## Acronyms & Abbreviations

**ABO:** blood type (ie, A, B, AB, or O)

**ADR:** Annual Data Report

**AST:** American Society of Transplantation

**ASTS:** American Society of Transplant Surgeons

**BMI:** body mass index

CMS: Centers for Medicare & Medicaid Services (part of the Department of Health and Human Services [HHS] that participates in both payment and quality monitoring of transplant programs) **CPRA:** calculated panel reactive antibodies (a measure of how compatible a donor and recipient would be)

**CUSUM:** cumulative sum (a quality-control chart SRTR produces for programs to monitor their own outcomes)

**DATA:** Donation and Transplantation Analytics (an Interactive data guery application on the SRTR website)

**DBD:** donation after brain death

**DCD:** donation after circulatory death

**DSA:** donation service area (the region an OPO serves)

**eGFR:** estimated glomerular filtration rate (an estimate of kidney function)

**ESRD:** end-stage renal disease

**HCV:** hepatitis C virus

**HHRI:** Hennepin Healthcare Research Institute (the organization that currently houses SRTR)

**HHS:** US Department of Health and Human Services (the government agency that oversees CMS and HRSA)

**HLA:** human leukocyte antigen

HRSA: Health Resources and Services Administration (the division of HHS that administers the SRTR and OPTN contracts)

**KDPI:** Kidney Donor Profile Index (a calculation based on KDRI that uses a range from 0-100)

**KDRI:** Kidney Donor Risk Index (a calculation of a deceased donor kidney quality)

LAS: Lung Allocation Score

**LDC:** Living Donor Collective (a pilot project to create a registry of living donors to collect long-term follow-up data)

**MELD:** Model for End-Stage Liver Disease (a measure of how sick a liver transplant candidate is)

MPSC: Membership and Professional Standards Committee (a committee at OPTN that monitors transplant program quality)

**OPO:** organ procurement organization (a group that works with hospitals and family members in an area to recover deceased donor organs)

**OPTN:** Organ Procurement and Transplantation Network (the "sister" contract to SRTR that oversees data collection from transplant programs and OPOs, makes transplant system policy, and monitors program performance)

**OSR:** OPO-specific report (a report with information about a single OPO)

**PELD:** pediatric end-stage liver disease

**PSR:** program-specific report PTA: pancreas transplant alone

**SLK:** simultaneous liver-kidney (transplant)

**SPK:** simultaneous pancreas-kidney (transplant)

**UNOS:** United Network for Organ Sharing (the organization that currently holds the OPTN contract)





## **Definitions**

**5-Tier Evaluations:** A 5-level system published on SRTR.org to classify transplant program performance from worse to better that is currently used with metrics of survival on the waiting list, transplant rate, and 1st-year graft survival.

**Adjusted**: (See "Risk adjusted".)

**Allocation:** The process for distributing organs to candidates.

**Cohort:** A group of candidates, recipients, or donors from a specified time-frame (also called a reporting period or observation period).

**Deceased donor organ nonutilization rate:** The rate at which organs are not transplanted from a deceased donor (ie, the opposite of deceased donor organ yield).

**Deceased donor organ yield:** A metric describing how frequently organs are successfully transplanted from a deceased organ donor.

**Discard rate:** The rate at which organs are recovered for the purpose of transplant but then not

transplanted (ie, discarded).

**Donor conversion:** A metric describing how often potential deceased organ donors become actual organ donors.

**Graft survival:** A measure of how likely a transplant recipient is to be alive with a functioning transplant at a certain time after the transplant procedure (note: a graft is a transplanted organ).

**Inactive status:** When a transplant program changes a candidate's status to a condition where they will not

receive organ offers.

**Living donor:** A living individual from whom at least one organ is recovered for transplant.

Methods: The descriptions and or definitions of how SRTR creates the metrics.

**Metrics:** Generally, statistics generated from SRTR data that describe how certain aspects of the nation's transplantation system are performing.

Mortality: Patient death.

**Multiorgan transplant:** Any combination of two or more organs transplanted into the same recipient from the same donor.

**Program-specific report (PSR):** A report created by SRTR containing information about a single transplant program.

**Offer acceptance rate:** A metric describing how frequently transplant programs accept offers for deceased donor organs that they receive for their candidates.

**Multilisting:** One candidate being on the waiting list of different transplant programs at the same time.

**OPO-specific report (OSR):** A report containing metrics for a specific OPO. **Outcomes:** Patient endpoints/events that SRTR tracks (survival, transplant success, donor outcomes, etc).

## **Definitions**

**Patient survival:** A measure of how likely a transplant recipient is to be alive at a certain time after the transplant procedure, regardless of whether the transplanted organ continues to function.

**Patient-time or patient-years:** The amount of time (usually measured in days, months, or years) that a patient is at-risk for a given event. This is typically used to calculate rates such as pretransplant mortality rate, transplant rate, or post-transplant graft failure rate.

**Pretransplant mortality rate:** A metric describing how frequently patients die after they are added to a program's waiting list but before they undergo transplant.

**Rate:** A metric describing the number of events for a certain amount of time (eg, a death rate of 10 per 100 person-years means that if 100 patients were followed for 1 year, we would expect 10 deaths).

**Risk adjusted:** This statistical process is used to account for differences in patient characteristics at different locations when reporting outcomes. This process allows more meaningful comparisons because some locations may treat patients who are sicker or who have higher risks of complications than other locations. Risk adjustment accounts for the potential change in outcomes when treating sicker patients.

**Transplant rate:** A metric of how quickly a transplant program is getting candidates to transplant once they are listed at that program.

**Waiting list (or waitlist):** A list of candidates awaiting transplant and their priority managed by OPTN/UNOS.

