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This report contains a wide range of useful information about the operations and performance of the Organ Procurement Organization (OPO). The report is divided into seven main sections:

A. Description of the Donation Service Area (DSA) Served by OHLC
B. US Population Density, Deaths, Death Rates, and Donations
C. Organ Utilization
D. Description of Donors Recovered by OHLC
E. Programs Transplanting Organs Procured by OHLC
F. Transplants Facilitated by OHLC
G. Counties Served by OHLC

Some common abbreviations are used throughout the report:

Organ Designators:
HR: Heart
IN: Intestine
KI: Kidney
LI: Liver
LU: Lung
PA: Pancreas

Other Abbreviations:
DSA: Donation Service Area
DBD: Donation after Brain Death
DCD: Donation after Circulatory Death

Section A: Description of the Donation Service Area Served by OHLC

Section A provides a broad geographic overview of the area of the United States served by the OPO. Figure A1 shows the DSA within the context of the nation with the location of the OPO’s headquarters indicated on the map. Figure A2 zooms in on the OPO’s DSA and highlights counties served by the OPO. SRTR staff worked with each OPO during 2013 to determine the list of counties functionally served by the OPO. This list may not necessarily match the list of official CMS-designated counties for each OPO. For a full description of the counties served, see Section G. Figure A2 also shows the locations of transplant programs within the DSA. All transplant programs within the DSA are identified in Table A1. Note that only programs that performed at least one transplant of the various types from 07/01/2018 to 06/30/2019 are listed in Table A1.
Section B: US Population Density, Deaths, Death Rates, and Donations

Section B describes the population of the US served by the OPO. Figure B1 provides a map of the population density of the US with the DSA highlighted. Summary statistics are provided for the OPO along with an indication of where the OPO ranks among the 58 OPOs. Figures B2 and B3 are similar, but provide different perspectives, with Figure B2 focusing on deaths per 1000 population and Figure B3 focusing on deaths per 1000 square miles covered by the OPO. Note that each of these maps, population data are derived from the US Census Bureau. For a more detailed description of the counties served by this OPO, see section G.

Table B1 provides counts of deaths meeting the eligible death definition (as reported by each donor hospital) along with counts of donors procured by the OPO (total donors and those meeting the eligible death definition). To contextualize these numbers, minimum, maximum, and average values for all 58 OPOs are provided. The observed donation rate per 100 eligible deaths and the expected donation rate per 100 eligible deaths are provided. The expected donation rate is determined from a statistical model and is described in the OSR Technical Methods document. The standardized donation rate ratio is the observed donation rate divided by the expected donation rate. The P Value indicates if the standardized donation rate ratio is statistically significantly different from 1.0. If the P Value is less than 0.05, we have evidence that the standardized ratio is either higher or lower than expected and that this difference is likely not due to chance alone. Additionally, the 95% confidence interval (CI) of the standardized donation rate ratio will not include 1.0 if the P Value is less than 0.05. The standardized donation rate ratio is put in context of all 58 OPOs in Figure B4. Figure B4 is arranged by the number of eligible deaths within each DSA so that you can more easily compare the OPO with OPOs of similar size. Finally, trends in donations per 100 eligible deaths over the five most recent one-year periods are shown in Figure B5.

Table B2 provides counts of eligible deaths and actual donors procured from each of the donor hospitals served by the OPO. “Additional Donors” are those donors that did not meet the eligible death definition. Observed and expected donation rates per 100 eligible death are provided for each donor hospital, but tests of whether each hospitals donation rate is significantly higher or lower than expected are not performed due to generally small sample sizes within each donor hospital.

Section C: Organ Utilization

Section C begins by providing 5-year trends in the numbers of organs transplanted by organ type and donor type (donations after brain death [DBD] and donations after circulatory death [DCD]). Figure C1, Figure C2, and Figure C3 present counts of transplants in total (Figure C1), for DBD donors (Figure C2), and for DCD donors (Figure C3). For the purpose of counting transplants, right and left kidneys are counted separately, as are right and left lungs. The “Donors” count simply counts the donors from whom at least one organ was recovered for the purpose of transplant. Table C1 then provides a full description of the numbers of donors authorized by each organ type along with the
ultimate disposition of the organs for the most recent one-year period. In Table C1, kidneys and lungs are counted individually yielding approximately twice the number of organs authorized when compared to the other organs. Table C2 presents organ-specific donation rates per 100 eligible deaths. Expected rates are based on a statistical model detailed in the OSR Technical Methods document. If the P Value is less than 0.05, we have evidence that the difference between the observed and expected organ-specific donation rate is not simply due to chance. Figure C4 presents the standardized organ-specific donation rate ratios along with their 95% confidence intervals (CI).

Figures C5 and C6 present organs recovered per donor and organs transplanted per donor, respectively. Each of these figures presents where the OPO stands relative to all 58 OPOs with the OPO’s performance indicated by the diamond. The distribution of all 58 OPOs is shown by the bell-shaped curve with the national average of all 58 OPOs indicated by the horizontal line. Trends in organs transplanted per donor over the previous five 1-year periods are shown in Figure C7.

Table C3 presents the Observed vs. Expected organ yields for the most recent 2-year period. For a full description of the models used by the SRTR to estimate expected organ yields, please visit our website at www.srtr.org. The Observed to Expected (O/E) organ-specific ratios are then presented graphically in Figure C8 so that it can be seen where the OPO stands relative to the other OPOs. In Figure C8, the x-axis is the number of donors procured by each OPO so that one can compare the OPO with other OPOs that are relatively the same size.

Figures C9, C10, and C11 present data specific to donors after brain death (DBD) and donors after circulatory death (DCD). Figure C9 shows 5-year trends in the number of organs transplanted per donor by DBD and DCD status with comparisons to the US as a whole. Figures C10 and C11 present where the OPO stands in relation to all 58 OPOs with regards to organs transplanted per DBD/DCD donor.

Section D: Description of Donors Recovered by OHLC

Section D presents tabular descriptions of the donor recovered by the OPO. Data are shown for the most recent two years with comparisons to the US as a whole. Breakdowns are provided for race, age, gender, blood type, cause of death, and DCD status.

Section E: Programs Transplanting Organs Procured by OHLC

Section E presents “flight maps” showing locations of programs that transplanted organs from the OPO. Separate maps are provided for each organ type. Note that all arrows originate from the location of the OPO’s headquarters rather than the location of each donor hospital. In addition, many programs within the OPO’s DSA will not be visible on the map due to scale. Each map is accompanied by a table providing the full detail of each program transplanting organs recovered by the OPO. Geographic indicators are provided based on whether the program is within the same DSA (Local), within the
same OPTN region but not the same DSA (Regional), or not within the same DSA or OPTN region (National).

Section F: Transplants Facilitated by OHLC

Section F provides tabular descriptions of the recipients that received organs that were procured by the OPO, regardless of where the transplant took place. Separate tables are provided by each organ type along with separate tables for heart-lung recipients and kidney-pancreas recipients. The most recent two years are provided along with data for the US as a whole for the same two periods. Breakdowns are provided by demographic factors (race, age, and gender) and clinical factors (blood type, PRA [kidney, pancreas, and kidney-pancreas only], medical urgency status [if applicable], Expanded Criteria Donor status [kidney only], and primary cause of disease).

Section G: Counties Served by OHLC

Table G1 presents the counties served by the OPO. Counties are ordered alphabetically within state. For the purposes of this report, counties are those actually served by the OPO and do not necessarily reflect CMS assignments. SRTR staff worked closely with the OPOs during 2013 to determine the correct county assignments. Please contact the SRTR at srtr@srtr.org if you feel any counties are assigned in error. If more than one OPO serves different donor hospitals within the same county, the county is indicated as a shared county and the OPO sharing the county is indicated by OPO code. For the purpose of calculating population density, land area, and death rates presented in Section B, the one-to-one CMS county to OPO assignment is used.
A. Description of the Donation Service Area (DSA) Served by OHLC

Figure A1. Donation service area of OHLC

Figure A2. Counties served by OHLC

Table A1. Transplant programs* in OHLC's DSA

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>HR</th>
<th>IN</th>
<th>KI</th>
<th>LI</th>
<th>LU</th>
<th>PA</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Toledo Medical Center (OHCO)</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Performed at least one transplant of that type from 07/01/2018 to 06/30/2019.

(See Tables A1 and G1 for more details)
B. US Population Density, Deaths, Death Rates, and Donations

Figure B1. Population density*

Population of OHLC's DSA: 2,292,932. This ranks 52nd among the 58 DSAs (1st is the highest).

Land area of OHLC's DSA: 9,988 square miles. This ranks 43rd among the 58 DSAs (1st is the highest).

*US Census Bureau, 2018 projected population/2010 land area

Figure B2. Deaths per 1000 population*

Deaths within OHLC's DSA: 23,911. This ranks 46th among the 58 DSAs (1st is the highest).

Death rate within OHLC's DSA: 10.43. This ranks 8th among the 58 DSAs (1st is the highest).

*US Census Bureau, 2018 projected death (includes all deaths, not limited to eligible deaths) and population

Figure B3. Deaths per 1000 square miles*

Deaths per 1000 square miles within OHLC's DSA: 2,394. This ranks 18th among the 58 DSAs (1st is the highest).

*US Census Bureau, 2018 projected death (includes all deaths, not limited to eligible deaths) and population

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA).
B. US Population Density, Deaths, Death Rates, and Donations

Table B1. Measures of donation rate*, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th></th>
<th>OHLC</th>
<th>Min.</th>
<th>Average</th>
<th>Max.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible Deaths</td>
<td>105</td>
<td>39</td>
<td>202.88</td>
<td>615</td>
</tr>
<tr>
<td>Deceased Donors (All)</td>
<td>90</td>
<td>48</td>
<td>192.76</td>
<td>637</td>
</tr>
<tr>
<td>Deceased Donors Meeting Eligibility Criteria</td>
<td>77</td>
<td>29</td>
<td>145.33</td>
<td>474</td>
</tr>
<tr>
<td>Observed Donation Rate Per 100 Eligible Deaths</td>
<td>73.3</td>
<td>56.5</td>
<td>71.6</td>
<td>85.6</td>
</tr>
<tr>
<td>Expected Donation Rate Per 100 Eligible Deaths</td>
<td>77.4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standardized Donation Rate Ratio (95% CI)</td>
<td>0.95</td>
<td>(0.82,1.05)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P Value</td>
<td>0.315</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*The donation rate is calculated as the number of deceased donors meeting eligibility criteria per 100 eligible deaths.

Figure B4. Standardized donation rate ratios (observed/expected), 07/01/2018 to 06/30/2019

Figure B5. Donations per 100 eligible deaths, 07/01/2014 to 06/30/2019
Table B2. Measures of donation rates by hospital, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>City, State</th>
<th>Donors Meeting Eligible Death Def.</th>
<th>Eligible Deaths</th>
<th>Observed Donation Rate</th>
<th>Expected Donation Rate</th>
<th>Additional Donors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soin Medical Center</td>
<td>Beavercreek, OH</td>
<td>2</td>
<td>3</td>
<td>66.7</td>
<td>84</td>
<td>1</td>
</tr>
<tr>
<td>Dayton Childrens Medical Center</td>
<td>Dayton, OH</td>
<td>3</td>
<td>3</td>
<td>100</td>
<td>67.9</td>
<td>1</td>
</tr>
<tr>
<td>Grandview Medical Center</td>
<td>Dayton, OH</td>
<td>2</td>
<td>4</td>
<td>50</td>
<td>66.3</td>
<td>1</td>
</tr>
<tr>
<td>Miami Valley Hospital</td>
<td>Dayton, OH</td>
<td>25</td>
<td>38</td>
<td>65.8</td>
<td>74.8</td>
<td>1</td>
</tr>
<tr>
<td>Blanchard Valley Regional Health Center, Findlay</td>
<td>Findlay, OH</td>
<td>1</td>
<td>1</td>
<td>100</td>
<td>83.7</td>
<td>0</td>
</tr>
<tr>
<td>Kettering Memorial Hospital</td>
<td>Kettering, OH</td>
<td>7</td>
<td>7</td>
<td>100</td>
<td>80.5</td>
<td>1</td>
</tr>
<tr>
<td>St Lukes Hosp</td>
<td>Maumee, OH</td>
<td>1</td>
<td>1</td>
<td>100</td>
<td>72.1</td>
<td>1</td>
</tr>
<tr>
<td>Sycamore Medical Center</td>
<td>Miamisburg, OH</td>
<td>2</td>
<td>4</td>
<td>50</td>
<td>76.9</td>
<td>0</td>
</tr>
<tr>
<td>Springfield Regional Medical Center</td>
<td>Springfield, OH</td>
<td>3</td>
<td>3</td>
<td>100</td>
<td>85.7</td>
<td>0</td>
</tr>
<tr>
<td>Promedica Toledo Hospital</td>
<td>Toledo, OH</td>
<td>6</td>
<td>12</td>
<td>50</td>
<td>71.4</td>
<td>2</td>
</tr>
<tr>
<td>St Anne Mercy Hospital</td>
<td>Toledo, OH</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>73.2</td>
<td>0</td>
</tr>
<tr>
<td>St Vincents Mercy Medical Center</td>
<td>Toledo, OH</td>
<td>22</td>
<td>25</td>
<td>88</td>
<td>80.3</td>
<td>4</td>
</tr>
<tr>
<td>University Of Toledo Medical Center</td>
<td>Toledo, OH</td>
<td>2</td>
<td>2</td>
<td>100</td>
<td>77.4</td>
<td>1</td>
</tr>
<tr>
<td>Upper Valley Medical Center</td>
<td>Troy, OH</td>
<td>1</td>
<td>1</td>
<td>100</td>
<td>74</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>77</strong></td>
<td><strong>105</strong></td>
<td><strong>13</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Organ Utilization

Figure C1. Total donors and organs transplanted

![Graph showing total donors and organs transplanted from July 2014 to June 2019.]

Figure C2. DBD donors and organs transplanted

![Graph showing DBD donors and organs transplanted from July 2014 to June 2019.]

Figure C3. DCD donors and organs transplanted

![Graph showing DCD donors and organs transplanted from July 2014 to June 2019.]

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


C. Organ Utilization

Table C1. Organ utilization, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Organ</th>
<th>Organs Authorized</th>
<th>Not Recovered*</th>
<th>Recovered for Transplant, Not for Transplant*</th>
<th>Recovered for Transplant, Transplanted*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart</td>
<td>87</td>
<td>60</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Intestine</td>
<td>87</td>
<td>83</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Kidney</td>
<td>176</td>
<td>4</td>
<td>0</td>
<td>34</td>
</tr>
<tr>
<td>Liver</td>
<td>89</td>
<td>10</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Lung</td>
<td>172</td>
<td>129</td>
<td>13</td>
<td>0</td>
</tr>
<tr>
<td>Pancreas</td>
<td>87</td>
<td>77</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

*Each liver or pancreas segment is counted separately. Pancreas islet cells are not included.

Table C2. Organ specific donation rates per 100 eligible deaths*, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Organ</th>
<th>Observed</th>
<th>Expected</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart</td>
<td>22.9</td>
<td>30.5</td>
<td>0.038</td>
</tr>
<tr>
<td>Kidney</td>
<td>70.5</td>
<td>71.5</td>
<td>0.810</td>
</tr>
<tr>
<td>Liver</td>
<td>64.8</td>
<td>70.3</td>
<td>0.244</td>
</tr>
<tr>
<td>Lung</td>
<td>15.2</td>
<td>18.7</td>
<td>0.311</td>
</tr>
<tr>
<td>Pancreas</td>
<td>9.5</td>
<td>10.2</td>
<td>0.718</td>
</tr>
</tbody>
</table>

*Organ-specific rates are calculated as the number of deceased donors meeting eligibility criteria donating at least one organ of that type per 100 eligible deaths.

Figure C4. Standardized donation rate ratio, 07/01/2018 to 06/30/2019

Figure C5. Organs recovered per donor, 07/01/2018 to 06/30/2019 (unadjusted for donor characteristics)
C. Organ Utilization

Figure C6. Organs transplanted per donor, 07/01/2018 to 06/30/2019 (unadjusted for donor characteristics)

Figure C7. Trends in organs transplanted per donor
C. Organ Utilization

Table C3. Observed and expected organ yield, 07/01/2017 to 06/30/2019

<table>
<thead>
<tr>
<th>Number of Donors: 144</th>
<th>Aggregate Organ</th>
<th>Heart</th>
<th>Intestine</th>
<th>Kidney</th>
<th>Liver</th>
<th>Lung*</th>
<th>Pancreas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observed Number of Transplanted Organs</td>
<td>417</td>
<td>38</td>
<td>3</td>
<td>218</td>
<td>114</td>
<td>30</td>
<td>14</td>
</tr>
<tr>
<td>Expected Number of Transplanted Organs</td>
<td>397</td>
<td>43</td>
<td>1</td>
<td>212</td>
<td>104</td>
<td>23</td>
<td>13</td>
</tr>
<tr>
<td>Observed Number of Transplanted Organs per 100 Donors</td>
<td>289.6</td>
<td>26.4</td>
<td>2.1</td>
<td>151.4</td>
<td>79.2</td>
<td>20.8</td>
<td>9.7</td>
</tr>
<tr>
<td>Expected Number of Transplanted Organs per 100 Donors</td>
<td>275.5</td>
<td>29.9</td>
<td>0.9</td>
<td>147.4</td>
<td>72.4</td>
<td>16</td>
<td>8.9</td>
</tr>
<tr>
<td>Observed per 100 - Expected per 100</td>
<td>14.1</td>
<td>-3.5</td>
<td>1.2</td>
<td>4</td>
<td>6.8</td>
<td>4.8</td>
<td>0.8</td>
</tr>
<tr>
<td>Observed to Expected (O/E) Ratio</td>
<td>1.05</td>
<td>0.88</td>
<td>2.24</td>
<td>1.03</td>
<td>1.09</td>
<td>1.3</td>
<td>1.09</td>
</tr>
<tr>
<td>P Value</td>
<td>0.06</td>
<td>0.20</td>
<td>0.41</td>
<td>0.39</td>
<td>0.01</td>
<td>0.06</td>
<td>0.54</td>
</tr>
</tbody>
</table>

*Lung yield is calculated as the number of donors that had at least one lung transplanted.

Figure C8. Observed/expected yield by organ, 07/01/2017 to 06/30/2019 (adjusted)
C. Organ Utilization

Figure C9. Trends in total organs transplanted per DBD/DCD donor

![Bar chart showing trends in total organs transplanted per DBD/DCD donor from Jul-2014 to Jun-2019 for DBD(OHLC), DBD(US), DCD(OHLC), and DCD(US).]

Figure C10. Total organs transplanted per DBD donor, 07/01/2018 to 06/30/2019 (unadjusted for donor characteristics)

![Graph showing total organs transplanted per DBD donor by location and year.]

Figure C11. Total organs transplanted per DCD donor, 07/01/2018 to 06/30/2019 (unadjusted for donor characteristics)

![Graph showing total organs transplanted per DCD donor by location and year.]

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

Table D1. Characteristics of all deceased donors recovered, 07/01/2017 to 06/30/2019

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of Donors</strong></td>
<td>54</td>
<td>10,470</td>
<td>90</td>
<td>11,180</td>
</tr>
<tr>
<td><strong>Race (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>83.3</td>
<td>65.5</td>
<td>84.4</td>
<td>65.5</td>
</tr>
<tr>
<td>African-American</td>
<td>14.8</td>
<td>16.6</td>
<td>12.2</td>
<td>15.9</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>1.9</td>
<td>14.0</td>
<td>3.3</td>
<td>14.6</td>
</tr>
<tr>
<td>Asian</td>
<td>0.0</td>
<td>2.8</td>
<td>0.0</td>
<td>2.7</td>
</tr>
<tr>
<td>Other</td>
<td>0.0</td>
<td>1.1</td>
<td>0.0</td>
<td>1.3</td>
</tr>
<tr>
<td><strong>Age (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-1 Years</td>
<td>0.0</td>
<td>1.7</td>
<td>2.2</td>
<td>1.8</td>
</tr>
<tr>
<td>2-11 Years</td>
<td>0.0</td>
<td>2.8</td>
<td>1.1</td>
<td>2.6</td>
</tr>
<tr>
<td>12-17 Years</td>
<td>1.9</td>
<td>4.1</td>
<td>5.6</td>
<td>3.6</td>
</tr>
<tr>
<td>18-34 Years</td>
<td>48.1</td>
<td>30.2</td>
<td>33.3</td>
<td>28.1</td>
</tr>
<tr>
<td>35-49 Years</td>
<td>29.6</td>
<td>27.0</td>
<td>25.6</td>
<td>28.3</td>
</tr>
<tr>
<td>50-64 Years</td>
<td>16.7</td>
<td>27.3</td>
<td>24.4</td>
<td>28.3</td>
</tr>
<tr>
<td>65+ Years</td>
<td>3.7</td>
<td>6.9</td>
<td>7.8</td>
<td>7.3</td>
</tr>
<tr>
<td><strong>Gender (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>66.7</td>
<td>60.9</td>
<td>66.7</td>
<td>60.2</td>
</tr>
<tr>
<td>Female</td>
<td>33.3</td>
<td>39.1</td>
<td>33.3</td>
<td>39.8</td>
</tr>
<tr>
<td><strong>Blood Type (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>O</td>
<td>40.7</td>
<td>48.1</td>
<td>47.8</td>
<td>47.8</td>
</tr>
<tr>
<td>A</td>
<td>50.0</td>
<td>37.0</td>
<td>41.1</td>
<td>36.3</td>
</tr>
<tr>
<td>B</td>
<td>9.3</td>
<td>11.7</td>
<td>8.9</td>
<td>12.4</td>
</tr>
<tr>
<td>AB</td>
<td>0.0</td>
<td>3.2</td>
<td>2.2</td>
<td>3.4</td>
</tr>
<tr>
<td><strong>Cause of Death (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anoxia</td>
<td>38.9</td>
<td>42.1</td>
<td>60.0</td>
<td>44.4</td>
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<tr>
<td>Stroke</td>
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<td>26.5</td>
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<tr>
<td>CNS Tumor</td>
<td>0.0</td>
<td>0.4</td>
<td>0.0</td>
<td>0.3</td>
</tr>
<tr>
<td>Head Trauma</td>
<td>35.2</td>
<td>28.6</td>
<td>18.9</td>
<td>25.8</td>
</tr>
<tr>
<td>Other</td>
<td>0.0</td>
<td>2.4</td>
<td>1.1</td>
<td>3.0</td>
</tr>
<tr>
<td>Unknown</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Donors After Cardiac Death (%)</strong></td>
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<tr>
<td></td>
<td>16.7</td>
<td>19.0</td>
<td>13.3</td>
<td>21.0</td>
</tr>
</tbody>
</table>
E. Programs Transplanting Organs Procured by OHLC

Figure E1. Programs transplanting hearts procured by OHLC, 07/01/2018 to 06/30/2019*

Location of OPO headquarters

* Transplants within the local area of the OPO are not always visible on the map due to scale. See Table E1 for full details.

Table E1. Programs transplanting hearts procured by OHLC, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>Geography*</th>
<th>Transplants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ohio State University Medical Center (OHOU)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>St Vincent Hospital and Health Care Center (INSV)</td>
<td>Regional</td>
<td>3</td>
</tr>
<tr>
<td>The Cleveland Clinic Foundation (OHCC)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>University of Michigan Medical Center (MIUM)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>Abbott Northwestern Hospital (MNAN)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Aurora St. Luke's Medical Center (WISL)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Duke University Hospital (NCDU)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Hunter Holmes McGuire Veterans Administration Medical Center (VAMV)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Loyola University Medical Center (ILLU)</td>
<td>National</td>
<td>2</td>
</tr>
<tr>
<td>Montefiore Medical Center (NYMA)</td>
<td>National</td>
<td>2</td>
</tr>
<tr>
<td>Mount Sinai Medical Center (NYMS)</td>
<td>National</td>
<td>2</td>
</tr>
<tr>
<td>NY Presbyterian Hospital/Columbia Univ. Medical Center (NYCP)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Penn State Milton S Hershey Medical Center (PAHE)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Sentara Norfolk General Hospital (VANG)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>St. Louis Children’s Hospital at Washington University Medical Center (MOCH)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Strong Memorial Hospital, University of Rochester Medical Center (NYFL)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>University of North Carolina Hospitals (NCMH)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Vanderbilt University Medical Center and Nashville VA Medical Center (TNVU)</td>
<td>National</td>
<td>1</td>
</tr>
</tbody>
</table>

* Local = within same DSA; Regional = within same OPTN region, but not same DSA; National = not within same DSA or OPTN region

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA).
### E. Programs Transplanting Organs Procured by OHLC

#### Figure E2. Programs transplanting intestines procured by OHLC, 07/01/2018 to 06/30/2019*

* Transplants within the local area of the OPO are not always visible on the map due to scale. See Table E2 for full details.

#### Table E2. Programs transplanting intestines procured by OHLC, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>Geography*</th>
<th>Transplants</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Cleveland Clinic Foundation (OHCC)</td>
<td>Regional</td>
<td>2</td>
</tr>
</tbody>
</table>

* Local = within same DSA; Regional = within same OPTN region, but not same DSA; National = not within same DSA or OPTN region

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

Figure E3. Programs transplanting kidneys procured by OHLC, 07/01/2018 to 06/30/2019*

* Transplants within the local area of the OPO are not always visible on the map due to scale. See Table E3 for full details.

Table E3. Programs transplanting kidneys procured by OHLC, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>Geography*</th>
<th>Transplants</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Toledo Medical Center (OHCO)</td>
<td>Local</td>
<td>78</td>
</tr>
<tr>
<td>Henry Ford Hospital (MIHF)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>Indiana University Health (INIM)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>Mercy Health Saint Mary’s (MISM)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>Ohio State University Medical Center (OHOU)</td>
<td>Regional</td>
<td>8</td>
</tr>
<tr>
<td>St Vincent Hospital and Health Care Center (INSV)</td>
<td>Regional</td>
<td>3</td>
</tr>
<tr>
<td>The Christ Hospital (OHTC)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>The Cleveland Clinic Foundation (OHCC)</td>
<td>Regional</td>
<td>3</td>
</tr>
<tr>
<td>University Hospitals of Cleveland (OHUH)</td>
<td>Regional</td>
<td>6</td>
</tr>
<tr>
<td>University of Cincinnati Medical Center (OHUC)</td>
<td>Regional</td>
<td>13</td>
</tr>
<tr>
<td>University of Michigan Medical Center (MIUM)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>William Beaumont Hospital (MIBH)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>CHI St. Luke’s Health Baylor College of Medicine Medical Center (TXHI)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Duke University Hospital (NCDU)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Erie County Medical Center (NYEC)</td>
<td>National</td>
<td>2</td>
</tr>
<tr>
<td>Jackson Memorial Hospital University of Miami School of Medicine (FLJM)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Johns Hopkins Hospital (MDJH)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Montefiore Medical Center (NYMA)</td>
<td>National</td>
<td>1</td>
</tr>
</tbody>
</table>

* Local = within same DSA; Regional = within same OPTN region, but not same DSA; National = not within same DSA or OPTN region
### E. Programs Transplanting Organs Procured by OHLC

#### Table E3. Programs transplanting kidneys procured by OHLC, 07/01/2018 to 06/30/2019 (continued)

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>Geography*</th>
<th>Transplants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mount Sinai Medical Center (NYMS)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>New York-Presbyterian Hospital/Weill Cornell Medical Center (NYNY)</td>
<td>National</td>
<td>2</td>
</tr>
<tr>
<td>Rhode Island Hospital (RIRH)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>Tampa General Hospital (FLTG)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>University of California at Los Angeles Medical Center (CAUC)</td>
<td>National</td>
<td>2</td>
</tr>
<tr>
<td>University of California Davis Medical Center (CASM)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>University of Colorado Hospital/Health Science Center (COUC)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>University of Maryland Medical System (MDUM)</td>
<td>National</td>
<td>1</td>
</tr>
<tr>
<td>University of Mississippi Medical Center (MSUM)</td>
<td>National</td>
<td>1</td>
</tr>
</tbody>
</table>

* Local = within same DSA; Regional = within same OPTN region, but not same DSA; National = not within same DSA or OPTN region

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

Figure E4. Programs transplanting livers procured by OHLC, 07/01/2018 to 06/30/2019*

Table E4. Programs transplanting livers procured by OHLC, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>Geography*</th>
<th>Transplants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children's Hospital Medical Center (OHCM)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>Henry Ford Hospital (MIHF)</td>
<td>Regional</td>
<td>5</td>
</tr>
<tr>
<td>Indiana University Health (INIM)</td>
<td>Regional</td>
<td>12</td>
</tr>
<tr>
<td>Ohio State University Medical Center (OHOU)</td>
<td>Regional</td>
<td>10</td>
</tr>
<tr>
<td>The Cleveland Clinic Foundation (OHCC)</td>
<td>Regional</td>
<td>18</td>
</tr>
<tr>
<td>University of Cincinnati Medical Center (OHUC)</td>
<td>Regional</td>
<td>24</td>
</tr>
<tr>
<td>University of Michigan Medical Center (MIUM)</td>
<td>Regional</td>
<td>3</td>
</tr>
<tr>
<td>William Beaumont Hospital (MIBH)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>Mount Sinai Medical Center (NYMS)</td>
<td>National</td>
<td>1</td>
</tr>
</tbody>
</table>

* Local = within same DSA; Regional = within same OPTN region, but not same DSA; National = not within same DSA or OPTN region.
E. Programs Transplanting Organs Procured by OHLC

Figure E5. Programs transplanting lungs procured by OHLC, 07/01/2018 to 06/30/2019*

* Transplants within the local area of the OPO are not always visible on the map due to scale. See Table E5 for full details.

Table E5. Programs transplanting lungs procured by OHLC, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>Geography*</th>
<th>Transplants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Henry Ford Hospital (MIHF)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>Ohio State University Medical Center (OHOU)</td>
<td>Regional</td>
<td>5</td>
</tr>
<tr>
<td>Spectrum Health (MISH)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>The Cleveland Clinic Foundation (OHCC)</td>
<td>Regional</td>
<td>7</td>
</tr>
<tr>
<td>University Hospitals of Cleveland (OHUH)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>University of Michigan Medical Center (MIUM)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>Loyola University Medical Center (ILLU)</td>
<td>National</td>
<td>2</td>
</tr>
<tr>
<td>University of Pittsburgh Medical Center (PAPT)</td>
<td>National</td>
<td>7</td>
</tr>
<tr>
<td>Vanderbilt University Medical Center and Nashville VA Medical Center (TNVU)</td>
<td>National</td>
<td>2</td>
</tr>
</tbody>
</table>

* Local = within same DSA; Regional = within same OPTN region, but not same DSA; National = not within same DSA or OPTN region

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

Figure E6. Programs transplanting pancreata procured by OHLC, 07/01/2018 to 06/30/2019*

![Map showing programs transplanting pancreata procured by OHLC, 07/01/2018 to 06/30/2019.](image)

* Location of OPO headquarters

* Transplants within the local area of the OPO are not always visible on the map due to scale. See Table E6 for full details.

Table E6. Programs transplanting pancreata procured by OHLC, 07/01/2018 to 06/30/2019

<table>
<thead>
<tr>
<th>Hospital Name (Code)</th>
<th>Geography*</th>
<th>Transplants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indiana University Health (INIM)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>Ohio State University Medical Center (OHOU)</td>
<td>Regional</td>
<td>3</td>
</tr>
<tr>
<td>The Cleveland Clinic Foundation (OHCC)</td>
<td>Regional</td>
<td>2</td>
</tr>
<tr>
<td>University Hospitals of Cleveland (OHUH)</td>
<td>Regional</td>
<td>1</td>
</tr>
<tr>
<td>University of Cincinnati Medical Center (OHUC)</td>
<td>Regional</td>
<td>2</td>
</tr>
</tbody>
</table>

* Local = within same DSA; Regional = within same OPTN region, but not same DSA; National = not within same DSA or OPTN region

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

Table F1. Characteristics of deceased donor heart-lung recipients

| No data available for this table, 07/01/2017 to 06/30/2019 |
### F. Transplants Facilitated by OHLC

Table F2. Characteristics of deceased donor heart recipients

<table>
<thead>
<tr>
<th></th>
<th>This OPO</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Number of Transplants</strong></td>
<td>14</td>
<td>24</td>
</tr>
<tr>
<td><strong>Race (%)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>64.3</td>
<td>66.7</td>
</tr>
<tr>
<td>African-American</td>
<td>28.6</td>
<td>25.0</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>7.1</td>
<td>8.3</td>
</tr>
<tr>
<td>Asian</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Other</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Age (%)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-1 Years</td>
<td>0.0</td>
<td>4.2</td>
</tr>
<tr>
<td>2-11 Years</td>
<td>0.0</td>
<td>4.2</td>
</tr>
<tr>
<td>12-17 Years</td>
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<td>0.0</td>
</tr>
<tr>
<td>18-34 Years</td>
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<td>20.8</td>
</tr>
<tr>
<td>35-49 Years</td>
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<td>16.7</td>
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<tr>
<td>50-64 Years</td>
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<td>14.3</td>
<td>16.7</td>
</tr>
<tr>
<td><strong>Gender (%)</strong></td>
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<td></td>
</tr>
<tr>
<td>Male</td>
<td>85.7</td>
<td>70.8</td>
</tr>
<tr>
<td>Female</td>
<td>14.3</td>
<td>29.2</td>
</tr>
<tr>
<td><strong>Blood Type (%)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>O</td>
<td>28.6</td>
<td>41.7</td>
</tr>
<tr>
<td>A</td>
<td>57.1</td>
<td>33.3</td>
</tr>
<tr>
<td>B</td>
<td>14.3</td>
<td>20.8</td>
</tr>
<tr>
<td>AB</td>
<td>0.0</td>
<td>4.2</td>
</tr>
<tr>
<td><strong>Medical Urgency Status (%)</strong></td>
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<td>1A</td>
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<tr>
<td>1B</td>
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<tr>
<td>2</td>
<td>7.1</td>
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<tr>
<td>Other</td>
<td>0.0</td>
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</tr>
<tr>
<td><strong>Primary Cause of Disease (%)</strong></td>
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<tr>
<td>Cardiomyopathy</td>
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<tr>
<td>Coronary Artery Disease</td>
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<td>Valvular Heart Disease</td>
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<td>Congenital Heart Disease</td>
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</tr>
<tr>
<td>Retransplant/Graft Failure</td>
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</tr>
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<td>Missing</td>
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</tr>
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</table>
Table F3. Characteristics of deceased donor intestine recipients

<table>
<thead>
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<th></th>
<th></th>
<th></th>
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<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Total Number of Transplants</strong></td>
<td>1</td>
<td>2</td>
<td>108</td>
<td>90</td>
</tr>
<tr>
<td><strong>Race (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>0.0</td>
<td>100.0</td>
<td>65.7</td>
<td>67.8</td>
</tr>
<tr>
<td>African-American</td>
<td>0.0</td>
<td>0.0</td>
<td>20.4</td>
<td>15.6</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>100.0</td>
<td>0.0</td>
<td>12.0</td>
<td>13.3</td>
</tr>
<tr>
<td>Asian</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>1.1</td>
</tr>
<tr>
<td>Other</td>
<td>0.0</td>
<td>0.0</td>
<td>1.9</td>
<td>2.2</td>
</tr>
<tr>
<td><strong>Age (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-1 Years</td>
<td>0.0</td>
<td>0.0</td>
<td>4.6</td>
<td>11.1</td>
</tr>
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<td>2-11 Years</td>
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## F. Transplants Facilitated by OHLC

### Table F4. Characteristics of deceased donor kidney recipients (demographic)

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### F. Transplants Facilitated by OHLC

**Table F5. Characteristics of deceased donor kidney recipients (clinical)**

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### F. Transplants Facilitated by OHLC

Table F6. Characteristics of deceased kidney-pancreas recipients

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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).
### Table F7. Characteristics of deceased donor liver recipients (demographic)

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### F. Transplants Facilitated by OHLC

#### Table F8. Characteristics of deceased donor liver recipients (clinical)

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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).
## F. Transplants Facilitated by OHLC

### Table F9. Characteristics of deceased donor lung recipients

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Table F10. Characteristics of deceased donor pancreas recipients

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## G. Counties Served by OHLC

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