Patient referrals, transfers and consults are critically important, and we want to make it easy for referring providers and their staff. To refer your patient for a clinic appointment, call our Clinic Concierge at **855.312.4190**.
Ochsner’s longstanding tradition of bringing physicians together to improve health outcomes continues today. Our goals are to work together with our referring providers to serve the needs of patients and to provide coordinated treatment through partnerships that put patients first. We have automated physician-to-physician patient care summaries for hospital encounters and enhanced the patient experience by giving patients the ability to schedule appointments online.

Close coordination and collaboration begin with transparency and access to the data you need to make informed decisions when advising your patients about care options. *Ochsner Outcomes*, a compilation of clinical data, represents only part of our efforts to better define the quality of Ochsner’s care and to share that information with you.

Trusted, independent organizations give the highest marks to Ochsner’s quality. Ochsner Medical Center was the only healthcare institution in Louisiana to receive national rankings in six specialties from *U.S. News & World Report* for 2015–2016. Additionally, CareChex® named Ochsner Medical Center, Ochsner Baptist, a Campus of Ochsner Medical Center and Ochsner Medical Center – West Bank Campus among the top 10% in the nation in 17 different specialties and, for the fourth year in a row, Ochsner was named #1 in the country for liver transplant. Ochsner was also recognized, again for the fourth year in a row, as one of “100 Great Hospitals in America,” by Becker’s Hospital Review.

Additionally, Ochsner Health System was named an honoree for the 2015 American Medical Group Association (AMGA) Acclaim Award. Among just four organizations nationwide to receive this recognition, Ochsner was acknowledged for our work to measurably improve quality and value of care, improve patient experience and outcomes, improve population health and promote continuous learning and innovation.

Ochsner is the first hospital in the United States – and perhaps even the globe – to partner with Apple and Epic to create a platform that can directly affect patient care in real time. We are utilizing the Apple Watch as an agent for behavioral change for patients with chronic disease, starting with patients who have uncontrolled high blood pressure.

Ochsner consistently earns the respect of independent evaluators. We do not rest on these achievements, but use them as a benchmark to continuously improve. We will continue to share the data you need to care for your patients, provide services you may not have in your community and develop the collaborative relationships essential to ensuring the best outcomes for every patient, every time.
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Letter from the Chairmen

The Ochsner Multi-Organ Transplant Institute achieved new rankings, placing us among the top transplant programs in the United States. In 2015, CareChex® recognized Ochsner as #1 in the nation in liver transplantation for quality for the fourth year in a row. Our kidney transplantation patient survival rates exceed national averages. Overall, our patients are doing better, living longer and experiencing fewer complications.

These are major achievements, indeed. These laudable rankings are the result of decades of dedication by numerous skilled surgeons, providers, researchers, nurses, social workers, coordinators and other support staff who work year after year to constantly improve our comprehensive care. Since 1984, Ochsner’s staff has focused intensely on improving patient outcomes in every possible way. We have recruited some of the world’s leading transplant surgeons and physicians, placing them in an environment in which they can excel. The rankings achieved confirm that Ochsner’s transplant team has the right people and processes in place to provide the highest quality of care for our patients.

Ochsner’s goal has been to become one of the leading transplant programs in the world. Through our innovation and dedication to excellence, what we have instituted since inception is a true testament to this goal, and we continue to aim high. Organ transplant is among the most challenging medical specialties. Our ability to research new technologies and procedures prepares us to meet the future needs of patients from around the world. As the program continues to grow both regionally and nationally, we remain committed to new research and development opportunities that increase the quality of life for our patients and save more lives.

2015 was a banner year for Ochsner Multi-Organ Transplant Institute and the patients we serve, and we are pleased to share our progress with you in these pages.
Ochsner Multi-Organ Transplant Institute

Since its inception in 1984, the Ochsner Multi-Organ Transplant Institute has performed more than 5,500 life-saving transplants, making it one of the nation’s leading transplant centers. During 2015, the Transplant Institute strengthened its position as an international leader by achieving the highest national benchmarks for quality. In all aspects, Ochsner has emerged as one of the world’s most renowned, comprehensive transplant programs, serving patients with advancing research, skilled staff, high clinical success rates and a resource-rich support program unparalleled in meeting patient needs.

“We are very proud of our concerted efforts to achieve the best possible outcomes for our patients. Our success is reflected in our consistently high CareChex® rankings for transplant. In 2015, we were ranked #1 in liver transplants for the 4th consecutive year, #2 in overall transplants and in the top 10 for heart transplants.”

Ari J. Cohen, MD, MSC
Head, Abdominal Transplant Surgery
Surgical Director, Kidney Transplant Program
Director, Transplant Research
Who We Are

The Ochsner Multi-Organ Transplant Institute performs liver, kidney, kidney/pancreas, heart and lung transplants for adults and children. We have united exceptional teams of skilled surgeons, physicians, researchers, advanced practice providers, nurses, social workers, doctors of pharmacy, dieticians, coordinators and support staff to deliver comprehensive, highly advanced transplant care that saves lives and restores health. Over the decades, experience and high volumes have been matched by rising patient success rates. The Transplant Institute offers accommodations for patients and families, as well as special services needed for international patients. The Transplant Institute shares the same qualities of Ochsner Health System as a leader in patient care: medical innovation, commitment to multidisciplinary care and exemplary support services for patient well-being.

Overview of Subspecialties with Volume*

Liver
- 2,418 liver transplants performed
- 237 liver transplants performed in 2015 alone

Kidney, Kidney/Pancreas, Pancreas
- 2,352 kidney, kidney/pancreas and pancreas transplants performed in adults and children

Heart
- 906 heart transplants performed
- First total artificial heart procedure in Louisiana and the Gulf South

Lung
- 363 lung transplants performed
- The only lung transplant program in Louisiana

How Ochsner’s History Shapes Our Care

Ochsner Health System has pioneered many medical advances, including being one of the first institutions to link smoking to lung cancer. Organ transplants are another Ochsner first, with groundbreaking work that started the Transplant Institute on a pathway of achievement. These achievements include completing the first heart transplant in the region in 1970 and the first liver transplant in 1975. By pursuing research and clinical excellence and adding programs for even the rarest and most complex organ transplants, the Transplant Institute continues to grow and serve more patients.

- Patient survival rates consistently above national averages
- Performed the most liver transplants in the United States in 2012, 2013, 2014 and 2015
- Medicare-approved transplant center for heart, liver, kidney and lung transplants
- Center of Excellence for most insurers, including United Resource Network programs – centers earning this designation are recognized for improving patient outcomes, efficiency and quality

Who We Serve

Since its early days, Ochsner has been a healthcare center for both national and international patients, including those from Central and South America. Many of the specialized services developed at Ochsner assist patients from other countries, and the Transplant Institute follows this tradition with adults and children from around the world coming to Ochsner for transplant services. We have treated transplant patients from 37 states and 10 countries.

*Volumes as of 8/8/16
What Ochsner Means to Patients

• Shorter wait times for transplant
• Higher transplant success rates
• Innovative surgical procedures
• Minimal operative times
• On-site housing
• Fewer days in critical care, shorter hospital stays
• Staff always accessible to patients
• Comfortable and convenient accommodations for families and patients
• Translation services and other support services for international patients

What We Have Accomplished

Extending the life of each organ transplant patient – including enhancing their quality of life – is our most significant accomplishment. Ochsner works as a team to achieve new medical advances and optimal efficiencies that save more lives. Each Ochsner transplant program has earned accolades. In 2015, more than 3,600 potential transplant candidates were referred to our Institute, with 464 of these candidates receiving a transplant.

From 2012–2015, we performed the most adult liver transplants of any U.S. hospital. We are the largest Medicare-approved heart transplant program in the state and the only lung transplant program in Louisiana. Our kidney and kidney/pancreas programs performed a total of 167 transplants in 2015. We are the only heart transplant program in Louisiana.

How We Work to Save More Lives through Transplants

Since one donor can save as many as nine lives, Ochsner avidly promotes organ donation through public education and donor recruitment programs. With more than 120,000 American men, women and children waiting for life-saving organ transplants and an average of 20 Americans dying each day because of the lack of available organs, we are doing all we can to encourage more people to become donors.

“Each caring professional on our multidisciplinary team brings unique specialty-specific, complementary skills that collectively provide the best possible patient care experience. Our team members work closely together with a unified focus on our patients’ personal needs and success.”

Catherine Staffeld-Coit, MD
Medical Director, Kidney & Kidney/Pancreas Transplantation
Saving More Lives for Over 40 Years

- 1970: First heart transplant in Gulf South performed at Ochsner.
- 1973: First kidney transplant performed at Ochsner.
- 1975: First liver transplant in Louisiana performed at Ochsner.
- 1984: Multi-Organ Transplant Institute is established at Ochsner.
- 1985: First pediatric heart and liver transplants performed in the Gulf South at Ochsner.
- 1991: First double lung and pancreas transplants in Louisiana performed at Ochsner.
- 1993: Ochsner surgeons perform a double lung transplant on youngest person in U.S. history.
- 1999: First split liver transplant in Louisiana performed at Ochsner.
First transplant program in Louisiana to perform more than 100 transplants in a single year.

First adult living related liver transplant performed at Ochsner.

Ochsner celebrates 1,000th liver, 1,000th kidney and 700th heart transplant.

1 of 11 hospitals in U.S. to receive HealthGrades® Kidney Transplant Excellence Award.™

Ranked #1 in the nation in liver transplants by CareChex.®

Ranked #2 in the nation in kidney transplants by CareChex.®

Tied for performing the most adult liver transplants of any U.S. medical center, according to statistics compiled by the United Network for Organ Sharing (UNOS).

First total artificial heart bridge to transplant in Gulf South performed at Ochsner.

Performed the most adult liver transplants in the U.S., according to statistics compiled by the United Network for Organ Sharing (UNOS).

Ranked #1 in the nation in liver transplants by CareChex.®

Ranked #2 in the nation overall in transplants by CareChex.®

Ranked #9 in the nation in heart transplants by CareChex.®

Ranked #1 in the Nation in liver transplants by CareChex.®

1 of 7 hospitals in the U.S. to receive HealthGrades® Liver Transplant Excellence Award.™

Performed the most adult liver transplants and tied for the most kidney/pancreas transplants of any U.S. medical center, according to statistics compiled by the United Network for Organ Sharing (UNOS). Second largest kidney/pancreas transplant program in the United States.

Ochsner surgeons perform 500th heart transplant, one of only 6 U.S. transplant centers to have achieved this milestone.

2003

2008

2011

2012

2013

2014

2015
Liver

Liver transplant patients at Ochsner have survival rates that exceed national rates at one-month, one-year and three-year marks. In 2015, the one-year survival rate was 93.9 percent, compared to 90.9 percent nationally. The length of time patients wait for a liver transplant at Ochsner is also far below national averages. The most recent median wait time at Ochsner is two months compared to 16 months nationwide.
When Limor Eisner Rosenberg, who lives outside of Tel Aviv, Israel, learned that she would need a second liver transplant at the age of 43, Ochsner was her first choice. Eisner needed her first liver transplant at the age of 12. Some 30 years after the first transplant, her medical team in Israel recommended she go to Ochsner for a second transplant. “They said that Ochsner had the experience needed to do a difficult second transplant,” says Eisner, a full-time mother of two teenage children. On November 17, 2014, Eisner underwent a 10-hour operation, in which Ochsner’s top transplant surgeons collaborated. “I know it was a complicated operation,” Eisner says, “but they did not give up on me. It is because of them that I am still alive today.” Eisner praises Ochsner’s attentiveness and responsiveness to all her needs and concerns. “Whether I needed counseling, physical therapy or help from a social worker, Ochsner provided all that and more. I felt very safe and secure, and it was such a positive experience.” She also expresses her deepest gratitude to the donor and her family, who made such a generous gift of life.
Ochsner’s liver transplant program is the largest in the nation for the fifth year in a row. With experience comes the confidence to take on some of the most difficult cases in transplant, including retransplantation, transplant of obese recipients and transplantation of patients with portal vein thrombosis.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
The Ochsner Liver Transplant Program is ranked #1 in the nation for overall quality by CareChex® from 2012–2015. As of July 2014, the liver program also achieved significantly better than expected results for one-month, one-year and three-year patient survival and one-month and one-year graft survival.
Liver Transplant in Patients with BMI Greater Than or Equal to 40 (Patient and Graft Survival)
Ochsner Medical Center, 2005–2015

- Patient Survival n = 110
- Graft Survival n = 115

<table>
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<tr>
<th>Days</th>
<th>Patient Survival</th>
<th>Graft Survival</th>
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</thead>
<tbody>
<tr>
<td>38</td>
<td>99.1%</td>
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<tr>
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<td></td>
<td></td>
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<tr>
<td>1,817</td>
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</tr>
</tbody>
</table>
Percentage of Patients with BMI of 31 or Greater Receiving Liver Transplants
Ochsner Medical Center, 7/1/2014 – 6/30/2015

- 34% for Ochsner
- 27% for Region 3
- 27% for United States

Region 3: LA, MS, AR, AL, FL, GA, Puerto Rico
United States: All liver transplant centers in the U.S. including Ochsner.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Ochsner’s median time to liver transplant is only 2.1 months compared to more than 15 months nationally. In Louisiana, an organ donor results in a liver transplant 97 percent of the time, a rate statistically higher than the national average of 76 percent. As a result, we now work with organ procurement organizations all over the country to increase the number of liver allografts transplanted and to save the lives of patients waiting on our list. More than 50 percent of livers transplanted at Ochsner come from outside Louisiana.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Liver Transplants from Deceased Cardiac Death Donors (Patient and Graft Survival)
Ochsner Medical Center, 2005–2015

Patient Survival n = 128
Graft Survival n = 129
Donation after cardiac death (DCD) is a method of donation that offers great promise to increase the number of organs available for transplantation. Many U.S. liver programs shy away from using DCD livers for fear of decreased patient and graft survival. At Ochsner, we have developed a bundle of donor and recipient operative techniques that make results from DCD livers virtually identical to results achieved using deceased brain death donor livers. Our comfort with and expertise using DCD donor livers allows us to offer a life-saving liver transplant to an additional 20 patients per year.
Liver Transplant Rate
Wait List Registrations, 7/1/2014 – 6/30/2015

- Observed: 209.7 per 100 Person Years
- Expected: 69.0 per 100 Person Years

Waiting list rates are measured as the number of transplants (or deaths) per year that any patient spends on the waiting list.

Region 3: LA, MS, AR, AL, FL, GA, Puerto Rico
United States: All liver transplant centers in the U.S. including Ochsner.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.

Liver Transplant Wait List Mortality Rate
Wait List Registrations, 7/1/2014 – 6/30/2015

- Observed: 15.0 per 100 Person Years
- Expected: 18.7 per 100 Person Years

Waiting list rates are measured as the number of transplants (or deaths) per year that any patient spends on the waiting list.

Region 3: LA, MS, AR, AL, FL, GA, Puerto Rico
United States: All liver transplant centers in the U.S. including Ochsner.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Since its inception, the Liver Transplant Program at Ochsner has performed over 2,400 life-saving liver transplants in adults and children. The Ochsner Liver Transplant Program ranks #1 in the United States by volume for 2012, 2013, 2014 and 2015.
Depicts state of origin for deceased donor livers transplanted at Ochsner from 2013–2015
Kidney

Kidney transplant survival rates at Ochsner exceed national averages. In 2015, Ochsner recipients who received an organ from a deceased donor had a one-year graft survival rate of 96.2 percent, compared to 93.6 percent nationally. Ochsner’s living donor kidney transplant recipients had a one-year graft survival rate of 97.9 percent.

**Ochsner Kidney Transplant 1-Year Graft Survival Hazard Ratio**
Comparison with Other Programs (All Donor Types)
Ochsner Medical Center Program Volume for Transplants, 7/1/2012 – 12/31/2014

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
The one-year patient survival rate at Ochsner for patients receiving a kidney exceed national averages and are equal to or exceed expected rates.
The three-year graft survival rate for patients receiving a kidney from a living donor exceeds expected rates and national averages.

Ochsner Kidney Transplant 3-Year Graft Survival Hazard Ratio
Comparison with Other Programs (All Donor Types)
Ochsner Medical Center Program Volume for Transplants, 1/1/2010 – 6/30/2012

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
The three-year patient survival rate at Ochsner for patients receiving a kidney exceed national averages and are equal to or exceed expected rates.

Ochsner Kidney Transplant 3-Year Patient Survival Hazard Ratio
Comparison with Other Programs (All Donor Types)
Ochsner Medical Center Program Volume for Transplants, 1/1/2010 – 6/30/2012

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Kidney Transplant Volume
Ochsner Medical Center, 2008–2016

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<th>Kidney – Cadaveric</th>
<th>Kidney – Living Donor</th>
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<tbody>
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<td>15</td>
<td>83</td>
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<td>2015</td>
<td>30</td>
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<tr>
<td>2016</td>
<td>41</td>
<td>100</td>
</tr>
</tbody>
</table>

2016 annualized as of 2/24/16
Kidney/Pancreas

In 2015, Ochsner recipients who received an organ from a deceased donor had a one-year patient survival rate of 94.5 percent, compared to 97.4 percent nationally.
Ochsner Combined Kidney/Pancreas Transplant 1-Year Kidney Graft Survival Hazard Ratio Comparison with Other Programs
Ochsner Medical Center Program Volume for Transplants, 7/1/2012 – 12/31/2014

Ochsner Medical Center Program Volume for Transplants, 1/1/2010 – 6/30/2012

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Jack “Big Jack” Badinger
Kidney/Pancreas Patient

Jack “Big Jack” Badinger had always been larger than life. After living with diabetes for almost 20 years, he was told his kidneys were working at 22 percent and that he would need a transplant. At 2:30 a.m. on June 16, 2011, Badinger underwent a kidney/pancreas transplant at Ochsner. Since receiving his transplant, he won a bronze medal in basketball at the 2014 Transplant Games and was named a Kidney Hero in 2015 by the National Kidney Foundation of Louisiana. Badinger also met his donor’s family and honored his donor at the National Kidney Foundation Kidney Walk in 2014. Badinger feels he has accomplished so much after receiving his transplant because of all the friends he has made over the past five years and because the only thing left for him to do is to “keep being awesome.”
“At Ochsner, we offer simultaneous kidney/pancreas transplants not only to patients with type 1 diabetes who require kidney transplantation, but also to select patients with type 2 diabetes – a practice that only a few centers in the U.S. offer. Additionally, Ochsner performed more than twenty kidney/pancreas transplants in 2015, placing it in the top 10% of kidney/pancreas transplant programs in the country.”

Humberto E. Bohorquez, MD
Transplant Surgeon, Section of Abdominal Organ Transplantation
Surgical Director, Pancreas Transplantation

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Median time to transplant is calculated as the time it takes for a given percentage of patients at this facility to receive a transplant. This is the “time-to-transplant” among all wait-listed patients, including those who never receive a transplant. Half the patients placed on the wait list at Ochsner received a kidney/pancreas transplant within 4.9 months of listing, compared to 14.9 months nationally.
Transplant rates are measured as the number of transplants (or deaths) per year that any patient spends on the waiting list. It is possible for these rates to be above 1, as would be the case if two patients each spent three months on the waiting list and one received a transplant: 1 transplant divided by .5 year = transplant rate of 2. The graph below demonstrates the patient transplant rate at Ochsner for combined kidney/pancreas is more than twice the expected rate.
In 2013 and 2014, the Ochsner Kidney/Pancreas Transplant Program performed the second highest number of transplants in the United States.
Heart

Heart transplant patients at Ochsner have three-year survival rates higher than the national average. In 2015, the three-year survival rate was 84.6 percent, compared to 84.2 percent nationally.

Ochsner Heart Transplant 1-Year Adult Patient Survival Hazard Ratio
Comparison with Other Programs
Ochsner Medical Center Program Volume for Transplants, 7/1/2012 – 12/31/2014

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Jamie Napolitano, Heart Transplant Patient

When Jamie Napolitano was 3 months old, she was diagnosed with cardiomyopathy, a disease of the heart muscle. Her parents were told that she would probably not live past the age of 2. Despite their daughter’s prognosis, Napolitano’s parents allowed her to live like a “normal” child and she did not feel the effects of heart disease until she experienced a heart attack at age 19. Her medication regimen became more intense as her symptoms took a toll on her physical and emotional well-being. A few years later, Napolitano’s heart was functioning at about 20 percent, and she was told she would need a new heart. On January 1, 2009, she underwent a heart transplant at Ochsner. Since her transplant, she has run in four half-marathons. In addition to spending time with her family, Napolitano volunteers for Donate Life Louisiana and the American Heart Association. Napolitano is grateful that her donor, her hero, said yes to the gift of life.
Ochsner Heart Transplant 3-Year Adult Patient Survival Hazard Ratio
Comparison with Other Programs
Ochsner Medical Center Program Volume for Transplants, 1/1/2010 – 6/30/2012

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Ochsner has the only comprehensive advanced heart failure program in the state and is the largest ventricular assist device (VAD) implanting site with a long history of success. VADs are life-saving devices that are used as a bridge to transplant or as a destination therapy (DT). Ochsner is currently the only VAD center in Louisiana with a Joint Commission DT Certification. With national heart transplant wait times ranging from days to years, many patients will expire or have an extremely diminished quality of life without them. Our team also participates in many mechanical circulatory support-related clinical trials.

**Heart Transplant & VAD Volume**
Ochsner Medical Center, 2000–2016

- Adult Heart Transplants
- Pediatric Heart Transplants
- VADs

2016 annualized as of 8/8/16
Lung

Our one-month survival rate was 94.1 percent and one-year survival rate was 84.3 percent. The median length of time patients wait for a lung transplant at Ochsner is approximately three months, compared to more than four months nationally.
Paul Thibodeaux was born with cystic fibrosis. His parents were told that he would not live past the age of 12 years and he would never run and play like normal kids. His parents never held him back, and he played several sports through high school. After college, Paul began a career as a police officer and got serious about fitness. After 12 years as a patrol officer and five as a SWAT officer, the disease got the best of Paul and he was put on long-term disability. His weight dropped to 108 pounds and he had only 17% lung function. On May 30, 2015, he received a life-saving double-lung transplant. After the transplant, as soon as he was allowed, he started walking every day and later was allowed to lift light weights. Paul can now lift whatever he wants; he weighs 158 pounds and has 114% lung function. Paul returned to work as a patrol officer eight months after the transplant and made the department’s Incident Response Team two weeks later. He thanks his donor family for giving him a second chance at life and a second chance to serve and protect the people of his community.
Wait time to transplant is shorter by an average of greater than one month, and our one-year survival rates are slightly below expected; however, these differences are not statistically significant.
Median Time to Lung Transplant in Months
Wait List Registrations 7/1/09 – 12/31/14

Region 3: LA, MS, AR, AL, FL, GA, Puerto Rico
United States: All lung transplant centers in the U.S. including Ochsner.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.

Lung Transplant Rate
Wait List Registrations 7/1/2014 – 6/30/2014

Region 3: LA, MS, AR, AL, FL, GA, Puerto Rico
United States: All lung transplant centers in the U.S. including Ochsner.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
Primary Lung Transplant Diagnosis
Ochsner Medical Center, 07/1/2014 – 06/30/2015

- Cystic Fibrosis: 34.6%
- Idiopathic Pulmonary Fibrosis: 46.2%
- Emphysema/COPD: 55.7%
- Pulmonary Arterial Hypertension: 24.0%
- Other: 3.8%

Region 3: LA, MS, AR, AL, FL, GA, Puerto Rico
United States: All lung transplant centers in the U.S. including Ochsner.

The data reported here were prepared by the Scientific Registry of Transplant Recipients (SRTR) under contract with the Health Resources and Services Administration (HRSA). Based on data available as of October 31, 2015. Publication date December 2015.
“We are proud of the lung transplant team we have here at Ochsner. Over the last few years, we have been able to increase the volume of transplants while also improving the results. We take great pride in the work we are able to do together for the benefit of our patients. In lung transplant, as in the rest of the Ochsner system, the patients come first.”

Michael Bates, MD
Program Head, Thoracic Organ Transplantation
Thoracic & Cardiovascular Surgery
Cardiothoracic Surgery
Pediatric Transplant

“Organ transplantation is a life-saving treatment for children in need, but it is no doubt an enormously stressful time for patients and their families. By providing the highest level of pediatric transplant care in the Gulf South region, patients are able to stay closer to home – closer to their families and communities who provide invaluable support during this challenging time.”

John Seal, MD
Transplant Surgeon
Section of Abdominal Organ Transplantation

Ochsner offers the highest level of care in pediatric heart, liver, kidney and lung transplantation. Building on the success of our adult program, the pediatric liver transplant program cares for children of all ages, using advanced techniques in split-liver, living donor and reduced-size grafts to accommodate our smallest patients. Ochsner is the only center in the Gulf South region to offer pediatric heart transplantation and surgical management of congenital heart disease. With the recent addition of Dr. Benjamin Peeler as the chief of Pediatric Heart Transplant, we anticipate further success and growth of these programs.
Our son Briggs Elliser received three life-saving liver transplants at Ochsner Medical Center during the summer of 2015 when he was only 5 months old. We were in the hospital on an in-patient basis from June 24 through August 5, 2015. This was the most difficult time in our lives, but peace surrounded us because we knew our son was receiving the best care he could get. The doctors, nurses, social workers, transplant team, therapists and anyone who came in contact with Briggs and our family made sure that all our needs were taken care of, and all those people became a part of our family. Those days were long and exhausting and many things were uncertain, but we knew that we were loved and that the staff was doing everything they could to make our son healthy again. To this day, we look forward to coming back to Clinic so that everyone can see how amazingly well Briggs is doing and how far he has come. We wouldn’t have made it through those months without our team, and we are very thankful for them!
Why Ochsner?

Respect and support for wellness care are essential. As an internationally renowned transplant center, Ochsner excels in supporting total patient well-being along with delivering excellent medical care.

**Patient-Transplant Team Covenant**

The Patient-Transplant Team Covenant is a reminder of the important relationship between patients and those who provide healthcare. Respect, trust and partnership between patients and healthcare team members set the foundation for healing.

Ochsner created a Patient-Transplant Team Covenant to help promote trusting relationships and foster the highest standards of care. The Covenant is a series of commitments made by Ochsner patients and caregivers, who pledge to work together with respect, trust and in partnership. The partnerships among patients and the transplant team start with the first visit and continue over many years.

The Covenant helps caregivers and patients understand what they can expect from each other and what their responsibilities are in this long-term relationship. Because transplant care is so complex and because we work so intensely with our patients, we need to respect, trust and partner with each other. The Covenant helps us develop those essential qualities that can influence a patient’s outcomes.
Patient-Transplant Team COVENANT

As the Transplant Team and partner in your healthcare, we commit to always:

VALUE YOU AS A PERSON
- Recognize you as a whole person.
- Respect your dignity, values and beliefs.
- Keep your information private unless you give us permission to share.
- Carefully listen to what you have to say.

VALUE YOU AS PEOPLE
- Recognize you as people committed to my well-being.
- Respect your expertise and experience.
- Be very clear about what information is okay to share with others.
- Carefully listen to what you have to say.

TELL YOU THE TRUTH WITH COMPASSION
- Help you feel comfortable sharing your doubts and fears.
- Be honest about your health conditions and how you respond to treatment.
- Tell you about your medical condition in a timely manner.

TELL YOU THE TRUTH WITH CONFIDENCE
- Be able to talk about my doubts and fears with you.
- Be truthful about my health, treatments and how I am following your instructions.
- Tell you all I can about my health in a timely manner.

INCLUDE YOU AS AN ACTIVE TRANSPLANT TEAM MEMBER
- Partner with you to agree on your best healthcare plan.
- Coordinate with all who provide you with healthcare.
- Answer your questions as best we can.
- Include your caregivers as part of your transplant team.

BE AN ACTIVE MEMBER OF MY TRANSPLANT TEAM
- Partner with you on the healthcare plan I agree to follow.
- Tell you about everyone who provides me with healthcare.
- Ask you right away when anything is not clear to me.
- Include my caregivers as part of my transplant team. Bring a caregiver to all my visits.

TRUST

PARTNERSHIP
## Research

### Chart Reviews 2015

<table>
<thead>
<tr>
<th>IRB#</th>
<th>Title</th>
<th>Abbreviation</th>
<th>Principal Investigator/Co-Investigator</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002.223.A</td>
<td>Transplantation of Livers from Anti-HBc Positive Donors into Anti-HBc Negative Recipients: A Retrospective Analysis</td>
<td>LIVER anti Hbc+ to anti Hbc-</td>
<td>Ari Cohen/ Carmody</td>
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<tr>
<td>2002.224.A</td>
<td>A Liver Transplantation for Hepatocellular Carcinoma</td>
<td>LIVER HCC</td>
<td>Ari Cohen/ Carmody</td>
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<td>2002.408.A</td>
<td>Steroid-Free Liver Transplantation</td>
<td>liver steroid free</td>
<td>Ari Cohen</td>
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<tr>
<td>2003.710.A</td>
<td>A Patient Analysis and Tracking System for Multi-Organ Transplant</td>
<td>n/a</td>
<td>Ari Cohen</td>
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<td>2008.003.B</td>
<td>Comparison of Outcomes in Renal Transplant Recipients Treated with or without Campath at Ochsner</td>
<td>Campath vs steroid</td>
<td>Catherine Staffeld-Coit/Cruz</td>
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<tr>
<td>2008.065.C</td>
<td>Survival of Combined Liver-Kidney Transplants at Ochsner Compared to Those Listed in the UNOS Database</td>
<td>liver-kidney OCF vs UNOS</td>
<td>Ari Cohen/ Carmody</td>
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<tr>
<td>2008.123.A</td>
<td>Transplantation of Organs from Donors Deceased After Cardiac Death (DCD): The Ochsner Experience</td>
<td>DCD</td>
<td>Ian Carmody/Loss Jr.</td>
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<td>2009.008.A</td>
<td>Native Kidney Function at One Year After Combined Liver-Kidney Transplantation</td>
<td>native kidney 1yr post LK</td>
<td>Ari Cohen/ Carmody</td>
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<tr>
<td>2009.022.C</td>
<td>Biliary Reconstruction</td>
<td>biliary reconstruction</td>
<td>Ian Carmody/Loss Jr.</td>
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<tr>
<td>2009.078.B</td>
<td>Renal Function After Liver Transplant in Patients</td>
<td>n/a</td>
<td>Ari Cohen/Carmody</td>
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<tr>
<td>2011.125.B</td>
<td>A Prospective 3-Year Follow-Up Study In Subjects Previously Treated in a Phase IIB or Phase III Study with a TMC435-Containing Regimen for the Treatment of Hepatitis C Virus (HCV) Infection</td>
<td>n/a</td>
<td>Nigel Girgrah/Scheuermann</td>
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<td>2012.177.A</td>
<td>Isolation and Characterization of the Metastatic Potential of Human Hepatocellular Carcinoma Tumor Stem Cells</td>
<td>n/a</td>
<td>Trevor Reichman/Carmody</td>
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<tr>
<td>2012.235.A</td>
<td>Surgical Complications in Obese Kidney Donors</td>
<td>obese kidney donors</td>
<td>Jorge Garces/ Moiz</td>
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<tr>
<td>2013.259.A</td>
<td>Donor Liver Quality and Liver Transplant Outcomes: The Ochsner Experience</td>
<td>donor liver quality</td>
<td>Ari Cohen/Carmody</td>
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<tr>
<td>2013.286.B</td>
<td>Performance Improvement Project for Chronic Kidney Disease Best Practice Management in the Continuity Clinic.</td>
<td>PIP Garces</td>
<td>Jorge Garces/ Bodana</td>
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<tr>
<td>2014.027.C</td>
<td>Incidence of Post-Transplant Renal Artery Stenosis</td>
<td>renal artery stenosis</td>
<td>Jorge Garces/Jimenez</td>
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<td>2014.130.B</td>
<td>A Retrospective, Single-Center, Chart Review Study to Analyze Clinical Outcomes of Biliary Duct-to-Cystic Duct Anastomosis Using Liver Transplant Patient Records</td>
<td>n/a</td>
<td>Ari Cohen/ Carmody</td>
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<tr>
<td>2014.145.C</td>
<td>Outcomes Following Liver Transplantation in Patients with Hepatocellular Carcinoma</td>
<td>n/a</td>
<td>Trevor Reichman/ Carmody</td>
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<td>2014.317.C</td>
<td>Renal Function Outcomes in Liver Transplant Recipients: The Impact of Ethnicity</td>
<td>n/a</td>
<td>George Therapondos/ Gutierrez</td>
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<tr>
<td>2015.004.C</td>
<td>Sarcopenia Predicts Poor Recovery In Liver Transplant</td>
<td>n/a</td>
<td>George Therapondos/ Gupta</td>
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<tr>
<td>2015.005.C</td>
<td>Plasma Cell Hepatitis in Liver Transplant Patients with Hepatitis C</td>
<td>n/a</td>
<td>Gretchen Galliano/ Galliano</td>
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<td>2015.051.A</td>
<td>A Retrospective, Single-Center, Chart Review Study to Analyze Clinical Outcomes of Liver Transplant Status Post TAVR Using Liver Transplant Patient Records.</td>
<td>n/a</td>
<td>Ari Cohen/ Carmody</td>
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<tr>
<td>2015.094.B</td>
<td>Using Onsite Liver Volumetrics to Enhance Decision-Making in Split-Liver Transplantation</td>
<td>n/a</td>
<td>Trevor Reichman/ Fiorello</td>
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<tr>
<td>2015.105.A</td>
<td>Donation After Cardiac Death Liver Transplant Consortium</td>
<td>n/a</td>
<td>Ari Cohen/ Bohorquez</td>
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<tr>
<td>2015.108.C</td>
<td>International Multicenter Study to Evaluate the Outcome After Liver Transplantation of Cirrhotic Patients Diagnosed with an Intrahepatic Cholangiocarcinoma (CCA) at Pathology Examination. Should the Indication for Liver Transplantation be Re-Assessed in These Patients?</td>
<td>n/a</td>
<td>Trevor Reichman</td>
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<td>2015.117.C</td>
<td>Renal Pathology</td>
<td>n/a</td>
<td>Catherine Staffeld-Coit</td>
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<td>2015.124.B</td>
<td>Immunization in Chronic Liver Disease due to Hepatitis C infection: A Retrospective Chart Review</td>
<td>n/a</td>
<td>Natalie Bzowej/Kumarappa</td>
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<tr>
<td>2015.230.A</td>
<td>Treatment of Hepatitis C Infection Post-Liver Transplant: Safety and Efficacy of Direct Acting Antivirals</td>
<td>n/a</td>
<td>George Therapondos/Gutierrez</td>
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<tr>
<td>2016.014.A</td>
<td>Hepatocellular Carcinoma Study: Epidemiology, Risk Factors, Treatment and Outcomes at Ochsner Health System and the Gulf South</td>
<td>n/a</td>
<td>Humberto Bohorquez/Carmody</td>
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## Interventional Studies / Funded Registries

<table>
<thead>
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<tr>
<td>2010.179.A</td>
<td>Prospective, Observational Study of: Blood Samples and Routine Data Collection from Liver Transplant Recipients + Blood, Tissue and Data Collection from Donors</td>
<td>n/a</td>
<td>Ari Cohen/ Carmody</td>
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<tr>
<td>2012.190.B</td>
<td>A Phase II Randomized Multicenter Placebo-Controlled Blinded Study of Sorafenib Adjuvant Therapy in High Risk Orthotopic Liver Transplant (OLT) Recipients with Hepatocellular Carcinoma (HCC)</td>
<td>n/a</td>
<td>Ian Carmody/ Ahmed</td>
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<tr>
<td>2013.027.A</td>
<td>A Multicenter, Randomized, Open-Label. Active-Controlled Trial to Evaluate the Safety And Efficacy of Rifaximin 550 Mg with and without Lactulose in Subjects with a History of Recurrent Overt Hepatic Encephalopathy</td>
<td>n/a</td>
<td>Shobha Joshi/ Scheuermann</td>
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<tr>
<td>2015.257.B</td>
<td>Gilead GS-US-218-1797 A Phase 2b, Randomized, Controlled Trial Evaluating GS-5806 in Lung Transplant (LT) Recipients with Respiratory Syncytial Virus (RSV) Infection</td>
<td>n/a</td>
<td>Reinaldo Rampolla/ Allison</td>
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<tr>
<td>2016.005.C</td>
<td>A Phase 3, Randomized, Double-Blind, Placebo Controlled Study to Evaluate the Efficacy and Safety of QPI-1002 for Prevention of Delayed Graft Function in Recipients of a Donation After Brain Death Older Donor Kidney Transplant</td>
<td>n/a</td>
<td>Ari Cohen/ Carmody</td>
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<tr>
<td>2013.231.A</td>
<td>A Randomized, Global, Double-Blind, Placebo-Controlled, Parallel-Group Study to Evaluate the Efficacy and Safety of Once-Daily Oral Avatrombopag for the Treatment of Adults with Thrombocytopenia Associated with Liver Disease Prior to an Elective Procedure</td>
<td>n/a</td>
<td>Shobha Joshi/ Scheuermann</td>
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<tr>
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<tr>
<td>2015.219.C</td>
<td>A Randomized, Placebo-Controlled, Prospective, Double-Blind, Multicenter Phase 2/3 Study of the Efficacy and Safety of SANGUINATE™ for Reduction of Delayed Graft Function in Recipients of a Donation After Brain Death Kidney Transplant</td>
<td>n/a</td>
<td>Ari Cohen/Carmody</td>
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<tr>
<td>2016.006.C</td>
<td>A Multicenter Randomized Controlled Trial to Compare the Efficacy of Ex-Vivo Normothermic Machine Perfusion with Static Cold Storage in Human Liver Transplantation</td>
<td>n/a</td>
<td>Ari Cohen/Carmody</td>
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<tr>
<td>2013.220.C</td>
<td>Multicenter, Randomized Phase 2B Study to Evaluate the Efficacy, Safety and Tolerability of OCR-002 (Ornithine Phenylacetate) in Hospitalized Patients with Cirrhosis and Associated Hyperammonemia with an Episode of Hepatic Encephalopathy (STOP-HE Study). Protocol OCR002-HE209</td>
<td>n/a</td>
<td>Natalie Bzowej/Fletcher</td>
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<td>2014.147.A</td>
<td>A 36-Month Multi-Center, Open Label, Randomized, Comparator Study to Evaluate the Efficacy and Safety of Everolimus Immunosuppression Treatment in Liver Transplantation for Hepatocellular Carcinoma Exceeding Milan Criteria</td>
<td>n/a</td>
<td>Ian Carmody/Ahmed</td>
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<tr>
<td>2015.104.A</td>
<td>Prospective Observational Trial to Evaluate the Correlation of T-SPOT® Response to CMV Disease and T Cell Mediated Acute Graft Rejection. The PROTECT Study</td>
<td>n/a</td>
<td>Ari Cohen/Carmody</td>
</tr>
</tbody>
</table>
More than 120,000 men, women and children are on the national transplant waiting list. Every 12 minutes another person is added. In Louisiana, more than 2,000 people are waiting for organ transplants. Nearly 20 people each day die unnecessarily because there are too few organ donors.

One organ donor can save the lives of up to nine people, and one tissue donor can impact the lives of up to 50 people.

To register to become an organ donor, visit Donate Life Louisiana at donatelifela.org or Donate Life America at donatelife.net.
Physician Team

**Hepatologists**
Nigel Girgrah, MD, PhD  
*Medical Director, Multi-Organ Transplant Institute*  
*Chairman, Gastroenterology & Hepatology*  
*Liver Transplant Hepatologist*
Cristal Brown, MD  
*Section of Gastroenterology & Hepatology*  
*Liver Transplant Hepatologist*
Natalie H. Bzowej, MD, PhD  
*Section of Gastroenterology & Hepatology*  
*Director, Transplant Clinical Research*  
*Liver Transplant Hepatologist*
Shobha Joshi, MD  
*Section of Gastroenterology & Hepatology*  
*Liver Transplant Hepatologist*
Maria-Stella Serrano, MD  
*Pediatric Transplant Hepatologist*
George Therapondos, MD, MB, ChB, MPH, FRCP (Edin)  
*Section of Gastroenterology & Hepatology*  
*Liver Transplant Hepatologist*
Gia Tyson, MD  
*Section of Gastroenterology & Hepatology*  
*Liver Transplant Hepatologist*

**Nephrologists**
Catherine Staffeld-Coit, MD  
*Medical Director,*  
*Kidney & Kidney/Pancreas Transplantation*
Jorge C. Garces, MD  
*Transplant Nephrologist*  
*Kidney & Kidney/Pancreas Transplantation*
Pinky Patel, MD  
*Transplant Nephrologist*  
*Kidney & Kidney/Pancreas Transplantation*
Zohreh Soltani, MD  
*Transplant Nephrologist*  
*Kidney & Kidney/Pancreas Transplantation*

**Pulmonologists**
Reinaldo Rampolla, MD  
*Medical Director,*  
*Pulmonary/Critical Care Medicine*  
*Lung Transplantation*

**Surgeons**
George E. Loss, Jr., MD, PhD  
*Chief of Surgical Services*  
*Chairman, Department of Surgery*  
*Chief, Multi-Organ Transplant Institute*
Ari J. Cohen, MD, MSC  
*Head, Abdominal Transplant Surgery*  
*Surgical Director, Kidney Transplant Program*  
*Director, Transplant Research*
Emily Bugeaud, MD, PhD  
*Transplant Surgeon*  
*Section of Abdominal Organ Transplantation*
Humberto E. Bohorquez, MD  
*Transplant Surgeon*  
*Section of Abdominal Organ Transplantation*  
*Surgical Director, Pancreas Transplantation*
David S. Bruce, MD  
*Transplant Surgeon*  
*Section of Abdominal Organ Transplantation*
Ian Carmody, MD  
*Transplant Surgeon*  
*Associate Professor*  
*University of Queensland School of Medicine*
John Seal, MD  
*Transplant Surgeon*  
*Section of Abdominal Organ Transplantation*
Dennis Sonnier, MD  
*Transplant Surgeon*  
*Section of Abdominal Organ Transplantation*
Cardiothoracic Surgery
P. Eugene Parrino, MD
   Section Head,
   Thoracic, Cardiovascular and Congenital
Aditya Bansal, MD
   Thoracic & Cardiovascular Surgery
Michael Bates, MD
   Program Head, Thoracic Organ Transplantation
   Thoracic & Cardiovascular Surgery
Jose Mena, MD
   Thoracic & Cardiovascular Surgery
Benjamin Peeler, MD
   Chief, Congenital Heart Surgery

Cardiologists
Hector O. Ventura, MD, FACC, FACP
   Section Head,
   Cardiomyopathy and Heart Transplantation
Sapna V. Desai, MD
   Medical Director of Mechanical Circulatory Support
Clement C. Eiswirth, Jr, MD, FACC
   Medical Director,
   Cardiomyopathy and Heart Failure Program
Selim R. Krim, MD
   Medical Director, Heart Failure Clinical Research
Stacy A. Mandras, MD
   Medical Director, Pulmonary Hypertension Program
Hamang M. Patel, MD, FACC
   Medical Director, Heart Transplantation

For patient referral and transfer information, please see page 68.
Accommodations Offer a Home Away From Home

Ochsner takes pride in offering convenient, quality accommodations for families and patients. We understand how challenging it can be to travel away from home for an organ transplant, and we offer convenient options to help.

Combining the comfort of a full-service hotel with a convenient location on the Ochsner campus, Brent House has provided quality accommodations for patients, families and the public since 1954. Family members simply walk down a corridor to visit the hospital. AAA awarded Brent House its 3-Diamonds distinction. Brent House features spacious rooms, a cafe, a gourmet coffee shop, pool and fitness center. Contact 1.800.535.3986 or visit brenthouse.com.

In some instances, transplant patients and families from outside the New Orleans area may need more long-term accommodations. Ochsner offers affordable, comfortable apartments at the Levee Run complex within walking distance of the hospital. Each apartment is furnished, equipped with a full kitchen and has convenient parking.
International Patients

Welcoming international patients with world-class care. Serving patients from other countries has been an Ochsner tradition for decades. As a referral center for patients from throughout the world and particularly from Central and South America, Ochsner offers a variety of services to put them more at ease. A resourceful International Health Services department provides full translation and interpretation services in every language. Each patient is assigned a coordinator to ensure that his or her particular needs are met. Ochsner staff is sensitive and responsive to each patient’s clinical, cultural and spiritual concerns. These services are available seven days a week.

Ochsner Flight Care

Transportation and critical care. Safe, rapid emergency transportation for critically ill patients is available from Ochsner’s own fleet of medically equipped helicopters, fixed-wing aircraft and ground vehicles. The staff provides quality out-of-hospital critical care from bedside to bedside. Flight Care is staffed with critical care nurses with specialty training. Physicians and other specialty staff are available if needed. Flight Care is on call to serve all the needs of transplant patients.
About Ochsner Health System

Ochsner Health System is Louisiana’s largest non-profit, academic healthcare system. Driven by a mission to Serve, Heal, Lead, Educate and Innovate, coordinated clinical and hospital patient care is provided across the region by Ochsner’s 28 owned, managed and affiliated hospitals and more than 60 health centers. Ochsner cares for patients from all 50 states and more than 80 countries worldwide each year. Ochsner employs 17,000 employees and over 1,000 physicians in over 90 medical specialties and subspecialties and conducts more than 1,000 clinical research studies. Ochsner Health System is proud to be a tobacco-free environment. For more information, please visit [ochsner.org](http://ochsner.org) and follow us on Twitter and Facebook.

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Ochsner Multi-Organ Transplant Institute
1514 Jefferson Highway
New Orleans, LA 70121

Visit us online at [ochsner.org](http://ochsner.org)

Patient referrals, transfers and consults are critically important. We make it easy for you and your staff to refer patients to us and for patients to contact us directly. Please use the phone number below that best meets your specific needs:

**Transplant referrals and transfers:**
Call our transplant hotline: **1.800.643.1635** or **504.842.3925**

**Non-transplant clinic appointments:**
Call our Clinic Concierge: **855.312.4190**

**Non-transplant transfers to ANY Ochsner hospital:**
Call our Regional Referral Center at **855-647-5465 (855.OHS.LINK)**
Staffed 24/7 by clinicians

**Patients scheduling their own appointments:**
Call our Central Scheduling Center **866-624-7637 (866.OCHSNER)**
Healthgrades® awarded Ochsner hospitals a combined total of 29 Five-Star Rankings in 16 categories in 2015, including neurosurgery, total knee replacement, coronary interventional procedures and for treatment of stroke, heart attack and respiratory failure.

U.S. News & World Report ranked Ochsner Medical Center as one of the nation’s top hospitals in six specialties, including ear, nose and throat, gastroenterology & GI surgery, nephrology, neurology & neurosurgery, orthopedics and pulmonology.

CareChex® ranked Ochsner Medical Center as one of the nation’s top hospitals for Medical Excellence in 17 specialties, including #1 for liver transplants, #4 for trauma care and #8 for overall hospital care in 2015.