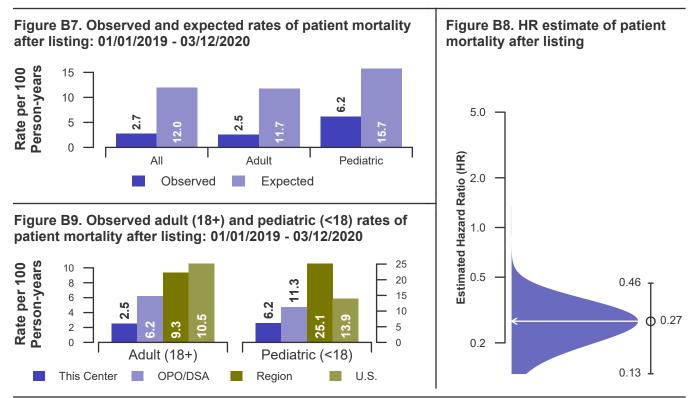
Table B6. Rates of patient mortality after listing: 01/01/2019 - 03/12/2020

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Patients				
Count at risk during the evaluation period	316	571	1,348	14,137
Person-years*	292.3	518.9	1,223.3	12,881.5
Number of Deaths	8	33	118	1,365
Adult (18+) Patients				
Count at risk during the evaluation period	299	551	1,320	13,862
Person-years*	276.1	501.2	1,199.4	12,636.9
Number of Deaths	7	31	112	1,331
Pediatric (<18) Patients				
Count at risk during the evaluation period	17	20	28	275
Person-years*	16.2	17.7	23.9	244.6
Number of Deaths	1	2	6	34

* Person-years are calculated as days (converted to fractional years). The number of days from 01/01/2019, or from the date of first wait listing until death, reaching 5 years after listing or March 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.

Correction: Figures B7 and B8 have been corrected. See the Correction Notice on for a detailed explanation of the changes.





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B. Waiting List Information

TRANSPLANT

Table B7. Waiting list candidate status after listing Candidates registered on waiting list between 07/01/2018 and 06/30/2019

Waiting list status (survival status)		Center (N ns Since L	,	U.S. (N=3,153) Months Since Listing			
	6	12	18	6	12	18	
Alive on waiting list (%)	10.1	0.0	0.0	24.0	12.0	6.4	
Died on the waiting list without transplant (%)	0.0	0.0	0.0	3.7	4.3	4.6	
Removed without transplant (%):							
Condition worsened (status unknown)	2.2	3.4	3.4	3.4	4.1	4.4	
Condition improved (status unknown)	1.1	2.2	2.2	0.3	0.6	1.3	
Refused transplant (status unknown)	1.1	1.1	1.1	0.3	0.3	0.3	
Other	1.1	2.2	2.2	1.6	2.5	3.0	
Transplant (living or deceased donor) (%):							
Functioning (alive)	83.1	88.8	57.3	62.0	64.4	45.7	
Failed-Retransplanted (alive)	0.0	0.0	0.0	0.1	0.1	0.2	
Failed-alive not retransplanted	0.0	0.0	0.0	0.1	0.0	0.1	
Died	0.0	0.0	3.4	3.9	7.0	10.0	
Status Yet Unknown*	1.1	2.2	30.3	0.6	4.4	23.6	
Lost or Transferred (status unknown) (%)	0.0	0.0	0.0	0.2	0.4	0.4	
TOTAL (%)	100.0	100.0	100.0	100.0	100.0	100.0	
Total % known died on waiting list or after transplant	0.0	0.0	3.4	7.6	11.4	14.6	
Total % known died or removed as unstable	2.2	3.4	6.7	11.0	15.4	19.0	
Total % removed for transplant	84.3	91.0	91.0	66.6	75.8	79.5	
Total % with known functioning transplant (alive)	83.1	88.8	57.3	62.0	64.4	45.7	

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



B. Waiting List Information

 Table B8. Percent of candidates with deceased donor transplants: demographic characteristics

 Candidates registered on the waiting list between 01/01/2015 and 12/31/2017

Characteristic	Percent transplanted at time periods since listing This Center United States									
	Ν				3 years	Ν				3 years
All	144	46.5	84.7	85.4	85.4	8,456	29.8	72.2	77.4	79.1
Ethnicity/Race*										
White	114	50.0	88.6	88.6	88.6	6,620	30.2	73.7	78.8	80.5
African-American	14	28.6	71.4	78.6	78.6	842	27.0	69.1	74.6	76.2
Hispanic/Latino	16	37.5	68.8	68.8	68.8	713	31.4	66.5	72.1	73.6
Asian	0					227	25.1	60.4	67.0	68.3
Other	0					54	22.2	59.3	64.8	70.4
Unknown	0					0				
Age										
<2 years	0					27	7.4	51.9	55.6	55.6
2-11 years	3	0.0	0.0	0.0	0.0	51	3.9	54.9	62.7	64.7
12-17 years	11	27.3	45.5	45.5	45.5	118	25.4	64.4	69.5	69.5
18-34 years	12	50.0	91.7	91.7	91.7	833	31.9	71.7	77.2	78.5
35-49 years	21	23.8	85.7	85.7	85.7	1,021	26.9	66.8	72.5	74.1
50-64 years	58	46.6	89.7	91.4	91.4	3,942	28.2	71.8	77.7	79.9
65-69 years	26	69.2	96.2	96.2	96.2	1,775	32.0	74.4	79.0	80.2
70+ years	13	61.5	84.6	84.6	84.6	689	38.5	80.3	82.6	83.0
Gender										
Male	77	55.8	90.9	92.2	92.2	4,742	36.1	78.6	82.4	83.3
Female	67	35.8	77.6	77.6	77.6	3,714	21.8	63.9	71.1	73.7

* 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%.



REGISTRY OFCenter Code: FLUFSITRANSPLANTTransplant Program (Organ): Lung
Release Date: July 6, 2021 (Corrected July 16, 2021)FRECIPIENTSBased on Data Available: April 30, 2021

B. Waiting List Information

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

 Candidates registered on the waiting list between 01/01/2015 and 12/31/2017

Characteristic	Percent transplanted at time periods since listing This Center United States									
	Ν				3 years	Ν	-			3 years
All	144	46.5	84.7	85.4	85.4	8,456	29.8	72.2	77.4	79.1
Blood Type										
0	66	42.4	78.8	80.3	80.3	3,891	28.5	69.0	75.0	76.8
A	58	53.4	87.9	87.9	87.9	3,267	31.4	75.8	80.1	81.7
В	16	37.5	93.8	93.8	93.8	992	27.9	70.7	76.9	78.5
AB	4	50.0	100.0	100.0	100.0	306	36.6	78.8	81.7	82.4
Previous Transplant										
Yes	0					324	32.7	67.9	68.8	69.4
No	144	46.5	84.7	85.4	85.4	8,132	29.7	72.3	77.8	79.5
Primary Disease										
Congenital Disease	0					0				
Retransplant/Graft Failure	0					0				
Idiopathic Pulmonary Arterial Hypertension	5	20.0	20.0	20.0	20.0	445	19.6	53.3	57.8	60.0
Cystic Fibrosis	23	39.1	78.3	78.3	78.3	914	29.8	74.4	80.7	81.8
Idiopathic Pulmonary Fibrosis	72	61.1	86.1	87.5	87.5	4,801	35.0	75.0	78.5	79.5
Alpha-1-Antitrypsin Deficiency	0					0				
Emphysema/COPD	35	28.6	97.1	97.1	97.1	2,051	20.6	69.6	78.4	81.9
Other	9	33.3	77.8	77.8	77.8	245	24.5	64.1	70.2	71.8
Missing	0					0				



B. Waiting List Information

Table B10. Time to transplant for waiting list candidates*Candidates registered on the waiting list between 01/01/2015 and 06/30/2020

		Months to T	ransplant**	
Percentile	Center	OPO/DSA	Region	U.S.
5th	0.1	0.1	0.2	0.2
10th	0.2	0.2	0.2	0.2
25th	0.4	0.4	0.7	0.7
50th (median time to transplant)	1.0	1.5	2.5	2.6
75th	2.9	5.8	12.6	12.0

* 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 12/31/2020. Calculated as the months after listing, during which the corresponding percent of all patients initially listed had received a transplant.



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B. Waiting List Information

Table B11. Offer Acceptance Practices: 01/01/2020 - 12/31/2020

Offers Acceptance Characteristics	This Center	OPO/DSA	Region	U.S.
Overall				
Number of Offers	912	1,508	4,599	45,155
Number of Acceptances	90	128	260	2,507
Expected Acceptances	65.5	104.7	304.1	2,506.3
Offer Acceptance Ratio*	1.36	1.22	0.86	1.00
95% Credible Interval**	[1.10, 1.66]			
PHS increased infectious risk				
Number of Offers	246	440	1,388	13,299
Number of Acceptances	22	33	72	712
Expected Acceptances	18.0	32.4	90.3	715.4
Offer Acceptance Ratio*	1.20	1.02	0.80	1.00
95% Credible Interval**	[0.77, 1.73]			
Donor was current smoker				
Number of Offers	76	125	441	5,300
Number of Acceptances	3	6	15	170
Expected Acceptances	2.4	4.2	15.9	171.1
Offer Acceptance Ratio*	1.14	1.30	0.95	0.99
95% Credible Interval**	[0.37, 2.33]			
Donor age >= 55				
Number of Offers	177	301	747	5,849
Number of Acceptances	17	20	28	268
Expected Acceptances	10.6	17.2	37.2	272.2
Offer Acceptance Ratio*	1.51	1.15	0.77	0.98
95% Credible Interval**	[0.91, 2.26]			
Hard-to-Place Lungs (Over 50 Offers)				
Number of Offers	154	261	720	11,874
Number of Acceptances	8	8	12	260
Expected Acceptances	3.9	6.9	17.7	263.3
Offer Acceptance Ratio*	1.69	1.12	0.71	0.99
95% Credible Interval**	[0.81, 2.90]			
Donor more than 500 miles away				
Number of Offers	246	381	1,204	10,389
Number of Acceptances	16	23	38	445
Expected Acceptances	11.3	18.0	53.4	413.9
Offer Acceptance Ratio*	1.36	1.25	0.72	1.07
95% Credible Interval**	[0.80, 2.05]			

* The offer acceptance ratio estimates the relative offer acceptance practice of UF Health Shands Hospital (FLUF) 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 acceptance practices (e.g., an offer acceptance at 25% less likely to accept an offer).

** As an example, the 95% Credible Interval for the overall offer acceptance ratio, [1.10, 1.66], indicates the location of FLUF's true offer acceptance ratio with 95% probability. The best estimate is 36% more likely to accept an offer compared to national acceptance behavior, but FLUF's performance could plausibly range from 10% higher acceptance up to 66% higher acceptance.

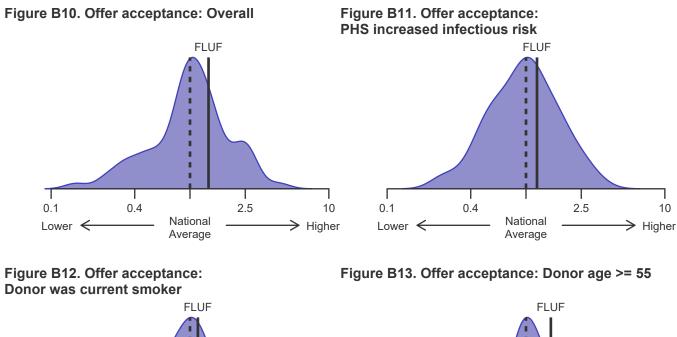
The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). See COVID-19 Guide for pandemic-related follow-up limits.

SCIENTIFIC **UF Health Shands Hospital** Center Code: FLUF SRTR Program-Specific Report REGISTRY 약 Transplant Program (Organ): Lung TRANSPLANT Release Date: July 6, 2021 (Corrected July 16, 2021)

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B. Waiting List Information

RECIPIENTS



Based on Data Available: April 30, 2021

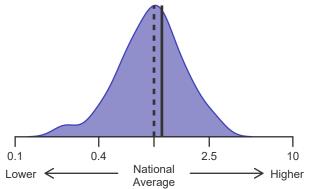
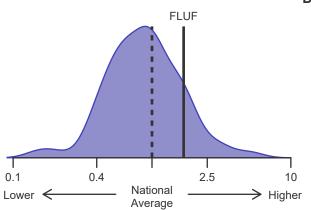


Figure B14. Offer acceptance: Offer number > 50 Figure B15. Offer acceptance:



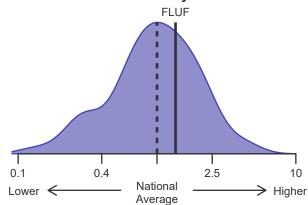
Donor more than 500 miles away

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10

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C. Transplant Information

TRANSPLANT

RECIPIENTS

Table C1D. Deceased donor transplant recipient demographic characteristics Patients transplanted between 01/01/2020 and 12/31/2020

	Perce	Percentage in each category		
Characteristic	Center (N=93)	Region (N=266)	U.S. (N=2,539)	
Ethnicity/Race (%)*				
White	74.2	72.2	75.1	
African-American	10.8	12.4	10.1	
Hispanic/Latino	12.9	13.5	10.9	
Asian	2.2	1.5	3.0	
Other	0.0	0.4	0.9	
Unknown	0.0	0.0	0.0	
Age (%)				
<2 years	0.0	0.0	0.4	
2-11 years	0.0	0.0	0.2	
12-17	0.0	0.4	0.7	
18-34	4.3	5.6	5.3	
35-49 years	7.5	8.6	9.6	
50-64 years	38.7	46.6	45.2	
65-69 years	24.7	24.1	25.1	
70+ years	24.7	14.7	13.5	
Gender (%)				
Male	55.9	57.5	58.7	
Female	44.1	42.5	41.3	

* 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%.



C. Transplant Information

Table C2D. Deceased donor transplant recipient medical characteristicsPatients transplanted between 01/01/2020 and 12/31/2020

	Percentage in each category		
Characteristic	Center (N=93)	Region (N=266)	U.S. (N=2,539)
Blood Type (%)			
0	51.6	48.1	45.9
A	34.4	38.0	39.4
В	8.6	10.2	10.9
AB	5.4	3.8	3.8
Previous Transplant (%)			
Yes	6.5	5.6	4.1
No	93.5	94.4	95.9
Body Mass Index (%)			
0-20	9.7	13.5	16.3
21-25	30.1	33.5	31.0
26-30	50.5	42.5	39.1
31-35	8.6	9.4	12.9
36-40	1.1	0.4	0.5
41+	0.0	0.8	0.2
Unknown	0.0	0.0	0.0
Primary Disease (%)			
Idiopathic Pulmonary Arterial Hypertension	2.2	3.8	6.9
Cystic Fibrosis	1.1	3.4	4.2
Idiopathic Pulmonary Fibrosis	65.6	64.7	61.1
Emphysema/COPD	22.6	24.1	24.5
Other	8.6	4.1	3.2
Missing	0.0	0.0	0.1
Recipient Medical Condition at Transplant (%)			
Not Hospitalized	60.2	71.1	77.3
Hospitalized	1.1	6.8	9.0
ICU	38.7	22.2	13.7
Unknown	0.0	0.0	0.0



C. Transplant Information

Table C3D. Deceased donor characteristicsTransplants performed between 01/01/2020 and 12/31/2020

	Percentage in each category		
Donor Characteristic	Center (N=93)	Region (N=266)	U.S. (N=2,539)
Cause of Death (%)			
Deceased: Stroke	23.7	27.8	25.1
Deceased: MVA	15.1	12.4	13.5
Deceased: Other	61.3	59.8	61.4
Ethnicity/Race (%)*			
White	53.8	55.6	58.4
African-American	22.6	24.4	18.9
Hispanic/Latino	20.4	17.3	18.2
Asian	2.2	2.3	3.4
Other	1.1	0.4	1.0
Not Reported	0.0	0.0	0.0
Age (%)			
<2 years	0.0	0.0	0.3
2-11 years	0.0	0.4	0.6
12-17	10.8	8.6	5.9
18-34	40.9	39.8	46.1
35-49 years	22.6	33.8	28.7
50-64 years	22.6	16.2	17.3
65-69 years	1.1	0.4	1.0
70+ years	2.2	0.8	0.2
Gender (%)			
Male	63.4	60.5	61.1
Female	36.6	39.5	38.9
Blood Type (%)			
0	58.1	57.1	51.9
A	31.2	33.1	36.0
В	9.7	9.4	10.6
AB	1.1	0.4	1.5
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%.



C. Transplant Information

TRANSPLANT

Table C4D. Deceased donor transplant characteristics Transplants performed between 01/01/2020 and 12/31/2020

	Percer	ntage in each ca	ategory
Transplant Characteristic	Center (N=93)	Region (N=266)	U.S. (N=2,539)
Total Ischemic Time (Minutes): Local (%)			
Deceased: 0-90 min	0.0	0.0	0.3
Deceased: 91-180 min	0.0	12.0	8.7
Deceased: 181-270 min	11.1	26.7	40.0
Deceased: 271-360 min	38.9	40.0	32.0
Deceased: 361+ min	50.0	21.3	18.3
Not Reported	0.0	0.0	0.8
Total Ischemic Time (Minutes): Shared (%)			
Deceased: 0-90 min	0.0	0.5	0.5
Deceased: 91-180 min	0.0	1.0	1.3
Deceased: 181-270 min	5.3	15.7	13.9
Deceased: 271-360 min	44.0	30.4	37.5
Deceased: 361+ min	50.7	51.8	46.1
Not Reported	0.0	0.5	0.7
Procedure Type (%)			
Single organ	96.8	97.4	98.7
Multi organ	3.2	2.6	1.3
Donor Location (%)			
Local Donation Service Area (DSA)	19.4	28.2	28.5
Another Donation Service Area (DSA)	80.6	71.8	71.5
Median Time in Hospital After Transplant*	25.0 Days	22.0 Days	19.0 Days

* Multi organ transplants are excluded from this statistic.



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C. Transplant Information

REGISTRY OF

TRANSPLANT

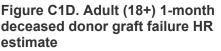
RECIPIENTS

Table C5D. Adult (18+) 1-month survival with a functioning deceased donor graftSingle organ transplants performed between 01/01/2018 and 03/12/2020Deaths and retransplants are considered graft failures

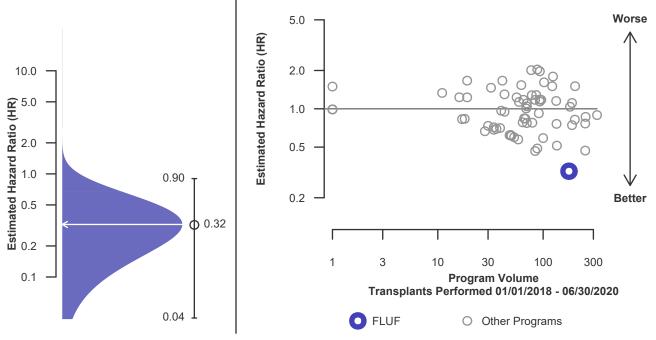
	FLUF	0.8.
Number of transplants evaluated	176	5,674
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	97.38%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	97.59%	
Number of observed graft failures (including deaths) during the first month after transplant	0	146
Number of expected graft failures (including deaths) during the first month after transplant	4.19	
Estimated hazard ratio*	0.32	
95% credible interval for the hazard ratio**	[0.04, 0.90]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.04, 0.90], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 68% lower risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 96% reduced risk up to 10% reduced risk.









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Center Code: FLUF REGISTRY OF Transplant Program (Organ): Lung Release Date: July 6, 2021 (Corrected July 16, 2021) RECIPIENTS Based on Data Available: April 30, 2021

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C. Transplant Information

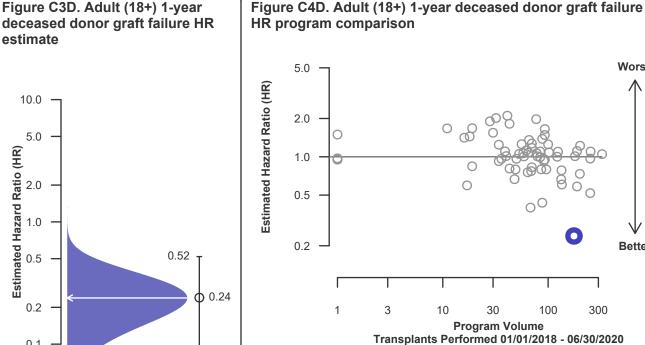
TRANSPLANT

Table C6D. Adult (18+) 1-year survival with a functioning deceased donor graft Single organ transplants performed between 01/01/2018 and 03/12/2020 Deaths and retransplants are considered graft failures et tre

	FLUF	U.S.
Number of transplants evaluated	176	5,674
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	98.56%	89.07%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	89.75%	
Number of observed graft failures (including deaths) during the first year after transplant	2	506
Number of expected graft failures (including deaths) during the first year after transplant	14.76	
Estimated hazard ratio*	0.24	
95% credible interval for the hazard ratio**	[0.07, 0.52]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.07, 0.52], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 76% lower risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 93% reduced risk up to 48% reduced risk.



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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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C. Transplant Information

REGISTRY OF

TRANSPLANT

RECIPIENTS

Table C7D. Adult (18+) 3-year survival with a functioning deceased donor graftSingle organ transplants performed between 07/01/2015 and 12/31/2017Deaths and retransplants are considered graft failures

	FLUF	0.5.
Number of transplants evaluated	121	5,700
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	77.50%	73.63%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	74.07%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	27	1,433
Number of expected graft failures (including deaths) during the first 3 years after transplant	29.96	
Estimated hazard ratio*	0.91	
95% credible interval for the hazard ratio**	[0.61, 1.27]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.61, 1.27], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 9% lower risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 39% reduced risk up to 27% increased risk.

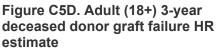
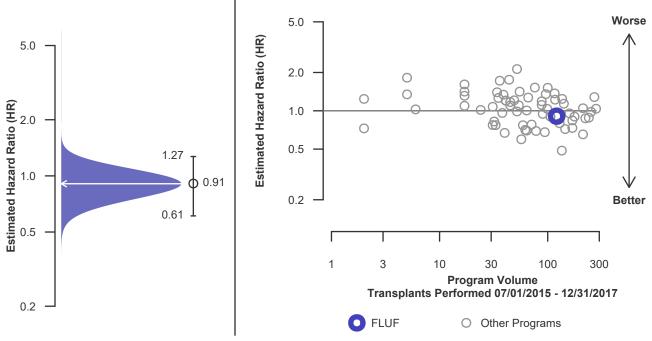


Figure C6D. Adult (18+) 3-year deceased donor graft failure HR program comparison





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C. Transplant Information

REGISTRY OF

TRANSPLANT

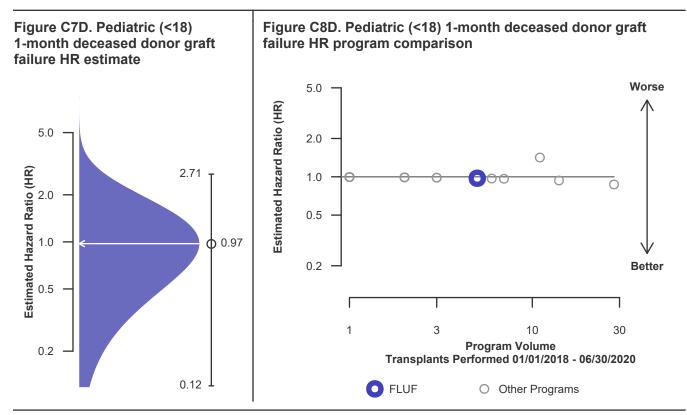
RECIPIENTS

Table C8D. Pediatric (<18) 1-month survival with a functioning deceased donor graft</td> Single organ transplants performed between 01/01/2018 and 03/12/2020 Deaths and retransplants are considered graft failures

	FLUF	0.5.
Number of transplants evaluated	5	95
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	98.94%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	98.94%	
Number of observed graft failures (including deaths) during the first month after transplant	0	1
Number of expected graft failures (including deaths) during the first month after transplant	0.05	
Estimated hazard ratio*	0.97	
95% credible interval for the hazard ratio**	[0.12, 2.71]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

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





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C. Transplant Information

REGISTRY OF

TRANSPLANT

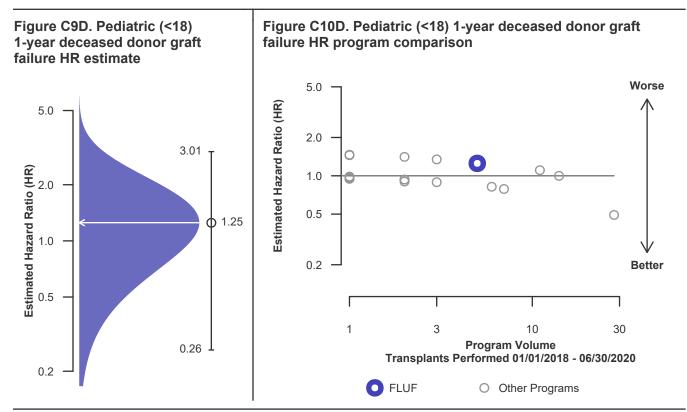
RECIPIENTS

Table C9D. Pediatric (<18) 1-year survival with a functioning deceased donor graft</th>Single organ transplants performed between 01/01/2018 and 03/12/2020Deaths and retransplants are considered graft failuresFILLE

	FLUF	0.5.
Number of transplants evaluated	5	95
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	80.00%	89.49%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	89.57%	
Number of observed graft failures (including deaths) during the first year after transplant	1	7
Number of expected graft failures (including deaths) during the first year after transplant	0.40	
Estimated hazard ratio*	1.25	
95% credible interval for the hazard ratio**	[0.26, 3.01]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.26, 3.01], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 25% higher risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 74% reduced risk up to 201% increased risk.





110

C. Transplant Information

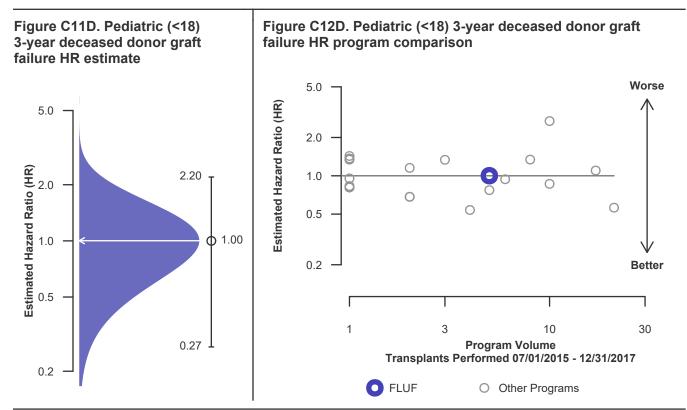
TRANSPLANT

Table C10D. Pediatric (<18) 3-year survival with a functioning deceased donor graft Single organ transplants performed between 07/01/2015 and 12/31/2017 Deaths and retransplants are considered graft failures EL LIE

	FLUF	0.5.
Number of transplants evaluated	5	108
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	60.00%	62.78%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	62.97%	
Number of observed graft failures (including deaths) during the first 3 years after transplant	2	39
Number of expected graft failures (including deaths) during the first 3 years after transplant	1.99	
Estimated hazard ratio*	1.00	
95% credible interval for the hazard ratio**	[0.27, 2.20]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's graft failure rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.27, 2.20], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 0% higher risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 73% reduced risk up to 120% increased risk.





110

C. Transplant Information

TRANSPLANT

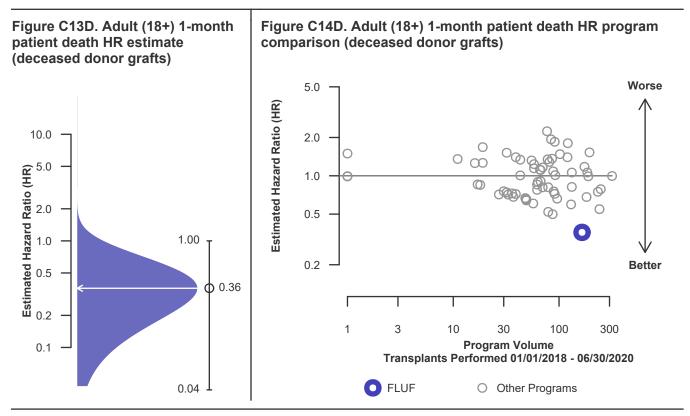
RECIPIENTS

Table C11D. Adult (18+) 1-month patient survival (deceased donor graft recipients) Single organ transplants performed between 01/01/2018 and 03/12/2020 **Retransplants excluded**

	FLUF	0.3.
Number of transplants evaluated	165	5,508
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	97.71%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	97.80%	
Number of observed deaths during the first month after transplant	0	124
Number of expected deaths during the first month after transplant	3.57	
Estimated hazard ratio*	0.36	
95% credible interval for the hazard ratio**	[0.04, 1.00]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.04, 1.00], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 64% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 96% reduced risk up to 0% increased risk.





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C. Transplant Information

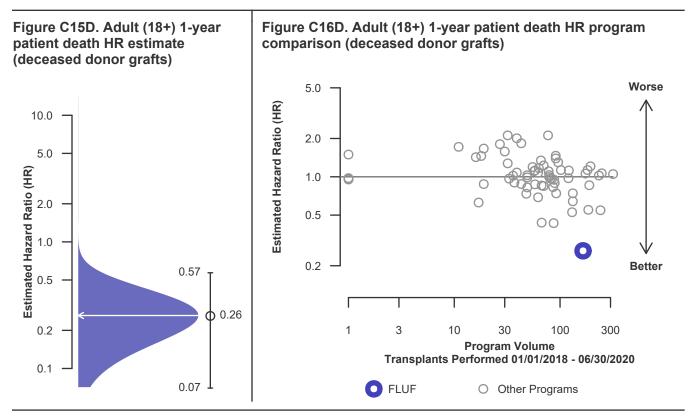
TRANSPLANT

Table C12D. Adult (18+) 1-year patient survival (deceased donor graft recipients) Single organ transplants performed between 01/01/2018 and 03/12/2020 **Retransplants excluded** EL LIE

•	FLUF	0.5.
Number of transplants evaluated	165	5,508
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	98.45%	89.68%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	89.93%	
Number of observed deaths during the first year after transplant	2	463
Number of expected deaths during the first year after transplant	13.26	
Estimated hazard ratio*	0.26	
95% credible interval for the hazard ratio**	[0.07, 0.57]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.07, 0.57], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 74% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 93% reduced risk up to 43% reduced risk.





110

C. Transplant Information

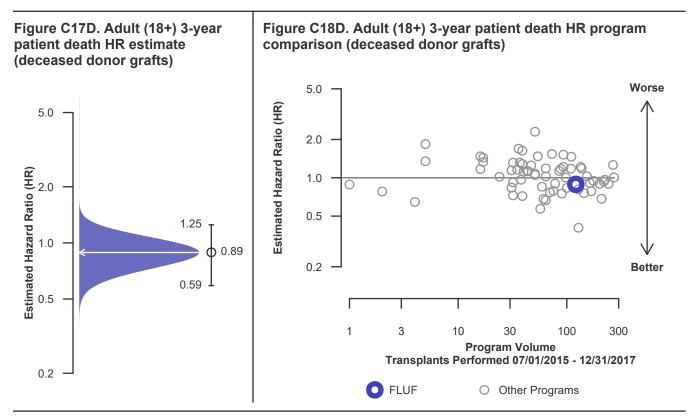
TRANSPLANT

Table C13D. Adult (18+) 3-year patient survival (deceased donor graft recipients) Single organ transplants performed between 07/01/2015 and 12/31/2017 **Retransplants excluded** EL LIE

	FLUF	0.5.
Number of transplants evaluated	121	5,524
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	79.29%	75.21%
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	75.42%	
Number of observed deaths during the first 3 years after transplant	25	1,321
Number of expected deaths during the first 3 years after transplant	28.41	
Estimated hazard ratio*	0.89	
95% credible interval for the hazard ratio**	[0.59, 1.25]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.59, 1.25], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 11% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 41% reduced risk up to 25% increased risk.





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C. Transplant Information

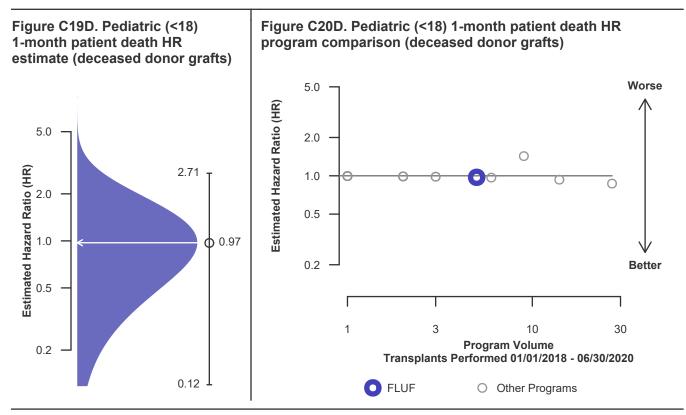
TRANSPLANT

Table C14D. Pediatric (<18) 1-month patient survival (deceased donor graft recipients) Single organ transplants performed between 01/01/2018 and 03/12/2020 **Retransplants excluded** EL LIE

-	FLUF	0.5.
Number of transplants evaluated	5	90
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	98.88%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	98.88%	
Number of observed deaths during the first month after transplant	0	1
Number of expected deaths during the first month after transplant	0.06	
Estimated hazard ratio*	0.97	
95% credible interval for the hazard ratio**	[0.12, 2.71]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

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





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C. Transplant Information

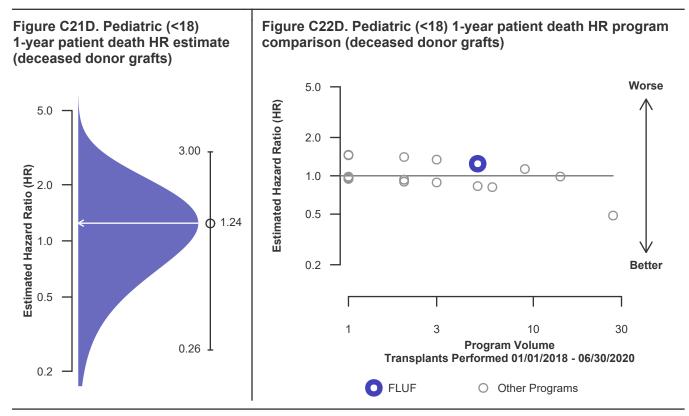
TRANSPLANT

Table C15D. Pediatric (<18) 1-year patient survival (deceased donor graft recipients) Single organ transplants performed between 01/01/2018 and 03/12/2020 **Retransplants excluded** EL LIE

-	FLUF	0.5.
Number of transplants evaluated	5	90
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	80.00%	89.15%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	89.24%	
Number of observed deaths during the first year after transplant	1	7
Number of expected deaths during the first year after transplant	0.41	
Estimated hazard ratio*	1.24	
95% credible interval for the hazard ratio**	[0.26, 3.00]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.26, 3.00], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 24% higher risk of patient death compared to an average program, but FLUF's performance could plausibly range from 74% reduced risk up to 200% increased risk.





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C. Transplant Information

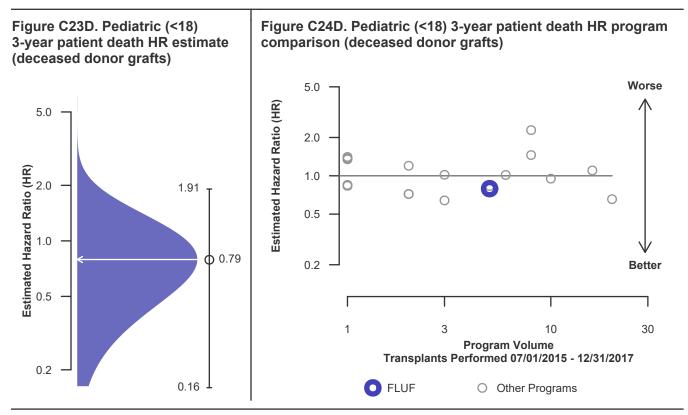
TRANSPLANT

Table C16D. Pediatric (<18) 3-year patient survival (deceased donor graft recipients) Single organ transplants performed between 07/01/2015 and 12/31/2017 **Retransplants excluded** EL LIE

-	FLUF	0.5.
Number of transplants evaluated	5	103
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	80.00%	67.54%
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	67.71%	
Number of observed deaths during the first 3 years after transplant	1	33
Number of expected deaths during the first 3 years after transplant	1.79	
Estimated hazard ratio*	0.79	
95% credible interval for the hazard ratio**	[0.16, 1.91]	

* The hazard ratio provides an estimate of how UF Health Shands Hospital (FLUF)'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 FLUF's patient death rate were precisely the expected rate, the estimated hazard ratio would be 1.0.

** The 95% credible interval, [0.16, 1.91], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 21% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 84% reduced risk up to 91% increased risk.





C. Transplant Information

Table C17. Multi-organ transplant graft survival: 01/01/2018 - 06/30/2020						
Adult (18+) Transplants	First-Year Outcomes					
Transplant Type	Transplants Performed FLUF-TX1 USA		Lung Graft Failures FLUF-TX1 USA		Estimated Lung Graft Survival FLUF-TX1 USA	
Liver-Lung	2	33	0	4	100.0%	87.7%

Pediatric (<18) Transplants

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

Table C18. Multi-organ transplant patient survival: 01/01/2018 - 06/30/2020

Adult (18+) Transplants	First-Year Outcomes					
Transplant Type	Transp Perfor FLUF-TX1	med	Patient I FLUF-TX1		Estim Patient S FLUF-TX1	Survival
Liver-Lung	2	33	0	4	100.0%	87.9%

Pediatric (<18) Transplants

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