



User Guide

This report contains a wide range of useful information about the heart 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. As part of this comparison, we provide a measure of how certain we are that this program is performing as expected or significantly better or worse than expected. These statements of certainty are provided as footnotes to the figures, so please interpret the numbers in the figures carefully after considering the information in the footnotes. 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



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was higher than the expected rate. However, the level of uncertainty must be considered when interpreting these numbers. The 95% confidence interval is also shown on Figure B2. This confidence interval provides a range within which the true ratio of observed to expected transplant rates is likely to be. If this 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 55.0 per 100 person-years, and this was lower than would be expected with a 95% confidence interval of [0.39, 0.72] for the ratio of observed to expected transplant rates. Transplant rates are also provided for adult and pediatric patients separately along with comparisons to adult and pediatric rates in the DSA, the OPTN region, and the nation. Please refer to the PSR Technical Methods documentation available at <http://www.srtr.org> for more detail regarding how expected rates are calculated.

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

Table B6 presents information on what happens to candidates on the waiting list by three different time points after listing: 6 months, 12 months, and 18 months. The table displays percentages of candidates who have died, been removed from the waiting list, been transplanted, or been transferred or lost-to-follow-up. Tables B7 and B8 provide more detail regarding how many candidates have received a deceased donor transplant by certain time points during the first 3 years after being put on the transplant waiting list. Each row of Tables B7 and B8 presents the percent of candidates who received a deceased donor transplant by each time point. Table B9 presents data on the time it took for different percentages of patients to be transplanted for candidates added to the list between 01/01/2011 and 06/30/2016. The time it took for 5% (the 5th percentile) of patients to receive a transplant at this program was 1.0 months. If "Not Observed" is displayed in the table, then too few candidates received transplants before 12/31/2016 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.

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



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transplanted organ or death, whichever comes first. Please refer to the technical methods for more information on these calculations (<http://www.srtr.org>).

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

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

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



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A. Program Summary

Figure A1. Waiting list and transplant activity

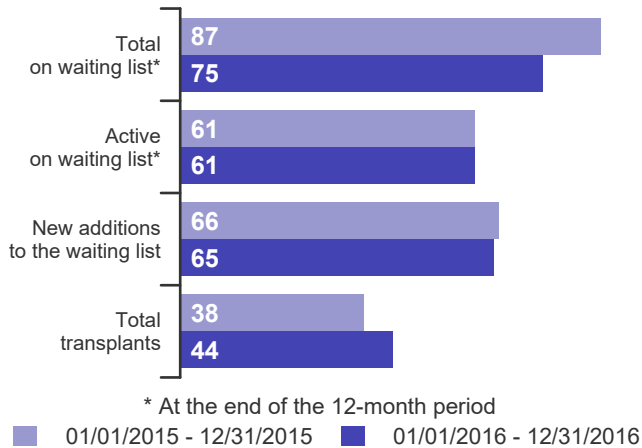
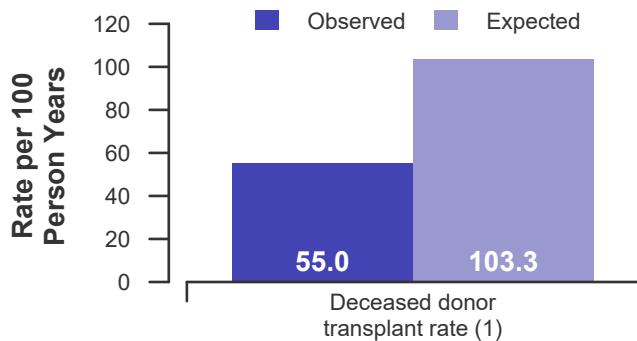


Table A1. Census of transplant recipients

Recipients	01/01/2015-12/31/2015	01/01/2016-12/31/2016
Transplanted at this center	38	44
Followed by this center*	325	346
...transplanted at this program	299	315
...transplanted elsewhere	26	31

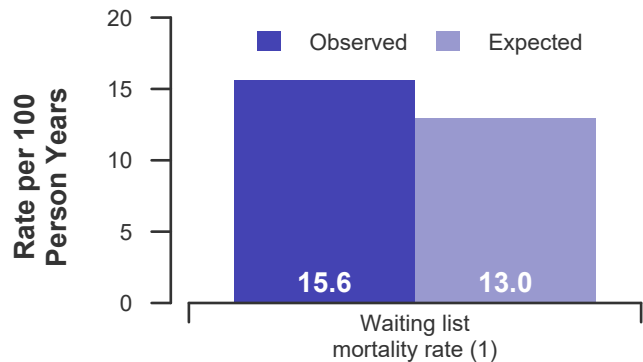
* Recipients followed are transplant recipients for whom the center has submitted a post-transplant follow-up form for a transplant that took place before the 12-month interval for each column.

Figure A2. Transplant rates
01/01/2016 - 12/31/2016



(1) Statistically lower ($p < 0.01$)

Figure A3. Waiting list mortality rates
01/01/2016 - 12/31/2016



(1) Not significantly different ($p = 0.582$)

Figure A4. First-year adult graft and patient survival: 01/01/2014 - 06/30/2016

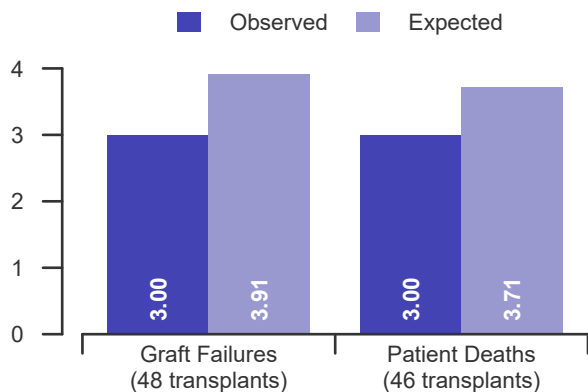
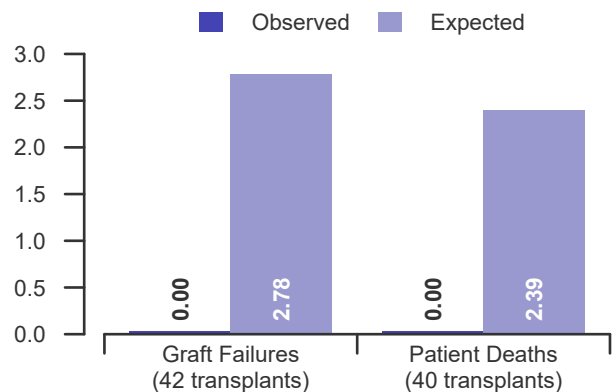


Figure A5. First-year pediatric graft and patient survival: 01/01/2014 - 06/30/2016





B. Waiting List Information

Table B1. Waiting list activity summary: 01/01/2015 - 12/31/2016

Waiting List Registrations	Counts for this center		Activity for 01/01/2016 to 12/31/2016 as percent of registrants on waiting list on 01/01/2016		
	01/01/2015-12/31/2015	01/01/2016-12/31/2016	This Center (%)	OPTN Region (%)	U.S. (%)
On waiting list at start	87	87	100.0	100.0	100.0
Additions					
New listings at this center	66	65	74.7	128.7	105.6
Removals					
Transferred to another center	5	5	5.7	2.3	3.0
Received living donor transplant*	0	0	0.0	0.0	0.0
Received deceased donor transplant*	38	44	50.6	82.5	76.2
Died	7	6	6.9	10.5	7.8
Transplanted at another center	0	1	1.1	1.0	1.1
Deteriorated	3	7	8.0	10.1	8.1
Recovered	7	7	8.0	10.1	6.0
Other reasons	6	7	8.0	10.7	6.9
On waiting list at end of period	87	75	86.2	101.6	96.4

* 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.



B. Waiting List Information

Table B2. Demographic characteristics of waiting list candidates
Candidates registered on the waiting list between 01/01/2016 and 12/31/2016

Demographic Characteristic	New Waiting List Registrations 01/01/2016 to 12/31/2016 (%)			All Waiting List Registrations on 12/31/2016 (%)		
	This Center (N=65)	OPTN Region (N=627)	U.S. (N=4,419)	This Center (N=75)	OPTN Region (N=495)	U.S. (N=4,036)
All (%)	100.0	100.0	100.0	100.0	100.0	100.0
Ethnicity/Race (%)*						
White	49.2	51.0	61.4	49.3	49.3	60.8
African-American	30.8	34.6	23.1	36.0	39.2	26.0
Hispanic/Latino	16.9	13.1	10.5	10.7	10.3	9.6
Asian	1.5	0.8	3.8	2.7	0.6	2.9
Other	1.5	0.5	1.2	1.3	0.6	0.7
Unknown	0.0	0.0	0.0	0.0	0.0	0.0
Age (%)						
<2 years	24.6	8.1	6.2	16.0	4.8	2.9
2-11 years	16.9	5.7	4.4	16.0	4.0	3.5
12-17 years	3.1	3.7	3.6	4.0	1.6	2.6
18-34 years	7.7	8.6	10.0	13.3	13.7	11.9
35-49 years	15.4	19.5	18.3	16.0	22.0	23.1
50-64 years	27.7	41.3	41.9	30.7	43.0	43.8
65+ years	3.1	12.8	15.6	4.0	10.7	12.2
Other (includes prenatal)	1.5	0.3	0.0	0.0	0.0	0.0
Gender (%)						
Male	64.6	68.9	71.1	66.7	70.1	74.8
Female	35.4	31.1	28.9	33.3	29.9	25.2

* 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%.



B. Waiting List Information

Table B3. Medical characteristics of waiting list candidates

Candidates registered on the waiting list between 01/01/2016 and 12/31/2016

Medical Characteristic	New Waiting List Registrations 01/01/2016 to 12/31/2016 (%)			All Waiting List Registrations on 12/31/2016 (%)		
	This Center	OPTN Region	U.S.	This Center	OPTN Region	U.S.
	(N=65)	(N=627)	(N=4,419)	(N=75)	(N=495)	(N=4,036)
All (%)	100.0	100.0	100.0	100.0	100.0	100.0
Blood Type (%)						
O	41.5	47.0	44.1	54.7	60.4	56.1
A	43.1	36.7	36.6	28.0	26.7	29.7
B	9.2	11.6	14.4	13.3	10.9	11.8
AB	6.2	4.5	4.9	4.0	2.0	2.3
Unknown	0.0	0.2	0.0	0.0	0.0	0.0
Previous Transplant (%)						
Yes	3.1	3.5	4.5	1.3	1.2	3.9
No	96.9	96.5	95.5	98.7	98.8	96.1
Unknown	0.0	0.0	0.0	0.0	0.0	0.0
Primary Disease (%)						
Cardiomyopathy	40.0	58.1	56.6	44.0	60.4	56.2
Coronary Artery Disease	16.9	23.8	26.8	24.0	26.9	29.2
Retransplant/Graft Failure	1.5	2.7	3.6	0.0	1.0	3.4
Valvular Heart Disease	1.5	0.6	1.1	0.0	0.8	0.9
Congenital Heart Disease	36.9	12.1	10.3	25.3	8.9	9.1
Other	3.1	2.7	1.7	6.7	2.0	1.2
Missing	0.0	0.0	0.0	0.0	0.0	0.0
Medical Urgency Status at Listing (%)						
Status 1A	38.5	30.3	31.0	18.7	13.5	13.2
Status 1B	43.1	47.7	41.1	58.7	50.1	40.2
Status 2	18.5	19.5	25.0	22.7	33.5	43.1
Temporarily Inactive	0.0	2.6	2.9	0.0	2.8	3.5



B. Waiting List Information

Table B4D. Deceased donor transplant rates: 01/01/2016 - 12/31/2016

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	87	137	487	4,175
Person Years**	80.0	134.8	500.7	4,097.8
Removals for Transplant	44	67	402	3,190
Adult (18+) Candidates				
Count on waiting list at start*	60	110	440	3,853
Person Years**	52.3	107.2	452.3	3,757.2
Removals for transplant	26	49	329	2,739
Pediatric (<18) Candidates				
Count on waiting list at start*	27	27	47	322
Person Years**	27.7	27.7	48.4	340.6
Removals for transplant	18	18	73	451

* 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.

Figure B1D. Observed and expected deceased donor transplant rates: 01/01/2016 - 12/31/2016

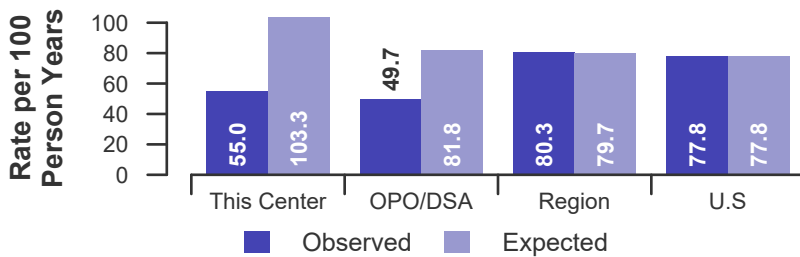


Figure B2D. Ratio of observed to expected deceased donor transplant rates

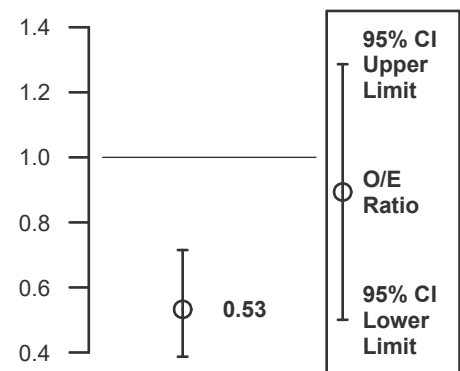
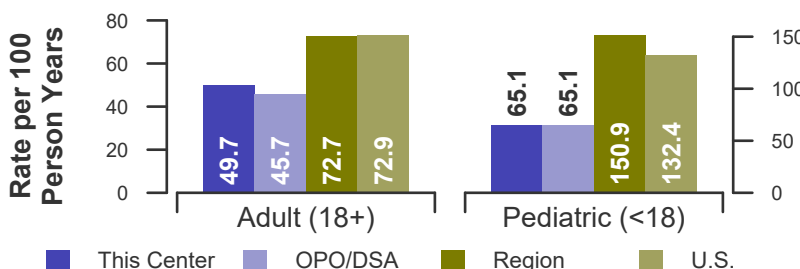


Figure B3D. Observed adult (18+) and pediatric (<18) deceased donor transplant rates: 01/01/2016 - 12/31/2016



(1) Lower than expected
($p < 0.01$, 95% CI = [0.39, 0.72])



B. Waiting List Information

Table B5. Waiting list mortality rates: 01/01/2016 - 12/31/2016

Waiting List Registrations	This Center	OPO/DSA	Region	U.S.
All Candidates				
Count on waiting list at start*	87	137	487	4,175
Person Years**	83.5	140.1	541.6	4,345.5
Number of deaths	13	20	89	542
Adult (18+) Candidates				
Count on waiting list at start*	60	110	440	3,853
Person Years**	54.1	110.8	486.7	3,983.6
Number of deaths	10	17	77	473
Pediatric (<18) Candidates				
Count on waiting list at start*	27	27	47	322
Person Years**	29.4	29.4	54.8	361.9
Number of deaths	3	3	12	69

* 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 December 31.

Figure B4. Observed and expected waiting list mortality rates: 01/01/2016 - 12/31/2016

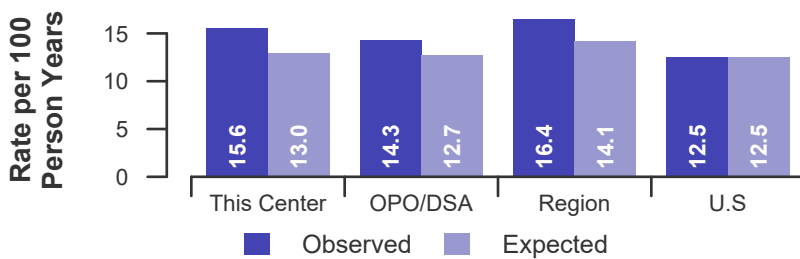


Figure B5. Ratio of observed to expected waiting list mortality rates

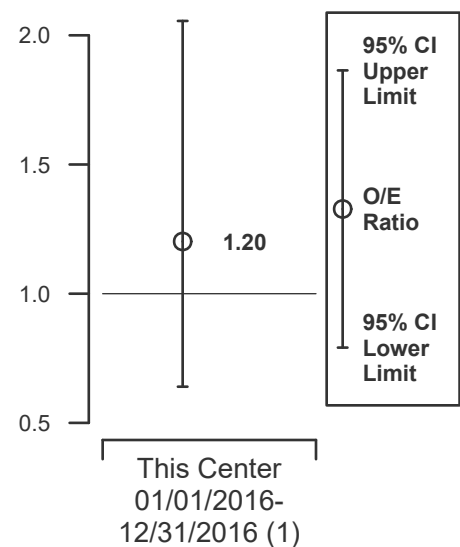
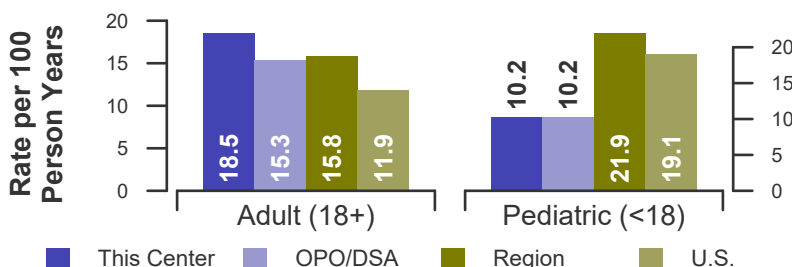


Figure B6. Observed adult (18+) and pediatric (<18) waiting list mortality rates: 01/01/2016 - 12/31/2016



(1) Not significantly different (p=0.582, 95% CI=[0.64, 2.06])



B. Waiting List Information

Table B6. Waiting list candidate status after listing
Candidates registered on waiting list between 07/01/2014 and 06/30/2015

Waiting list status (survival status)	This Center (N=72)			U.S. (N=4,422)		
	Months Since Listing			Months Since Listing		
	6	12	18	6	12	18
Alive on waiting list (%)	55.6	36.1	19.4	45.5	29.9	20.7
Died on the waiting list without transplant (%)	11.1	12.5	15.3	6.0	7.0	7.5
Removed without transplant (%):						
Condition worsened (status unknown)	2.8	2.8	4.2	4.4	5.9	6.7
Condition improved (status unknown)	0.0	0.0	1.4	0.8	1.5	2.3
Refused transplant (status unknown)	0.0	0.0	0.0	0.2	0.4	0.6
Other	1.4	2.8	2.8	1.5	3.1	3.9
Transplant (living or deceased donor) (%):						
Functioning (alive)	26.4	38.9	33.3	37.9	45.2	33.9
Failed-Retransplanted (alive)	0.0	0.0	0.0	0.1	0.1	0.1
Failed-alive not retransplanted	0.0	0.0	0.0	0.1	0.1	0.1
Died	0.0	0.0	0.0	2.4	3.7	4.7
Status Yet Unknown*	0.0	1.4	15.3	0.4	1.7	17.7
Lost or Transferred (status unknown) (%)	2.8	5.6	8.3	0.9	1.4	1.9
TOTAL (%)	100.0	100.0	100.0	100.0	100.0	100.0
Total % known died on waiting list or after transplant	11.1	12.5	15.3	8.4	10.7	12.2
Total % known died or removed as unstable	13.9	15.3	19.4	12.8	16.6	19.0
Total % removed for transplant	26.4	40.3	48.6	40.8	50.9	56.4
Total % with known functioning transplant (alive)	26.4	38.9	33.3	37.9	45.2	33.9

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



B. Waiting List Information

Table B7. Percent of candidates with deceased donor transplants: demographic characteristics
Candidates registered on the waiting list between 01/01/2011 and 12/31/2013

Characteristic	N	Percent transplanted at time periods since listing								
		This Center				United States				
		30 day	1 year	2 years	3 years	N	30 day	1 year	2 years	3 years
All	163	8.0	38.7	50.9	53.4	11,092	17.5	54.8	62.9	65.6
Ethnicity/Race*										
White	112	6.2	40.2	49.1	51.8	7,188	17.1	54.4	63.0	65.6
African-American	31	12.9	35.5	58.1	61.3	2,416	16.5	52.4	60.1	63.4
Hispanic/Latino	15	13.3	33.3	46.7	46.7	1,002	19.3	58.1	64.5	67.1
Asian	4	0.0	25.0	50.0	50.0	365	25.8	66.3	73.4	75.1
Other	1	0.0	100.0	100.0	100.0	121	21.5	61.2	69.4	72.7
Unknown	0	--	--	--	--	0	--	--	--	--
Age										
<2 years	24	20.8	45.8	50.0	50.0	728	19.8	62.2	63.0	63.3
2-11 years	17	5.9	41.2	41.2	41.2	530	16.8	64.2	68.5	70.0
12-17 years	25	12.0	52.0	72.0	76.0	449	32.7	75.1	81.3	82.9
18-34 years	28	0.0	32.1	60.7	60.7	1,091	17.1	52.0	60.6	64.0
35-49 years	15	13.3	46.7	53.3	53.3	2,033	15.5	49.5	59.3	62.3
50-64 years	41	4.9	29.3	39.0	46.3	4,692	16.2	52.4	61.6	65.1
65+ years	13	0.0	30.8	38.5	38.5	1,566	19.2	58.5	66.0	67.4
Other (includes prenatal)	0	--	--	--	--	3	0.0	0.0	0.0	0.0
Gender										
Male	104	4.8	36.5	48.1	51.0	7,862	15.7	52.6	61.5	64.6
Female	59	13.6	42.4	55.9	57.6	3,230	21.7	60.1	66.3	68.1

* 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%.



B. Waiting List Information

Table B8. Percent of candidates with deceased donor transplants: medical characteristics
Candidates registered on the waiting list between 01/01/2011 and 12/31/2013

Characteristic	N	Percent transplanted at time periods since listing								
		This Center				United States				
		30 day	1 year	2 years	3 years	N	30 day	1 year	2 years	3 years
All	163	8.0	38.7	50.9	53.4	11,092	17.5	54.8	62.9	65.6
Blood Type										
O	84	7.1	35.7	47.6	48.8	4,884	11.1	45.6	54.5	58.4
A	52	9.6	42.3	55.8	57.7	4,162	22.0	60.7	68.7	70.5
B	15	0.0	26.7	46.7	60.0	1,522	19.5	60.9	68.5	70.9
AB	12	16.7	58.3	58.3	58.3	521	35.3	75.8	79.5	79.7
Previous Transplant										
Yes	13	0.0	46.2	53.8	53.8	554	16.2	44.9	52.3	54.3
No	150	8.7	38.0	50.7	53.3	10,538	17.6	55.3	63.5	66.2
Primary Disease										
Cardiomyopathy	67	10.4	35.8	56.7	61.2	5,839	19.4	56.8	65.2	68.2
Coronary Artery Disease	26	7.7	42.3	46.2	46.2	3,366	15.5	53.7	62.7	65.6
Retransplant/Graft Failure	12	0.0	50.0	58.3	58.3	482	17.0	45.6	53.1	55.4
Valvular Heart Disease	1	0.0	0.0	0.0	0.0	159	17.6	50.3	56.6	59.1
Congenital Heart Disease	28	10.7	32.1	39.3	39.3	1,102	14.7	53.4	58.2	59.4
Other	29	3.4	44.8	51.7	55.2	144	11.1	43.8	50.7	51.4
Missing	0	--	--	--	--	0	--	--	--	--
Medical Urgency Status at Listing										
Old Status 1	0	--	--	--	--	0	--	--	--	--
Status 1A	53	18.9	49.1	60.4	60.4	3,525	33.2	69.2	72.5	73.2
Status 1B	90	3.3	35.6	46.7	48.9	4,080	14.1	56.9	66.1	69.6
Status 2	17	0.0	29.4	47.1	58.8	3,095	5.5	38.0	50.2	54.2
Unknown	3	0.0	0.0	33.3	33.3	392	5.9	36.0	44.4	45.9



B. Waiting List Information

Table B9. Time to transplant for waiting list candidates*

Candidates registered on the waiting list between 01/01/2011 and 06/30/2016

Percentile	Center	Months to Transplant**		U.S.
		OPO/DSA	Region	
5th	1.0	0.8	0.3	0.3
10th	1.8	1.6	0.6	0.6
25th	4.9	4.3	2	1.9
50th (median time to transplant)	19.4	17.4	9.3	8.6
75th	Not Observed	Not Observed	Not Observed	Not Observed

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

** Censored on 12/31/2016. Calculated as the months after listing, during which the corresponding percent of all patients initially listed had received a transplant.



C. Transplant Information

Table C1D. Deceased donor transplant recipient demographic characteristics
Patients transplanted between 01/01/2016 and 12/31/2016

Characteristic	Percentage in each category		
	Center (N=44)	Region (N=402)	U.S. (N=3,190)
Ethnicity/Race (%)*			
White	59.1	50.2	61.3
African-American	29.5	35.6	22.1
Hispanic/Latino	11.4	12.7	11.4
Asian	0.0	1.0	4.0
Other	0.0	0.5	1.1
Unknown	0.0	0.0	0.0
Age (%)			
<2 years	22.7	5.7	5.1
2-11 years	9.1	6.7	4.5
12-17	9.1	5.7	4.4
18-34	9.1	8.5	9.1
35-49 years	15.9	19.9	16.9
50-64 years	27.3	40.0	42.6
65+ years	6.8	13.4	17.5
Unknown	0.0	0.0	0.0
Gender (%)			
Male	63.6	69.9	71.6
Female	36.4	30.1	28.4

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



C. Transplant Information

Table C2D. Deceased donor transplant recipient medical characteristics
Patients transplanted between 01/01/2016 and 12/31/2016

Characteristic	Percentage in each category		
	Center (N=44)	Region (N=402)	U.S. (N=3,190)
Blood Type (%)			
O	29.5	38.6	40.1
A	50.0	41.5	39.5
B	18.2	14.4	15.2
AB	2.3	5.5	5.2
Previous Transplant (%)			
Yes	4.5	4.0	3.4
No	95.5	96.0	96.6
Body Mass Index (%)			
0-20	36.4	21.6	18.1
21-25	18.2	25.4	27.7
26-30	36.4	29.1	30.5
31+	9.1	23.6	23.0
Unknown	0.0	0.2	0.8
Primary Disease (%)			
Cardiomyopathy	50.0	63.9	60.1
Coronary Artery Disease	22.7	23.4	28.9
Retransplant/Graft Failure	0.0	0.0	0.0
Valvular Heart Disease	0.0	1.0	1.0
Congenital Heart Disease	27.3	11.2	9.2
Other	0.0	0.5	0.7
Missing	0.0	0.0	0.1
Medical Urgency Status at Transplant (%)			
Status 1A	72.7	63.2	69.2
Status 1B	27.3	35.1	28.5
Status 2	0.0	1.7	2.3
Temporarily Inactive	0.0	0.0	0.0
Recipient Medical Condition at Transplant (%)			
Not Hospitalized	38.6	46.0	50.9
Hospitalized	13.6	11.2	16.9
ICU	47.7	42.8	31.8
Unknown	0.0	0.0	0.4
Recipient Mechanical, Ventilated or Organ-Perfusion Support Status at Transplant (%)			
No Support Mechanism	13.6	18.2	14.5
Devices*	47.7	44.5	55.8
Other Support Mechanism	38.6	37.3	29.5
Unknown	0.0	0.0	0.2

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



C. Transplant Information

Table C3D. Deceased donor characteristics
Transplants performed between 01/01/2016 and 12/31/2016

Donor Characteristic	Percentage in each category		
	Center (N=44)	Region (N=402)	U.S. (N=3,190)
Cause of Death (%)			
Deceased: Stroke	15.9	14.2	17.7
Deceased: MVA	18.2	29.6	20.3
Deceased: Other	65.9	56.2	62.0
Ethnicity/Race (%)*			
White	59.1	59.5	63.2
African-American	31.8	26.1	17.9
Hispanic/Latino	9.1	13.2	15.9
Asian	0.0	1.2	2.2
Other	0.0	0.0	0.8
Not Reported	0.0	0.0	0.0
Age (%)			
<2 years	20.5	5.2	4.5
2-11 years	9.1	5.7	4.7
12-17	20.5	10.7	8.5
18-34	34.1	52.5	50.0
35-49 years	13.6	20.6	24.9
50-64 years	2.3	5.2	7.4
65+ years	0.0	0.0	0.1
Unknown	0.0	0.0	0.0
Gender (%)			
Male	59.1	73.6	68.2
Female	40.9	26.4	31.8
Blood Type (%)			
O	36.4	53.5	50.7
A	45.5	32.8	35.6
B	18.2	12.2	11.5
AB	0.0	1.5	2.1
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

Table C4D. Deceased donor transplant characteristics
Transplants performed between 01/01/2016 and 12/31/2016

Transplant Characteristic	Percentage in each category		
	Center (N=44)	Region (N=402)	U.S. (N=3,190)
Total Ischemic Time (Minutes): Local (%)			
Deceased: 0-90 min	5.6	6.3	7.3
Deceased: 91-180 min	22.2	51.9	55.8
Deceased: 181-270 min	72.2	36.7	32.9
Deceased: 271-360 min	0.0	4.2	2.4
Deceased: 361+ min	0.0	0.8	0.6
Not Reported	0.0	0.0	0.9
Total Ischemic Time (Minutes): Shared (%)			
Deceased: 0-90 min	0.0	0.0	1.1
Deceased: 91-180 min	15.4	20.0	14.1
Deceased: 181-270 min	84.6	63.0	69.7
Deceased: 271-360 min	0.0	13.9	12.0
Deceased: 361+ min	0.0	3.0	2.7
Not Reported	0.0	0.0	0.4
Procedure Type (%)			
Heart alone	95.5	94.8	95.0
Heart and another organ	4.5	5.2	5.0
Sharing (%)			
Local	40.9	59.0	61.4
Shared	59.1	41.0	38.6
Median Time in Hospital After Transplant*	18.5 Days	15.0 Days	16.0 Days

* Multiple organ transplants are excluded from this statistic.



C. Transplant Information

Table C5D. Adult (18+) 1-month survival with a functioning deceased donor graft
Single organ transplants performed between 01/01/2014 and 06/30/2016
Deaths and retransplants are considered graft failures

	FLUF	U.S.
Number of transplants evaluated	48	5,584
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	97.92%	96.13%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	96.59%	--
Number of observed graft failures (including deaths) during the first month after transplant	1	216
Number of expected graft failures (including deaths) during the first month after transplant	1.68	--
Estimated hazard ratio*	0.82	--
95% credible interval for the hazard ratio**	[0.17, 1.97]	--

* 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, [0.17, 1.97], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 18% lower risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 83% reduced risk up to 97% increased risk.

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

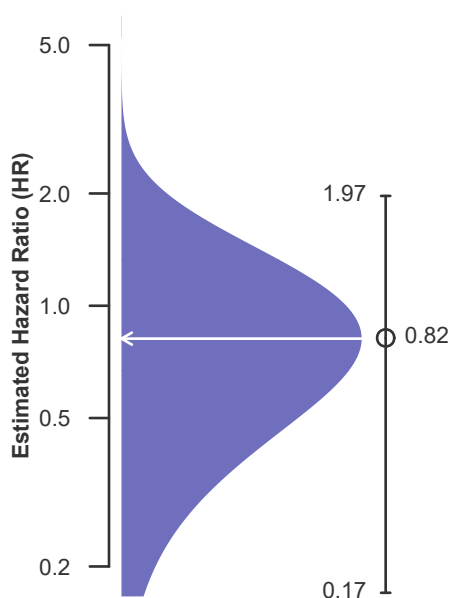
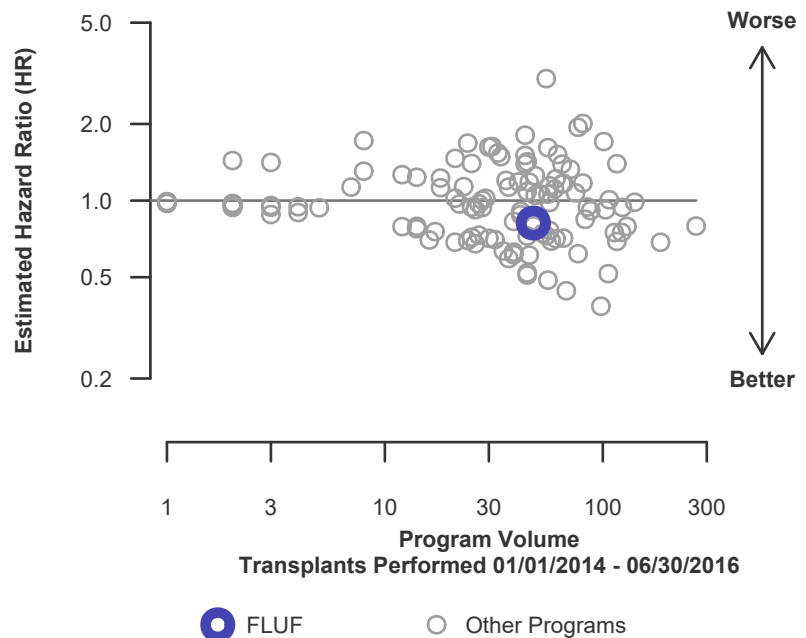


Figure C2D. Adult (18+) 1-month deceased donor graft failure HR program comparison





C. Transplant Information

Table C6D. Adult (18+) 1-year survival with a functioning deceased donor graft
Single organ transplants performed between 01/01/2014 and 06/30/2016
Deaths and retransplants are considered graft failures

	FLUF	U.S.
Number of transplants evaluated	48	5,584
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	93.75%	90.79%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	91.81%	--
Number of observed graft failures (including deaths) during the first year after transplant	3	492
Number of expected graft failures (including deaths) during the first year after transplant	3.91	--
Estimated hazard ratio*	0.85	--
95% credible interval for the hazard ratio**	[0.27, 1.73]	--

* 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, 1.73], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 15% lower risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 73% reduced risk up to 73% increased risk.

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

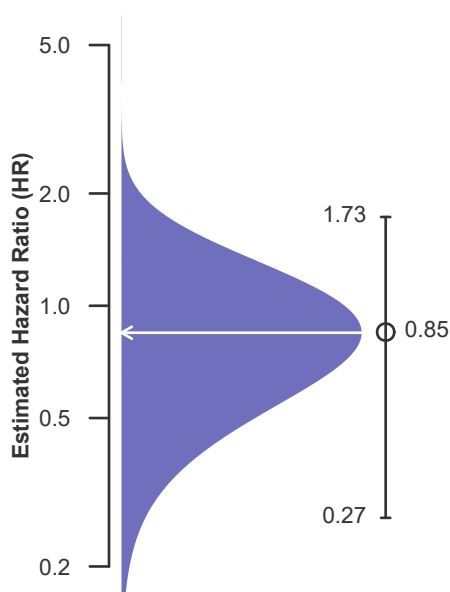
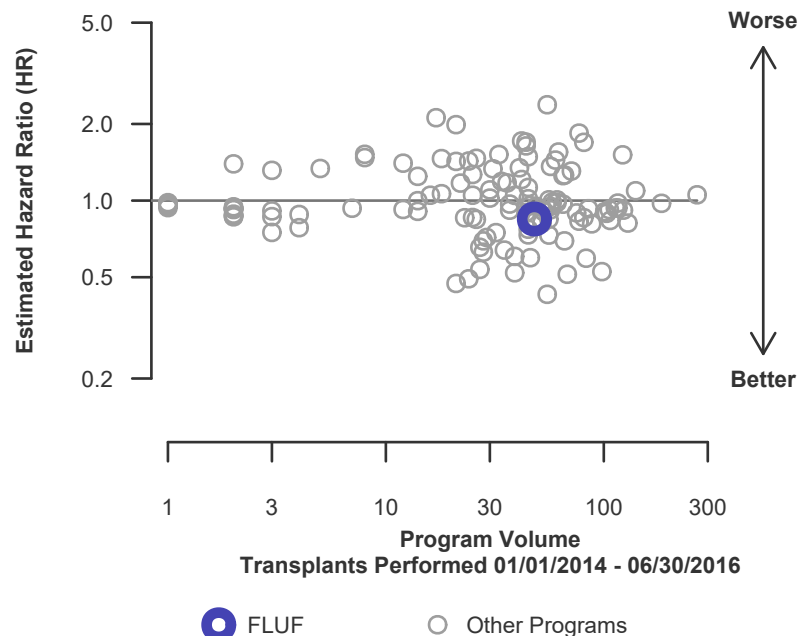


Figure C4D. Adult (18+) 1-year deceased donor graft failure HR program comparison





C. Transplant Information

Table C7D. Adult (18+) 3-year survival with a functioning deceased donor graft
Single organ transplants performed between 07/01/2011 and 12/31/2013
Deaths and retransplants are considered graft failures

	FLUF	U.S.
Number of transplants evaluated	38	4,888
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	76.32%	84.37%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	85.02%	--
Number of observed graft failures (including deaths) during the first 3 years after transplant	9	764
Number of expected graft failures (including deaths) during the first 3 years after transplant	5.30	--
Estimated hazard ratio*	1.51	--
95% credible interval for the hazard ratio**	[0.75, 2.52]	--

* 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, [0.75, 2.52], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 51% higher risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 25% reduced risk up to 152% increased risk.

Figure C5D. Adult (18+) 3-year deceased donor graft failure HR estimate

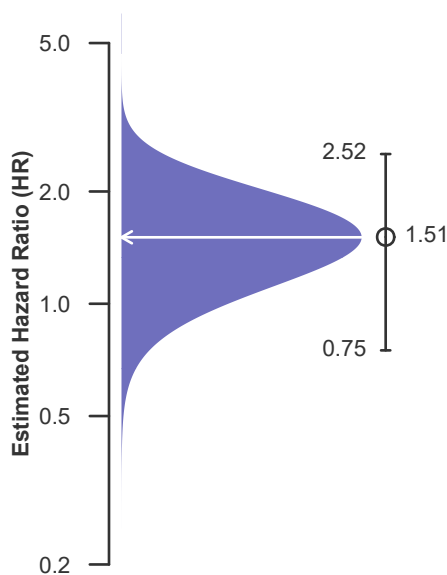
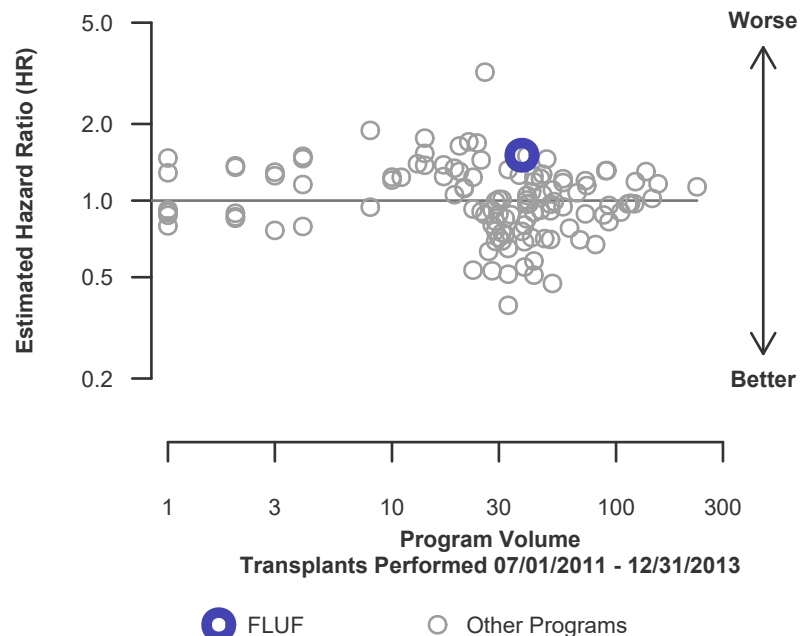


Figure C6D. Adult (18+) 3-year deceased donor graft failure HR program comparison





C. Transplant Information

Table C8D. Pediatric (<18) 1-month survival with a functioning deceased donor graft
Single organ transplants performed between 01/01/2014 and 06/30/2016
Deaths and retransplants are considered graft failures

	FLUF	U.S.
Number of transplants evaluated	42	1,088
Estimated probability of surviving with a functioning graft at 1 month (unadjusted for patient and donor characteristics)	100.00%	97.24%
Expected probability of surviving with a functioning graft at 1 month (adjusted for patient and donor characteristics)	97.53%	--
Number of observed graft failures (including deaths) during the first month after transplant	0	30
Number of expected graft failures (including deaths) during the first month after transplant	1.05	--
Estimated hazard ratio*	0.66	--
95% credible interval for the hazard ratio**	[0.08, 1.83]	--

* 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, [0.08, 1.83], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 34% lower risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 92% reduced risk up to 83% increased risk.

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

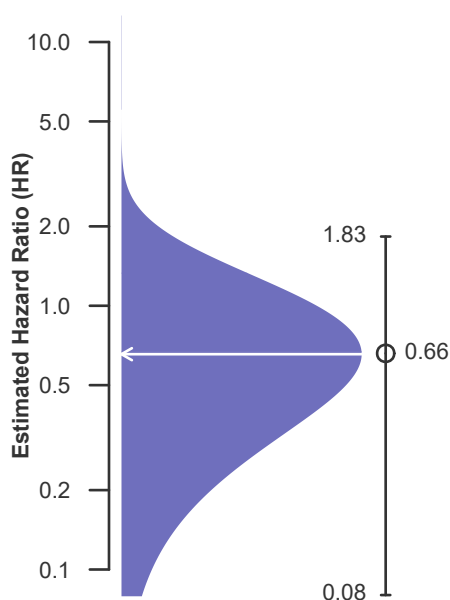
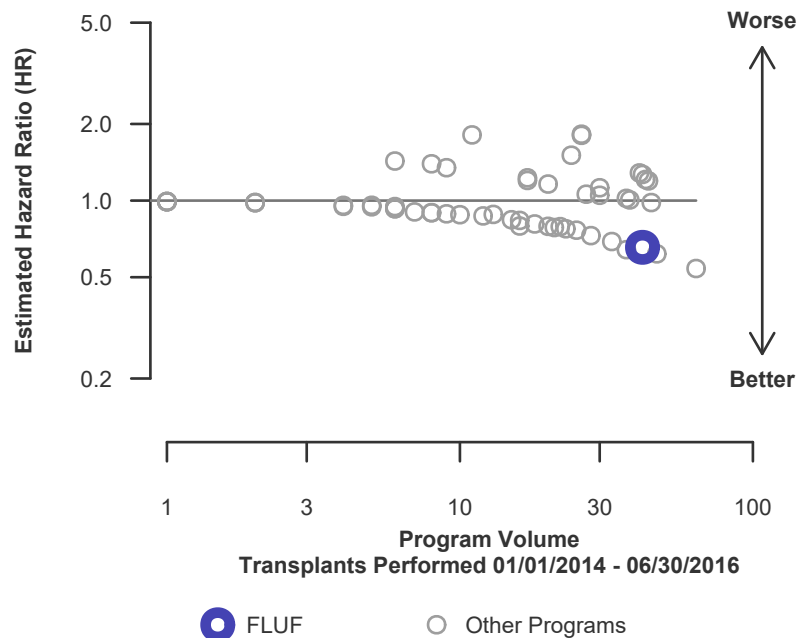


Figure C8D. Pediatric (<18) 1-month deceased donor graft failure HR program comparison





C. Transplant Information

Table C9D. Pediatric (<18) 1-year survival with a functioning deceased donor graft
Single organ transplants performed between 01/01/2014 and 06/30/2016
Deaths and retransplants are considered graft failures

	FLUF	U.S.
Number of transplants evaluated	42	1,088
Estimated probability of surviving with a functioning graft at 1 year (unadjusted for patient and donor characteristics)	100.00%	92.42%
Expected probability of surviving with a functioning graft at 1 year (adjusted for patient and donor characteristics)	93.12%	--
Number of observed graft failures (including deaths) during the first year after transplant	0	78
Number of expected graft failures (including deaths) during the first year after transplant	2.78	--
Estimated hazard ratio*	0.42	--
95% credible interval for the hazard ratio**	[0.05, 1.17]	--

* 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, [0.05, 1.17], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 58% lower risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 95% reduced risk up to 17% increased risk.

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

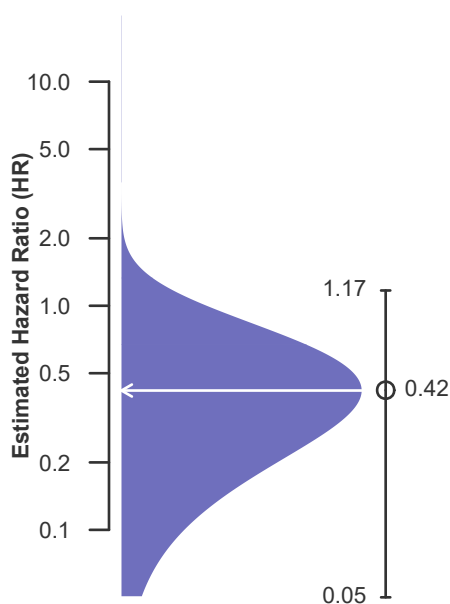
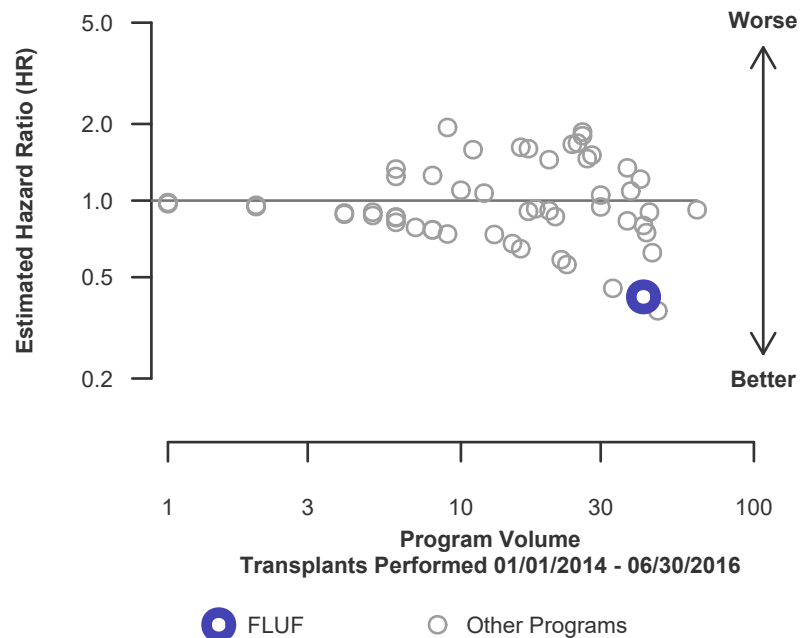


Figure C10D. Pediatric (<18) 1-year deceased donor graft failure HR program comparison





C. Transplant Information

Table C10D. Pediatric (<18) 3-year survival with a functioning deceased donor graft
Single organ transplants performed between 07/01/2011 and 12/31/2013
Deaths and retransplants are considered graft failures

	FLUF	U.S.
Number of transplants evaluated	29	965
Estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics)	82.76%	87.98%
Expected probability of surviving with a functioning graft at 3 years (adjusted for patient and donor characteristics)	87.99%	--
Number of observed graft failures (including deaths) during the first 3 years after transplant	5	116
Number of expected graft failures (including deaths) during the first 3 years after transplant	3.29	--
Estimated hazard ratio*	1.32	--
95% credible interval for the hazard ratio**	[0.53, 2.47]	--

* 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, [0.53, 2.47], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 32% higher risk of graft failure compared to an average program, but FLUF's performance could plausibly range from 47% reduced risk up to 147% increased risk.

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

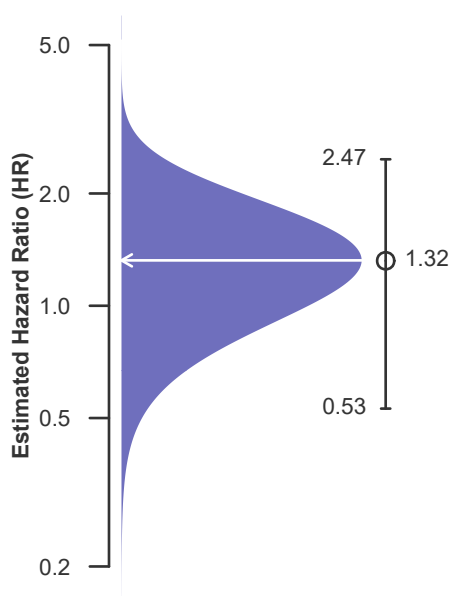
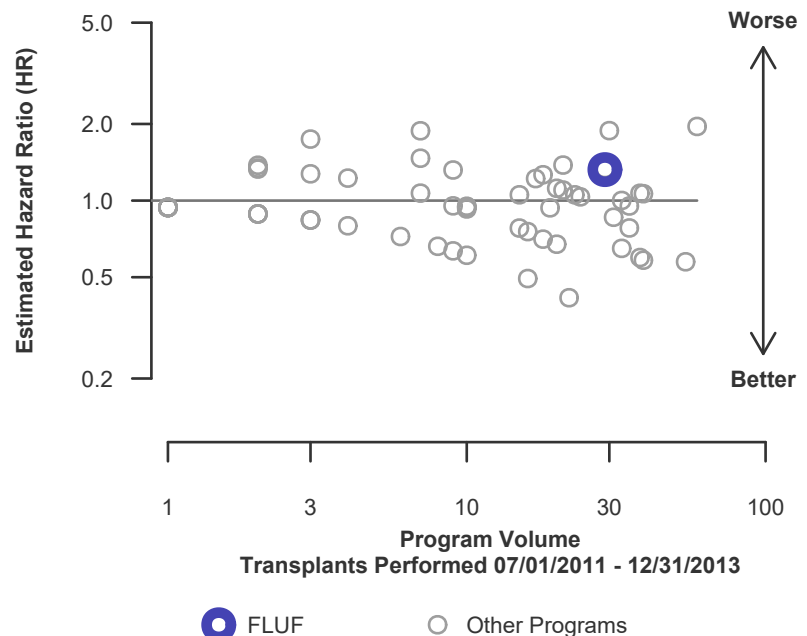


Figure C12D. Pediatric (<18) 3-year deceased donor graft failure HR program comparison





C. Transplant Information

Table C11D. Adult (18+) 1-month patient survival (deceased donor graft recipients)
Single organ transplants performed between 01/01/2014 and 06/30/2016
Retransplants excluded

	FLUF	U.S.
Number of transplants evaluated	46	5,454
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	97.83%	96.30%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	96.64%	--
Number of observed deaths during the first month after transplant	1	202
Number of expected deaths during the first month after transplant	1.58	--
Estimated hazard ratio*	0.84	--
95% credible interval for the hazard ratio**	[0.17, 2.02]	--

* 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, [0.17, 2.02], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 16% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 83% reduced risk up to 102% increased risk.

Figure C13D. Adult (18+) 1-month patient death HR estimate (deceased donor grafts)

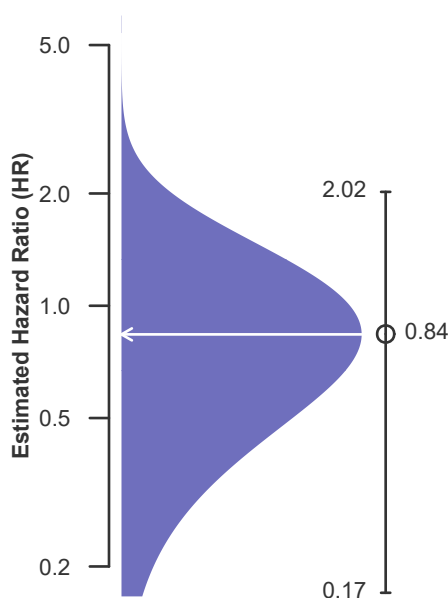
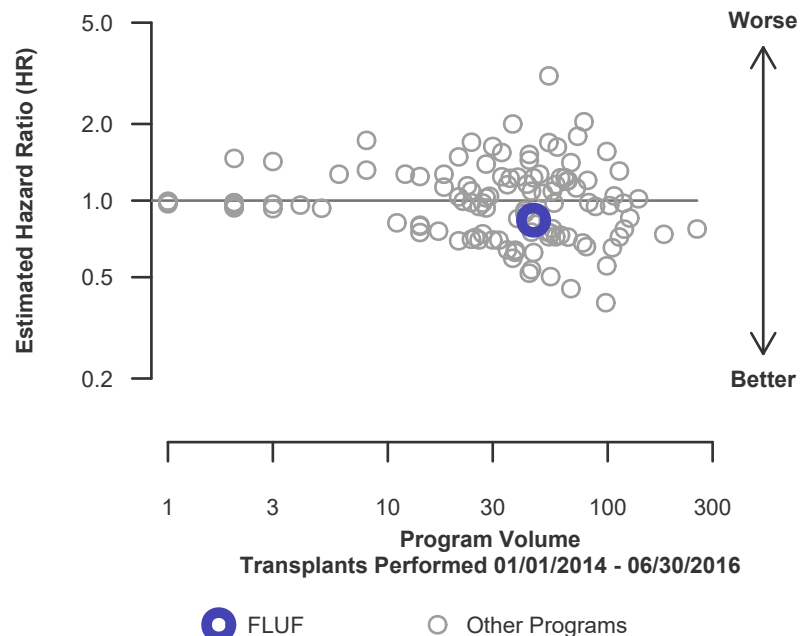


Figure C14D. Adult (18+) 1-month patient death HR program comparison (deceased donor grafts)





C. Transplant Information

Table C12D. Adult (18+) 1-year patient survival (deceased donor graft recipients)
Single organ transplants performed between 01/01/2014 and 06/30/2016
Retransplants excluded

	FLUF	U.S.
Number of transplants evaluated	46	5,454
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	93.48%	91.05%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	91.85%	--
Number of observed deaths during the first year after transplant	3	466
Number of expected deaths during the first year after transplant	3.71	--
Estimated hazard ratio*	0.88	--
95% credible interval for the hazard ratio**	[0.28, 1.79]	--

* 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, [0.28, 1.79], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 12% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 72% reduced risk up to 79% increased risk.

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

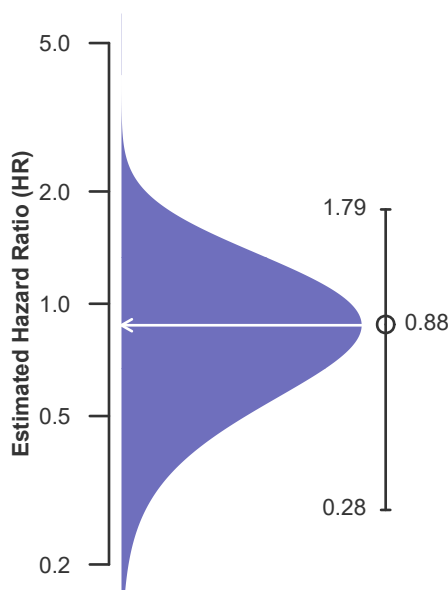
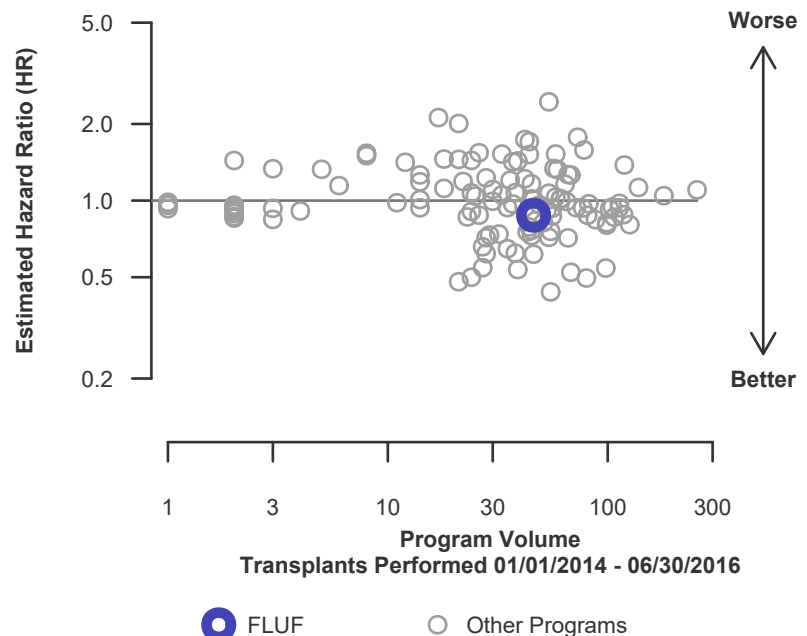


Figure C16D. Adult (18+) 1-year patient death HR program comparison (deceased donor grafts)





C. Transplant Information

Table C13D. Adult (18+) 3-year patient survival (deceased donor graft recipients)
Single organ transplants performed between 07/01/2011 and 12/31/2013
Retransplants excluded

	FLUF	U.S.
Number of transplants evaluated	35	4,735
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	80.00%	85.22%
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	85.94%	--
Number of observed deaths during the first 3 years after transplant	7	700
Number of expected deaths during the first 3 years after transplant	4.72	--
Estimated hazard ratio*	1.34	--
95% credible interval for the hazard ratio**	[0.61, 2.35]	--

* 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, [0.61, 2.35], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 34% higher risk of patient death compared to an average program, but FLUF's performance could plausibly range from 39% reduced risk up to 135% increased risk.

Figure C17D. Adult (18+) 3-year patient death HR estimate (deceased donor grafts)

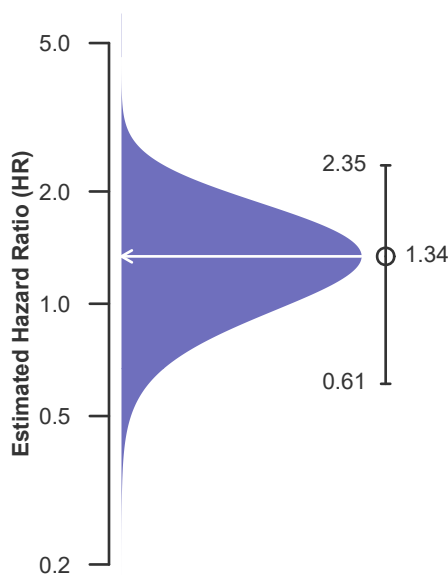
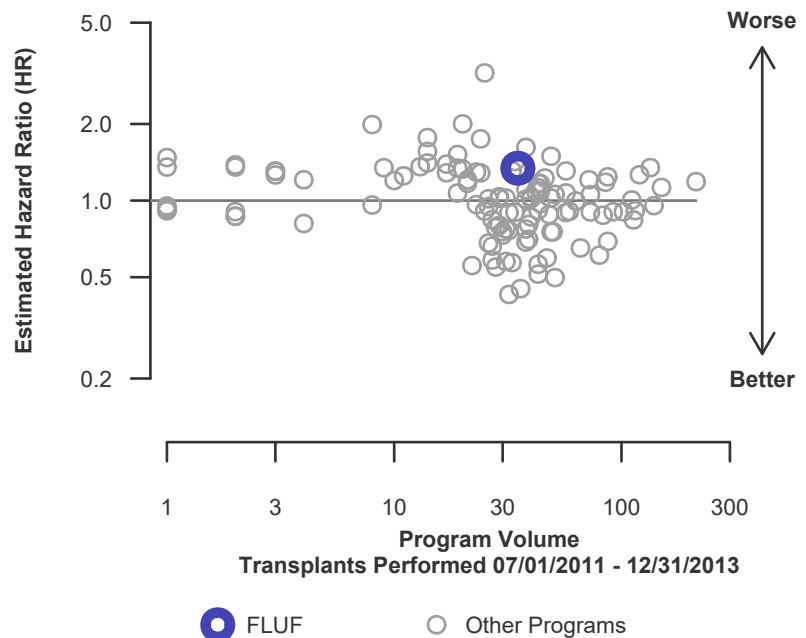


Figure C18D. Adult (18+) 3-year patient death HR program comparison (deceased donor grafts)





C. Transplant Information

Table C14D. Pediatric (<18) 1-month patient survival (deceased donor graft recipients)
Single organ transplants performed between 01/01/2014 and 06/30/2016
Retransplants excluded

	FLUF	U.S.
Number of transplants evaluated	40	1,037
Estimated probability of surviving at 1 month (unadjusted for patient and donor characteristics)	100.00%	97.40%
Expected probability of surviving at 1 month (adjusted for patient and donor characteristics)	97.84%	--
Number of observed deaths during the first month after transplant	0	27
Number of expected deaths during the first month after transplant	0.88	--
Estimated hazard ratio*	0.70	--
95% credible interval for the hazard ratio**	[0.08, 1.94]	--

* 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, [0.08, 1.94], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 30% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 92% reduced risk up to 94% increased risk.

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

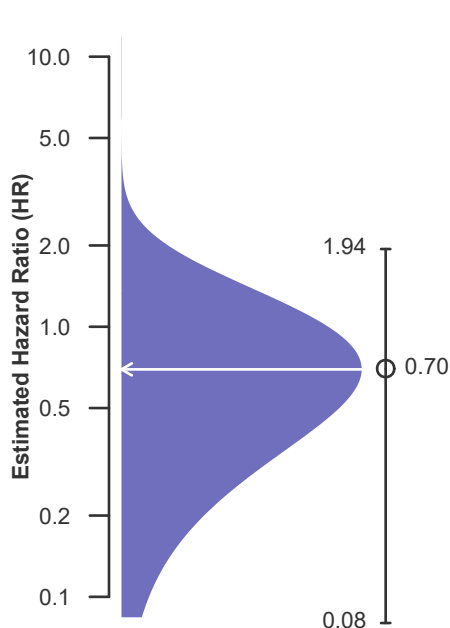
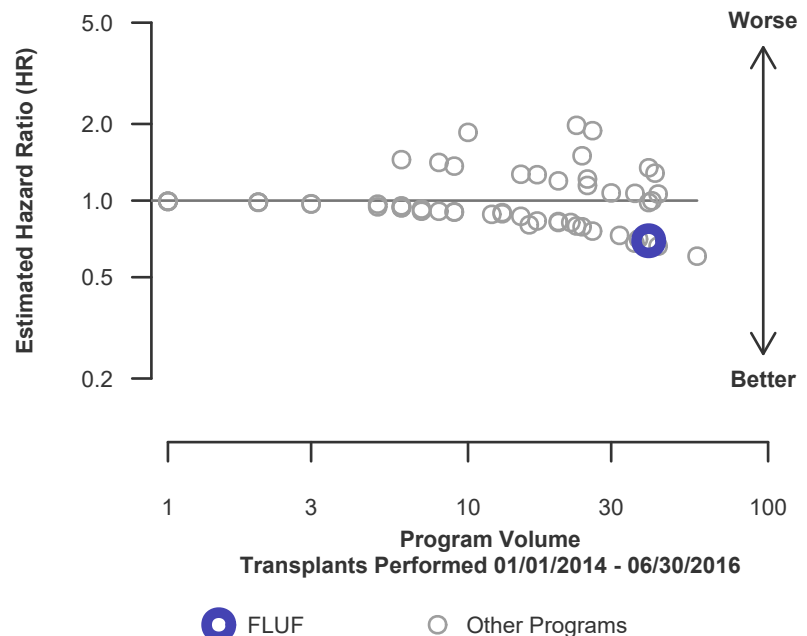


Figure C20D. Pediatric (<18) 1-month patient death HR program comparison (deceased donor grafts)





C. Transplant Information

Table C15D. Pediatric (<18) 1-year patient survival (deceased donor graft recipients)
Single organ transplants performed between 01/01/2014 and 06/30/2016
Retransplants excluded

	FLUF	U.S.
Number of transplants evaluated	40	1,037
Estimated probability of surviving at 1 year (unadjusted for patient and donor characteristics)	100.00%	92.52%
Expected probability of surviving at 1 year (adjusted for patient and donor characteristics)	93.66%	--
Number of observed deaths during the first year after transplant	0	73
Number of expected deaths during the first year after transplant	2.39	--
Estimated hazard ratio*	0.46	--
95% credible interval for the hazard ratio**	[0.06, 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 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, [0.06, 1.27], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 54% lower risk of patient death compared to an average program, but FLUF's performance could plausibly range from 94% reduced risk up to 27% increased risk.

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

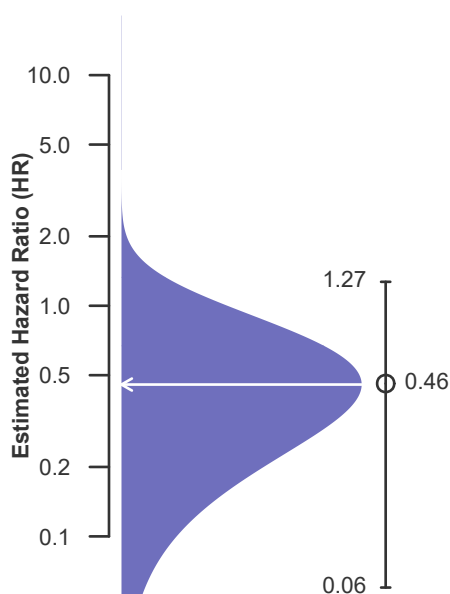
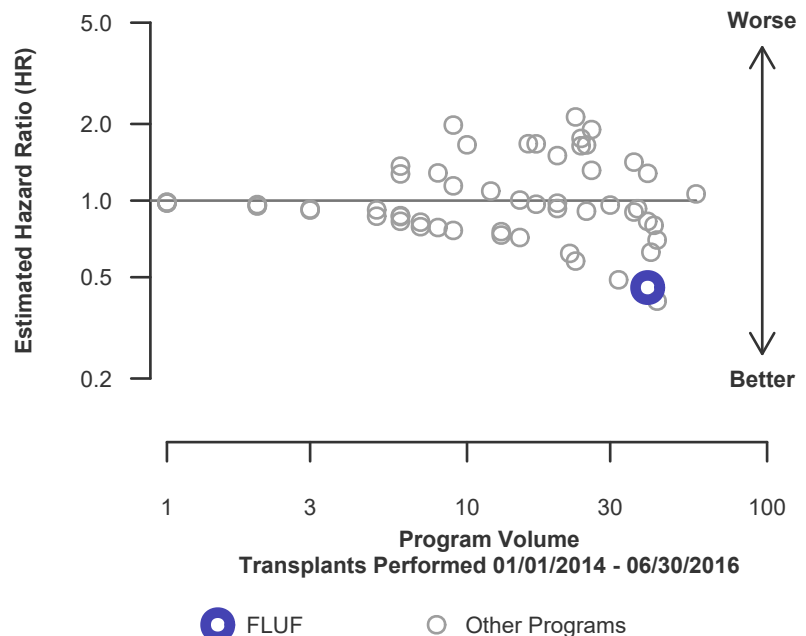


Figure C22D. Pediatric (<18) 1-year patient death HR program comparison (deceased donor grafts)





C. Transplant Information

Table C16D. Pediatric (<18) 3-year patient survival (deceased donor graft recipients)
Single organ transplants performed between 07/01/2011 and 12/31/2013
Retransplants excluded

	FLUF	U.S.
Number of transplants evaluated	27	909
Estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics)	81.48%	88.89%
Expected probability of surviving at 3 years (adjusted for patient and donor characteristics)	88.90%	--
Number of observed deaths during the first 3 years after transplant	5	101
Number of expected deaths during the first 3 years after transplant	2.79	--
Estimated hazard ratio*	1.46	--
95% credible interval for the hazard ratio**	[0.59, 2.72]	--

* 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, 2.72], indicates the location of FLUF's true hazard ratio with 95% probability. The best estimate is 46% higher risk of patient death compared to an average program, but FLUF's performance could plausibly range from 41% reduced risk up to 172% increased risk.

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

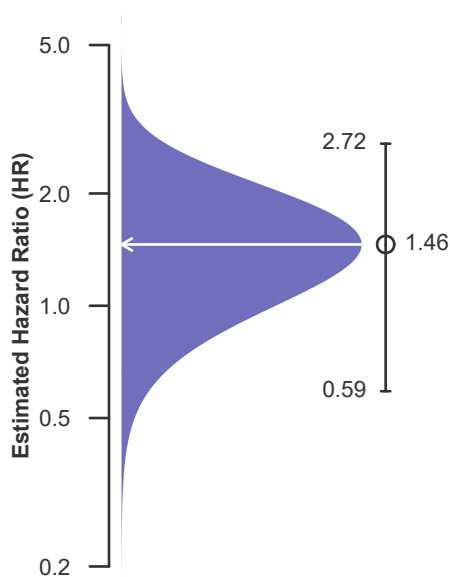
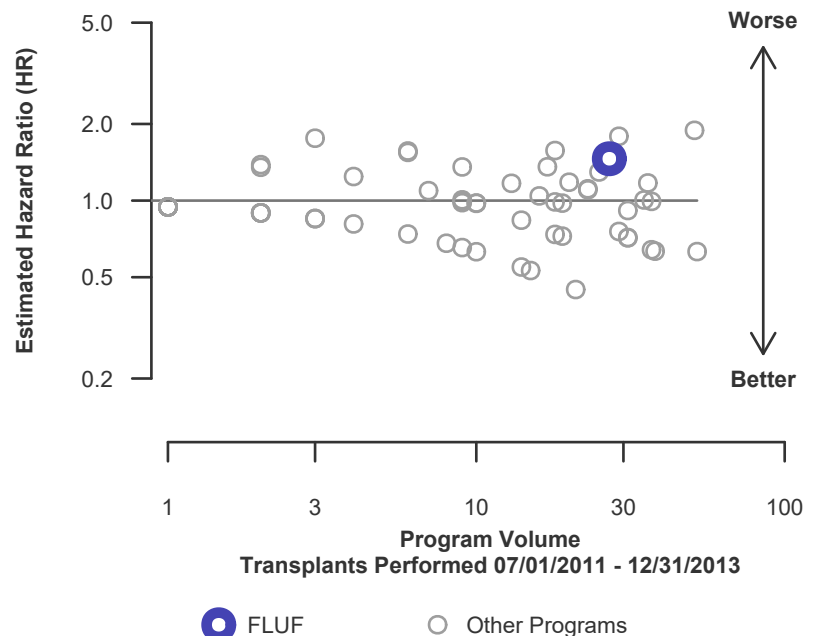


Figure C24D. Pediatric (<18) 3-year patient death HR program comparison (deceased donor grafts)





C. Transplant Information

Table C17. Multi-organ transplant graft survival: 01/01/2014 - 06/30/2016

Adult (18+) Transplants

Transplant Type	First-Year Outcomes					
	Transplants Performed		Heart Graft Failures		Estimated Heart Graft Survival	
	FLUF-TX1	USA	FLUF-TX1	USA	FLUF-TX1	USA
Kidney-Heart	3	305	0	38	100.0%	87.2%

Pediatric (<18) Transplants

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

Table C18. Multi-organ transplant patient survival: 01/01/2014 - 06/30/2016

Adult (18+) Transplants

Transplant Type	First-Year Outcomes					
	Transplants Performed		Patient Deaths		Estimated Patient Survival	
	FLUF-TX1	USA	FLUF-TX1	USA	FLUF-TX1	USA
Kidney-Heart	3	305	0	37	100.0%	87.5%

Pediatric (<18) Transplants

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