The University of Texas MD Anderson Cancer Center Fact Book 2016

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



Acknowledgements

This Fact Book is a compilation of data from across The University of Texas MD Anderson Cancer Center and from our joint program with The University of Texas Health Science Center - Houston. The MD Anderson Office of Institutional Research, Department of Academic Analytics and Technology acknowledges the contributions of the following people:

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A. About MD Anderson Cancer Center



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 47 National Cancer Institute-designated comprehensive cancer centers today. U.S. News & World Report's "Best Hospitals" survey has ranked MD Anderson the nation's top hospital for cancer care. MD Anderson has been ranked the leading cancer hospital for the past 9 of 10 years. The institution has been named one of the nation's top two hospitals for cancer care every year since the survey began in 1990.

Since the first patient was registered in 1944, 1.2 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, close to 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 over 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 with over 7,500 participants enrolled in 1,200-plus clinical trials exploring innovative treatments. MD Anderson provided more than \$287 million in uncompensated care to Texans with cancer in FY16. 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 2,354 faculty members, including M.D.s and Ph.Ds. in Fiscal Year 2016. 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 2016, MD Anderson had 1,202 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 \$787 million, a 22% increase in the past five years. This includes over \$67 million in state funding, approximately \$166 million from philanthropy and foundations, and over \$155 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, Through the Moon Shots Program'', the APOLLO (Adaptative Patient-Oriented Longitidinal Learning and Optimization) platform is performing deep molecular and immune analysis of blood samples and tumor biopsies taken before, during and after treatment to learn what causes response or resistance to a given treatment. In the next two years, such analysis will be conducted in 2,100 patients enrolled in 28 high-priority clinical trials.

MD Anderson Fact Book Academic Year 2016 Section A: About MD Anderson

Strong educational programs are offered annually to over 7,000 students and trainees in medicine, science, nursing, pharmacy and many allied health specialties. MD Anderson offers bachelor's degrees in nine health disciplines and master's degree in Diagnostic Genetics and Radiologic Sciences. 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 1,600 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 MD Anderson Cancer Center and UTHealth 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 147 students in 2015 in nine areas of study: Clinical Laboratory Science, Cytogenetic Technology, Cytotechnology, Diagnostic Medical Sonography, 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 than 21,000 people and enjoys a volunteer workforce of over 900 volunteers who provide over 121,000 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 Office of the President

1515 Holcombe Blvd. Unit 091 Houston, Texas 77030

University of Texas MD Anderson Cancer Center Office of the Executive Vice President & Provost

1515 Holcombe Blvd. Unit 113 Houston, Texas 77030

University of Texas MD Anderson Cancer Center Office of the Senior Vice President of Academic Affairs

7007 Bertner Street Unit 1722 Houston, Texas 77030

University of Texas MD Anderson Cancer Center School of Health Professions Office of the Dean

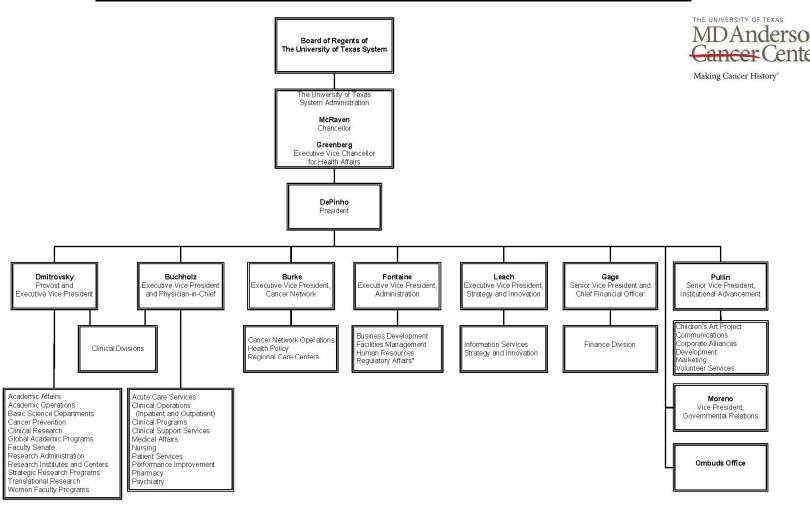
1515 Holcombe Blvd. Unit 0002 Houston, Texas 77030

University of Texas MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences

Office of the Dean

6767 Bertner Avenue Unit 1011 Houston, Texas 77030

The University of Texas MD Anderson Organizational Chart (as of December 31, 2016)



* Dual report to President

Section A: About MD Anderson

The University of Texas MD Anderson Cancer Center Senior Leadership

Name	Title
Marshall Hicks, M.D.	President ad Interim
Stephen Hahn, M.D.	Deputy President and Chief Operating Officer
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
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
Ethan Dmitrovsky, M.D.	Provost and Executive Vice President
R. Dan Fontaine, J.D.	Executive Vice President, Administration
Lewis Foxhall, M.D.	Vice President, Health Policy
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
Steven Haydon, J.D	Vice President and Chief Legal Officer
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
Crista Latham	Vice President, Strategic Communications
Sherri Magnus	Vice President and Chief Audit Officer
Paul Mansfield, M.D.	Vice President, Acute Care Services
Chris McKee	Vice President for Business Operations
Ben Melson	Senior Vice President and Chief Financial Officer
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
Carol Porter, D.N.P	Vice President of Nursing Practice and Chief Nursing Officer
Ferran Prat, Ph.D. J.D.	Vice President, Strategic Industry Ventures
Tadd Pullin	Senior Vice President, Institutional Advancement
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 2017 Student Regent Varun P. Joseph

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

Terms Expire February 2023
Regent Kevin P. Eltife
Regent Janiece Longoria
Regent James Conrad "Rad" Weaver

^{*} 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	Barry McBee, J.D.	Vice Chancellor and Governmental
Relations		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 Fact Book Academic Year 2016 Section A: About MD Anderson

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 Fact Book Academic Year . Section A: About MD Anderson

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
- Children's Cancer Hospital
- Colorectal
- Endocrine
- Gastrointestinal
- Genitourinary
- Gynecologic Oncology
- Head and Neck
- Leukemia
- Lymphoma and Myeloma
- Melanoma and Skin
- Sarcoma
- Thoracic

Centers of Excellence

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

Duncan Family Institute

- Center for Energy Balance in Cancer Prevention and Survivorship
- Center for Translational and Public Health Genomics

Institute for Cancer Care Innovation

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
- Red and Charline McCombs Institute for the Early Detection and Treatment of Cancer

Zayed Institute for Personalized Cancer Therapy

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

Section A: About MD Anderson

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.

Section A: About MD Anderson

CCSG Shared Resources, continued

Functional Proteomics Reverse Phase Protein Array Core

The RPPA Core provides investigators with a powerful, high-throughput, quantitative, cost-effective technology for functional proteomics studies. Furthermore, we provide centralized, standardized and quality-controlled services to investigators not only throughout MD Anderson, but around the world, as well as to several national consortia, including TCGA, CCLE and ICBP. RPPA represents an antibody-based functional proteomic analysis for both tumor tissue and cultured cells. RPPA characterizes the basal protein expression and modification levels, growth factor- or ligand-induced effects, and time-resolved responses appropriate for systems biology analysis. It provides information to integrate the consequence of genetic aberrations in cancer, to validate therapeutic targets, to demonstrate on- and off-target activity of drugs, and to evaluate drug pharmacodynamics.

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 mission of the High Resolution Electron Microscopy Facility (HREMF) is to provide high quality electron microscopy services at an affordable price to research investigators at MD Anderson Cancer Center. The facility is located in the Smith Research Building (South Campus) and houses a JEOL JEM1010 transmission electron microscope (TEM), a JEOL JSM5900 scanning electron microscope (SEM), a Technotrade coating system, a Leica ultramicrotome, and a Leica ultrastainer. The HREMF personnel are available to provide research support for investigators who are interested in electron microscopy.

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. Infectious disease PCR testing for laboratory mice and rats is also provided by this core facility, as well as free consultation on mice and rat genetic topics.

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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.

Nuclear Magnetic Resonance Facility

The NMR facility houses two state-of-the-art spectrometers for use in the determination of the structure of small molecules and biological macromolecules, reaction kinetics, macromolecule dynamics, metabolism, etc.

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.

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 Association for Assessment and Accreditation of Laboratory Animal Care (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.

MD Anderson Fact Book Academic Year 2016 Section A: About MD Anderson

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

Functional Genomics aims to study the complicated interactions between genotype and phenotype at a genome-wide scale in order to promote our basic research and to enhance translational research and drug discovery at the UT MD Anderson Cancer Center, the Functional Genomics Core (FGC, previously as ShRNA and ORFeome Core) was established to provide researchers with genetic tools for studying and annotating gene functions in cell-based assays. In addition, the FGC personnel are also available to provide research support for investigators who are interested in genetic screens.

Section A: About MD Anderson

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 2011 – FY 2015*

		% of All Cance	ers - All Ages, Rac	es, and Regions	
Top Ten Newly Diagnosed Cancer Cases	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
Breast	14.60%	15.20%	15.20%	16.52%	16.09%
Lung & Bronchus	10.10%	9.60%	9.50%	9.44%	9.70%
Prostate	10.60%	9.00%	8.60%	8.14%	8.42%
Melanomas of the Skin	4.90%	5.50%	5.40%	4.76%	5.30%
Leukemia	5.10%	4.70%	4.60%	4.78%	4.47%
Non-Hodgkin's Lymphoma	5.10%	5.10%	4.90%	4.60%	5.03%
Colon & Rectum	5.10%	5.40%	6.20%	5.97%	6.11%
Oral Cavity & Pharynx	4.40%	4.40%	4.30%	4.01%	4.32%
Kidney & Renal Pelvis	3.60%	3.70%	3.60%	4.26%	3.88%
Brain & Other Nervous System	2.80%	2.60%	2.60%	2.94%	2.74%
Pancreas	N/A	3.50%	3.30%	3.29%	3.05%

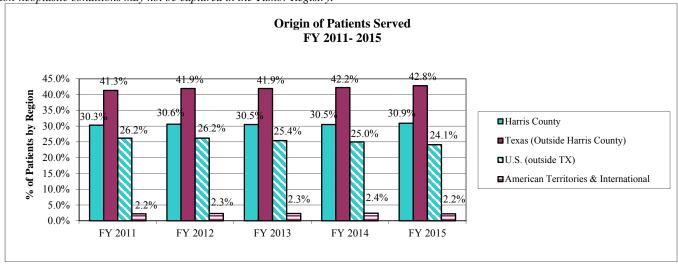
^{*}Top 10 disease sites based on the average disease site mix of cancer cases new to MDACC. Counts for disease sites based on SEER groupings using ICD-O site and Histology coding.

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 2011 – FY 2015*

	% of Patients Served by Region										
Regions	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015						
Harris County	30.3%	30.6%	30.5%	30.5%	30.9%						
Texas (outside of Harris County)	41.3%	41.9%	41.9%	42.2%	42.8%						
U.S. (outside of Texas)	26.2%	25.3%	25.4%	25.0%	24.1%						
American Territories & International	2.2%	2.3%	2.3%	2.4%	2.2%						

*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

Statement of Operating Revenue 4,480,444,361 4,495,768,037 4,412,923,943 84,135,238,891 83,735,831,786 83,661,127,668 Total Operating Expense 4,272,911,647 3,928,889,508 3,683,180,248 33,589,179,436 \$3,332,936,703 \$3,054,905,929 Total Margin 207,532,714 566,878,529 729,743,695 \$546,059,455 \$402,895,083 \$606,311,739 \$CFO- Hyperion, Operating Statistics FY16* FY15* FY14* FY13* FY12* FY11* FY16* FY18*	CFO - Hyperion,						
Total Operating Revenue 4,480,444,361 4,495,768,037 4,412,923,943 \$4,135,238,891 \$3,735,831,786 \$3,661,217,668 Total Margin Contributed to Capital Plan 207,532,714 566,878,529 729,743,695 \$546,059,455 \$402,895,083 \$606,311,739 \$CFO- Hyperion, Operating Statistics FY16* FY15* FY14* FY13* FY12* FY11* FY13* FY12* FY11* FY13* FY12* FY11* FY13* FY12* FY		FY16*	FY15*	FY14*	FY13*	FY12*	FY11*
Total Margin Contributed to Capital Plan 207,532,714 566,878,529 729,743,695 \$\$402,895,083 \$\$606,311,739 \$\$CFO-Hyperion, Operating Statistics FY16* FY15* FY14* FY13* FY12* FY11* FY11* Admissions 27,391 28,167 27,761 27,905 26,726 25,230 Patient Days 198,080 202,483 202,636 202,533 191,735 180,354 Average Daily Census 561 574 571 569 536 504 Average Occupancy Rate 85% 86% 87% 90% 87% 85% Average Georgeney Rate 85% 86% 87% 90% 87% 85% Average Length of Stay 7.2 7.2 7.3 7.3 7.2 7.1 7.1 7.2 7.1 7.1 7.2 7.1 7.1 7.2 7.1 7.1 7.3 7.2 7.1 7.1 7.1 7.2 7.1		4,480,444,361	4,495,768,037	4,412,923,943	\$4,135,238,891	\$3,735,831,786	\$3,661,217,668
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CFO- Hyperion, Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Total Surgeries 21,108 21,835 19,828 21,056 18,937 18,221 Inpatient Surgeries N/A N/A N/A N/A N/A 8,656 8,764 Outpatient Surgeries N/A N/A N/A N/A N/A 10,281 9,457 Surgery Hours 67,936 69,987 69,506 70,221 66,241 63,230 CFO- Hyperion, Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847<		1 404 220	1 440 604	1 2 (2 000	1 220 506	1 201 400	1 100 500
Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Total Surgeries 21,108 21,835 19,828 21,056 18,937 18,221 Inpatient Surgeries N/A N/A N/A N/A N/A 8,656 8,764 Outpatient Surgeries N/A N/A N/A N/A N/A 10,281 9,457 Surgery Hours 67,936 69,987 69,506 70,221 66,241 63,230 CFO- Hyperion, Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 <t< td=""><td></td><td>1,404,329</td><td>1,440,684</td><td>1,363,008</td><td>1,338,706</td><td>1,281,489</td><td>1,190,568</td></t<>		1,404,329	1,440,684	1,363,008	1,338,706	1,281,489	1,190,568
Total Surgeries 21,108 21,835 19,828 21,056 18,937 18,221 Inpatient Surgeries N/A N/A N/A N/A N/A 8,656 8,764 Outpatient Surgeries N/A N/A N/A N/A N/A 10,281 9,457 Surgery Hours 67,936 69,987 69,506 70,221 66,241 63,230 CFO- Hyperion, Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13*<		VTD EV16*	VTD EV15*	VTD EV14*	EV12*	EV12*	EV11*
Inpatient Surgeries	*						
Outpatient Surgeries N/A N/A N/A N/A 10,281 9,457 Surgery Hours 67,936 69,987 69,506 70,221 66,241 63,230 CFO- Hyperion, Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*							
Surgery Hours 67,936 69,987 69,506 70,221 66,241 63,230 CFO- Hyperion, Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*							
CFO- Hyperion, Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*							
Operating Statistics YTD FY16* YTD FY15* YTD FY14* FY13* FY12* FY11* Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		67,936	69,987	69,506	70,221	66,241	63,230
Lab Med / Pathology Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		AUTO FALLO	VTD FV17*	1/TD F1/1/4	EV/124	FX/10*	TW114
Billed Procedures 12,073,679 12,334,917 12,005,766 11,718,405 11,619,591 10,937,213 Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		YIDFYI6*	Y 1 D F Y 15*	Y 1 D F Y 1 4*	FY13*	FY12*	FYII*
Diagnostic Imaging Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		12 072 670	12 224 017	12 005 766	11 710 405	11 610 501	10.027.212
Billed Procedures 524,044 530,590 523,297 501,887 497,660 515,999 Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		12,073,079	12,334,917	12,003,700	11,/10,403	11,019,391	10,937,213
Radiation Oncology Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		524 044	530 590	523 297	501 887	497 660	515 999
Billed Procedures 207,425 254,361 283,536 284,740 283,503 267,513 Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		324,044	330,370	323,271	301,007	477,000	313,777
Stem Cell Transplants 732 857 847 815 848 865 Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*		207,425	254,361	283,536	284,740	283,503	267,513
Public Affairs YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*				· · · · · · · · · · · · · · · · · · ·	,	,	·
	•						
	Volunteer Hours	121,356	145,452	164,970	193,921	193,400	201,199
Internet Services YTD FY16* YTD FY15* YTD FY14* YTD FY13* FY12* FY11*						,	
Visits:		1121110	1101110	1101111	1121113	1112	1 1 1 1
www.mdanderson.org 15,135,175 17,043,853 12,023,983 11,299,378 7,796,562 6,161,284		15,135,175	17,043,853	12,023,983	11,299,378	7,796,562	6,161,284
Visits:		, ,	, ,	, ,	, , ,	, ,	, , -
inside.mdanderson.org 13,366,165 12,737,482 12,273,139 12,273,139 12,548,496 12,658,772		13,366,165	12,737,482	12,273,139			12,658,772

^{*}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 2016

MD Anderson Workforce Report- FY 2016

	Total	Cł	nange	Full-Time	Cha	Change		Change		Total Part-	Change	
MONTH	Employees	#	%	Equivalents	#	%	Full- Time	#	%	Time	#	%
August, 2015	20,671						18,528			2,143		
September, 2015	20,706	35	0%	20,135.82	20,135.82	100.00%	18,545	17	0.09%	2,161	18	0.83%
October, 2015	20,772	66	0.32%	20,196.82	61.00	0.30%	18,595	50	0.27%	2,177	16	0.73%
November, 2015	20,928	156	0.75%	20,355.72	158.90	0.78%	18,737	142	0.76%	2,191	14	0.64%
December, 2015	20,910	-18	-0.09%	20,327.34	-28.38	-0.14%	18,716	-21	-0.11%	2,194	3	0.14%
January, 2016	20,899	-11	-0.05%	20,353.82	26.48	0.13%	19,054	338	1.77%	1,845	-349	-18.92%
February, 2016	21,065	166	0.79%	20,493.06	139.24	0.68%	19,128	74	0.39%	1,937	92	4.75%
March, 2016	21,131	66	0.31%	20,555.70	62.64	0.30%	19,189	61	0.32%	1,942	5	0.26%
April, 2016	21,141	10	0.05%	20,575.21	19.51	0.09%	19,230	41	0.21%	1,911	-31	-1.62%
May, 2016	21,249	108	0.51%	20,685.18	109.97	0.53%	19,336	106	0.55%	1,913	2	0.10%
June, 2016	21,443	194	0.90%	20,891.19	206.01	0.99%	19,543	207	1.06%	1,900	-13	-0.68%
July, 2016	21,466	23	0.11%	20,916.32	25.13	0.12%	19,563	20	0.10%	1,903	3	0.16%
August, 2016	21,328	-138	-0.65%	20,785.47	-130.85	-0.63%	19,435	-128	-0.66%	1,893	-10	-0.53%

Reporting Source: PeopleSoft

Data provided as of last day of each month.

Includes Hourly and Temp Employees.

B. Student Information



Making Cancer History®

Section B: Student Information

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

	Fall 2012				Fall 2013		Fall 2014			Fall 2015		
Program	Applied	Admitted	Enrolled	Applied	Admitted	Enrolled*	Applied	Admitted	Enrolled	Applied	Admitted	Enrolled
BS Clinical Laboratory												
Sciences	56	17	17	53	20	20	70	13	13	52	28	28
CRT Clinical												
Laboratory Sciences	0	0	0	0	0	0	0	0	0	0	0	0
BS Cytogenetic												
Technology	43	23	23	41	27	27	35	20	20	26	17	16
CRT Cytogenetic												
Technology	0	0	0	0	0	0	0	0	0	0	0	0
BS Cytotechnology	32	13	13	26	6	6	17	6	6	35	9	9
CRT Cytotechnology	1	1	1	0	0	0	0	0	0	0	0	0
MS Diagnostic												
Genetics	N/A	N/A	N/A	28	5	4	40	8	8	28	9	9
BS Diagnostic Medical								_	_			
Sonography**	N/A	N/A	N/A	41	12	12	79	9	9	48	9	9
BS Diagnostic Imaging	165	39	38	116	37	37	130	38	38	99	33	33
CRT Diagnostic												
Imaging				7	5	5	0	0	0	11	7	7
BS Histotechnology**	36	17	17	28	17	17	28	21	21	25	18	18
CRT Histotechnology	0	0	0	0	0	0	0	0	0	0	0	0
BS ^a Medical												
Dosimetry	89	21	20	123	21	21	64	22	22	58	21	21
CRT ^b Medical		_	_	_			_	_	_			_
Dosimetry	0	0	0	0	0	0	0	0	0	0	0	0
BS Molecular Genetic												
Technology	55	34	34	46	26	26	45	23	23	33	22	22
BS Radiation Therapy	46	17	17	52	21	21	95	24	24	39	23	23
CRT Radiation	6	6	6	6	6	6	6	6				
Therapy	0	0	0	0	0	0	0	0	0	0	0	0
Total	523	182	180	561	197	196	603	184	184	454	196	195

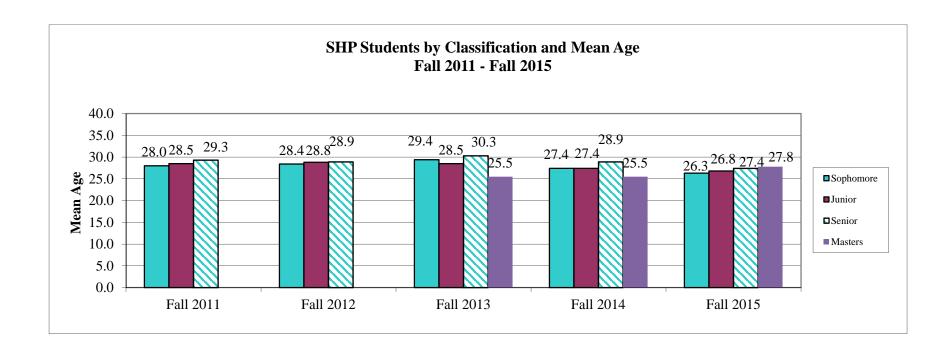
Source: SHP Dean's Report *Does not include 2 students carried over from prior year.

^{**}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 2011 – Fall 2015

MEAN STUDENT AGE	Fall 2011		Fall 2012		Fall 2013		Fall 20	14	Fall 2015	
BY CLASSIFICATION	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT
SOPHOMORE	28.0	23	28.4	66	29.4	74	27.4	97	26.3	35
JUNIOR	28.5	131	28.8	128	28.5	113	27.4	80	26.8	165
SENIOR	29.3	162	28.9	96	30.3	126	28.9	115	27.4	104
MASTERS	N/A	N/A	N/A	N/A	25.5	4	25.5	11	27.8	16
OVERALL	28.9	316	28.7	290	29.5	317	27.9	303	27	320

Source: Certified CBM001



MD Anderson Fact Book Academic Year 2016 Section B: Student Information

B.3 SHP Students by Gender and Ethnicity, Fall 2011 – Fall 2015

_		Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
ETHNIC ORIGIN	GENDER	COUNT	Students								
WHITE NON-HISPANIC	FEMALE	36	11.4%	71	24.5%	66	20.8%	65	21.5%	53	16.6%
WINIE TOOL INDIANCE	MALE	15	4.7%	36	12.4%	31	9.8%	28	9.2%	27	8.4%
Subtotal		51	16.1%	107	36.9%	97	30.6%	93	30.7%	80	25.0%
BLACK NON-HISPANIC	FEMALE	16	5.1%	24	8.3%	25	7.9%	27	8.9%	21	6.6%
	MALE	6	1.9%	9	3.1%	15	4.7%	6	2.0%	9	2.8%
Subtotal		22	7.0%	33	11.4%	40	12.6%	33	10.9%	30	9.4%
HISPANIC	FEMALE	42	13.3%	26	9.0%	39	12.3%	48	15.8%	70	21.9%
	MALE	18	5.7%	11	3.8%	20	6.3%	25	8.3%	27	8.4%
Subtotal		60	19.0%	37	12.8%	59	18.6%	73	24.1%	97	30.3%
ASIAN	FEMALE	20	6.3%	35	12.1%	28	8.8%	42	13.9%	52	16.3%
ASIAN	MALE	12	3.8%	27	9.3%	25	7.9%	28	9.2%	26	8.1%
Subtotal		32	10.1%	62	21.4%	53	16.7%	70	23.1%	78	24.4%
AMERICAN INDIAN OR	FEMALE	0	0.0%	0	0.0%	1	0.3%	1	0.3%	0	0.0%
ALASKAN NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Subtotal		0	0.0%	0	0.0%	1	0.3%	1	0.3%	0	0.0%
INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	14	4.4%	16	5.3%	13	4.1%
	MALE	0	0.0%	1	0.3%	6	1.9%	6	2.0%	10	3.1%
Subtotal		0	0.0%	1	0.3%	20	6.3%	22	7.3%	23	7.2%
UNKNOWN OR NOT	FEMALE	103	32.6%	36	12.4%	29	9.1%	2	0.7%	1	0.3%
REPORTED	MALE	45	14.2%	10	3.4%	14	4.4%	2	0.7%	2	0.6%
Subtotal		148	46.8%	46	15.9%	43	13.6%	4	1.3%	3	0.9%
NATIVE HAWAIIAN OR OTHER	FEMALE	0	0.0%	1	0.3%	1	0.3%	1	0.3%	2	0.6%
PACIFIC ISLANDER	MALE	1	0.3%	0	0.0%	1	0.3%	0	0.0%	0	0.0%
Subtotal		1	0.3%	1	0.3%	2	0.6%	1	0.3%	2	0.6%
TWO OR MORE RACES	FEMALE	1	0.3%	3	1.0%	1	0.3%	3	1.0%	2	0.6%
I WO OR WIOKE RACES	MALE	1	0.3%	0	0.0%	1	0.3%	3	1.0%	5	1.6%
Subtotal		2	0.6%	3	1.0%	2	0.6%	6	2.0%	7	2.2%
TOTAL		316	100.0%	290	100.0%	317	100.0%	303	100.0%	320	100.0%

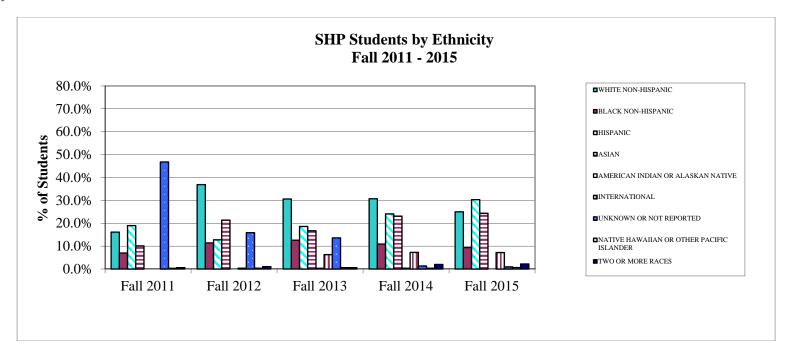
Source: Certified CBM001

Section B: Student Information

B.4 SHP Students by Ethnicity, Fall 2011 – Fall 2015

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
ETHNIC ORIGIN	COUNT	Students								
WHITE NON-HISPANIC	51	16.1%	107	36.9%	97	30.6%	93	30.7%	80	25.0%
BLACK NON-HISPANIC	22	7.0%	33	11.4%	40	12.6%	33	10.9%	30	9.4%
HISPANIC	60	19.0%	37	12.8%	59	18.6%	73	24.1%	97	30.3%
ASIAN	32	10.1%	62	21.4%	53	16.7%	70	23.1%	78	24.4%
AMERICAN INDIAN OR ALASKAN										
NATIVE	0	0.0%	0	0.0%	1	0.3%	1	0.3%	0	0.0%
INTERNATIONAL	0	0.0%	1	0.3%	20	6.3%	22	7.3%	23	7.2%
UNKNOWN OR NOT REPORTED	148	46.8%	46	15.9%	43	13.6%	4	1.3%	3	0.9%
NATIVE HAWAIIAN OR OTHER										
PACIFIC ISLANDER	1	0.3%	1	0.3%	2	0.6%	1	0.3%	2	0.6%
TWO OR MORE RACES	2	0.6%	3	1.0%	2	0.6%	6	2.0%	7	2.2%
TOTAL	316	100.0%	290	100.0%	317	100.0%	303	100.0%	320	100.0%

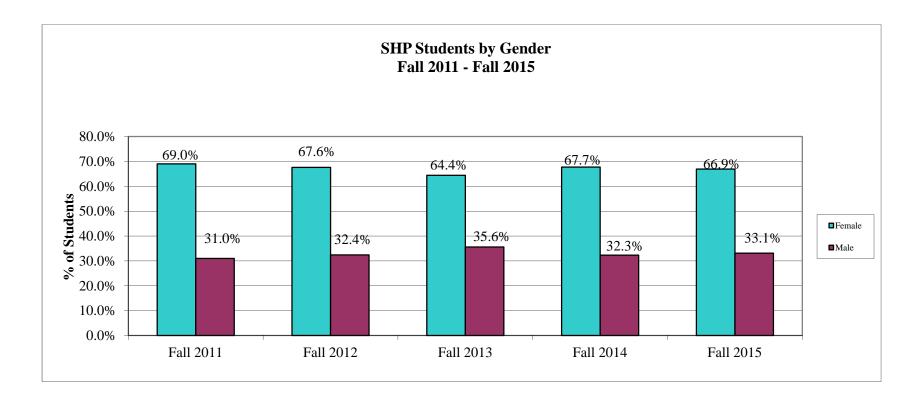
Source: Certified CBM001



B.5 SHP Students by Gender, Fall 2011 – Fall 2015

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
GENDER	COUNT	Students								
FEMALE	218	69.0%	196	67.6%	204	64.4%	205	67.7%	214	66.9%
MALE	98	31.0%	94	32.4%	113	35.6%	98	32.3%	106	33.1%
TOTAL	316	100.0%	290	100.0%	317	100.0%	303	100.0%	320	100.0%

Source: Certified CBM001

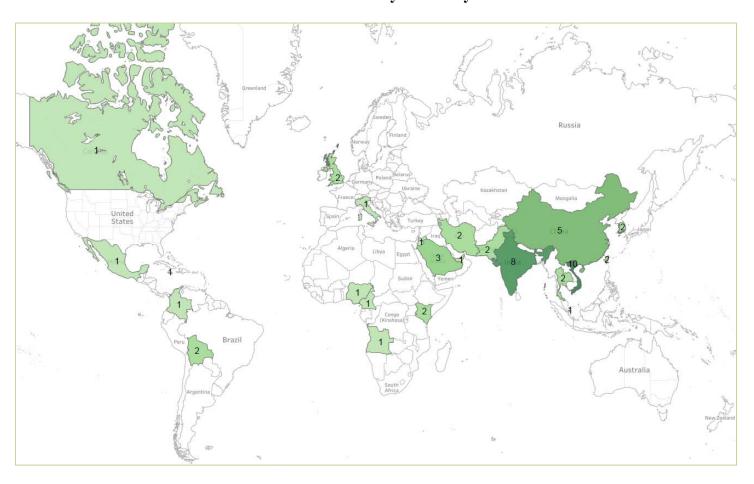


MD Anderson Fact Book Academic Year 2016 Section B: Student Information

$B.6a \quad SHP \ Students \ by \ Residency - International, Fall \ 2011-Fall \ 2015$

	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015	
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Angola	INTERNATIONAL	1	0	0	0	0
Bolivia	INTERNATIONAL	0	1	1	0	0
Cameroon	INTERNATIONAL	1	0	0	0	0
Canada	INTERNATIONAL	1	0	0	0	0
China	INTERNATIONAL	0	0	1	1	3
Colombia	INTERNATIONAL	0	0	0	0	1
India	INTERNATIONAL	3	1	1	2	1
Iran	INTERNATIONAL	0	0	0	1	1
Italy	INTERNATIONAL	0	1	0	0	0
Jamaica	INTERNATIONAL	1	0	0	0	0
Jordan	INTERNATIONAL	1	0	0	0	0
Kenya	INTERNATIONAL	1	0	0	0	1
Korea, Republic of	INTERNATIONAL	0	0	0	1	1
Mexico	INTERNATIONAL	0	0	0	0	1
Nigeria	INTERNATIONAL	0	0	1	0	0
Pakistan	INTERNATIONAL	1	0	0	0	1
Saudi Arabia	INTERNATIONAL	0	0	0	1	2
Singapore	INTERNATIONAL	0	0	0	0	1
Taiwan	INTERNATIONAL	0	0	1	1	0
Thailand	INTERNATIONAL	1	1	0	0	0
United Arab Emirates	INTERNATIONAL	0	0	0	0	1
United Kingdom	INTERNATIONAL	0	0	0	1	1
Vietnam	INTERNATIONAL	5	3	0	1	1
SUBTOTAL, INTERNATIONAL		16	7	5	9	16

International SHP Students by Residency Fall 2011-15



 $B.6b \quad SHP \ Students \ by \ Residency - Out \ of \ State, Fall \ 2011 - Fall \ 2015$

		Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Alabama	OUT OF STATE	1	0	0	0	0
Arizona	OUT OF STATE	0	0	0	1	1
Arkansas	OUT OF STATE	0	0	0	1	0
California	OUT OF STATE	1	1	0	0	3
Connecticut	OUT OF STATE	0	0	0	1	1
Florida	OUT OF STATE	0	0	0	0	1
Georgia	OUT OF STATE	1	1	0	0	0
Kentucky	OUT OF STATE	0	0	0	0	1
Massachusetts	OUT OF STATE	1	0	0	0	0
Minnesota	OUT OF STATE	0	1	0	0	1
Mississippi	OUT OF STATE	1	1	1	0	0
New Mexico	OUT OF STATE	1	0	1	2	1
New York	OUT OF STATE	1	0	0	0	1
North Carolina	OUT OF STATE	0	0	1	1	0
Ohio	OUT OF STATE	1	0	0	0	0
Oklahoma	OUT OF STATE	4	0	0	0	0
Virginia	OUT OF STATE	1	1	0	0	1
Washington	OUT OF STATE	1	0	0	0	0
West Virginia	OUT OF STATE	0	1	1	0	0
SUBTOTAL, OUT OF STATE		14	6	5	6	11

Source: Certified CBM001

Continental U.S. Out of State SHP Students by Residency Fall 2011-15



B.7 SHP Students by Residency - Texas County, Fall 2011 – Fall 2015*

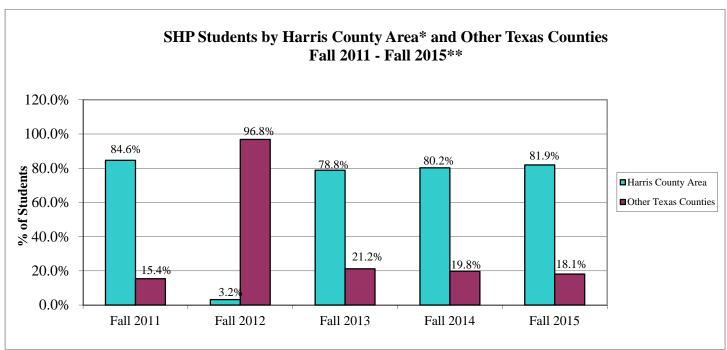
5.7 SIII Students	by Residency - Texas					
	1	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Atascosa County	TEXAS COUNTY	0	0	1	0	0
Austin County	TEXAS COUNTY	0	0	1	1	1
Bell County	TEXAS COUNTY	1	0	1	0	0
Bexar County	TEXAS COUNTY	5	2	4	6	1
Brazoria County	TEXAS COUNTY	10	0	16	20	17
Brazos County	TEXAS COUNTY	1	12	0	0	1
Burnet County	TEXAS COUNTY	1	0	0	0	0
Calhoun County	TEXAS COUNTY	1	0	0	0	0
Cameron County	TEXAS COUNTY	0	0	0	0	1
Coke County	TEXAS COUNTY	0	3	0	0	0
Collin County	TEXAS COUNTY	2	0	5	5	8
Colorado County	TEXAS COUNTY	0	0	0	2	0
Comal County	TEXAS COUNTY	0	0	0	0	1
Dallas County	TEXAS COUNTY	8	0	8	3	5
Dawson County	TEXAS COUNTY	0	10	0	0	0
		0	2	0	0	0
Deaf Smith County	TEXAS COUNTY			3		
Denton County	TEXAS COUNTY	2	0		2	1
Duval County	TEXAS COUNTY	0	0	0	0	1
Ellis County	TEXAS COUNTY	0	3	1	0	0
El Paso County	TEXAS COUNTY	1	0	3	0	1
Fayette County	TEXAS COUNTY	0	0	1	1	0
Fort Bend County	TEXAS COUNTY	44	0	29	26	26
Franklin County	TEXAS COUNTY	0	28	0	0	0
Freestone County	TEXAS COUNTY	0	0	0	1	1
Gaines County	TEXAS COUNTY	0	0	0	0	0
Galveston County	TEXAS COUNTY	7	7	12	11	11
Guadalupe County	TEXAS COUNTY	0	1	0	1	0
Hardin County	TEXAS COUNTY	1	0	1	0	0
Harris County	TEXAS COUNTY	170	0	181	168	174
Harrison County	TEXAS COUNTY	0	0	1	0	0
Haskell County	TEXAS COUNTY	0	4	0	0	0
Hemphill County	TEXAS COUNTY	0	1	0	0	0
Henderson County	TEXAS COUNTY	1	168	0	0	0
Hidalgo County	TEXAS COUNTY	0	2	1	2	4
Hopkins County	TEXAS COUNTY	2	1	0	0	1
Houston County	TEXAS COUNTY	0	0	5	4	7
Hunt County	TEXAS COUNTY	0	0	0	0	1
Hutchinson County	TEXAS COUNTY	0	1	0	0	0
Jackson County	TEXAS COUNTY	0	1	0	0	0
Jasper County	TEXAS COUNTY	1	0	0	0	0
Jefferson County	TEXAS COUNTY	0	1	1	1	2
Jones County	TEXAS COUNTY	1	0	0	1	0
Kaufman County	TEXAS COUNTY	1	0	1	0	0
Kerr County	TEXAS COUNTY	0	0	1	1	0
Lavaca County	TEXAS COUNTY	1	0	0	1	1
Lavaca County	ILAMS COUNTT	1	U	ı	1	1 1

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

B.7 SIII Studen	ts by Residency - Tex	Fall 2011	Fall 2012*	Fall 2013	Fall 2014	Fall 2015
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Lee County	TEXAS COUNTY	0	0	1	1	1
Liberty County	TEXAS COUNTY	1	1	0	0	1
Lipscomb County	TEXAS COUNTY	0	1	0	0	0
Live Oak County	TEXAS COUNTY	0	1	0	0	0
Lubbock County	TEXAS COUNTY	1	0	0	0	0
Matagorda County	TEXAS COUNTY	1	0	2	1	0
Maverick County	TEXAS COUNTY	0	1	0	0	0
Midland County	TEXAS COUNTY	0	0	0	0	0
Montague County	TEXAS COUNTY	1	0	0	0	0
Montgomery County	TEXAS COUNTY	10	0	16	17	11
Morris County	TEXAS COUNTY	0	11	0	0	0
Nueces County	TEXAS COUNTY	1	2	1	1	1
Oldham County	TEXAS COUNTY	0	0	0	0	1
Parker County	TEXAS COUNTY	1	0	0	1	1
Raines County	TEXAS COUNTY	0	0	0	1	1
Randall County	TEXAS COUNTY	0	0	1	1	2
Robertson County	TEXAS COUNTY	0	0	1	1	0
San Saba County	TEXAS COUNTY	0	2	0	0	0
Smith County	TEXAS COUNTY	2	0	1	0	0
Tarrant County	TEXAS COUNTY	3	3	1	1	4
Terrell County	TEXAS COUNTY	0	4	0	0	0
Travis County	TEXAS COUNTY	1	0	4	4	2
Val Verde County	TEXAS COUNTY	0	1	0	0	0
Van Zandt County	TEXAS COUNTY	1	0	0	0	0
Walker County	TEXAS COUNTY	0	0	1	0	0
Waller County	TEXAS COUNTY	0	1	0	0	0
Washington County	TEXAS COUNTY	0	0	1	1	0
Wharton County	TEXAS COUNTY	2	0	1	0	0
Williamson County	TEXAS COUNTY	0	0	0	1	2
SUBTOTAL, TEXAS COUNTY		286	277	307	288	293

Source: Certified CBM001

^{*}Fall 2012 counts may or may not represent accurate data



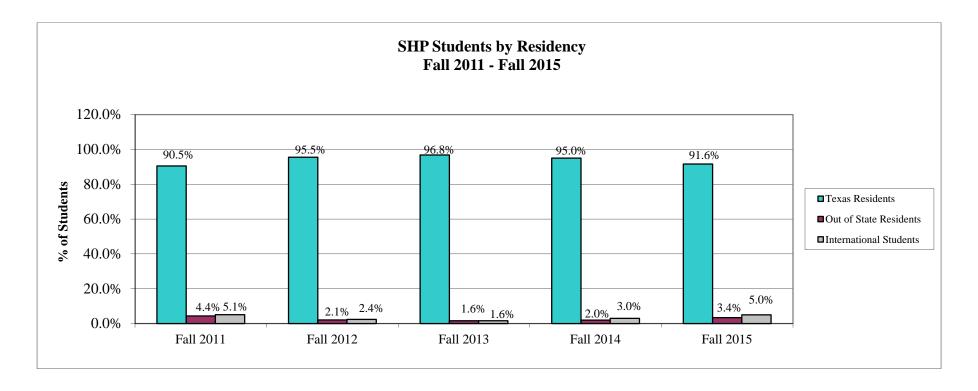
^{*}Consists of Harris and contiguous counties

^{**}Fall 2012 counts may or may not represent accurate data

B.8 SHP Students by Residency Type, Fall 2011 – Fall 2015

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
RESIDENCE TYPE	COUNT	Students								
Texas Residents	286	90.5%	277	95.5%	307	96.8%	288	95.0%	293	91.6%
Out of State Students	14	4.4%	6	2.1%	5	1.6%	6	2.0%	11	3.4%
International Students	16	5.1%	7	2.4%	5	1.6%	9	3.0%	16	5.0%
TOTAL	316	100.0%	290	100.0%	317	100.0%	303	100.0%	320	100.0%

Source: Certified CBM001



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

		_		•				
		M.D./		Individualized	Specialized			Average
	Year	Ph.D.*	(M.S.)Ph.D.	M.S.	M.S.	Non-degree	Total	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
		M.D./		Individualized	Specialized	-		Average
	Year	Ph.D.*	(M.S.)Ph.D.	M.S.	M.S.	Non-degree	Total	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
		M.D./		Individualized	Specialized			Average
	Year	Ph.D.*	(M.S.)Ph.D.	M.S.	M.S.	Non-degree	Total	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
		M.D./		Individualized	Specialized			Average
	Year	Ph.D.*	(M.S.)Ph.D.	M.S.	M.S.	Non-degree	Total	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
				_				
		M.D./		Individualized	Specialized			Average
	Year	Ph.D.*	(M.S.)Ph.D.	M.S.	M.S.	Non-degree	Total	GPA**
Completed Application	2015	-	575	51	146	3	775	-
Admitted Applicant	2015	-	122	15	16	3	153	3.6
Enrolled Applicant	2015	8	59	9	11	3	90	3.6

^{*}Excludes M.D./Ph.D. applicants and admissions

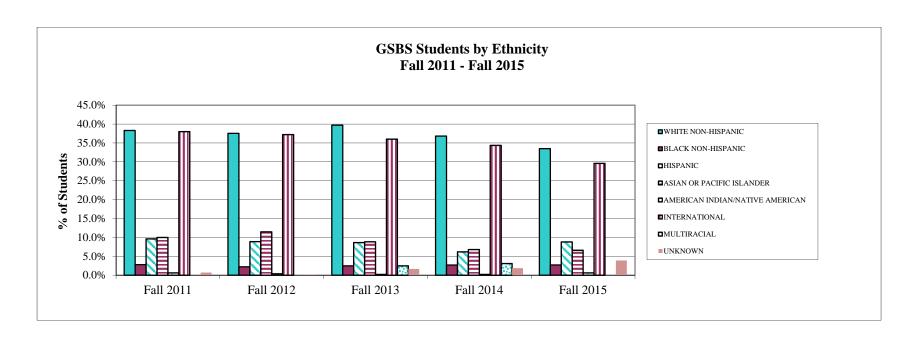
Source: UT Graduate School of Biomedical Sciences

^{**} Average undergrad GPA for Ph.D. applicants

B.10 GSBS Students by Ethnicity, Fall 2011– Fall 2015*

· ·	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
ETHNIC ORIGIN	COUNT	Students								
WHITE NON-HISPANIC	207	38.3%	196	37.5%	193	39.7%	179	36.8%	163	33.5%
BLACK NON-HISPANIC	15	2.8%	12	2.2%	12	2.5%	13	2.7%	13	2.7%
HISPANIC	52	9.6%	48	8.9%	42	8.6%	30	6.2%	43	8.8%
ASIAN OR PACIFIC ISLANDER	54	10.0%	62	11.5%	43	8.8%	33	6.8%	32	6.6%
AMERICAN INDIAN OR ALASKAN										
NATIVE	3	0.6%	2	0.4%	1	0.2%	1	0.2%	3	0.6%
INTERNATIONAL	205	38.0%	201	37.2%	175	36.0%	167	34.4%	144	29.6%
MULTIRACIAL					12	2.5%	15	3.1%		0.0%
UNKNOWN OR NOT REPORTED	4	0.7%	1	0.2%	8	1.6%	9	1.9%	19	3.9%
TOTAL	540	100.0%	522	100.0%	486	100.0%	447	100.0%	417	100.0%

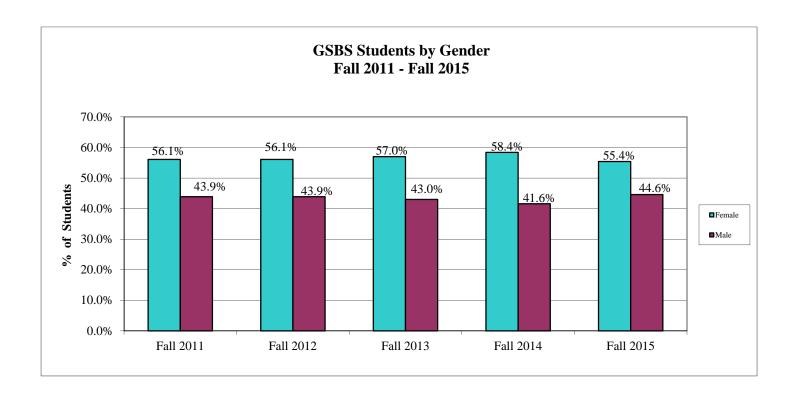
^{*}Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.



B.11 GSBS Students by Gender, Fall 2011 – Fall 2015*

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
GENDER	COUNT	Students								
FEMALE	303	56.1%	293	56.1%	277	57.0%	261	58.4%	231	55.4%
MALE	237	43.9%	229	43.9%	209	43.0%	186	41.6%	186	44.6%
TOTAL	540	100.0%	522	100.0%	486	100.0%	447	100.0%	417	100.0%

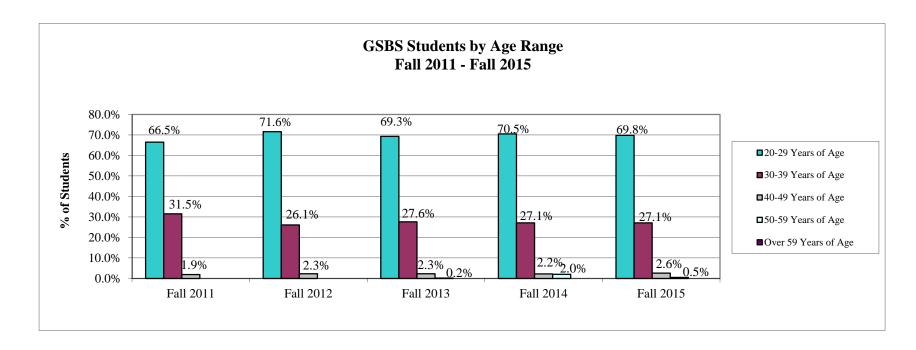
^{*}Data excludes non-degree students. Source: UT Graduate School of Biomedical Sciences.



B.12 GSBS Students by Age Range, Fall 2011 – Fall 2015*

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
AGE RANGE	COUNT	Students								
20 TO 29 YEARS OF AGE	359	66.5%	374	71.6%	337	69.3%	315	70.5%	291	69.8%
30 TO 39 YEARS OF AGE	170	31.5%	136	26.1%	134	27.6%	121	27.1%	113	27.1%
40 TO 49 YEARS OF AGE	10	1.9%	12	2.3%	14	2.9%	10	2.2%	11	2.6%
50 TO 59 YEARS OF AGE	1	0.2%	0	0.0%	1	0.2%	1	0.2%	2	0.5%
OVER 59 YEARS OF AGE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL	540	100.0%	522	100.0%	486	100.0%	447	100.0%	417	100.0%

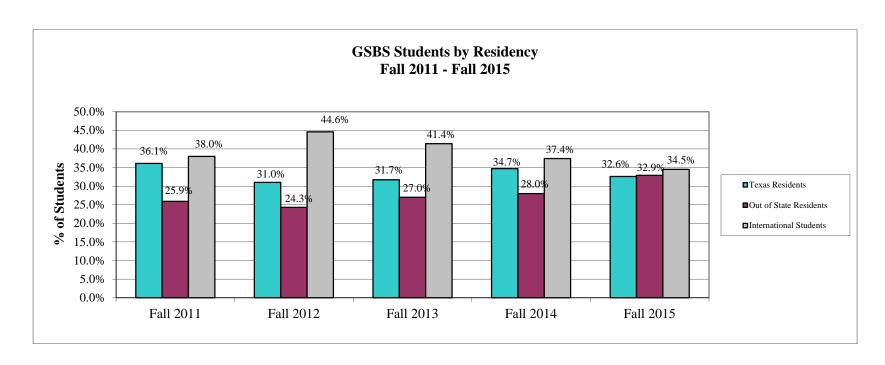
^{*}Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.



B.13 GSBS Students by Residency Type, Fall 2011 – Fall 2015*

RESIDENCE TYPE	Fall 2011 COUNT	% of Students	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students	Fall 2015 COUNT	% of Students
Texas Residents	195	36.1%	162	31.0%	154	31.7%	155	34.7%	136	32.6%
Out of State Students	140	25.9%	127	24.3%	131	27.0%	125	28.0%	137	32.9%
International Students	205	38.0%	233	44.6%	201	41.4%	167	37.4%	144	34.5%
Total	540	100.0%	522	100.0%	486	100.0%	447	100.0%	417	100.0%

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



C. Degrees



Making Cancer History®

Exhibit C.1

Degrees Offered at The University of Texas MD Anderson Cancer Center

	hool of Biomedical Sciences ical Sciences ion in d Molecular Biology, Biomedical Sciences binformatics and Systems Biology, Cell and Regulatory Biology inslational Sciences, iterapeutics, Genetic Counseling, lopment, ecular Genetics, Immunology, d Molecular Genetics inogenesis, Neuroscience, ine Therapy) dical Sciences ion in d Molecular Biology inces binformatics and Systems Biology itery Biology itery Biology itery Biology iterapeutics lopment ecular Genetics				
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					
Diagnostic Medical Sonography					
Histotechnology					
Medical Dosimetry					
Molecular Genetic Technology					
Radiation Therapy					
Radiologic Sciences					

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 (SF	IP)	
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, 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 UT Health Science Center-Houston and MD Anderson by SACS.

MD Anderson Fact Book Academic Year 2016 Section C: Degrees

C.1 School of Health Professions Degrees by Level, Fall 2011 – Fall 2015

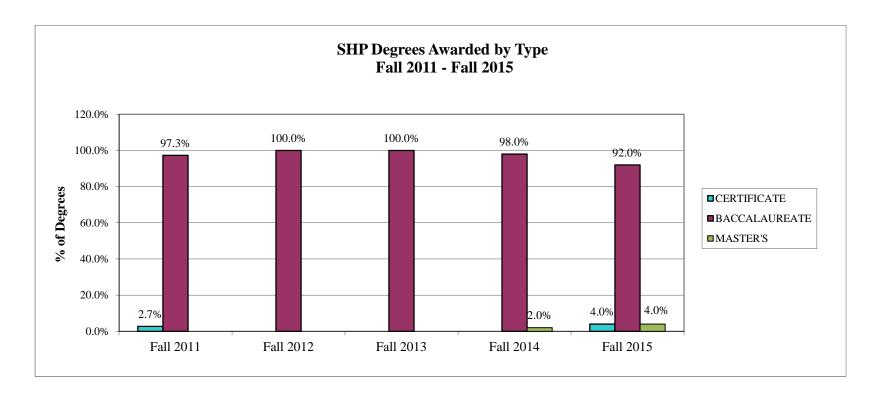
g		Fall	Fall	%	Fall	%	Fall	%	Fall	%
SHP PROGRAM	DEGREE CONFERRED	2011	2012	Inc/Dec	2013	Inc/Dec	2014	Inc/Dec	2015	Inc/Dec
CLINICAL LABORATORY	CERTIFICATE	0	0	0.0%	0		0		0	
SCIENCE	BACCALAUREATE	14	19	35.7%	15	-21.1%	16	6.7%	14	-12.5%
CYTOGENETIC	CERTIFICATE	0	0	0.0%	0		0		0	
TECHNOLOGY	BACCALAUREATE	14	31	121.4%	19	-38.7%	15	-21.1%	18	20.0%
CYTOTECHNOLOGY	CERTIFICATE	0	0	0.0%	0		0		0	0.0%
CITOTECHNOLOGI	BACCALAUREATE	7	6	-14.3%	7	16.7%	1	-85.7%	7	600.0%
DIAGNOSTIC IMAGING	CERTIFICATE	0	0	0.0%	0	0.0%	0	0.0%	6	0.0%
	BACCALAUREATE	12	31	158.3%	28	-9.7%	28	0.0%	29	3.6%
DIAGNOSTIC GENETICS	MASTER'S	NA	NA		NA		3		6	100.0%
DIAGNOSTIC MEDICAL										
SONOGRAPHY	BACCALAUREATE	NA	NA		NA		7		6	-14.3%
HISTOTECHNOLOGY	CERTIFICATE	2	0	-100.0%	0	-100.0%	0			
Instatechnologi	BACCALAUREATE	6	11		12	9.1%	14	16.7%	12	-14.3%
MEDICAL DOSIMETRY	CERTIFICATE	0	0		0		0			
WEDICAL DUSINETRY	BACCALAUREATE	16	12	-25.0%	16	33.3%	16	0.0%	16	0.0%
MOLECULAR GENETIC										
TECHNOLOGY	BACCALAUREATE	24	30	25.0%	31	3.3%	27	-12.9%	14	-48.1%
RADIATION THERAPY	CERTIFICATE	1	0	100.0%	0					
KADIATION THEKAPT	BACCALAUREATE	16	16	0.0%	20	25.0%	20	0.0%	21	5.0%
TOTAL WIT	ΓHIN YEAR	112	156	39.3%	148	-5.1%	147	-0.7%	149	1.4%

Source: SHP Dean's Report

C.2 SHP Degrees Awarded by Type, Fall 2011 – Fall 2015

	Fall	Fall	%	Fall	%	Fall	%	Fall	%
DEGREE AWARDED	2011	2012	Inc/Dec	2013	Inc/Dec	2014	Inc/Dec	2015	Inc/Dec
CERTIFICATE	3	0	-100.0%	0		0		6	
BACCALAUREATE	109	156	43.1%	148	-5.4%	144	-2.8%	137	-5.1%
MASTER'S	N/A	N/A		N/A		3		6	100.0%
Total	112	156	39.3%	148	-5.4%	147	-0.7%	149	1.4%

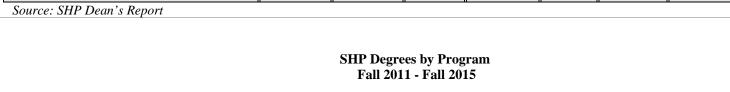
*Source: Certified CBM009

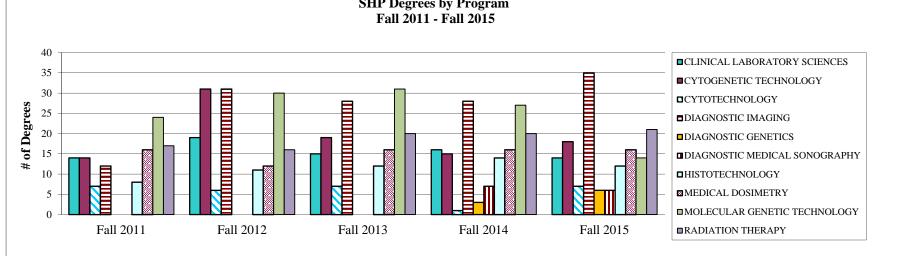


MD Anderson Fact Book Academic Year 2016 Section C: Degrees

C.3 SHP Degrees by Program, Fall 2011 - Fall 2015

	Fall	Fall	%	Fall	%	Fall	%	Fall	%
PROGRAM	2011	2012	Inc/Dec	2013	Inc/Dec	2014	Inc/Dec	2015	Inc/Dec
CLINICAL LABORATORY SCIENCES	14	19	35.7%	15	-21.1%	16	6.7%	14	-12.5%
CYTOGENETIC TECHNOLOGY	14	31	121.4%	19	-38.7%	15	-21.1%	18	20.0%
CYTOTECHNOLOGY	7	6	-14.3%	7	16.7%	1	-85.7%	7	600.0%
DIAGNOSTIC IMAGING	12	31	158.3%	28	700.0%	28	0.0%	35	25.0%
DIAGNOSTIC GENETICS						3		6	100.0%
DIAGNOSTIC MEDICAL									
SONOGRAPHY						7		6	-14.3%
HISTOTECHNOLOGY	8	11	37.5%	12	9.1%	14	16.7%	12	-14.3%
MEDICAL DOSIMETRY	16	12	-25.0%	16	33.3%	16	0.0%	16	0.0%
MOLECULAR GENETIC									
TECHNOLOGY	24	30	25.0%	31	3.3%	27	-12.9%	14	-48.1%
RADIATION THERAPY	17	16	-5.9%	20	25.0%	20	0.0%	21	5.0%
OVERALL	112	156	39.3%	148	-5.1%	147	-0.7%	149	1.4%





Section C: Degrees

C.4 SHP Degrees Awarded by Program and Average Age, Fall 2011 – Fall 2015

		Fall	2011	Fall	2012	Fal	1 2013	Fal	1 2014	Fall	2015
PD CCD 115	DEGREE	Avg.	COLDIT	Avg.	COLDIT	Avg.	COLINIE	Avg.	COLDE	Avg.	COLINE
PROGRAM	CONFERRED	Age	COUNT	Age	COUNT	Age	COUNT	Age	COUNT	Age	COUNT
CLINICAL LABORATORY SCIENCE	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	23.6	14	29.0	19	31.0	15	30.0	16	27.0	14
CYTOGENETIC TECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	23.7	14	28.0	31	28.0	19	26.0	15	27.7	18
CYTOTECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	23.0	7	27.0	6	36.0	7	20.0	1	29.0	7
DIAGNOSTIC IMAGING	BACCALAUREATE	27.6	12	32.0	31	32.0	28	32.0	28	29.5	36
DIAGNOSTIC GENETICS	MASTER'S	NA	NA	NA	NA	NA	NA	29.0	3	26.8	6
DIAGNOSTIC MEDICAL											
SONOGRAPHY	BACCALAUREATE	NA	NA	NA	NA	NA	NA	29.0	7	27.0	6
HISTOTECHNOLOGY*	CERTIFICATE	24.0	2	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	35.6	6	33.0	11	31.0	12	31.0	14	29.0	12
MEDICAL DOSIMETRY	BACCALAUREATE	27.6	16	30.0	12	31.0	16	29.0	16	28.0	16
MOLECULAR GENETIC											
TECHNOLOGY	BACCALAUREATE	22.6	24	28.0	30	30.0	31	28.0	27	30.8	14
RADIATION THERAPY	CERTIFICATE	31.0	1	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	26.7	16	29.0	16	31.0	20	29.0	20	27.7	21
TOTAL WITHIN YEAR		25.5	112	29.5	156	29.5	148	28.0	147	28.3	149

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

Section C: Degrees

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2011 – Fall 2015

	gram, Ethnichy, and Gender, F		Fall	% of	Fall	% of	Fall	% of	Fall	% of	Fall	% of
PROGRAM/DEGREE	ETHNICITY	GENDER	2011	All	2012	All	2013	All	2014	All	2015	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	1	7.1%	1	5.3%	3	20.0%	2	12.5%	3	21.4%
		MALE	0	0.0%	2	10.5%	1	6.7%	2	12.5%	2	14.3%
	BLACK NON-HISPANIC	FEMALE	3	21.4%	4	21.1%	1	6.7%	2	12.5%	1	7.1%
		MALE	1	7.1%	1	5.3%	0	0.0%	1	6.3%	0	0.0%
	HISPANIC	FEMALE	2	14.3%	2	10.5%	4	26.7%	3	18.8%	1	7.1%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	6.3%	1	7.1%
	ASIAN OR PACIFIC ISLANDER	FEMALE	5	35.7%	5	26.3%	4	26.7%	2	12.5%	4	28.6%
		MALE	2	14.3%	2	10.5%	2	13.3%	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	0	0.0%	1	5.3%	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%	1	5.3%	0	0.0%	1	6.3%	2	14.3%
	MALE					0.0%	0	0.0%	2	12.5%	0	0.0%
SUBTOTAL BACCALAUREA	UBTOTAL BACCALAUREATE DEGREES				19	100.0%	15	100.0%	16	100.0%	14	100.0%
TOTAL, CERTIFICATE & I	BACCALAUREATE DEGREES		14		<u>19</u>		<u>15</u>	_	16		14	

Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2011 – Fall 2015

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% 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, CERTIFIC	CATE		0		0		0		0		0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	0	0.0%	6	19.4%	3	15.8%	2	13.3%	3	16.7%
		MALE	3	21.4%	3	9.7%	2	10.5%	0	0.0%	2	11.1%
	BLACK NON-HISPANIC	FEMALE	1	7.1%	3	9.7%	2	10.5%	0	0.0%	2	11.1%
		MALE	2	14.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	1	7.1%	7	22.6%	1	5.3%	1	6.7%	3	16.7%
		MALE	0	0.0%	2	6.5%	0	0.0%	3	20.0%	1	5.6%
	ASIAN OR PACIFIC ISLANDER	FEMALE	5	35.7%	7	22.6%	3	15.8%	3	20.0%	3	16.7%
		MALE	2	14.3%	1	3.2%	1	5.3%	2	13.3%	1	5.6%
	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%	2	6.5%	0	0.0%	0	0.0%	3	16.7%
		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%	6	31.6%	1	6.7%	0	0.0%
	MALE				0	0.0%	1	5.3%	3	20.0%	0	0.0%
SUBTOTAL BACCALA	UBTOTAL BACCALAUREATE DEGREES			100.0%	31	100.0%	19	100.0%	15	100.0%	18	100.0%
TOTAL, CERTIFICAT	E & BACCALAUREATE DEGREES	S	14		31		<u>19</u>		<u>15</u>		<u>18</u>	

Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2011 – Fall 2015

	ry 1 rogram, Emmerty, and Ger		Fall	%								
PROGRAM/DEGREE		GENDER	2011	of All	2012	of All	2013	of All	2014	of All	2015	of All
	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, CERTIFIC	CATE		0	0			0		0		0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	1	14.3%	2	33.3%	0	0.0%	1	100.0%	1	14.3%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	2	28.6%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	1	14.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	2	28.6%	2	33.3%	4	57.1%	0	0.0%	1	14.3%
		MALE	0	0.0%	0	0.0%	1	14.3%	0	0.0%	1	14.3%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0	0.0%	1	16.7%	1	14.3%	0	0.0%	4	57.1%
		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	0	0.0%	1	16.7%	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	1	14.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	1	14.3%	0	0.0%	0	0.0%
SUBTOTAL BACCALA	BTOTAL BACCALAUREATE DEGREES			100.0%	6	100.0%	7	100.0%	1	100.0%	7	100.0%
	OTAL, CERTIFICATE & BACCALAUREATE DEGREES		7		6		7		4		7	

Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2011 – Fall 2015

	by Frogram, Ethnicity, and Ger		Fall	%	Fall	%	Fall	%	Fall	%	Fall	%
PROGRAM/DEGREE		GENDER	2011	of All	2012	of All	2013	of All	2014	of All	2015	of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	0		0		0		0		0	0.0%
IMAGING		MALE	0		0		0		0		1	16.7%
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		0		0		1	16.7%
		MALE	0		0		0		0		1	16.7%
	HISPANIC	FEMALE	0		0		0		0		2	33.3%
		MALE	0		0		0		0		0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		1	16.7%
		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, CERTIFI	CATE		0	0			0		0		6	100.0%
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	3	25.0%	7	22.6%	7	25.0%	5	17.9%	6	20.7%
		MALE	3	25.0%	7	22.6%	4	14.3%	3	10.7%	2	6.9%
	BLACK NON-HISPANIC	FEMALE	0	0.0%	0	0.0%	0	0.0%	5	17.9%	2	6.9%
		MALE	1	8.3%	1	3.2%	3	10.7%	0	0.0%	2	6.9%
	HISPANIC	FEMALE	2	16.7%	3	9.7%	5	17.9%	4	14.3%	5	17.2%
		MALE	0	0.0%	6	19.4%	0	0.0%	1	3.6%	5	17.2%
	ASIAN OR PACIFIC ISLANDER	FEMALE	2	16.7%	5	16.1%	3	10.7%	3	10.7%	2	6.9%
		MALE	1	8.3%	2	6.5%	4	14.3%	3	10.7%	3	10.3%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	1	3.6%	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	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	3.4%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	2	7.1%	3	10.7%	0	0.0%
	GIVEN ON THE STILL		0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	3.4%
SUBTOTAL BACCALA	UBTOTAL BACCALAUREATE DEGREES		12	100.0%	31	100.0%	28	100.0%	28	100.0%	29	100.0%
TOTAL, CERTIFICA	TE & BACCALAUREATE DEGREE	S	12		31		28		28		<u>35</u>	

Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2011 – Fall 2015*

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		0	0.0%	2	33.3%
GENETICS		MALE	NA		NA		NA		0	0.0%	0	0.0%
MASTER'S*	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		1	33.3%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		NA		NA		0	0.0%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		0	0.0%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		0	0.0%	0	0.0%
	NATIVE	MALE	NA		NA		NA		0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		0	0.0%	3	50.0%
		MALE	NA		NA		NA		0	0.0%	1	16.7%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		2	66.7%	0	0.0%
	MALE				NA		NA		0	0.0%	0	0.0%
TOTAL, BACCALAUR	EATE DEGREE:								3	100.0%	<u>6</u>	100.0%

^{*}Diagnostic Genetics program began conferring master's degrees in 2014 Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2011 – Fall 2015*

			Fall	% of	Fall	% of	Fall	% of	Fall	% of	Fall	% of
PROGRAM/DEGREE	ETHNICITY	GENDER	2011	All	2012	All	2013	All	2014	All	2015	All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		2	28.6%	0	0.0%
MEDICAL SONOGRAPHY		MALE	NA		NA		NA		0	0.0%	0	0.0%
BACCALAUREATE*	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		1	14.3%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		NA		NA		1	14.3%	3	50.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		2	28.6%	1	16.7%
		MALE	NA		NA		NA		0	0.0%	1	16.7%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		0	0.0%	0	0.0%
	NATIVE	MALE	NA		NA		NA		0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		0	0.0%	1	16.7%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		1	14.3%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
TOTAL, BACCALAUREATI	E DEGREE:								<u>7</u>	100.0%	<u>6</u>	100.0%

^{*}Diagnostic Medical Sonography program began conferring baccalaureate degrees in 2014

Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2011 – Fall 2015

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All
HISTOTECHNOLOGY	WHITE NON-HISPANIC	FEMALE	0	0.0%	0		0	1444	0	1 444	0	
CERTIFICATE		MALE	0	0.0%	0		0		0		0	
	BLACK NON-HISPANIC	FEMALE	0	0.0%	0		0		0		0	
		MALE	0	0.0%	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	2	100.0%	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	7		2	100.0%	0		0		0		0	
BACCALAUREATE*	WHITE NON-HISPANIC	FEMALE	1	16.7%	4	36.4%	4	33.3%	2	14.3%	1	8.3%
		MALE	0	0.0%	0	0.0%	1	8.3%	1	7.1%	1	8.3%
	BLACK NON-HISPANIC	FEMALE	2	33.3%	2	18.2%	2	16.7%	3	21.4%	0	0.0%
		MALE	0	0.0%	1	9.1%	0	0.0%	1	7.1%	0	0.0%
	HISPANIC	FEMALE	1	16.7%	1	9.1%	1	8.3%	0	0.0%	2	16.7%
		MALE	1	16.7%	1	9.1%	0	0.0%	1	7.1%	1	8.3%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0	0.0%	0	0.0%	0	0.0%	3	21.4%	4	33.3%
		MALE	0	0.0%	2	18.2%	3	25.0%	1	7.1%	3	25.0%
	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%	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	1	16.7%	0	0.0%	0	0.0%	2	14.3%	0	0.0%
				0.0%	0	0.0%	1	8.3%	0	0.0%	0	0.0%
SUBTOTAL BACCALAURE	BTOTAL BACCALAUREATE DEGREES				11	100.0%	12	100.0%	14	100.0%	12	100.0%
TOTAL, CERTIFICATE &	BACCALAUREATE DEGREES		8		<u>11</u>		<u>12</u>		<u>14</u>		12	

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

Section C: Degrees

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2011 – Fall 2015

· · ·	rain, Gender, and Ethnicity, Fa		Fall	% of								
PROGRAM/DEGREE	ETHNICITY	GENDER	2011	All	2012	All	2013	All	2014	All	2015	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	E		0				0		0		0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	5	31.3%	2	16.7%	5	31.3%	3	18.8%	3	18.8%
DEGREES		MALE	3	18.8%	2	16.7%	4	25.0%	4	25.0%	1	6.3%
	BLACK NON-HISPANIC	FEMALE	2	12.5%	1	8.3%	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%
	HISPANIC	FEMALE	2	12.5%	1	8.3%	0	0.0%	0	0.0%	5	31.3%
		MALE	0	0.0%	0	0.0%	2	12.5%	1	6.3%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	3	18.8%	5	41.7%	0	0.0%	4	25.0%	4	25.0%
		MALE	1	6.3%	1	8.3%	3	18.8%	3	18.8%	1	6.3%
	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	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	6.3%
		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%	2	12.5%	1	6.3%	0	0.0%
	MALE					0.0%	0	0.0%	0	0.0%	1	6.3%
SUBTOTAL BACCALAURE	UBTOTAL BACCALAUREATE DEGREES			100.0%	12	100.0%	16	100.0%	16	100.0%	16	100.0%
TOTAL, CERTIFICATE &	BACCALAUREATE DEGREES		<u>16</u>		<u>12</u>		<u>16</u>		<u>16</u>		<u>16</u>	

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

Section C: Degrees

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2011– Fall 2015

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All
F ROGRAM/DEGREE	EIHNCIII	GENDER	2011	All	2012	All	2013	AII	2014	All	2015	All
MOLECULAR GENETIC	WHITE NON-HISPANIC	FEMALE	4	16.7%	6	20.0%	6	19.4%	10	37.0%	5	35.7%
TECHNOLOGY		MALE	5	20.8%	2	6.7%	4	12.9%	4	14.8%	1	7.1%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	1	4.2%	1	3.3%	2	6.5%	0	0.0%	0	0.0%
		MALE	1	4.2%	1	3.3%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	2	8.3%	3	10.0%	2	6.5%	3	11.1%	1	7.1%
		MALE	4	16.7%	1	3.3%	5	16.1%	1	3.7%	3	21.4%
	ASIAN OR PACIFIC ISLANDER	FEMALE	2	8.3%	8	26.7%	6	19.4%	1	3.7%	1	7.1%
		MALE	2	8.3%	3	10.0%	1	3.2%	2	7.4%	1	7.1%
	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%	3	10.0%	0	0.0%	0	0.0%	1	7.1%
		MALE	0	0.0%	2	6.7%	0	0.0%	0	0.0%	1	7.1%
	UNKNOWN OR NOT REPORTED	FEMALE	2	8.3%	0	0.0%	5	16.1%	5	18.5%	0	0.0%
	MALE				0	0.0%	0	0.0%	1	3.7%	0	0.0%
TOTAL, BACCALAUREA	OTAL, BACCALAUREATE DEGREE:					100.0%	<u>31</u>	100.0%	<u>27</u>	100.0%	<u>14</u>	100.0%

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

Section C: Degrees

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2011 – Fall 2015

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2011	% of All	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% 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	1	100.0%	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, CERTIFICAT	\dot{E}		1		0		0		0		0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	5	31.3%	5	31.3%	5	25.0%	7	35.0%	6	28.6%
DEGREES		MALE	3	18.8%	2	12.5%	0	0.0%	3	15.0%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	1	6.3%	1	6.3%	2	10.0%	0	0.0%	1	4.8%
		MALE	1	6.3%	2	12.5%	1	5.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	3	18.8%	1	6.3%	3	15.0%	6	30.0%	7	33.3%
		MALE	0	0.0%	0	0.0%	4	20.0%	2	10.0%	2	9.5%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0	0.0%	4	25.0%	1	5.0%	1	5.0%	2	9.5%
		MALE	3	18.8%	1	6.3%	2	10.0%	0	0.0%	2	9.5%
	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	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	4.8%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	1	5.0%	0	0.0%	0	0.0%
	MALE				0	0.0%	1	5.0%	1	5.0%	0	0.0%
SUBTOTAL, BACCALAUR	BTOTAL, BACCALAUREATE DEGREES				16	100.0%	20	100.0%	20	100.0%	21	100.0%
TOTAL, CERTIFICATE A	ND BACCALAUREATE DEGREES:		<u>17</u>		<u>16</u>		<u>20</u>		<u>20</u>		<u>21</u>	

Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2011 – Fall 2015

			Fall	% of								
DEGREE	ETHNICITY	GENDER	2011	Students	2012	Students	2013	Students	2014	Students	2015	Students
CERTIFICATE	WHITE NON-HISPANIC	FEMALE	0	0.0%	0		0		0		0	0.0%
		MALE	0	0.0%	0		0		0		1	16.7%
	BLACK NON-HISPANIC	FEMALE	0	0.0%	0		0		0		1	16.7%
		MALE	1	0.9%	0		0		0		1	16.7%
	HISPANIC	FEMALE	0	0.0%	0		0		0		2	33.3%
		MALE	0	0.0%	0		0		0		0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	2	1.8%	0		0		0		1	16.7%
		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, CERTIF	FICATE		3	2.7%	0	0		0		0	6	4.0%
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	20	17.9%	33	21.2%	32	21.6%	34	23.6%	28	20.4%
		MALE	17	15.2%	18	11.5%	16	10.8%	17	11.8%	9	6.6%
	BLACK NON-HISPANIC	FEMALE	12	10.7%	12	7.7%	9	6.1%	11	7.6%	6	4.4%
		MALE	7	6.3%	6	3.8%	4	2.7%	2	1.4%	2	1.5%
	HISPANIC	FEMALE	15	13.4%	20	12.8%	20	13.5%	18	12.5%	28	20.4%
		MALE	5	4.5%	10	6.4%	12	8.1%	10	6.9%	14	10.2%
	ASIAN OR PACIFIC ISLANDER	FEMALE	17	15.2%	36	23.1%	21	14.2%	19	13.2%	25	18.2%
		MALE	11	9.8%	11	7.1%	13	8.8%	11	7.6%	12	8.8%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	1	0.7%	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%	7	4.5%	0	0.0%	0	0.0%	6	4.4%
		MALE FEMALE	0	0.0%	2	1.3%	0	0.0%	0	0.0%	3	2.2%
	UNKNOWN OR NOT REPORTED		4	3.6%	1	0.6%	18	12.2%	14	9.7%	2	1.5%
			I	0.9%	0	0.0%	3	2.0%	7	4.9%	2	1.5%
SUBTOTAL BACCAL	LAUREATE DEGREES		109	97.3%	156	100.0%	148	100.0%	144	100.0%	137	92.0%

Source: UT Houston Health Science Center Registrar's Office

Section C: Degrees

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2011 – Fall 2015

			Fall	% of								
DEGREE	ETHNICITY	GENDER	2011	All	2012	All	2013	All	2014	All	2015	All
MASTER'S	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		0	0.0%	2	33.3%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		1	0.6%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		NA		NA		0	0.0%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		0	0.0%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		0	0.0%	0	0.0%
	NATIVE	MALE	NA		NA		NA		0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		0	0.0%	3	50.0%
		MALE	NA		NA		NA		0	0.0%	1	16.7%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		2	1.4%	0	0.0%
		MALE	NA		NA		NA		0	0.0%	0	0.0%
TOTAL MASTER'S	TOTAL MASTER'S DEGREE:								3	100.0%	6	4.0%
TOTAL, DEGREES	TOTAL, DEGREES BY YEAR			100.0%	112	100.0%	156	100.0%	147	100.0%	149	100.0%

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

Section C: Degrees

C.7 SHP Graduates by Gender and Ethnicity, Fall 2011 – Fall 2015

		Fall	% of								
ETHNICITY	GENDER	2011	Students	2012	Students	2013	Students	2014	Students	2015	Students
WHITE NON-HISPANIC	FEMALE	20	17.9%	33	21.2%	32	21.6%	34	23.1%	30	20.1%
	MALE	17	15.2%	18	11.5%	16	10.8%	17	11.6%	10	6.7%
BLACK NON-HISPANIC	FEMALE	12	10.7%	12	7.7%	9	6.1%	12	8.2%	7	4.7%
	MALE	8	7.1%	6	3.8%	4	2.7%	2	1.4%	3	2.0%
HISPANIC	FEMALE	15	13.4%	20	12.8%	20	13.5%	18	12.2%	30	20.1%
	MALE	7	6.3%	10	6.4%	12	8.1%	10	6.8%	14	9.4%
ASIAN OR PACIFIC ISLANDER	FEMALE	17	15.2%	36	23.1%	21	14.2%	19	12.9%	26	17.4%
	MALE	11	9.8%	11	7.1%	13	8.8%	11	7.5%	12	8.1%
AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	1	0.7%	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%	7	4.5%	0	0.0%	0	0.0%	9	6.0%
	MALE	0	0.0%	2	1.3%	0	0.0%	0	0.0%	4	2.7%
UNKNOWN OR NOT REPORTED	FEMALE	4	3.6%	1	0.6%	18	12.2%	16	10.9%	2	1.3%
	MALE	1	0.9%	0	0.0%	3	2.0%	7	4.8%	2	1.3%
TOTAL		112	100.0%	156	100.0%	148	100.0%	147	100.0%	149	100.0%

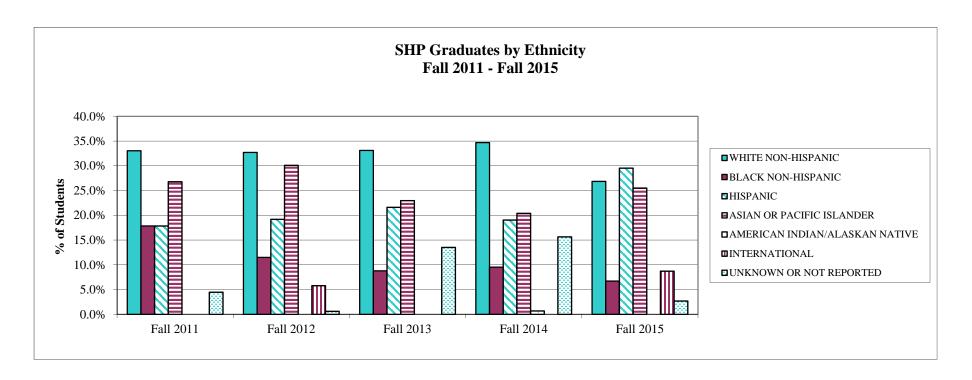
Source: UT Houston Health Science Center Registrar's Office

MD Anderson Fact Book Academic Year 2016 Section C: Degrees

C.8 SHP Graduates by Ethnicity, Fall 2011 – Fall 2015

	Fall	% of								
ETHNICITY	2011	Students	2012	Students	2013	Students	2014	Students	2015	Students
WHITE NON-HISPANIC	37	33.0%	51	32.7%	49	33.1%	51	34.7%	40	26.8%
BLACK NON-HISPANIC	20	17.9%	18	11.5%	13	8.8%	14	9.5%	10	6.7%
HISPANIC	20	17.9%	30	19.2%	32	21.6%	28	19.0%	44	29.5%
ASIAN OR PACIFIC ISLANDER	30	26.8%	47	30.1%	34	23.0%	30	20.4%	38	25.5%
AMERICAN INDIAN/ALASKAN NATIVE	0	0.0%	0	0.0%	0	0.0%	1	0.7%	0	0.0%
INTERNATIONAL	0	0.0%	9	5.8%	0	0.0%	0	0.0%	13	8.7%
UNKNOWN OR NOT REPORTED	5	4.5%	1	0.6%	20	13.5%	23	15.6%	4	2.7%
Total	112	100.0%	156	100.0%	148	100.0%	147	100.0%	149	100.0%

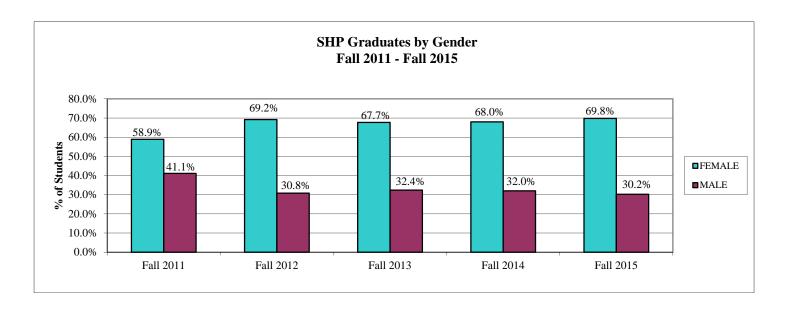
Source: UT Houston Health Science Center Registrar's Office



C.9 SHP Graduates by Gender, Fall 2011 – Fall 2015

	Fall	% of								
GENDER	2011	Students	2012	Students	2013	Students	2014	Students	2015	Students
FEMALE	66	58.9%	108	69.2%	100	67.6%	100	68.0%	104	69.8%
MALE	46	41.1%	48	30.8%	48	32.4%	47	32.0%	45	30.2%
Total	112	100.0%	156	100.0%	148	100.0%	147	100.0%	149	100.0%

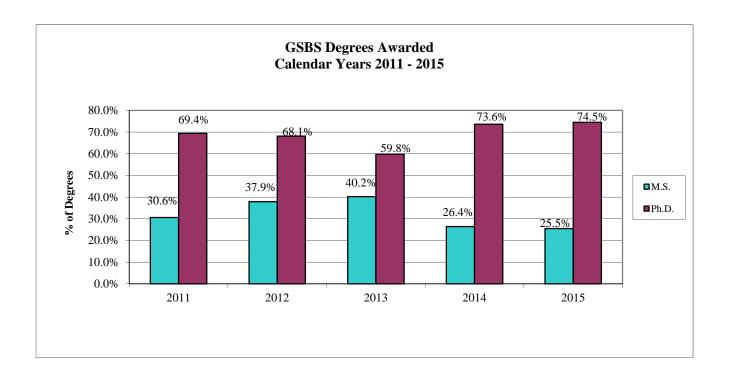
Source: UT Houston Health Science Center Registrar's Office



C.10 GSBS Degrees Awarded, Calendar Years 2011 – 2015*

DEGREE AWARDED	2011	2012	% Inc/Dec	2013	% Inc/Dec	2014	% Inc/Dec	2015	% Inc/Dec
M.S.	34	38	11.8%	41	7.9%	32	-22.0%	25	-28.0%
Ph.D.	77	81	5.2%	61	-24.7%	89	45.9%	73	-21.9%
OVERALL	111	119	7.2%	102	-14.3%	121	18.6%	98	-23.5%

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



C.11 GSBS Graduates by Area of Research Concentration, Calendar Years 2011 – 2015

Away of Dagaayah Intanget	20)11	20)12	20	13	20	14	20	015
Area of Research Interest	MS	PhD								
Biochemistry	1	5		1						
Biochemistry and Molecular Biology			1		1			2		3
Biostatistics, Bioinformatics, and Systems Biology	1	2		1		6		2	1	2
Biomedical Sciences	14	27	11	20	26	13	20	16	10	5
Cancer Biology	1	9	2	17		11	1	27	1	19
Cell Biology		1								
Cell and Regulatory Biology			1	2		2		1		3
Clinical and Translational Sciences									1	
Experimental Therapeutics	1		2	1		7		3	1	5
Genes & Development	1	8		8		5		4	1	8
Genetic Counseling	6		7		6		7		8	
Human & Molecular Genetics		1	1	2		1		4		3
Immunology		6	1	2	1	4		6		8
Medical Physics	8	6	6	8	7	5	4	9	2	9
Microbiology & Molecular Genetics		1	3	5		2		5		`
Molecular Biology				1						
Molecular Carcinogenesis		5	1	4		1		1		4
Molecular Pathology		1		2				1		
Neuroscience	1	5		5		3		8		2
Virology & Gene Therapy			2	2		1				1
Total	34	77	38	81	41	61	32	89	25	73

Source: UT MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences

C.12 GSBS M.S. Program Top Areas of Research Concentration, Calendar Year 2011 – 2015

2011	2012	2013	2014	2015
Biomedical Sciences	Biomedical Sciences	Biophysics	Biomedical Sciences	Biomedical Sciences
Medical Physics	Genetic Counseling	Medical Physics	Genetic Counseling	Genetic Counseling
Genetic Counseling	Medical Physics	Genetic Counseling	Medical Physics	Medical Physics

Source: UT MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences

C.13 GSBS Ph.D. Program Top Areas of Research Concentration, Calendar Year 2011 – Fall 2015

2011	2012	2013	2014	2015
Biomedical Sciences	Biomedical Sciences	Biophysics	Cancer Biology	Cancer Biology
Cancer Biology	Cancer Biology	Cancer Biology	Biomedical Sciences	Medical Physics
Genes & Development	Genes & Development*	Genes & Development*	Medical Physics	Genes & Development*
	Medical Physics*	Medical Physics*		Immunology*

^{*}Same number of graduates within given year.

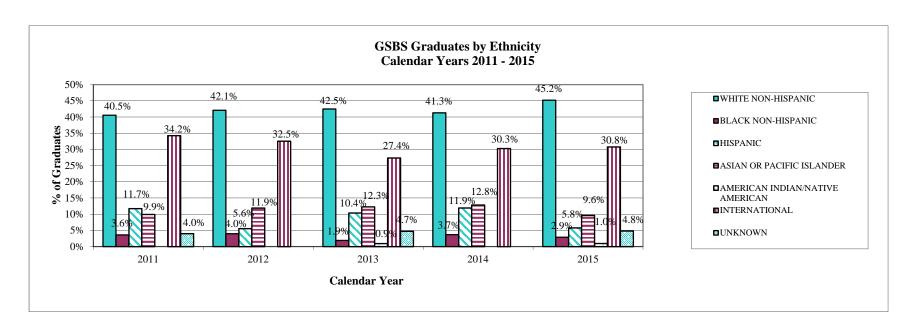
Source: UT MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences

C.14 GSBS Graduates by Ethnicity, Calendar Years 2011 – 2015

	2011	% of	2012*	% of	2013	% of	2014	% of	2015	% of
ETHNICITY	COUNT	Students								
WHITE NON-HISPANIC	45	40.5%	53	42.1%	45	42.5%	45	41.3%	47	45.2%
BLACK NON-HISPANIC	4	3.6%	5	4.0%	2	1.9%	4	3.7%	3	2.9%
HISPANIC	13	11.7%	7	5.6%	11	10.4%	13	11.9%	6	5.8%
ASIAN OR PACIFIC ISLANDER	11	9.9%	15	11.9%	13	12.3%	14	12.8%	10	9.6%
AMERICAN INDIAN OR ALASKAN										
NATIVE	0	0.0%	0	0.0%	1	0.9%	0	0.0%	1	1.0%
INTERNATIONAL	38	34.2%	41	32.5%	29	27.4%	33	30.3%	32	30.8%
UNKNOWN OR NOT REPORTED	0	0.0%	5	4.0%	5	4.7%	0	0.0%	5	4.8%
TOTAL	111	100.0%	126	100.0%	106	100.0%	109	100.0%	104	100.0%

Source: UT MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences

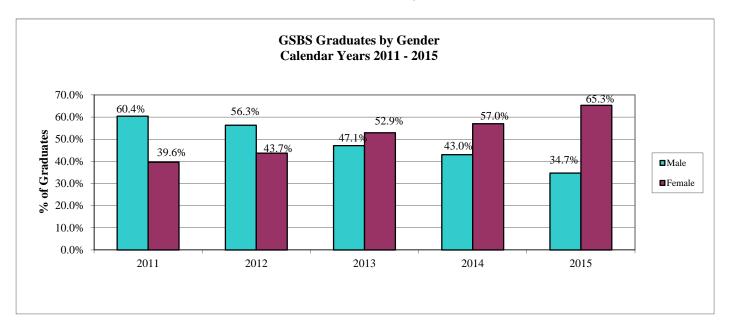
^{*}Starting 2012, GSBS students could declare more than one ethnicity, therefore, ethnicity and degree totals may not match



C.15 GSBS Graduates by Gender, Calendar Years 2011 – 2015

	2011	% of	2012	% of	2013	% of	2014	% of	2015	% of
GENDER	COUNT	Students								
FEMALE	44	39.6%	52	43.7%	54	52.9%	69	57.0%	64	65.3%
MALE	67	60.4%	67	56.3%	48	47.1%	52	43.0%	34	34.7%
TOTAL	111	100.0%	119	100.0%	102	100.0%	121	100.0%	98	100.0%

Source: UT MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences



D. Faculty Demographics



Making Cancer History®

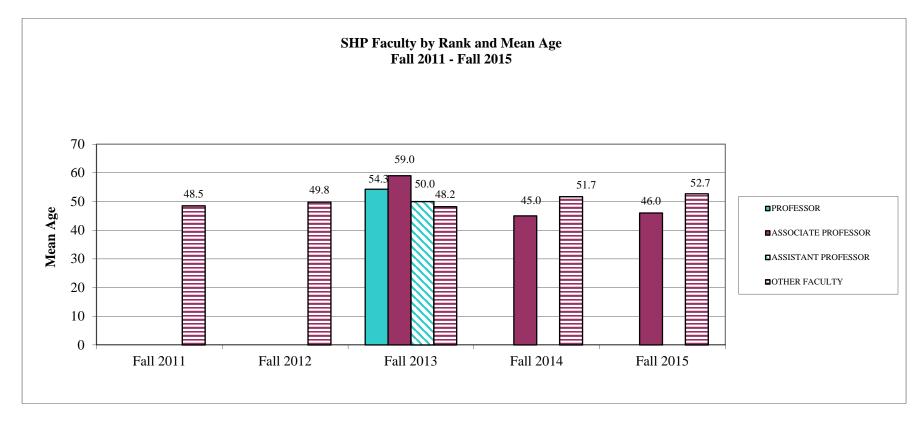
D.1 SHP Faculty by Rank and Mean Age, Fall 2011 – Fall 2015*

	Fa	ll 2011	Fa	ll 2012	Fal	11 2013	Fa	ll 2014	Fal	II 2015
		MEAN								
MEAN AGE BY RANK	COUNT	AGE								
PROFESSOR	0		0		7	54.3	0		0	
ASSOCIATE PROFESSOR	0		0		4	59.0	1	45.0	1	46.0
ASSISTANT PROFESSOR	0		0		1	50.0	0		0	
OTHER FACULTY	43	48.5	49	49.8	33	48.2	56	51.7	54	52.7

^{*}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

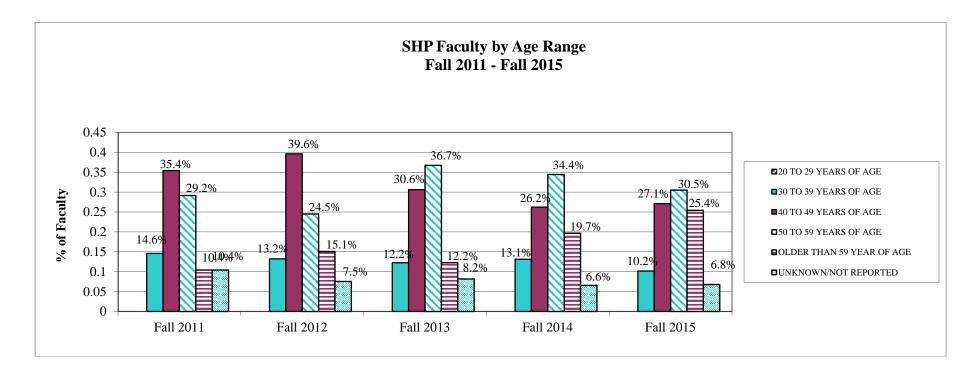


D.2 SHP Faculty by Age Range, Fall 2011 – Fall 2015*

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
AGE RANGE	COUNT	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	7	14.6%	7	13.2%	6	12.2%	8	13.1%	6	10.2%
40 TO 49 YEARS OF AGE	17	35.4%	21	39.6%	15	30.6%	16	26.2%	16	27.1%
50 TO 59 YEARS OF AGE	14	29.2%	13	24.5%	18	36.7%	21	34.4%	18	30.5%
OLDER THAN 59 YEARS OF AGE	5	10.4%	8	15.1%	6	12.2%	12	19.7%	15	25.4%
UNKNOWN/NOT REPORTED	5	10.4%	4	7.5%	4	8.2%	4	6.6%	4	6.8%
TOTAL	48	100.0%	53	100.0%	49	100.0%	61	100.0%	59	100.0%

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog

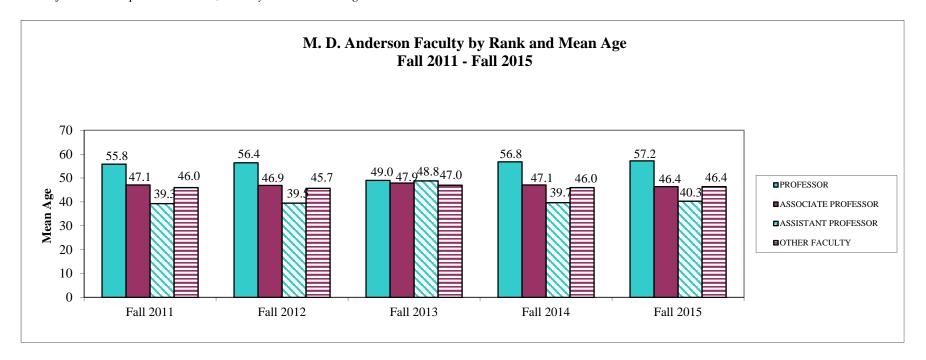


D.3 MD Anderson Faculty by Rank and Mean Age, Fall 2011 - Fall 2015

	Fa	all 2011	Fa	all 2012	F	all 2013	F	all 2014	Fa	all 2015
RANK	COUNT	MEAN AGE								
PROFESSOR	334	55.8	348	56.4	334	49.0	339	56.8	333	57.2
ASSOCIATE PROFESSOR	145	47.1	150	46.9	145	47.9	142	47.1	134	46.4
ASSISTANT PROFESSOR	126	39.3	124	39.5	117	48.8	120	39.7	120	40.3
OTHER FACULTY	1361	46.0	1503	45.7	1553	47.0	1586	46.0	1693	46.4
TOTAL/OVERALL	1966	47.4	2125	47.2	2149	47.8	2187	47.4	2280	47.7

Source: Certified CBM008

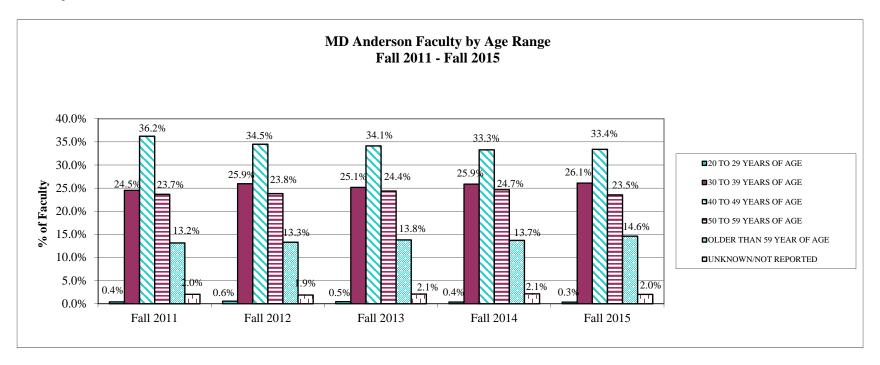
Age at Time of CBM008 Report Submission; Faculty with unknown age are not included



D.4 MD Anderson Faculty by Age Range, Fall 2011 - Fall 2015

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
AGE RANGE	COUNT	Faculty								
20 TO 29 YEARS OF AGE	8	0.4%	12	0.6%	10	0.5%	8	0.4%	8	0.3%
30 TO 39 YEARS OF AGE	492	24.5%	562	25.9%	552	25.1%	578	25.9%	607	26.1%
40 TO 49 YEARS OF AGE	727	36.2%	747	34.5%	749	34.1%	744	33.3%	777	33.4%
50 TO 59 YEARS OF AGE	475	23.7%	516	23.8%	535	24.4%	551	24.7%	548	23.5%
OLDER THAN 59 YEARS OF AGE	264	13.2%	288	13.3%	303	13.8%	306	13.7%	340	14.6%
UNKNOWN/NOT REPORTED	41	2.0%	41	1.9%	46	2.1%	48	2.1%	47	2.0%
TOTAL	2007	100.0%	2166	100.0%	2195	100.0%	2235	100.0%	2327	100.0%

Source: Certified CBM008



D.5 SHP Faculty by Ethnicity and Gender, Fall 2011 – Fall 2015*

ETHNICITY	GENDER	Fall 2011 COUNT	% of Faculty	Fall 2012 COUNT	% of Faculty	Fall 2013 COUNT	% of Faculty	Fall 2014 COUNT	% of Faculty	Fall 2015 COUNT	% of Faculty
WHITE NON-HISPANIC	FEMALE	19	39.6%	21	39.6%	12	24.5%	19	31.1%	19	32.2%
	MALE	9	18.8%	9	17.0%	15	30.6%	14	23.0%	14	23.7%
BLACK NON-HISPANIC	FEMALE	3	6.3%	4	7.5%	3	6.1%	7	11.5%	6	10.2%
	MALE	3	6.3%	3	5.7%	4	8.2%	3	4.9%	3	5.1%
HISPANIC	FEMALE	0	0.0%	1	1.9%	1	2.0%	1	1.6%	1	1.7%
	MALE	1	2.1%	1	1.9%	1	2.0%	0	0.0%	0	0.0%
ASIAN	FEMALE	6	12.5%	5	9.4%	3	6.1%	4	6.6%	4	6.8%
	MALE	4	8.3%	4	7.5%	5	10.2%	7	11.5%	6	10.2%
AMERICAN INDIAN/NATIVE	FEMALE	1	2.1%	1	1.9%	0	0.0%	0	0.0%	0	0.0%
AMERICAN	MALE	0	0.0%	0	0.0%	1	2.0%	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	FEMALE	1	2.1%	2	3.8%	2	4.1%	3	4.9%	3	5.1%
	MALE	1	2.1%	1	1.9%	1	2.0%	2	3.3%	2	3.4%
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%	1	1.9%	1	2.0%	1	1.6%	1	1.7%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL		48	100.0%	53	100.0%	49	100.0%	61	100.0%	59	100.0%

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

D.6 MD Anderson Faculty by Ethnicity and Gender, Fall 2011 - Fall 2015*

ETHNICITY	GENDER	Fall 2011 COUNT	% of Faculty	Fall 2012 COUNT	% of Faculty	Fall 2013 COUNT	% of Faculty	Fall 2014 COUNT	% of Faculty	Fall 2015 COUNT	% of Faculty
WHITE NON-HISPANIC	FEMALE	365	18.2%	400	18.5%	426	19.4%	382	17.1%	399	17.2%
	MALE	684	34.1%	722	33.3%	652	29.7%	667	29.8%	691	29.8%
BLACK NON-HISPANIC	FEMALE	31	1.5%	38	1.8%	26	1.2%	42	1.9%	42	1.8%
	MALE	20	1.0%	22	1.0%	41	1.9%	25	1.1%	25	1.1%
HISPANIC	FEMALE	47	2.3%	48	2.2%	51	2.3%	54	2.4%	54	2.3%
	MALE	74	3.7%	82	3.8%	91	4.1%	95	4.3%	86	3.7%
ASIAN	FEMALE	217	10.8%	285	13.2%	267	12.2%	277	12.4%	298	12.8%
	MALE	380	18.9%	524	24.2%	431	19.6%	451	20.2%	444	19.1%
AMERICAN INDIAN/NATIVE	FEMALE	3	0.1%	3	0.1%	2	0.1%	4	0.2%	3	0.1%
AMERICAN	MALE	0	0.0%	1	0.0%	3	0.1%	1	0.0%	1	0.0%
INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	1	0.0%	82	3.7%	107	4.6%
	MALE	0	0.0%	0	0.0%	0	0.0%	113	5.1%	123	5.3%
UNKNOWN	FEMALE	9	0.4%	10	0.5%	13	0.6%	10	0.4%	10	0.4%
	MALE	17	0.8%	23	1.1%	22	1.0%	23	1.0%	24	1.0%
NATIVE HAWAIIAN OR OTHER	FEMALE	0	0.0%	2	0.1%	2	0.1%	2	0.1%	2	0.1%
PACIFIC ISLANDER	MALE	2	0.1%	2	0.1%	1	0.0%	1	0.0%	1	0.0%
TWO OR MORE RACES	FEMALE	55	2.7%	2	0.1%	51	2.3%	4	0.2%	7	0.3%
	MALE	103	5.1%	2	0.1%	115	5.2%	2	0.1%	5	0.2%
TOTAL		2007	100.0%	2166	100.0%	2195	100.0%	2235	100.0%	2322	100.0%

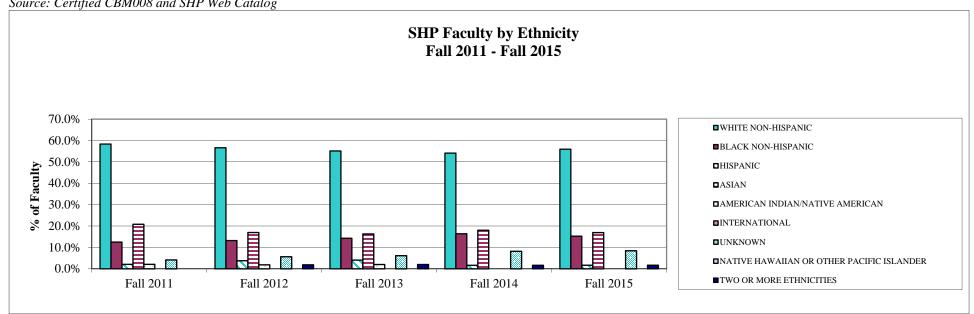
*Does not include adjunct faculty Source: Certified CBM008

SHP Faculty by Ethnicity, Fall 2011 – Fall 2015* **D.7**

ETHNICITY	Fall 2011 COUNT	% of Total	Fall 2012 COUNT	% of Total	Fall 2013 COUNT	% of Total	Fall 2014 COUNT	% of Total	Fall 2015 COUNT	% of Total
WHITE NON-HISPANIC	28	58.3%	30	56.6%	27	55.1%	33	54.1%	33	55.9%
BLACK NON-HISPANIC	6	12.5%	7	13.2%	7	14.3%	10	16.4%	9	15.3%
HISPANIC	1	2.1%	2	3.8%	2	4.1%	1	1.6%	1	1.7%
ASIAN	10	20.8%	9	17.0%	8	16.3%	11	18.0%	10	16.9%
AMERICAN INDIAN/NATIVE AMERICAN	1	2.1%	1	1.9%	1	2.0%	0	0.0%	0	0.0%
INTERNATIONAL	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
UNKNOWN	2	4.2%	3	5.7%	3	6.1%	5	8.2%	5	8.5%
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%	1	1.9%	1	2.0%	1	1.6%	1	1.7%
TOTAL	48	100.0%	53	100.0%	49	100.0%	61	100.0%	59	100.0%

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog



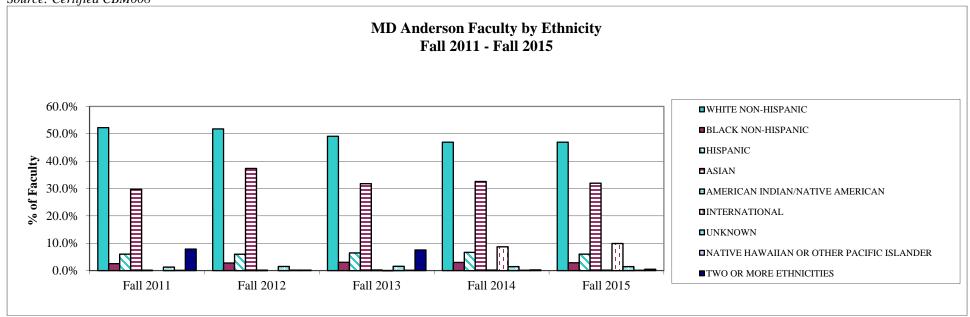
D - 8 MD Anderson Fact Book

D.8 MD Anderson Faculty by Ethnicity, Fall 2011 - Fall 2015*

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
ETHNICITY	COUNT	Faculty								
WHITE NON-HISPANIC	1049	52.3%	1122	51.8%	1078	49.1%	1049	46.9%	1090	46.9%
BLACK NON-HISPANIC	51	2.5%	60	2.8%	67	3.1%	67	3.0%	67	2.9%
HISPANIC	121	6.0%	130	6.0%	142	6.5%	149	6.7%	140	6.0%
ASIAN	597	29.7%	809	37.3%	698	31.8%	728	32.6%	742	32.0%
AMERICAN INDIAN/NATIVE AMERICAN	3	0.1%	4	0.2%	5	0.2%	5	0.2%	4	0.2%
INTERNATIONAL	0	0.0%	0	0.0%	1	0.0%	195	8.7%	230	9.9%
UNKNOWN	26	1.3%	33	1.5%	35	1.6%	33	1.5%	34	1.5%
NATIVE HAWAIIAN OR OTHER PACIFIC										
ISLANDER	2	0.1%	4	0.2%	3	0.1%	3	0.1%	3	0.1%
TWO OR MORE RACES	158	7.9%	4	0.2%	166	7.6%	6	0.3%	12	0.5%
TOTAL	2007	100.0%	2166	100.0%	2195	100.0%	2235	100.0%	2322	100.0%

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

Source: Certified CBM008

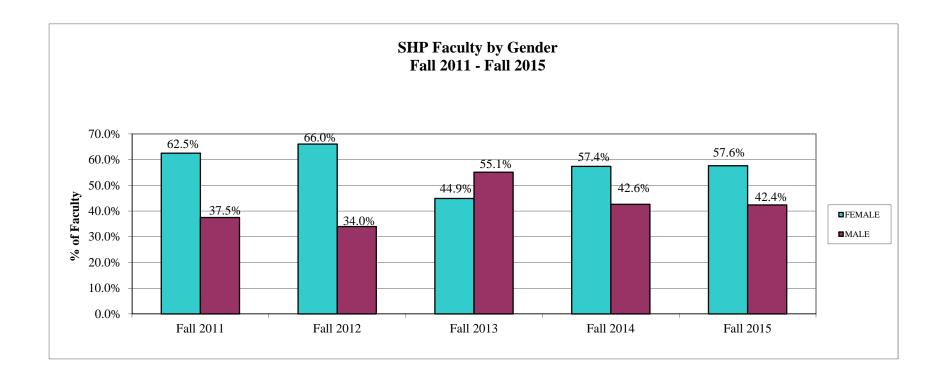


D.9 SHP Faculty by Gender, Fall 2011 – Fall 2015*

GENDER	Fall 2011 COUNT	% of Total	Fall 2012 COUNT	% of Total	Fall 2013 COUNT	% of Total	Fall 2014 COUNT	% of Total	Fall 2015 COUNT	% of Total
FEMALE	30	62.5%	35	66.0%	22	44.9%	35	57.4%	34	57.6%
MALE	18	37.5%	18	34.0%	27	55.1%	26	42.6%	25	42.4%
TOTAL	48	100.0%	53	100.0%	49	100.0%	61	100.0%	59	100.0%

*Does not include adjunct faculty

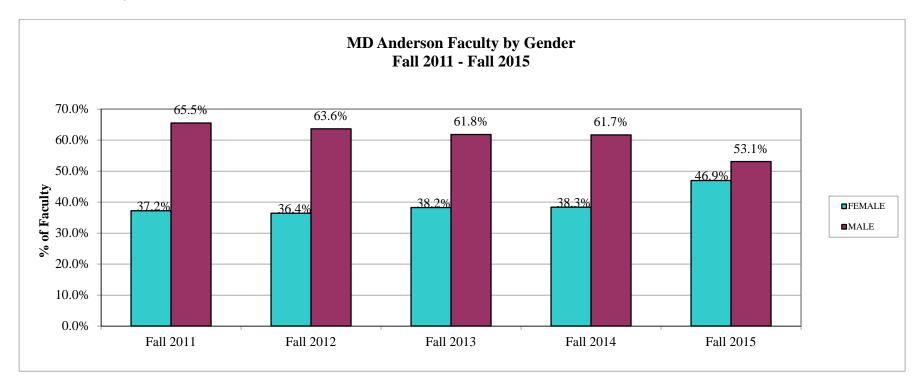
Source: Certified CBM008 and SHP Web Catalog



D.10 MD Anderson Faculty by Gender, Fall 2011 - Fall 2015

	Fall 2011	% of	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of
GENDER	COUNT	Total								
FEMALE	727	36.2%	788	36.4%	839	38.2%	857	38.3%	922	46.9%
MALE	1280	63.8%	1378	63.6%	1356	61.8%	1378	61.7%	1042	53.1%
TOTAL	2007	100.0%	2166	100.0%	2195	100.0%	2235	100.0%	1964	100.0%

Source: Certified CBM008

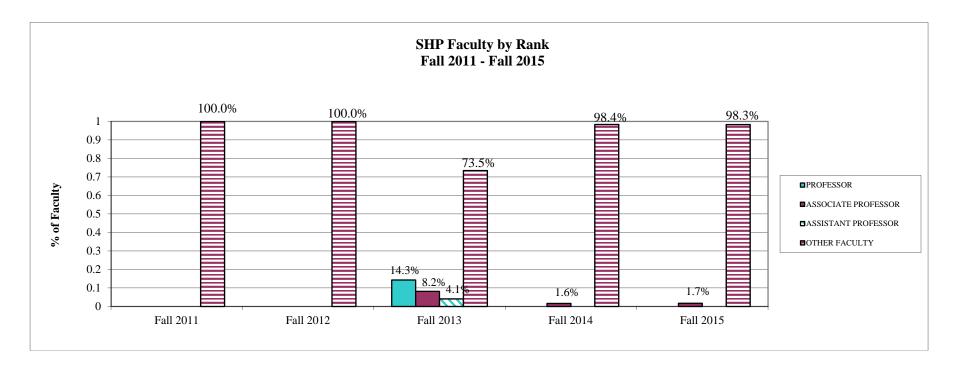


D.11 SHP Faculty by Rank, Fall 2011 – Fall 2015*

	Fa	ll 2011		Fall 2012			Fa	ll 2013		Fa	all 2014		Fa	ll 2015	
		% of			% of			% of			% of			% of	
RANK	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE
PROFESSOR	0	0.0%	0.00	0	0.0%	0.00	7	14.3%	3.00	0	0.0%	0.00	0	0.0%	0.00
ASSOCIATE															
PROFESSOR	0	0.0%	0.00	0	0.0%	0.00	4	8.2%	2.00	1	1.6%	1.00	1	1.7%	1.00
ASSISTANT															
PROFESSOR	0	0.0%	0.00	0	0.0%	0.00	2	4.1%	0.00	0	0.0%	0.00	0	0.0%	0.00
OTHER FACULTY	48	100.0%	28.00	53	100.0%	30.00	36	73.5%	23.00	60	98.4%	28.00	58	98.3%	26.00
TOTAL	48	100.0%	28.00	53	100.0%	30.00	49	100.0%	28.00	61	100.0%	29.00	59	100.0%	27.00

^{*}Does not include adjunct faculty

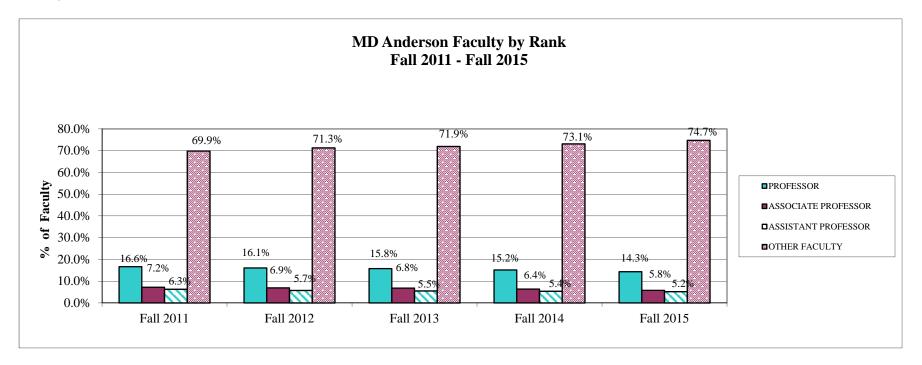
Source: Certified CBM008 and SHP Web Catalog



D.12 MD Anderson Faculty by Rank, Fall 2011 - Fall 2015

		Fall 2011			Fall 2012			Fall 2013			Fall 2014		Fall 2015		
		% OF			% OF			% OF			% OF			% OF	
FACULTY RANK	COUNT	ALL	FTE	COUNT	ALL	FTE									
PROFESSOR	334	17.7%	334	348	16.1%	346.73	346	15.8%	259.31	339	15.2%	338.00	333	14.3%	332.00
ASSOCIATE															
PROFESSOR	145	7.7%	145.00	150	6.9%	149.90	149	6.8%	110.37	142	6.4%	142.00	134	5.8%	134.00
ASSISTANT															
PROFESSOR	126	6.7%	126.00	124	5.7%	123.95	121	5.5%	91.40	120	5.4%	120.00	120	5.2%	120.00
OTHER FACULTY	1402	69.9%	1001.41	1544	71.3%	1076.29	1579	71.9%	1256.51	1634	73.1%	1126.99	1735	74.7%	1159.77
TOTAL	2007	100.0%	1606.41	2166	100.0%	1696.87	2195	100.0%	1717.59	2235	100.0%	1726.99	2322	100.0%	1745.77

Source: Certified CBM008



Section D: Faculty

D.13 SHP Mean Faculty* Salaries by Rank, Fall 2011 - Fall 2015

	F	all 2011		F	all 2012		F	'all 2013		F	'all 2014		F	all 2015	
	MEAN			MEAN	~ ~		MEAN			MEAN			MEAN		
RANK	SALARY	COUNT	FTE	SALARY	COUNT	FTE	SALARY	COUNT	FTE	SALARY	COUNT	FTE	SALARY	COUNT	FTE
PROFESSOR	\$0	0	0.00	\$0	0	0.00	\$114,024	3	3.00	\$0	0	0.00	\$0	0	0.00
ASSOCIATE															
PROFESSOR	\$0	0	0.00	\$0	0	0.00	\$167,831	2	2.00	\$122,101	1	1.00	\$126,069	1	1.00
ASSISTANT															
PROFESSOR	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00
OTHER															
FACULTY	\$105,585	28	28.00	\$113,659	30	30.00	\$108,088	23	23.00	\$118,080	28	28.00	\$118,898	26	26.00
OVERALL	\$105,585	28	28.00	\$113,659	30	30.00	\$112,991	28	28.00	\$118,219	29	29.00	\$118,219	29	27.00

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog

D.14 MD Anderson Cancer Center Mean Faculty* Salaries by Rank, Fall 2011 - Fall 2015

	Fall 2011				Fall 2012		Fall 2013 Fall 2014				Fall 2015				
RANK	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE
PROFESSOR	\$329,466	332	332.00	\$353,816	347	346.73	\$236,794	259	257.81	\$368,869	338	338.00	\$377,678	328	328
ASSOCIATE PROFESSOR	\$211,847	145	145.00	\$216,006	150	149.90	\$235,044	111	109.48	\$226,042	142	142.00	\$242,935	134	134
ASSISTANT PROFESSOR	\$180,880	126	126.00	\$185,665	124	123.95	\$233,434	91	91.00	\$190,556	120	120.00	\$186,666	120	120
OTHER FACULTY	\$179,935	997	991.92	\$186,660	1075	1067.56	\$219,443	1257	1251.41	\$199,450	1126	1118.65	\$211,772	1151	1143.23
OVERALL	\$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	\$243,844	1,733	1,725.23

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

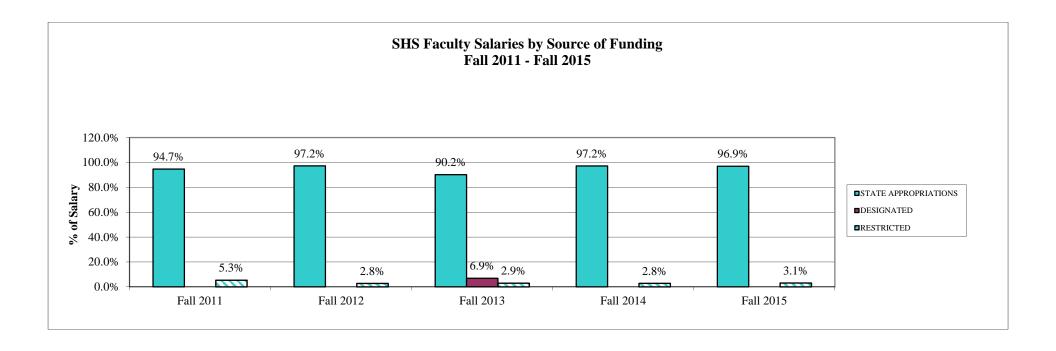
Source: Certified CBM008

D.15 SHP Faculty Salaries by Source of Funds, Fall 2011 – Fall 2015*

	Fall 2	Fall 2011		Fall 2012		Fall 2013		Fall 2014		015
		% OF		% OF		% OF		% OF		% OF
SOURCE OF FUNDING	Sum	ALL	Sum	ALL	Sum	ALL	Sum	ALL	Sum	ALL
STATE APPROPRIATIONS	\$2,798,661	94.7%	\$3,315,302	97.2%	\$2,853,532	90.2%	\$3,331,857	97.2%	\$3,116,594	96.9%
DESIGNATED	\$0	0.0%	\$0	0.0%	\$217,100	6.9%	\$0	0.0%	\$0	0.0%
RESTRICTED	\$157,711	5.3%	\$94,479	2.8%	\$93,126	2.9%	\$96,482	2.8%	\$100,824	3.1%
TOTAL	\$2,956,372	100.0%	\$3,409,781	100.0%	\$3,163,758	100.0%	\$3,428,339	100.0%	\$3,217,418	100.0%

^{*}Does not include adjunct faculty

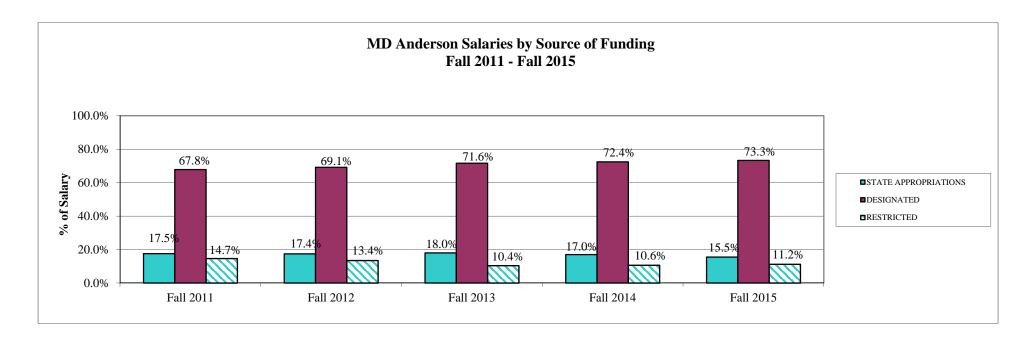
Source: Certified CBM008 and SHP Web Catalog



D.16 MD Anderson Faculty Salaries by Source of Funds, Fall 2011 - Fall 2015

	Fall 201	Fall 2011		Fall 2012		Fall 2013)14	Fall 2015	
	% of			% of		% of		% of		% of
SOURCE OF FUNDING	Sum	Total	Sum	Total	Sum	Total	Sum	Total	Sum	Total
STATE APPROPRIATIONS	\$60,472,396	17.5%	\$66,430,020	17.4%	\$69,612,503	18.0%	\$69,073,177	17.0%	\$69,073,177	17.0%
DESIGNATED	\$233,755,162	67.8%	\$263,476,302	69.1%	\$276,803,555	71.6%	\$294,333,847	72.4%	\$294,333,847	72.4%
RESTRICTED	\$50,560,682	14.7%	\$51,231,257	13.4%	\$40,196,501	10.4%	\$43,220,286	10.6%	\$43,220,286	10.6%
TOTAL	\$344,788,240	100.0%	\$381,137,579	100.0%	\$386,612,559	100.0%	\$406,627,310	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 2016

Name	Department
Michelle Barton, Ph.D	Graduate School of Biomedical Sciences
Gabriel Hortobagyi, M.D.	Breast Medical Oncology

E. Academic Assessments



Making Cancer History®

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
		Review	Certification
MS and PhD Program	Southern Association of		
	Colleges and Schools	2010	10 years
	(SACS)		-
MS with specialization in	American Board of Genetic	2014	Q 1100mg
Genetic Counseling	Counseling (ABGC)	2014	8 years
	Commission on		
MS and PhD with specialization	Accreditation of Medical	2013	A xx0.0mg
in Medical Physics	Physics Educational	2015	4 years
	Programs (CAMPEP)		

E.1.3 Accredited Medical Programs Schedule

Institutional ACGME* Review: April 19, 2017

Program	Accrediting Agency	Accreditation Effective Date
Blood Banking & Transfusion Medicine	ACGME	January 21, 2017
Chemical Pathology	ACGME	January 21, 2017
Complex General Surgical Oncology	ACGME	October 6, 2016
Cytopathology	ACGME	January 21, 2017
Dermatopathology	ACGME	January 21, 2017
Hematology and Oncology	ACGME	January 13, 2017
Hematopathology	ACGME	January 21, 2017
Hospice and Palliative Care	ACGME	January 18, 2017
Molecular Genetics Pathology	ACGME	January 21, 2017
Musculoskeletal Oncology	ACGME	January 27, 2017
Ophthalmic Plastic & Reconstructive Surgery	ACGME	January 5, 2017
Pain Management	ACGME	January 26, 2017
Pediatric Hematology/Oncology	ACGME	January 11, 2017
Procedural Dermatology	ACGME	January 6, 2017
Radiation Oncology	ACGME	January 18, 2017
Selective (Breast) Pathology	ACGME	January 21, 2017
Selective (Cancer Biomarker) Pathology	ACGME	January 21, 2017
Selective (Gastrointestinal & Liver) Pathology	ACGME	January 21, 2017
Selective (Genitourinary) Pathology	ACGME	January 21, 2017
Selective (Gynecologic Oncology) Pathology	ACGME	January 21, 2017
Selective (Head & Neck) Pathology	ACGME	January 21, 2017
Selective (Soft Tissue) Pathology	ACGME	January 21, 2017
Selective (Surgical) Pathology	ACGME	February 4, 2016
Selective (Thoracic) Pathology	ACGME	January 21, 2017
Thoracic Surgery	ACGME	January 6, 2017
Vascular and Interventional Radiology	ACGME	January 26, 2017

^{*} Accreditation Council for Graduate Medical Education

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E.1.4 Texas Medical Board Approved Programs

- Advanced Colorectal Surgery
- 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
- Diagnostic Radiology
- General Internal Medicine
- 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

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Texas Medical Board Approved Programs, continued

- Oncologic Nephrology
- Oncologic Neuroradiology
- Pediatric Neuro Oncology
- 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

Source: Clinical Education

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

	1710	uicai Laboratory Sci	chust Genera	nst Ezam	
Year	# of Graduates	# Graduates Taking BOC Exam	% Passing	Program Mean BOC Score	National Mean BOC Score
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
2015	16	14	64%	509	488

E.2.2 Program in Cytogenetic Technology - Registry Exam Scores

	2006	2007	2008	2009	2010**	2011***	2012	2013	2014	2015
Program Part I	80.17	81.00	81.00	75	590	516	456	495	484	544
National Part I	77.23	78.03	78.83	73.72	516	468	456	494	455	480
Program Part II	92.50	95.92	92.15	77*	700					
National Part II	89.39	90.14	91.02	73.71*	714					

The cytogenetics exam is given by National Credentialing Agency for Laboratory Personnel (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.

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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
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
2000	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
2007	4 HTL	4 HTL	100%	520	422	NA	NA	Discontinued	NA	NA
2008	2 HT	2 HT	100%	506	448	28	16	Discontinued	NA	NA
2008	4 HTL	4 HTL	100%	454	422	NA	NA	Discontinued	NA	NA
2009	2 HT	2 HT	100%	549	480	28	6	Discontinued	NA	NA
2009	7 HTL	7 HTL	100%	597	435	NA	NA	Discontinued	IVA	IVA
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
2015	14 HTL	11 HTL	79%	462	456	8	NA	Discontinued	NA	NA

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

	MD ANDERSON Program in Histotechnology			Progra	NATIONAL ms in Histotechn	ology	MD ANDE Progran Histotechn	ı in	NATIONAL Programs in Histotechnology	
Year	# 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
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%
2006	2 HTL	2	100%	NA	53	70%	2	100%	39	90%
2005	3 HT	3	100%	24	217	65%	Discontinued	NA	D: .: 1	NIA
2007	3 HTL	4	100%	NA	99	59%			Discontinued	NA
2000	2 HT	2	100%	28	264	75%	D: 1	37.4	F:	37.4
2008	4 HTL	4	100%	NA	95	63%	Discontinued	NA	Discontinued	NA
2000	2 HT	2	100%	28	271	75%	Discontinued	NI A	Discontinued	NA
2009	7 HTL	7	100%	NA	131	58%	Discontinued	NA	Discontinued	NA
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
2015	14 HTL	11	79%	8	456	70%	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 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
Fall 2015	91	505	1,535	2,746	4,281
Spring 2016	87	119	1,120	1,556	2,676
Summer 2016	53	63	552	702	1,254

E.3.2 School of Health Professions Surveys

SHP* Program Evaluation by Program and Year

FY	CLS	CGT	CT	DI	НТ	MD	MGT	RT	DG	TOTALS
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
2016	12	14	2	26	4	16	12	13	6	111

*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



Making Cancer History®

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

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.

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

F.1 MD Anderson Performance Measures Reported to the Legislative Budget Board*

Performance Measure	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
Total number of outpatient visits	1,190,568	1,281,489	1,338,706	1,363,008	1,440,684
Total number of inpatient days	180,354	196,180	207,555	202,636	202,483
Net revenue as a percent of gross revenues	53.85%	52.39%	52.42%	51.32%	51.58%
Net revenue per equivalent patient day	4,143.98	4,173.26	4,275.19	4,483.74	4,733.62
Operating expenses per equivalent patient day	3,489.46	3,598.85	3,735.14	3,776.00	3,837.72
Personnel expenses as a percent of operating expenses	60.70%	59.38%	58.15%	58.08%	67.80%
Total number of residents	135	149	168	166	169
Minority residents as a percent of total residents	7.40%	9.40%	10.12%	7.23%	5.92%
Percent of residency completers practicing in Texas	40.00%	38.60%	49.10%	42.00%	38.00%
Total gross patient charges for un-sponsored charity care provided in state facilities					
Total uncompensated charity care provided in state facilities (costs)	154,233,340	96,345,427	163,452,884	130,077,190	106,306,319
Total gross patient charges for un-sponsored charity care provided by faculty					
Total uncompensated charity care provided by faculty (costs)					
State support for patient care as a percent of un-sponsored charity care					
State support for patient care as a percent of estimated cost of uncompensated care	60,413,721	63,051,501	61,892,267	66,666,187	65,221,977
Administrative cost as a percent of total expenditures	7.43%	7.47%	7.56%	7.72%	3.10%
Outpatient-related charges as a percent of all charges by faculty	67.96%	68.88%	70.01%	78.43%	71.57%
Percent of charges to managed care contracts by faculty	52.21%	52.83%	52.06%	57.87%	53.10%
Total external research expenditures	394,146,854	365,961,389	373,522,114	406,622,738	447,077,363
External research expenditures as percent of total state appropriations	19.57%	16.31%	15.30%	16.39%	17.06%
External research expenditures as percent of state appropriations for research	220.01%	220.01%	3463.31%	3241.21%	3254.59%
Value of lost or stolen property	81,667	62,370	85,593	260,000	203,169
Lost or stolen property as a percent of total inventoried property lost or stolen	0.03%	0.02%	0.03%	0.11%	0.04%
Allied health enrollment	248	316	291	318	317
Percent of allied health graduates passing the certification/licensure exam on the first attempt	93.00%	94.00%	92.00%	90.00%	90.00%
Percent of allied health graduates licensed or certified in Texas	89.00%	86.00%	84.00%	90.00%	90.00%
Graduate Training in Biomedical Sciences	438	421	384	384	447
1 MD Anderson students attending GSBS; from GSBS Data Tables					
Total Number of Post-doctoral Trainees	725	757	747	730	774
Number not reported to LBB; from MD Anderson Trainee Support Services					
Total Number of Research Trainees					
	1,629	1,714	1,743	1,853	1,890

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

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

Legislative Budget Board Health-Related Institutions Performance Measures Definitions Definitions Report

84th Regular Session, Performance Reporting Automated Budget and Evaluation System of Texas (ABEST)

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 onsite (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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Legislative Budget Board Health-Related Institutions Performance Measures Definitions Definitions Report

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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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Legislative Budget Board Health-Related Institutions Performance Measures Definitions Definitions Report

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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 31 of 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

Total Uncompensated Charity Care Provided by Faculty: The decline is due to the establishment of the Health Insurance Marketplaces under ACA, shift in payor mix and change in methodology to exclude bad debts pertaining to self-pay and non-governmental third party payers

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 decline is due to the establishment of the Health Insurance Marketplaces under ACA, shill in payor mix and change in methodology to exclude bad debts pertaining to self-pay and non-governmental third party payors.

Total Number of MD or DO Residents: The increase is due to one of our larger programs, the Surgical Oncology program that became accredited by the A COME.

Total Number of Outpatient Visits: The projection for outpatient visits was over optomistic when projected in FY 2013.

Minority Residence as Percent of Total Residence: The projection for the percentage of minority residents did not meet the target developed in TH 2013.

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

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

	Enroll	ment				
1. Enrollment of undergraduate, graduate	, and professional stude	nts. 🕕				
	Fall 2000	Fall 2014	Fall 2015	% Change Fall 2000to Fall 2015	Institutional Closing the Gaps Target- Fall 2015	Closing t Gaps Completi
otal*	41	303	320	680.5%	262	122.1
White African American	24 (58.5%) 6 (14.6%)	93 (30.7%) 33 (10.9%)	80 (25.0%) 31 (9.7%)	233.3 % 416.7 %	95 37	94.1 83.8
Hispanic	5 (12.2%)	69 (22.8%)	93 (29.1%)	1760.0%	48	193.
Asian	8 (14.6%)	72 (23.8%)	81 (25.3%)	1250.0%	0.000	
International	0 (0.0%)	27 (8.9%)	27 (8.4%)	N/A		
Other	0 (0.0%)	9 (3.0%)	8 (2.5%)	N/A		
fioan American. International students are shown as a octor's - Professional Practice (Unduplicated Total) Pharmacy Dental Medical Audiology Physical Therapy Nursing Practice	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0	N/A N/A N/A N/A N/A N/A		
9,000 8,000 7,000 6,000		120	nternational Asian	☐ Hispanic ☐ Other		
5,000		100				
4,000		80 -				
3,000		60 -				
2,000 -		40				
1,000		20				
		0	_			
Fall 2000 Fall 2012 Total Enrollment	Fall 2015			Fall 2012 at by Race/Ethnicity	Fall 2015	
articipation - Contextual Measures	port W		Source Coordinate	g bloard Management (CBM) låsport	m,	
	Fall 2000		Fall 2014	Fall 2015	Fall	Change 2000 to II 2015
Enroll ment by School Induplicated Total) The University of Texas M.D. Anderson Cancer Cer	41 hter 41 (100.0%)	303 303	(100.0%)	320 320 (100.0%)		680.5%
				2 F O	2014	FY 2015

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The University of Texas MD Anderson Cancer Center **Accountability Report** January 2015

Participation - Out-of-State Peers The University of Texas M.D. Anderson Cancer Center Headcount Enrollment Headcount enrolled for credit, disaggregated by ethnicity. Total Total White African American Hispanic Asian Other Gender Male Fernale School Enrollment Number of graduate and professional students enrolled, disaggregated gender and ethnicity. First Professional* Total 303 93 33 73 76 28 98 205 First Professional* Total White African American Hispanic Asian Other Gender Male Female Graduate Students Total White N/A N/A N/A N/A N/A N/A N/A White African American Hispanic Asian Other Gender Male Female Medical Students** Total White African American Hispanic Asian Other Gender Male Female Dental Students** Total White African American Hispanic Asian Other Gender Gender Male Female Female Total N/A Female *Data not available for Fall 2014. **The data is collected by IPEDS every other year. The data used in this report is for 2014.

Source: IPEDS, Fall 2014

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

Fall 2015 Enrollment Detail - The University of Texas M.D. Anderson Cancer Center

By Level, Age:

Age Group	Undergraduate	Master's	Doctor's Research/Scholarship	Professional Specialty	Post-Baccalaureate	Pharmacy	Medical	Dental	Audiology	Physical Therapy	Nursing Practice	Total
Under 18	0	0	0	0	0	0	0	0	0	0	0	0
18 to 21	47	1	o	0	0	0	0	0	0	0	0	48
22 to 24	103	6	o	o	0	0	0	0	0	0	0	109
25 to 29	82	4	o	o	0	0	0	0	0	0	0	86
30 to 34	38	3	0	0	0	0	0	0	0	0	0	41
35 and over	34	2	0	0	0	0	0	0	0	0	0	36

By Level, Race/Ethnicity:

Race/Ethnicity	Undergraduate	Master's	Doctor's Research/Scholarship	Professional Specialty	Post-Baccalaureate	Pharmacy	Medical	Dental	Audiology	Physical Therapy	Nursing Practice	Total
White	78	2	0	0	0	0	0	0	0	0	0	80
African American	31	0	0	0	0	0	0	0	0	0	0	31
Multi-racial one of which is African American	0	0	0	0	O	0	0	0	o	0	0	0
Hispanic	93	0	0			0	0	0	0	0	0	93
Asian	78	3	0	0		0	0	0	0	0	0	81
International	16	11	0	.0	0	0	0	0	0	0	0	27
Other	8	0	0	0	0	0	0	0	0	0	0	8

By Level, Gender:

Gender	Undergraduate	Master's	Doctor's Research/Scholarship	Professional Specialty	Post-Baccalaureate	Pharmacy	Medical	Denta	Audiology	Physical Therapy	Nursing Practice	Total
Male	101	5	0	C	0	0	0		0	0	0	106
Female	203	11	0	C	0	0	0	- 0	0	0	0	214

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

		Degrees /	Awarded				
	ul an anialtu. 📵	•					
4. Awards by race/ethnicity, level an	nd specialty. 🔻						
		FY 2000	FY 2014	FY 2015	% Change FY 2000 to FY 2015	Institutional Closing the Gaps Target- Fall 2015	Closing the Gaps Completion
Total Degrees* (does not include certificates) White	•	N/A N/A	142 44	136 47	N/A N/A	and the same and t	
African American		N/A	15	12	N/A		
Hispanic		N/A	22	27	N/A		
Asian International		N/A N/A	28 10	29 13	N/A N/A		
Other		N/A	23	8	N/A		
Hispanic students, except international ones, are American students. Asian includes Asian, Hawaiia African American. International students are show	an, and Pacific Islan	ders. "Other" incl					
_evel		N/A	0	0	N/A		
Certificate Associate		N/A N/A	0	0	N/A N/A		
Baccalaureate		N/A	0	0	N/A		
Graduate		N/A	0	0	N/A		
Baccalaureate		N/A	142	133	N/A	138	96.4%
Master's Doctor's Research/Scholarship		N/A N/A	0	3 0	N/A N/A	0	N/A
Doctor's Professional Practice		N/A	0	0	N/A	U	1977
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		
				NIA			
Physical Therapy Nursing Practice		N/A N/A	N/A N/A 142	N/A N/A 136	N/A N/A		
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc	eer Center	N/A N/A	N/A N/A 142	N/A 136	N/A N/A		
Physical Therapy Nursing Practice Degrees by School (does not include certificat	eer Center	N/A N/A	N/A N/A 142	N/A 136	N/A N/A		
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc	In nursing FY 2000	N/A N/A	N/A N/A 142	N/A 136	N/A N/A	Closing the Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Nursing (Degrees Only)	in nursing FY 2000	N/A	N/A N/A 142 Allied Health FY 2015	% Change FY 2000 to FY 2015	N/A N/A N/A Closing the Gaps Target-	Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Jursing (Degrees Only) Certificate	in nursing FY 2000 N/A N/A	N/A	N/A N/A 142 Allied Health FY 2015 0 0	% Change FY 2000 to FY 2015 N/A	N/A N/A N/A Closing the Gaps Target-	Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Jursing (Degrees Only)	in nursing FY 2000 N/A N/A N/A	N/A	N/A N/A 142 Allied Health FY 2015	% Change FY 2000 to FY 2015 N/A N/A	N/A N/A N/A Closing the Gaps Target-	Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Nursing (Degrees Only) Certificate Associates Baccalaureate Graduate	in nursing FY 2000 N/A N/A N/A N/A N/A N/A	N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A	N/A N/A N/A Closing the Gaps Target- FY 2015*	Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded lursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Baccalaureate Baccalaureate	FY 2000 N/A	N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A	N/A N/A N/A Closing the Gaps Target-	Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Vursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Master's	FY 2000 N/A	N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A	N/A N/A N/A Closing the Gaps Target- FY 2015*	Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Nursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Master's Doctor's Research/Scholarship	FY 2000 N/A	N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A	N/A N/A N/A Closing the Gaps Target- FY 2015*	Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Nursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice Note: Total is for degrees only and does not	FY 2000 N/A	N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A	N/A N/A N/A Closing the Gaps Target- FY 2015*	Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Nursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice Note: Total is for degrees only and does not include certificates.	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A	N/A N/A N/A Closing the Gaps Target- FY 2015*	Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Vursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice Note: Total is for degrees only and does not include certificates.	FY 2000 N/A	N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A	N/A N/A N/A Closing the Gaps Target- FY 2015*	Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Vursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Rofessional Practice Note: Total is for degrees only and does not include certificates. CTG target includes baccalaureate degrees	FY 2000 N/A	N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0 Closing the Gaps Target-	Gaps Completion* N/A Closing the Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Nursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice Note: Total is for degrees only and does not include certificates. * CTG target includes baccalaureate degree 6. Degrees and certificates awarded	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0	Gap's Completion* N/A Closing the	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Sursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Baccalaureate Master's Doctor's Professional Practice Vote: Total is for degrees only and does not include certificates. CTG target includes baccalaureate degree 6. Degrees and certificates awarded	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A	N/A N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0 Closing the Gaps Target-	Gaps Completion* N/A Closing the Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Jursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice Jote: Total is for degrees only and does not not not clude certificates. CTG target includes baccalaureate degree 6. Degrees and certificates awarded Milled Health (Degrees Only) Certificate Associates	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	FY 2014 FY 2014 FY 2014 FY 2014 FY 2014 126 0	N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0 Closing the Gaps Target-	Gaps Completion* N/A Closing the Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Ulursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice lote: Total is for degrees only and does not include certificates. CTG target includes baccalaureate degree 6. Degrees and certificates awarded Ullied Health (Degrees Only) Certificate Associates Baccalaureate	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A	N/A N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0 Closing the Gaps Target-	Gaps Completion* N/A Closing the Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Sursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Research/Scholarship Cortor's Professional Practice Note: Total is for degrees only and does not include certificates. CTG target includes baccalaureate degree 6. Degrees and certificates awarded Allied Health (Degrees Only) Certificate Associates Baccalaureate Graduate	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	FY 2014 FY 2014 FY 2014 FY 2014 126 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	N/A N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0 Closing the Gaps Target- FY 2015*	Gaps Completion* N/A Closing the Gaps Completion*	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Uursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice lote: Total is for degrees only and does not include certificates. CTG target includes baccalaureate degree 6. Degrees and certificates awarded Milled Health (Degrees Only) Certificate Associates Baccalaureate	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A	N/A N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0 Closing the Gaps Target-	Gaps Completion* N/A Closing the Gaps	
Physical Therapy Nursing Practice Degrees by School (does not include certificat The University of Texas M.D. Anderson Canc 5. Degrees and certificates awarded Sursing (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Master's Doctor's Research/Scholarship Doctor's Professional Practice Note: Total is for degrees only and does not nclude certificates. CTG target includes baccalaureate degree 6. Degrees and certificates awarded Allied Health (Degrees Only) Certificate Associates Baccalaureate Graduate Baccalaureate Graduate Baccalaureate Baccalaureate Baccalaureate Baccalaureate Baccalaureate Baccalaureate Baccalaureate Baccalaureate	FY 2000 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A	N/A N/A N/A 142 Allied Health FY 2015 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	% Change FY 2000 to FY 2015 N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	N/A N/A N/A N/A N/A Closing the Gaps Target- FY 2015* 0 Closing the Gaps Target- FY 2015*	Gaps Completion* N/A Closing the Gaps Completion*	

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

The University of Texas M.D. Anderson Cancer Center

Health-Related Performance Complete Report

7. Graduation Rates for graduate programs						
	Fall 1995 Cohort		Fall 2009 Cohort		Fall 2010 Cohort	Point/% Change Fall 1995 to Fall 2010 Cohorts
Master's Graduation Rate First-time entering cohort Percent Master's or Above	•	N/A N/A		N/A N/A	N/A N/A	N/A N/A
	FY 1991 Cohort		FY 2005 Cohort		FY 2006 Cohort	Point/% Change FY 1991 to FY 2006 Cohorts
Doctoral-Research Graduation Rate First-time entering cohort Percent Master's Received Percent Doctorates Received	•	N/A N/A N/A		N/A N/A N/A	N/A N/A N/A	N/A N/A N/A
	Fall 1995 Cohort		Fall 2009 Cohort		Fall 2010 Cohort	Point/% Change Fall 1995 to Fall 2010 Cohorts
Pharmacy First-time entering cohort Graduation Rate Medical First-time entering cohort	•	N/A N/A N/A		N/A N/A N/A	N/A N/A N/A	N/A N/A N/A
Graduation Rate Dental (DDS) First-time entering cohort Graduation Rate		N/A N/A N/A		N/A N/A N/A	N/A N/A N/A	N/A N/A N/A
	FY 2012	FY	2013	Y 2014	FY 2015	% Change FY 2012 to FY 2015
8. Student Satisfaction Medical Schools	N/A		N/A	N/A	. N	/A N/A

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015



Success - Out-of-State Peers

Out-of-state peer data is from the Fall 2014 IPEDS report and may not match account ability 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

The University of Texas M.D. Anderson Cancer Center

Degrees Awarded: Number of graduates by level, race/ethnicity and gender.	
Health Professions	147
White	49
African American	13
Hispanic	32
Asian	35
Other	18
Medicine	N/A
White	N/A
African American	N/A
Hispanic	N/A
Asian	N/A
Other	N/A
Level	
Associates	N/A
Bachelors	147
Master's): O
Doctor's Research/Scholarship	0
Doctor's Professional Practice	0
Gender	
Male	48
Female	99
Nursing and Allied Health Graduates: Number of degrees awarded in nursing/allied health by level.	<u> </u>
Total Degrees	132
Certificate	1
Associates	N/A
Bachelors	131
Master's	N/A
Doctor's Research/Scholarship	0

Bourne: IPEDB, Fall 2014

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

Graduates Detail (FY 2015)- 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	То	tal
White	0	47		0 () ()	47
African American	0	11		1 () ()	12
Multi-racial one of which is African American	0	0		0 () ()	0
Hispanic	0	27		0 () (0	27
Asian	0	29		0 () ()	29
International	0	11		2 () ()	13
Other	0	8		0 () ()	8

By Level, Gender:



FY 2015 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	Tota
White	0	47	C	0	0	4
African American	0	11	1	0	0	1:
Multi-racial one of which is African American	0	0	C	0	0	
International	0	11	2	0	C	1:
Hispanic	Ō	27	C	0	0	2
Asian	0	29	C	0	0	2
Other	0	8	C	0	0	

*Certificates not included in the total

By Level, Gender:

	Gender	Certificate*	Bachelor's	Master's	Doctor's Research/Scholarship	Doctor's Professional Practice	Tot	tal
Ma	le		43	() 0		0	43
Fe	male	C	90	;	3 0	į į	0	93

*Certificates not included in the total

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

Excellence - Key Measures

Certification and Licensure

9. Licensure/certification rate on state or na	ational exams. 🕕				
	FY 2000	FY 2013	FY 2014	FY 2015	Point Change FY 2000 to FY 2015
Nursing pass rate	N/A	N/A	N/A	N/A	N/A
Allied Health pass rate	N/A	94.0%	90.0%	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 2012	FY 2013	FY 2014	% Change FY 2000 to FY 2014
10. Nursing baccalaureate graduates employed and/or enrolled	N/A	N/A	N/A	N/A	N/A

Faculty Awards

	Fall 2000	Fall 2014	Fall 2015	% Change Fall 2000 to Fall 2015
11. Nobel Prize Winners and National Academies. National Academy of Science National Academy of Engineering Nobel Prize Academy of Arts and Sciences Institute of Medicine American Academy of Nursing American College of Dentists Howard Hughes Medical Institute		3 4 2	2	N/A N/A N/A N/A N/A N/A N/A

Quality Enhancement Plan

12. Quality Enhancement Plan, Including Reaffirmation Year 🕕

Excellent Programs

13. Excellent Programs 🕕

Excellence - Contextual Measures

	Fall 2000	Fall 2014	Fall 2015	%/Point Change Fall 2000 to Fall 2015
14. Faculty by Race/Ethnicity*				
White	42	1,049	1,090	2495.2%
African American	6	67	68	1033.3%
Hispanic	3	135	132	4300.0%
Asian	12	731	745	6108.3%
International	0	209	240	N/A
Other	0	44	47	N/A
Faculty by Gender				
Male	22	1,378	1,400	6263.6%
Female	41	857	922	2148.8%

*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.

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

15. Endowed Professorships and Chairs	Fall 2000	Fall 2014	Fall 2015	%/Point Change Fall 2000 to Fall 2015
Endowed Professorships	48	85	73	52.1%
Percent unfilled	33%	18%	12%	- 21.3
Percent of total tenured/tenure-track faculty	8%	11%	13%	1.5
Endowed Chairs	53	79	83	56.6%
Percent unfilled	17%	14%	7%	- 10.0
Percent of total tenured/tenure-track faculty	6%	11%	15%	8.6

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

	ad Delicate Day	alı Cım -				
reuei ai a	nd Private Resear	ch Expe _		98	5	
			FY 2001	FY 2014	F Y 2015	% Change FY 2001 to FY 2015
6. Sponsored (federal and private) research expenditures (\$ M	llion)		\$ 139.660	\$381.310	\$ 414.660	196.9
Federal and Priva	ite Research Expe	nditures	per FTE Fac	culty		
	58	Γ	FY 2001	FY 2014	F Y 2015	% Change FY 2001 to FY 2015
7. Sponsored (federal and private) research expenditures per t ncludes research faculty only)	enuret enure track FTE	faculty	\$23,276,633	\$637,643	\$713,700	- 96.9
Res earch a	ns a Percent of Sta	ite Appro	opriations			
		Γ	FY 2001	FY 2014	FY 2015	Point Chang FY 2001 to FY 2015
3. Sponsored (federal and private) research as a percent of sta	ite appropriations	1	97.4%	180.1%	189.3%	9
# 312		75.736 75	FY 2001	FY 2014 arch/State Api		5
Yource HEGE Annual Research Expansions (Aport			Yourse (HbOs	Annual l'Assuurch Expandé	tunes l'Asport	
Research - Contextual Measures						
desearch - Contextual Measures			FY 2011	FY 2014	F Y 2015	%/Point Change FY 2011 to FY 2015
			FY 2011 412 68.1%	FY 2014 448 58%	FY 2015 388 648%	Change FY 2011 to FY 2015 - 10.
3. Tenure/tenure-track FTE faculty with extramural grants Number	20	2014	412	448	368	Change FY 2011 to
Number Percent	FY 2001 FY	2014 736.193	412 66.1%	448 58% % Change FY 2001to	368	Change FY 2011 to FY 2015 - 10.
3. Tenure/tenure-track FTE faculty with extramural grants Number Percent 3. Research Expenditures (\$ Millions)	FY 2001 FY \$210,237 \$ \$91,543 \$	736.193 158.986	412 66.1% FY 2015 \$780.577 \$161.171	448 58% % Change FY 2001to FY 2015 271.3% 76.1%	368	Change FY 2011 to FY 2015 - 10.
3. Tenure/tenure-track FTE faculty with extramural grants Number Percent D. Research Expenditures (\$ Millions)	\$210.237 \$ \$215.43 \$ \$58.853 \$ \$48.117	736.193	412 66.1% FY 2016 \$780.577	448 58% % Change FY 2001to FY 2015 271.3%	368	Change FY 2011 to FY 2015 - 10.

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

Research - Out-of-State Peers

The University of Texas M.D. Anderson Cancer Center

Research Expenditures Current year research expenditures. Research Expenditures

\$1,980

Research Funds
Percent of sponsored (external/federal) research funds.
Percent of sponsored (external/federal) research funds

Source: IPEDS, Fall 2014

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center **Accountability Report** January 2015

Research - Out-of-State Peers

The University of Texas M.D. Anderson Cancer

DANA - FARBER CANCER INSTITUTE Institution's Out-of-State Peers
MEMORIAL ALOAN
KETTING CANCER
CENTER
CANCER CENT

SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER AT JOHN HOPKINS

Research Expenditures Current year research expenditures. Research Expenditures

Research Funds Research Funds
Percent of sponsored
(external/federal) research funds.
Percent of sponsored
(external/federal) research
funds

Source: IPEDS, Fall 2013

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

Admi	nistrative Cost						
	FY 2000	FY 2014	FY 20	15 F	Point Chan FY 2000 to FY 2015	o	
1. Institutional support as a percent of total expenditures	N/A	7	7%	3.1%		N/A	
Instruction and O	perations Formul	a Funding	Ì			_	
22. Formula funding per full-time equivalent student.* ①							
	FY 200	6	FY 2014	FY	Y 2015	% Chang FY 2006 FY 201	to
Medical Education Dental Education		N/A N/A	N/A N/A		N/A N/A	·	N/A
Biomedical Sciences		N/A	\$0		N/A	١	N/A
Health Professions Education Nursing Education	\$	17,883 N/A	\$9,406 N/A		\$10,448 N/A		41.69 N/
Public Health Education Pharmacy Education		N/A N/A	N/A N/A		N/A N/A		N/A
Due to a fiscal year reporting basis for FTSE and the inclusic TSE may differ from published rates.		ss Supple	пепі іп арр	порпац	ed dollar	s, runding p	эеі
	Facilities		100				
	Fall 200	02	Fall 2013	Fa	III 2014	% Chan	ge
						Fall 2002 Fall 201	2 to
23. Campus Condition Index Value	\$830,46		N/A	ultar	N/A	Fall 201	2 to
23. Campus Condition Index Value Estimated instructional expens 24. Estimated instructional expenditures	124/12/12/12/12	ent and pe	er FTE Facu		Marci Ballate	Fall 201	2 to 14 N//
Estimated instructional expens	124/12/12/12/12		er FTE Facu		N/A	% Cha	nge
Estimated instructional expens 24. Estimated instructional expenditures Estimated instructional expenditures	124/12/12/12/12	ent and po	er FTE Facu		FY 2015	Fall 20	N// N// N// N// N// N// N//
Estimated instructional expenses per FTE Student Stimated instructional expenses per FTE Faculty	124/12/12/12/12	ent and po	FY 20	14 N/A	FY 2015	% Cha FY 200 FY 200	N// N// N// N// N// N//
Estimated instructional expens	124/12/12/12/12	FY 2002	FY 20	N/A N/A	FY 2015	% Cha FY 200 FY 200	N//
Estimated instructional expenses 24. Estimated instructional expenditures Estimated instructional expenses per FTE Student instructional expenses per FTE Faculty Institutional Effectiveness - Contextual Measures	ses per FTE Stude	FY 2002	FY 20	N/A N/A	FY 2015	% Chan FY 200 FY 200 FY 2002 FY 201	N// N// N// N// N// N// N// N// N//
Estimated instructional expenses 24. Estimated instructional expenses per FTE Student Estimated instructional expenses per FTE Faculty Institutional Effectiveness - Contextual Measures	FY 200	FY 2002	FY 2015 \$4,557	N/A N/A	FY 2015 P 2016 \$4,992	% Chan FY 200 FY 200 FY 2002 FY 2002 FY 2012	nge 2 to 015 N//
Estimated instructional expenses 24. Estimated instructional expenditures Estimated instructional expenses per FTE Student instructional expenses per FTE Faculty Institutional Effectiveness - Contextual Measures	ses per FTE Stude	FY 2002	FY 20	N/A N/A	FY 2015	% Chan FY 200 FY 200 FY 2002 FY 2002 FY 2012	nge 2 to 115 N// N// N// N// N// N// N// N// N// N/
Estimated instructional expenses 24. Estimated instructional expenditures 25. Estimated instructional expenses per FTE Student estimated instructional expenses per FTE Faculty 26. Average cost of (resident undergraduate) tuition and fees for 30 SCH.	FY 200	FY 2002	FY 2015 \$4,557	N/A N/A	FY 2015 P 2016 \$4,992	% Chan FY 200 FY 200 FY 201 2 % Chan FY 201 2	nge (2 to 115) N//
Estimated instructional expenses 24. Estimated instructional expenses per FTE Student Estimated instructional expenses per FTE Faculty Institutional Effectiveness - Contextual Measures 25. Average cost of (resident undergraduate) tuition and fees for 30 SCH.	FY 2011	FY 2002	FY 2015 \$4,557 FY 20	N/A N/A	FY 2015 Y 2016 \$4,992	% Changer 201 % Changer 200 FY 200 FY 201 % Changer 201 FY 201 2	nge 2 to 115 N// N// N// N// N// N// N// N// N// N/
Estimated instructional expenses 24. Estimated instructional expenditures stimated instructional expenses per FTE Student stimated instructional expenses per FTE Faculty nstitutional Effectiveness - Contextual Measures 5. Average cost of (resident undergraduate) tuition and fees for 30 SCH. 6. True and Term Endowment (\$ millions)	FY 2011 N/A	FY 2002	FY 2015 \$4,557 FY 20 \$4,567	N/A N/A FY 14 900.7	FY 2015 Y 2016 \$4,992 FY 2015	% Chan FY 200 FY 200 FY 2002 FY 2002 FY 2012 2	nge 2 to 015 N/ N/
Estimated instructional expenses 24. Estimated instructional expenses per FTE Student Estimated instructional expenses per FTE Student Estimated instructional expenses per FTE Faculty Institutional Effectiveness - Contextual Measures 25. Average cost of (resident undergraduate) tuition and fees for 30 SCH. 26. True and Term Endowment (\$ millions) 27. Quasi Endowment (\$ millions)	FY 2001 FY 2011 N/A N/A	PY 2002 PY 2003 PY 2013	FY 2015 \$4,567 FY 20 FY 2015 \$4,567 FY 20 1.7 \$ 1,	N/A N/A N/A 14 900.7 336.1	FY 2015 Y 2016 \$4,992 FY 2015 \$ 91 \$ 28	% Chan FY 200 FY 200 FY 2002 FY 2002 FY 2012 2	ge 1 to 115 N/ N/ S58.44 13.34

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

29. Institutional revenue *	\$866,837,017	\$831,847,223	\$983,526,710	13.5%
State appropriations	\$184,851,031	\$211,741,551	\$219,004,498	18.5%
Tuition and fees	\$1,241,361	\$1,447,921	\$1,380,193	11.2%
Federal Grants and Contracts	\$181,487,826	\$159,177,347	\$159,962,242	- 11.9%
Institutional Resources	\$499,256,799	\$459,480,404	\$603,179,777	20.8%
Constitutional Funds	\$0	\$0	\$0	N/A
Total Revenue with Constitutional Funds	\$866,837,017	\$831,847,223	\$983,526,710	13.5%

*Does not include constitutional funds

30. Historically Underutilized Business (HUB)	FY 2000	FY 2014	FY 2015	% Change FY 2000 to FY 2015
HUB Expenditures without construction (Thousands)	\$24,240.944	\$47,883.245	\$44,878.849	85.1%
Percent of total expenditures	9.4%	3.7%	3.4%	- 6.0
HUB Expenditures with construction (Millions)	\$ 31.520	\$ 69.787	\$ 59.291	88.1%
Percent of total expenditures	12.2%	5.4%	4.5%	- 7.7

MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

Institutional Efficiency and Effectiveness - Out-of-State Peers

The University of Texas M.D. Anderson Cancer Center

Administrative Cost Ratio

Amount expended for administrative costs as a percent of operative expenses

Administrative costs as a percent of operating budget

1%

Appropriations
State and local government appropriation revenues per FTE student.
Appropriations per FTE student

\$9,107

Expenditures

Instruction expenses per FTE student.
Instruction expenses per FTE student

\$10,933

Source: IPEDS, Fall 2014

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2015

Patient Care - Key Measures

Medical Resident Physicians

	FY 2002	FY 2015	FY 2016	Percent Change FY 2002 to FY 2016
31. Resident physicians in accredited programs				
a. Funded ACGME/AOA Resident Physicians (Total for years 1-7)	N/A	135	141	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	38	N/A	N/A

Patient Care - Contextual Measures

	FY 2000	FY 2014	FY 2015	% Change FY 2000 to FY 2015
33. Outpatient visits 🛈	440,000	1,363,008	1,440,684	227.4%
34. Inpatient days	131,771	202,636	202,483	53.7%
35. Ratio of Admissions to General Revenue				
To admissions	4562.2	4458.34	4394.08	- 3.79
To charity care	83.1	95.15	116.43	40.1%
To hospital days	605.65	610.79	611.25	0.9%
To clinic visits	181.38	90.81	85.91	- 52.6%
36. Total uncompensated care provided by faculty				
Total Uncompensated Care Provided by Faculty	N/A	66,666,187	65,221,977	N/A

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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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MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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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MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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 Baccalaure ate 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.

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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)

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

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MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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.

INSTITUTIONAL EFFICIENCY AND EFFECTIVENESS -- KEY MEASURES

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MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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.

INSTITUTIONAL EFFICIENCY AND EFFECTIVENESS -- CONTEXTUAL MEASURES

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The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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).

29. Institutional revenue

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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

32. Medical Resident Physicians

Primary care residents; physicians practicing in Texas

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MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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.

34. Inpatient days

Inpatient days

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MD Anderson Fact Book Academic Year 2016 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2015

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



Making Cancer History®

G.1 MD Anderson Educational Trainees, 2014 - 2015

Clinical		Special Programs	
Audiology Fellow	2	Chaplaincy Fellows	3
Fellows	249	Chaplaincy Interns	6
Medical Physics Fellow	1	Child Life Interns	4
Medical Physics Residents	14	Clinical Chemistry Fellow	2
Pharmacy Fellows	0	Clinical Ethics Fellow	$\overset{2}{2}$
	15	Clinical Ethics Interns	4
Pharmacy Residents Physician Assistant Follows & Residents			
Physician Assistant Fellows & Residents		Dietetic Interns	4
Psychology Fellows	5	Hospital Administration Fellows	6
Radiation Physics Proton Therapy Fellov		Music Therapy Interns	2
Residents	24	Observers	433
Rotating Affiliated Pharm Tr	3	Social Work Interns	10
Rotating Fellows	199	STEP Observers	263
Rotating Fellow Research	5	Veterinary Residents	6
Rotating Medical Students	270	Veterinary Students	7
Rotating Pharmacy Residents	9	Subtotal	752
Rotating Psychology Fellow	2	Student Programs	
Rotating Residents	658	College Students	424
Rotating Residents Research	44	High School Students	139
Rotating Veterinary Residents	2	Pharmacy Students	49
Subtotal	1,507	Physical/Occupational Therapy Students	38
		Physician Assistant Students	53
Research		Psychology Graduate Students	
Graduate Research Assistants-GSBS	349		7
Graduate Research Assistants-UTHSCH	125	Rotating Medical Student Research	10
Graduate Student-non-UTHSCH	241	Speech Pathology Students	2
Legal Intern	1	Technology Students	95 91 7
MD/PhD Student – GSBS	1	Subtotal	817
Odyssey Fellows	22	Nursing Programs*	
Postdoctoral Fellows	774	Nursing Outreach Education**	0
Research Interns	193	Academic Undergraduate	897
Research Medical Students	162	Academic Graduate Students	279
Rosalie B. Hite Graduate Research Assts	. 7	Academic Oraduate Students Academic Doctoral Students	10
Visiting Postdoctoral Fellows	6	Academic Boctoral Students Academic High School	71
Visiting Research Collaborator	9	Professional Student Nurse Externs	65
Subtotal	1,890	Professional Student Nurse Externs -	03
		Summer	30
School of Health Professions**		PEPED ***	0
Clinical Laboratory Science Students	21		
Cytogenetic Technology Students	23	Subtotai	1,352
Cytotechnology Students	7	TOTAL	6,621
Diagnostic Imaging Students	102	* Annual matrice are provided by the Div	of Numain a
Histotechnology Students	25	* Annual metrics are provided by the Div.	•
Medical Dosimetry Students	34	** Nursing Outreach Education program is	s no tonger in
Molecular Genetic Technology Students		place.	1-4: C
& Diagnostic Genetics Students	51	*** PEPED program ended subsequent to CPRIT grant funding, August 2012	сотрієноп ој
Radiation Therapy Students	40	CI KII gram junaing, Augusi 2012	
Subtotal	303		

Source: Trainee & Alumni Affairs

MD Anderson Fact Book Academic Year 2016 Section G: Other MD Anderson Academic Programs

G.2 Trainee Demographics by Group, 2014 - 2015

Demographic	Clinical Resident	s & Fel	llows	Postdoctoral 1	Fellows	*	GSBS	;	
Profile	Description	N	Percent	Description	N	Percent	Description	N	Percent
						-			
Number of Trainees	Total Population	273		Total Population	796		Total Population	350	
Number of Programs Served	Total Programs	63		Total Programs	62		Total Programs	48	
Ethnisita	White, Non-Hispanic	117	43%	Foreign	604	76%	Foreign	133	38%
Ethnicity	Asian	80	29%	White, Non-Hispanic	97	12%	White, Non-Hispanic	146	42%
	Foreign	53	19%	Asian	61	8%	Asian	27	8%
	Hispanic	8	3%	Hispanic	26	3%	Hispanic	32	9%
	Black, Non-Hispanic	13	5%	Black, Non-Hispanic	7	1%	Pacific Islander	4	1%
	Pacific Islander	2	1%	Pacific Islander	1	0%	Black, Non-Hispanic	8	2%
Gender	Male	161	59%	Male	444	56%	Male	144	41%
	Female	112	41%	Female	352	44%	Female	206	59%
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, 2014 – 2015

G.5 Trainee Country of Origin & Visa Types, 2014 – 2015												
	Clinical Residents & Fellows			Postdoctoral Fellows*			GSBS					
Demographic Profile	Country/Visa	N	Percent	Country/Visa	N	Percent	Country/Visa	N	Percent			
Top 5 Countries	USA	190	70%	China	250	31%	USA	198	57%			
of Origin	Canada	10	4%	USA	127	16%	China	45	13%			
	South Korea	8	3%	India	78	10%	India	41	12%			
	China	7	3%	South Korea	60	8%	Taiwan	16	5%			
	India and Lebanon	6	2%	Japan	33	4%	South Korea	9	3%			
Citizenships and	US Citizen	190	70%	US Citizen	127	16%	US Citizen	198	57%			
Most Frequent Visa Types	US Permanent Resident	30	11%	Н1-В	114	14%	US Permanent Resident	19	5%			
	H1-B	10	4%	F1	80	10%	F-1	127	36%			
	J-1	40	15%	J-1	384	48%	J-1	4	1%			

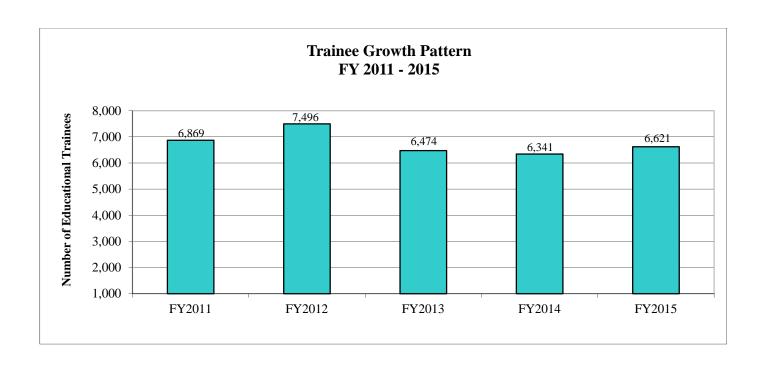
^{*}Postdoctoral Fellows include Postdoctoral Fellows, Odyssey Fellows, Odyssey Scholars and Veterinary Fellows. Total head count may not be equal to the total number of postdoctoral on this report because some trainees had more than one title during this reporting period.

Source: Trainee & Alumni Affairs

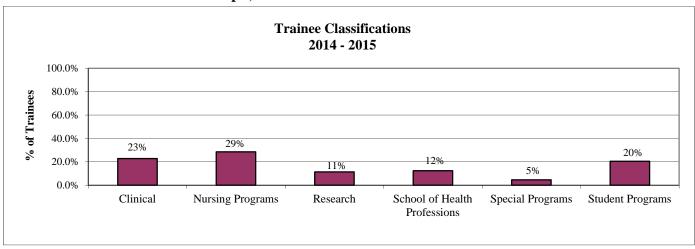
G.4 Five Year Trainee Growth Pattern, FY 2011 – FY 2015

	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	Percent of Growth 2011 - 2015
Clinical	1,141	1,187	1,231	1,276	1,507	32%
Research	1,629	1,714	1,743	1,853	1,890	16%
Special Programs	429	431	507	452	752	75%
Student Programs	1,102	1,317	1,396	1,204	817	-26%
School of Health Professions	248	316	291	318	303	22%
Nursing Students/Rotations	2,320	2,531	1,306	1,238	1,352	-42%
Grand Total	6,869	7,496	6,474	6,341	6,621	-4%
Grand Total (excluding Nursing)	4,549	4,965	5,168	5,103	5,269	16%

Source: Trainee & Alumni Affairs



G.5 Trainee Classifications Graph, 2014 – 2015



Source: Trainee & Alumni Affairs

G.6 Summary of Internal Awards, 2014 - 2015

	Number	Total Funding
Type of Award	Awarded	Awarded
Trainee Excellence Award for Cycle One - MD Anderson Alumni and Faculty Association	4	2,000
Trainee Research Day - 1st Place Poster Winner for AMGEN Award in Basic Science	1	700
Trainee Research Day - 1st Place Poster Winner for Bayer HealthCare Pharmaceuticals Award in		
Population Science	1	700
Trainee Research Day - 1st Place Poster Winner for Bayer HealthCare Pharmaceuticals Award in		
Translational Research	1	700
Trainee Research Day - 1st Place Poster Winner for Bristol-Myers Squibb Award in Clinical		
Research	1	700
Trainee Research Day - 1st Place Poster Winner for MD Anderson Alumni and Faculty Assoc		
Award in Basic Science	1	700
Trainee Research Day - 1st Place Poster Winner for MD Anderson Alumni and Faculty Assoc		
Award in Clinical Research	1	700
Trainee Research Day - 1st Place Poster Winner for MD Anderson Alumni and Faculty Assoc		
Award in Translational Research	1	700
Trainee Research Day - 2nd Place Poster Winner for AMGEN Award in Basic Science	1	500
Trainee Research Day - 2nd Place Poster Winner for Bayer HealthCare Pharmaceuticals Award in		
Population Science	1	500
Trainee Research Day - 2nd Place Poster Winner for Bayer HealthCare Pharmaceuticals Award in		
Translational Research	1	500
Trainee Research Day - 2nd Place Poster Winner for Bristol-Myers Squibb Award in Clinical		
Research This is a second of the second of t	1	500
Trainee Research Day - 2nd Place Poster Winner for MD Anderson Alumni and Faculty Assoc	1	500
Award in Basic Science Trained Research Days 2nd Place Research Winner for MD Anderson Alumni and Faculty Assas	1	500
Trainee Research Day - 2nd Place Poster Winner for MD Anderson Alumni and Faculty Assoc Award in Clinical Research	1	500
Trainee Research Day - 2nd Place Poster Winner for MD Anderson Alumni and Faculty Assoc	1	300
Award in Translational Research	1	500
Trainee Research Day - Oral Winner for AMGEN in Basic Science Research	1	1,000
Trainee Research Day - Oral Winner for Bayer HealthCare Pharmaceuticals in Population Science	-	,
, ,	1	1,000
Trainee Research Day - Oral Winner for Bayer HealthCare Pharmaceuticals in Translational Research	1	1.000
Trainee Research Day - Oral Winner for Bristol-Myers Squibb Award in Clinical Research	1	1,000
, , ,	1	1,000
Trainee Research Day - Oral Winner for MD Anderson Alumni and Faculty Assoc Award in Basic	,	1 000
Science Trained Research Day, Oral Winner for MD Anderson Alumni and Faculty Asses Award in	1	1,000
Trainee Research Day - Oral Winner for MD Anderson Alumni and Faculty Assoc Award in Clinical Research	1	1,000
Trainee Research Day - Oral Winner for MD Anderson Alumni and Faculty Assoc Award in	1	1,000
Population Science	1	1,000
Trainee Research Day - Oral Winner for MD Anderson Alumni and Faculty Assoc Award in	1	1,000
Translational Research	1	1,000
Trainee Research Day - 90-Second Elevator Speech Competition - Best Speech Winner for MD	1	1,000
Anderson Alumni and Faculty Association	1	700
Trainee Research Day - 90-Second Elevator Speech Competition - People's Choice Winner for MD	1	700
Anderson Alumni and Faculty Association	1	500
·	28	\$19,600
TOTAL	20	\$19,000

Source: Trainee & Alumni Affairs