Survey Of Patients' Experience

These measures show how often hospitals provide care that research shows gets the best results for patients with certain conditions. This information can help you compare which hospitals give recommended care most often as part of the overall care they provide to patients.

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Patients who reported that their nurses "Always" communicated well	73 %	77 %	81 %	Higher is Better 4 % Lower than Florida average. 8 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who reported that their doctors "Always" communicated well	77 %	77 %	82 %	Higher is Better 5 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who reported that they "Always" received help as soon as they wanted	58 %	64 %	70 %	Higher is Better 6 % Lower than Florida average. 12 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who reported that staff "Always" explained medicines before giving it to them	60 %	62 %	66 %	Higher is Better 2 % Lower than Florida average. 6 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who reported that their room and bathroom were "Always" clean	72 %	71 %	76 %	Higher is Better 1 % Higher than Florida average. 4 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who reported that the area around their room was "Always" quiet at night	55 %	58 %	62 %	Higher is Better 3 % Lower than Florida average. 7 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who reported that they were given information about what to do during their recovery at home	81 %	85 %	87 %	Higher is Better 4 % Lower than Florida average. 6 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who "Strongly Agree" they understood their care when they left the hospital	43 %	51 %	54 %	Higher is Better 8 % Lower than Florida average. 11 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	66 %	69 %	73 %	Higher is Better 3 % Lower than Florida average. 7 % Lower than National average. Date Range: 1/2019 - 12/2019
Patients who reported they would definitely recommend the hospital	68 %	70 %	72 %	Higher is Better 2 % Lower than Florida average. 4 % Lower than National average. Date Range: 1/2019 - 12/2019

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Timely & Effective Care

Hospitals and healthcare providers play a crucial role in promoting, providing and educating patients about preventive services and screenings and maintaining the health of their communities. Many diseases are preventable through immunizations, screenings, treatment, and lifestyle changes. The information below shows how well the hospitals you selected are providing preventive services.

Sepsis

Sepsis is a complication that occurs when your body has an extreme response to an infection. It causes damage to organs in the body and can be life-threatening if not treated. Sepsis can sometimes turn into septic shock, which has a higher risk of death. Identifying sepsis early and starting appropriate care quickly increase the chances of survival. How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Percentage of patients who received appropriate care for severe sepsis and septic shock	55 %	67 %	60 %	Higher is Better. Date Range: 10/2019 - 9/2020

Higher is Better
12 % Lower than Florida average.
5 % Lower than National average.
Date Range: 10/2019 - 9/2020

Cataract Surgery Outcome

Cataracts affect your vision and are very common in older people. Cataracts can make your vision blurry and can impact your ability to see at night. The purpose of cataract surgery is to improve visual function and quality of life. How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Percentage of patients who had cataract surgery with improvement in visual function within 90 days following the surgery	N/A*	95 %	11 %	Higher is Better. Date Range: 1/2019 - 12/2019

*Results are not available for this reporting period.

Colonoscopy Follow-Up

A colonoscopy is one test doctors can use to find precancerous polyps (abnormal growths) or colorectal cancer. Scientific evidence shows that the following measures represent best practices for follow-up colonoscopies. How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Percentage of patients receiving appropriate recommendation for follow-up colonoscopy screening	N/A*	92 %	91 %	Higher is Better. Date Range: 1/2019 - 12/2019
Percentage of patients with colonoscopy without follow-up colonoscopy in the appropriate time frame	95 %	94 %	93 %	Higher is Better. 1 % Higher than Florida average. 2 % Higher than National average. Date Range: 1/2018 - 12/2018

*Results are not available for this reporting period.

Heart Attack Care

An acute myocardial infarction (AMI) or heart attack happens when one of the heart's arteries becomes blocked and the supply of blood and oxygen to part of the heart muscle is slowed or stopped. When the heart muscle doesn't get the oxygen and nutrients it needs, the affected heart tissue may die. These measures assess the extent to which some of the recommended treatments are provided, if appropriate, for most adults who have had a heart attack. Acronyms: ECG - Electrocardiogram How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Average (median) number of minutes before outpatient with chest pain or possible heart attack who needed specialized care were transferred to another hospital	N/A*	58 Mins	58 Mins	Lower is Better. Date Range: 10/2020 - 9/2020
Outpatients with chest pain or possible heart attack who got ECG results on arrival within 30 minutes of arrival	N/A*	72 %	94 %	Higher is Better. Date Range: 10/2020 - 9/2020

*Results are not available for this reporting period.

*Results are based on a shorter time period than required by the CMS and the criteria for this measure.

Emergency Department Care

Jackson Health System provides 24/7 emergency care for a diverse patient population throughout Miami-Dade County. We see a high volume of both urgent and critically ill adult and pediatric patients and are able to provide support from specialists in all fields of medicine. How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Percentage of patients who left the emergency department before being seen	N/A*	1 %	2 %	Lower is Better. Date Range: 1/2019 - 12/2019
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	N/A*	70 %	72 %	Higher is Better. Date Range: 10/2020 - 9/2020
Average (median) time patients spent in the emergency department after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room	275 Mins	156 Mins	156 Mins	Lower is Better. 257 Mins Higher than Florida average. 237 Mins Higher than National average. Date Range: 1/2019 - 12/2019
Average (median) time patients spent in the emergency department before leaving from the visit	294 Mins	166 Mins	163 Mins	Lower is Better. 93 Mins Higher than Florida average. 91 Mins Higher than National average. Date Range: 10/2020 - 9/2020

*Results are not available for this reporting period.

Preventive Care

Hospitals and healthcare providers play a crucial role in promoting, providing and educating patients about preventive services and screenings and maintaining the health of their communities. Many diseases are preventable through immunizations, screenings, treatment, and lifestyle changes. The information below shows how well the hospitals you selected are providing preventive services. How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Healthcare workers given influenza vaccination	55 %	82 %	91 %	Higher is Better. Date Range: 10/2019 - 3/2020

Higher is Better
27 % Lower than Florida average.
36 % Lower than National average.
Date Range: 10/2019 - 3/2020

Cancer Care

External Beam Radiation Therapy (EBRT) uses high doses of radiation to destroy cancer cells and shrink tumors. It is commonly used in patients with cancer that has spread to the bone as a method to control pain with low side effects. Patients who have had a recent mastectomy may sometimes need radiation to the chest wall following course treatment. The measure below shows how often patients receive the recommended EBRT radiation treatment. How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Percentage of patients receiving external radiation therapy for cancer that has spread to the bone	N/A*	91 %	91 %	Higher is Better. Date Range: 1/2019 - 12/2019

*Results are not available for this reporting period.

Pregnancy & Delivery Care

By adhering to best practices for maternity care, hospitals can improve the chances for a safe delivery and a healthy baby. This measure shows the percentage of pregnant women who had elective deliveries (3 weeks early (either vaginally or by C-section) whose early deliveries weren't medically necessary. Higher numbers may indicate that hospitals aren't doing enough to discourage this unsafe practice. How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Percent of mothers whose deliveries were scheduled too early (1-2 weeks early), when a scheduled delivery was not medically necessary	0 %	2 %	3 %	Lower is Better. Date Range: 10/2019 - 9/2020

Lower is Better
2 % Lower than Florida average.
3 % Lower than National average.
Date Range: 10/2019 - 9/2020

Use Of Medical Imaging

These outpatient imaging efficiency measures give you information about hospitals' use of medical imaging tests (like mammograms, MRIs, and CT scans) for outpatients based on the following goals:

- Protecting patients' safety (like keeping patients' exposure to radiation and other risks as low as possible).
- Making sure patients get high-quality tests (like mammograms done a possible problem, and,
- Avoiding the risk, stress, and cost of doing imaging tests that patients may not need.

How this page works »

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Outpatients with low back pain who had an MRI without trying recommended treatments (like physical therapy) first If a number is high, it may mean that hospitals are doing many unnecessary MRIs for low back pain. *The number of cases/patients is too few to report	N/A*	22.9 %	38.5 %	Lower is Better. Date Range: 10/2020 - 9/2020
Outpatient CT scans of the abdomen that were "unstimulated" (double) scans If a number is high, it may mean that too many patients have a double scan when a single scan is all they need.	0.2 %	1.4 %	1.9 %	Lower is Better. 1.2 % Lower than Florida average. 1.7 % Lower than National average. Date Range: 10/2019 - 9/2020
Outpatients who get cardiac imaging stress tests before low-risk outpatient surgery If a number is high, it may mean that too many cardiac scans were done prior to low-risk surgeries.	14 %	4.9 %	4.1 %	Lower is Better. 3.5 % Lower than Florida average. 2.7 % Lower than National average. Date Range: 10/2019 - 9/2020

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Complications

Patients who are admitted to the hospital for treatment of medical problems sometimes get other serious injuries, complications, or conditions, and may even die. Some patients may experience problems soon after they are discharged and need to be admitted to the hospital again. These events can often be prevented if hospitals follow best practices for treating patients.

Surgical Complications

This section shows serious complications that patients with Original Medicare experienced during a hospital stay or after having certain inpatient surgical procedures. These complications can often be prevented if hospitals follow procedures based on best practices and scientific evidence. Acronyms: AHRQ - Agency for Healthcare Research and Quality

Measure	Jackson Health System	National Result	More Info
Rate of complications for hip/knee replacement patients	No different than the National Rate	2.4%	Date Range: 4/2016 - 3/2019
Serious complications	Worse than the National Rate	1.00	Date Range: 7/2017 - 6/2019
Deaths among patients with serious treatable complications after surgery	No different than the National Rate	164.15	Date Range: 7/2017 - 6/2019

Healthcare-Associated Infections

Healthcare-associated infections, or HAIs, are infections that people get while they're getting treatment for another condition in a healthcare setting. HAIs can occur in all settings of care, including acute care hospitals, long term acute care hospitals, rehabilitation facilities, surgical centers, cancer hospitals, and skilled nursing facilities. Many of these infections can be prevented through the use of proper procedures and precautions.

Measure	Jackson Health System	National Result	More Info
Central line-associated bloodstream infections (CLABSI) in ICUs and select wards	Better than the National Rate	1.0	Lower is Better Date Range: 1/2019 - 12/2019
Catheter-associated urinary tract infections (CAUTI) in ICUs and select wards	Better than the National Rate	1.0	Lower is Better Date Range: 1/2019 - 12/2019
Surgical site infections from colon surgery	No different than the National Rate	1.0	Date Range: 1/2019 - 12/2019
Surgical site infections from abdominal hysterectomy	No different than the National Rate	1.0	Date Range: 1/2019 - 12/2019
Methicillin-resistant Staphylococcus Aureus (MRSA) Blood Laboratory-identified Events (Bloodstream infections)	Worse than the National Rate	1.0	Date Range: 1/2019 - 12/2019
Clostridium difficile (C.diff) Laboratory-identified Events (Intestinal infections)	Better than the National Rate	1.0	Date Range: 1/2019 - 12/2019

30-Day Death Rates

Death rates show how often patients die, for any reason, within 30 days of admission to a hospital.

Measure	Jackson Health System	National Result	More Info
Death rate for chronic obstructive pulmonary disease (COPD) patients	No different than the National Rate	8.1%	Date Range: 7/2017 - 12/2019
Death rate for heart attack patients	No different than the National Rate	12.3%	Date Range: 7/2017 - 12/2019
Death rate for heart failure patients	No different than the National Rate	11.2%	Date Range: 7/2017 - 12/2019
Death rate for pneumonia patients	No different than the National Rate	15.3%	Date Range: 7/2017 - 12/2019
Death rate for stroke patients	No different than the National Rate	13.5%	Date Range: 7/2017 - 12/2019
Death rate for coronary artery bypass graft (CABG) surgery patients	N/A	2.9%	Date Range: 7/2017 - 12/2019

Readmissions

Returning to the hospital for unplanned care disrupts patients' lives, increases their risk of harmful events like healthcare-associated infections, and costs more money. High quality care during the initial hospital stay can keep patients from returning to the hospital and reduce their stay if they had to come back.

Unplanned Readmissions & Hospital Return Days By Medical Condition

Rates of readmission show the percentage of patients who return to the hospital for an unplanned inpatient admission within 30 days of leaving the hospital. How this page works »

Measure	Jackson Health System	National Result	More Info
Rate of readmission for chronic obstructive pulmonary disease (COPD) patients	No different than the National Rate	19.7%	Date Range: 7/2017 - 12/2019
Rate of readmission for heart attack patients	No different than the National Rate	15.8%	Date Range: 7/2017 - 12/2019
Hospital return days for heart attack patients **Results are not available for this reporting period.*	More Days Than Average per 100 Discharges	N/A*	Date Range: 7/2017 - 12/2019
Rate of readmission for heart failure patients	Worse than the National Rate	21.9%	Date Range: 7/2017 - 12/2019
Hospital return days for heart failure patients **Results are not available for this reporting period.*	More Days Than Average per 100 Discharges	N/A*	Date Range: 7/2017 - 12/2019
Rate of readmission for pneumonia patients	No different than the National Rate	16.7%	Date Range: 7/2017 - 12/2019
Hospital return days for pneumonia patients **Results are not available for this reporting period.*	More Days Than Average per 100 Discharges	N/A*	Date Range: 7/2017 - 12/2019

30-Day Unplanned Readmission & Hospital Return Days By Surgical Procedure

Rates of readmission show the percentage of patients who return to the hospital for an unplanned inpatient admission within 30 days of leaving the hospital. Hospital return days add up the days the patient was in an inpatient hospital unit, under observation, or in an emergency department for unplanned care within 30 days of leaving the hospital. How this page works »

Measure	Jackson Health System	National Result	More Info
Rate of readmission for coronary artery bypass graft (CABG) surgery patients.	N/A	12.6%	Date Range: 7/2017 - 12/2019
Rate of readmission after hip/knee replacement	No different than the National Rate	4%	Date Range: 7/2017 - 12/2019
Rate of unplanned hospital visits after an outpatient colonoscopy	No different than the National Rate	16.4 per 1,000	Date Range: 07/2017 - 12/2019
Rate of inpatient admissions for patients receiving outpatient chemotherapy	No different than the National Rate	12%	Date Range: 01/2019 - 12/2019
Rate of emergency department (ED) visits for patients receiving outpatient chemotherapy	No different than the National Rate	5.9%	Date Range: 01/2019 - 12/2019
Ratio of unplanned hospital visits after hospital outpatient surgery **Results are not available for this reporting period.*	No different than the National Rate	N/A*	Date Range: 01/2019 - 12/2019
Rate of readmission after discharge from hospital (hospital-wide)	No different than the National Rate	15.5%	Date Range: 7/2017 - 6/2019

Mother & Baby

Hospitals and healthcare providers play a crucial role in promoting, providing and educating patients about preventive services and screenings and maintaining the health of their communities. Many diseases are preventable through immunizations, screenings, treatment, and lifestyle changes. The information below shows how well the hospitals you selected are providing preventive services.

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Maternity Practices in Infant Nutrition and Care	86 %	81 %	81 %	Higher is Better 5 % Higher than Florida average. 5 % Higher than National average. Date Range: 2020
Immediate Postpartum Care	93 %	79 %	83 %	Higher is Better 14 % Higher than Florida average. 10 % Higher than National average. Date Range: 2020
Rooming-In	67 %	82 %	76 %	Higher is Better 15 % Lower than Florida average. 9 % Lower than National average. Date Range: 2020
Feeding Practices	77 %	81 %	82 %	Higher is Better 4 % Lower than Florida average. 5 % Lower than National average. Date Range: 2020
Feeding Education	100 %	92 %	93 %	Higher is Better 8 % Higher than Florida average. 7 % Higher than National average. Date Range: 2020
Discharge Support	100 %	79 %	79 %	Higher is Better 21 % Higher than Florida average. 21 % Higher than National average. Date Range: 2020
Institutional Management	78 %	75 %	71 %	Higher is Better 3 % Higher than Florida average. 7 % Higher than National average. Date Range: 2020

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Trauma

Trauma quality program works to elevate the quality of care for trauma patients in our trauma center. The program accomplishes its work by collecting data from our trauma center, providing feedback about our center's performance, and identifying institutional characteristics that the trauma center staff can implement to improve patient outcomes.

Designations & Awards

Designations

ACS verified Level I Adult Trauma Center

State designated Level I Trauma Center

Mortality Rates

Trauma patient which disposition was expired or transferred to hospice care. How this page works »

Measure	Ryder Trauma Center	Other Similar Hospitals in TQP	More Info
Risk adjusted mortality for observed patients at Ryder Trauma Center	9.9 %	9.8 %	Lower is Better **0.1 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted mortality for blunt multisystem injury patients at Ryder Trauma Center	22.9 %	20 %	Lower is Better **0.9 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted mortality for penetrating injury patients at Ryder Trauma Center	10.6 %	8.6 %	Lower is Better **2 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted mortality for shock injury patients at Ryder Trauma Center	32.2 %	30.1 %	Lower is Better **2.7 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted mortality for severe TBI injury patients at Ryder Trauma Center	47.2 %	47.2 %	Lower is Better Date Range: 10/2019 - 09/2020

Complication Rates

Presence of relevant National Trauma Data Standard Hospital Complication. How this page works »

Measure	Ryder Trauma Center	Other Similar Hospitals in TQP	More Info
Risk adjusted complications for acute kidney injury patients at Ryder Trauma Center	1.9 %	1.1 %	Lower is Better **0.8 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted complications for pulmonary embolism patients at Ryder Trauma Center	1.5 %	0.7 %	Lower is Better **0.8 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted complications for surgical site infection patients at Ryder Trauma Center	0.2 %	0.4 %	Lower is Better **0.4 % Lower** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted complications for unplanned ICU admission patients at Ryder Trauma Center	3 %	2.1 %	Lower is Better **0.8 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted complications for deep vein thrombosis patients at Ryder Trauma Center	1.7 %	1.1 %	Lower is Better **0.6 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted complications for pulmonary embolism patients at Ryder Trauma Center	0.2 %	0.2 %	Lower is Better **0.1 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Risk adjusted complications for Ventilator Associated Pneumonia in patients at Ryder Trauma Center	3.4 %	0.8 %	Lower is Better **2.7 % Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020

Overall Median Length Of Stay

The center's median length of stay How this page works »

Measure	Ryder Trauma Center	Other Similar Hospitals in TQP	More Info
Median length of stay (days) for patients at Ryder Trauma Center	7 Days	5 Days	Lower is Better **2 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for blunt multisystem patients at Ryder Trauma Center	10 Days	6 Days	Lower is Better **4 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for penetrating injury patients at Ryder Trauma Center	8.5 Days	7 Days	Lower is Better **1.5 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for shock injury patients at Ryder Trauma Center	12 Days	8 Days	Lower is Better **4 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for severe TBI patients at Ryder Trauma Center	11 Days	8 Days	Lower is Better **3 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for isolated hip fracture patients at Ryder Trauma Center	7 Days	4 Days	Lower is Better **3 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020

ICU Median Length Of Stay

The median length of stay for patients requiring intensive care unit care How this page works »

Measure	Ryder Trauma Center	Other Similar Hospitals in TQP	More Info
Median length of stay (days) for ICU patients at Ryder Trauma Center	5 Days	3 Days	Lower is Better **2 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for blunt multisystem ICU patients at Ryder Trauma Center	7 Days	3 Days	Lower is Better **3 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for penetrating injury ICU patients at Ryder Trauma Center	5 Days	4 Days	Lower is Better **1 Day Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for shock injury ICU patients at Ryder Trauma Center	10 Days	5 Days	Lower is Better **5 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for severe TBI ICU patients at Ryder Trauma Center	7 Days	4 Days	Lower is Better **3 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median length of stay (days) for isolated hip fracture ICU patients at Ryder Trauma Center	3 Days	3 Days	Lower is Better Date Range: 10/2019 - 09/2020

Mechanical Ventilator

Number of days of mechanical ventilation for patients requiring ventilatory support How this page works »

Measure	Ryder Trauma Center	Other Similar Hospitals in TQP	More Info
Median duration of mechanical ventilation (days) for patients at Ryder Trauma Center	5 Days	3 Days	Lower is Better **1 Day Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median duration of mechanical ventilation (days) for blunt multisystem patients at Ryder Trauma Center	5 Days	3 Days	Lower is Better **1 Day Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median duration of mechanical ventilation (days) for penetrating injury patients at Ryder Trauma Center	2 Days	2 Days	Lower is Better Date Range: 10/2019 - 09/2020
Median duration of mechanical ventilation (days) for shock injury patients at Ryder Trauma Center	4 Days	3 Days	Lower is Better **1 Day Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median duration of mechanical ventilation (days) for severe TBI patients at Ryder Trauma Center	5 Days	4 Days	Lower is Better **1 Day Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020
Median duration of mechanical ventilation (days) for isolated hip fracture patients at Ryder Trauma Center	3.5 Days	2 Days	Lower is Better **1.5 Days Higher** Share Other Similar Hospitals in TQP Date Range: 10/2019 - 09/2020

This report allows users to compare their outcomes against a common standard. However, it is possible that factors other than quality of care may influence the risk adjusted rate.

Please contact your vendor for more information and assistance.

Patient Inclusion criteria for trauma patients:

- Age greater than or equal to 18 years old
- Blunt or penetrating trauma, or abuse of any trauma type described in an injury ICD9 or ICD10 Clinical Cause Code
- Not a burn injury, not a hemorrhagic stroke, not a hypoxic injury, not a drowning injury
- Discharged with a Disposition Indicator Disposition other than Not Applicable, Expired, Transferred to an Acute Care Facility, Transferred to Hospice Care, Transferred to Other Facility, Still Patient or Expected to Return for Outpatient Care
  - Exclude patients with the following combinations of Ethnicity and Race: Ethnicity = Hispanic or Mexican and Race = Black and Ethnicity = Unknown and Race = Unknown
  - ASPE = Accidental Spinal Injury (ICD9 and ICD10)
  - ASBI = Accidental Spinal Injury (ICD9 and ICD10)
  - ASBI = Accidental Brain Injury (ICD9 and ICD10)
  - ASBI = BIS and Injury = 1 and ICD10 Intent = Not Trauma
  - ASBI = Injury = 1 and ICD10 Intent = Not Trauma
  - ASBI = Location = Lower Extremity and Injury = Not Trauma
  - Exclude patients with the following combinations of Intent and Injury:
    - Intent = Suicide and Injury = Gunshot Wound
    - Intent = Suicide and Injury = Stab Wound
    - Intent = Suicide and Injury = Blunt Force Trauma
    - Intent = Suicide and Injury = Other Injury
    - Intent = Suicide and Injury = Unknown
    - Intent = Suicide and Injury = Not Trauma
    - Intent = Suicide and Injury = Blank
    - Intent = Suicide and Injury = Blank
    - Intent = Suicide and Injury = Blank

Behavioral Health

Preventative Care & Screening

Hospitals and health care providers play a crucial role in promoting, providing and educating patients about preventive services and screenings and maintaining the health of their communities. Many diseases are preventable through immunizations, screenings, treatment, and lifestyle changes. The information below shows how well hospitals you selected are providing preventive services. **How this page works »**

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Patients discharged on antipsychotic medications who had body mass index, blood pressure, blood sugar, and cholesterol level screenings in the past year	83 %	76 %	77 %	Higher is Better **7 % Higher** than Florida average. **6 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients assessed and given influenza vaccination	99 %	68 %	81 %	Higher is Better **31 % Higher** than Florida average. **18 % Higher** than National average. Date Range: 1/2019 - 12/2019

Substance Use Treatment

There is evidence that screening and counselling can reduce alcohol, drug, and tobacco use for adults and pregnant women. A hospital stay provides a chance to address unhealthy alcohol, drug, or tobacco use. **How this page works »**

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Patients with alcohol abuse who received or refused a brief intervention during their inpatient stay	91 %	93 %	84 %	Higher is Better **2 % Lower** than Florida average. **7 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients with alcohol abuse who received a brief intervention during their inpatient stay	89 %	88 %	77 %	Higher is Better **1 % Higher** than Florida average. **12 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients who screened positive for an alcohol or drug use disorder during their inpatient stay who, at discharge, either: (1) received or refused a prescription for medications to treat their alcohol or drug use disorder OR (2) received or refused a referral for addiction treatment	100 %	83 %	73 %	Higher is Better **17 % Higher** than Florida average. **27 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients who screened positive for an alcohol or drug use disorder during their inpatient stay who, at discharge, either: (1) received a prescription for medications to treat their alcohol or drug use disorder OR (2) received a referral for addiction treatment	100 %	75 %	62 %	Higher is Better **25 % Higher** than Florida average. **38 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients who use tobacco and who received or refused counseling to quit AND received or refused medications to help them quit tobacco or had a reason for not receiving medication during their hospital stay	89 %	89 %	82 %	Higher is Better **7 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients who use tobacco and who received counseling to quit AND received medications to help them quit tobacco or had a reason for not receiving medication during their hospital stay	60 %	52 %	47 %	Higher is Better **8 % Higher** than Florida average. **13 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients who use tobacco and at discharge (1) received or refused a referral for outpatient counseling AND (2) received or refused a prescription for medications to help them quit or had a reason for not receiving medication	65 %	75 %	60 %	Higher is Better **10 % Lower** than Florida average. **5 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients who use tobacco and at discharge (1) received a referral for outpatient counseling AND (2) received a prescription for medications to help them quit or had a reason for not receiving medication	59 %	50 %	22 %	Higher is Better **9 % Higher** than Florida average. **37 % Higher** than National average. Date Range: 1/2019 - 12/2019

Patient Safety

Mental health providers that value and respect an individual's independence and safety try to avoid using dangerous or restrictive methods of treatment, like physical restraints or seclusion. Instead of putting patients in physical restraints or seclusion, providers may try to identify patients at risk of violence or aggression early to prevent dangerous incidents. These measures are reported as rates per 1,000 patient hours. **How this page works »**

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Hours that patients spent in physical restraints for every 1,000 hours of patient care	0.24	0.66	0.34	Lower is Better **0.42 Lower** than Florida average. **0.1 Lower** than National average. Date Range: 1/2019 - 12/2019
Hours that patients spent in seclusion for every 1,000 hours of patient care	0.22	0.13	0.27	Lower is Better **0.09 Higher** than Florida average. **0.05 Lower** than National average. Date Range: 1/2019 - 12/2019

Follow Up Care

Patients can experience gaps in their health care and in communication between their providers after leaving an inpatient facility. There are several ways that hospitals can improve patient follow-up care and communication. These measures provide information about how well hospitals coordinate medical care and support patients as they move from one medical setting to another. **How this page works »**

Measure	Jackson Health System	Florida Avg.	National Avg.	More Info
Patients discharged from an inpatient psychiatric facility who received (or whose provider received) a complete record of inpatient psychiatric care and plans for follow-up	80 %	74 %	68 %	Higher is Better **6 % Higher** than Florida average. **12 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients whose follow-up care provider received a complete record of their inpatient psychiatric care and plans for follow-up within 24 hours of discharge	73 %	65 %	59 %	Higher is Better **8 % Higher** than Florida average. **14 % Higher** than National average. Date Range: 1/2019 - 12/2019
Patients discharged from an inpatient psychiatric facility on 2 or more antipsychotic medications, intended to prevent individuals from experiencing hallucinations, delusions, extreme mood swings, or other issues), and whose multiple prescriptions were clinically appropriate	38 %	64 %	65 %	Higher is Better **26 % Lower** than Florida average. **27 % Lower** than National average. Date Range: 1/2019 - 12/2019
Patients hospitalized for mental illness who received follow-up care from an outpatient mental healthcare provider within 30 days of discharge	34.7 %	43.3 %	49.4 %	Higher is Better **8.6 % Lower** than Florida average. **14.7 % Lower** than National average. Date Range: 1/2019 - 12/2019
Patients hospitalized for mental illness who received follow-up care from an outpatient mental healthcare provider within 7 days of discharge	18.9 %	26.4 %	27.7 %	Higher is Better **5.5 % Lower** than Florida average. **8.8 % Lower** than National average. Date Range: 1/2019 - 12/2019

Unplanned Readmission

Returning to the hospital for unplanned care can increase the risk of infections, and cost more money. Providing high quality hospital care can prevent patients from returning, and reduce their stay if they have to come back. The measure below shows the percentage of patients who return to the hospital for an unplanned inpatient admission after leaving. **How this page works »**

Measure	Jackson Health System	National Result	More Info
Patients readmitted to any hospital within 30 days of discharge from the inpatient psychiatric facility	Worse than the National Rate	33%	Lower is Better Date Range: 7/2017 - 6/2019

Jackson HEALTH SYSTEM
Miracles made daily.

Stroke

These measures show how often hospitals provide care that research shows gets the best results for patients with certain conditions. This information can help you compare which hospitals give recommended care most often as part of the overall care they provide to patients.

Designations & Awards

Designations

Jackson Memorial Hospital: Certified Comprehensive Stroke Center by The Joint Commission

Jackson Memorial Hospital: Designated Comprehensive Stroke Center by the Florida Agency for Health Care Administration (AHCA)

Jackson North Medical Center: Certified Advanced Primary Stroke Center by The Joint Commission

Jackson North Medical Center: Designated Primary Stroke Center by the Florida Agency for Health Care Administration (AHCA)

Jackson South Medical Center: Designated Primary Stroke Center by the Florida Agency for Health Care Administration (AHCA)

Awards

Jackson Memorial Hospital Recognized for Excellence in Stroke Care by the American Heart Association and American Stroke Association

Jackson Memorial Hospital and Jackson North Medical Center Receive Gold Plus Award and Target: Stroke Honor Roll Elite Plus Award from the American Heart Association and American Stroke Association

Designations

Jackson Memorial Hospital: Certified Comprehensive Stroke Center by The Joint Commission

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Awards

Jackson Memorial Hospital Recognized for Excellence in Stroke Care by the American Heart Association and American Stroke Association

Jackson Memorial Hospital and Jackson North Medical Center Receive Gold Plus Award and Target: Stroke Honor Roll Elite Plus Award from the American Heart Association and American Stroke Association

Stroke Data

Quick stroke diagnosis is the key to saving lives. Stroke is the fifth leading cause of death and a leading cause of adult disability in the United States, according to the American Heart Association/American Stroke Association. Jackson Health System has specialized stroke teams ready at a moment's notice 24/7 to offer the latest, most comprehensive treatments to ensure the best chance of a full recovery. Backed by our expertise in neurology and neurosurgery, stroke services are offered at Jackson Memorial Hospital, Ryder Trauma Center, Jackson North Medical Center, and Jackson South Medical Center.

Measure	Jackson Memorial Hospital	Academic Hospitals	All CSTK Hospitals	More Info
Average (median) number of minutes before patients received IV thrombolysis (clot busting treatment).	30 Mins	41 Mins	39 Mins	Lower is Better 11 Mins Lower than Academic Hospitals. 9 Mins Lower than All CSTK Hospitals. Date Range: Q1-Q2 2020
Percentage of patients receiving treatment with the signs and symptoms of stroke in the hospital's stroke program. Aggregated data	29.6 %	23.2 %	25.3 %	Higher is Better 6.4 % Higher than Academic Hospitals. 4.3 % Higher than All CSTK Hospitals. Date Range: Q1-Q2 2020
Symptomatic Intracerebral Hemorrhage post Tissue Plasminogen Activator (sICH post IV tPA)	0 %	2.9 %	2.6 %	Lower is Better 2.9 % Lower than Academic Hospitals. 2.6 % Lower than All CSTK Hospitals. Date Range: Q1-Q2 2020
Proportion of patients who had a brain CT scan to determine if stroke is hemorrhagic or cause by a clot within 25 minutes of hospital arrival who arrive to the hospital within 24 hours of symptoms.	73 %	64 %	38 %	Higher is Better 9 % Higher than Academic Hospitals. 35 % Higher than All CSTK Hospitals. Date Range: Q1-Q2 2020
Mechanical Endovascular Reperfusion Therapy for eligible patients with ischemic stroke	100 %	99.3 %	99.2 %	Higher is Better 0.7 % Higher than Academic Hospitals. 0.8 % Higher than All CSTK Hospitals. Date Range: Q1-Q2 2020

Stroke Volume

Quick stroke diagnosis is the key to saving lives. Stroke is the fifth leading cause of death and a leading cause of adult disability in the United States, according to the American Heart Association/American Stroke Association. Jackson Health System has specialized stroke teams ready at a moment's notice 24/7 to offer the latest, most comprehensive treatments to ensure the best chance of a full recovery. Backed by our expertise in neurology and neurosurgery, stroke services are offered at Jackson Memorial Hospital, Ryder Trauma Center, Jackson North Medical Center, and Jackson South Medical Center.

Total volume of hospital admitted stroke and TIA patients	224 Patients	Date Range: Q3 2019
Total volume of hospital admitted Ischemic stroke patients.	141 Patients	Date Range: Q3 2019
Total volume of hospital admitted Intracerabral hemorrge (ICH) patients.	39 Patients	Date Range: Q3 2019
Total volume of hospital admitted Subarachnoid Hemorrhage (SAH) patients.	19 Patients	Date Range: Q3 2019
Total volume of hospital admitted Transient Ischemic Attack (TIA) patients.	25 Patients	Date Range: Q3 2019

Transplant

Over our annual 50 year history of providing organ transplantation, the Miami Transplant Institute (MTI) has grown into the safest and most consistently transplant center performing of solid organ transplant in both adults and children. Our patients benefit from the expertise of our surgeons, hepatologists, transplant nephrologists, and other multidisciplinary teams. In 2019, MTI performed more than 1,000 transplants, the most transplants in a single year in the history of the program. Our patients from all over the US and around the world trust in MTI for transplant care.

Adult Kidney

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Non-Hispanic Black - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Non-Hispanic White - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Hispanic - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Asian - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Other

Measure	1-Yr	3-year-Est	5-Year-Est-Est	Risk Adj
Patient Survival Rate (Adjusted Survival Rate)	97.0	94.0	91.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Non-Hispanic Black
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Non-Hispanic White
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Hispanic
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Asian
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ - Other

Adult Kidney Pancreas

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Non-Hispanic Black - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Non-Hispanic White - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Hispanic - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Asian - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Other

Measure	1-Yr	3-year-Est	5-Year-Est-Est	Risk Adj
Patient Survival Rate (Adjusted Survival Rate)	97.0	94.0	91.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Non-Hispanic Black
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Non-Hispanic White
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Hispanic
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Asian
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Kidney Pancreas - Deceased Donor - Single Organ - Other

Adult Liver

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Non-Hispanic Black - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Non-Hispanic White - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Hispanic - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Asian - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Other

Measure	1-Yr	3-year-Est	5-Year-Est-Est	Risk Adj
Patient Survival Rate (Adjusted Survival Rate)	97.0	94.0	91.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Non-Hispanic Black
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Non-Hispanic White
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Hispanic
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Asian
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Adult - Liver - Deceased Donor - Single Organ - Other

Pediatric Kidney

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Non-Hispanic Black - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Non-Hispanic White - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Hispanic - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Asian - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Other

Measure	1-Yr	3-year-Est	5-Year-Est-Est	Risk Adj
Patient Survival Rate (Adjusted Survival Rate)	97.0	94.0	91.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Non-Hispanic Black
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Non-Hispanic White
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Hispanic
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Asian
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ - Other

Pediatric Liver

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Non-Hispanic Black - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Non-Hispanic White - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Hispanic - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Asian - Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Other

Measure	1-Yr	3-year-Est	5-Year-Est-Est	Risk Adj
Patient Survival Rate (Adjusted Survival Rate)	97.0	94.0	91.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Non-Hispanic Black
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Non-Hispanic White
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Hispanic
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Asian
Patient Survival Rate (Adjusted Survival Rate)	98.0	96.0	94.0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Risk Adjusted Survival Analysis (RASA) - Transplants 2015-2018 - Pediatric - Liver - Deceased Donor - Single Organ - Other

Tolerance

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Measure	1-Yr Outcome	Source/Year/Sample	Risk Adj
Pediatric Kidney Transplant Recipients	100	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Non-Hispanic White Kidney Transplant Recipients	100	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Non-Hispanic Black Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Hispanic Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Asian Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Other Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ

Adult Kidney

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Measure	1-Yr Outcome	Source/Year/Sample	Risk Adj
Non-Hispanic Black Kidney Transplant Recipients	100	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ
Non-Hispanic White Kidney Transplant Recipients	100	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ
Hispanic Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ
Asian Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ
Other Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Adult - Kidney - Deceased Donor - Single Organ

Pediatric Tolerance

Please interpret the graph with caution. Outcomes of organ transplant recipients are affected by many factors, including the quality of the donor organ, the health of the recipient, and the care provided after the transplant. Learn more about how we care for our patients and how we measure our outcomes at Jackson Health System.

Measure	1-Yr Outcome	Source/Year/Sample	Risk Adj
Non-Hispanic Black Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Non-Hispanic White Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Hispanic Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Asian Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ
Other Kidney Transplant Recipients	0	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ	Data Source: Scientific Registry of Transplant Recipients (SRTR) - Data Analysis System (SRTR-DAS) - Transplants 2015-2018 - Pediatric - Kidney - Deceased Donor - Single Organ