

January 9, 2024

SRTR Public Comment

In response to the COVID-19 pandemic, SRTR modified evaluation metrics for transplant program-specific reports, including the January 2024 reporting cycle. As a result, evaluation cohorts exclude transplants performed during the first quarter of the pandemic (March 13, 2020 through June 12, 2020). In addition, patients transplanted before March 13, 2020 have follow-up censored on March 12, 2020, and follow-up does not resume for those who are alive with graft function on June 12, 2020.

Due to this ongoing carve out, we do not believe the January 2024 SRTR report accurately reflects our 3-year post-transplant graft and patient survival outcomes. Therefore, we encourage you to consider the following *uncensored* survival estimates for comparison:

Adult (18+) 3-year survival with a functioning deceased donor graft

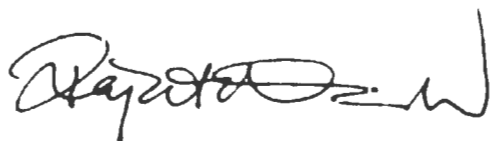
Between 01/01/2018 and 06/30/2020, St. Joseph's Hospital and Medical Center performed 277 single-organ lung transplants (including re-transplants), which resulted in 88 observed graft failures (including deaths) during the first 3 years after transplant. This equates to a 68.02% estimated probability of surviving with a functioning graft at 3 years (unadjusted for patient and donor characteristics).

Adult (18+) 3-year patient survival (deceased donor graft recipients)

Between 01/01/2018 and 06/30/2020, St. Joseph's Hospital and Medical Center performed 263 single-organ lung transplants (excluding re-transplants), which resulted in 78 observed deaths during the first 3 years after transplant. This equates to a 70.34% estimated probability of surviving at 3 years (unadjusted for patient and donor characteristics).

Thank you for taking the time to review our program-specific report along with these additional comments. We welcome any questions you may have about our lung transplant program outcomes.

Sincerely,



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