The University of Texas MD Anderson Cancer Center

Fact Book 2015

Compiled by the Office of Institutional Research, Department of Academic Analytics and Technology, Division of Academic Affairs

THE UNIVERSITY OF TEXAS
MD Anderson Cancer Center
Making Cancer History®

Acknowledgements

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THE UNIVERSITY OF TEXAS
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Making Cancer History®

The University of Texas MD Anderson Cancer Center Mission Statement

The mission of The University of Texas MD Anderson Cancer Center is to eliminate cancer in Texas, the nation, and the world through outstanding programs that integrate patient care, research and prevention, and through education for undergraduate and graduate students, trainees, professionals, employees and the public.

Vision

We shall be the premier cancer center in the world, based on the excellence of our people, our research-driven patient care and our science. We are Making Cancer History.

Core Values

Caring: By our words and actions, we create a caring environment for everyone.
Integrity: We work together to merit the trust of our colleagues and those we serve.
Discovery: We embrace creativity and seek new knowledge.

Strategic Plan

Patient Care: Enhance the quality and value of our patient care throughout the cancer care cycle.
Research: Enhance existing research programs and develop priority programs for the future.
Education: Provide educational programs of the highest quality to fully address the needs of all learners.
Prevention: Accelerate the discovery and translation of new knowledge about cancer risk assessment and prevention in the laboratory, the clinic and the community.
Our People: Enhance our most valuable asset, the people who work, volunteer and contribute to advancing our mission.
Collaboration: Enhance and disseminate our knowledge in all mission areas through collaborative and productive relationships locally, nationally and worldwide.
Resources: Safeguard and enhance our resources.

About The University of Texas MD Anderson Cancer Center

Celebrating seven decades of Making Cancer History®, The University of Texas MD Anderson Cancer Center is located in Houston on the sprawling campus of the Texas Medical Center. It is one of the world's most respected centers devoted exclusively to cancer patient care, research, education and prevention.

The Texas Legislature created MD Anderson Cancer Center in 1941 as a component of The University of Texas. MD Anderson is one of the nation's original three Comprehensive Cancer Centers designated by the National Cancer Act of 1971 and is one of 40 such centers today. MD Anderson ranks in the top two cancer hospitals in *U.S. News & World Report's* annual "America's Best Hospitals" survey since the ranking's inception in 1990. For 11 of the past 14 years, MD Anderson has ranked number one in cancer care in "America's Best Hospitals".

Since the first patient was registered in 1944, one million people have turned to MD Anderson for cancer care in the form of surgery, chemotherapy, radiation therapy, immunotherapy or combinations of these and other treatments. In last fiscal year, over 135,000 cancer patients (nearly one-third of them new patients), received care at MD Anderson. Over 40% of all patients were Texans from outside Harris County and approximately 25% were from out-of-state. Many patients benefit from the multidisciplinary team approach to treatment that was developed by MD Anderson and now sets the standard for cancer care around the world. MD Anderson provided more than $186 million in uncompensated care to Texans with cancer in FY15. This figure includes unreimbursed costs of care for patients who either have no insurance or are underinsured, or whose care was not fully covered by government-sponsored health programs.

There are 2,327 faculty members, including M.D.s and Ph.Ds. in Fiscal Year 2015. Surgeons, medical oncologists, radiotherapists, prevention specialists and a broad range of other health professionals provide high quality care, including one of the nation's largest programs of clinical trials that seek to improve therapies for all types of cancer. In fiscal year 2015, MD Anderson had 1,197 active clinical protocols. The results of a number of trials, with MD Anderson clinical investigators as leaders or leading contributors, have become standards of care for cancer treatment. Examples include fludarabine and Campath® for chronic lymphocytic leukemia, Gleevec® for chronic myelogenous leukemia, and Tamoxifin® as prevention for breast cancer.

In Fiscal Year 2015, MD Anderson's total research expenditure was $781 million, a 25% increase in the past five years. This includes over $55 million in state funding, approximately $172 million from philanthropy and foundations, and over $161 million in federal research funding. An unprecedented Moon Shots Program was launched in 2012 to dramatically accelerate the pace of converting scientific discoveries into clinical advances that significantly reduce cancer deaths. The program brings together teams of researchers and clinicians to mount comprehensive attacks on eight cancers initially. They work as part of six moon shot teams: acute myeloid leukemia and myelodysplastic syndrome, chronic lymphocytic leukemia, melanoma, lung cancer, prostate cancer, and triple-negative breast and high-grade serous ovarian cancers, which are linked at the molecular level. Six new moon shots have been added, bringing the total to 12, and so far, the program has received almost $342 million in private philanthropic commitments. In addition to research conducted in laboratories in the Houston complex, studies focusing on the environmental causes of cancer are under way at MD Anderson's Science Park in Bastrop County. A unit of the Science Park is devoted to the supply and production of research animals for many institutions in Texas.

Strong educational programs are offered annually to over 6,600 students and trainees in medicine, science, nursing, pharmacy and many allied health specialties. MD Anderson offers bachelor's degrees in nine health disciplines and one master's degree in Diagnostic Genetics. MD Anderson also provides public and patient education programs focusing on early detection of cancer and risk reduction that can help prevent cancer. Currently, more than 1,200 residents and fellows come to MD Anderson each year to receive specialized training and more than 1,800 research trainees worked at MD Anderson laboratories and clinics. The University of Texas MD Anderson Cancer Center School of Health Professions (SHP) and The University of Texas Graduate School of Biomedical Sciences (GSBS) are academically accredited through the Southern Association of Colleges and Schools Commission on Colleges to offer Bachelors, Masters, and Doctoral degrees. There are more than 400 graduate students enrolled in the GSBS, which is run jointly with The University of Texas Health Science Center at Houston (UTHSC-H). The relationship of the UTHSC-H with the GSBS is long standing and strong. In recent years there has also been a marked increase in collaborative activities with the UTHSC-H School of Public Health as MD Anderson's prevention efforts have grown.

Numerous MD Anderson faculty members serve the GSBS as thesis advisors, student committee members, and on various faculty senate committees, including admissions and curriculum. The MD/PhD program conducted with UTHSC-H Medical School continues to receive MD Anderson monetary support as well as laboratory placement of participants. Several support activities, such as University of Texas Police are joint activities of MD Anderson and UTHSC-H.

The SHP is committed to the education of health care professionals, through formal academic programs that award bachelor of science degrees and a master's in health sciences. Students in the SHP receive a unique educational experience within MD Anderson, located in the world's largest medical center. The education of the students includes the entire spectrum of laboratory testing and patient treatment procedures, from the relatively uncomplicated to the highly specialized. The SHP programs graduated 161 students in 2014 in nine areas of study: Clinical Laboratory Science, Cytogenetic Technology, Cytotechnology, Diagnostic Genetics, Diagnostic Imaging, Histotechnology, Medical Dosimetry, Molecular Genetic Technology, and Radiation Therapy. All of the school's programs are accredited and approved by nationally recognized agencies.

The Houston-based MD Anderson facilities in the Texas Medical Center cover more than 14 million square feet and feature the latest equipment and facilities to support growing needs in outpatient and inpatient care, research, prevention and education. MD Anderson has Houston-area locations in the Texas Medical Center, Bay Area, Katy, West Houston (diagnostic imaging), Sugar Land, The Woodlands, Bellaire (diagnostic imaging) and Memorial City (surgery). MD Anderson physicians also provide cancer care to patients at Lyndon B. Johnson Hospital in Houston. It is the exclusive provider of breast radiology services for five of Memorial Hermann's 10 breast care centers in the Houston area — Memorial City, The Woodlands, Sugar Land, and Northeast and Southwest Houston. The institution also has developed a network of national and international locations.

MD Anderson employs more nearly 21,000 people and enjoys a volunteer workforce of over 900 volunteers who provide over 145,000 hours of service each year. Faculty, staff, and volunteers are dedicated to the core values of Caring, Integrity, and Discovery. Together they work toward fulfilling the MD Anderson mission of eliminating cancer as a major health threat.

The University of Texas MD Anderson Cancer Center Addresses

University of Texas MD Anderson Cancer Center
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Houston, Texas 77030

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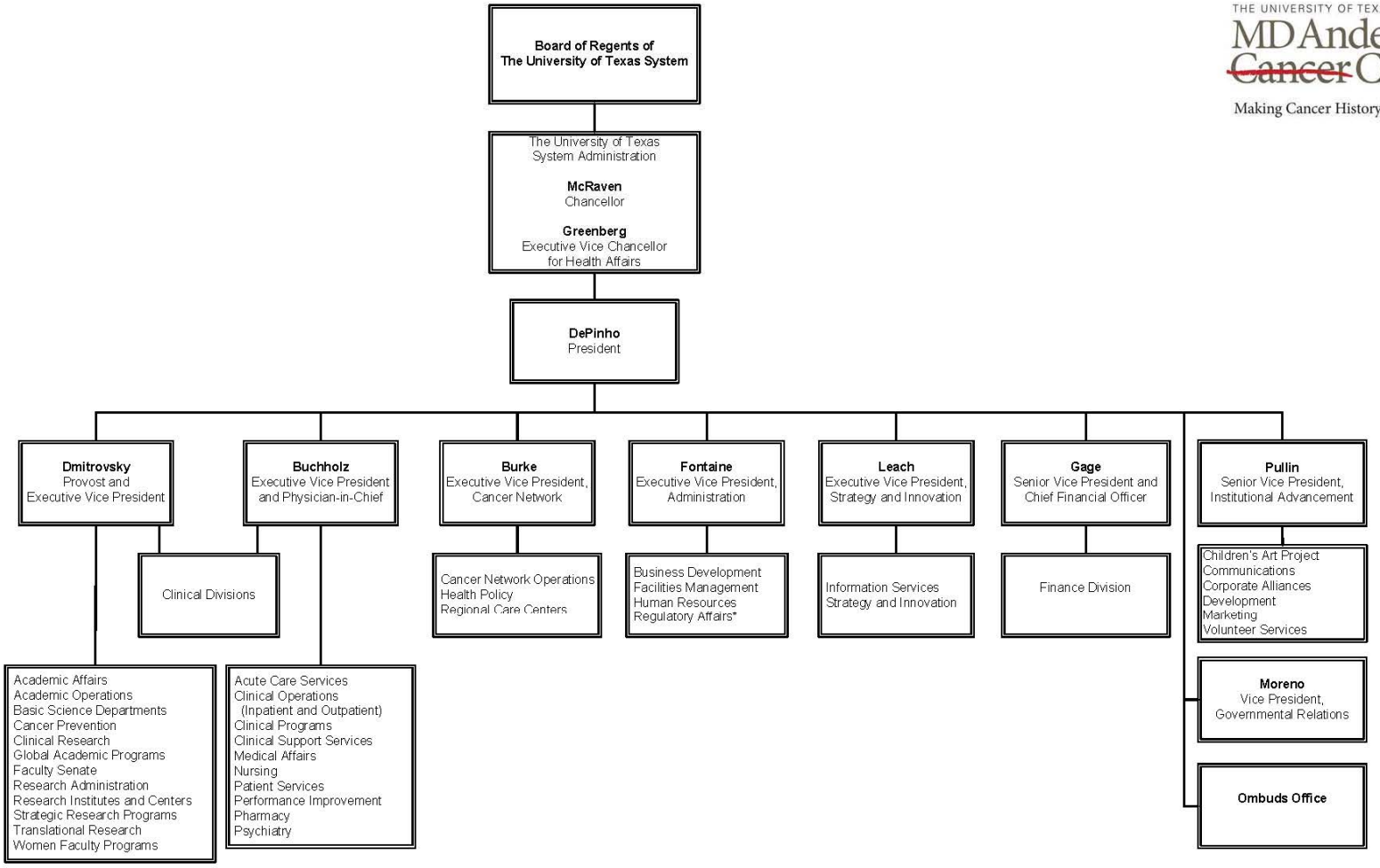
Unit 1011
Houston, Texas 77030

The University of Texas MD Anderson Organizational Chart



The University of Texas MD Anderson Cancer Center
Senior Leadership

Name	Title
Ronald DePinho, M.D.	**President**
Michelle Barton, Ph.D.	Dean, Graduate School of Biomedical Sciences (MD Anderson)
Robert C. Bast, Jr., M.D.	Vice President, Translational Research
Chris Belmont	Vice President and Chief Information Officer
John Bingham, M.H.A.	Vice President, Performance Improvement, and Chief Quality Officer
Michael Blackburn, Ph.D.	Dean, Graduate School of Biomedical Sciences (UT Health)
Diane Bodurka, M.D.	Vice President, Medical Education
Oliver Bogler, Ph.D	Senior Vice President, Academic Affairs
Bob Brigham	Senior Vice President, Hospital and Clinics, and Chief of Clinical Operations
Thomas Buchholz, M.D.	Executive Vice President and Physician-in-Chief
Aman Buzdar, M.D.	Vice President, Clinical Research Administration
Maureen Cagley	Vice President, Academic Operations
Eduardo Diaz, M.D.	Vice President, Global Clinical Programs
Ethan Dmitrovsky, M.D.	Provost and Executive Vice President
Wenonah Ecung	Vice President for Clinical Administration
R. Dan Fontaine, J.D.	Executive Vice President , Administration
Lewis Foxhall, M.D.	Vice President, Health Policy
Weldon Gage	Senior Vice President and Chief Financial Officer
Brad Gibson	Vice President for Revenue Cycle and Treasurer
Ernest Hawk, M.D.	Vice President, Cancer Prevention
Amy Hay	Vice President Business Development MD Anderson Cancer Network
Mien-Chie Hung, Ph.D.	Vice President, Basic Science
Rebecca Kaul	Vice President and Chief Innovation Officer
Allyson Kinzel, J.D.	Vice President and Chief Compliance Officer
Joel Lajeunesse, M.S., R.P.H.	Vice President and Head of Pharmacy
Leon J. Leach, M.B.A.	Executive Vice President, Strategy and Innovation
Sherri Magnus	Vice President and Chief Audit Officer
Paul Mansfield, M.D.	Vice President, Acute Care Services
Matthew Masek, J.D., LL.M.	Vice President and Chief Legal Officer
Chris McKee	Vice President for Business Operations
Spencer Moore	Vice President and Chief Facilities Officer
Mark A. Moreno	Vice President for Governmental Relations
Patrick B. Mulvey, M.P.A.	Vice President for Development
Helen Piwnica-Worms, Ph.D.	Vice Provost, Science
Shirley Richmond, Ed.D.	Dean, School of Health Professions
Alma Rodriguez, M.D.	Vice President, Medical Affairs
Margaret Row, M.D.	Vice President, Operations Cancer Network
Frank Tortorella, M.B.A., J.D.	Vice President, Clinical Support Services
Shibu Varghese, M.A.	Vice President, Human Resources
George Wilding, M.D.	Vice Provost, Clinical and Interdisciplinary Research

The University of Texas System Board of Regents

The Board of Regents (BOR), the governing body for The University of Texas System, is composed of nine members who are appointed by the Governor and confirmed by the Senate. Terms for Regents are scheduled for six years each and staggered so that three members' terms will usually expire on February 1 of odd-numbered years.* In addition, the Governor appoints a Student Regent for a one-year term that expires on May 31.

Officers

Paul L. Foster , Chairman
R. Steven Hicks, Vice Chairman
Jeffery D. Hildebrand, Vice Chairman

Members

Terms Expire May 2016
Student Regent Justin A. Drake

Terms Expire February 2017
Regent Alex M. Cranberg
Regent Wallace L. Hall, Jr.
Regent Brenda Pejovich

Terms Expire February 2019
Chairman Paul L. Foster
Regent Ernest Aliseda
Vice Chairman Jeffery D. Hildebrand

Terms Expire February 2021
Vice Chairman R. Steven Hicks
Regent David J. Beck
Regent Sara Martinez Tucker

* Each Regent's term expires when a successor has been appointed, qualified, and taken the oath of office.

The University of Texas System Executive Offices

Office	Name	Position
Office of the Chancellor	Bill McRaven	Chancellor
Office of Academic Affairs	Steven Leslie	Executive Vice Chancellor for Academic Affairs
Office of Health Affairs	Raymond S. Greenberg, M.D., Ph.D.	Executive Vice Chancellor for Health Affairs
Office of Business Affairs	Scott C. Kelley, Ed.D	Executive Vice Chancellor for Business Affairs
Office of General Counsel	Daniel H. Sharphorn, J.D.	Vice Chancellor and General Counsel
Office of Governmental Relations	Barry McBee, J.D.	Vice Chancellor and Governmental Relations
Office of External Relations	Randa S. Safady, Ph.D.	Vice Chancellor for External Relations
Office of Strategic Initiatives	Stephanie A. Bond Huie, Ph.D.	Vice Chancellor for Strategic Initiatives

The University of Texas MD Anderson Board of Visitors

The MD Anderson Board of Visitors (BOV) is an appointive board of volunteers within the organizational structure of MD Anderson and the University Cancer Foundation, which assists the President and, upon request, the Board of Regents in an advisory capacity. The purpose of the BOV is to further the mission of MD Anderson and the objectives of the university.

Membership of the BOV consists of persons especially interested in the accomplishments of the mission of MD Anderson and the attainment of its objectives. The BOV consists of over 200 Members, Members-at-Large, Associate Members, Senior Members and Life Members. Members and Members-at-Large serve three year terms and Associate Members serve one year terms. Senior Members and Life Members are exempt from term limits.

The University of Texas MD Anderson Standing Committees*

- Anderson Network Steering Committee
- Animal Resources and Facilities Advisory Committee at Science Park (Bastrop)
- Appointment and Promotions Committee - School of Health Professions
- Art Committee
- Bylaws/Rules & Regulations Committee (Medical Staff SubCommittee)
- Cancer Center Support Grant Executive Committee
- Cancer Prevention Research Training Program Advisory Committee
- Cardiopulmonary Resuscitation Committee (Medical Staff Subcommittee)
- Carl B. and Florence E. King Foundation Summer Program in the Biomedical Sciences
- Clinical Council
- Clinical Effectiveness Committee (Medical Staff Subcommittee)
- Clinical Ethics Consultation Committee (CECC)
- Clinical Faculty Review Committee
- Clinical Pastoral Education Professional Consultation Committee
- Clinical Research Committee I
- Clinical Research Committee II
- Clinical Research Committee III
- Clinical Research Committee IV
- Clinical Revenue Cycle Committee
- College Student Summer Program in the Biomedical Sciences
- Committee on Faculty Awards
- Conflict of Interest Committee
- Continuing Medical Education Advisory Committee
- Council of Committee Chairs (Medical Staff Committee)
- Credentials Committee of the Medical Staff
- Data and Safety Monitoring Committee
- Diversity Council
- Education Council Committee
- Education Recognition and Rewards Committee

**Source: On-Line Committee Membership Directory*

MD Anderson Standing Committees, *continued*

- Educational Resources Committee
- Effort Reporting Compliance Subcommittee
- Emergency Management Committee
- Endowed Positions and Awards Committee
- Endowment Compliance Committee
- Equipment Compliance Committee
- Executive Billing Compliance Committee
- Executive Committee of the Faculty Senate
- Executive Committee of the Medical Staff
- Executive Committee of the Science Faculty
- Executive Committee of the Science Faculty RFA Subcommittee
- Executive Institutional Compliance Committee
- Executive Research Compliance Committee
- Facilities Steering Committee
- Financial Compliance Committee
- Graduate Education Committee
- Graduate Medical Education Budget Subcommittee
- Graduate Medical Education Committee
- Graduate Medical Education Committee - Executive Subcommittee
- Graduate Medical Education Curriculum Subcommittee
- Graduate Medical Education Institutional Review Committee
- Infection Control Committee (Medical Staff Subcommittee)
- Information Security Compliance Committee
- Information Services Executive Team
- Institutional Animal Care and Use Committee (IACUC)
- Institutional Audit Committee
- Institutional Award Nomination Committee
- Institutional Biosafety Committee - HA Subcommittee
- Institutional Biosafety Committee - rDNA Subcommittee
- Institutional Biosafety Committee - rDNA/Microbial Agents
- Institutional Professional Liability Committee
- Institutional Research Grants Program Oversight Committee
- Institutional Research Grants Program Study Section Review Committee for Basic Research Projects
- Institutional Research Grants Program Study Section Review Committee for Clinical Research Projects
- Institutional Safety Committee
- Intensive Care Unit (ICU) Subcommittee (Medical Staff Subcommittee)
- Interdisciplinary Documentation Subcommittee (Medical Staff SubCommittee)
- Medical Identity Theft Oversight Compliance Committee
- Medical Practice Committee (Medical Staff Subcommittee)
- Medical Record Committee (Medical Staff Subcommittee)

MD Anderson Standing Committees, *continued*

- Medical Student Summer Research Program Committee
- Multidisciplinary Research Advisory Committee
- Non-Physician Clinical Education Committee
- Odyssey Program Advisory Committee
- Operating Room Subcommittee (Medical Staff Subcommittee)
- Outstanding Employee The Heart of MD Anderson Award Committee
- PRS Budget and Finance Committee
- PRS Executive Council
- PRS Retirement Board
- Patient Safety Committee
- Pharmacy and Therapeutics Committee (Medical Staff Committee)
- Physician Relations Faculty Advisory Board
- Practitioner Peer Assistance Committee (Medical Staff Committee)
- Privacy Compliance Committee
- Promotion and Term Tenure Committee
- Psychosocial, Behavioral, Health Services, Research Committee
- Radiation Safety Committee
- Research Billing Compliance Subcommittee
- Research Council
- Science Park Committee - Subcommittee of Biosafety Committee (Research Division-Smithville)
- Sedation and Procedures Committee (Medical Staff Committee)
- Supply Chain Services Compliance Committee
- Technology Review Committee
- The MD Anderson Alumni and Faculty Association
- Tissue Transplantation Committee (Medical Staff Committee)
- Transfusion Committee (Medical Staff Committee)
- University Cancer Foundation Administrative Board
- Women's Faculty Advisory Committee

The University of Texas MD Anderson Cancer Center Institutes

Multidisciplinary Care Centers

- Brain and Spine
- Breast
- Colorectal
- Endocrine
- Gastrointestinal
- Genitourinary
- Gynecologic Oncology
- Head and Neck
- Leukemia
- Lymphoma and Myeloma
- Melanoma and Skin
- Sarcoma
- Thoracic

Centers of Excellence

Existing in the McCombs Institute

- Center for Advanced Biomedical Imaging Research
- Center for Cancer Immunology Research
- Center for Global Cancer Early Detection
- Center for Radiation Oncology Research
- Center for RNA Interference and Non-coding RNAs
- Center for Targeted Therapy
- Metastasis Research Center

Basic Sciences

- Center for Biological Pathways
- Center for Cancer Epigenetics
- Center for Environmental and Molecular Carcinogenesis
- Center for Genetics and Genomics
- Center for Inflammation and Cancer
- Center for Stem Cell and Developmental Biology

The University of Texas MD Anderson Core Facilities
Cancer Center Support Grant (CCSG) Shared Resources*

The CCSG provides partial funding for shared resources that are available to all cancer center members. These include a variety of instruments and services to facilitate research. In prioritizing use of these facilities, precedence will be given to peer-reviewed investigators. If publications use data generated by the shared resources, the publications should cite the core grant in the acknowledgement section. The Shared Resources available through MD Anderson are as follows:

Bioinformatics Shared Resource
The Bioinformatics Shared Resource (BISR) provides consultation and collaboration to research scientists in order to improve the design, conduct and data analysis of studies that use high-throughput molecular biology technologies. This resource operates out of the Section of Bioinformatics in the Department of Biostatistics. Although the first faculty members were recruited in 1999, the Bioinformatics Section itself was formally created in October 2000 as a joint effort of the Biostatistics Department and the Cancer Genomics Program. It is now easier, and often cheaper, to generate millions of data points on the molecular profiles of cancers than it is to analyze those data points statistically or interpret them biologically. With the revolution in DNA and RNA sequencing, the need for bioinformatics support throughout MD Anderson has increased exponentially, and the BISR is the institution's principal resource for dealing with this data deluge. The BISR uses a heterogeneous computing environment supported across Windows, Unix/Linux, and Mac OS X operating systems, with access to more than 300 terabytes of in-house storage space for home directories, research data, and data mirrors. It accesses in-house parallel computing capability through a 48-processor Cray XD1 HPC cluster and a 290-processor distributed computing Condor pool of over 160 Windows workstations (each with ≥2GB of memory) and 8 servers (ranging from 4GB to 16GB of memory).

Biostatistics Resource Group
The Biostatistics Resource Group is a shared resource providing statistical collaboration and consultation to research scientists. The goal is to develop statistical designs for trial conduct and to provide data analysis of current and future therapeutic, diagnostic, prevention and intervention studies, while also improving the patient care that is provided through clinical trials.

Characterized Cell Line Core
The Characterized Cell Line Core was formed in response to a recent notice from the NIH which requires cell line validation for grant applications to be considered of the highest quality. Journals such as *Science*, *Nature* and *PNAS* are adopting requirements for cell line validation for publication. Cell lines that have been extensively characterized at the DNA, RNA and protein levels will allow investigators to choose the correct cell line for their research. Pre-characterized cell lines will decrease the cost to researchers since this will eliminate repeat analysis. Thus, cell line validation is a critical issue for both scientific publications and grant applications.
**Source: CCSG Shared Resources Website*

CCSG Shared Resources, *continued*

Clinical and Translational Research Center

The Clinical and Translational Research Center (CTRC), created in 1990, is MD Anderson's dedicated unit in which to: Conduct early phase, complex, new drug research and develop new agents for the treatment of cancer and related diseases. CTRC is an on-site resource for M.D. Anderson investigators performing early clinical trials and where patients receive intensive monitoring for complex, early-phase clinical trials. The CTRC Laboratory is housed within the CTRC unit to provide sample collection, processing, storage, and shipping to conduct pharmacology studies. Clinical investigation technicians collect and process blood and urine specimens for clinical trials. Under the leadership of Passion Lockett, DrPH, laboratory manager, this process is becoming more efficient through the implementation of the information system Lab Tracker, which electronically tracks every step in the sampling process from collection, to testing, to storage, to shipping in order to better document specimens that are used to develop new drugs or new drug combinations.

Clinical Trials Support Resource

In 1995, The University of Texas MD Anderson Cancer Center initiated expansion of the infrastructure supporting clinical research in the Clinical Trials Shared Resource (CTSR). This entailed consolidating a number of functions, which had been dispersed across the institution, into a single office known as the Office of Protocol Research (OPR). The resources supporting clinical trials from the following three areas were integrated: administrative support, regulatory affairs, and information technology.

e-Health Technology

e-Health Technology supports technology-enabled primary, secondary, and tertiary cancer prevention research through the development and implementation of multi-media intervention and data-capture tools that address research questions in the areas of 1) behavior change, 2) health information, 3) symptoms, and 4) quality-of-life. e-Health Technology-developed products deliver information to and capture data from study participants and are tailored individually, consistent with study design.

Flow Cytometry and Cellular Imaging Facility

The Flow Cytometry and Cellular Imaging (FCCI) Core Facility was established in 1982 with the goal of providing the large community of investigators at MD Anderson with access to state-of-the-art cell analysis technology. The Core has expanded the number of technologies offered and in use by cancer center members. The FCCI Core now includes two separate sites: the North Campus and South Campus facilities. The institutional needs for flow cytometry services were carefully evaluated and a decision was made to transition the operation of the CCIR FACS facility to an institutional core to provide the Flow Cytometry and Cellular Imaging Core with the additional capacity needed to support the institution's investigators. Now, both the North Campus and South Campus facilities are open to the entire MD Anderson research community.

CCSG Shared Resources, *continued*

Functional Proteomics Reverse Phase Protein Array Core
A cell-based functional proteomics approach is required to determine the consequence of genetic aberrations in cancer cells. Functional proteomics is the large-scale study of proteins at the functional activity level, such as expression and modification. Reverse phase protein array (RPPA) is a high-throughput antibody-based technique with the procedures similar to that of Western blots. Proteins are extracted from tumor tissue or cultured cells, denatured by SDS, printed on nitrocellulose-coated slides followed by antibody probe. Our RPPA platform currently allows for the analysis of >1000 samples using at least 150 different antibodies for human samples and at least 135 different antibodies for mouse samples.

Genetically Engineered Mouse Facility
The purpose of the MD Anderson Genetically Engineered Mouse Facility (GEMF) is to provide technologically advanced and efficient mouse mutation resources to faculty members at the institution. Modifications to the genome utilizing direct DNA injection and ES cell mutagenesis, cryopreservation, *in vitro* fertilization and rederivation of mouse lines are all technologies supported by the facility. The facility is fully equipped with the latest instrumentation and staffed with highly skilled personnel trained specifically for the production of mutant mice.

High Resolution Electron Microscopy Facility
The High Resolution Electron Microscopy Facility (HREMF) provides a resource to the scientific community at MD Anderson for high resolution imaging of cells, tissues, organs or polymers containing cancer agents. The facility is located at the Smith Research Building (South Campus) and houses a JEM1010 transmission electron microscope (TEM), a JSM 5900 scanning electron microscope (SEM) equipped with electron backscatter detector, a Technotrade coating system, a Leica Ultramicrotome, Leica Ultrastainer and other accessories needed to prepare samples for SEM and TEM. A technician with histology training is available to assist researchers in defining their specific needs related to TEM and SEM. Microscopes are equipped with digital cameras and CD burners, and are connected to a network printer and the Internet. The facility operates on a charge-back basis only for processing of samples and the number of microscope hours used to screen samples with technical assistance.

Laboratory Animal Genetic Services
Laboratory Animal Genetic Services provides MD Anderson investigators with cost-effective, customized genetic analysis for research laboratory animal studies. Polymorphic genetic markers are used to support speed congenic development, background strain characterization, genetic quality control and genetic linkage analysis for mice and rats. Consultation on rodent genetics as well as infectious disease PCR testing for laboratory mice and rats is also provided by this core facility.

CCSG Shared Resources, *continued*

Monoclonal Antibody Facility
The Monoclonal Antibody Facility (MABF) provides custom monoclonal antibody production and purification to researchers at MD Anderson and beyond. The main focus of the facility is to produce high-affinity antibodies in a high-throughput and effective manner, while concentrating on quality of product and service, as well as saving time and money for potential users.

Patient-Reported Outcomes, Survey & Population Research
The Patient-Reported Outcomes, Survey & Population Research (PROSPR) Shared Resource provides researchers with access to state-of-the-art patient-reported outcome (PRO), quality of life, psychological and behavioral questionnaires and assessment methods. Services include assisting investigators in identifying existing measures, developing new measures and designing data collection strategies and conducting psychometric analysis. The PROSPR Shared Resource will also develop databases for the questionnaire data entry, participant tracking databases and computer- and Web-based assessments. Additionally the PROSPR Shared Resource maintains a library of existing questionnaires, along with information pertaining to their reliability, validity and scoring. The PROSPR Shared Resource also provides assessment services related to energy balance research, focusing on both body composition and assessment of physical fitness and exercise behavior.

Pharmaceutical Chemistry Facility
The mission of the Pharmaceutical Chemistry Facility is to provide MD Anderson faculty with tool compounds for in vitro, in vivo and potentially clinical studies to advance programs and provide data for grant applications. The PCF's role is to provide faculty with the most appropriate chemical tool compounds for cancer research. Services offered include synthesizing tool compounds for in vitro and in vivo experiments, performing SAR studies to identify novel tool compounds and leads for drug discovery projects, synthesis of chemical probes for target identification, as well as synthetic chemistry consultation and providing consultation service to aid in identifying the most suitable tool compounds.

Research Animal Support Facility - Houston
The Research Animal Support Facility in Houston (RASFH) exists to serve the research programs of MD Anderson. Clinical and basic cancer research involving laboratory animals is conducted at MD Anderson. The Department of Veterinary Medicine and Surgery (DVMS) is the core of the RASFH. The primary mission is to provide the best possible veterinary care, facilities, consultation, and services in support of the institutional animal care and use program, in keeping with all applicable laws, regulations, guidelines, and AAALAC accreditation standards. The focus of the RASFH is the well being of all animals, the best interests of our researchers, and the best interest of MD Anderson and its animal care and use program. As the institution's research mission evolves, and new animal research needs are identified, RASFH personnel identify new opportunities to participate in additional research support activities. Presently, the use of transgenic, SCID, and targeted mutant (knockout) mice and the associated new molecular programs represent such activities.

CCSG Shared Resources, *continued*

Research Animal Support Facility - Smithville

The Research Animal Support Facility (RASF) in the Department of Epigenetics and Molecular Carcinogenesis is supported in part by the institution's Cancer Center Support Grant from the National Cancer Institute. This facility is one of approximately 900 worldwide that are accredited by Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) International, a private nonprofit organization that promotes the humane treatment of animals in science through voluntary accreditation and assessment programs. Our participation in this voluntary program is a demonstration of our commitment to responsible animal care and use. The RASF provides animal husbandry, veterinary care and consultation, surgical and technical support, and numerous research and diagnostic services. We also provide animal health quality assurance testing, import/export services, embryo transfer rederivation, and custom breeding colony management. Genetic Services, Transgenic Services and Mutant Mouse Pathology Services are described fully on separate pages.

Research Histopathology Facility

At MD Anderson, peer-funded research projects that require histologic analysis have been provided with slide preparation by a shared resource facility since 1981. The Research Histopathology Facility (RHF) supplies technical support and consultation, develops and applies appropriate technologies, and maintains the consistency and high quality necessary to perform these techniques. In addition to standard histologic techniques, the spectrum of services provided by the RHF has been continually broadened to meet the requirements of MD Anderson investigators. This expansion of service includes an increase in special stains, frozen sectioning, RNase procedures and immunohistochemical staining and preparations.

Sequencing and Microarray Facility (SMF)

The CCSG-supported Genomics Facility (GF) and the DNA Analysis Facility (DAF) have consolidated their activities to form a comprehensive institutional genomics shared resource: the Sequencing and Microarray Facility (SMF). The mission of the consolidated Sequencing and Microarray Facility is to support genomics research at MDACC by providing investigators with access to state-of-the-art instrumentation and a high level of technical expertise in a centralized facility, thereby minimizing the duplication of expensive equipment, maintaining technical excellence and enhancing research collaborations. The facility's primary focus is sequencing and microarray technologies.

shRNA and ORFeome Core

The discovery of short hairpin RNAs (shRNAs) suppressing gene expression in mammalian cells enables large-scale loss-of-function screens by using genome-wide shRNA libraries. Genome scale over-expression libraries allow large-scale gain-of-function screens. The ShRNA and ORFeome core makes available to the MDACC research community the human and mouse shRNA libraries, human ORFeome collaboration and LentiORF libraries. The core facility can provide individual shRNA plasmids and cDNA clones for MDACC laboratories, or carry out a screening experiment using the libraries. Purchase of clones or libraries through the shRNA and ORFeome core reduces costs and decreases turnaround time for researchers.

CCSG Shared Resources, *continued*

Small Animal Imaging Facility

The Small Animal Imaging Facility (SAIF) is a core MD Anderson research resource. The SAIF team provides comprehensive imaging support services for MD Anderson cancer investigators, including: assistance in experimental design; developing specialty equipment and innovative procedures for imaging; preparing animals for studies, inducing and maintaining appropriate anesthesia and immobilization of animals during imaging; harvesting and marking appropriate tissues for correlation of macroscopic, microscopic and imaging characteristics of the tissue or organ; and processing and interpreting data for publication or grant preparation.

Tissue Procurement & Pathology Resource

The maintenance of a flexible, sophisticated institutional tissue procurement and repository facility with informatics infrastructure is vital to all aspects of current and future intra- and extramural clinical, translational, basic, and population-based research efforts at MD Anderson. The Tissue Biospecimen and Pathology Resource (TBPR) is a well-established, mature CCSG-supported core facility that provides access by all basic science, translational, and clinical investigators to human tissues that have been removed by therapeutic resection or biopsy. Benign and malignant tumor and non-neoplastic and normal control tissue from the entire spectrum of available specimens are obtained and temporarily stored. The TBPR supports hypothesis-generating, -developing, and -testing studies, including both correlative and integrated marker studies in clinical trials.

A.1 Top Ten Newly Diagnosed Cancers* at MD Anderson Cancer Center, FY 2010 – FY 2014

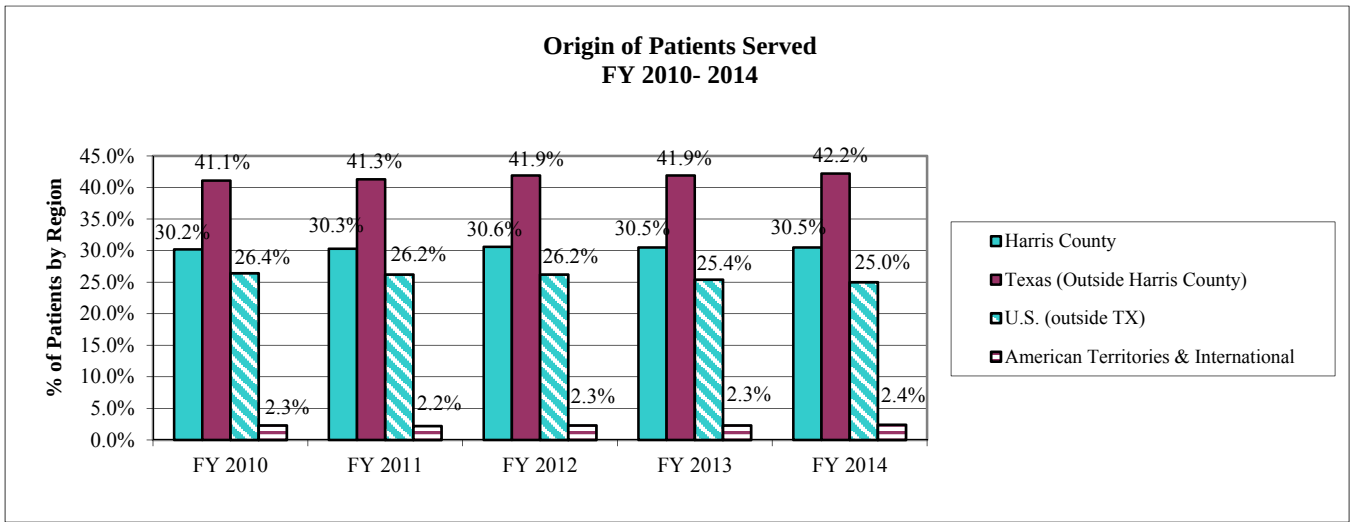
	% of All Cancers - All Ages, Races, and Regions				
Top Ten Newly Diagnosed Cancer Cases	**FY 2010**	**FY 2011**	**FY 2012**	**FY 2013**	**FY 2014**
Breast	13.90%	14.60%	15.20%	15.20%	16.52%
Lung & Bronchus	9.82%	10.10%	9.60%	9.50%	9.44%
Prostate	10.24%	10.60%	9.00%	8.60%	8.14%
Melanomas of the Skin	5.06%	4.90%	5.50%	5.40%	4.76%
Leukemia	5.03%	5.10%	4.70%	4.60%	4.78%
Non-Hodgkin's Lymphoma	5.47%	5.10%	5.10%	4.90%	4.60%
Colon & Rectum	5.54%	5.10%	5.40%	6.20%	5.97%
Oral Cavity & Pharynx	4.17%	4.40%	4.40%	4.30%	4.01%
Kidney & Renal Pelvis	3.54%	3.60%	3.70%	3.60%	4.26%
Brain & Other Nervous System	2.62%	2.80%	2.60%	2.60%	2.94%
Pancreas			3.50%	3.30%	3.29%

**Top 10 disease sites based on the average disease site mix of cancer cases new to MDACC. Counts for disease sites based on SEER groupings using ICD-O site and Histology coding.*
Newly Diagnosed Cancer Cases: Total count of malignant neoplasms or malignancy-related conditions that have been addressed at MD Anderson for the first time (a subset of Cancer Cases New to MD Anderson) who were seen at MD Anderson in the same fiscal year or calendar year of diagnosis of that cancer case. Cases may have been diagnosed/treated at any facility during the specified fiscal/calendar year. This is a count of cancer cases, not patients.

A.2 Origin Mix of Total Patients Served, FY 2010 – FY 2014

	% of Patients Served by Region				
Regions	**FY 2010**	**FY 2011**	**FY 2012**	**FY 2013**	**FY 2014**
Harris County	30.2%	30.3%	30.6%	30.5%	30.5%
Texas (outside of Harris County)	41.1%	41.3%	41.9%	41.9%	42.2%
U.S. (outside of Texas)	26.4%	26.2%	25.3%	25.4%	25.0%
American Territories & International	2.3%	2.2%	2.3%	2.3%	2.4%

**Total Patients Served: The total count of patients newly or previously assigned a medical record who were diagnosed with and/or received care during a specified year for a malignant neoplasm or a malignancy-related condition, benign neoplasm,and/or a non-neoplastic condition identified in the Tumor Registry. Total hospital and clinic charges during the specified year are greater than $40. This count excludes employee/visitor health, no-show, outreach, and bone marrow donor registrations, as well as any individual with a newly or previously assigned medical record number who only received a screening during the specified year. Patients are counted in only one category with priority given to cancer first, then benign, and finally non-neoplastic. After the first 4 months from the registration date, Tumor Registry usually updates a patient's tumor registry record only when a new malignant primary is discovered or a patient has died. Therefore, all benign neoplasms and non-neoplastic conditions may not be captured in the Tumor Registry.*



A.3 Institutional Statistics, Current Month, Current Year to Date, Prior Fiscal Years

CFO - Hyperion, Statement of Operations	FY15*	FY14*	FY13*	FY12*	FY11*	FY10*
Total Operating Revenue	4,495,768,037	4,412,923,943	$4,135,238,891	$3,735,831,786	$3,661,217,668	$3,304,837,222
Total Operating Expense	3,928,889,508	3,683,180,248	$3,589,179,436	$3,332,936,703	$3,054,905,929	$2,816,668,327
Total Margin Contributed to Capital Plan	566,878,529	729,743,695	$546,059,455	$402,895,083	$606,311,739	$488,168,895
CFO- Hyperion, Operating Statistics	FY15*	FY14*	FY13*	FY12*	FY11*	FY10*
Admissions	28,167	27,761	27,905	26,726	25,230	23,995
Patient Days	202,483	202,636	202,553	191,735	180,354	178,651
Average Daily Census	574	571	569	536	504	498
Average Occupancy Rate	86%	87%	90%	87%	85%	91%
Average # of Operating Beds	665	654	656	616	594	546
Average Length of Stay	7.2	7.3	7.3	7.2	7.1	7.4
Outpatient Billable Visits	1,440,684	1,363,008	1,338,706	1,281,489	1,190,568	1,132,338
CFO- Hyperion, Operating Statistics	YTD FY15*	YTD FY14*	FY13*	FY12*	FY11*	FY10*
Total Surgeries	21,835	19,828	21,056	18,937	18,221	17,730
Inpatient Surgeries	N/A	N/A	N/A	8,656	8,764	8,534
Outpatient Surgeries	N/A	N/A	N/A	10,281	9,457	9,196
Surgery Hours	69,987	69,506	70,221	66,241	63,230	61,873
CFO- Hyperion, Operating Statistics	YTD FY15*	YTD FY14*	FY13*	FY12*	FY11*	FY10*
Lab Med / Pathology Billed Procedures	12,334,917	12,005,766	11,718,405	11,619,591	10,937,213	10,754,560
Diagnostic Imaging Billed Procedures	530,590	523,297	501,887	497,660	515,999	538,514
Radiation Oncology Billed Procedures	254,361	283,536	284,740	283,503	267,513	260,893

Stem Cell Transplants	857	847	815	848	865	837
Public Affairs	YTD FY15*	YTD FY14*	YTD FY13*	FY12*	FY11*	FY10*
Volunteer Hours	145,452	164,970	193,921	193,400	201,199	196,483
Internet Services	YTD FY15*	YTD FY14*	YTD FY13*	FY12*	FY11*	FY10*
Visits: www.mdanderson.org	12,023,983	12,364,715	11,883,888	8,781,142	6,161,284	5,274,905
Visits: inside.mdanderson.org	12,331,153	12,589,911	12,162,278	12,548,496	12,658,772	12,396,646

*Data provided by MD Anderson Annual Report, previous years based upon Hyperion reported data (Quickstats)

A.4 U.T. MD Anderson Work Report, Fiscal Year 2015

MD Anderson Workforce Report- FY 2015

MONTH	Total Employees	Change #	Change %	Full-Time Equivalents	Change #	Change %	Total Full-Time	Change #	Change %	Total Part-Time	Change #	Change %
August, 2014	19,979			19,378.96			17,721			2,258		
September, 2014	20,087	108	1%	19,469.14	90.18	0.46%	17,803	82	0.46%	2,284	26	1.14%
October, 2014	20,174	87	0.43%	19,559.14	90.00	0.46%	17,877	74	0.41%	2,297	13	0.57%
November, 2014	20,205	31	0.15%	19,591.95	32.81	0.17%	17,922	45	0.25%	2,283	-14	-0.61%
December, 2014	20,194	-11	-0.05%	19,588.24	-3.71	-0.02%	17,934	12	0.07%	2,260	-23	-1.02%
January, 2015	20,158	-36	-0.18%	19,550.38	-37.86	-0.19%	17,913	-21	-0.12%	2,245	-15	-0.67%
February, 2015	20,257	99	0.49%	19,649.65	99.27	0.51%	17,996	83	0.46%	2,261	16	0.71%
March, 2015	20,381	124	0.61%	19,779.24	129.59	0.66%	18,125	129	0.71%	2,256	-5	-0.22%
April, 2015	20,406	25	0.12%	19,809.75	30.51	0.15%	18,167	42	0.23%	2,239	-17	-0.76%
May, 2015	20,419	13	0.06%	19,832.90	23.15	0.12%	18,216	49	0.27%	2,203	-36	-1.63%
June, 2015	20,740	321	1.55%	20,158.66	325.76	1.62%	18,541	325	1.75%	2,199	-4	-0.18%
July, 2015	20,794	54	0.26%	20,230.83	72.17	0.36%	18,624	83	0.45%	2,170	-29	-1.34%
August, 2015	20,671	-123	-0.60%	20,115.95	-114.88	-0.57%	18,528	-96	-0.52%	2,143	-27	-1.26%

Reporting Source: PeopleSoft

Data provided as of last day of each month.

Includes Hourly and Temp Employees.

B. Student Information

THE UNIVERSITY OF TEXAS
MD Anderson Cancer Center

Making Cancer History®

B.1 SHP Applied, Admitted and Enrolled Data by Program

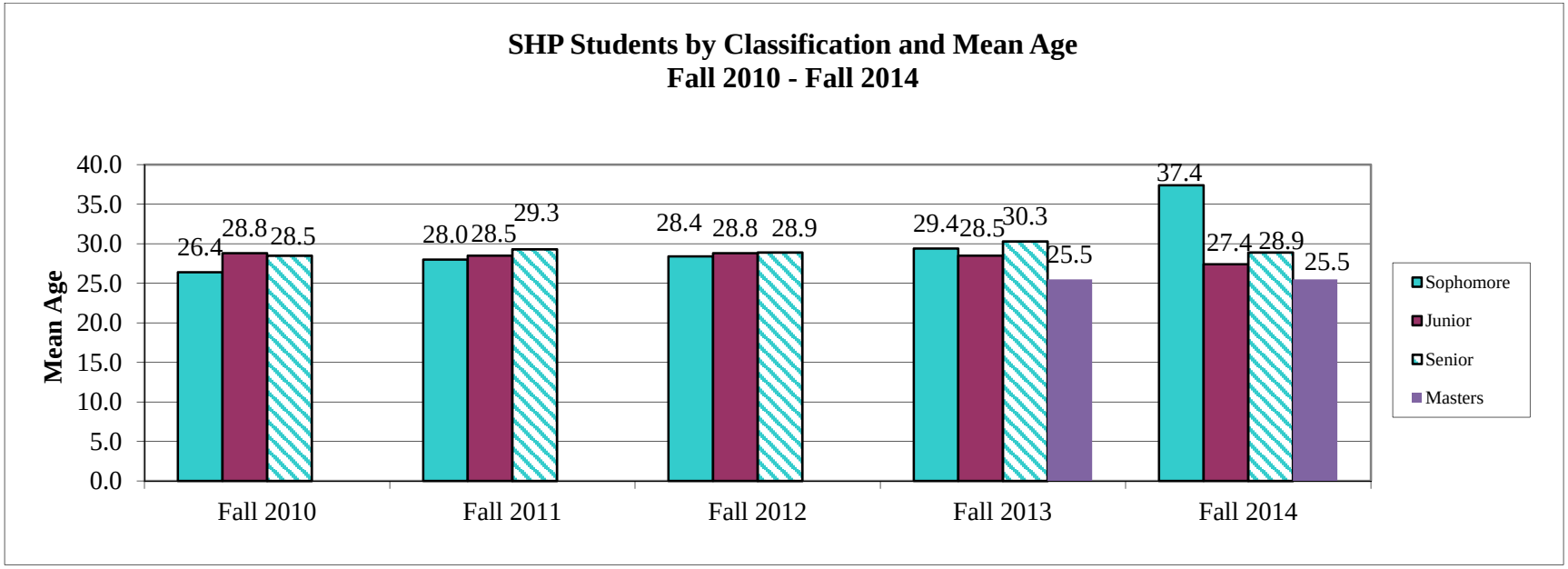
	Fall 2011			Fall 2012			Fall 2013			Fall 2014		
Program	**Applied**	**Admitted**	**Enrolled**	**Applied**	**Admitted**	**Enrolled***	**Applied**	**Admitted**	**Enrolled**	**Applied**	**Admitted**	**Enrolled**
BS Clinical Laboratory Sciences	79	34	23	56	17	17	53	20	20	70	13	13
CRT Clinical Laboratory Sciences	3	1	1	0	0	0	0	0	0	0	0	0
BS Cytogenetic Technology	49	37	13	43	23	23	41	27	27	35	20	20
CRT Cytogenetic Technology	0	0	0	0	0	0	0	0	0	0	0	0
BS Cytotechnology	26	14	6	32	13	13	26	6	6	17	6	6
CRT Cytotechnology	1	0	0	1	1	1	0	0	0	0	0	0
MS Diagnostic Genetics	N/A	N/A	N/A	N/A	N/A	N/A	28	5	4	40	8	8
BS Diagnostic Medical Sonography**	N/A	N/A	N/A	N/A	N/A	N/A	41	12	12	79	9	9
BS Diagnostic Imaging	98	49	23	165	39	38	116	37	37	130	38	38
CRT Diagnostic Imaging	0	0	0	0	0	0	7	5	5	0	0	0
BS Histotechnology**	16	14	9	36	17	17	28	17	17	28	21	21
CRT Histotechnology	10	0	0	0	0	0	0	0	0	0	0	0
BS[a] Medical Dosimetry	99	22	20	89	21	20	123	21	21	64	22	22
CRT[b] Medical Dosimetry	1	0	0	0	0	0	0	0	0	0	0	0
BS Molecular Genetic Technology	52	24	24	55	34	34	46	26	26	45	23	23
BS Radiation Therapy	77	25	18	46	17	17	52	21	21	95	24	24
CRT Radiation Therapy	0	0	0	0	0	0	0	0	0	0	0	0
Total	**511**	**220**	**137**	**523**	**182**	**180**	**561**	**197**	**196**	**603**	**184**	**184**

Source: SHP Dean's Report **Does not include 2 students carried over from prior year.*
***MS in Diagnostics Genetics, BS in Diagnostic Medical Sonography, and CRT in Diagnostic Imaging implemented in 2013*

B.2 SHP Students by Mean Age and Level, Fall 2010 – Fall 2014

MEAN STUDENT AGE BY CLASSIFICATION	Fall 2010		Fall 2011		Fall 2012		Fall 2013		Fall 2014	
	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT
SOPHOMORE	26.4	14	28.0	23	28.4	66	29.4	74	37.4	97
JUNIOR	28.8	103	28.5	131	28.8	128	28.5	113	27.4	80
SENIOR	28.5	131	29.3	162	28.9	96	30.3	126	28.9	115
MASTERS	N/A	N/A	N/A	N/A	N/A	N/A	25.5	4	25.5	11
OVERALL	**28.5**	**248**	**28.9**	**316**	**28.7**	**290**	**29.5**	**317**	**27.9**	**303**

Source: Certified CBM001



B.3 SHP Students by Gender and Ethnicity, Fall 2010 – Fall 2014

		Fall 2010	% of	Fall 2011*	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of
ETHNIC ORIGIN	**GENDER**	**COUNT**	**Students**	**COUNT**	**Students**	**COUNT**	**Students**	**COUNT**	**Students**	**COUNT**	**Students**
WHITE NON-HISPANIC	FEMALE	0	0.0%	36	11.4%	71	24.5%	66	20.8%	65	21.5%
	MALE	1	0.4%	15	4.7%	36	12.4%	31	9.8%	28	9.2%
Subtotal		1	0.4%	51	16.1%	107	36.9%	97	30.6%	93	30.7%
BLACK NON-HISPANIC	FEMALE	2	0.8%	16	5.1%	24	8.3%	25	7.9%	27	8.9%
	MALE	0	0.0%	6	1.9%	9	3.1%	15	4.7%	6	2.0%
Subtotal		2	0.8%	22	7.0%	33	11.4%	40	12.6%	33	10.9%
HISPANIC	FEMALE	34	13.7%	42	13.3%	26	9.0%	39	12.3%	48	15.8%
	MALE	11	4.4%	18	5.7%	11	3.8%	20	6.3%	25	8.3%
Subtotal		45	18.1%	60	19.0%	37	12.8%	59	18.6%	73	24.1%
ASIAN	FEMALE	4	1.6%	20	6.3%	35	12.1%	28	8.8%	42	13.9%
	MALE	0	0.0%	12	3.8%	27	9.3%	25	7.9%	28	9.2%
Subtotal		4	1.6%	32	10.1%	62	21.4%	53	16.7%	70	23.1%
AMERICAN INDIAN OR ALASKAN NATIVE	FEMALE	0	0.0%	0	0.0%	0	0.0%	1	0.3%	1	0.3%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Subtotal		0	0.0%	0	0.0%	0	0.0%	1	0.3%	1	0.3%
INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	14	4.4%	16	5.3%
	MALE	0	0.0%	0	0.0%	1	0.3%	6	1.9%	6	2.0%
Subtotal		0	0.0%	0	0.0%	1	0.3%	20	6.3%	22	7.3%
UNKNOWN OR NOT REPORTED	FEMALE	121	48.8%	103	32.6%	36	12.4%	29	9.1%	2	0.7%
	MALE	74	29.8%	45	14.2%	10	3.4%	14	4.4%	2	0.7%
Subtotal		195	78.6%	148	46.8%	46	15.9%	43	13.6%	4	1.3%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER*	FEMALE	0	0.0%	0	0.0%	1	0.3%	1	0.3%	1	0.3%
	MALE	1	0.4%	1	0.3%	0	0.0%	1	0.3%	0	0.0%
Subtotal		1	0.4%	1	0.3%	1	0.3%	2	0.6%	1	0.3%
TWO OR MORE RACES*	FEMALE	0	0.0%	1	0.3%	3	1.0%	1	0.3%	3	1.0%
	MALE	0	0.0%	1	0.3%	0	0.0%	1	0.3%	3	1.0%
Subtotal		0	0.0%	2	0.6%	3	1.0%	2	0.6%	6	2.0%
TOTAL		**248**	100.0%	**316**	100.0%	**290**	100.0%	**317**	100.0%	**303**	100.0%

*New ethnicities were implemented including "Native Hawaiian or other Pacific Islander" and "Two or more races"

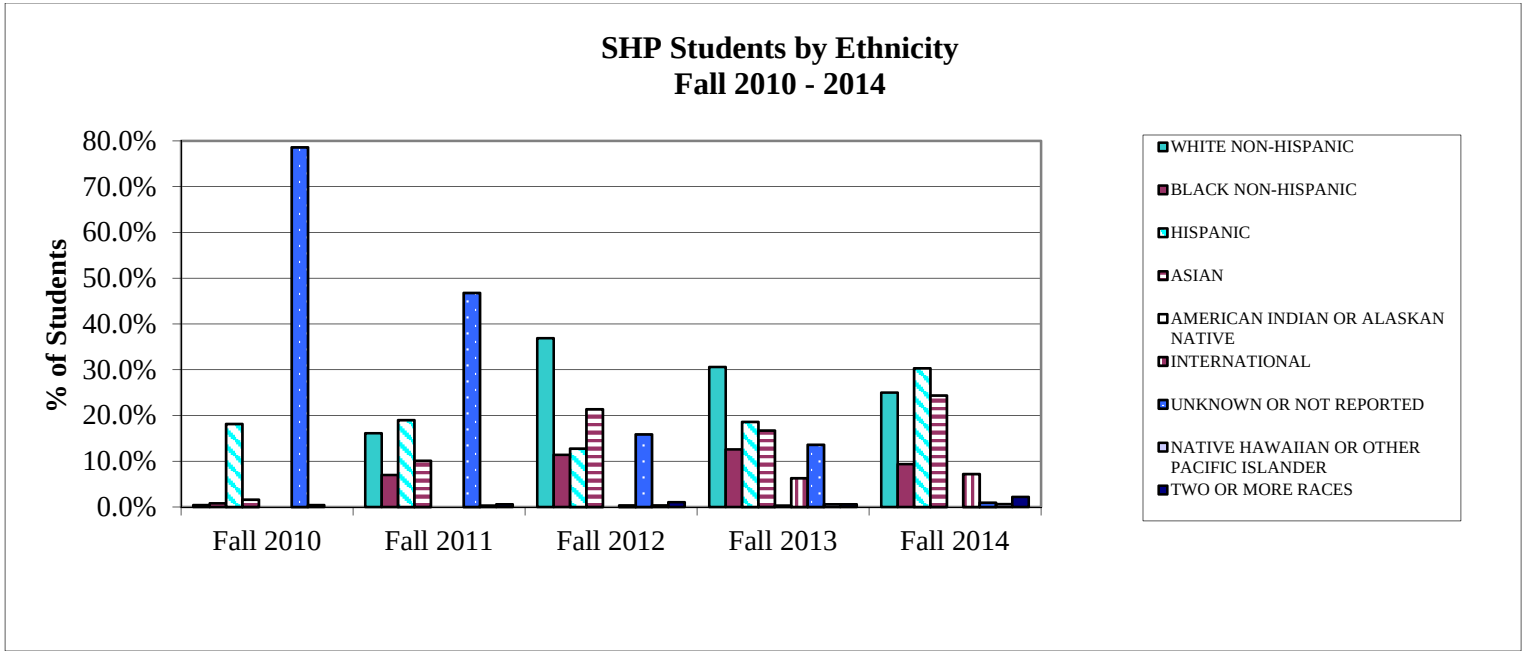
Source: Certified CBM001

B.4 SHP Students by Ethnicity, Fall 2010 – Fall 2014

ETHNIC ORIGIN	Fall 2010 COUNT	% of Students	Fall 2011 COUNT	% of Students	Fall 2012* COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students
WHITE NON-HISPANIC	1	0.4%	51	16.1%	107	36.9%	97	30.6%	80	25.0%
BLACK NON-HISPANIC	2	0.8%	22	7.0%	33	11.4%	40	12.6%	30	9.4%
HISPANIC	45	18.1%	60	19.0%	37	12.8%	59	18.6%	97	30.3%
ASIAN	4	1.6%	32	10.1%	62	21.4%	53	16.7%	78	24.4%
AMERICAN INDIAN OR ALASKAN NATIVE	0	0.0%	0	0.0%	0	0.0%	1	0.3%	0	0.0%
INTERNATIONAL	0	0.0%	0	0.0%	1	0.3%	20	6.3%	23	7.2%
UNKNOWN OR NOT REPORTED	195	78.6%	148	46.8%	46	15.9%	43	13.6%	3	0.9%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER*	1	0.4%	1	0.3%	1	0.3%	2	0.6%	2	0.6%
TWO OR MORE RACES*	0	0.0%	2	0.6%	3	1.0%	2	0.6%	7	2.2%
TOTAL	**248**	100.0%	**316**	100.0%	**290**	100.0%	**317**	100.0%	**320**	100.0%

*New ethnicities were implemented including "Native Hawaiian or other Pacific Islander" and "Two or more races"

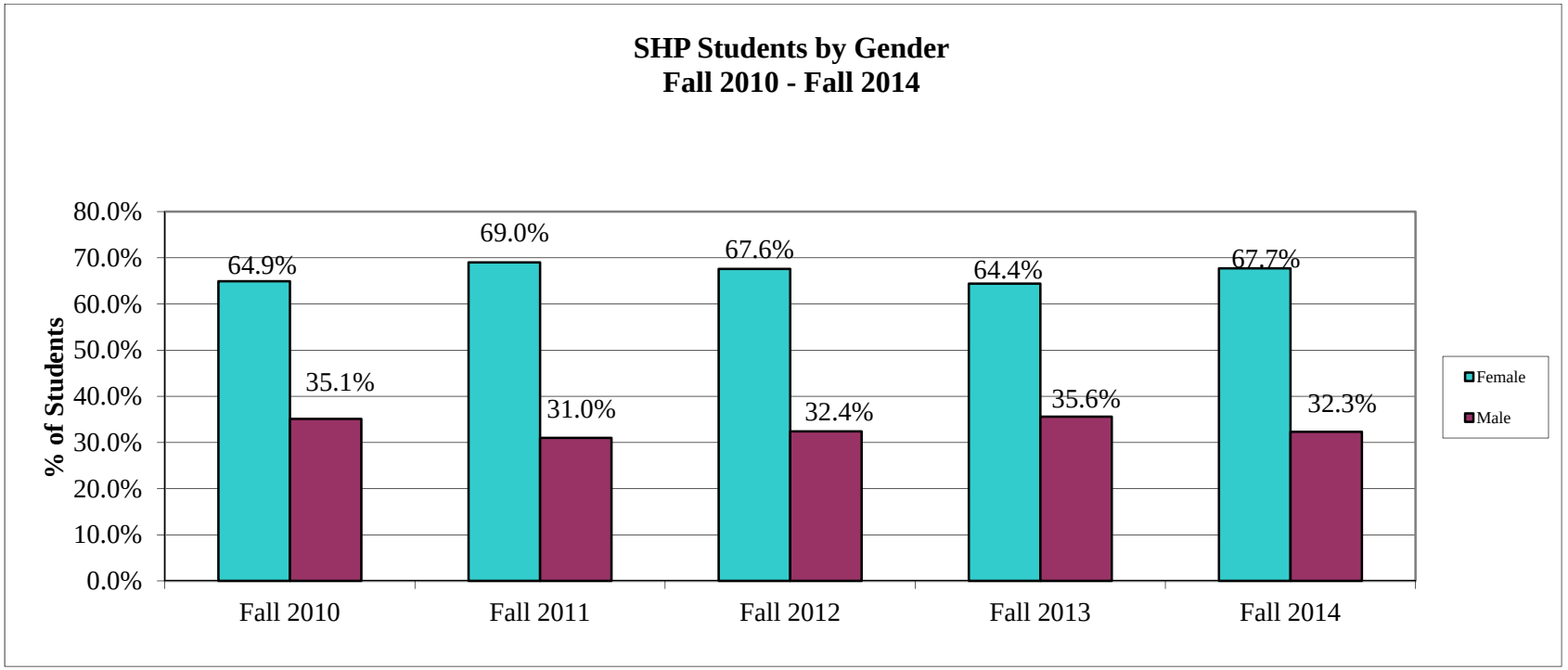
Source: Certified CBM001



B.5 SHP Students by Gender, Fall 2010 – Fall 2014

GENDER	Fall 2010 COUNT	% of Students	Fall 2011 COUNT	% of Students	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students
FEMALE	161	64.9%	218	69.0%	196	67.6%	204	64.4%	205	67.7%
MALE	87	35.1%	98	31.0%	94	32.4%	113	35.6%	98	32.3%
TOTAL	248	100.0%	316	100.0%	290	100.0%	317	100.0%	303	100.0%

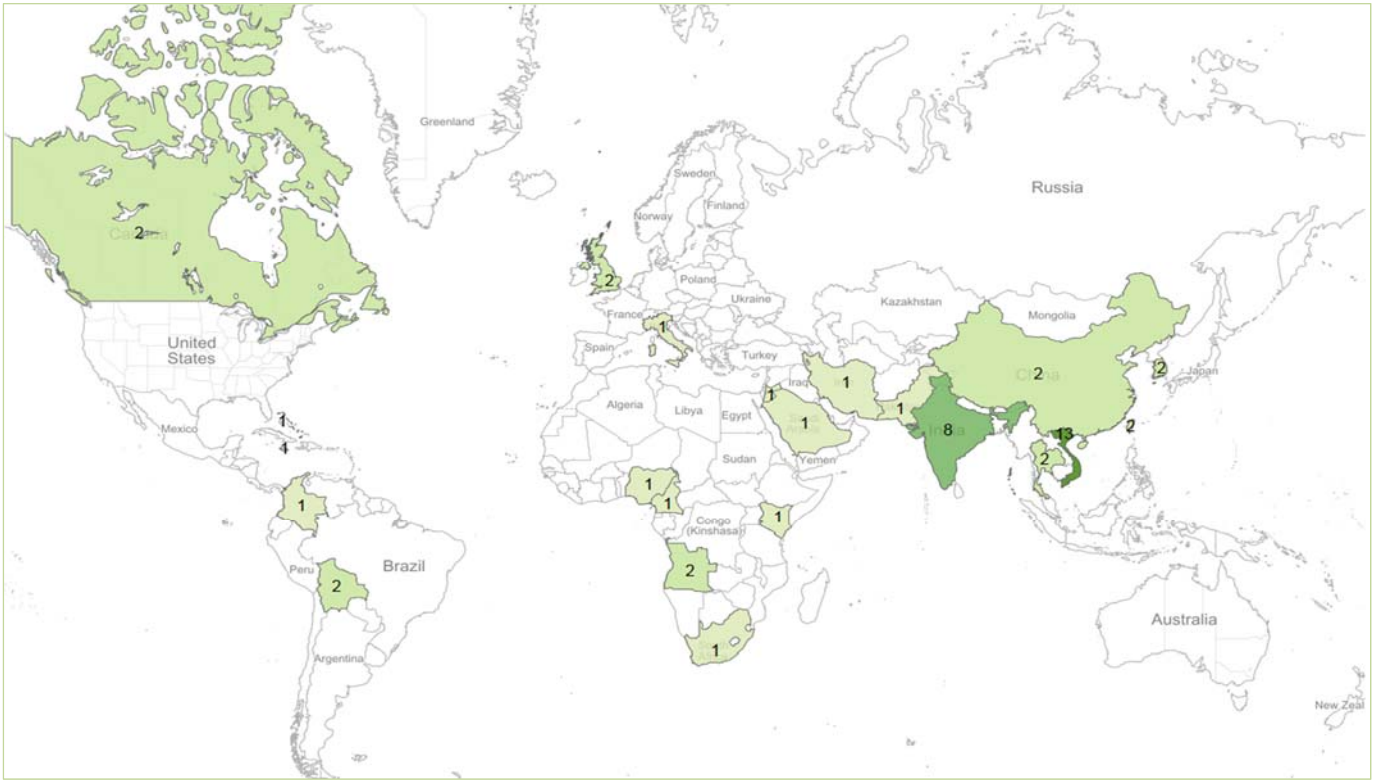
Source: Certified CBM001



B.6a SHP Students by Residency - International, Fall 2010 – Fall 2014

		Fall 2010	Fall 2011	Fall 2011	Fall 2013	Fall 2014
RESIDENCE	**RESIDENCE TYPE**	**COUNT**	**COUNT**	**COUNT**	**COUNT**	**COUNT**
Angola	INTERNATIONAL	1	1	0	0	0
Bahamas	INTERNATIONAL	1	0	0	0	0
Bolivia	INTERNATIONAL	0	0	1	1	0
Cameroon	INTERNATIONAL	0	1	0	0	0
Canada	INTERNATIONAL	1	1	0	0	0
China	INTERNATIONAL	0	0	0	1	1
Colombia	INTERNATIONAL	1	0	0	0	0
India	INTERNATIONAL	1	3	1	1	2
Iran	INTERNATIONAL	0	0	0	0	1
Italy	INTERNATIONAL	0	0	1	0	0
Jamaica	INTERNATIONAL	0	1	0	0	0
Jordan	INTERNATIONAL	0	1	0	0	0
Kenya	INTERNATIONAL	0	1	0	0	0
Korea, Republic of	INTERNATIONAL	1	0	0	0	1
Nigeria	INTERNATIONAL	0	0	0	1	0
Pakistan	INTERNATIONAL	0	1	0	0	0
Saudi Arabia	INTERNATIONAL	0	0	0	0	1
South Africa	INTERNATIONAL	1	0	0	0	0
Taiwan	INTERNATIONAL	0	0	0	1	1
Thailand	INTERNATIONAL	0	1	1	0	0
United Kingdom	INTERNATIONAL	1	0	0	0	1
Vietnam, North	INTERNATIONAL	1	1	0	0	0
Vietnam	INTERNATIONAL	3	4	3	0	1
SUBTOTAL, INTERNATIONAL		12	16	7	5	9

International SHP Students by Residency Fall 2010-14

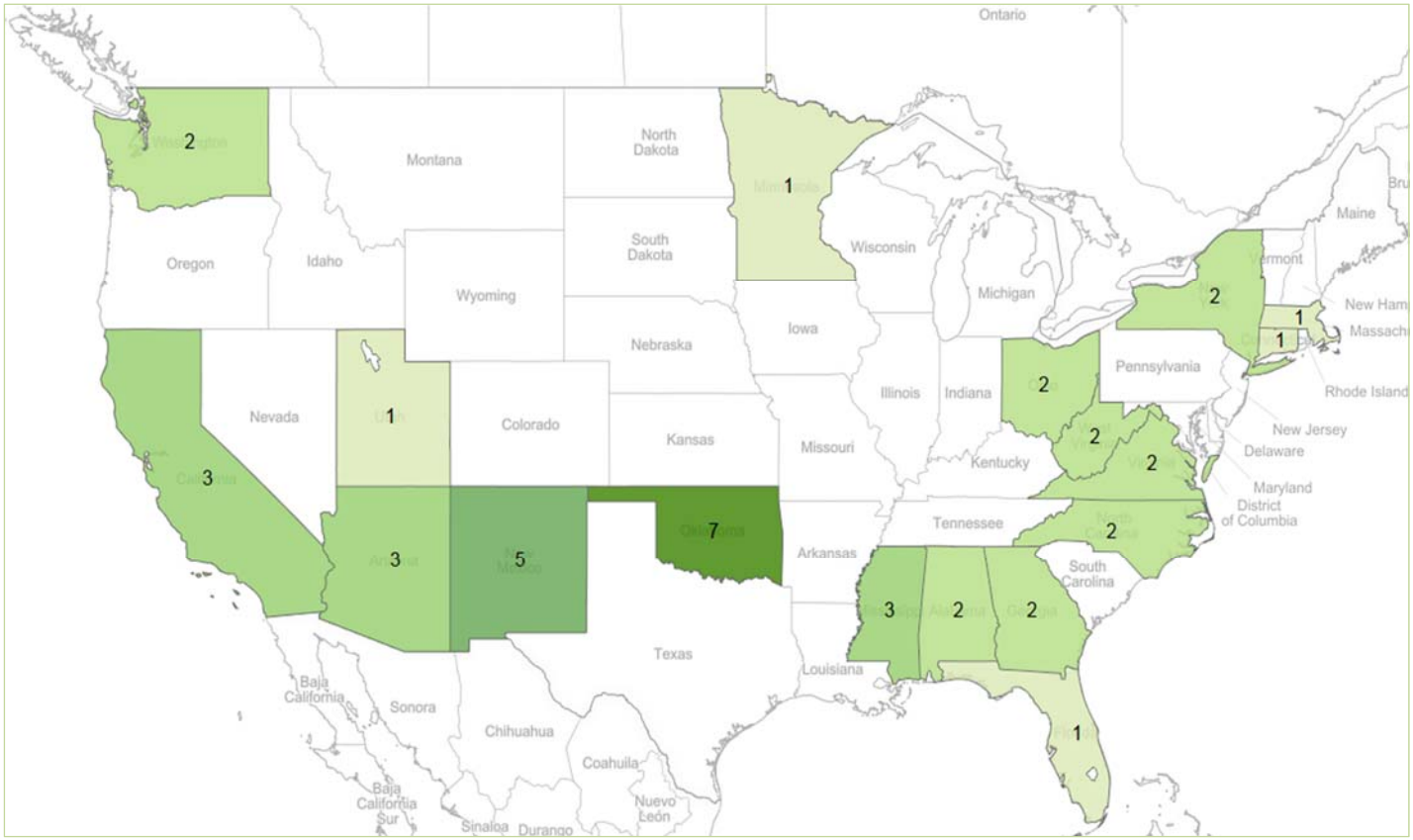


B.6b SHP Students by Residency - Out of State, Fall 2010 – Fall 2014

		Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014
RESIDENCE	**RESIDENCE TYPE**	**COUNT**	**COUNT**	**COUNT**	**COUNT**	**COUNT**
Alabama	OUT OF STATE	1	1	0	0	0
Alaska	OUT OF STATE	1	0	0	0	0
Arizona	OUT OF STATE	0	0	0	1	1
Arizona	OUT OF STATE	0	0	0	0	1
California	OUT OF STATE	1	1	1	0	0
Connecticut	OUT OF STATE	0	0	0	0	1
Florida	OUT OF STATE	1	0	0	0	0
Georgia	OUT OF STATE	0	1	1	0	0
Massachusetts	OUT OF STATE	0	1	0	0	0
Minnesota	OUT OF STATE	0	0	1	0	0
Mississippi	OUT OF STATE	0	1	1	1	0
New Mexico	OUT OF STATE	1	1	0	1	2
New York	OUT OF STATE	1	1	0	0	0
North Carolina	OUT OF STATE	0	0	0	1	1
Ohio	OUT OF STATE	1	1	0	0	0
Oklahoma	OUT OF STATE	3	4	0	0	0
Utah	OUT OF STATE	1	0	0	0	0
Virginia	OUT OF STATE	0	1	1	0	0
Washington	OUT OF STATE	1	1	0	0	0
West Virginia	OUT OF STATE	0	0	1	1	0
SUBTOTAL, OUT OF STATE		12	14	6	5	6

Source: Certified CBM001

Continental U.S. Out of State SHP Students by Residency Fall 2010-14



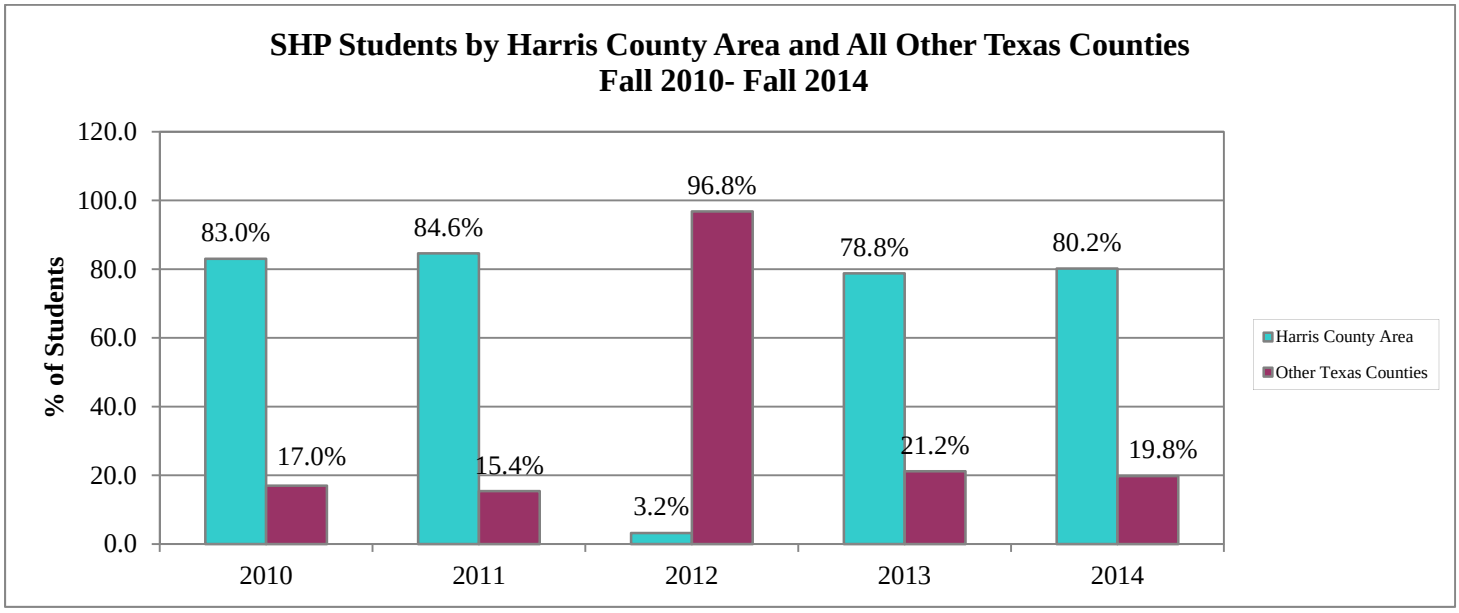
B.7 SHP Students by Residency - Texas County, Fall 2010 – Fall 2014*

		Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014
RESIDENCE	**RESIDENCE TYPE**	**COUNT**	**COUNT**	**COUNT**	**COUNT**	**COUNT**
Angelina County	TEXAS COUNTY	2	0	0	0	0
Atascosa County	TEXAS COUNTY	0	0	0	1	0
Austin County	TEXAS COUNTY	0	0	0	1	1
Bell County	TEXAS COUNTY	0	1	0	1	0
Bexar County	TEXAS COUNTY	3	5	2	4	6
Brazoria County	TEXAS COUNTY	10	10	0	16	20
Brazos County	TEXAS COUNTY	5	1	12	0	0
Burnet County	TEXAS COUNTY	1	1	0	0	0
Calhoun County	TEXAS COUNTY	1	1	0	0	0
Cameron County	TEXAS COUNTY	1	0	0	0	0
Coke County	TEXAS COUNTY	0	0	3	0	0
Collin County	TEXAS COUNTY	2	2	0	5	5
Colorado County	TEXAS COUNTY	0	0	0	0	2
Dallas County	TEXAS COUNTY	7	8	0	8	3
Dawson County	TEXAS COUNTY	0	0	10	0	0
Deaf Smith County	TEXAS COUNTY	0	0	2	0	0
Denton County	TEXAS COUNTY	1	2	0	3	2
Ellis County	TEXAS COUNTY	0	0	3	1	0
El Paso County	TEXAS COUNTY	1	1	0	3	0
Fayette County	TEXAS COUNTY	0	0	0	1	1
Fort Bend County	TEXAS COUNTY	31	44	0	29	26
Franklin County	TEXAS COUNTY	0	0	28	0	0
Freestone County	TEXAS COUNTY	0	0	0	0	1
Gaines County	TEXAS COUNTY	1	0	0	0	0
Galveston County	TEXAS COUNTY	1	7	7	12	11
Guadalupe County	TEXAS COUNTY	1	0	1	0	1
Hardin County	TEXAS COUNTY	0	1	0	1	0
Harris County	TEXAS COUNTY	130	170	0	181	168
Harrison County	TEXAS COUNTY	0	0	0	1	0
Haskell County	TEXAS COUNTY	0	0	4	0	0
Hemphill County	TEXAS COUNTY	0	0	1	0	0
Henderson County	TEXAS COUNTY	0	1	168	0	0
Hidalgo County	TEXAS COUNTY	0	0	2	1	2
Hopkins County	TEXAS COUNTY	0	0	1	0	0
Houston County	TEXAS COUNTY	0	2	0	5	4
Hutchinson County	TEXAS COUNTY	0	0	1	0	0
Jackson County	TEXAS COUNTY	0	0	1	0	0
Jasper County	TEXAS COUNTY	0	1	0	0	0
Jefferson County	TEXAS COUNTY	0	1	1	1	1
Jones County	TEXAS COUNTY	0	0	0	0	1
Kaufman County	TEXAS COUNTY	1	1	0	1	0
Kerr County	TEXAS COUNTY	1	0	0	1	1
Lavaca County	TEXAS COUNTY	1	1	0	0	1

B.7 SHP Students by Residency - Texas County, *continued*

		Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014
RESIDENCE	**RESIDENCE TYPE**	**COUNT**	**COUNT**	**COUNT**	**COUNT**	**COUNT**
Lee County	TEXAS COUNTY	1	0	0	1	1
Liberty County	TEXAS COUNTY	0	1	1	0	0
Lipscomb County	TEXAS COUNTY	0	0	1	0	0
Live Oak County	TEXAS COUNTY	0	0	1	0	0
Lubbock County	TEXAS COUNTY	0	1	0	0	0
Matagorda County	TEXAS COUNTY	1	1	0	2	1
Maverick County	TEXAS COUNTY	0	0	2	0	0
Midland County	TEXAS COUNTY	1	0	0	0	0
Montague County	TEXAS COUNTY	0	1	0	0	0
Montgomery County	TEXAS COUNTY	14	10	0	16	17
Morris County	TEXAS COUNTY	0	0	11	0	0
Nueces County	TEXAS COUNTY	0	1	2	1	1
Parker County	TEXAS COUNTY	1	1	0	0	1
Raines County	TEXAS COUNTY	0	0	0	0	1
Randall County	TEXAS COUNTY	0	0	0	1	1
Robertson County	TEXAS COUNTY	0	0	0	1	1
San Saba County	TEXAS COUNTY	0	0	2	0	0
Smith County	TEXAS COUNTY	0	2	0	1	0
Tarrant County	TEXAS COUNTY	1	3	3	1	1
Terrell County	TEXAS COUNTY	0	0	4	0	0
Travis County	TEXAS COUNTY	4	1	0	4	4
Val Verde County	TEXAS COUNTY	0	0	1	0	0
Van Zandt County	TEXAS COUNTY	0	1	0	0	0
Walker County	TEXAS COUNTY	0	0	0	1	0
Waller County	TEXAS COUNTY	0	0	1	0	0
Washington County	TEXAS COUNTY	0	0	0	1	1
Wharton County	TEXAS COUNTY	0	2	0	1	0
Williamson County	TEXAS COUNTY	0	0	0	0	1
Wise County	TEXAS COUNTY	0	0	0	0	0
SUBTOTAL, TEXAS COUNTY		224	286	277	307	288

Source: Certified CBM001
**Fall 2012 counts may or may not represent accurate data*

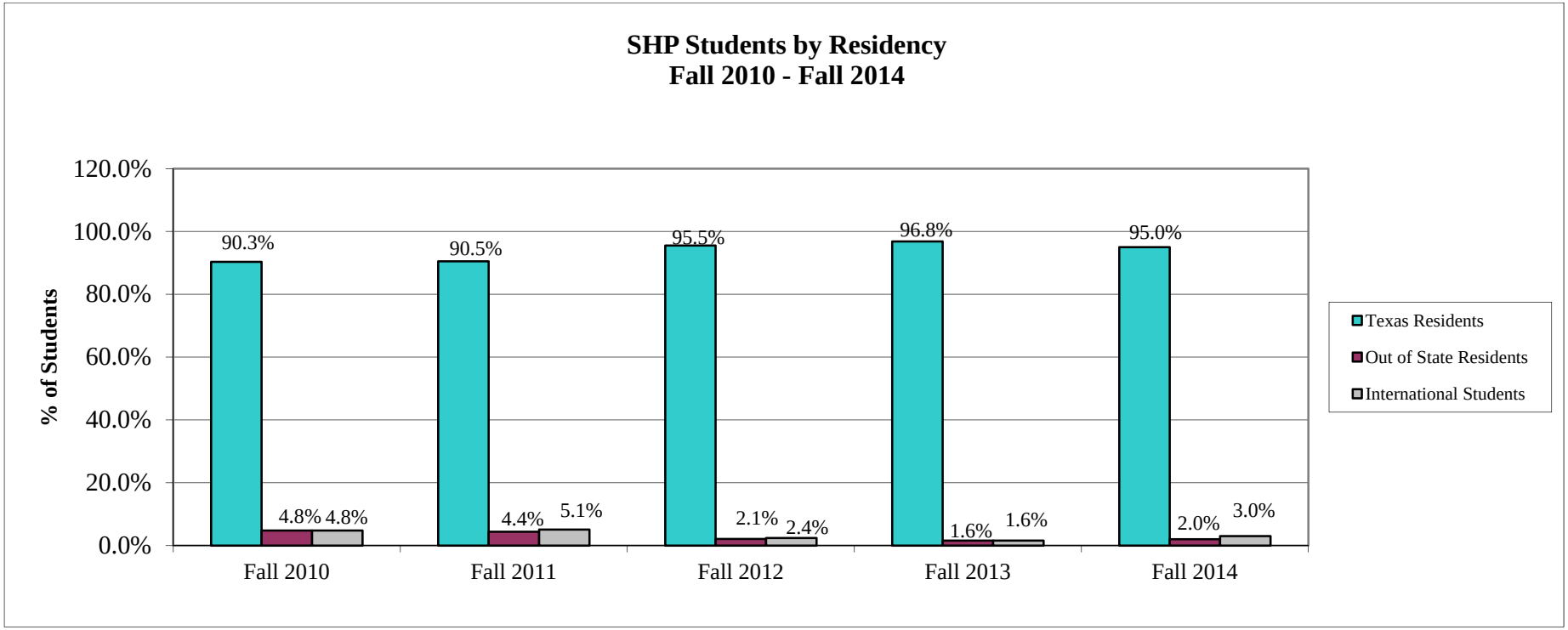


*Consists of Harris and contiguous counties
**Fall 2012 counts may or may not represent accurate data*

B.8 SHP Students by Residency Type, Fall 2010 – Fall 2014

RESIDENCE TYPE	Fall 2010 COUNT	% of Students	Fall 2011 COUNT	% of Students	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students
Texas Residents	224	90.3%	286	90.5%	277	95.5%	307	96.8%	288	95.0%
Out of State Students	12	4.8%	14	4.4%	6	2.1%	5	1.6%	6	2.0%
International Students	12	4.8%	16	5.1%	7	2.4%	5	1.6%	9	3.0%
TOTAL	**248**	100.0%	**316**	100.0%	**290**	100.0%	**317**	100.0%	**303**	100.0%

Source: Certified CBM001



B.9 UT Graduate School of Biomedical Sciences at Houston (GSBS) Applications, Accepted, and Admitted, by Program and Year

	Year	M.D./ Ph.D.*	(M.S.)Ph.D.	Individualized M.S.	Specialized M.S.	Non-degree	Total	Average GPA**
Completed Application	2010	-	483	38	92	9	622	-
Admitted Applicant	2010	-	141	18	16	6	181	3.5
Enrolled Applicant	2010	5	104	16	14	5	144	3.4

	Year	M.D./ Ph.D.*	(M.S.)Ph.D.	Individualized M.S.	Specialized M.S.	Non-degree	Total	Average GPA**
Completed Application	2011	-	446	44	115	10	615	-
Admitted Applicant	2011	-	106	32	20	10	168	3.5
Enrolled Applicant	2011	4	68	27	13	10	122	3.3

	Year	M.D./ Ph.D.*	(M.S.)Ph.D.	Individualized M.S.	Specialized M.S.	Non-degree	Total	Average GPA**
Completed Application	2012	-	687	76	107	5	875	-
Admitted Applicant	2012	-	120	30	14	4	168	3.6
Enrolled Applicant	2012	4	66	21	10	4	105	3.5

	Year	M.D./ Ph.D.*	(M.S.)Ph.D.	Individualized M.S.	Specialized M.S.	Non-degree	Total	Average GPA**
Completed Application	2013	-	521	66	107	3	697	-
Admitted Applicant	2013	-	105	15	15	3	138	3.5
Enrolled Applicant	2013	7	53	9	10	3	82	3.5

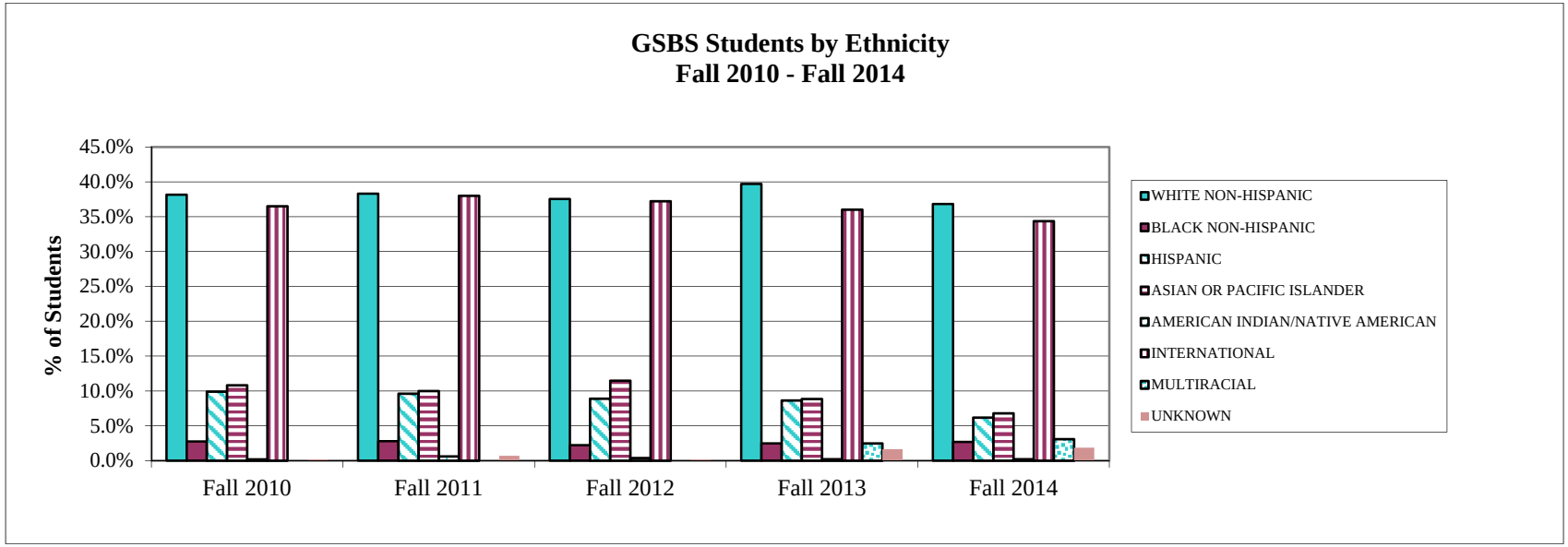
	Year	M.D./ Ph.D.*	(M.S.)Ph.D.	Individualized M.S.	Specialized M.S.	Non-degree	Total	Average GPA**
Completed Application	2014	-	672	56	117	9	854	-
Admitted Applicant	2014	-	104	12	12	9	137	3.6
Enrolled Applicant	2014	5	21	10	11	9	86	3.6

**Excludes M.D./Ph.D. applicants and admissions*
*** Average undergrad GPA for Ph.D. applicants*
Source: UT Graduate School of Biomedical Sciences

B.10 GSBS Students by Ethnicity, Fall 2010– Fall 2014*

ETHNIC ORIGIN	Fall 2010 COUNT	% of Students	Fall 2011 COUNT	% of Students	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students
WHITE NON-HISPANIC	208	38.2%	207	38.3%	196	36.3%	193	39.7%	179	36.8%
BLACK NON-HISPANIC	15	2.8%	15	2.8%	12	2.2%	12	2.5%	13	2.7%
HISPANIC	54	9.9%	52	9.6%	48	8.9%	42	8.6%	30	6.2%
ASIAN OR PACIFIC ISLANDER	59	10.8%	54	10.0%	62	11.5%	43	8.8%	34	7.0%
AMERICAN INDIAN OR ALASKAN NATIVE	1	0.2%	3	0.6%	2	0.4%	1	0.2%	1	0.2%
INTERNATIONAL	199	36.5%	205	38.0%	201	37.2%	175	36.0%	166	34.2%
MULTIRACIAL							12	2.5%	15	3.1%
UNKNOWN OR NOT REPORTED	1	0.2%	4	0.7%	1	0.2%	8	1.6%	9	1.9%
TOTAL	**537**	100.0%	**540**	100.0%	**522**	100.0%	**193**	39.7%	**179**	36.8%

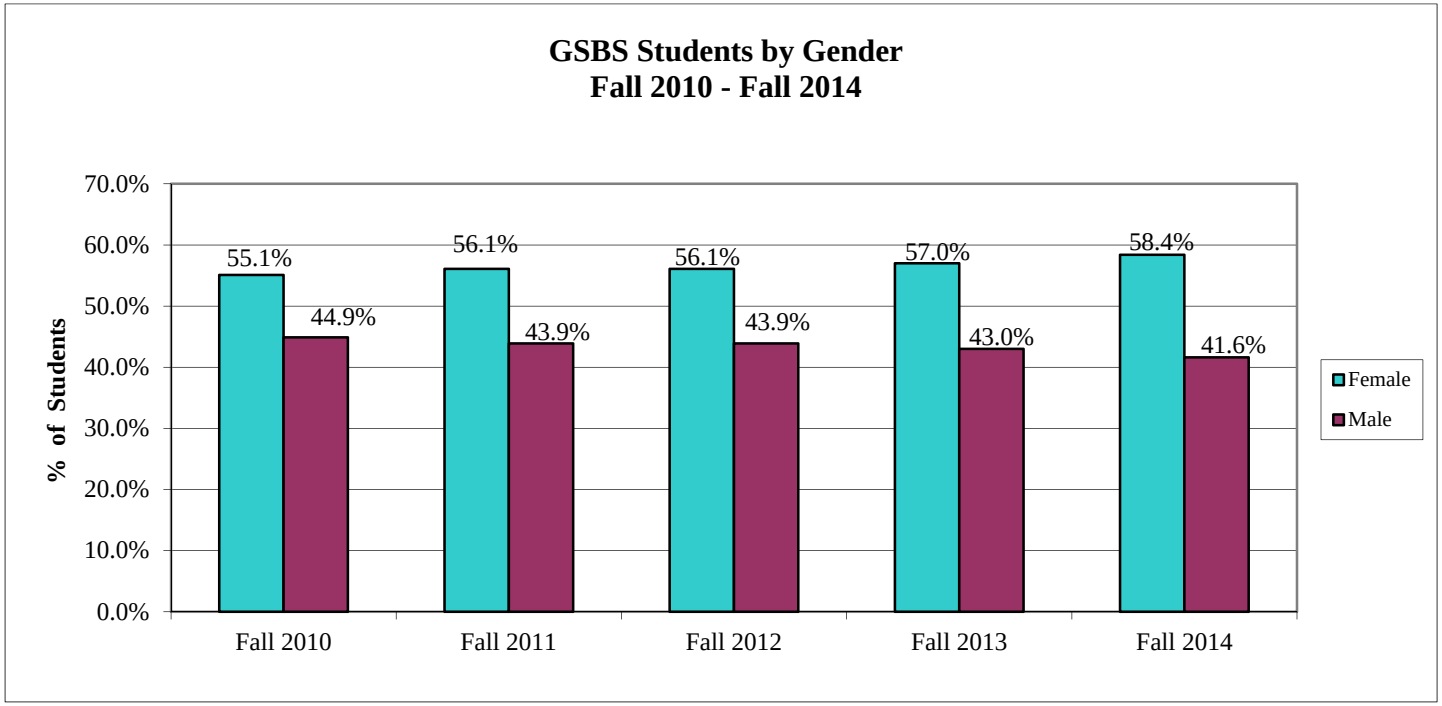
**Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.*



B.11 GSBS Students by Gender, Fall 2010 – Fall 2014*

GENDER	Fall 2010 COUNT	% of Students	Fall 2011 COUNT	% of Students	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students
FEMALE	296	55.1%	303	56.1%	293	56.1%	277	57.0%	261	58.4%
MALE	241	44.9%	237	43.9%	229	43.9%	209	43.0%	186	41.6%
TOTAL	**537**	100.0%	**540**	100.0%	**522**	100.0%	**486**	100.0%	**447**	100.0%

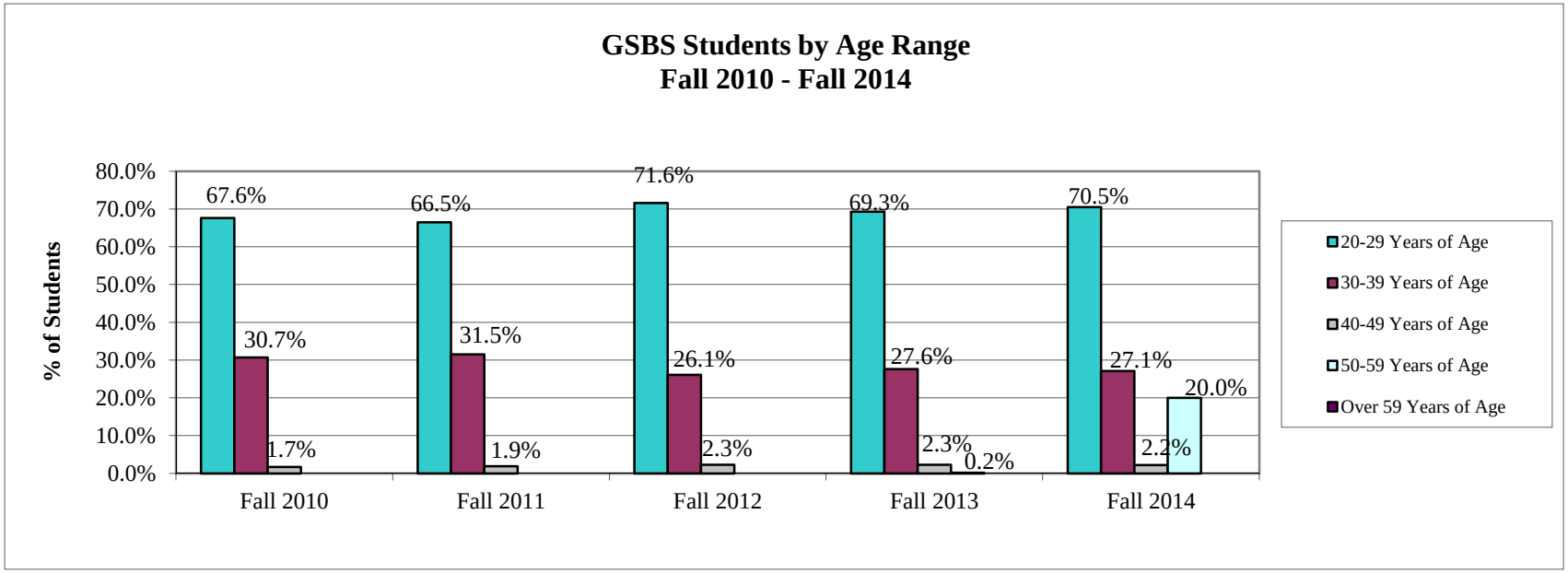
**Data excludes non-degree students. Source: UT Graduate School of Biomedical Sciences.*



B.12 GSBS Students by Age Range, Fall 2010 – Fall 2014*

AGE RANGE	Fall 2010 COUNT	% of Students	Fall 2011 COUNT	% of Students	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students
20 TO 29 YEARS OF AGE	363	67.6%	359	66.5%	374	71.6%	337	69.3%	315	70.5%
30 TO 39 YEARS OF AGE	165	30.7%	170	31.5%	136	26.1%	134	27.6%	121	27.1%
40 TO 49 YEARS OF AGE	9	1.7%	10	1.9%	12	2.3%	14	2.9%	10	2.2%
50 TO 59 YEARS OF AGE	0	0.0%	1	0.2%	0	0.0%	1	0.2%	1	0.2%
OVER 59 YEARS OF AGE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL	**537**	100.0%	**540**	100.0%	**522**	**100.0%**	**486**	100.0%	**447**	100.0%

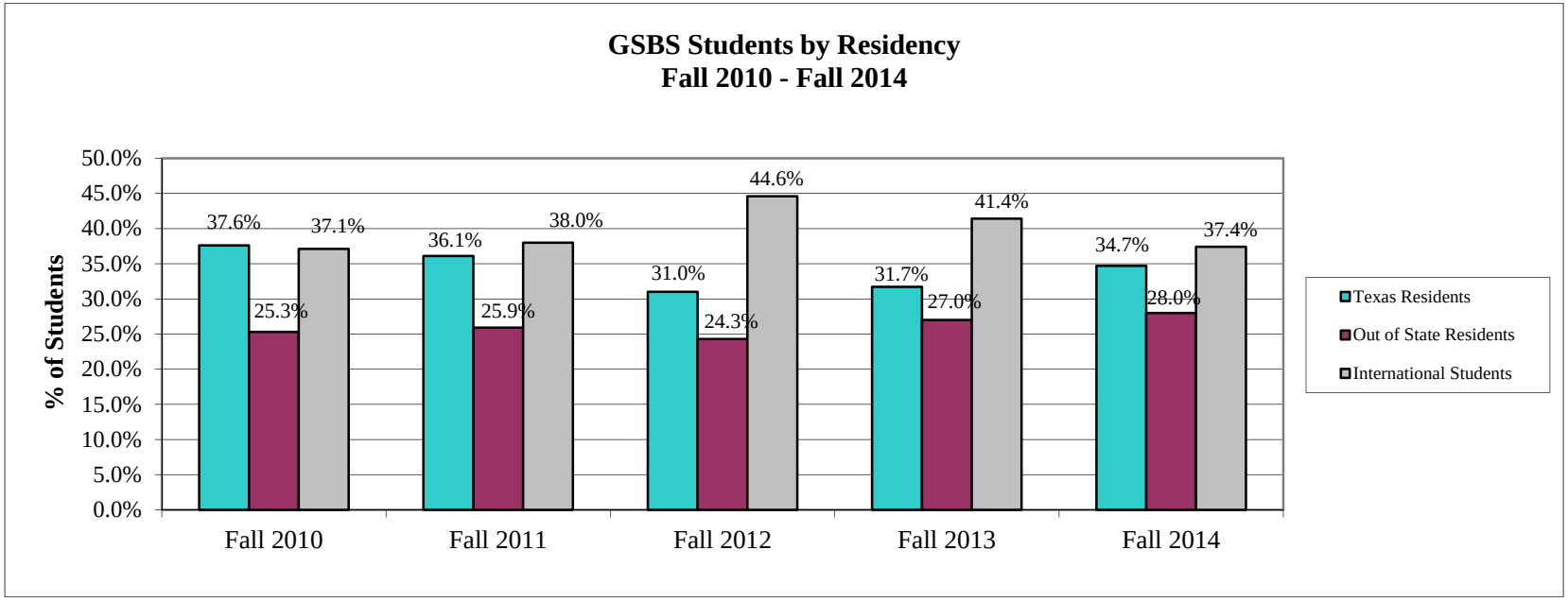
**Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.*



B.13 GSBS Students by Residency Type, Fall 2010 – Fall 2014*

RESIDENCE TYPE	Fall 2010 COUNT	% of Students	Fall 2011 COUNT	% of Students	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students
Texas Residents	202	37.6%	195	36.1%	162	31.0%	154	31.7%	155	34.7%
Out of State Students	136	25.3%	140	25.9%	127	24.3%	131	27.0%	125	28.0%
International Students	199	37.1%	205	38.0%	233	44.6%	201	41.4%	167	37.4%
Total	**537**	100.0%	**540**	100.0%	**522**	100.0%	**486**	100.0%	**447**	100.0%

**Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences*.



C. Degrees

THE UNIVERSITY OF TEXAS
MD Anderson Cancer Center
Making Cancer History®

Exhibit C.1
Degrees Offered at The University of Texas MD Anderson Cancer Center

School/Program	Certificate	Bachelors	MASTER'S	Doctoral
Graduate School of Biomedical Sciences				
M.S. in Biomedical Sciences (with concentration in Biochemistry and Molecular Biology, Biomedical Sciences Biostatistics, Bioinformatics and Systems Biology, Cancer Biology, Cell and Regulatory Biology Clinical and Translational Sciences, Experimental Therapeutics, Genetic Counseling, Genes and Development, Human and Molecular Genetics, Immunology, Medical Physics, Microbiology and Molecular Genetics Molecular Carcinogenesis, Neuroscience, Virology and Gene Therapy)			■	
Ph.D. in Biomedical Sciences (with concentration in Biochemistry and Molecular Biology Biomedical Sciences Biostatistics, Bioinformatics and Systems Biology Cancer Biology Cell and Regulatory Biology Clinical and Translational Sciences Experimental Therapeutics Genes and Development Human and Molecular Genetics Immunology Medical Physics Microbiology and Molecular Genetics Molecular Carcinogenesis Neuroscience Virology and Gene Therapy)				■
School of Health Professions				
Clinical Laboratory Science	■	■		
Cytogenetic Technology		■		
Cytotechnology	■	■		
Diagnostic Genetics			■	
Diagnostic Imaging		■		
Histotechnology	■	■		
Medical Dosimetry		■		
Molecular Genetic Technology		■		
Radiation Therapy		■		

The University of Texas MD Anderson Cancer Center Accreditation

The University of Texas MD Anderson Cancer Center is accredited to award baccalaureate degrees by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS), which is located at 1866 Southern Lane, Decatur, Georgia 30033-4097, Telephone (404) 679-4501, http://www.sacs.org. Many of the academic degree programs offered at MD Anderson undergo accreditation by specialized accrediting bodies*. They are as follows:

School/Program	Degree	Accrediting Agency
School of Health Professions (SHP)		
Clinical Laboratory Sciences	B.S.	National Accrediting Agency for Clinical Laboratory Sciences
Cytogenetic Technology	B.S.	National Accrediting Agency for Clinical Laboratory Sciences
Cytotechnology	B.S.	Commission on Accreditation of Allied Health Education Programs
Diagnostic Imaging	B.S.	Joint Review Committee on Education in Radiologic Technology
Diagnostic Genetics	M.S	National Accrediting Agency for Clinical Laboratory Technology Sciences
Histotechnology	B.S	National Accrediting Agency for Clinical Laboratory Sciences
Medical Dosimetry	B.S.	Joint Review Committee on Education in Radiologic Technology
Molecular Genetic	B.S.	National Accrediting Agency for Clinical Laboratory Technology Sciences
Radiation Therapy	B.S.	Joint Review Committee on Education in Radiologic Technology
Resident/Fellows Programs		Accreditation Council for Graduate Medical Education
Graduate School of Biomedical Sciences (GSBS)	M.S. with specialization in Genetic Counseling	American Board of Genetic Counseling
	M.S. with specialization in Medical Physics	Commission on Accreditation of Medical Physics Educational Programs
	Ph.D.	Southern Association of Colleges and Schools

**The University of Texas MD Anderson Cancer Center at Houston is also accredited by the Accreditation Council for Continuing Medical Education (ACCME) and the Accreditation Council for Graduate Medical Education (ACGME).*

The University of Texas Health Science Center at Houston Accreditation

The University of Texas Health Science Center at Houston is accredited to award certificates and baccalaureate, master, doctoral, and professional degrees by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS), which is located at 1866 Southern Lane, Decatur, Georgia 30033-4097, Telephone (404)-679-4501, http://www.sacs.org. The U.T. Graduate School of Biomedical Sciences master and doctoral degrees are jointly awarded through the accreditation of the UTHSC-H and MD Anderson by SACS.

C.1 School of Health Professions Degrees by Level, Fall 2010 – Fall 2014

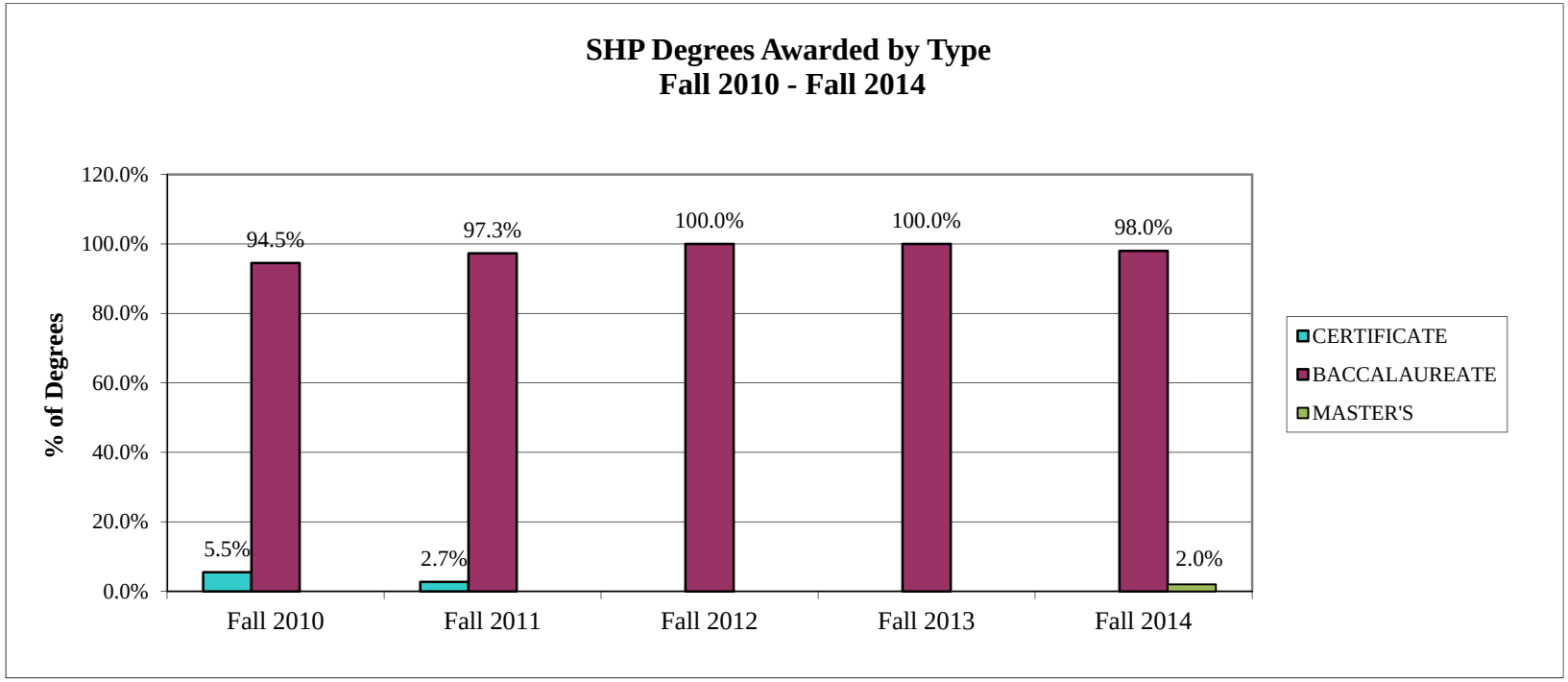
SHP PROGRAM	DEGREE CONFERRED	Fall 2010	Fall 2011	% Inc/Dec	Fall 2012	% Inc/Dec	Fall 2013	% Inc/Dec	Fall 2014	% Inc/Dec
CLINICAL LABORATORY SCIENCE	CERTIFICATE	0	0	0.0%	0		0		0	
	BACCALAUREATE	19	14	-26.3%	19	35.7%	15	-21.1%	16	6.7%
CYTOGENETIC TECHNOLOGY	CERTIFICATE	0	0	0.0%	0		0		0	
	BACCALAUREATE	14	14	0.0%	31	121.4%	19	-38.7%	15	-21.1%
CYTOTECHNOLOGY	CERTIFICATE	0	0	0.0%	0		0		0	0.0%
	BACCALAUREATE	8	7	-12.5%	6	-14.3%	7	16.7%	1	-85.7%
DIAGNOSTIC IMAGING	BACCALAUREATE	0	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		12	12	0.0%	31	158.3%	28	-9.7%	28	0.0%
DIAGNOSTIC GENETICS	MASTER'S									
		NA	NA		NA		NA		3	
DIAGNOSTIC MEDICAL SONOGRAPHY	BACCALAUREATE									
		NA	NA		NA		NA		7	
HISTOTECHNOLOGY	CERTIFICATE									
	BACCALAUREATE	6	2	-66.7%	0	-100.0%	0		0	
		0	6		11	83.3%	12	9.1%	14	16.7%
MEDICAL DOSIMETRY	CERTIFICATE									
	BACCALAUREATE	0	0	#DIV/0!	0		0		0	
		13	16	23.1%	12	-25.0%	16	33.3%	16	0.0%
MOLECULAR GENETIC TECHNOLOGY	BACCALAUREATE									
		20	24	20.0%	30	25.0%	31	3.3%	27	-12.9%
RADIATION THERAPY	CERTIFICATE									
	BACCALAUREATE	0	1	100.0%	0		0			
TOTAL WITHIN YEAR		**110**	**112**	**1.8%**	**156**	**39.3%**	**148**	**-5.1%**	**147**	**-0.7%**

Source: SHP Dean's Report

C.2 SHP Degrees Awarded by Type, Fall 2010 – Fall 2014

DEGREE AWARDED	Fall 2010	Fall 2011	% Inc/Dec	Fall 2012	% Inc/Dec	Fall 2013	% Inc/Dec	Fall 2014	% Inc/Dec
CERTIFICATE	6	3	-50.0%	0		0		0	
BACCALAUREATE	104	109	1.0%	156	4.6%	148	43.1%	144	-5.1%
MASTER'S	NA	NA		NA		NA		3	
Total	**110**	**112**	1.8%	**156**	28.2%	**148**	-5.1%	**147**	-0.7%

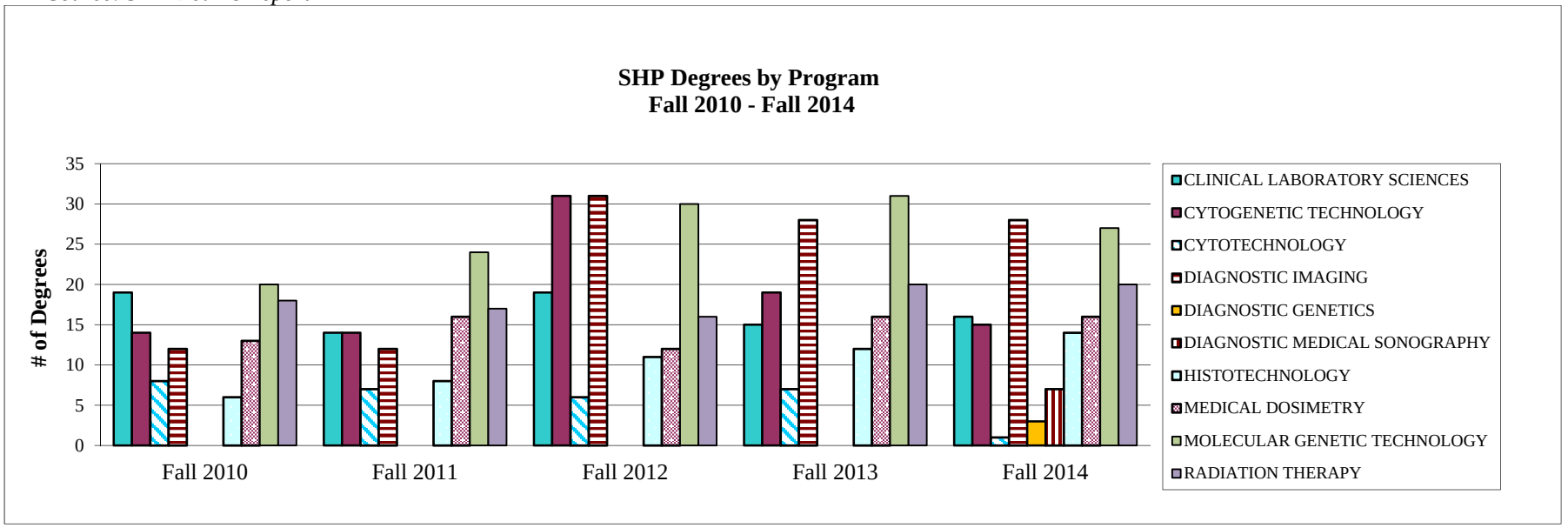
**Source: Certified CBM009*



C.3 SHP Degrees by Program, Fall 2010 - Fall 2014

PROGRAM	Fall 2010	Fall 2011	% Inc/Dec	Fall 2012	% Inc/Dec	Fall 2013	% Inc/Dec	Fall 2014	% Inc/Dec
CLINICAL LABORATORY SCIENCES	19	14	-26.3%	19	35.7%	15	-21.1%	16	6.7%
CYTOGENETIC TECHNOLOGY	14	14	0.0%	31	121.4%	19	-38.7%	15	-21.1%
CYTOTECHNOLOGY	8	7	-12.5%	6	-14.3%	7	16.7%	1	-85.7%
DIAGNOSTIC IMAGING	12	12	0.0%	31	700.0%	28	-9.7%	28	0.0%
DIAGNOSTIC GENETICS	NA	NA		NA		NA		3	
DIAGNOSTIC MEDICAL SONOGRAPHY	NA	NA		NA		NA		7	
HISTOTECHNOLOGY	6	8	33.3%	11	37.5%	12	9.1%	14	16.7%
MEDICAL DOSIMETRY	13	16	23.1%	12	-25.0%	16	33.3%	16	0.0%
MOLECULAR GENETIC TECHNOLOGY	20	24	20.0%	30	25.0%	31	3.3%	27	-12.9%
RADIATION THERAPY	18	17	-5.6%	16	-5.9%	20	25.0%	20	0.0%
OVERALL	**110**	**112**	1.8%	**156**	39.3%	**148**	-5.1%	**147**	-0.7%

Source: SHP Dean's Report



C.4 SHP Degrees Awarded by Program and Average Age, Fall 2010 – Fall 2014

PROGRAM	DEGREE CONFERRED	Fall 2010		Fall 2011		Fall 2012		Fall 2013		Fall 2014	
		Avg. Age	COUNT	Avg. Age	COUNT	Avg. Age	COUNT	Avg. Age	COUNT	Avg. Age	COUNT
CLINICAL LABORATORY SCIENCE	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	27.2	19	23.6	14	29.0	19	31.0	15	30.0	16
CYTOGENETIC TECHNOLOGY	CERTIFICATE			0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	26.0	14	23.7	14	28.0	31	28.0	19	26.0	15
CYTOTECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	28.9	8	23.0	7	27.0	6	36.0	7	20.0	1
DIAGNOSTIC IMAGING	BACCALAUREATE	25.9	12	27.6	12	32.0	31	32.0	28	32.0	28
DIAGNOSTIC GENETICS	MASTER'S	NA	NA	NA	NA	NA	NA	NA	NA	29.0	3
DIAGNOSTIC MEDICAL SONOGRAPHY	BACCALAUREATE	NA	NA	NA	NA	NA	NA	NA	NA	29.0	7
HISTOTECHNOLOGY*	CERTIFICATE	34.2	6	24.0	2	0.0	0	0.0	0	0.0	0
	BACCALAUREATE			35.6	6	33.0	11	31.0	12	31.0	14
MEDICAL DOSIMETRY	CERTIFICATE	0.0	0								
	BACCALAUREATE	29.8	13	27.6	16	30.0	12	31.0	16	29.0	16
MOLECULAR GENETIC TECHNOLOGY	BACCALAUREATE	25.1	20	22.6	24	28.0	30	30.0	31	28.0	27
RADIATION THERAPY	CERTIFICATE			31.0	1	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	28.1	18	26.7	16	29.0	16	31.0	20	29.0	20
TOTAL WITHIN YEAR		**27.3**	**110**	**25.5**	**112**	**29.5**	**156**	**29.5**	**148**	**28.0**	**147**

**Histotechnology program began conferring baccalaureate degrees in 2011*
Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
CLINICAL	WHITE NON-HISPANIC	FEMALE	0		0		0		0		0	
LABORATORY SCIENCE		MALE	0		0		0		0		0	
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0		0		0	
	NATIVE	MALE	0		0		0		0		0	
	INTERNATIONAL	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
SUBTOTAL, CERTIFICATE			*0*		*0*		*0*		*0*		*0*	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	7	36.8%	1	7.1%	1	5.3%	3	20.0%	2	12.5%
		MALE	1	5.3%	0	0.0%	2	10.5%	1	6.7%	2	12.5%
	BLACK NON-HISPANIC	FEMALE	4	21.1%	3	21.4%	4	21.1%	1	6.7%	2	12.5%
		MALE	2	10.5%	1	7.1%	1	5.3%	0	0.0%	1	6.3%
	HISPANIC	FEMALE	1	5.3%	2	14.3%	2	10.5%	4	26.7%	3	18.8%
		MALE	1	5.3%	0	0.0%	0	0.0%	0	0.0%	1	6.3%
	ASIAN OR PACIFIC ISLANDER	FEMALE	3	15.8%	5	35.7%	5	26.3%	4	26.7%	2	12.5%
		MALE	0	0.0%	2	14.3%	2	10.5%	2	13.3%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	1	5.3%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	1	5.3%	0	0.0%	1	6.3%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	12.5%
SUBTOTAL BACCALAUREATE DEGREES			*19*	100.0%	*14*	100.0%	*19*	100.0%	*15*	100.0%	*16*	100.0%
TOTAL, CERTIFICATE & BACCALAUREATE DEGREES			**19**		**14**		**19**		**15**		**16**	

Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
CYTOGENETIC	WHITE NON-HISPANIC	FEMALE	0		0		0		0		0	
TECHNOLOGY		MALE	0		0		0		0		0	
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0		0		0	
	NATIVE	MALE	0		0		0		0		0	
	INTERNATIONAL	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
SUBTOTAL, CERTIFICATE			*0*		*0*		*0*		*0*		*0*	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	4	28.6%	0	0.0%	6	19.4%	3	15.8%	2	13.3%
		MALE	1	7.1%	3	21.4%	3	9.7%	2	10.5%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	1	7.1%	1	7.1%	3	9.7%	2	10.5%	0	0.0%
		MALE	0	0.0%	2	14.3%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	1	7.1%	1	7.1%	7	22.6%	1	5.3%	1	6.7%
		MALE	0	0.0%	0	0.0%	2	6.5%	0	0.0%	3	20.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	1	7.1%	5	35.7%	7	22.6%	3	15.8%	3	20.0%
		MALE	3	21.4%	2	14.3%	1	3.2%	1	5.3%	2	13.3%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	1	7.1%	0	0.0%	2	6.5%	0	0.0%	0	0.0%
		MALE	2	14.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0	0.0%	6	31.6%	1	6.7%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	5.3%	3	20.0%
SUBTOTAL BACCALAUREATE DEGREES			*14*	100.0%	*14*	100.0%	*31*	100.0%	*19*	100.0%	*15*	100.0%
TOTAL, CERTIFICATE & BACCALAUREATE DEGREES			**14**		**14**		**31**		**19**		**15**	

Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
CYTOTECHNOLOGY	WHITE NON-HISPANIC	FEMALE	0		0		0		0		0	
CERTIFICATE		MALE	0		0		0		0		0	
	BLACK NON-HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0		0		0	
	NATIVE	MALE	0		0		0		0		0	
	INTERNATIONAL	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
SUBTOTAL, CERTIFICATE			*0*	*0*			*0*		*0*		*0*	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	2	25.0%	1	14.3%	2	33.3%	0	0.0%	1	100.0%
		MALE	1	12.5%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	0	0.0%	2	28.6%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	1	14.3%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	3	37.5%	2	28.6%	2	33.3%	4	57.1%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	14.3%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	1	12.5%	0	0.0%	1	16.7%	1	14.3%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	1	12.5%	0	0.0%	1	16.7%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	1	14.3%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	14.3%	0	0.0%
SUBTOTAL BACCALAUREATE DEGREES			*8*	100.0%	*7*	100.0%	*6*	100.0%	*7*	100.0%	*1*	100.0%
TOTAL, CERTIFICATE & BACCALAUREATE DEGREES			**8**		**7**		**6**		**7**		**1**	

Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	0	0.0%	3	25.0%	7	22.6%	7	25.0%	5	17.9%
IMAGING		MALE	1	8.3%	3	25.0%	7	22.6%	4	14.3%	3	10.7%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	1	8.3%	0	0.0%	0	0.0%	0	0.0%	5	17.9%
		MALE	2	16.7%	1	8.3%	1	3.2%	3	10.7%	0	0.0%
	HISPANIC	FEMALE	3	25.0%	2	16.7%	3	9.7%	5	17.9%	4	14.3%
		MALE	0	0.0%	0	0.0%	6	19.4%	0	0.0%	1	3.6%
	ASIAN OR PACIFIC ISLANDER	FEMALE	2	16.7%	2	16.7%	5	16.1%	3	10.7%	3	10.7%
		MALE	2	16.7%	1	8.3%	2	6.5%	4	14.3%	3	10.7%
	AMERICAN INDIAN/ALASKAN	FEMALE	1	8.3%	0	0.0%	0	0.0%	0	0.0%	1	3.6%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0	0.0%	2	7.1%	3	10.7%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL, BACCALAUREATE DEGREE:			**12**	100.0%	**12**	100.0%	**31**	100.0%	**28**	100.0%	**28**	100.0%

Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2010 – Fall 2014*

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		NA		0	0.0%
GENETICS		MALE	NA		NA		NA		NA		0	0.0%
MASTER'S*	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		NA		1	33.3%
		MALE	NA		NA		NA		NA		0	0.0%
	HISPANIC	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		NA		0	0.0%
	NATIVE	MALE	NA		NA		NA		NA		0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		NA		2	66.7%
		MALE	NA		NA		NA		NA		0	0.0%
TOTAL, BACCALAUREATE DEGREE:											**3**	100.0%

**Diagnostic Genetics program began conferring master's degrees in 2014*

Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2010 – Fall 2014*

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		NA		2	28.6%
MEDICAL SONOGRAPHY		MALE	NA		NA		NA		NA		0	0.0%
BACCALAUREATE*	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		NA		1	14.3%
		MALE	NA		NA		NA		NA		0	0.0%
	HISPANIC	FEMALE	NA		NA		NA		NA		1	14.3%
		MALE	NA		NA		NA		NA		0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		NA		2	28.6%
		MALE	NA		NA		NA		NA		0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		NA		0	0.0%
	NATIVE	MALE	NA		NA		NA		NA		0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		NA		1	14.3%
		MALE	NA		NA		NA		NA		0	0.0%
TOTAL, BACCALAUREATE DEGREE:											**7**	100.0%

**Diagnostic Medical Sonography program began conferring baccalaureate degrees in 2014*

Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
HISTOTECHNOLOGY	WHITE NON-HISPANIC	FEMALE	3	50.0%	0	0.0%	0		0		0	
CERTIFICATE		MALE	0	0.0%	0	0.0%	0		0		0	
	BLACK NON-HISPANIC	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	1	16.7%	0	0.0%	0		0		0	
	HISPANIC	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	2	33.3%	2	100.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0		0		0	
	NATIVE	MALE	0	0.0%	0	0.0%	0		0		0	
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
SUBTOTAL, CERTIFICATE			*6*	100.0%	*2*	100.0%	*0*		*0*		*0*	
BACCALAUREATE*	WHITE NON-HISPANIC	FEMALE	0		1	16.7%	4	36.4%	4	33.3%	2	14.3%
		MALE	0		0	0.0%	0	0.0%	1	8.3%	1	7.1%
	BLACK NON-HISPANIC	FEMALE	0		2	33.3%	2	18.2%	2	16.7%	3	21.4%
		MALE	0		0	0.0%	1	9.1%	0	0.0%	1	7.1%
	HISPANIC	FEMALE	0		1	16.7%	1	9.1%	1	8.3%	0	0.0%
		MALE	0		1	16.7%	1	9.1%	0	0.0%	1	7.1%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0	0.0%	0	0.0%	0	0.0%	3	21.4%
		MALE	0		0	0.0%	2	18.2%	3	25.0%	1	7.1%
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	0		0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	0		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0		1	16.7%	0	0.0%	0	0.0%	2	14.3%
		MALE	0		0	0.0%	0	0.0%	1	8.3%	0	0.0%
SUBTOTAL BACCALAUREATE DEGREES			*0*		*6*		*11*	100.0%	*12*	100.0%	*14*	100.0%
TOTAL, CERTIFICATE & BACCALAUREATE DEGREES			**6**		**8**		**11**		**12**		**14**	

**Histotechnology program began conferring baccalaureate degrees in 2011*
Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
MEDICAL DOSIMETRY	WHITE NON-HISPANIC	FEMALE	0		0		0		0		0	
CERTIFICATE		MALE	0		0		0		0		0	
	BLACK NON-HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0		0		0	
	NATIVE	MALE	0		0		0		0		0	
	INTERNATIONAL	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
SUBTOTAL, CERTIFICATE			*0*				*0*		*0*		*0*	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	1	7.7%	5	31.3%	2	16.7%	5	31.3%	3	18.8%
DEGREES		MALE	5	38.5%	3	18.8%	2	16.7%	4	25.0%	4	25.0%
	BLACK NON-HISPANIC	FEMALE	0	0.0%	2	12.5%	1	8.3%	0	0.0%	0	0.0%
		MALE	1	7.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	0	0.0%	2	12.5%	1	8.3%	0	0.0%	0	0.0%
		MALE	2	15.4%	0	0.0%	0	0.0%	2	12.5%	1	6.3%
	ASIAN OR PACIFIC ISLANDER	FEMALE	1	7.7%	3	18.8%	5	41.7%	0	0.0%	4	25.0%
		MALE	1	7.7%	1	6.3%	1	8.3%	3	18.8%	3	18.8%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	1	7.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0	0.0%	2	12.5%	1	6.3%
		MALE	1	7.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
SUBTOTAL BACCALAUREATE DEGREES			*13*	100.0%	*16*	100.0%	*12*	100.0%	*16*	100.0%	*16*	100.0%
TOTAL, CERTIFICATE & BACCALAUREATE DEGREES			**13**		**16**		**12**		**16**		**16**	

Source: CBM009 per UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
MOLECULAR GENETIC	WHITE NON-HISPANIC	FEMALE	6	30.0%	4	16.7%	6	20.0%	6	19.4%	10	37.0%
TECHNOLOGY		MALE	3	15.0%	5	20.8%	2	6.7%	4	12.9%	4	14.8%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	0	0.0%	1	4.2%	1	3.3%	2	6.5%	0	0.0%
		MALE	0	0.0%	1	4.2%	1	3.3%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	1	5.0%	2	8.3%	3	10.0%	2	6.5%	3	11.1%
		MALE	1	5.0%	4	16.7%	1	3.3%	5	16.1%	1	3.7%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0	0.0%	2	8.3%	8	26.7%	6	19.4%	1	3.7%
		MALE	7	35.0%	2	8.3%	3	10.0%	1	3.2%	2	7.4%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	1	5.0%	0	0.0%	3	10.0%	0	0.0%	0	0.0%
		MALE	1	5.0%	0	0.0%	2	6.7%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	2	8.3%	0	0.0%	5	16.1%	5	18.5%
		MALE	0	0.0%	1	4.2%	0	0.0%	0	0.0%	1	3.7%
TOTAL, BACCALAUREATE DEGREE:			**20**	100.0%	**24**	100.0%	**30**	100.0%	**31**	100.0%	**27**	100.0%

Source: CBM009 per UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2010 – Fall 2014

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
RADIATION THERAPY	WHITE NON-HISPANIC	FEMALE	0		0	0.0%	0		0		0	
CERTIFICATE		MALE	0		0	0.0%	0		0		0	
	BLACK NON-HISPANIC	FEMALE	0		0	0.0%	0		0		0	
		MALE	0		1	100.0%	0		0		0	
	HISPANIC	FEMALE	0		0	0.0%	0		0		0	
		MALE	0		0	0.0%	0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0	0.0%	0		0		0	
		MALE	0		0	0.0%	0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0	0.0%	0		0		0	
	NATIVE	MALE	0		0	0.0%	0		0		0	
	INTERNATIONAL	FEMALE	0		0	0.0%	0		0		0	
		MALE	0		0	0.0%	0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0	0.0%	0		0		0	
		MALE	0		0	0.0%	0		0		0	
SUBTOTAL, CERTIFICATE			*0*		*1*		*0*		0		*0*	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	5	27.8%	5	31.3%	5	31.3%	5	25.0%	7	35.0%
DEGREES		MALE	2	11.1%	3	18.8%	2	12.5%	0	0.0%	3	15.0%
	BLACK NON-HISPANIC	FEMALE	0	0.0%	1	6.3%	1	6.3%	2	10.0%	0	0.0%
		MALE	0	0.0%	1	6.3%	2	12.5%	1	5.0%	0	0.0%
	HISPANIC	FEMALE	4	22.2%	3	18.8%	1	6.3%	3	15.0%	6	30.0%
		MALE	3	16.7%	0	0.0%	0	0.0%	4	20.0%	2	10.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	2	11.1%	0	0.0%	4	25.0%	1	5.0%	1	5.0%
		MALE	1	5.6%	3	18.8%	1	6.3%	2	10.0%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	1	5.6%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0	0.0%	1	5.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	5.0%	1	5.0%
SUBTOTAL, BACCALAUREATE DEGREES			*18*	100.0%	*16*	100.0%	*16*	100.0%	*20*	100.0%	*20*	100.0
TOTAL, CERTIFICATE AND BACCALAUREATE DEGREES:			**18**		**17**		**16**		**20**		**20**	

Source: UT Houston Health Science Center Registrar's Office

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2010 – Fall 2014

DEGREE	ETHNICITY	GENDER	Fall 2010	% of Students	Fall 2011	% of Students	Fall 2012	% of Students	Fall 2013	% of Students	Fall 2014	% of Students
CERTIFICATE	WHITE NON-HISPANIC	FEMALE	3	2.7%	0	0.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
	BLACK NON-HISPANIC	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	1	0.9%	1	0.9%	0		0		0	
	HISPANIC	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	2	1.8%	2	1.8%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0		0		0	
	NATIVE	MALE	0	0.0%	0	0.0%	0		0		0	
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0		0		0	
		MALE	0	0.0%	0	0.0%	0		0		0	
SUBTOTAL, CERTIFICATE			*6*	5.5%	*3*	2.7%	*0*		*0*		*0*	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	25	22.7%	20	17.9%	33	21.2%	32	21.6%	34	23.6%
		MALE	14	12.7%	17	15.2%	18	11.5%	16	10.8%	17	11.8%
	BLACK NON-HISPANIC	FEMALE	6	5.5%	12	10.7%	12	7.7%	9	6.1%	11	7.6%
		MALE	5	4.5%	7	6.3%	6	3.8%	4	2.7%	2	1.4%
	HISPANIC	FEMALE	13	11.8%	15	13.4%	20	12.8%	20	13.5%	18	12.5%
		MALE	7	6.4%	5	4.5%	10	6.4%	12	8.1%	10	6.9%
	ASIAN OR PACIFIC ISLANDER	FEMALE	10	9.1%	17	15.2%	36	23.1%	21	14.2%	19	13.2%
		MALE	14	12.7%	11	9.8%	11	7.1%	13	8.8%	11	7.6%
	AMERICAN INDIAN/ALASKAN	FEMALE	1	0.9%	0	0.0%	0	0.0%	0	0.0%	1	0.7%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	4	3.6%	0	0.0%	7	4.5%	0	0.0%	0	0.0%
		MALE	4	3.6%	0	0.0%	2	1.3%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	4	3.6%	1	0.6%	18	12.2%	14	9.7%
		MALE	1	0.9%	1	0.9%	0	0.0%	3	2.0%	7	4.9%
SUBTOTAL BACCALAUREATE DEGREES			*104*	94.5%	*109*	97.3%	*156*	100.0%	*148*	100.0%	*144*	98.0%

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2010 – Fall 2014

DEGREE	ETHNICITY	GENDER	Fall 2010	% of All	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All
MASTER'S	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		NA		1	0.6%
		MALE	NA		NA		NA		NA		0	0.0%
	HISPANIC	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		NA		0	0.0%
	NATIVE	MALE	NA		NA		NA		NA		0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		NA		2	1.4%
		MALE	NA		NA		NA		NA		0	0.0%
TOTAL MASTER'S DEGREE:											*3*	2.0%
TOTAL, DEGREES BY YEAR			**110**	100.0%	**112**	100.0%	**156**	100.0%	**148**	100.0%	**147**	100.0

Source: CBM009 per UT Houston Health Science Center Registrar's Office

C.7 SHP Graduates by Gender and Ethnicity, Fall 2010 – Fall 2014

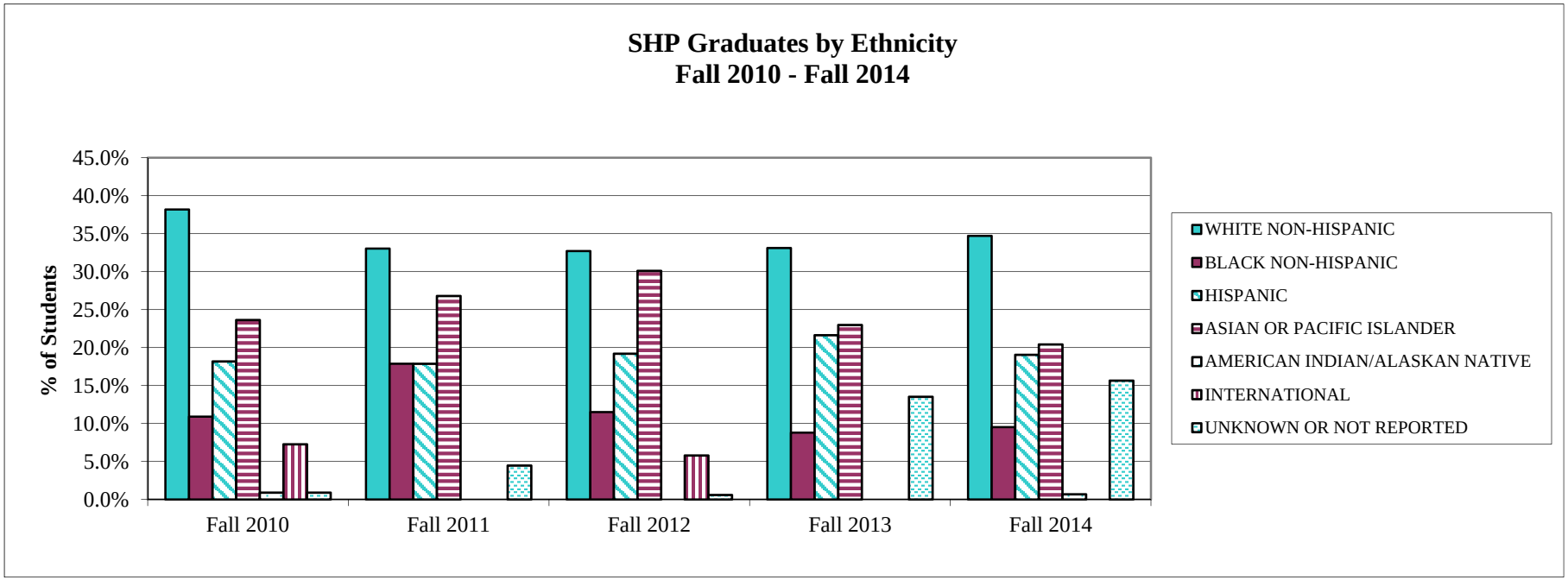
ETHNICITY	GENDER	Fall 2010	% of Students	Fall 2011	% of Students	Fall 2012	% of Students	Fall 2013	% of Students	Fall 2014	% of Students
WHITE NON-HISPANIC	FEMALE	28	25.5%	20	17.9%	33	21.2%	32	21.6%	34	23.1%
	MALE	14	12.7%	17	15.2%	18	11.5%	16	10.8%	17	11.6%
BLACK NON-HISPANIC	FEMALE	6	5.5%	12	10.7%	12	7.7%	9	6.1%	12	8.2%
	MALE	6	5.5%	8	7.1%	6	3.8%	4	2.7%	2	1.4%
HISPANIC	FEMALE	13	11.8%	15	13.4%	20	12.8%	20	13.5%	18	12.2%
	MALE	7	6.4%	7	6.3%	10	6.4%	12	8.1%	10	6.8%
ASIAN OR PACIFIC ISLANDER	FEMALE	12	10.9%	17	15.2%	36	23.1%	21	14.2%	19	12.9%
	MALE	14	12.7%	11	9.8%	11	7.1%	13	8.8%	11	7.5%
AMERICAN INDIAN/ALASKAN	FEMALE	1	0.9%	0	0.0%	0	0.0%	0	0.0%	1	0.7%
NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
INTERNATIONAL	FEMALE	4	3.6%	0	0.0%	7	4.5%	0	0.0%	0	0.0%
	MALE	4	3.6%	0	0.0%	2	1.3%	0	0.0%	0	0.0%
UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	4	3.6%	1	0.6%	18	12.2%	16	10.9%
	MALE	1	0.9%	1	0.9%	0	0.0%	3	2.0%	7	4.8%
TOTAL		**110**	100.0%	**112**	100.0%	**156**	100.0%	**148**	100.0%	**147**	100.0%

Source: UT Houston Health Science Center Registrar's Office

C.8 SHP Graduates by Ethnicity, Fall 2010 – Fall 2014

ETHNICITY	Fall 2010	% of Students	Fall 2011	% of Students	Fall 2012	% of Students	Fall 2013	% of Students	Fall 2014	% of Students
WHITE NON-HISPANIC	42	38.2%	37	33.0%	51	32.7%	49	33.1%	51	34.7%
BLACK NON-HISPANIC	12	10.9%	20	17.9%	18	11.5%	13	8.8%	14	9.5%
HISPANIC	20	18.2%	20	17.9%	30	19.2%	32	21.6%	28	19.0%
ASIAN OR PACIFIC ISLANDER	26	23.6%	30	26.8%	47	30.1%	34	23.0%	30	20.4%
AMERICAN INDIAN/ALASKAN NATIVE	1	0.9%	0	0.0%	0	0.0%	0	0.0%	1	0.7%
INTERNATIONAL	8	7.3%	0	0.0%	9	5.8%	0	0.0%	0	0.0%
UNKNOWN OR NOT REPORTED	1	0.9%	5	4.5%	1	0.6%	20	13.5%	23	15.6%
Total	**110**	100.0%	**112**	100.0%	**156**	100.0%	**148**	100.0%	**147**	100.0%

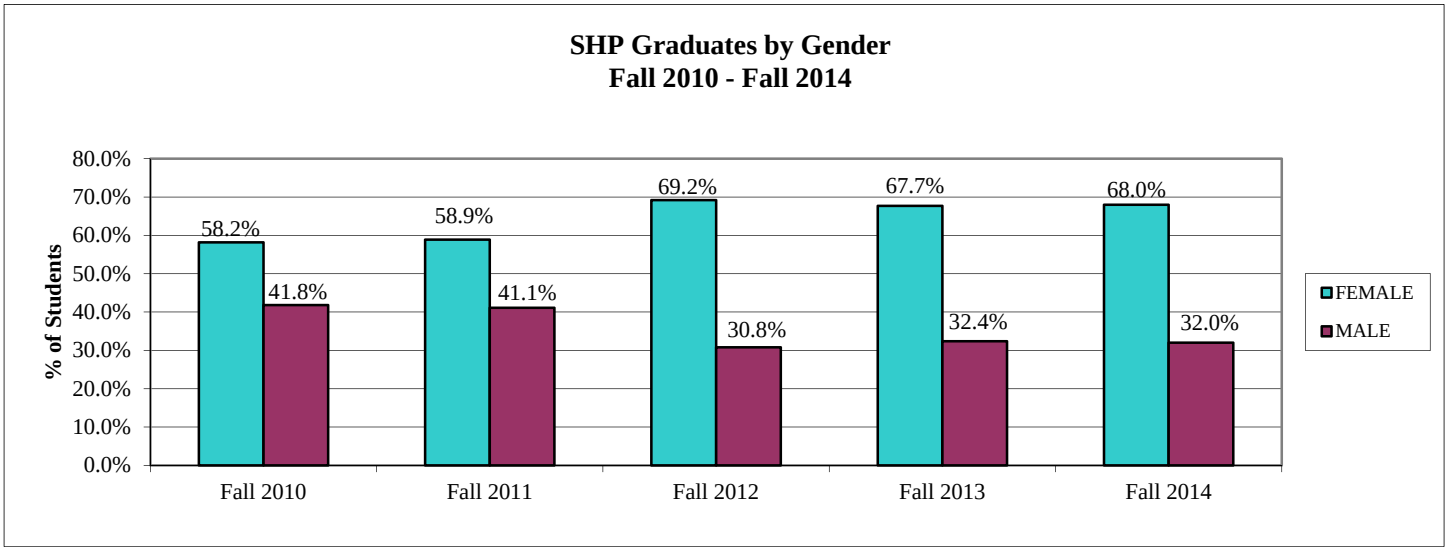
Source: UT Houston Health Science Center Registrar's Office



C.9 SHP Graduates by Gender, Fall 2010 – Fall 2014

GENDER	Fall 2010	% of Students	Fall 2011	% of Students	Fall 2012	% of Students	Fall 2013	% of Students	Fall 2014	% of Students
FEMALE	64	58.2%	66	58.9%	108	69.2%	100	67.6%	100	68.0%
MALE	46	41.8%	46	41.1%	48	30.8%	48	32.4%	47	32.0%
Total	**110**	100.0%	**112**	100.0%	**156**	100.0%	**148**	100.0%	**147**	100.0%

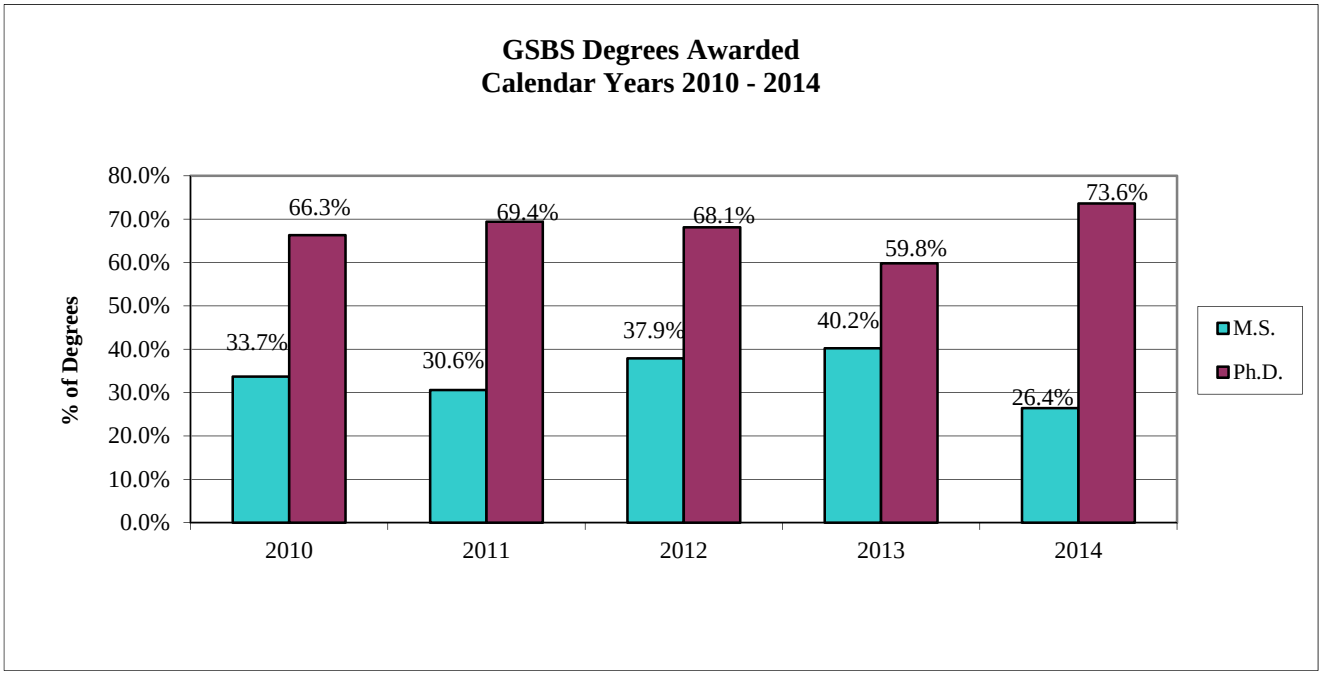
Source: UT Houston Health Science Center Registrar's Office



C.10 GSBS Degrees Awarded, Calendar Years 2010 – 2014*

DEGREE AWARDED	2010	2011	% Inc/Dec	2012	% Inc/Dec	2013	% Inc/Dec	2014	% Inc/Dec
M.S.	35	34	-2.9%	38	11.8%	41	7.9%	32	-28.1%
Ph.D.	69	77	11.6%	81	5.2%	61	-24.7%	89	31.5%
OVERALL	**104**	**111**	6.7%	**119**	7.2%	**102**	-14.3%	**121**	15.7%

**Data for each calendar year includes graduates in Spring, Summer, and Fall Semesters*
Source: UT Graduate School of Biomedical Sciences



C.11 GSBS Graduates by Area of Research Concentration, Calendar Years 2010 – 2014

Area of Research Interest	2010		2011		2012		2013		2014	
	MS	PhD	MS	PhD	MS	PhD	MS	PhD	MS	PhD
Biochemistry			1	5		1				
Biochemistry and Molecular Biology		5			1		1			2
Biostatistics, Bioinformatics, and Systems Biology	1	2	1	2		1		6		2
Biomedical Sciences	12	11	14	27	11	20	26	13	20	16
Cancer Biology	2	13	1	9	2	17		11	1	27
Cell Biology				1						
Cell and Regulatory Biology	1	1			1	2		2		1
Experimental Therapeutics			1		2	1		7		3
Genes & Development		8	1	8		8		5		4
Genetic Counseling	6		6		7		6		7	
Human & Molecular Genetics		2		1	1	2		1		4
Immunology		6		6	1	2	1	4		6
Medical Physics	9	6	8	6	6	8	7	5	4	9
Microbiology & Molecular Genetics	2	5		1	3	5		2		5
Molecular Biology						1				
Molecular Carcinogenesis		3		5	1	4		1		1
Molecular Pathology				1		2				1
Neuroscience	2	6	1	5		5		3		8
Virology & Gene Therapy		1			2	2		1		
Total	35	69	34	77	38	81	41	61	32	89

Source: UT Graduate School of Biomedical Sciences

C.12 GSBS M.S. Program Top Areas of Research Concentration, Calendar Year 2010 – 2014

2010	2011	2012	2013	2014
Biomedical Sciences	Biomedical Sciences	Biomedical Sciences	Biophysics	Biomedical Sciences
Medical Physics	Medical Physics	Genetic Counseling	Medical Physics	Genetic Counseling
Genetic Counseling	Genetic Counseling	Medical Physics	Genetic Counseling	Medical Physics

Source: UT Graduate School of Biomedical Sciences

C.13 GSBS Ph.D. Program Top Areas of Research Concentration, Calendar Year 2009 – Fall 2013

2010	2011	2012	2013	2014
Cancer Biology	Biomedical Sciences	Biomedical Sciences	Biophysics	Cancer Biology
Biomedical Sciences	Cancer Biology	Cancer Biology	Cancer Biology	Biomedical Sciences
Genes & Development	Genes & Development	Genes & Development*	Genes & Development*	Medical Physics
Cancer Biology		Medical Physics*	Medical Physics*	

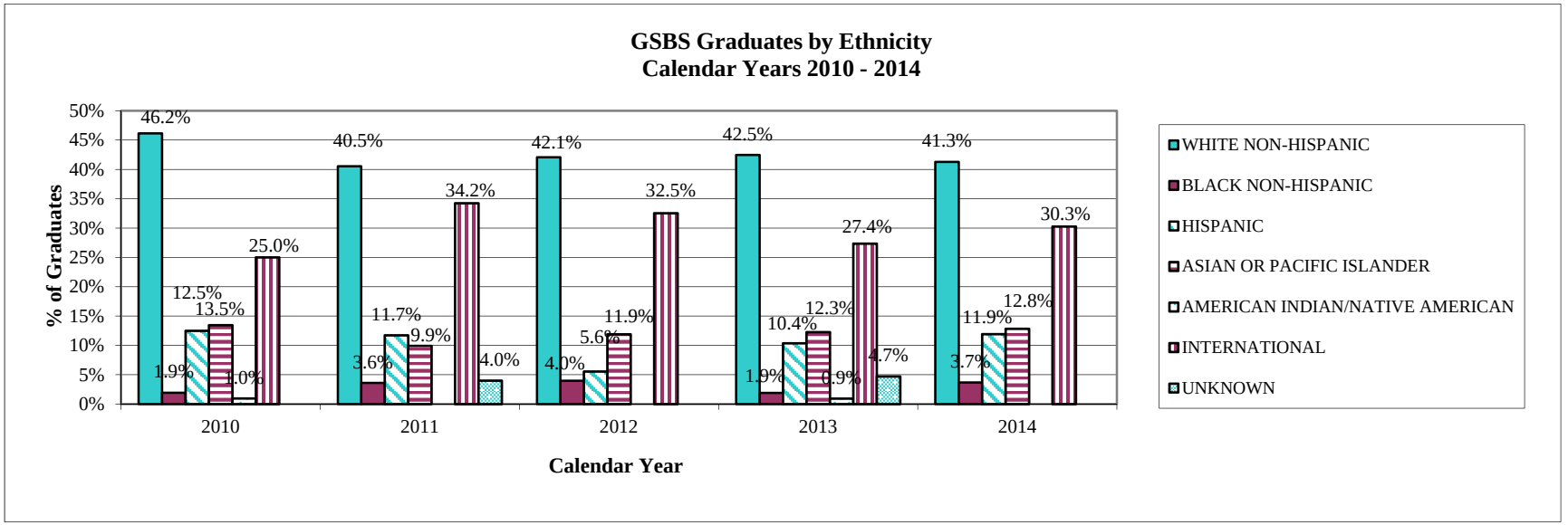
*Same number of graduates within given year.
Source: UT Graduate School of Biomedical Sciences

C.14 GSBS Graduates by Ethnicity, Calendar Years 2010 – 2014

ETHNICITY	2010 COUNT	% of Students	2011 COUNT	% of Students	2012* COUNT	% of Students	2013 COUNT	% of Students	2014 COUNT	% of Students
WHITE NON-HISPANIC	48	46.2%	45	40.5%	53	42.1%	45	42.5%	45	41.3%
BLACK NON-HISPANIC	2	1.9%	4	3.6%	5	4.0%	2	1.9%	4	3.7%
HISPANIC	13	12.5%	13	11.7%	7	5.6%	11	10.4%	13	11.9%
ASIAN OR PACIFIC ISLANDER	14	13.5%	11	9.9%	15	11.9%	13	12.3%	14	12.8%
AMERICAN INDIAN OR ALASKAN NATIVE	1	1.0%	0	0.0%	0	0.0%	1	0.9%	0	0.0%
INTERNATIONAL	26	25.0%	38	34.2%	41	32.5%	29	27.4%	33	30.3%
UNKNOWN OR NOT REPORTED	0	0.0%	0	0.0%	5	4.0%	5	4.7%	0	0.0%
TOTAL	**104**	100.0%	**111**	100.0%	**126**	100.0%	**106**	100.0%	**109**	100.0%

Source: UT Graduate School of Biomedical Sciences

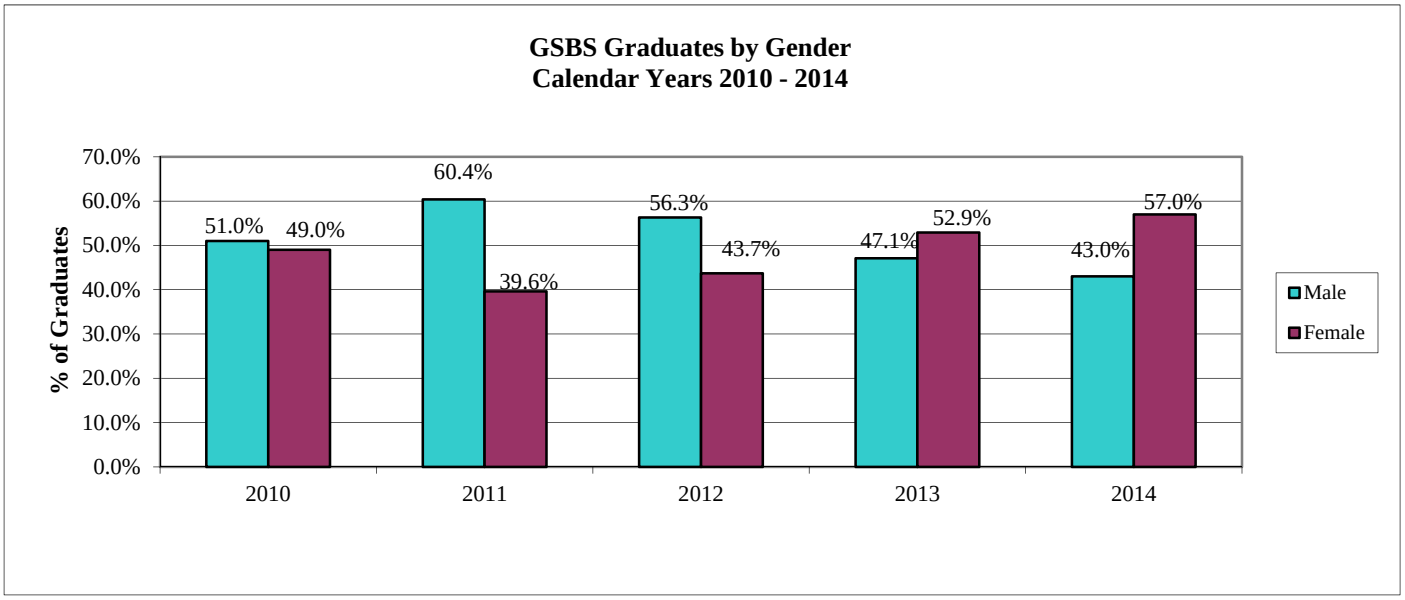
*****Starting 2012, GSBS students could declare more than one ethnicity, therefore, ethnicity and degree totals may not match



C.15 GSBS Graduates by Gender, Calendar Years 2010 – 2014

GENDER	2010 COUNT	% of Students	2011 COUNT	% of Students	2012 COUNT	% of Students	2013 COUNT	% of Students	2014 COUNT	% of Students
FEMALE	51	49.0%	44	39.6%	52	43.7%	54	52.9%	69	57.0%
MALE	53	51.0%	67	60.4%	67	56.3%	48	47.1%	52	43.0%
TOTAL	**104**	100.0%	**111**	100.0%	**119**	100.0%	**102**	100.0%	**121**	100.0%

Source: UT Graduate School of Biomedical Sciences



D. Faculty Demographics

THE UNIVERSITY OF TEXAS
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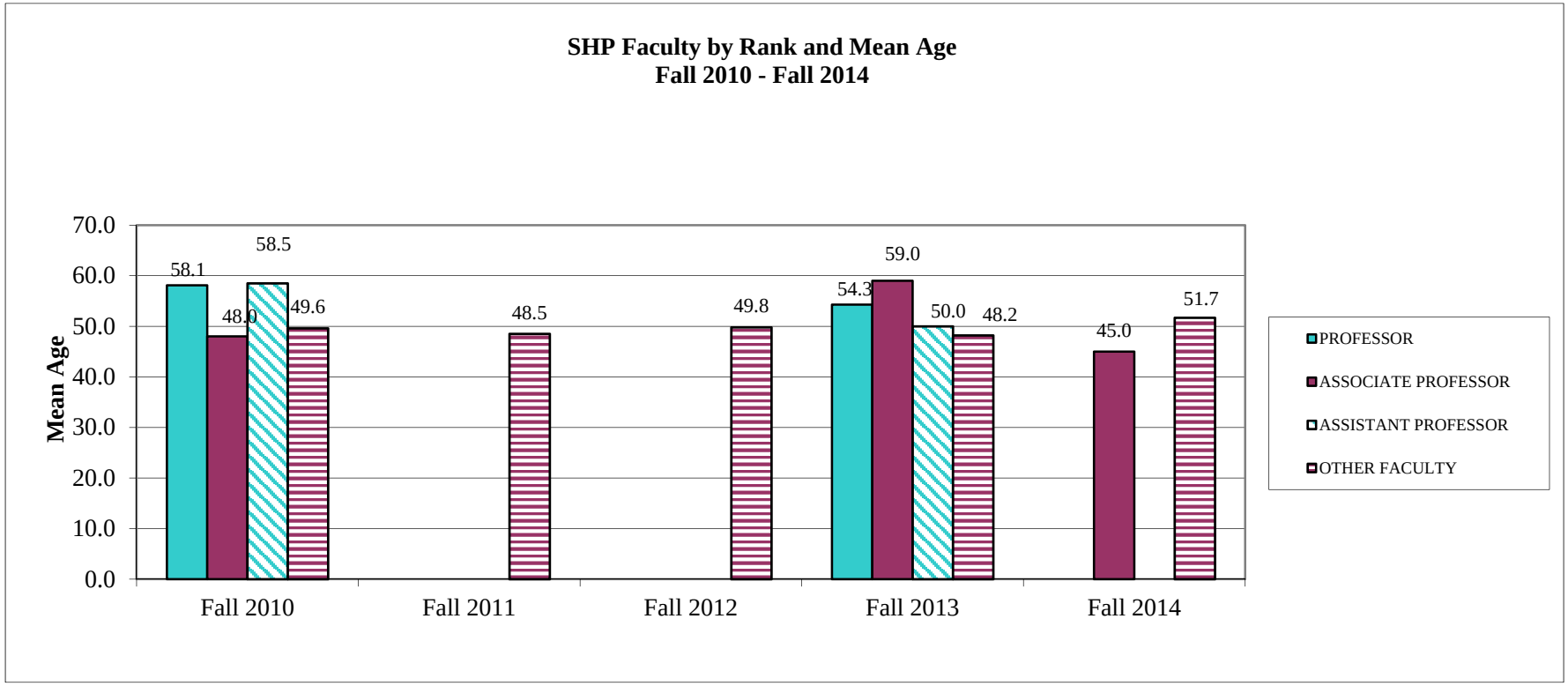
D.1 SHP Faculty by Rank and Mean Age, Fall 2010 – Fall 2014

	Fall 2010		Fall 2011*		Fall 2012*		Fall 2013*		Fall 2014*	
MEAN AGE BY RANK	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE
PROFESSOR	9	58.1	0		0		7	54.3	0	
ASSOCIATE PROFESSOR	2	48.0	0		0		4	59.0	1	45.0
ASSISTANT PROFESSOR	2	58.5	0		0		1	50.0	0	
OTHER FACULTY	64	49.6	43	48.5	49	49.8	33	48.2	56	51.7

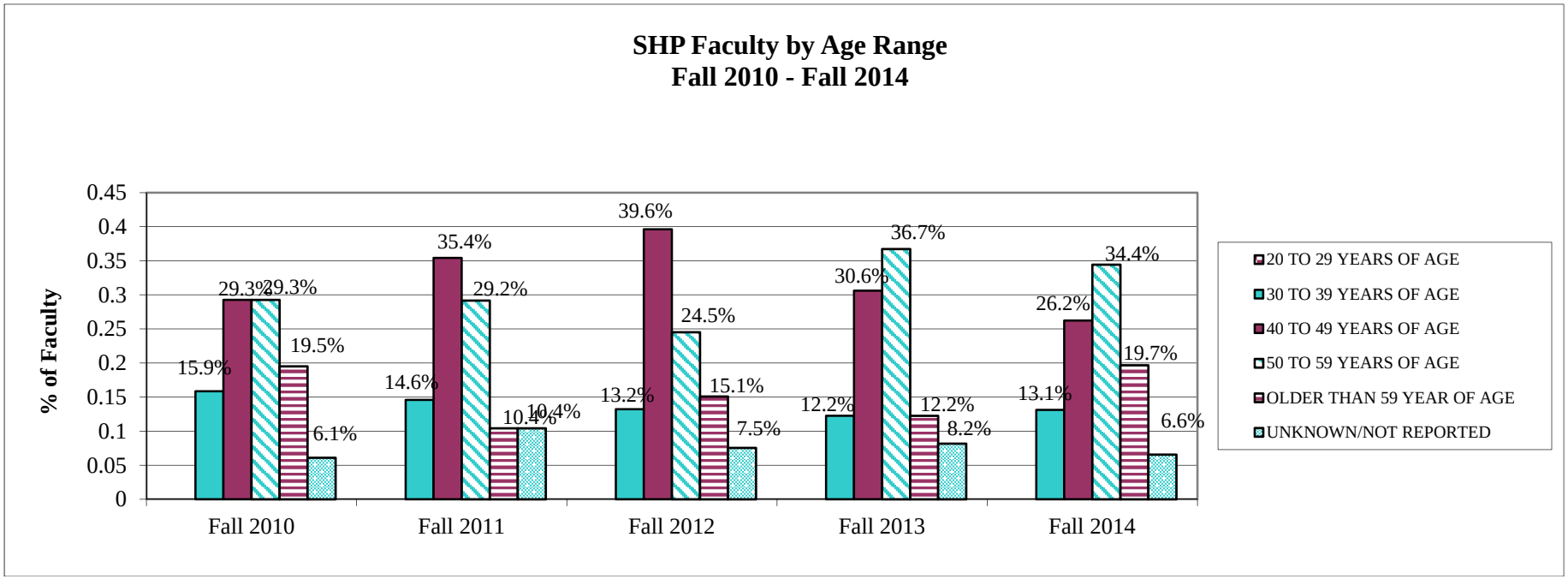
**Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog
Age at Time of CBM008 Report Submission; Faculty with unknown age are not included



D.2 SHP Faculty by Age Range, Fall 2010 – Fall 2014

AGE RANGE	Fall 2010 COUNT	% of Faculty	Fall 2011* COUNT	% of Faculty	Fall 2012* COUNT	% of Faculty	Fall 2013* COUNT	% of Faculty	Fall 2014* COUNT	% of Faculty
20 TO 29 YEARS OF AGE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
30 TO 39 YEARS OF AGE	13	15.9%	7	14.6%	7	13.2%	6	12.2%	8	13.1%
40 TO 49 YEARS OF AGE	24	29.3%	17	35.4%	21	39.6%	15	30.6%	16	26.2%
50 TO 59 YEARS OF AGE	24	29.3%	14	29.2%	13	24.5%	18	36.7%	21	34.4%
OLDER THAN 59 YEARS OF AGE	16	19.5%	5	10.4%	8	15.1%	6	12.2%	12	19.7%
UNKNOWN/NOT REPORTED	5	6.1%	5	10.4%	4	7.5%	4	8.2%	4	6.6%
TOTAL	**82**	100.0%	**48**	100.0%	**53**	100.0%	**49**	100.0%	**61**	100.0%

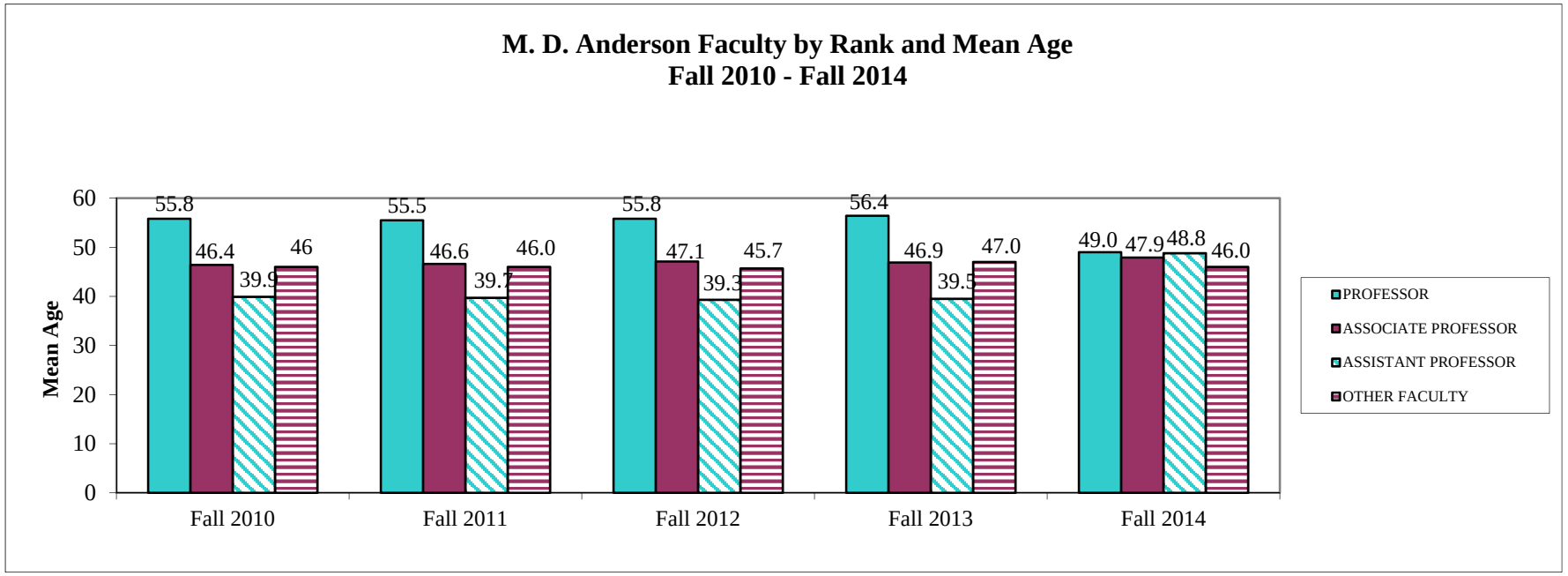
**Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog



D.3 MD Anderson Faculty by Rank and Mean Age, Fall 2010 - Fall 2014

RANK	Fall 2010		Fall 2011		Fall 2012		Fall 2013		Fall 2014	
	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE
PROFESSOR	336	55.5	334	55.8	348	56.4	334	49.0	339	56.8
ASSOCIATE PROFESSOR	154	46.6	145	47.1	150	46.9	145	47.9	142	47.1
ASSISTANT PROFESSOR	131	39.7	126	39.3	124	39.5	117	48.8	120	39.7
OTHER FACULTY	1289	46.0	1361	46.0	1503	45.7	1553	47.0	1586	46.0
TOTAL/OVERALL	1910	47.3	1966	47.4	2125	47.2	2149	47.8	2187	47.4

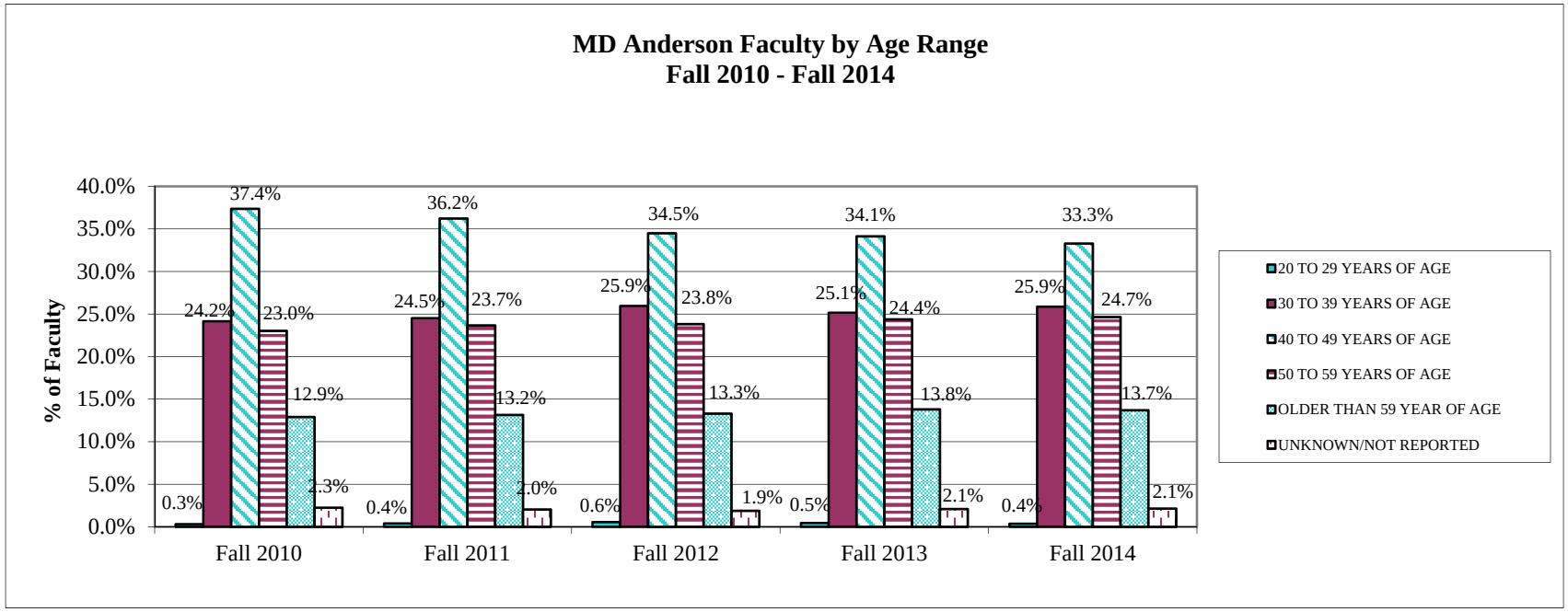
Source: Certified CBM008
Age at Time of CBM008 Report Submission; Faculty with unknown age are not included



D.4 MD Anderson Faculty by Age Range, Fall 2010 - Fall 2014

AGE RANGE	Fall 2010 COUNT	% of Faculty	Fall 2011 COUNT	% of Faculty	Fall 2012 COUNT	% of Faculty	Fall 2013 COUNT	% of Faculty	Fall 2014 COUNT	% of Faculty
20 TO 29 YEARS OF AGE	6	0.3%	8	0.4%	12	0.6%	10	0.5%	8	0.4%
30 TO 39 YEARS OF AGE	472	24.2%	492	24.5%	562	25.9%	552	25.1%	578	25.9%
40 TO 49 YEARS OF AGE	730	37.4%	727	36.2%	747	34.5%	749	34.1%	744	33.3%
50 TO 59 YEARS OF AGE	450	23.0%	475	23.7%	516	23.8%	535	24.4%	551	24.7%
OLDER THAN 59 YEARS OF AGE	252	12.9%	264	13.2%	288	13.3%	303	13.8%	306	13.7%
UNKNOWN/NOT REPORTED	44	2.3%	41	2.0%	41	1.9%	46	2.1%	48	2.1%
TOTAL	**1954**	100.0%	**2007**	100.0%	**2166**	100.0%	**2195**	100.0%	**2235**	100.0%

Source: Certified CBM008



D.5 SHP Faculty by Ethnicity and Gender, Fall 2010 – Fall 2014

ETHNICITY	GENDER	Fall 2010* COUNT	% of Faculty	Fall 2011** COUNT	% of Faculty	Fall 2012** COUNT	% of Faculty	Fall 2013** COUNT	% of Faculty	Fall 2014** COUNT	% of Faculty
WHITE NON-HISPANIC	FEMALE	26	31.7%	19	39.6%	21	39.6%	12	24.5%	19	31.1%
	MALE	22	26.8%	9	18.8%	9	17.0%	15	30.6%	14	23.0%
BLACK NON-HISPANIC	FEMALE	4	4.9%	3	6.3%	4	7.5%	3	6.1%	7	11.5%
	MALE	4	4.9%	3	6.3%	3	5.7%	4	8.2%	3	4.9%
HISPANIC	FEMALE	2	2.4%	0	0.0%	1	1.9%	1	2.0%	1	1.6%
	MALE	3	3.7%	1	2.1%	1	1.9%	1	2.0%	0	0.0%
ASIAN	FEMALE	10	12.2%	6	12.5%	5	9.4%	3	6.1%	4	6.6%
	MALE	8	9.8%	4	8.3%	4	7.5%	5	10.2%	7	11.5%
AMERICAN INDIAN/NATIVE	FEMALE	1	1.2%	1	2.1%	1	1.9%	0	0.0%	0	0.0%
AMERICAN	MALE	0	0.0%	0	0.0%	0	0.0%	1	2.0%	0	0.0%
INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
UNKNOWN	FEMALE	1	1.2%	1	2.1%	2	3.8%	2	4.1%	3	4.9%
	MALE	1	1.2%	1	2.1%	1	1.9%	1	2.0%	2	3.3%
NATIVE HAWAIIAN OR OTHER	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
PACIFIC ISLANDER	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TWO OR MORE RACES	FEMALE	0	0.0%	0	0.0%	1	1.9%	1	2.0%	1	1.6%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL		**82**	100.0%	**48**	100.0%	**53**	100.0%	**49**	100.0%	**61**	**100.0%**

**New ethnicities were implemented including "Native Hawaiian or other Pacific Islander" and "Two or more races"*
***Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog

D.6 MD Anderson Faculty by Ethnicity and Gender, Fall 2010 - Fall 2014

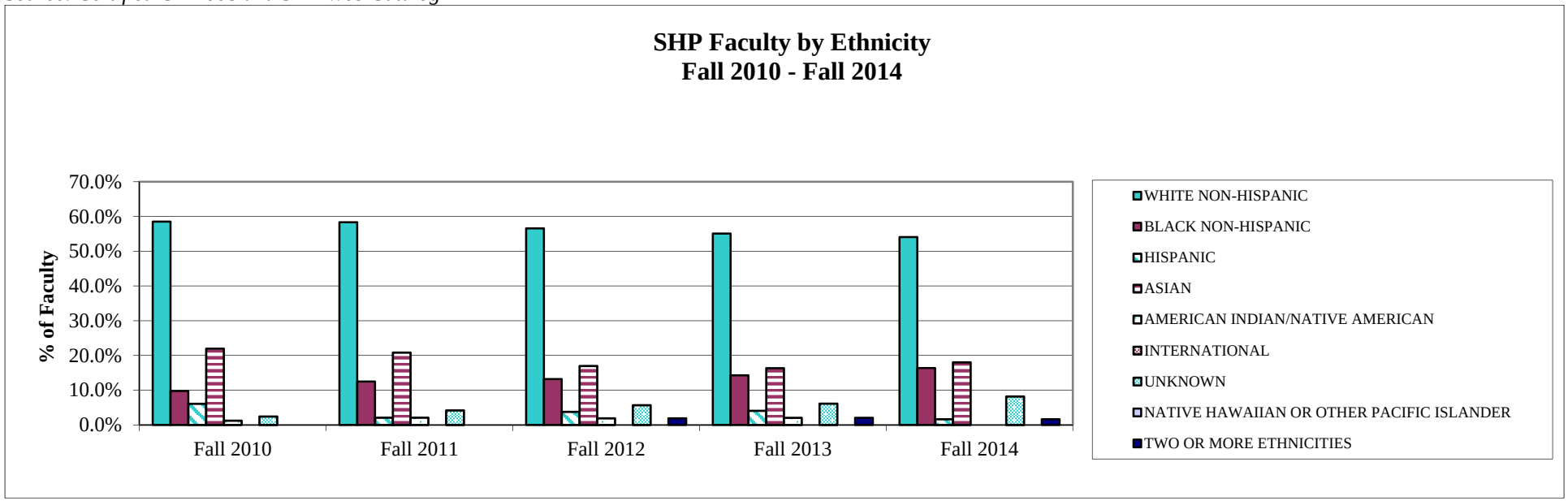
ETHNICITY	GENDER	Fall 2010* COUNT	% of Faculty	Fall 2011** COUNT	% of Faculty	Fall 2012** COUNT	% of Faculty	Fall 2013** COUNT	% of Faculty	Fall 2014** COUNT	% of Faculty
WHITE NON-HISPANIC	FEMALE	367	18.8%	365	18.2%	400	18.5%	426	19.4%	382	17.1%
	MALE	690	35.3%	684	34.1%	722	33.3%	652	29.7%	667	29.8%
BLACK NON-HISPANIC	FEMALE	28	1.4%	31	1.5%	38	1.8%	26	1.2%	42	1.9%
	MALE	20	1.0%	20	1.0%	22	1.0%	41	1.9%	25	1.1%
HISPANIC	FEMALE	43	2.2%	47	2.3%	48	2.2%	51	2.3%	54	2.4%
	MALE	74	3.8%	74	3.7%	82	3.8%	91	4.1%	95	4.3%
ASIAN	FEMALE	195	10.0%	217	10.8%	285	13.2%	267	12.2%	277	12.4%
	MALE	353	18.1%	380	18.9%	524	24.2%	431	19.6%	451	20.2%
AMERICAN INDIAN/NATIVE	FEMALE	3	0.2%	3	0.1%	3	0.1%	2	0.1%	4	0.2%
AMERICAN	MALE	0	0.0%	0	0.0%	1	0.0%	3	0.1%	1	0.0%
INTERNATIONAL	FEMALE	1	0.1%	0	0.0%	0	0.0%	1	0.0%	82	3.7%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	113	5.1%
UNKNOWN	FEMALE	7	0.4%	9	0.4%	10	0.5%	13	0.6%	10	0.4%
	MALE	20	1.0%	17	0.8%	23	1.1%	22	1.0%	23	1.0%
NATIVE HAWAIIAN OR OTHER	FEMALE	0	0.0%	0	0.0%	2	0.1%	2	0.1%	2	0.1%
PACIFIC ISLANDER	MALE	2	0.1%	2	0.1%	2	0.1%	1	0.0%	1	0.0%
TWO OR MORE RACES	FEMALE	47	2.4%	55	2.7%	2	0.1%	51	2.3%	4	0.2%
	MALE	104	5.3%	103	5.1%	2	0.1%	115	5.2%	2	0.1%
TOTAL		**1954**	100.0%	**2007**	100.0%	**2166**	100.0%	**2195**	100.0%	**2235**	100.0%

**New ethnicities were implemented including "Native Hawaiian or other Pacific Islander" and "Two or more races"*
***Does not include adjunct faculty*
Source: Certified CBM008

D.7 SHP Faculty by Ethnicity, Fall 2010 – Fall 2014

ETHNICITY	Fall 2010* COUNT	% of Total	Fall 2011* COUNT	% of Total	Fall 2012* COUNT	% of Total	Fall 2013* COUNT	% of Total	Fall 2014** COUNT	% of Total
WHITE NON-HISPANIC	48	58.5%	28	58.3%	30	56.6%	27	55.1%	33	54.1%
BLACK NON-HISPANIC	8	9.8%	6	12.5%	7	13.2%	7	14.3%	10	16.4%
HISPANIC	5	6.1%	1	2.1%	2	3.8%	2	4.1%	1	1.6%
ASIAN	18	22.0%	10	20.8%	9	17.0%	8	16.3%	11	18.0%
AMERICAN INDIAN/NATIVE AMERICAN	1	1.2%	1	2.1%	1	1.9%	1	2.0%	0	0.0%
INTERNATIONAL	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
UNKNOWN	2	2.4%	2	4.2%	3	5.7%	3	6.1%	5	8.2%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TWO OR MORE RACES	0	0.0%	0	0.0%	1	1.9%	1	2.0%	1	1.6%
TOTAL	**82**	100.0%	**48**	100.0%	**53**	100.0%	**49**	100.0%	**61**	100.0%

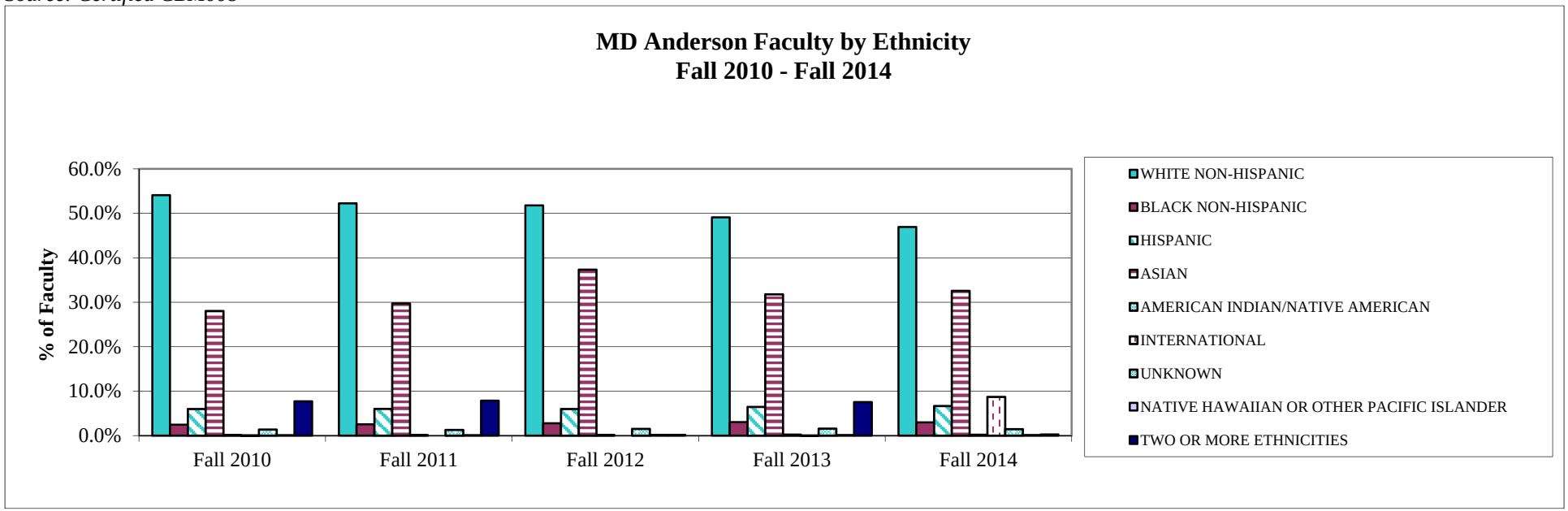
**New ethnicities were implemented including "Native Hawaiian or other Pacific Islander" and "Two or more races"*
***Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog



D.8 MD Anderson Faculty by Ethnicity, Fall 2010 - Fall 2014

ETHNICITY	Fall 2010* COUNT	% of Faculty	Fall 2011* COUNT	% of Faculty	Fall 2012 COUNT	% of Faculty	Fall 2013 COUNT	% of Faculty	Fall 2014 COUNT	% of Faculty
WHITE NON-HISPANIC	1057	54.1%	1049	52.3%	1122	51.8%	1078	49.1%	1049	46.9%
BLACK NON-HISPANIC	48	2.5%	51	2.5%	60	2.8%	67	3.1%	67	3.0%
HISPANIC	117	6.0%	121	6.0%	130	6.0%	142	6.5%	149	6.7%
ASIAN	548	28.0%	597	29.7%	809	37.3%	698	31.8%	728	32.6%
AMERICAN INDIAN/NATIVE AMERICAN	3	0.2%	3	0.1%	4	0.2%	5	0.2%	5	0.2%
INTERNATIONAL	1	0.1%	0	0.0%	0	0.0%	1	0.0%	195	8.7%
UNKNOWN	27	1.4%	26	1.3%	33	1.5%	35	1.6%	33	1.5%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	2	0.1%	2	0.1%	4	0.2%	3	0.1%	3	0.1%
TWO OR MORE RACES	151	7.7%	158	7.9%	4	0.2%	166	7.6%	6	0.3%
TOTAL	**1954**	100.0%	**2007**	100.0%	**2166**	100.0%	**2195**	100.0%	**2235**	100.0%

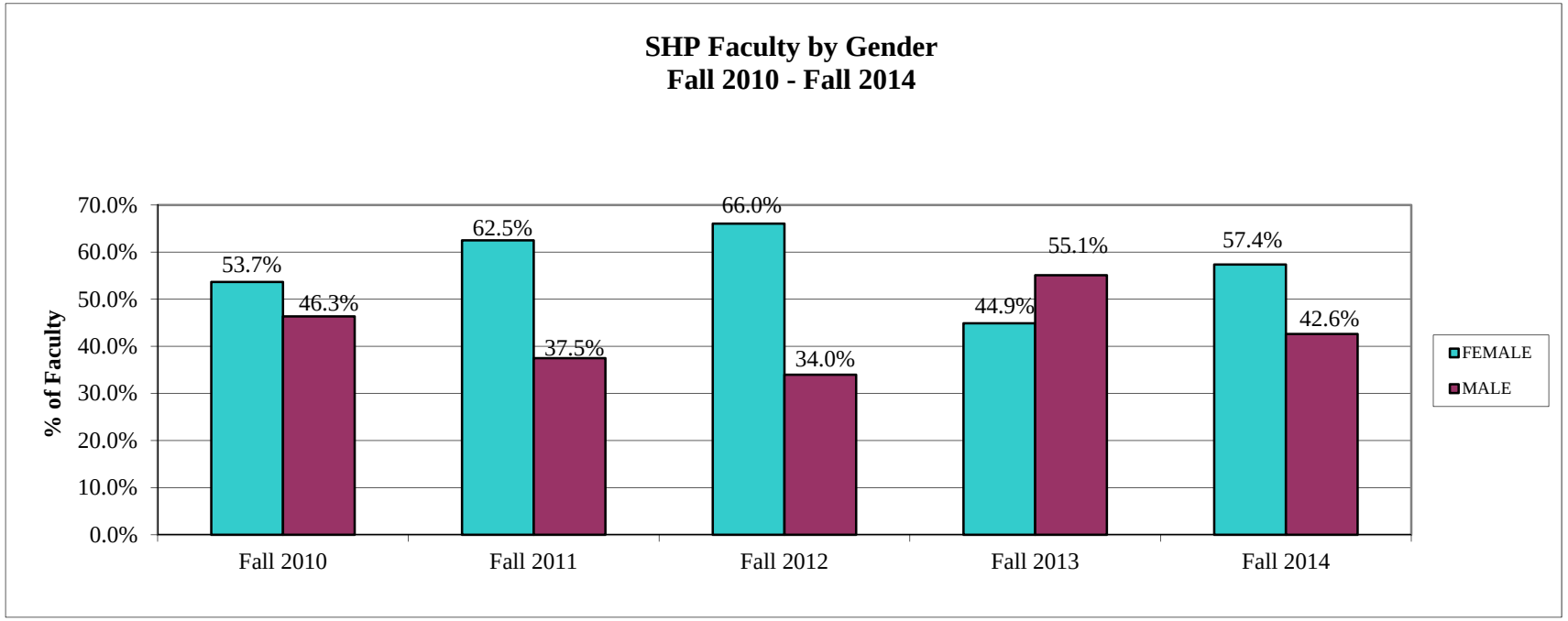
**New ethnicities were implemented including "Native Hawaiian or other Pacific Islander" and "Two or more races"*
Source: Certified CBM008



D.9 SHP Faculty by Gender, Fall 2010 – Fall 2014

GENDER	Fall 2010 COUNT	% of Total	Fall 2011* COUNT	% of Total	Fall 2012* COUNT	% of Total	Fall 2013* COUNT	% of Total	Fall 2014* COUNT	% of Total
FEMALE	44	53.7%	30	62.5%	35	66.0%	22	44.9%	35	57.4%
MALE	38	46.3%	18	37.5%	18	34.0%	27	55.1%	26	42.6%
TOTAL	**82**	100.0%	**48**	100.0%	**53**	100.0%	**49**	100.0%	**61**	100.0%

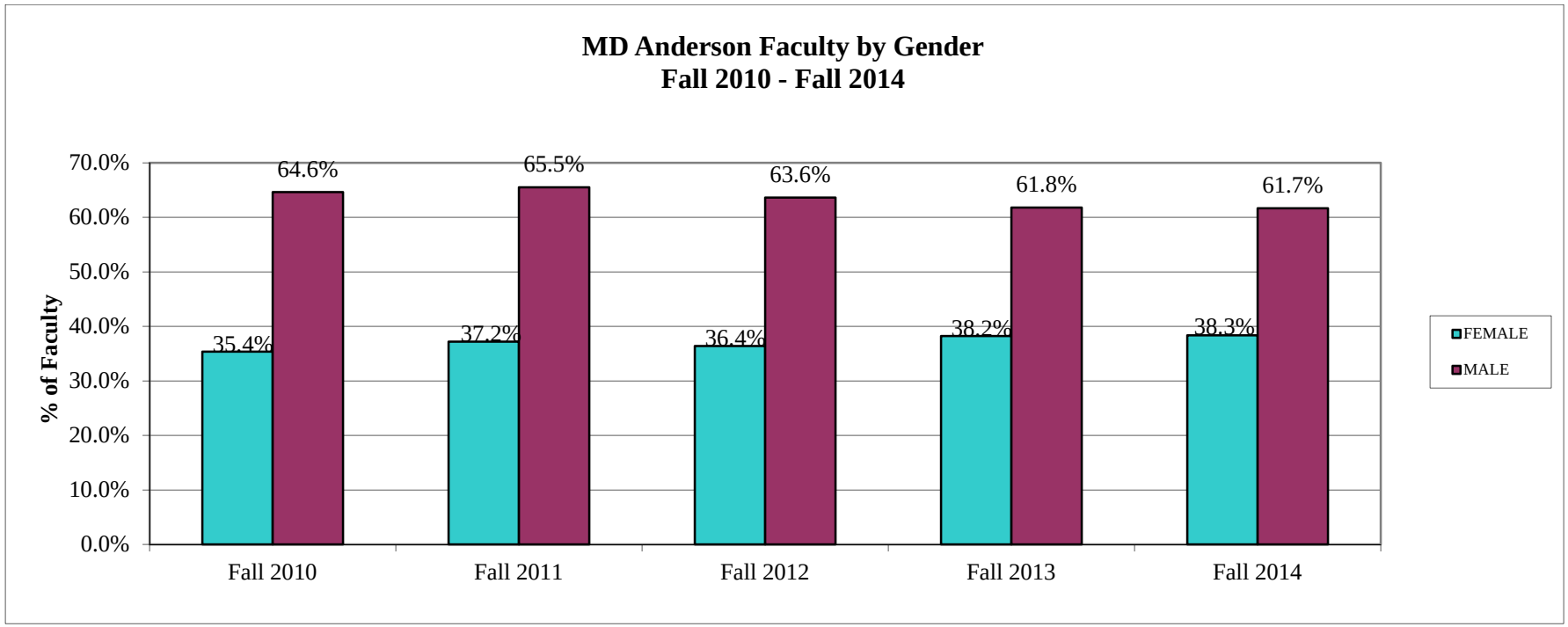
**Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog



D.10 MD Anderson Faculty by Gender, Fall 2010 - Fall 2014

GENDER	Fall 2010 COUNT	% of Total	Fall 2011 COUNT	% of Total	Fall 2012 COUNT	% of Total	Fall 2013 COUNT	% of Total	Fall 2014 COUNT	% of Total
FEMALE	691	35.4%	727	36.2%	788	36.4%	839	38.2%	857	38.3%
MALE	1263	64.6%	1280	63.8%	1378	63.6%	1356	61.8%	1378	61.7%
TOTAL	**1954**	100.0%	**2007**	100.0%	**2166**	100.0%	**2195**	100.0%	**2235**	100.0%

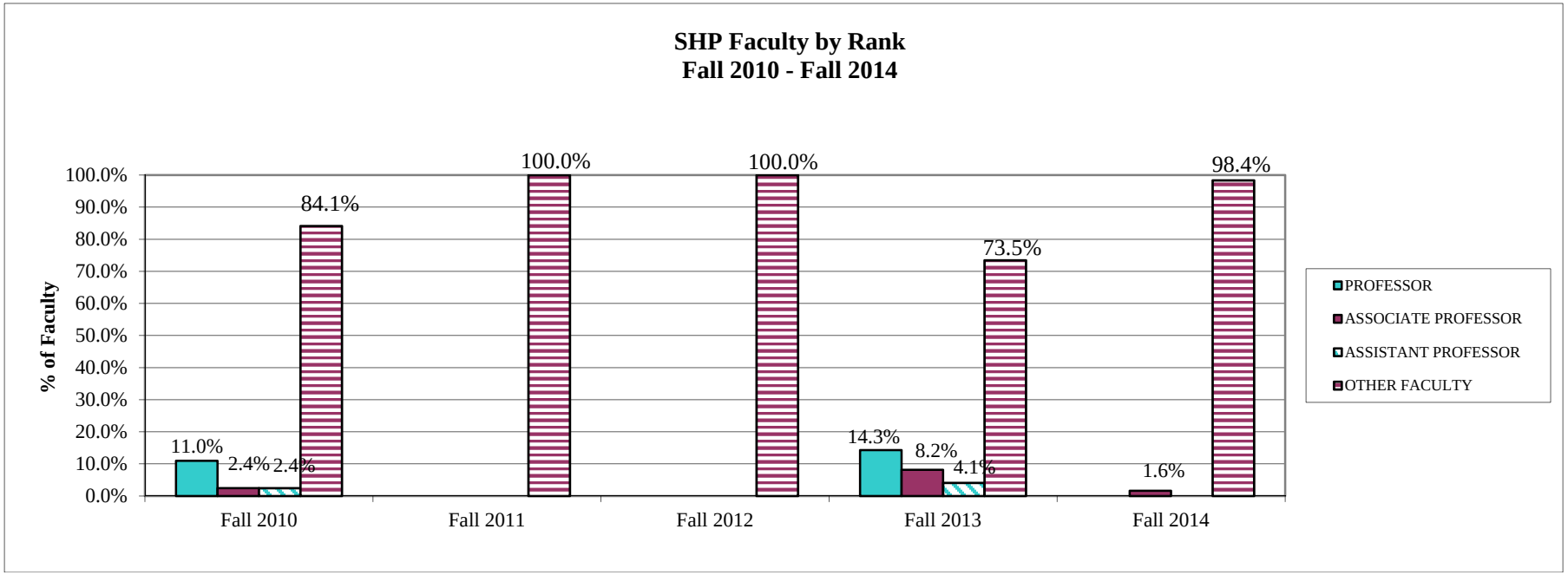
Source: Certified CBM008



D.11 SHP Faculty by Rank, Fall 2010 – Fall 2014

RANK	Fall 2010			Fall 2011*			Fall 2012*			Fall 2013*			Fall 2014*		
	COUNT	% of ALL	FTE	COUNT	% of ALL	FTE	COUNT	% of ALL	FTE	COUNT	% of ALL	FTE	COUNT	% of ALL	FTE
PROFESSOR	9	11.0%	9.00	0	0.0%	0.00	0	0.0%	0.00	7	14.3%	3.00	0	0.0%	0.00
ASSOCIATE PROFESSOR	2	2.4%	2.00	0	0.0%	0.00	0	0.0%	0.00	4	8.2%	2.00	1	1.6%	1.00
ASSISTANT PROFESSOR	2	2.4%	2.00	0	0.0%	0.00	0	0.0%	0.00	2	4.1%	0.00	0	0.0%	0.00
OTHER FACULTY	69	84.1%	46.08	48	100.0%	28.00	53	100.0%	30.00	36	73.5%	23.00	60	98.4%	28.00
TOTAL	**82**	100.0%	59.08	**48**	100.0%	28.00	**53**	100.0%	30.00	**49**	100.0%	28.00	**61**	100.0%	29.00

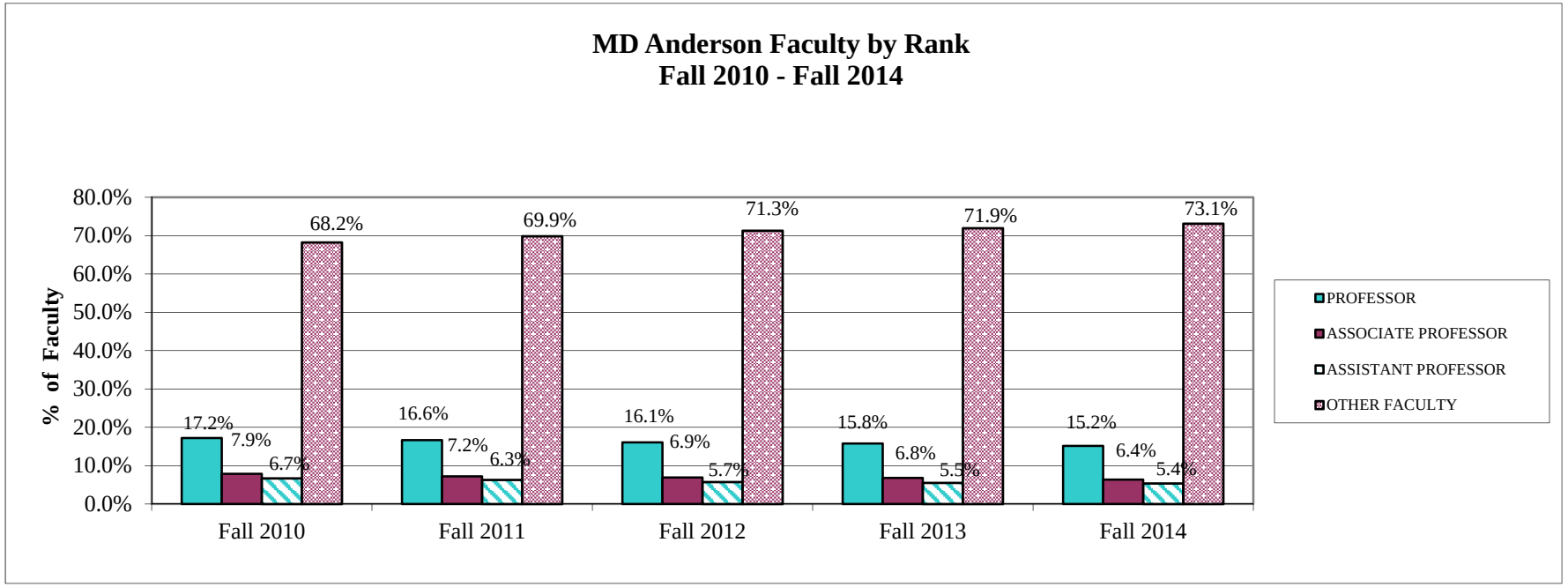
**Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog



D.12 MD Anderson Faculty by Rank, Fall 2010 - Fall 2014

	Fall 2010			Fall 2011			Fall 2012			Fall 2013			Fall 2014		
FACULTY RANK	**COUNT**	**% OF ALL**	**FTE**	**COUNT**	**% OF ALL**	**FTE**	**COUNT**	**% OF ALL**	**FTE**	**COUNT**	**% OF ALL**	**FTE**	**COUNT**	**% OF ALL**	**FTE**
PROFESSOR	336	17.8%	334.2	334	17.7%	334	348	16.1%	346.73	346	15.8%	259.31	339	15.2%	338.00
ASSOCIATE PROFESSOR	154	8.2%	154.00	145	7.7%	145.00	150	6.9%	149.90	149	6.8%	110.37	142	6.4%	142.00
ASSISTANT PROFESSOR	131	7.0%	130.70	126	6.7%	126.00	124	5.7%	123.95	121	5.5%	91.40	120	5.4%	120.00
OTHER FACULTY	1333	68.2%	954.45	1402	69.9%	1001.41	1544	71.3%	1076.29	1579	71.9%	1256.51	1634	73.1%	1126.99
TOTAL	**1954**	100.0%	1573.35	**2007**	100.0%	1606.41	**2166**	100.0%	1696.87	**2195**	100.0%	1717.59	**2235**	100.0%	1726.99

Source: Certified CBM008



D.13 SHP Mean Faculty* Salaries by Rank, Fall 2010 - Fall 2014

RANK	Fall 2010			Fall 2011**			Fall 2012**			Fall 2013**			Fall 2014**		
	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE
PROFESSOR	$349,634	9	9.00	$0	0	0.00	$0	0	0.00	$114,024	3	3.00	$0	0	0.00
ASSOCIATE PROFESSOR	$217,570	2	2.00	$0	0	0.00	$0	0	0.00	$167,831	2	2.00	$122,101	1	1.00
ASSISTANT PROFESSOR	$193,820	2	2.00	$0	0	0.00	$0	0	0.00	$0	0	0.00	$0	0	0.00
OTHER FACULTY	$138,382	46	46.00	$105,585	28	28.00	$113,659	30	30.00	$108,088	23	23.00	$118,080	28	28.00
OVERALL	**$175,171**	**59**	**59.00**	**$105,585**	**28**	**28.00**	**$113,659**	**30**	**30.00**	**$112,991**	**28**	**28.00**	**$118,219**	**29**	**29.00**

**Includes only faculty with non-zero salary and total appointment greater than or equal to 50%.*
***Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog

D.14 MD Anderson Cancer Center Mean Faculty* Salaries by Rank, Fall 2010 - Fall 2014

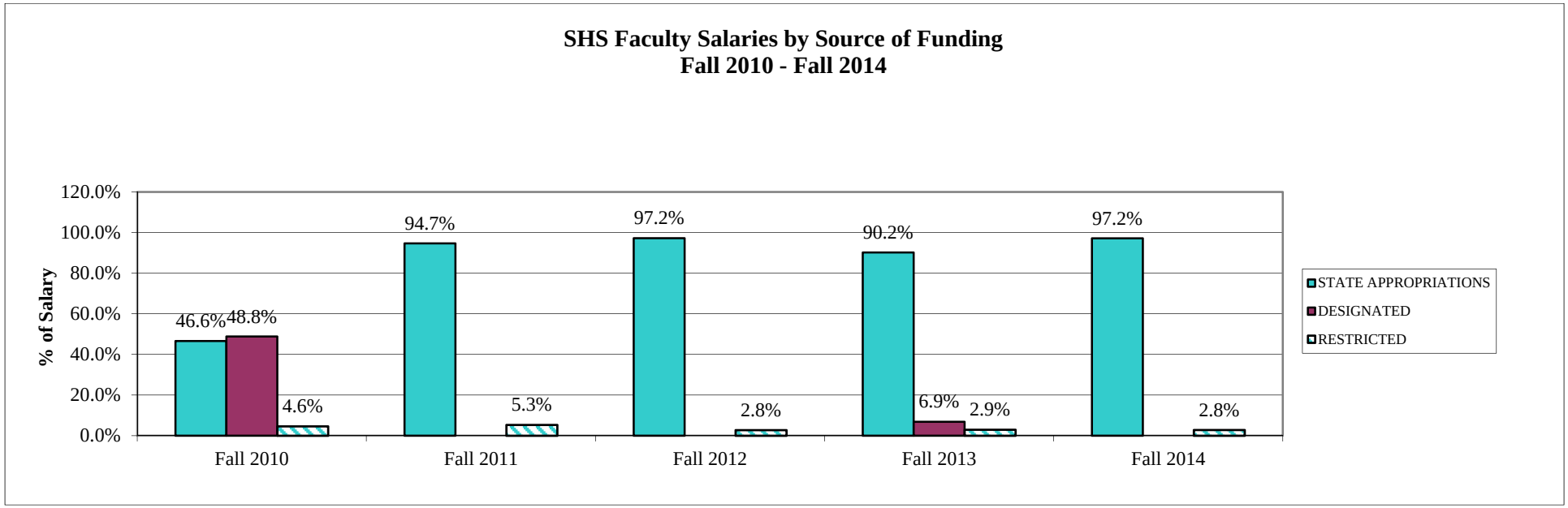
RANK	Fall 2010			Fall 2011			Fall 2012			Fall 2013			Fall 2014		
	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE
PROFESSOR	$316,278	334	334.00	$329,466	332	332.00	$353,816	347	346.73	$236,794	259	257.81	$368,869	338	338.00
ASSOCIATE PROFESSOR	$201,886	154	154.00	$211,847	145	145.00	$216,006	150	149.90	$235,044	111	109.48	$226,042	142	142.00
ASSISTANT PROFESSOR	$184,098	131	130.70	$180,880	126	126.00	$185,665	124	123.95	$233,434	91	91.00	$190,556	120	120.00
OTHER FACULTY	$168,088	953	946.74	$179,935	997	991.92	$186,660	1075	1067.56	$219,443	1257	1251.41	$199,450	1126	1118.65
OVERALL	**$204,219**	**1,572**	**1,565.44**	**$213,219**	**1,600**	**1,594.92**	**$223,383**	**1,696**	**1,688.14**	**$223,808**	**1,718**	**1,709.70**	**$234,196**	**1,726**	**1,718.65**

**Includes only faculty with non-zero salary and total appointment greater than or equal to 50%.*
Source: Certified CBM008

D.15 SHP Faculty Salaries by Source of Funds, Fall 2010 – Fall 2014

SOURCE OF FUNDING	Fall 2010		Fall 2011*		Fall 2012*		Fall 2013*		Fall 2014*	
	Sum	% OF ALL	Sum	% OF ALL	Sum	% OF ALL	Sum	% OF ALL	Sum	% OF ALL
STATE APPROPRIATIONS	$4,818,338	46.6%	$2,798,661	94.7%	$3,315,302	97.2%	$2,853,532	90.2%	$3,331,857	97.2%
DESIGNATED	$5,050,716	48.8%	$0	0.0%	$0	0.0%	$217,100	6.9%	$0	0.0%
RESTRICTED	$476,015	4.6%	$157,711	5.3%	$94,479	2.8%	$93,126	2.9%	$96,482	2.8%
TOTAL	**$10,345,069**	100.0%	**$2,956,372**	100.0%	**$3,409,781**	100.0%	**$3,163,758**	100.0%	**$3,428,339**	**100.0%**

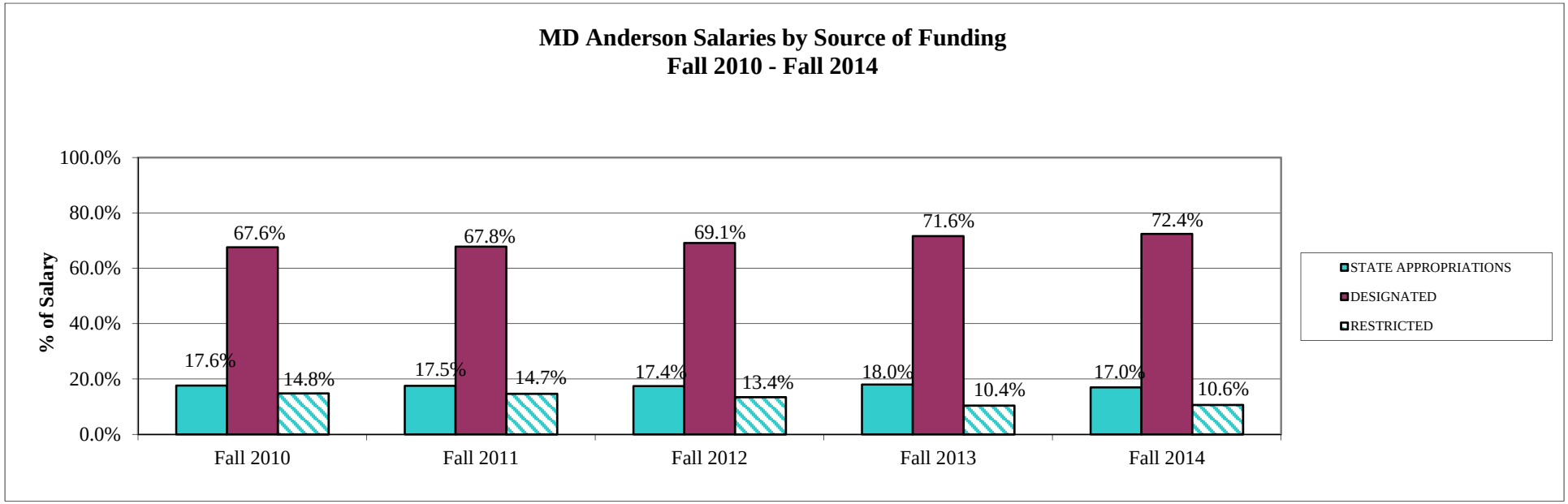
**Does not include adjunct faculty*
Source: Certified CBM008 and SHP Web Catalog



D.16 MD Anderson Faculty Salaries by Source of Funds, Fall 2010 - Fall 2014

SOURCE OF FUNDING	Fall 2010		Fall 2011		Fall 2012		Fall 2013		Fall 2014	
	Sum	% of Total	Sum	% of Total	Sum	% of Total	Sum	% of Total	Sum	% of Total
STATE APPROPRIATIONS	$56,928,948	17.6%	$60,472,396	17.5%	$66,430,020	17.4%	$69,612,503	18.0%	$69,073,177	17.0%
DESIGNATED	$218,319,967	67.6%	$233,755,162	67.8%	$263,476,302	69.1%	$276,803,555	71.6%	$294,333,847	72.4%
RESTRICTED	$47,923,516	14.8%	$50,560,682	14.7%	$51,231,257	13.4%	$40,196,501	10.4%	$43,220,286	10.6%
TOTAL	**$323,172,431**	100.0%	**$344,788,240**	100.0%	**$381,137,579**	100.0%	**$386,612,559**	100.0%	**$406,627,310**	100.0%

Source: Certified CBM008



D.17 MD Anderson Faculty American Association for Advancement of Science Fellows Appointments Fiscal Year 2015

Name	Department
Ron DePinho, M.D	President's Office
Burton Dickey, M.D.	Pulmonary Medicine
Varsha Gandhi, Ph.D.	Experimental Therapeutics
John Mendelsohn, M.D.	Experimental Therapeutics
Jeff Molldrem, M.D.	Stem Cell Transplantation and Cellular Therapy
David Piwnica-Worms, M.D., Ph.D.	Cancer Systems Imaging
Sanjay Shete, Ph.D.	Biostatistics
Stephen Ullrich, Ph.D.	Immunology

E. Academic Assessments

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E.1 Accreditation Status

E.1.1 School of Health Professions (SHP) Program Accreditation Schedule

Program	Accrediting Agency	Date of Last Review	Length of Certification
Cytogenetic Technology	National Accrediting Agency for Clinical Laboratory Sciences (NAACLS)	April 2014	7 years
Histotechnology	National Accrediting Agency for Clinical Laboratory Sciences (NAACLS)	April 2015	7 years
Clinical Laboratory Sciences	National Accrediting Agency for Clinical Laboratory Sciences (NAACLS)	March 2013	7 years
Molecular Genetic Technology	National Accrediting Agency for Clinical Laboratory Sciences (NAACLS)	September 2010	7 years
Cytotechnology	Commission on Accreditation of Allied Health Education Programs (CAAHEP)	November 2015	10 years
Medical Dosimetry	Joint Review Committee on Education in Radiologic Tech. (JRCERT)	April 2014	8 years
Radiation Therapy	Joint Review Committee on Education in Radiologic Tech. (JRCERT)	November 2015	8 years
Diagnostic Imaging	Joint Review Committee on Education in Radiologic Tech. (JRCERT)	August 2011	8 years
Diagnostics Genetics	National Accrediting Agency for Clinical Laboratory Sciences (NAACLS)	September 2010	7 years

E.1.2 Graduate School of Biomedical Sciences (GSBS) Program Accreditation Schedule

Program	Accrediting Agency	Date of Last Review	Length of Certification
MS and PhD Program	Southern Association of Colleges and Schools (SACS)	2010	10 years
MS with specialization in Genetic Counseling	American Board of Genetic Counseling (ABGC)	2014	8 years
MS and PhD with specialization in Medical Physics	Commission on Accreditation of Medical Physics Educational Programs (CAMPEP)	2013	4 years

E.1.3 Accredited Medical Programs Schedule

Institutional ACGME* Review: October 17, 2012

Program	Accrediting Agency	Date of Last Review
Blood Banking & Transfusion Medicine	ACGME	February 2016
Chemical Pathology	ACGME	February 2016
Complex General Surgical Oncology	ACGME	July 2012
Cytopathology	ACGME	February 2016
Dermatopathology	ACGME	February 2016
Hematology and Oncology	ACGME	January 2016
Hematopathology	ACGME	February 2016
Hospice and Palliative Care	ACGME	February 2015
Molecular Genetics Pathology	ACGME	February 2016
Musculoskeletal Oncology	ACGME	January 2016
Ophthalmic Plastic & Reconstructive Surgery	ACGME	January 2016
Pain Management	ACGME	February 2015
Pediatric Hematology/Oncology	ACGME	January 2016
Procedural Dermatology	ACGME	January 2016
Radiation Oncology	ACGME	February 2016
Selective (Breast) Pathology	ACGME	February 2016
Selective (Cancer Biomarker) Pathology	ACGME	February 2016
Selective (Gastrointestinal & Liver) Pathology	ACGME	February 2016
Selective (Genitourinary) Pathology	ACGME	February 2016
Selective (Gynecologic Oncology) Pathology	ACGME	February 2016
Selective (Head & Neck) Pathology	ACGME	February 2016
Selective (Soft Tissue) Pathology	ACGME	February 2016
Selective (Surgical) Pathology	ACGME	February 2016
Selective (Thoracic) Pathology	ACGME	February 2016
Thoracic Surgery	ACGME	December 2015
Vascular and Interventional Radiology	ACGME	January 2016

** Accreditation Council for Graduate Medical Education*

E.1.4 Texas Medical Board Approved Programs

- Advanced Dermatopathology
- Advanced Hematopathology
- Advanced Interventional Radiology
- Advanced Musculoskeletal Oncology
- Advanced Pediatric Hematology/Oncology
- Advanced Radiation Oncology
- Advanced Therapeutic Endoscopy
- Body Imaging
- Breast Imaging
- Breast Surgical Oncology
- Cancer Anesthesia
- Cancer Rehabilitation
- Consultation-Liaison Psychiatric Oncology
- Dermatology
- Diagnostic Radiology
- General Internal Medicine
- Genitourinary Medical Oncology
- Gynecologic Oncology
- Head and Neck Surgery
- Head and Neck Surgical Oncology & Reconstruction
- Hepatopancreatobiliary (HPB) Surgery
- Histocompatibility and Immunogenetics
- Immunotherapy
- Interventional Pulmonology
- Investigational Cancer Therapeutics
- Leukemia
- Lymphoma
- Maxillofacial Prosthetics & Oncologic Dentistry
- Medical Oncology International
- Melanoma Oncology
- Microvascular Reconstructive Surgery
- Musculoskeletal Radiology
- Multidisciplinary Pathology
- Neuro-Oncology
- Neurosurgical Oncology
- Oncologic-based Maxillofacial Dental Implant
- Oncologic Cardiology
- Oncologic Emergency Medicine
- Oncologic Endocrinology
- Oncologic Nephrology
- Oncologic Neuroradiology
- Pediatric Neuro Oncology

Texas Medical Board Approved Programs*, continued*

- Pediatric Surgical Oncology
- Sarcoma Medical Oncology
- Stem Cell Transplantation & Cellular Therapy
- Surgical Endocrinology
- Surgical Oncology
- Surgical Oncology International
- Symptom Control & Palliative Care
- Thoracic/Head & Neck Medical Oncology
- Thoracic Pathology
- Thoracic Imaging
- Urinary Tract & Pelvic Reconstruction
- Urologic Oncology

E.2 Results of Selected National Certification Exams

E.2.1 Program in Clinical Laboratory Science

American Society for Clinical Pathology (Board of Certification Exam)
Medical Laboratory Scientist Generalist Exam

Year	# of Graduates	# Graduates Taking BOC Exam	% Passing	Program Mean BOC Score	National Mean BOC Score
2005	13	13	100%	602	479
2006	17	17	88%	497	480
2007	18	17	94%	564	477
2008	17	17	91%*	581	488
2009	17	17	94%	545	492
2010	19	19	90%	514	498
2011	14	14	100%	536	502
2012	17	17	100%	599	499
2013	16	16	94%	548	502
2014	13	13	80%	524	485

* National Percentage Passing: 77%

E.2.2 Program in Cytogenetic Technology - Registry Exam Scores

	2005	2006	2007	2008	2009	2010**	2011***	2012	2013	2014
Program Part I	83.29	80.17	81.00	81.00	75	590	516	456	495	484
National Part I	80.34	77.23	78.03	78.83	73.72	516	468	456	494	455
Program Part II	90.71	92.50	95.92	92.15	77*	700				
National Part II	88.78	89.39	90.14	91.02	73.71*	714				

The cytogenetics exam is given by NCA. The exam is signified by the following designation CLSp(CG). There are two parts to the examination. Part one is a 100 theory question exam. Part two is a practical exam that was 100 questions in length until 2001 when it was changed to an 80 question exam. This explains why the scores appear to be much lower when in fact they are very good scores. (2001 – 90.31%; 2002 – 92.8%).
* No national data is available for Part II after exam was converted to a computer exam format in 2001. Part II scores for 2001 – 2003 are raw scores, all others are scaled scores.
**NCA was merged with ASCP (different scoring system)
***In 2011the ASCP revised the Cytogenetic BOC from a two part to only a single exam.

E.2.3 Program in Histotechnology

Program in Histotechnology
Performance on ASCP Board of Certification Exam

Year	# of Graduates	# Graduates Taking BOC Exam	% Passing	Program Mean BOC Score Written Exam	National Mean BOC Score MCQ Exam	# of Programs in Nation	National Ranking	Program Mean BOC Score Practical Exam	National Mean BOC Score Practical Exam	National Ranking
2003	3	3	100%	628	433	20	1	503	485	-
2004	4	4	100%	613	378	25	2	602	476	-
2005	3	3	100%	626	478	18	2	589	551	-
2006	3 HT	3 HT	100%	619	455	19	1	676	548	3
	3 HTL	3 HTL	100%	560	433	NA	NA	498	552	NA
2007	3 HT	3 HT	100%	632	463	24	1	Discontinued	NA	NA
	4 HTL	4 HTL	100%	520	422	NA	NA			
2008	2 HT	2 HT	100%	506	448	28	16	Discontinued	NA	NA
	4 HTL	4 HTL	100%	454	422	NA	NA			
2009	2 HT	2 HT	100%	549	480	28	6	Discontinued	NA	NA
	7 HTL	7 HTL	100%	597	435	NA	NA			
2010	1 HT	2 HT	100%	446	478	33	22	Discontinued	NA	NA
	5 HTL	5 HTL	100%	461	432	NA	NA			
2011	9 HTL	9 HTL	100%	491	454	NA	NA	Discontinued	NA	NA
2012	11 HTL	12 HTL	82%	460	440	NA	NA	Discontinued	NA	NA
2013	12 HTL	12 HTL	100%	478	425	6	NA	Discontinued	NA	NA
2014	13 HTL	11 HTL	85%	527	426	7	NA	Discontinued	NA	NA

Performance on HTL and HT ASCP Board of Certification Exam
MDACC Program/National Programs Pass Rates

Year	MD ANDERSON Program in Histotechnology			NATIONAL Programs in Histotechnology			MD ANDERSON Program in Histotechnology		NATIONAL Programs in Histotechnology	
	# Graduates	# Graduates Taking MCQ (BOC)	% Pass	Total # of Programs	# Examinees Taking MCQ (BOC) First Time	% Pass	# Graduates Taking Practical BOC	% Pass	# Examinees Taking Practical BOC First Time	% Pass
2003	3	3	100%	20	417	59%	3	100%	485	78%
2004	4	4	100%	25	926	42%	4	100%	964	76%
2005	3	3	100%	18	95	75%	3	100%	72	86%
2006	3 HT	3	100%	19	174	70%	3	100%	160	92%
	2 HTL	2	100%	NA	53	70%	2	100%	39	90%
2007	3 HT	3	100%	24	217	65%	Discontinued	NA	Discontinued	NA
	3 HTL	4	100%	NA	99	59%				
2008	2 HT	2	100%	28	264	75%	Discontinued	NA	Discontinued	NA
	4 HTL	4	100%	NA	95	63%				
2009	2 HT	2	100%	28	271	75%	Discontinued	NA	Discontinued	NA
	7 HTL	7	100%	NA	131	58%				
2010	1 HT	2	100%	33	312	73%	Discontinued	NA	Discontinued	NA
	5 HTL	5	100%	NA	101	70%				
2011	9 HTL	9	100%	NA	109	69%	Discontinued	NA	Discontinued	NA
2012	11 HTL	11	82%	NA	183	66%	Discontinued	NA	Discontinued	NA
2013	12 HTL	12	100%	NA	324	58%	Discontinued	NA	Discontinued	NA
2014	13 HTL	11	85%	7	426	65%	Discontinued	NA	Discontinued	NA

NOTE: Program = Results of U.T. MD Anderson Cancer Center School of Health Sciences Program in Histotechnology test results.
MCQ = Computerized test results.
Practical = Practical exam of blocks and slides results.
National = Refers to all individuals taking the certification exam.
HT = Histologic Technician; HTL = Histotechnologist

E.3 Summary of Surveys

E.3.1 Summary of School of Health Professions Course/Rotation, Faculty, and Lecturer Evaluations

Semester	Number of Courses/Rotations	Number of Faculty/Lecturers	Number of Course/Rotation Evaluations	Number of Faculty/Lecturer Evaluations	Number of Total Evaluations
Fall 2011	64	181	**1,605**	**3,319**	**4,924**
Spring 2012	75	239	**1,302**	**3,688**	**4,990**
Summer 2012	59	265	**826**	**2,287**	**3,113**
Fall 2012	63	148	**1,327**	**3,013**	**4,340**
Spring 2013	78	191	**1,433**	**3,859**	**5,292**
Summer 2013	62	186	**858**	**2,506**	**3,364**
Fall 2013	62	133	**1,466**	**2,596**	**4,062**
Spring 2014	74	292	**1,326**	**3,175**	**4,501**
Summer 2014	69	105	**725**	**1,415**	**2,140**
Fall 2014	95	191	**1,412**	**2,713**	**3,585**
Spring 2015	98	240	**1,340**	**3,008**	**4,348**
Summer 2015	67	121	**586**	**1,000**	**1,586**

E.3.2 School of Health Professions Surveys

SHP* Program Evaluation by Program and Year

FY	CLS	CGT	CT	DI	HT	MD	MGT	RT	DG	TOTALS
2011	13	13	8	20	9	14	20	13	NA	**110**
2012	17	25	6	25	10	12	24	17	NA	**136**
2013	16	19	8	30	12	16	29	20	NA	**150**
2014	12	19	11	35	11	3	13	15	NA	**119**
2015	15	15	0	25	12	15	19	16	3	**120**

*SHP Program Legend
CLS = Clinical Laboratory Science; CGT = Cytogenetic Technology; CT = Cytotechnology
DI = Diagnostic Imaging; DG = Diagnostic Genetics; HT = Histotechnology; MD = Medical Dosimetry
MGT = Molecular Genetic Technology; RT= Radiation Therapy

F. Administrative & Academic Reporting Measures

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History of the State of Texas Strategic Planning Process

Beginning in 1991, Texas embarked on a comprehensive strategic planning process for all state agencies within the executive branch of government. House Bill 2009, Seventy-second Legislature, Regular Session, 1991, which inaugurated the process, established the requirements and time frame under which Texas completed its first planning cycle. House Bill 2009 was subsequently codified as Chapter 2056 of the Government Code.

In 1993, Chapter 2056 of the Government Code was amended (Senate Bill 1332, Seventy-third Legislature, 1993) to consolidate certain planning requirements and to change the required planning horizon from six years to five years (i.e., the second year of the current biennium and the next two biennia). Formal plans must be completed and submitted every two years; however, agencies may engage in planning on a continual basis and may adjust plans internally as changing conditions dictate.

Conceptual Framework

Strategic planning is a long-term, iterative, and future-oriented process of assessment, goal setting, and decision-making that maps an explicit path between the present and a vision of the future. It includes a multiyear view of objectives and strategies for the accomplishment of agency goals. Clearly defined outcomes and outputs provide feedback that leads to program performance that influences future planning, resource allocation, and operating decisions. The strategic planning process incorporates and sets direction for all agency operations.

A Strategic Plan is a formal document that communicates an agency's goals, directions, and outcomes to various audiences, including the Governor and the Legislature, client and constituency groups, the general public, and the agency's employees. The Strategic Plan serves as the starting point for developing the agency's budget structure, which will be used for an appropriations request for how fiscal resources will be allocated.

Purposes of Strategic Planning

The ultimate goal of strategic planning is to anticipate and accommodate the future by identifying issues, opportunities, and problems. Strategic planning for Texas state government serves a number of distinct, though interrelated, purposes:

- to establish *statewide direction* in key policy or functional areas to move away from crisis-driven decision-making;
- to provide a starting point for *aligning resources* in a rational manner to address the critical issues facing the state now and in the future;
- to make state government *more responsive* to the needs of Texans by placing greater emphasis on benefits and results than on simply service efforts and workload;
- to *bring/focused issues to* policymakers for review and debate;
- to provide a context to *link* the budget process and other legislative processes with priority issues, and to improve *accountability* for the use of state resources;
- to establish a means of *coordinating* the policy concerns of public officials with implementation efforts and to build interagency, intergovernmental, and *public/private/nonprofit partnerships;* and
- to provide a forum for communication between service providers and the constituents they serve.

The performance measures adopted by health related institutions are included following the actual UTMDACC Performance Measure Report submitted annually to the Legislative Budget Board. The performance measures are in the order of the submission to the Legislative Budget Board.

F.1

MD Anderson Performance Measures Reported to the Legislative Budget Board*

Performance Measure	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Total number of outpatient visits	1,175,577	1,190,568	1,281,489	1,338,706	1,363,008
Total number of inpatient days	179,895	180,354	196,180	207,555	202,636
Net revenue as a percent of gross revenues	52.02%	53.85%	52.39%	52.42%	51.32%
Net revenue per equivalent patient day	4,372.78	4,143.98	4,173.26	4,275.19	4,483.74
Operating expenses per equivalent patient day	4,014.71	3,489.46	3,598.85	3,735.14	3,776.00
Personnel expenses as a percent of operating expenses	56.87%	60.70%	59.38%	58.15%	58.08%
Total number of residents	121	135	149	168	166
Minority residents as a percent of total residents	7.44%	7.40%	9.40%	10.12%	7.23%
Percent of residency completers practicing in Texas	42.02%	40.00%	38.60%	49.10%	42.00%
Total gross patient charges for un-sponsored charity care provided in state facilities	223,199,697	-	-	*	*
Total uncompensated charity care provided in state facilities (costs)		*154,233,340	96,345,427	163,452,884	130,077,190
Total gross patient charges for un-sponsored charity care provided by faculty	60,513,354	-	-	*	*
Total uncompensated charity care provided by faculty (costs)		*60,413,721	63,051,501	61,892,267	66,666,187
State support for patient care as a percent of un-sponsored charity care	52.73%	-	-	*	
State support for patient care as a percent of estimated cost of uncompensated care		*66.05%	110.25%	75.72%	95.15%
Administrative cost as a percent of total expenditures	7.35%	7.43%	7.47%	7.56%	7.72%
Outpatient-related charges as a percent of all charges by faculty	63.53%	67.96%	68.88%	70.01%	78.43%
Percent of charges to managed care contracts by faculty	50.99%	52.21%	52.83%	52.06%	57.87%
Total external research expenditures	344,230,603	394,146,854	365,961,389	373,522,114	406,622,738
External research expenditures as percent of total state appropriations	18.44%	19.57%	16.31%	15.30%	16.39%
External research expenditures as percent of state appropriations for research	219.23%	220.01%	220.01%	3463.31%	3241.21%
Value of lost or stolen property	75,785	81,667	62,370	85,593	260,000
Lost or stolen property as a percent of total inventoried property lost or stolen	0.04%	0.03%	0.02%	0.03%	0.11%
Allied health enrollment	249	248	316	291	318
Percent of allied health graduates passing the certification/licensure exam on the first attempt	94.00%	93.00%	94.00%	92.00%	90.00%
Percent of allied health graduates licensed or certified in Texas	86.00%	89.00%	86.00%	84.00%	90.00%
Graduate Training in Biomedical Sciences	456	438	421	384	384
1 MD Anderson students attending GSBS; from GSBS Data Tables					
Total Number of Post-doctoral Trainees	676	725	757	747	730
2 Number not reported to LBB; from MD Anderson Trainee Support Services					
Total Number of Research Trainees	1,612	1,629	1,714	1,743	1,853

** Courtesy of Hugh R. Ferguson, Executive Director of State and System Reporting*

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F.2 Health Related Institutions Performance Measures Definitions

Total Number of Outpatient Visits

Definition: A "patient visit" occurs when an individual receives health care services from institutional faculty, post-graduate trainees, or pre-doctoral dental students at a hospital or clinic, affiliated with, contracted with, or owned, operated and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. An "outpatient visit" occurs when the individual receives health care services, including emergency room services, but is not admitted to a hospital bed. One patient who initially visits an emergency room and is then referred to and receives health care services from another affiliated, or contracted, or owned outpatient facility would be counted as two outpatient visits. The definition includes visits to both on-site (on the premises of the hospital or institution) and off-site outpatient facilities. It includes outpatient visits previously reported as a separate measure under the Dental School.

Data Limitations: Some outpatient visits are not recorded, resulting in potential underreporting of this institutional volume indicator.

Data Source: Hospitals and clinics affiliated with, contracted with, or owned, operated, and funded by the health-related institutions will collect this data. To the extent possible, data should be gathered from the institutions' patient accounting, patient registration or medical records information systems.

Methodology: The total number of outpatient visits during the fiscal year. To the extent possible, the total should exclude outpatient visits associated with health care providers who are not employed by the institution but may teach residents and students.

Purpose/Importance: This measure is an indicator of the number of outpatients who are treated and not admitted to a hospital bed (inpatient).

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year. In some cases, affiliated institutions will provide year-end data which reflect different reporting periods.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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Total Number of Inpatient Days

Definition: An "inpatient day" occurs when an individual, who is admitted by institutional faculty, or post-graduate trainee, occupies a hospital bed at the time that the official census is taken at each hospital affiliated with, contracted with, or owned, operated, and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. One patient occupying one room for two nights would be counted as two inpatient days.

Data Limitations: None.

Data Source: Hospitals affiliated with, contracted with, or owned, operated, and funded by the health-related institutions will collect this data. This data should be gathered from the hospitals' patient accounting, patient registration or medical records information systems.

Methodology: The total number of inpatient days during a fiscal year. To the extent possible, the total should exclude outpatient visits associated with health care providers who are not employed by the institution but may teach residents and students.

Purpose/Importance: This measure is an indicator of the number of inpatient days provided by an affiliated hospital.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year. In some cases, affiliated institutions will provide year-end data which reflect different reporting periods.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Net Revenue as a Percent of Gross Revenues

Definition: "Net revenue" is the total dollar amount of gross patient charges, less un-sponsored charity care, bad debts, contractual allowances and other deductions, earned by hospitals and clinics owned, operated and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period.

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Data Limitations: None.

Data Source: Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' accounting information system.

Methodology: The dollar amount of net revenue during the fiscal year, divided by the total dollar amount of gross patient charges during the fiscal year.

Purpose/Importance: This measure is an indicator of the net revenue generated by state- owned hospitals or clinics.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Net Revenue per Equivalent Patient Day

Definition: The dollar amount of net revenue per inpatient day adjusted for equivalent outpatient activity provided in hospitals and clinics owned, operated and funded by a health related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. "Net revenue" is gross patient charges, less un-sponsored charity care, bad debts, contractual allowances and other deductions. "Equivalent patient days" is the combination of (actual) patient days for inpatient revenue and the calculated (equivalent) patient days for outpatient revenue.

Data Limitations: While commonly used by hospitals to evaluate cost per unit of performance, significant differences in the mix of outpatients against inpatients can make comparisons between hospitals difficult. Furthermore, reimbursement methodologies employed by payors are often significantly different for inpatient and outpatient care, complicating inter-institutional comparisons, and even year-to-year comparisons of the single institution.

Data Source: Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' accounting information system.

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Methodology: The dollar amount of net revenue during the fiscal year, divided by equivalent patient days during the fiscal year.

Purpose/Importance: This measure is an indicator of the net revenue generated per patient day.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Operating Expenses per Equivalent Patient Day

Definition: The dollar amount of operating expenses per inpatient day adjusted for equivalent outpatient activity provided in hospitals and clinics owned, operated and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. "Equivalent patient days" is the combination of (actual) patient days for inpatient revenue and the calculated (equivalent) patient days for outpatient revenue.

Data Limitations: None.

Data Source: Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' accounting information system.

Methodology: The dollar amount of operating expenses during the fiscal year, divided by equivalent patient days during the fiscal year.

Purpose/Importance: This measure is an indicator of the amount of operating expenditures per patient day.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

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New *Measure*: No.

Desired Performance: Higher than target.

Personnel Expenses as a Percent of Operating Expenses

Definition: The dollar amount of personnel expenses as a percentage of total operating expenses in hospitals and clinics owned, operated and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. "Personnel expenses" are full-time and part-time employee's salaries and all related employee benefits plus expenses for contracted labor.

Data Limitations: None.

Data Source: Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' accounting information system.

Methodology: The dollar amount of personnel expenses during the fiscal year, divided by the total dollar amount of operating expenses during the fiscal year.

Purpose/Importance: This measure is an indicator of the proportion of the operating budget expended on personnel expenses.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Total Number of MD or DO Residents

Definition: M.D. or D.O. filled positions at any level in ACGME or AOA accredited residency programs including sub-specialty programs as of July 1 of the current calendar year. Do not include physicians undertaking post-residency training that is not considered to be part of the accredited residency program. Do not include podiatry residents.

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Data Limitations: None.

Data Source: Institutional records.

Methodology: The total number of residents as of September 1 of the current calendar year.

Purpose/Importance: Long-term data of this measure can be analyzed to evaluate trends in the number of residents in Texas medical schools.

Reporting Period: This measure is reportable in November and represents the results of data compiled as of September 1 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: Yes.

Desired Performance: Higher than target.

Minority M.D. and D.O. Residents as a Percent of Total M.D. or D.O. Residents

Definition: M.D. or D.O. residents as of July 1 of the current calendar year who identify themselves as Hispanic (all categories), Black, American-Indian, or Alaskan Native. The definition includes permanent residents of the U.S. but excludes non-U.S. residents and Asian-Americans.

Data Limitations: None.

Data Source: Institutional records.

Methodology: The number of minority residents as of July 1 of the current calendar year, divided by the total number of residents as of July 1 of the current calendar year.

Purpose/Importance: This measure is an indicator of the effectiveness of the institution's efforts to attract minorities to its post-graduate residency training programs.

Reporting Period: This measure is reportable in November and represents the results of data compiled as of July 1 of the current calendar year.

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Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Percent of Medical Residency Completers Practicing in Texas

Definition: The percentage of physicians who are practicing medicine at a Texas address two years after completing an institutionally-affiliated and accredited residency training program in Texas as of August 31 of the current calendar year.

Data Limitations: The decision of practice location by a physician who completes a residency training program at the University of Texas MD Anderson Cancer Center is not controlled by the institution.

Data Source: Licensure and practice data provided by the Texas State Board of Medical Examiners to the reporting institution.

Methodology: The number of physicians who are practicing medicine in Texas two years after completing training in Texas as of August 31 of the current calendar year, divided by the total number of physicians who completed training in Texas two post-graduate years prior.

Purpose/Importance: This measure is an indicator of the number of physicians trained in Texas who remain in the state to practice medicine.

Reporting Period: This measure is reportable in November and represents the calculation of results compiled as of August 31 of the current calendar year for residents completing training two post-graduate years prior. (e.g., results as of August 31, 1998 for resident completing training during the 1996 post-graduate year.)

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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Total Gross Patient Charges for Un-sponsored Charity Care Provided in State Facilities

Definition: The total dollar amount of gross patient charges for un-sponsored charity care provided in hospitals and clinics owned, operated and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. Use the definition of un-sponsored charity care included in Article III, Special Provisions of the General Appropriations Act, that coincides with the reporting period.

Data Limitations: Annual charges include inflationary adjustments that make year-to-year comparisons difficult. Furthermore, changes in charity assignment and accounting policies may impact this measure. Additionally, changes in economic conditions and private and government insurance availability may increase or decrease the total number of patients needing care funded by charity.

Data Source: Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. The total should be consistent with the total reported in Schedule C-1A of the institution's Annual Financial Report.

Methodology: The total dollar amount of gross patient charges for un-sponsored charity care provided during the fiscal year. Do not include faculty practice plan charges.

Purpose: This measure identifies the total un-sponsored charity care provided in the hospital and clinics of the institution.

Total Uncompensated Care Provided in State-owned Facilities

Definition: The total dollar amount of uncompensated care provided in hospitals and clinics owned, operated and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. Use the definition of uncompensated care included in Article III, Special Provisions of the General Appropriations Act, that coincides with the reporting period.

Data Limitations: Changes in charity assignment and accounting policies may impact this measure. Additionally, changes in economic conditions and private and government insurance availability may increase or decrease the total number of patients needing care funded by charity.

Data Source- Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. The total should be consistent with the total reported in Schedule C-1A of the institution's Annual Financial Report.

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Methodology: The total dollar amount of uncompensated care provided during the fiscal year. Do not include faculty practice plan.

Purpose: This measure identifies the total uncompensated care provided in the hospital and clinics of the institution.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: Yes.

Desired Performance: Higher than target.

Total Gross Patient Charges for Un-sponsored Charity Care Provided by Faculty

Definition: The total dollar amount of gross patient charges for un-sponsored charity care provided through faculty physician practice plans (i.e., PRS, MSRDP, PIP) during the reporting period. Use the definition of un-sponsored charity care included in Article III, Special Provisions of the General Appropriations Act that coincides with the reporting period. If an institution chooses to use a statistical sample in determining indigent care status as allowed under this definition, the sample methodology must be: (1) consistent with the methodology used by all other academic health centers; and (2) pre-filed with the Legislative Budget Board and the Governor's Office of Budget and Planning. The State Auditor will not certify the measure unless the methodology meets these two qualifications. The definition applies to charges by all practice plans, including medical, dental, allied health, nursing or other health care discipline.

Data Limitations: Annual charges include inflationary adjustments that make year-to-year comparisons difficult. Furthermore, changes in charity assignment and accounting policies may impact this measure. Additionally, changes in economic conditions and private and government insurance availability may increase or decrease the total number of patients needing care funded by charity.

Data Source: Annual Financial Report, Schedule D-6.

Methodology: The total dollar amount of gross patient charges for un-sponsored charity care provided during the fiscal year. Do not include facility charges.

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Purpose: This measure identifies the total un-sponsored charity care provided by the faculty of the institution through the practice plan.

Total Uncompensated Care Provided by Faculty

Definition: The total dollar amount of uncompensated care provided through faculty physician practice plans (i.e., PRS, MSRDP, PIP) during the reporting period. Use the definition of uncompensated care included in Article III, Special Provisions of the General Appropriations Act that coincides with the reporting period. The definition applies to all practice plans, including medical, dental, allied health, nursing or other health care discipline.

Data Limitations- Changes in charity assignment and accounting policies may impact this measure. Additionally, changes in economic conditions and private and government insurance availability may increase or decrease the total number of patients needing uncompensated care.

Data Source: Annual Financial Report, Schedule D-6.

Methodology: The total dollar amount of uncompensated care provided during the fiscal year. Do not include facility.

Purpose: This measure identifies the total uncompensated care provided by the faculty of the institution through the practice plan.

Reporting Period: This measure is reportable in November.

Calculation Type: Non-cumulative.

New Measure: Yes

Desired Performance: Higher than target.

State Support for Patient Care as a Percent of Un-Sponsored Charity Care

Definition: Total dollar amount of General Revenue Fund appropriations expended for patient care in hospitals and clinics owned, operated and funded by a health-related institution as a percentage of un-sponsored charity

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care provided during the reporting period. Use the definition of un-sponsored charity care included in Article III, Special Provisions of the General Appropriations Act that coincides with the reporting period.

Data Limitations: Changes in charity assignment and accounting policies may impact this measure. Additionally, changes in economic conditions and private and government insurance availability may increase or decrease the total number of patients needing care funded by charity.

Data Source: Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' accounting information system.

Methodology: Total dollar amount of the General Revenue Fund appropriations expended for patient care during the fiscal year, divided by the total gross charges for un-sponsored charity care provided during the fiscal year.

Purpose: This measure indicates the proportionality of the state contribution to the cost of providing patient care at the institution to the total gross charges for un-sponsored charity care.

State General Revenue Support for Uncompensated Care as a Percent of the estimated cost of Uncompensated Care

Definition: Total dollar amount of General Revenue Fund appropriations expended for Uncompensated Care in hospitals and clinics owned, operated and funded by a health- related institution as a percentage of the estimated cost of Uncompensated Care provided during the reporting period. The definition of estimated cost of Uncompensated Care is that which is included in Article III, Special Provisions of the General Appropriations Act, that coincides with the reporting period.

Data Limitations: Changes in charity assignment and accounting policies may impact this measure. Additionally, changes in economic conditions and private and government insurance availability may increase or decrease the total number of patients needing care funded by charity.

Data Source: Hospitals and clinics owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' accounting information system.

Methodology: Total dollar amount of the General Revenue Fund appropriations expended for patient care during the fiscal year, divided by the total uncompensated care provided during the fiscal year.

Purpose: This measure indicates the proportionality of the state contribution to the cost of providing patient care at the institution to the total uncompensated care.

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Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: Yes.

Desired Performance: Higher than target.

Administrative Cost as Percent of Total Expenditures

Definition: The dollar amount of expenditures for Institutional Support as a percentage of Total Current Funds expenditures, excluding auxiliary enterprises and the results of service department operations during the reporting period. "Institutional Support" includes costs associated with executive management, fiscal operations, general administration and logistical services, administrative computing support, and public relations/development as defined by the National Association of College and University Business Officers.

Data Limitations: Determination of certain administrative expenses is made by a judgment of primary purpose, and is therefore subjective in interpretation.

*Data Source***:** Institutional records and the Annual Financial Report**.**

Methodology: The amount of Institutional Support Expenses divided by the Total Expenses, excluding auxiliary enterprises and the results of service department operations.

Purpose/Importance: This measure is an indicator of the proportion of the operating budget expended on administrative costs.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Lower than target.

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Outpatient-related Charges as a Percent of All Charges by Faculty

Definition: The dollar amount of gross patient charges provided by faculty to outpatients as a percentage of the total dollar amount of gross patient charges provided by faculty to all patients seen in a hospital or clinic affiliated with, contracted with, or owned, operated and funded by a health-related institutions (including the Texas Department of Criminal Justice Hospital) during the reporting period. An outpatient is an individual receiving health care services, including emergency room services, but is not admitted to a hospital bed. The dollar amount should include charges for both on-site (on the premises of the hospital or institution) and off-site clinic activities.

Data Limitations: None.

Data Source: Hospitals and clinics affiliated with, contracted with, or owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' patient accounting information system.

Calculation: The dollar amount of gross outpatient-related charges during the fiscal year, divided by the total dollar amount of gross patient charges during the fiscal year. Do not include facility charges.

Purpose: This measure is an indicator of the amount of services provided on an outpatient basis.

Percent of Patient Charges to Managed Care Contracts by Faculty

Definition: The dollar amount of gross patient charges by faculty provided to patients whose third-party insurance is with a managed care company as a percentage of total gross patient care changes by faculty during the reporting period. "Patients" are individuals who are seen or admitted by institutional faculty, or post graduate trainees, in a hospital or clinic affiliated with, contracted with or owned, operated, and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. A managed care company is defined as any HMO or PPO that has contracted to reimburse a hospital or clinic for less than billed charges. The definition includes contracts with Medicare and Medicaid HMOs but excludes traditional Medicare and Medicaid. The definition also includes contracts on correctional managed health care.

Data Limitations: None.

Data Source: Hospitals and clinics affiliated with, contracted with, or owned, operated and funded by the health-related institutions will collect this data. This data should be gathered from the institutions' patient accounting information system.

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Calculation: The dollar amount of gross managed care-related charges during the fiscal year, divided by the total dollar amount of gross patient charges during the fiscal year. Do not include facility charges.

Purpose: This measure is an indicator of the percent of patients of an affiliated hospital or clinic who are enrolled in a managed care plan.

Total External Research Expenditures

Definition: The total expenditures for the conduct of research and development from external sources during the reporting period. The definition excludes expenditures of dollars appropriated directly to the institution or state funds transferred from other state agencies and institutions (e.g., Advanced Research or Advanced Technology Program Funds) or institutionally-controlled funds. The exclusion of "expenditures of dollars appropriated directly to the institution" applies to both general revenue funds and local funds. The total may include indirect costs and fringe benefits.

Data Limitations: None.

Data Source: Institutional records and the Survey of Research Expenditures.

Methodology: The total dollar amount of expenditures for the conduct of research and development from external sources during the fiscal year. The total should equal the sum of federal and private expenditures for the conduct of research and development that is reported to the Texas Higher Education Coordinating Board in the Survey of Research Expenditures.

Purpose/Importance: This measure is an indicator of the level of research dollars generated and of the scope of the institution's research mission.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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External Research Expenditures as Percent of Total State Appropriations

Definition: The total expenditures for the conduct of research and development from external sources as defined by Outcome Measure R-1 as a percentage of total expenditures of dollars appropriated directly to the institution during the reporting period. "Dollars appropriated directly to the institution" includes both general revenue funds and local funds. It excludes appropriated funds transferred from other state agencies and institutions.

Data Limitations: None.

Data Source: Institutional records and the Survey of Research Expenditures.

Methodology: The dollar amount of expenditures for the conduct of research and development from external sources during the fiscal year, divided by the total expenditures of dollars appropriated directly to the institution during the fiscal year.

Purpose/Importance: This measure is an indicator of the proportion of the institution's expenditures on research.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

External Research Expenditures as a Percent of State Appropriations for Research

Definition: The total expenditures for the conduct of research and development from external sources as defined by Outcome Measure R-1 as a percentage of total research dollars appropriated directly to the institution during the reporting period. Dollars appropriated directly to the institution" includes both general revenue funds and local funds. It excludes appropriated funds transferred from other state agencies and institutions.

Data Limitations: None.

Data Source: Institutional records and the Survey of Research Expenditures.

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Methodology: The dollar amount of expenditures for the conduct of research and development from external sources during the fiscal year, divided by the total expenditures of dollars appropriated directly to the institution during the fiscal year.

Purpose/Importance: This measure is an indicator of the proportion of the institution's expenditures on research.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Value of Lost or Stolen Property

Definition: The total net book value of inventoried property that is reported to the Comptroller of Public Accounts as lost or stolen for the fiscal year being reported.

Data Limitations: None.

Data Source: Institutional data files and State Property Accounting System reports.

Methodology: The total net book value of inventoried property reported as lost or stolen (SPA codes 17, 18, 20, or 21) during the fiscal year. Net book value is defined as historical cost [plus or minus any appropriate increases or reductions in value] less accumulated depreciation.

Purpose/Importance: This measure is an indicator of the value of property lost or stolen during a fiscal year.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

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New Measure: No.

Desired Performance: Lower than target.

Percent of Property Lost or Stolen

Definition: The percent of the total net book value of inventoried property that is reported to the Comptroller of Public Accounts as lost or stolen for the fiscal year being reported.

Data Limitations: None.

Data Source: Institutional data files and State Property Accounting System (SPA) records.

Methodology: The total net book value of property reported as lost or stolen (SPA codes 17, 18, 20, or 21) during the fiscal year divided by the total depreciated cost of inventoried property at the end of the fiscal year being reported. Net book value is defined as historical cost [plus or minus any appropriate increases or reductions in value] less accumulated depreciation.

Purpose/Importance: This measure is an indicator of the magnitude of property lost or stolen during a fiscal year.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of data compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Lower than target.

Allied Health Enrollment

Definition: Students enrolled in Coordinating Board-approved allied health degree or certificate programs during the reporting period.

Data Limitations: None.

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Data Source: Office of the Registrar at the reporting institution.

Methodology: The total unduplicated number of students enrolled on the official census day of each semester of the academic year.

Purpose: This measure indicates the number of students enrolled in the allied health school at the institution. Long-term data can be analyzed to evaluate trends in allied health enrollment.

Percent of Allied Health Graduates Passing Certification/Licensure Examination on the First Attempt

Definition: Allied health graduates or eligible students in a discipline that offers or requires an external certification or licensure who pass the examination on the first attempt during the reporting period.

Data Limitations: None.

Data Source: Records of licensure exam performance provided by the applicable licensing/certifying agencies to the reporting institution. Those records may be supplemented by information provided directly by graduates.

Methodology: The number of graduates or eligible students who pass an external examination on the first attempt during the fiscal year, divided by the total number of graduates or eligible students taking an external examination for the first time during the fiscal year.

Purpose/Importance: This measure is an indicator of the effectiveness of the institution's instructional program in preparing graduates for licensure.

Reporting Period: Fiscal year. This measure is reportable in November and represents the calculation of results compiled from September 1 of the previous calendar year through August 31 of the current calendar year.

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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Percent of Allied Health Graduates Licensed or Certified in Texas

Definition: Allied health graduates in a discipline that offers or requires an external certificate or licensure who are licensed or certified to practice in Texas two years after completing their certificate or degree programs as of August 31 of the current calendar year.

Data Limitations: None.

Data Source: Records of licensure status provided by the applicable licensing/certifying agencies to the reporting institution. Those records may be supplemented by information provided directly by graduates.

Methodology: The number of graduates who are licensed or certified to practice in Texas two years after completing their degrees as of August 31 of the current calendar year, divided by the total number of graduates in a discipline that offers or requires an external certificate or licensure two academic years prior.

Purpose/Importance: This measure is an indicator of the number of allied health school graduates who remain in Texas to practice.

Reporting Period: This measure is reportable in November and represents the calculation of results compiled as of August 31 of the current calendar year for graduates during the previous academic year. (e.g., results as of August 31, 1999 for graduates during the 1998 academic year.)

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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F.3 Definitions of Performance Measures Not Submitted to the Legislative Budget Board

Graduate School of Biomedical Sciences (GSBS) Students - This is the number of students that have an advisor from MD Anderson. Currently the UTHSC-H reports all GSBS students. MD Anderson does not report their students to prevent duplication of numbers.

Postdoctoral Fellow/Trainee - Any individual holding a Ph.D. or the equivalent degree required for the research position held. A Postdoctoral Fellow usually works with a mentor for three, but no more than 6 years.

Research Trainee - A broad category that includes Interns/students/graduate students holding a Bachelor's degree or higher who may be from an external institution or enrolled in an advanced educational program and are at MDACC to acquire practical experience or to receive academic credit from their sponsoring institution.

F.4 Explanation for Significant Variances in Legislative Budget Board Measures

Percent of Residency Completers Practicing in Texas: The % residency completers practicing in Texas projected in July 2012 for FY 2014 was below the actual % by 2%.

Total Uncompensated Charity Care Provided by Faculty: The uncompensated care for faculty projected in 2012 were based upon historical projections of 7% for both Technical and Professional, were provided based on historical data at that particular time and we anticipated an increase in UCC. However, we experienced a decrease in the actual FY 14 uncompensated care cost, in three of four reported areas comprising UCC: Medicare, Medicaid and Indigent. As evidenced in our FY 14 financial statements and monthly UCC reports, we noticed the payor mix starting to shift in ways that likely would affect and reduce UCC. This was caused by the Affordable Care Act.

Administrative Costs as a Percentage of Total Expenditures:
The administrative cost measure exceeded the target established in 2012 due to increased expenditures for the ERP (Peoplesoft) system and Electronic Health Records in the Information Technology Budget.

Total Uncompensated Charity Care Provided in State Facilities: The uncompensated care for faculty projected in 2012 were based upon historical projections of 7% for both Technical and Professional, were provided based on historical data at that particular time and we anticipated an increase in UCC. However, we experienced a decrease in the actual FY 14 uncompensated care cost, in three of four reported areas comprising UCC: Medicare, Medicaid and Indigent. As evidenced in our FY 14 financial statements and monthly UCC reports, we noticed the payor mix starting to shift in ways that likely would affect and reduce UCC. This was caused by the Affordable Care Act.

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Total Number of MD or DO Residents: The actual residency slots for FY 2014 exceeded the target established in 2012 due to several programs receiving complement increases from the ACGME: Complex General Surgical Oncology +1;Hospice and Palliative Care +1; Radiation Oncology +4 (+1 per year over 4 years). Also, the institution provided additional funding for 12 additional positions.

Total Number of Outpatient Visits: The growth in outpatient visits projected for FY 2014 in 2012 were too aggressive and did not meet expectations.

Minority Residence as Percent of Total Residence: The actual minority residents as a % of total residents for FY 2014 were lower than the target established in 2012 because GME candidates are selected for interview based upon educational qualifications not race. The trainees in most of our accredited programs are then selected through NRMP match. The match uses an algorithm based on the program's ranking of qualified candidates and the rank lists submitted by the candidates. As a result we have no control over the ultimate outcome.

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F.5 The University of Texas MD Anderson Cancer Center Accountability Report

Participation - Key Measures

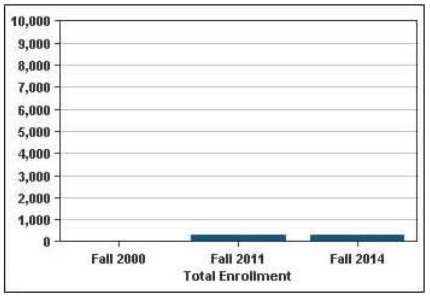
Enrollment

1. Enrollment of undergraduate, graduate, and professional students.

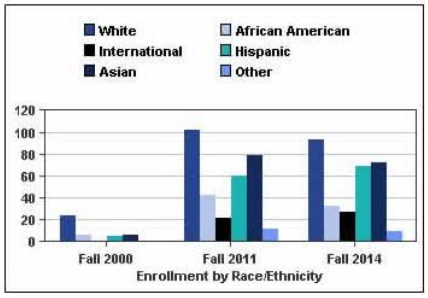
	Fall 2000	Fall 2013	Fall 2014	% Change Fall 2000 to Fall 2014	Institutional Closing the Gaps Target-Fall 2015	Closing the Gaps Completion
Total*	41	317	303	639.0%	262	115.6%
White	24 (58.5%)	97 (30.6%)	93 (30.7%)	287.5%	85	109.4%
African American	6 (14.6%)	41 (12.9%)	33 (10.9%)	450.0%	37	89.2%
Hispanic	5 (12.2%)	57 (18.0%)	69 (22.8%)	1280.0%	48	143.8%
Asian	6 (14.6%)	56 (17.7%)	72 (23.8%)	1100.0%		
International	0 (0.0%)	23 (7.3%)	27 (8.9%)	N/A		
Other	0 (0.0%)	43 (13.6%)	9 (3.0%)	N/A		

*Hispanic students, except international ones, are counted as Hispanic. Students who are "Multi-Racial one of which is African American" are included with the African American students. Asian includes Asian, Hawaiian, and Pacific Islanders. "Other" includes American Indian, Alaskan Native, Unknown, and two or more races, excluding African American. International students are shown as a separate category.

Doctor's - Professional Practice (Unduplicated Total)	0	0	0	N/A
Pharmacy	0	0	0	N/A
Dental	0	0	0	N/A
Medical	0	0	0	N/A
Audiology	0	0	0	N/A
Physical Therapy	0	0	0	N/A
Nursing Practice	0	0	0	N/A



Source: Coordinating Board Management (CBM) Report001



Source: Coordinating Board Management (CBM) Report001

Participation - Contextual Measures

	Fall 2000	Fall 2013	Fall 2014	% Change Fall 2000 to Fall 2014
2. Enrollment by School (Unduplicated Total)	41	317	303	
The University of Texas M.D. Anderson Cancer Center	41 (100.0%)	317 (100.0%)	303 (100.0%)	639.0%

	FY 2013	FY 2014
3. Number of Post-Doctoral Scholars	535	N/A

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Participation - Out-of-State Peers

	The University of Texas M.D. Anderson Cancer Center	Institution's Out-of-State Peers		
		DANA - FARBER CANCER INSTITUTE	MEMORIAL ALOAN KETTING CANCER CENTER	SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER AT JOHN HOPKINS
Headcount Enrollment Headcount enrolled for credit, disaggregated by ethnicity.				
Total	317	N/A	N/A	N/A
White	97	N/A	N/A	N/A
African American	40	N/A	N/A	N/A
Hispanic	59	N/A	N/A	N/A
Asian	57	N/A	N/A	N/A
Other	64	N/A	N/A	N/A
Gender				
Male	113	N/A	N/A	N/A
Female	204	N/A	N/A	N/A
School Enrollment Number of graduate and professional students enrolled, disaggregated gender and ethnicity.				
First Professional*				
Total	N/A	N/A	N/A	N/A
White	N/A	N/A	N/A	N/A
African American	N/A	N/A	N/A	N/A
Hispanic	N/A	N/A	N/A	N/A
Asian	N/A	N/A	N/A	N/A
Other	N/A	N/A	N/A	N/A
Gender				
Male	N/A	N/A	N/A	N/A
Female	N/A	N/A	N/A	N/A
Graduate Students				
Total	4	N/A	N/A	N/A
White	0	N/A	N/A	N/A
African American	1	N/A	N/A	N/A
Hispanic	0	N/A	N/A	N/A
Asian	1	N/A	N/A	N/A
Other	2	N/A	N/A	N/A
Gender				
Male	1	N/A	N/A	N/A
Female	3	N/A	N/A	N/A
Medical Students**				
Total	N/A	N/A	N/A	N/A
White	N/A	N/A	N/A	N/A
African American	N/A	N/A	N/A	N/A
Hispanic	N/A	N/A	N/A	N/A
Asian	N/A	N/A	N/A	N/A
Other	N/A	N/A	N/A	N/A
Gender				
Male	N/A	N/A	N/A	N/A
Female	N/A	N/A	N/A	N/A
Dental Students**				
Total	N/A	N/A	N/A	N/A
White	N/A	N/A	N/A	N/A
African American	N/A	N/A	N/A	N/A
Hispanic	N/A	N/A	N/A	N/A
Asian	N/A	N/A	N/A	N/A
Other	N/A	N/A	N/A	N/A
Gender				
Male	N/A	N/A	N/A	N/A
Female	N/A	N/A	N/A	N/A

*Data not available for Fall 2013.
**The data is collected by IPEDS every other year. The data used in this report is for 2013.

Source: IPEDS, Fall 2013

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Fall 2014 Enrollment Detail - The University of Texas M.D. Anderson Cancer Center

By Level, Age:

Age Group	Undergraduate	Post-Baccalaureate	Master's	Doctor's Research/ Scholarship	Pharmacy	Medical	Dental	Audiology	Physical Therapy	Nursing Practice	Professional Specialty	Total
Under 18	0	0	0	0	0	0	0	0	0	0	0	0
18 to 21	52	0	0	0	0	0	0	0	0	0	0	52
22 to 24	84	0	5	0	0	0	0	0	0	0	0	89
25 to 29	70	0	5	0	0	0	0	0	0	0	0	75
30 to 34	39	0	1	0	0	0	0	0	0	0	0	40
35 and over	47	0	0	0	0	0	0	0	0	0	0	47

By Level, Race/Ethnicity:

Race/ Ethnicity	Undergraduate	Post-Baccalaureate	Master's	Doctor's Research/ Scholarship	Pharmacy	Medical	Dental	Audiology	Physical Therapy	Nursing Practice	Professional Specialty	Total
White	91	0	2	0	0	0	0	0	0	0	0	93
African American	32	0	1	0	0	0	0	0	0	0	0	33
Hispanic	69	0	0	0	0	0	0	0	0	0	0	69
Asian	70	0	2	0	0	0	0	0	0	0	0	72
International	21	0	6	0	0	0	0	0	0	0	0	27
Other	9	0	0	0	0	0	0	0	0	0	0	9

By Level, Gender:

Gender	Undergraduate	Post-Baccalaureate	Master's	Doctor's Research/ Scholarship	Pharmacy	Medical	Dental	Audiology	Physical Therapy	Nursing Practice	Professional Specialty	Total
Male	95	0	3	0	0	0	0	0	0	0	0	98
Female	197	0	8	0	0	0	0	0	0	0	0	205

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Success - Key Measures

Degrees Awarded

4. Awards by race/ethnicity, level and specialty.

	FY 2000	FY 2013	FY 2014	% Change FY 2000 to FY 2014	Institutional Closing the Gaps Target-Fall 2015	Closing the Gaps Completion
Total Degrees* (does not include certificates)	N/A	148	142	N/A		
White	N/A	49	44	N/A		
African American	N/A	13	15	N/A		
Hispanic	N/A	32	22	N/A		
Asian	N/A	34	28	N/A		
International	N/A	12	10	N/A		
Other	N/A	8	23	N/A		
Level						
Certificate	N/A	1	0	N/A		
Associate	N/A	0	0	N/A		
Baccalaureate	N/A	1	0	N/A		
Graduate	N/A	0	0	N/A		
Baccalaureate	N/A	148	142	N/A	138	102.9%
Master's	N/A	0	0	N/A		
Doctor's Research/Scholarship	N/A	0	0	N/A	0	N/A
Doctor's Professional Practice	N/A	0	0	N/A		
Doctor's - Professional Practice Total	N/A	N/A	N/A	N/A		
Pharmacy	N/A	N/A	N/A	N/A		
Dental	N/A	N/A	N/A	N/A		
Medical	N/A	N/A	N/A	N/A		
Audiology	N/A	N/A	N/A	N/A		
Physical Therapy	N/A	N/A	N/A	N/A		
Nursing Practice	N/A	N/A	N/A	N/A		
Degrees by School (does not include certificates)						
The University of Texas M.D. Anderson Cancer Center	N/A	148	142	N/A		

*Hispanic students, except international ones, are counted as Hispanic. Students who are "Multi-Racial one of which is African American" are included with the African American students. Asian includes Asian, Hawaiian, and Pacific Islanders. "Other" includes American Indian, Alaskan Native, Unknown, and two or more races, excluding African American. International students are shown as a separate category.

Nursing and Allied Health

5. Degrees and certificates awarded in nursing

	FY 2000	FY 2013	FY 2014	% Change FY 2000 to FY 2014	Closing the Gaps Target-FY 2015*	Closing the Gaps Completion*
Nursing (Degrees Only)	N/A	0	0	N/A		
Certificate	N/A	0	0	N/A		
Associates	N/A	0	0	N/A		
Baccalaureate	N/A	0	0	N/A		
Graduate	N/A	0	0	N/A		
Baccalaureate	N/A	0	0	N/A	0	N/A
Master's	N/A	0	0	N/A		
Doctor's Research/Scholarship	N/A	0	0	N/A		
Doctor's Professional Practice	N/A	0	0	N/A		

Note: Total is for degrees only and does not include certificates.

* CTG target includes baccalaureate degrees and associates certificates.

6. Degrees and certificates awarded in allied health.

	FY 2000	FY 2013	FY 2014	% Change FY 2000 to FY 2014	Closing the Gaps Target-FY 2015*	Closing the Gaps Completion*
Allied Health (Degrees Only)	N/A	132	126	N/A		
Certificate	N/A	1	0	N/A		
Associates	N/A	0	0	N/A		
Baccalaureate	N/A	1	0	N/A		
Graduate	N/A	0	0	N/A		
Baccalaureate	N/A	132	126	N/A	138	91.3%
Master's	N/A	0	0	N/A		
Doctor's Research/Scholarship	N/A	0	0	N/A		
Doctor's Professional Practice	N/A	0	0	N/A		

Note: Total is for degrees only and does not include certificates.

* CTG target includes baccalaureate degrees and associates certificates.

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Success - Contextual Measures

7. Graduation Rates for graduate programs

	Fall 1995 Cohort	Fall 2008 Cohort	Fall 2009 Cohort	Point/% Change Fall 1995 to Fall 2009 Cohorts
Master's Graduation Rate				
First-time entering cohort	N/A	N/A	N/A	N/A
Percent Master's or Above	N/A	N/A	N/A	N/A

	FY 1991 Cohort	FY 2004 Cohort	FY 2005 Cohort	Point/% Change FY 1991 to FY 2006 Cohorts
Doctoral-Research Graduation Rate				
First-time entering cohort	N/A	N/A	N/A	N/A
Percent Master's Received	N/A	N/A	N/A	N/A
Percent Doctorates Received	N/A	N/A	N/A	N/A

	Fall 1995 Cohort	Fall 2008 Cohort	Fall 2009 Cohort	Point/% Change Fall 1995 to Fall 2009 Cohorts
Pharmacy				
First-time entering cohort	N/A	N/A	N/A	N/A
Graduation Rate	N/A	N/A	N/A	N/A
Medical				
First-time entering cohort	N/A	N/A	N/A	N/A
Graduation Rate	N/A	N/A	N/A	N/A
Dental (DDS)				
First-time entering cohort	N/A	N/A	N/A	N/A
Graduation Rate	N/A	N/A	N/A	N/A

	FY 2011	FY 2012	FY 2013	FY 2014	% Change FY 2011 to FY 2014
8. Student Satisfaction Medical Schools	N/A	N/A	N/A	N/A	N/A

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Success - Out-of-State Peers

Out-of-state peer data is from the Fall 2013 IPEDS report and may not match accountability data because of differences in the source of the data. Accountability measures are primarily derived from institutional data sent to the CB for CBM reports. Data reported on this out-of-state peer link is obtained from the IPEDS system of institutional reporting to the federal government. Data differences may result from different reporting periods and different definitions for the data elements. Out-of-state peers may not be comparable for some metrics. Not all out-of-state peers for health-related institutions are stand-alone health-related institutions.

Options
Return to the Success Page
Download Excel Version
Out-of-State Peer Measures and Definitions

		Institution's Out-of-State Peers		
	The University of Texas M.D. Anderson Cancer Center	DANA - FARBER CANCER INSTITUTE	MEMORIAL ALOAN KETTING CANCER CENTER	SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER AT JOHN HOPKINS
Degrees Awarded: Number of graduates by level, race/ethnicity and gender.				
Health Professions	141	N/A	N/A	N/A
White	43	N/A	N/A	N/A
African American	18	N/A	N/A	N/A
Hispanic	27	N/A	N/A	N/A
Asian	43	N/A	N/A	N/A
Other	10	N/A	N/A	N/A
Medicine	0	N/A	N/A	N/A
White	0	N/A	N/A	N/A
African American	0	N/A	N/A	N/A
Hispanic	0	N/A	N/A	N/A
Asian	0	N/A	N/A	N/A
Other	0	N/A	N/A	N/A
Level				
Associates	N/A	N/A	N/A	N/A
Bachelors	141	N/A	N/A	N/A
Master's	N/A	N/A	N/A	N/A
Doctor's Research/Scholarship	N/A	N/A	N/A	N/A
Doctor's Professional Practice	N/A	N/A	N/A	N/A
Gender				
Male	43	N/A	N/A	N/A
Female	98	N/A	N/A	N/A
Nursing and Allied Health Graduates: Number of degrees awarded in nursing/allied health by level.				
Total Degrees	129	N/A	N/A	N/A
Certificate	0	N/A	N/A	N/A
Associates	0	N/A	N/A	N/A
Bachelors	129	N/A	N/A	N/A
Master's	0	N/A	N/A	N/A
Doctor's Research/Scholarship	0	N/A	N/A	N/A

Source: IPEDS, Fall 2013

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Graduates Detail (FY 2014)- The University of Texas M.D. Anderson Cancer Center

Success
By 2015, increase by 50 percent the number of degrees, certificates, and other identifiable student successes from high quality programs.

By Level, Race/Ethnicity:

Race/Ethnicity	Certificate	Bachelor's	Master's	Doctor's Research/Scholarship	Doctor's Professional Practice	Total
White	0	44	0	0	0	44
African American	0	15	0	0	0	15
Multi-racial one of which is African American	0	0	0	0	0	0
Hispanic	0	22	0	0	0	22
Asian	0	28	0	0	0	28
International	0	10	0	0	0	10
Other	0	23	0	0	0	23

By Level, Gender:

Gender	Certificate's	Bachelor's	Master's	Doctor's Research/Scholarship	Doctor's Professional Practice	Total
Male	0	55	0	0	0	55
Female	0	87	0	0	0	87

FY 2014 Degree Detail - The University of Texas M.D. Anderson Cancer Center

By Level, Race/Ethnicity:

Race/Ethnicity	Certificate*	Bachelor's	Master's	Doctor's Research/Scholarship	Doctor's Professional Practice	Total
White	0	44	0	0	0	44
African American	0	15	0	0	0	15
Multi-racial one of which is African American	0	0	0	0	0	0
International	0	10	0	0	0	10
Hispanic	0	22	0	0	0	22
Asian	0	28	0	0	0	28
Other	0	23	0	0	0	23

*Certificates not included in the total

By Level, Gender:

Gender	Certificate*	Bachelor's	Master's	Doctor's Research/Scholarship	Doctor's Professional Practice	Total
Male	0	55	0	0	0	55
Female	0	87	0	0	0	87

*Certificates not included in the total

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Excellence - Key Measures

Certification and Licensure

9. Licensure/certification rate on state or national exams.

	FY 2000	FY 2012	FY 2013	FY 2014	Point Change FY 2000 to FY 2014
Nursing pass rate	N/A	N/A	N/A	N/A	N/A
Allied Health pass rate	N/A	94.0%	94.0%	90.0%	N/A
Medical pass rate	N/A	N/A	N/A	N/A	N/A
Dental pass rate	N/A	N/A	N/A	N/A	N/A
Pharmacy pass rate	N/A	N/A	N/A	N/A	N/A

Nursing Baccalaureate Graduate Success

	FY 2000	FY 2011	FY 2012	FY 2013	% Change FY 2000 to FY 2013
10. Nursing baccalaureate graduates employed and/or enrolled	N/A	N/A	N/A	N/A	N/A

Faculty Awards

	Fall 2000	Fall 2013	Fall 2014	% Change Fall 2000 to Fall 2014
11. Nobel Prize Winners and National Academies.				
National Academy of Science			3	N/A
National Academy of Engineering				N/A
Nobel Prize				N/A
Academy of Arts and Sciences		1	4	N/A
Institute of Medicine		3	9	N/A
American Academy of Nursing				N/A
American College of Dentists				N/A
Howard Hughes Medical Institute				N/A

Quality Enhancement Plan

12. Quality Enhancement Plan, Including Reaffirmation Year

The SACS QEP website for M. D. Anderson Cancer is located at http://www2.mdanderson.org/app/ir/SACSQEP/QEP.cfm

Excellent Programs

13. Excellent Programs

Highlighted Excellent Programs 1

The website for the Institute for Applied Cancer Science is located at
http://www.mdanderson.org/education-and-research/departments-programs-and-labs/programs-centers-institutes/institute-for-applied-cancer-science/index.html

Highlighted Excellent Programs 2

The website for the Molecular Carcinogenesis (Science Park) is located at
http://www.mdanderson.org/education-and-research/departments-programs-and-labs/departments-and-divisions/science-park/index.html

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Excellence - Contextual Measures

	Fall 2000	Fall 2013	Fall 2014	%/Point Change Fall 2000 to Fall 2014
14. Faculty by Race/Ethnicity*				
White	42	1,078	1,049	2397.6%
African American	6	67	67	1016.7%
Hispanic	3	134	135	4400.0%
Asian	12	701	731	5991.7%
International	0	169	209	N/A
Other	0	46	44	N/A
Faculty by Gender				
Male	22	1,356	1,378	6163.6%
Female	41	839	857	1990.2%

*Hispanic faculty members, except international ones, are counted as Hispanic. Faculty who are "Multi-Racial one of which is African American" are included with the African American faculty. Asian includes Asian, Hawaiian, and Pacific Islanders. "Other" includes American Indian, Alaskan Native, Unknown, and two or more races, excluding African American. International faculty are shown as a separate category.

15. Endowed Professorships and Chairs	Fall 2000	Fall 2013	Fall 2014	%/Point Change Fall 2000 to Fall 2014
Endowed Professorships	48	68	85	77.1%
Percent unfilled	33%	9%	18%	- 15.7
Percent of total tenured/tenure-track faculty	8%	10%	11%	1.1
Endowed Chairs	53	81	79	49.1%
Percent unfilled	17%	28%	14%	- 3.1
Percent of total tenured/tenure-track faculty	6%	12%	11%	5.3

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Research - Key Measures

Federal and Private Research Expenditures

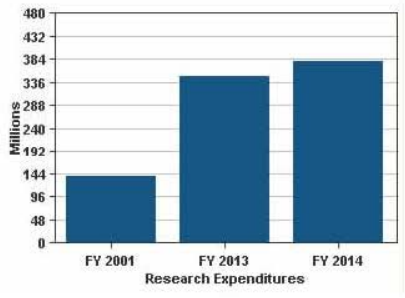
	FY 2001	FY 2013	FY 2014	% Change FY 2001 to FY 2014
16. Sponsored (federal and private) research expenditures ($ Million)	$ 139.660	$ 350.192	$ 381.310	173.0%

Federal and Private Research Expenditures per FTE Faculty

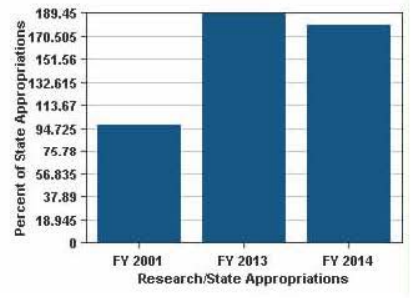
	FY 2001	FY 2013	FY 2014	% Change FY 2001 to FY 2014
17. Sponsored (federal and private) research expenditures per tenure/tenure-track FTE faculty (includes research faculty only)	$23,276,633	$796,852	$637,643	- 97.3%

Research as a Percent of State Appropriations

	FY 2001	FY 2013	FY 2014	Point Change FY 2001 to FY 2014
18. Sponsored (federal and private) research as a percent of state appropriations	97.4%	189.5%	180.1%	82.7



Source: THECB Annual Research Expenditures Report



Source: THECB Annual Research Expenditures Report

The University of Texas MD Anderson Cancer Center
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Research - Contextual Measures

	FY 2010	FY 2013	FY 2014	%/Point Change FY 2010 to FY 2014
19. Tenure/tenure-track FTE faculty with extramural grants				
Number	411	472	0	-100.0%
Percent	66.2%	71.2%	0%	-66.2

	FY 2001	FY 2013	FY 2014	% Change FY 2001 to FY 2014
20. Research Expenditures ($ Millions)	**$ 210.237**	**$ 670.570**	**$ 736.193**	**250.2%**
Federal	$ 91.543	$ 182.971	$ 158.986	73.7%
State	$ 58.853	$ 218.067	$ 241.307	310.0%
Private	$ 48.117	$ 167.222	$ 222.324	362.0%
Institutional	$ 11.723	$ 102.311	$ 113.576	868.8%
Restricted Research Expenditures (amount shown is a subset of the categories above)	**$ 109.997**	**$ 300.415**	**$ 347.459**	215.9%

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Research - Out-of-State Peers

	The University of Texas M.D. Anderson Cancer Center	Institution's Out-of-State Peers		
		DANA - FARBER CANCER INSTITUTE	MEMORIAL ALOAN KETTING CANCER CENTER	SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER AT JOHN HOPKINS
Research Expenditures Current year research expenditures. **Research Expenditures**				
Research Funds Percent of sponsored (external/federal) research funds. **Percent of sponsored (external/federal) research funds**				

Source: IPEDS, Fall 2013

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Institutional Effectiveness - Key Measures

Administrative Cost

	FY 2000	FY 2013	FY 2014	Point Change FY 2000 to FY 2014
21. Institutional support as a percent of total expenditures	N/A	7.6%	7.7%	N/A

Instruction and Operations Formula Funding

22. Formula funding per full-time equivalent student.*

	FY 2006	FY 2013	FY 2014	% Change FY 2006 to FY 2014
Medical Education	N/A	N/A	N/A	N/A
Dental Education	N/A	N/A	N/A	N/A
Biomedical Sciences	N/A	N/A	$0	N/A
Health Professions Education	$17,883	$7,744	$9,406	- 47.4%
Nursing Education	N/A	N/A	N/A	N/A
Public Health Education	N/A	N/A	N/A	N/A
Pharmacy Education	N/A	N/A	N/A	N/A

*Due to a fiscal year reporting basis for FTSE and the inclusion of the Small Class Supplement in appropriated dollars, funding per FTSE may differ from published rates.

Facilities

	Fall 2002	Fall 2012	Fall 2013	% Change Fall 2002 to Fall 2013
23. Campus Condition Index Value	$830,488,562	N/A	N/A	N/A

Estimated instructional expenses per FTE Student and per FTE Faculty

24. Estimated instructional expenditures

	FY 2002	FY 2013	FY 2014	% Change FY 2002 to FY 2014
Estimated instructional expenses per FTE Student	N/A	N/A	N/A	N/A
Estimated instructional expenses per FTE Faculty	N/A	N/A	N/A	N/A

The University of Texas MD Anderson Cancer Center
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Institutional Effectiveness - Contextual Measures

	FY 2002	FY 2014	FY 2015	% Change FY 2002 to FY 2015
26. Average cost of (resident undergraduate) tuition and fees for 30 SCH.	N/A	$3,911	$4,557	N/A

	FY 2010	FY 2012	FY 2013	FY 2014	% Change FY 2010 to FY 2014
26. True and Term Endowment ($ millions)	N/A	N/A	$ 891.9	$ 900.7	205.9%
27. Quasi Endowment ($ millions)	N/A	N/A	$ 219.8	$ 336.1	- 49.7%
28. Total Endowment ($ millions)	$ 962.5	$ 1,056.9	$ 1,111.7	$ 1,236.8	28.5%

	FY 2012	FY 2013	FY 2014	% Change FY 2012 to FY 2014
29. Institutional revenue *	**$751,669,170**	**$866,837,017**	**$831,847,223**	**10.7%**
State appropriations	$181,997,507	$184,851,031	$211,741,551	16.3%
Tuition and fees	$1,282,629	$1,241,361	$1,447,921	12.9%
Federal Grants and Contracts	$201,793,922	$181,487,826	$159,177,347	- 21.1%
Institutional Resources	$366,595,112	$499,256,799	$459,480,404	25.3%
Constitutional Funds	N/A	$0	$0	N/A
Total Revenue with Constitutional Funds	**N/A**	**$866,837,017**	**$831,847,223**	**N/A**

*Does not include constitutional funds

30. Historically Underutilized Business (HUB)	FY 2000	FY 2013	FY 2014	% Change FY 2000 to FY 2014
HUB Expenditures without construction (Thousands)	**$24,240.944**	**$63,615.626**	**$47,883.245**	**97.5%**
Percent of total expenditures	9.4%	4.9%	3.7%	- 5.7
HUB Expenditures with construction (Millions)	**$ 31.520**	**$ 99.933**	**$ 69.787**	**121.4%**
Percent of total expenditures	12.2%	7.7%	5.4%	- 6.8

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Institutional Efficiency and Effectiveness - Out-of-State Peers

	The University of Texas M.D. Anderson Cancer Center	Institution's Out-of-State Peers		
		DANA - FARBER CANCER INSTITUTE	MEMORIAL ALOAN KETTING CANCER CENTER	SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER AT JOHN HOPKINS
Administrative Cost Ratio Amount expended for administrative costs as a percent of operative expenses				
Administrative costs as a percent of operating budget	1%	N/A	N/A	N/A
Appropriations State and local government appropriation revenues per FTE student.				
Appropriations per FTE student	$6,768	N/A	N/A	N/A
Expenditures Instruction expenses per FTE student.				
Instruction expenses per FTE student	$8,944	N/A	N/A	N/A

Source: IPEDS, Fall 2013

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Patient Care - Key Measures

Medical Resident Physicians

	FY 2002	FY 2014	FY 2015	Percent Change FY 2002 to FY 2015
31. Resident physicians in accredited programs				
a. Funded ACGME/AOA Resident Physicians (Total for years 1-7)	N/A	130	135	N/A
b. Unfunded ACGME/AOA and Unfunded non-ACGME/AOA Resident Physicians (Total for years 8+)	N/A	N/A	N/A	N/A
32. Primary care residents; physicians practicing in Texas				
Primary Care Resident Positions	0	N/A	N/A	N/A
Percent of Medical School Graduates Practicing in Texas	N/A	NA	N/A	N/A
Percent of Medical Graduates Entering Primary Care Residency	N/A	NA	N/A	N/A
Percent of Medical Residency Completers Practicing in Texas (2 years after completing training in Texas)	N/A	42	N/A	N/A

Patient Care - Contextual Measures

	FY 2000	FY 2013	FY 2014	% Change FY 2000 to FY 2014
33. Outpatient visits	440,000	1,338,706	1,363,008	209.8%
34. Inpatient days	131,771	207,555	202,838	53.8%
35. Ratio of Admissions to General Revenue				
To admissions	4562.2	4435.33	4458.34	- 2.3%
To charity care	83.1	75.72	95.15	14.5%
To hospital days	605.65	596.31	610.79	0.8%
To clinic visits	181.38	92.45	90.81	- 49.9%
36. Total uncompensated care provided by faculty				
Total Uncompensated Care Provided by Faculty	N/A	61,892,264	66,666,187	N/A

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F.6 Health Related Accountability Measures and Definitions

PARTICIPATION -- KEY MEASURES

1. Enrollment

Enrollment of undergraduate, graduate, and professional students.

Definition: Unduplicated fall headcount/enrollment by level, age, race/ethnicity and gender; Student's age is as of September 1 of the year. Inter-institutional are included, flex entry students are not included.

Source: Texas Higher Education Coordinating Board (THECB) Coordinating Board Management Report (CBM) CBM001, for fall semester.

PARTICIPATION -- CONTEXTUAL MEASURES

2. Enrollment by Specialty

Enrollment by School

Definition: Number and percent of undergraduate, graduate, and professional students enrolled on the 12th day of class, unduplicated fall headcount. Student's age is as of September 1 of the year. Post-baccalaureate students are in a separate category. Inter-institutional are included, flex entry students are not included.

Source: CBM001.

3. Number of Post-Doctoral Research Trainees

Number of Post-Doctoral Scholars

Definition: Ph.D., M.D./D.O., D.S.N., D.P.H., and D.D.S. research positions filled as of July 1 of the current calendar year. Only those filled research positions or fellows directly involved in research-related activities for a maximum of three reporting periods are counted. The definition includes positions or fellows in all schools within the institution but excludes medical and dental residents. Purpose/Importance: This measure is an indicator of the amount of research positions provided by an institution. The total number of post-doctoral trainees as of July 1 of the current calendar year. Definition is from LBB; data is from institutions.

Source: Institutions

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SUCCESS -- KEY MEASURES

4. Degrees Awarded

Awards by race/ethnicity, level and specialty.

Definition: Number of degrees of all levels awarded by race/ethnicity and gender and by specialty.

Source: CBM009.

5. Nursing and Allied Health

Degrees and certificates awarded in nursing

Definition: Number of degrees and certificates awarded in nursing. The CIP codes for nursing are 5116 (2000 CIP Codes) and 5138 and 5139 (2010 Codes). The total does not include certificates.

Source: CBM009.

6. Allied Health

Degrees and certificates awarded in allied health.

Definition: Number of degrees and certificates awarded in allied health. The allied health CIPs, as in Closing the Gaps, are 51.02, 51.06, 51.07, 51.08, 51.09, 51.10, 51.18, 51.23, 51.26, 51.27, 51.31, 51.32, 51.33, 51.34, 51.99. The total number does not include certificates.

Source: CBM009.

SUCCESS -- CONTEXTUAL MEASURES

7. Graduation Rates for graduate programs

Graduation Rates for graduate programs

Definition: The cohort was developed by pulling all the students coded on the CBM001 at a specific level in the fall semester and then checking the five prior years to determine if they had been coded at that level in those prior years. If students were coded at that level in the prior years, they were dropped from the cohort. The doctoral cohort was tracked for 10 years. The master's cohort was tracked for 5 years. The master’s cohort do not include students who received a master's level certificate or were classified as a doctorate student within the next 5 years (and did not earn a master’s degree).

Source: CBM001 and CBM009.

8. Student Satisfaction Medical Schools

Student Satisfaction Medical Schools

Definition: Student Satisfaction Medical Schools: Satisfaction results obtained from Association of

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American Medical Colleges (AAMC) Graduation Questionnaire (and a school-sponsored satisfaction survey for University of North Texas Health Science Center Ft. Worth).

Source: Institutions.

EXCELLENCE -- KEY MEASURES

9. Certification and Licensure

Licensure/certification rate on state or national exams.

Definition: For medical, dental, allied health, nursing and pharmacy programs, eligible students are those in a discipline that offers or requires an external certification or licensure who pass the examination on the first attempt during the reporting period. Calculation is the number of graduates or eligible students who pass an external examination on the first attempt during the fiscal year, divided by the total number of graduates or eligible students taking an external examination for the first time during the fiscal year.

Source: Legislative Budget Board.

10. Nursing Baccalaureate Graduate Success

Nursing baccalaureate graduates employed and/or enrolled

Definition: Percentage of baccalaureate nursing graduates who are employed in Texas in the fourth quarter of the calendar year following the graduation school year or enrolled in a Texas graduate program in the following fall after graduation. Public and independent institutions data are included. Only information on students who are employed in Texas are included. Students, who are self-employed, leave the state to work or continue their education are not found. * 'Employed' is not qualified as 'employed in the profession' and may include some employed out-of-state as well as military personnel.

Source: CBM001 and CBM009, UI (Unemployment Insurance) wage records and FEDES (Federal Employment Database Exchange Service include military records DOD (Department of Defense) and records for USPS (United States Postal Services) and OPM (Office of Personnel Management)

11. Faculty Awards

Nobel Prize Winners and National Academies.

Definition: Number of awards to faculty in: National Academy of Science, National Academy of Engineering, Nobel Prize winners, Academy of Arts and Sciences, Institute of Medicine, American Academy of Nursing, American College of Dentists, Howard Hughes Medical Institute.

Source: Institutions.

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12. Quality Enhancement Plan

Quality Enhancement Plan, Including Reaffirmation Year

Definition: Quality Enhancement Plan Text Box: Summarize your institution's current QEP (or proposed Plan if one has never been approved) for SACS accreditation. The QEP describes a carefully designed course of action that addresses a well-defined and focused topic or issue related to enhancing student learning. The QEP is required to be embedded within the institution's ongoing integrated institution-wide planning and evaluation process.

Source: Institutions

13. Excellent Programs

Excellent Programs

Definition: A brief description of two excellent programs at the institution with links to additional information about the programs.

Source: Institutions

EXCELLENCE -- CONTEXTUAL MEASURES

14. Faculty by Race/Ethnicity

Faculty by Race/Ethnicity

Definition: Number of faculty; Tenure/tenure-track data come from CBM008 Faculty Report using rank codes 1-4 and coded for a tenure/tenure track position and
non-tenure/tenure-track faculty are those faculty coded as non-tenure. This measure shows institutions' progress in diversifying their faculty.

Source: CBM008.

15. Endowed Professorships and Chairs

Endowed Professorships and Chairs

Definition: Total number of endowed professorships and chairs fully funded by endowment funds, number and percent of those unfilled, and percent of total tenure/tenure-track faculty positions.

Source: Institutions.

RESEARCH -- KEY MEASURES

16. Federal and Private Research Expenditures

Sponsored (federal and private) research expenditures ($ Million)

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Definition: Sponsored (federal and private) research and development expenditures. Source: THECB

Annual Research Expenditures Report.

17. Federal and Private Research Expenditures per FTE Faculty

Sponsored (federal and private) research expenditures per FTE faculty (includes research faculty only)

Definition: Sponsored (federal and private) expenditures divided by the number of fall tenured/tenure-track full-time equivalent faculty (includes only faculty members with a percent of appointment attributed to research as reported in item #13D, CBM008).

Source: THECB Annual Research Expenditures Report and CBM008

18. Research as a Percent of State Appropriations

Sponsored (federal and private) research as a percent of state appropriations

Definition: Sponsored (external/federal and private) research funds as a percent of state appropriations.

Source: THECB Annual Research Expenditures Report for research funds & Sources and Uses for general revenue appropriations.

RESEARCH -- CONTEXTUAL MEASURES

19. FTE faculty with extramural grants

Tenure/tenure-track FTE faculty with extramural grants

Definition: Number and percent of FTE tenured/tenure-track faculty holding extramural (all sources) funding are divided by the number of FTE tenured/tenure-track faculty.

Source: Institutions.

20. Research Expenditures ($ Millions)

Research Expenditures ($ Millions)

Definition: Total expenditures for research and development as reported in the annual research expenditures report from federal, state, private and institutional sources.

Source: Annual Research Expenditures Report.

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INSTITUTIONAL EFFICIENCY AND EFFECTIVENESS -- KEY MEASURES

21. Administrative Cost

Institutional support as a percent of total expenditures

Definition: The dollar amount of expenditures for Institutional Support is a percentage of Total Current Funds expenses, excluding auxiliary enterprises and the results of service department operations during the reporting period. 'Institutional Support' includes costs associated with executive management, fiscal operations, general administration and logistical services, administrative computing support, and public relations/development as defined by the National Association of College and University Business Officers.

Source: Legislative Budget Board.

22. Instruction and Operations Formula Funding

Formula funding per full-time equivalent student.

Definition: Instruction and Operations formula funding (all funds) for the fiscal year divided by full-time equivalent student by type of program. Formula appropriated dollars include the Small Class Supplement. The reporting basis for FTSE is a fiscal year basis as opposed to a formula funding basis.

Source: Appropriations bill and formula funding reports.

23. Facilities

Campus Condition Index Value

Definition: This measure is changed for fall 2011. A revised definition is forthcoming. Data through fall 2010 reflects the facilities replacement cost of educational and general assignable space (total net assignable square feet replacement value of existing Education
& General assignable space).

Source: THECB Campus Planning annual report on replacement cost.

24. Estimated instructional expenses per FTE Student and per FTE Faculty

Estimated instructional expenditures

Definition: Estimated instructional expenses divided by full-time equivalent students and by full-time equivalent faculty (does not include hospitals, clinics, public service, and auxiliary). State-Funded FTE students are those reported on the CBM001 student report or the CBM004 class report. In some fields, full-time is based on student headcount. In fields where student semester credit hours (SCH) are utilized for funding purposes, the standard CB annual measures are used: 30 SCH at the undergraduate level, 24 SCH at the master's level and 18 SCH at the doctoral level. Faculty FTEs are for ranks 1 through 6 with appointment codes 01, 03, 11, 12, 13.

Source: Sources and Uses Report and FTSE are annual from CBM001 & annual FTE faculty from CBM008.

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INSTITUTIONAL EFFICIENCY AND EFFECTIVENESS -- CONTEXTUAL MEASURES

25. Average cost of (resident undergraduate) tuition and fees for 30 SCH.

Average cost of (resident undergraduate) tuition and fees for 30 SCH.

Definition: Mandatory tuition (state legislated tuition), designated tuition (set by institutional governing boards) and mandatory fees (those charged of all students), for resident undergraduate students at 30 semester credit hours (SCH) for a fall and spring semester.

Source: College Student Budget: Survey of public colleges and universities.

26. True and Term Endowment ($ millions)

True and Term Endowment ($ millions)

Definition: True or sometimes called permanent endowment is a fund created by a donor (or other external party) with the stipulation, as a condition of the gift instrument (or other directions), that the principal is to be maintained and invested in perpetuity to produce income, investment growth, or both. A term endowment is created when a donor (or other external party) specifies that the funds must be held and invested until the passage of a specified time or the occurrence of a specified event. The donor (or other external party) also specifies what is to be done with the income and investment growth during the specified period. In some cases, those earnings are subject to a purpose restriction established in the gift instrument. Endowment funds held by a foundation for the express use of the university should be included.

Source: Institutions.

27. Quasi Endowment ($ millions)

Quasi Endowment ($ millions)

Definition: A quasi-endowment fund is created when an institution's governing board elects to invest currently available resources as if they were subject to endowment restrictions. Quasi-endowments also are referred to as funds functioning as endowments.

Source: Institutions.

28. Endowment

Total Endowment ($ millions)

Definition: Total dollar amount of endowment and ratio per full-time-equivalent (FTE) student and FTE faculty.

Source: Institutions (should match what is reported to the Council on Aid to Education).

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29. Institutional revenue

Institutional revenue

Definition: Operating funds are classified on the "Sources and Uses" report in the Total Sources and Total Uses Sections, modified by the exclusion of Auxiliary Funds, Public Service, Professional Fees, Hospital and Clinics, and Capital Outlay expense. Operating funds do not include funds classified as "Other Sources and Uses" or "Other Items not for Current Operating Use" in the Sources and Uses report. "State general revenue appropriations" includes state appropriations, state grants and contracts. State appropriations includes health and retirement benefits. Constitutional funds are included. Higher education assistance funds and available university excellence funds are excluded. All dollar figures are extracted from the "Sources and Uses" reports. A large part, but not all, of operating funds would have been reported under general funds, designated funds, and restricted funds in the old NACUBO reporting format. State and Constitutional appropriations are presented as part of operating funds for the purposes of presenting an institutional "stand-alone" regulatory view in this system." Operating funds are generally expendable for current operating purposes, which are essential to, or commonly associated with, teaching, research or the preservation of knowledge. Examples of revenue sources include state appropriations, unrestricted gifts and restricted Federal research contracts. State appropriations reported include those for the hospital (if any) as well as the medical school. Total Institutional Revenues exclude Net Auxiliary Enterprises, and Total Revenue excludes Professional Fees and Hospital and Clinic revenue.

Source: Sources and Uses Report.

30. Historically Underutilized Business (HUB)

Historically Underutilized Business (HUB)

Definition: Total HUB expenditures as a percent of total expenditures. Source: State

Comptroller's Office

PATIENT CARE -- KEY MEASURES

31. Medical Resident Physicians

Resident physicians in accredited programs

Definition: M.D. or D.O. filled positions at any level in and Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association
(AOA)-accredited residency programs including sub-specialty programs. This does not include physicians undertaking post-residency training that is not considered part of the accredited residency program.

Source: CBM00R for 1-7 years; institutions provide data for 8 years or more

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32. Medical Resident Physicians

Primary care residents; physicians practicing in Texas

Definition: For Primary care residents, M.D. or D.O. filled positions at any level in ACGME or AOA-accredited primary care residency programs. This does not include physicians undertaking post-residency training that is not considered part of the accredited residency program. Primary care includes family medicine, obstetrics and gynecology, internal medicine and pediatrics. Percent of medical school graduates practicing in Texas (LBB: I-5& H-2) are the M.D. or D.O. graduates who are practicing medicine at a Texas address as of August 31 of the current calendar year. Percent of medical school graduates entering a primary care residency (LBB: M-3) are the M.D. or D.O. students who report just prior to graduation that they are entering an accredited post-graduate program in primary care. Percent of medical residency completers practicing in Texas (LBB: I-4 & HC-1) are physicians who are practicing medicine at a Texas address two years after completing an institutionally-affiliated and accredited residency training program in Texas as of August 31 of the current calendar year.

Source: Institutions for primary care residents; CB will report LBB data for other measures

PATIENT CARE -- CONTEXTUAL MEASURES

33. Outpatient visits

Outpatient visits

Definition: The total number of outpatient visits during the fiscal year. An 'outpatient visit' occurs when the individual receives health care services, including emergency room services, but is not admitted to a hospital bed. One patient who initially visits an emergency room and is then referred to and receives health care services from another affiliated, contracted, or owned outpatient facility would be counted as two outpatient visits. The definition includes visits to both on-site (on the premises of the hospital or institution) and off-site outpatient facilities. It includes outpatient visits previously reported as a separate measure under the Dental School. A 'patient visit' occurs when an individual receives health care services from Institutional faculty, post-graduate trainees, or pre-doctoral dental students at a hospital or clinic, affiliated with, contracted with, or owned, operated and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. To the extent possible, the total should exclude outpatients visits associated with health care providers who are not employed by the institution but may teach residents and students.

Source: Institutions.

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34. Inpatient days

Inpatient days

Definition: The total number of inpatient days during a fiscal year. An 'inpatient day' occurs when an individual, who is admitted by an institutional faculty or post-graduate trainee, occupies a hospital bed at the time that the official census is taken at each hospital affiliated with, contracted with, or owned, operated, and funded by a health-related institution (including the Texas Department of Criminal Justice Hospital) during the reporting period. One patient occupying one room for two nights would be counted as two inpatient days. To the extent possible, the total should exclude inpatient days associated with health care providers who are not employed by the institution but may teach residents and students.

Source: Institutions.

35. Ratio of Admissions to General Revenue

Ratio of Admissions to General Revenue

Definition: Ratio of admissions, charity care, inpatient hospital days, and clinic visits to General Revenue for state-owned hospitals.

Source: Institutions.

36. Charity Care

Total uncompensated care provided by faculty

Definition: The total dollar amount of uncompensated care provided through faculty physician practice plans (i.e. PRS, MSRDP, PIP) during the reporting period. Use the definition of uncompensated care included in Article III, Special Provisions of the General Appropriations Act that coincides with the reporting period. The definition applies to all practice plans, including medical, dental, allied health, nursing, or other health care discipline. This definition is from the LBB.

Source: Institutional data reported to the LBB

G. Other MD Anderson Academic Programs

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G.1 MD Anderson Educational Trainees, 2013 - 2014

Clinical	
Audiology Fellow	2
Fellows	249
Medical Physics Fellow	1
Medical Physics Residents	13
Pharmacy Fellows	0
Pharmacy Residents	17
Physician Assistant Fellows & Residents	2
Population Sciences Fellow	1
Psychology Fellows	7
Radiation Physics Proton Therapy Fellows	2
Residents	26
Rotating Fellows	186
Rotating Fellow Research	3
Rotating Pharmacy Residents	11
Rotating Psychology Fellow	2
Rotating Residents	690
Rotating Residents Research	61
Rotating Veterinary Residents	3
Subtotal	**1,276**
Research	
Graduate Research Assistants-GSBS	384
Graduate Research Assistants-UTHSCH	120
Graduate Student-non-UTHSCH	272
Odyssey Fellows	23
Postdoctoral Fellows	730
Research Interns	180
Research Medical Students	103
Rosalie B. Hite Graduate Research Assistants	8
Visiting Postdoctoral Fellows	11
Visiting Research Collaborator	22
Subtotal	**1,853**
School of Health Professions**	
Clinical Laboratory Science Students	34
Cytogenetic Technology Students	31
Cytotechnology Students	14
Diagnostic Imaging Students	84
Diagnostic Genetics	4
Histotechnology Students	22
Medical Dosimetry Students	40
Molecular Genetic Technology Students	43
Radiation Therapy Students	46
Subtotal	**318**

*A shifting of titles under new category, a collapse of titles under a single broad title, or a discontinuation of an appointment type.

Source: Trainee & Alumni Affairs

Special Programs	
Chaplaincy Fellows	5
Chaplaincy Interns	6
Child Life Interns	2
Clinical Chemistry Fellow	1
Clinical Ethics Fellow	1
Clinical Ethics Interns	4
Dietetic Interns	5
Hospital Administration Fellows	6
Music Therapy Interns	3
Observers	398
Social Work Interns	6
Veterinary Residents	5
Veterinary Students	10
Subtotal	**452**
Student Programs*	
Clinical Lab Student	22
College Students	404
Genetics Counseling Students	8
High School Students	134
Language Assistant Students	0
Pharmacy Students	63
Physical/Occupational Therapy Students	33
Physician Assistant Students	41
Psychology Graduate Students	7
Rotating Medical Student Research	90
Rotating Medical Students	311
Rotating Psychology Student	1
Speech Pathology Students	2
Technology Students	88
Subtotal	**1,204**
Nursing Programs***	
Nursing Outreach Education ****	0
Academic Undergraduate	798
Academic Graduate Students	260
Academic Doctoral Students	7
Academic High School	75
Professional Student Nurse Externs	95
Post Graduate Nurses Oncology Fellowship	3
PEPED *****	0
Subtotal	**1,238**
TOTAL	**6,341**

** Annual metrics are provided by School of Health Professions.
*** Annual metrics are provided by the Div. of Nursing.
**** *Nursing Outreach Education program is no longer in place.*
***** *PEPED program ended subsequent to completion of CPRIT grant funding, August 2012*

G.2 Trainee Demographics by Group, 2013 - 2014

Demographic Profile	Clinical Residents & Fellows			Postdoctoral Fellows*			GSBS		
	Description	N	Percent	Description	N	Percent	Description	N	Percent
Number of Trainees	Total Population	275		Total Population	753		Total Population	384	
Number of Programs Served	Total Programs	59		Total Programs	64		Total Programs	52	
Ethnicity	White, Non-Hispanic	117	43%	Foreign	577	77%	Foreign	136	35%
	Asian	86	31%	White, Non-Hispanic	93	12%	White, Non-Hispanic	156	41%
	Foreign	51	19%	Asian	51	7%	Asian	38	10%
	Hispanic	10	4%	Hispanic	23	3%	Hispanic	39	10%
	Black, Non-Hispanic	9	3%	Black, Non-Hispanic	7	1%	Pacific Islander	7	2%
	Pacific Islander	2	1%	Pacific Islander	2	0%	Black, Non-Hispanic	8	2%
Gender	Male	123	45%	Male	406	54%	Male	166	43%
	Female	152	55%	Female	347	46%	Female	218	57%
Average Age	35 years old			34 years old			29 years old		

*Postdoctoral Fellows include Postdoctoral Fellows, Odyssey Fellows, Odyssey Scholars and Veterinary Fellows. Total head count may not be equal to the total number of postdoctoral on this report because some trainees had more than one title during this reporting period.
Source: Trainee & Alumni Affairs

G.3 Trainee Country of Origin & Visa Types, 2013 – 2014

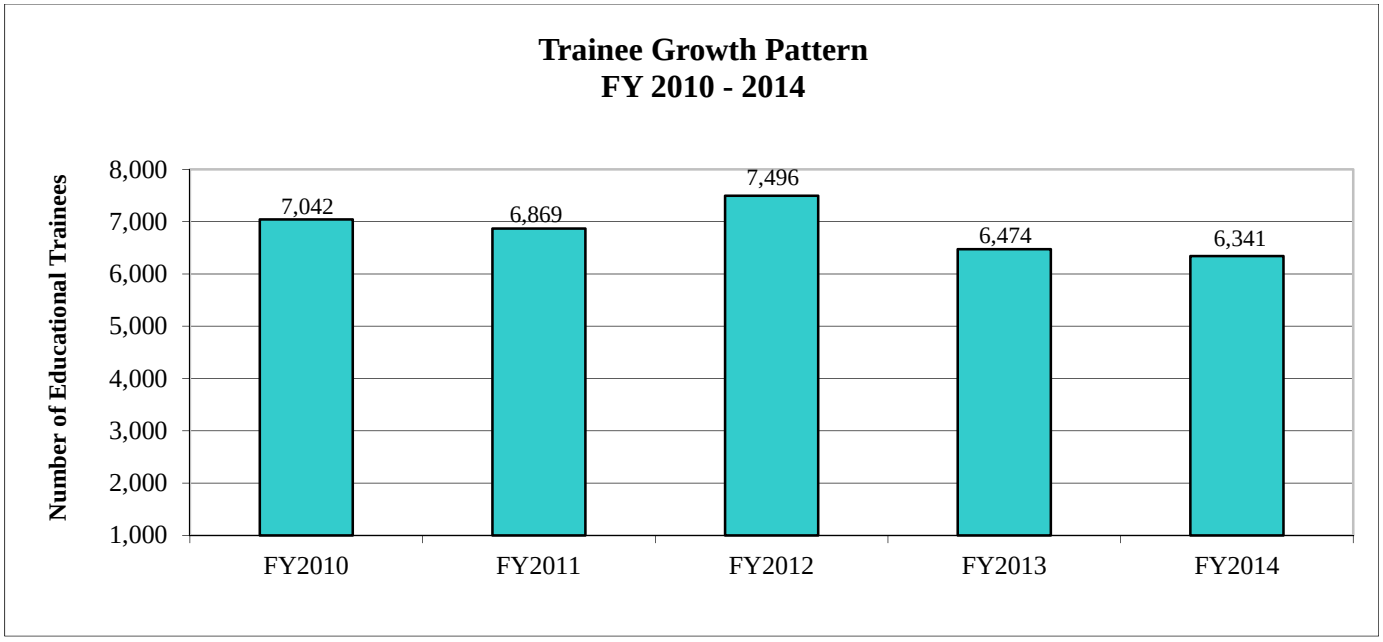
Demographic Profile	Clinical Residents & Fellows			Postdoctoral Fellows*			GSBS		
	Country/Visa	N	Percent	Country/Visa	N	Percent	Country/Visa	N	Percent
Top 5 Countries of Origin	USA	196	71%	China	228	30%	USA	224	58%
	India	10	4%	USA	122	16%	China	49	13%
	Canada; Korea, Republic Of and People's Republic Of China	7	3%	India	77	10%	India	36	9%
	Brazil; Egypt and Pakistan	4	1%	South Korea	61	8%	Taiwan	18	5%
	Israel; Japan; Lebanon and Peru	3	1%	Japan	37	5%	South Korea	12	3%
Citizenships and Most Frequent Visa Types	US Citizen	196	71%	US Citizen	370	49%	US Citizen	224	58%
	US Permanent Resident	28	10%	H1-B	89	12%	US Permanent Resident	24	6%
	H1-B	13	5%	F1	84	11%	F-1	131	34%
	J-1	38	14%	J-1	370	49%	J-1	3	1%

*Postdoctoral Fellows include Postdoctoral Fellows, Odyssey Fellows, Odyssey Scholars and Veterinary Fellows. Total head count may not be equal to the total number of postdoctoral on this report because some trainees had more than one title during this reporting period.
Source: Trainee & Alumni Affairs

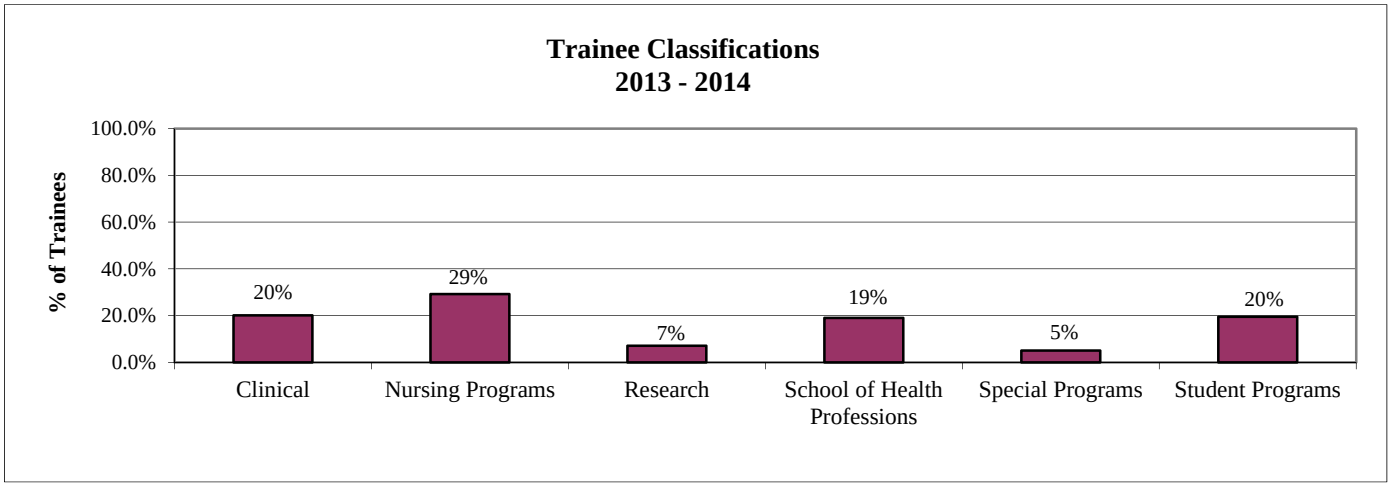
G.4 Five Year Trainee Growth Pattern, FY 2010 – FY 2014

	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	Percent of Growth 2010 - 2014
Clinical	1,109	1,141	1,187	1,231	1,276	15%
Research	1,612	1,629	1,714	1,743	1,853	15%
Special Programs	401	429	431	507	452	13%
Student Programs	930	1,102	1,317	1,396	1,204	29%
School of Health Professions	214	248	316	291	318	49%
Nursing Students/Rotations	2,776	2,320	2,531	1,306	1,238	-55%
Grand Total	**7,042**	**6,869**	**7,496**	**6,474**	**6,341**	-10%
Grand Total (excluding Nursing)	**4,266**	**4,549**	**4,965**	**5,168**	**5,103**	20%

Source: Trainee & Alumni Affairs



G.5 Trainee Classifications Graph, 2013 – 2014



Source: Trainee & Alumni Affairs

G.6 Summary of Internal Awards, 2013 - 2014

Type of Award	Number Awarded	Total Funding Awarded
Trainee Excellence Award	8	4,000
Trainee Excellence Award for Cycle One	4	2,000
Trainee Research Day - Amgen Award in Basic Science Research - 1st Place Oral Winner	1	1,000
Trainee Research Day - Amgen Award in Basic Science Research - 1st Place Poster Winner	1	700
Trainee Research Day - Amgen Award in Basic Science Research - 2nd Place Poster Winner	1	500
Trainee Research Day - Bayer HealthCare Pharm, Inc. Award in Population Science - 1st Place Oral Winner	1	1,000
Trainee Research Day - Bayer HealthCare Pharm, Inc. Award in Population Science - 1st Place Poster Winner	1	700
Trainee Research Day - Bayer HealthCare Pharm, Inc. Award in Population Science - 2nd Place Poster Winner	1	500
Trainee Research Day - Bayer HealthCare Pharm, Inc. Award in Translational Research - 1st Place Oral Winner	1	1,000
Trainee Research Day - Bayer HealthCare Pharm, Inc. Award in Translational Research - 1st Place Poster Winner	1	700
Trainee Research Day - Bayer HealthCare Pharm, Inc. Award in Translational Research - 2nd Place Poster Winner	1	500
Trainee Research Day - Bristol-Myers Squibb Award in Clinical Research - 1st Place Oral Winner	1	1,000
Trainee Research Day - Bristol-Myers Squibb Award in Clinical Research - 1st Place Poster Winner	1	700
Trainee Research Day - Bristol-Myers Squibb Award in Clinical Research - 2nd Place Poster Winner	1	500
Trainee Research Day - MD Anderson Alumni & Faculty Association - 90-Second Elevator Speech Competition – Best Speech Winner	1	700
Trainee Research Day - MD Anderson Alumni & Faculty Association - 90-Second Elevator Speech Competition – People's Choice Award Winner	1	500
Trainee Research Day - MDACC Alumni & Faculty Award in Basic Science - 1st Place Oral Winner	1	1,000
Trainee Research Day - MDACC Alumni & Faculty Award in Basic Science Research - 1st Place Poster Winner	1	700
Trainee Research Day - MDACC Alumni & Faculty Award in Basic Science Research - 2nd Place Poster Winner	1	500
Trainee Research Day - MDACC Alumni & Faculty Award in Clinical Research - 1st Place Oral Winner	1	1,000
Trainee Research Day - MDACC Alumni & Faculty Award in Clinical Research - 1st Place Poster Winner	1	700
Trainee Research Day - MDACC Alumni & Faculty Award in Clinical Research - 2nd Place Poster Winner	1	500
Trainee Research Day - MDACC Alumni & Faculty Award in Population Science - 1st Place Oral Winner	1	1,000
Trainee Research Day - MDACC Alumni & Faculty Award in Population Science - 1st Place Poster Winner	1	700
Trainee Research Day - MDACC Alumni & Faculty Award in Population Science - 2nd Place Poster Winner	1	500
Trainee Research Day - MDACC Alumni & Faculty Award in Translational Research - 1st Place Oral Winner	1	1,000
Trainee Research Day - MDACC Alumni & Faculty Award in Translational Research - 1st Place Poster Winner	1	700
Trainee Research Day - MDACC Alumni & Faculty Award in Translational Research - 2nd Place Poster Winner	1	500
TOTAL	**38**	**$24,800**

Source: Trainee & Alumni Affairs