

U.S. SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM 3

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or
Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person

Mello	Joseph	C.
-----	-----	-----
(Last)	(First)	(Middle)
21250 Hawthorne Boulevard		

(Street)		
Torrance	CA	90503
-----	-----	-----
(City)	(State)	(Zip)

2. Date of Event Requiring Statement (Month/Day/Year)

09/14/2000

3. IRS or Social Security Number of Reporting Person (Voluntary)

4. Issuer Name and Ticker or Trading Symbol

Total Renal Care Holdings, Inc. (TRL)

5. Relationship of Reporting Person to Issuer:
(Check all applicable)

-----	Director	-----	10% Owner
X	Officer (give	-----	Other (Specify
-----	title below)	-----	below)

Chief Operating Officer

6. If Amendment, Date of Original (Month/Day/Year)

Table 1 -- Non-Derivative Securities Beneficially Owned

1. Title of Security	2. Amount of Securities Beneficially Owned	3. Ownership Form: Direct (D) or Indirect (I)	4. Nature of Indirect Beneficial Ownership
(Instr. 4)	(Instr. 4)	(Instr. 5)	(Instr. 5)
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/s/ Joseph C. Mello

9/22/00

**Signature of Reporting Person

Date

Note: File three copies of this Form, one of which must be manually signed. If
space provided is insufficient,
See Instruction 6 for procedure.