The University of Texas MD Anderson Cancer Center Fact Book 2017

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



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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 49 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 10 of 11 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, 1.3 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 137,000 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 almost 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 10,800 participants enrolled in 1,200-plus clinical trials exploring innovative treatments. MD Anderson provided more than \$179 million in uncompensated care to Texans with cancer in FY17. 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 2,347 faculty members, including M.D.'s and Ph.D.'s in Fiscal Year 2017. 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 2017, MD Anderson had 1,255 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.

In Fiscal Year 2017, MD Anderson's total research expenditure was \$844 million, including over \$81 million in state funding, approximately \$191 million from philanthropy and foundations, and over \$167 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 2017 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 1,700 residents and fellows come to MD Anderson each year to receive specialized training and more than 1,700 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 154 students in 2016 in ten areas of study: Clinical Laboratory Science, Cytogenetic Technology, Cytotechnology, Diagnostics Genetics, 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 1,100 volunteers who provide over 122,000 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

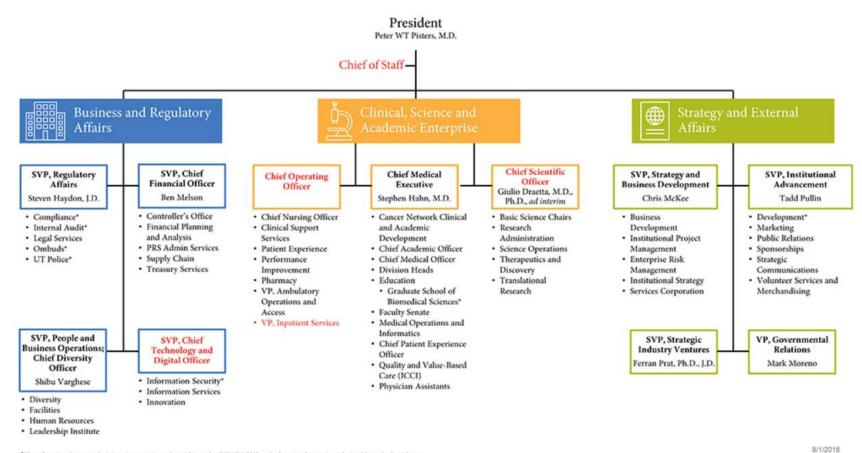
1515 Holcombe Blvd. Unit 0002 Houston, Texas 77030

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



*These functions have an administrative reporting relationship to the SVP/Chief/VP and a functional reporting relationship to the President Red indicates vacant position

MD Anderson Fact Book Academic Year 2017 Section A: About MD Anderson

The University of Texas MD Anderson Cancer Center Senior Leadership

Name	Title
Peter WT Pisters, M.D.	President
Stephen Hahn, M.D.	Deputy President and Chief Operating Officer
Steven Haydon, J.D.	Senior Vice President, Regulatory Affairs
Ben Melson	Senior Vice President, Chief Financial Officer
Shibu Varghese	Senior Vice President, People and Business Operations
T.B.A.	Senior Vice President, Chief Technology and Digital Officer
T.B.A.	Chief Operating Officer
T.B.A.	Chief Scientific Officer
Chris McKee	Senior Vice President, Strategy and Business Development
Tadd Pullin	Senior Vice President, Institutional Advancement
Ferran Prat	Senior Vice President, Strategic Industry Ventures
Mark Moreno	Vice President, Governmental Relations

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

Sara Martinez Tucker, Chairman Jeffery D. Hildebrand, Vice Chairman Paul L. Foster, Vice Chairman

Members

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

*Term Expires May 2019*Student Regent Brittany E. Jewell

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

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

^{*} 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	Larry R. Faulkner	Chancellor ad interim
Office of Academic Affairs	Steven Leslie	Executive Vice Chancellor for Academic Affairs
Office of Health Affairs	Raymond S. Greenberg, M.D., Ph.D.	Executive Vice Chancellor for Health Affairs
Office of Business Affairs	Scott C. Kelley, Ed.D	Executive Vice Chancellor for Business Affairs
Office of General Counsel	Daniel H. Sharphorn, J.D.	Vice Chancellor and General Counsel
Office of Governmental Relations	Barry McBee, J.D.	Vice Chancellor and Governmental Relations
Office of External Relations	Randa S. Safady, Ph.D.	Vice Chancellor for External Relations
Office of Strategic Initiatives	Stephanie A. Bond Huie, Ph.D.	Vice Chancellor for Strategic Initiatives

The University of Texas MD Anderson Board of Visitors

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

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

The University of Texas MD Anderson Standing Committees*

- Anderson Network Steering Committee
- Animal Resources and Facilities Advisory Committee at Science Park (Bastrop)
- 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 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
- 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

*Source: On-Line Committee Membership Directory

Section A: About MD Anderson

MD Anderson Standing Committees, continued

- 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)
- 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
- Psychosocial, Behavioral, Health Services, Research Committee
- Radiation Safety Committee
- Research Billing Compliance Subcommittee

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

MD Anderson Standing Committees, continued

- 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 Stem Cell and Developmental Biology

Duncan Family Institute

- Center for Energy Balance in Cancer Prevention and Survivorship
- Center for Translational and Public Health Genomics
- Center for Community-Engaged Translational Research (CCETR)

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:

Assessment, Intervention and Measurement (AIM) Facility

The Assessment, Intervention and Measurement (AIM) Facility is a shared resource that provides expertise in the science of collecting and managing patient-generated health data, and behavioral intervention development and implementation utilizing web, mobile and other technology applications.

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.

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.

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 South Campus Flow Cytometry & Cell Sorting Core Laboratory (SCFC) was established in 2000. In 2008, The SCFC was awarded CCSG support to provide sufficient capacity to support the institution's investigators. Both the North and South Campus facilities are open to the entire MD Anderson research community.

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.

Section A: About MD Anderson

CCSG Shared Resources, continued

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.

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.

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.

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.

CCSG Shared Resources, continued

Section A: About MD Anderson

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.

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.

Section A: About MD Anderson

CCSG Shared Resources, continued

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.

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 2012 – FY 2016*

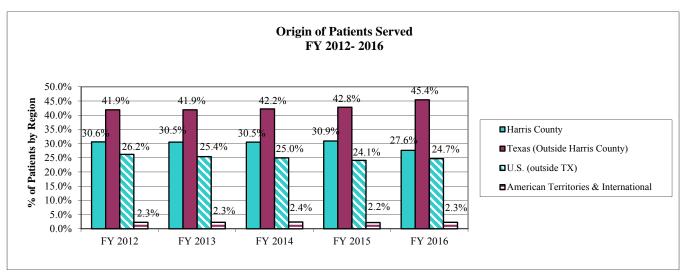
	% of All Cancers - All Ages, Races, and Regions										
Top Ten Newly Diagnosed Cancer Cases	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016						
Breast	15.20%	15.20%	16.52%	16.09%	15.40%						
Lung & Bronchus	9.60%	9.50%	9.44%	9.70%	6.43%						
Prostate	9.00%	8.60%	8.14%	8.42%	7.19%						
Melanomas of the Skin	5.50%	5.40%	4.76%	5.30%	4.27%						
Leukemia	4.70%	4.60%	4.78%	4.47%	3.90%						
Non-Hodgkin's Lymphoma	5.10%	4.90%	4.60%	5.03%	4.32%						
Colon & Rectum	5.40%	6.20%	5.97%	6.11%	5.81%						
Oral Cavity & Pharynx	4.40%	4.30%	4.01%	4.32%	3.26%						
Kidney & Renal Pelvis	3.70%	3.60%	4.26%	3.88%	2.73%						
Brain & Other Nervous System	2.60%	2.60%	2.94%	2.74%	3.51%						
Pancreas	3.50%	3.30%	3.29%	3.05%	N/A						

^{*}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-0 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 2012 – FY 2016*

	% of Patients Served by Region										
Regions	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016						
Harris County	30.6%	30.5%	30.5%	30.9%	27.6%						
Texas (outside of Harris County)	41.9%	41.9%	42.2%	42.8%	45.4%						
U.S. (outside of Texas)	25.3%	25.4%	25.0%	24.1%	24.7%						
American Territories & International	2.3%	2.3%	2.4%	2.2%	2.3%						

*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. This count excludes employee/visitor health, no-show, outreach, and bone marrow donor registrations, as well as any individual with a newly or previously assigned medical record number who only received a screening during the specified year. Patients are counted in only one category with priority given to cancer first, then benign, and finally non-neoplastic. After the first 4 months from the registration date, Tumor Registry usually updates a patient's tumor registry record only when a new malignant primary is discovered or a patient has died. Therefore, all benign neoplasms and non-neoplastic conditions may not be captured in the Tumor Registry.



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

CFO - Hyperion,						
Statement of						
Operations	FY17	FY16	FY15	FY14	FY13	FY12
Total Operating						
Revenue	4,999,342,760	4,480,444,361	4,495,768,037	4,412,923,943	4,135,238,891	3,735,831,786
Total Operating		, , ,				
Expense	4,299,888,209	4,272,911,647	3,928,889,508	3,683,180,248	3,589,179,436	3,332,936,703
Total Margin						
Contributed to Capital						
Plan	699,454,551	207,532,714	566,878,529	729,743,695	\$546,059,455	\$402,895,083
CFO- Hyperion,						
Operating Statistics	FY17	FY16	FY15	FY14	FY13	FY12
Admissions	28,793	27,391	28,167	27,761	27,905	26,726
Patient Days	202,411	198,080	202,483	202,636	202,553	191,735
Average Daily Census	577	561	574	571	569	536
Average Occupancy						
Rate	85%	85%	86%	87%	90%	87%
Average # of Operating						
Beds	681	661	665	654	656	616
Average Length of Stay	7.0	7.2	7.2	7.3	7.3	7.2
Outpatient Billable		1 404 220	1 110 601	4.262.000	4 220 506	1 201 100
Visits	1,441,403	1,404,329	1,440,684	1,363,008	1,338,706	1,281,489
CFO- Hyperion,	WTD FW17	EV16	EV15	EX71.4	FW12	EV12
Operating Statistics	YTD FY17	FY16	FY15	FY14	FY13	FY12
Total Surgeries	21,913	21,108	21,835	19,828	21,056	18,937
Inpatient Surgeries	N/A	N/A	N/A	N/A	N/A	8,656
Outpatient Surgeries	N/A	N/A	N/A	N/A	N/A	10,281
Surgery Hours	70,459	67,936		(0.50(70 221	
CEO Hamorian		07,730	69,987	69,506	70,221	66,241
CFO- Hyperion,	,	,	,	,	Ź	,
Operating Statistics	YTD FY17	FY16	69,987 FY15	69,506 FY14	FY13	66,241 FY12
Operating Statistics Lab Med / Pathology	YTD FY17	FY16	FY15	FY14	FY13	FY12
Operating Statistics Lab Med / Pathology Billed Procedures	,	,	,	,	Ź	,
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging	YTD FY17 12,700,333	FY16 12,073,679	FY15 12,334,917	FY14 12,005,766	FY13 11,718,405	FY12 11,619,591
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures	YTD FY17	FY16	FY15	FY14	FY13	FY12
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology	YTD FY17 12,700,333 574,018	FY16 12,073,679 524,044	FY15 12,334,917 530,590	FY14 12,005,766 523,297	FY13 11,718,405 501,887	FY12 11,619,591 497,660
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology Billed Procedures	YTD FY17 12,700,333 574,018 228,974	FY16 12,073,679 524,044 207,425	FY15 12,334,917 530,590 254,361	FY14 12,005,766 523,297 283,536	FY13 11,718,405 501,887 284,740	FY12 11,619,591 497,660 283,503
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology Billed Procedures Stem Cell Transplants	YTD FY17 12,700,333 574,018 228,974 735	FY16 12,073,679 524,044 207,425 732	FY15 12,334,917 530,590 254,361 857	FY14 12,005,766 523,297 283,536 847	FY13 11,718,405 501,887 284,740 815	FY12 11,619,591 497,660 283,503 848
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology Billed Procedures Stem Cell Transplants Public Affairs	YTD FY17 12,700,333 574,018 228,974 735 YTD FY17	FY16 12,073,679 524,044 207,425 732 FY16	FY15 12,334,917 530,590 254,361 857 FY15	FY14 12,005,766 523,297 283,536 847 FY14	FY13 11,718,405 501,887 284,740 815 FY13	FY12 11,619,591 497,660 283,503 848 FY12
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology Billed Procedures Stem Cell Transplants Public Affairs Volunteer Hours	YTD FY17 12,700,333 574,018 228,974 735 YTD FY17 122,637	FY16 12,073,679 524,044 207,425 732 FY16 121,356	FY15 12,334,917 530,590 254,361 857 FY15 145,452	FY14 12,005,766 523,297 283,536 847 FY14 164,970	FY13 11,718,405 501,887 284,740 815 FY13 193,921	FY12 11,619,591 497,660 283,503 848 FY12 193,400
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology Billed Procedures Stem Cell Transplants Public Affairs Volunteer Hours Internet Services	YTD FY17 12,700,333 574,018 228,974 735 YTD FY17	FY16 12,073,679 524,044 207,425 732 FY16	FY15 12,334,917 530,590 254,361 857 FY15	FY14 12,005,766 523,297 283,536 847 FY14	FY13 11,718,405 501,887 284,740 815 FY13	FY12 11,619,591 497,660 283,503 848 FY12
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology Billed Procedures Stem Cell Transplants Public Affairs Volunteer Hours Internet Services Visits:	YTD FY17 12,700,333 574,018 228,974 735 YTD FY17 122,637 YTD FY17	FY16 12,073,679 524,044 207,425 732 FY16 121,356 FY16	FY15 12,334,917 530,590 254,361 857 FY15 145,452 FY15	FY14 12,005,766 523,297 283,536 847 FY14 164,970 FY14	FY13 11,718,405 501,887 284,740 815 FY13 193,921 FY13	FY12 11,619,591 497,660 283,503 848 FY12 193,400 FY12
Operating Statistics Lab Med / Pathology Billed Procedures Diagnostic Imaging Billed Procedures Radiation Oncology Billed Procedures Stem Cell Transplants Public Affairs Volunteer Hours Internet Services	YTD FY17 12,700,333 574,018 228,974 735 YTD FY17 122,637	FY16 12,073,679 524,044 207,425 732 FY16 121,356	FY15 12,334,917 530,590 254,361 857 FY15 145,452	FY14 12,005,766 523,297 283,536 847 FY14 164,970	FY13 11,718,405 501,887 284,740 815 FY13 193,921	FY12 11,619,591 497,660 283,503 848 FY12 193,400

^{*}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 2017

MD Anderson Workforce Report- FY 2017

	Total	Cł	nange	Full-Time	ıll-Time Change				ange	Total	Change	
MONTH	Employees	#	%	Equivalents	#	%	Full- Time	#	%	Part- Time	#	%
August, 2016	21,238			20,785.47			19,435			1,893		
September, 2016	21,332	94	0%	20,773.29	-12.18	-0.06%	19,405	-30	-0.15%	1,927	34	1.76%
October, 2016	21,418	86	0.40%	20,852.30	79.01	0.38%	19,474	69	0.35%	1,944	17	0.87%
November, 2016	21,367	-51	-0.24%	20,805.06	-47.24	-0.23%	19,424	-50	-0.26%	1,943	-1	-0.05%
December, 2016	21,101	-266	-1.26%	20,559.01	-246.05	-1.20%	19,203	-221	-1.15%	1,898	-45	-2.37%
January, 2017	20,924	-177	-0.85%	20,390.22	-168.79	-0.83%	19,053	-150	-0.79%	1,871	-27	-1.44%
February, 2017	20,739	-185	-0.89%	20,205.07	-185.15	-0.92%	18,867	-186	-0.99%	1,872	1	0.05%
March, 2017	20,196	-543	-2.69%	19,682.62	-522.45	-2.65%	18,369	-498	-2.71%	1,827	-45	-2.46%
April, 2017	19,753	-443	-2.24%	19,257.54	-425.08	-2.21%	17,974	-395	-2.20%	1,779	-48	-2.70%
May, 2017	19,583	-170	-0.87%	19,107.36	-150.18	-0.79%	17,842	-132	-0.74%	1,741	-38	-2.18%
June, 2017	19,569	-14	-0.07%	19,179.24	71.88	0.37%	17,915	73	0.41%	1,744	3	0.17%
July, 2017	19,643	74	0.38%	19,163.01	-16.23	-0.08%	17,903	-12	-0.07%	1,740	-4	-0.23%
August, 2017	19,503	-140	-0.72%	19,503.00	339.99	1.74%	17,789	-114	-0.64%	1,714	-26	-1.52%

Reporting Source: PeopleSoft

Data provided as of last day of each month.

Includes Hourly and Temp Employees.

B. Student Information



Making Cancer History®

MD Anderson Fact Book Academic Year 2017 Section B: Student Information

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

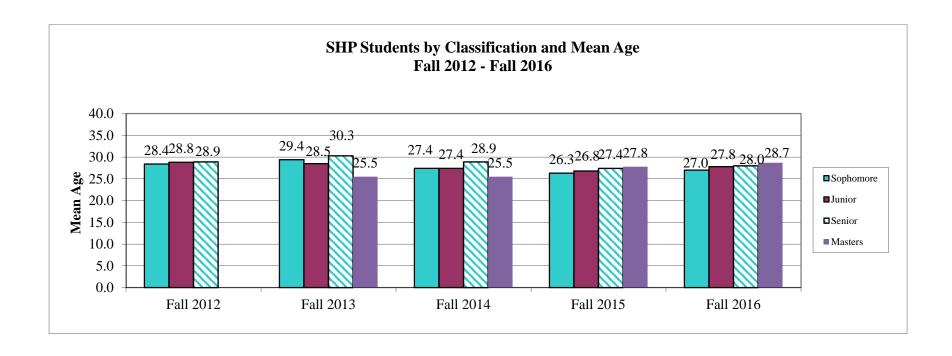
		Fall 2013			Fall 2014			Fall 2015			Fall 2016	
Program	Applied	Admitted	Enrolled	Applied	Admitted	Enrolled*	Applied	Admitted	Enrolled	Applied	Admitted	Enrolled
BS Clinical Laboratory Sciences	53	20	20	70	13	13	52	28	28	44	15	15
BS Cytogenetic Technology	41	27	27	35	20	20	26	17	16	27	14	14
BS Cytotechnology	26	6	6	17	6	6	35	9	9	4	0	0
MS Diagnostic Genetics	28	5	4	40	8	8	28	9	9	48	11	11
BS Diagnostic Imaging	116	37	37	130	38	38	99	33	33	117	38	38
CRT Diagnostic Imaging	7	5	5	0	0	0	11	7	7	6	4	4
BS Diagnostic Medical Sonography*	41	12	12	79	9	9	48	9	9	42	12	12
BS Health Care Disparities, Diversity & Advocacy										24	10	10
BS Histotechnology*	28	17	17	28	21	21	25	18	18	35	19	19
BS Medical Dosimetry	123	21	21	64	22	22	58	21	21	52	20	20
BS Molecular Genetic Technology	46	26	26	45	23	23	33	22	22	52	33	33
BS Radiation Therapy	52	21	21	95	24	24	39	23	23	46	25	25
Total	561	197	196	603	184	184	454	196	195	497	201	201

Source: SHP Dean's Report *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 2012 – Fall 2016

MEAN STUDENT AGE	Fall 2012		Fall 2013		Fall 2014		Fall 20	15	Fall 2016	
BY CLASSIFICATION	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT
SOPHOMORE	28.4	66	29.4	74	27.4	97	26.3	35	27.0	69
JUNIOR	28.8	128	28.5	113	27.4	80	26.8	165	27.8	157
SENIOR	28.9	96	30.3	126	28.9	115	27.4	104	28.0	92
MASTERS	N/A	N/A	25.5	4	25.5	11	27.8	16	28.7	21
OVERALL	28.7	290	29.5	317	27.9	303	27	320	27.7	339

Source: Certified CBM001



MD Anderson Fact Book Academic Year 2017 Section B: Student Information

B.3 SHP Students by Gender and Ethnicity, Fall 2012 – Fall 2016

		Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
ETHNIC ORIGIN	GENDER	COUNT	Students								
WHITE NON-HISPANIC	FEMALE	71	24.5%	66	20.8%	65	21.5%	53	16.6%	61	18.0%
WINDINGTHAL	MALE	36	12.4%	31	9.8%	28	9.2%	27	8.4%	24	7.1%
Subtotal		107	36.9%	97	30.6%	93	30.7%	80	25.0%	85	25.1%
BLACK NON-HISPANIC	FEMALE	24	8.3%	25	7.9%	27	8.9%	21	6.6%	24	7.1%
	MALE	9	3.1%	15	4.7%	6	2.0%	9	2.8%	15	4.4%
Subtotal		33	11.4%	40	12.6%	33	10.9%	30	9.4%	39	11.5%
HISPANIC	FEMALE	26	9.0%	39	12.3%	48	15.8%	70	21.9%	73	21.5%
	MALE	11	3.8%	20	6.3%	25	8.3%	27	8.4%	27	8.0%
Subtotal		37	12.8%	59	18.6%	73	24.1%	97	30.3%	100	29.5%
ASIAN	FEMALE	35	12.1%	28	8.8%	42	13.9%	52	16.3%	56	16.5%
ASIAIV	MALE	27	9.3%	25	7.9%	28	9.2%	26	8.1%	20	5.9%
Subtotal		62	21.4%	53	16.7%	70	23.1%	78	24.4%	76	22.4%
AMERICAN INDIAN OR	FEMALE	0	0.0%	1	0.3%	1	0.3%	0	0.0%	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%	1	0.3%	1	0.3%	0	0.0%	0	0.0%
INTERNATIONAL	FEMALE	0	0.0%	14	4.4%	16	5.3%	13	4.1%	12	3.5%
	MALE	1	0.3%	6	1.9%	6	2.0%	10	3.1%	10	2.9%
Subtotal		1	0.3%	20	6.3%	22	7.3%	23	7.2%	22	6.5%
UNKNOWN OR NOT	FEMALE	36	12.4%	29	9.1%	2	0.7%	1	0.3%	5	1.5%
REPORTED	MALE	10	3.4%	14	4.4%	2	0.7%	2	0.6%	3	0.9%
Subtotal		46	15.9%	43	13.6%	4	1.3%	3	0.9%	8	2.4%
NATIVE HAWAIIAN OR OTHER	FEMALE	1	0.3%	1	0.3%	1	0.3%	2	0.6%	1	0.3%
PACIFIC ISLANDER	MALE	0	0.0%	1	0.3%	0	0.0%	0	0.0%	1	0.3%
Subtotal		1	0.3%	2	0.6%	1	0.3%	2	0.6%	2	0.6%
TWO OR MORE DACES	FEMALE	3	1.0%	1	0.3%	3	1.0%	2	0.6%	3	0.9%
TWO OR MORE RACES	MALE	0	0.0%	1	0.3%	3	1.0%	5	1.6%	4	1.2%
Subtotal		3	1.0%	2	0.6%	6	2.0%	7	2.2%	7	2.1%
TOTAL		290	100.0%	317	100.0%	303	100.0%	320	100.0%	339	100.0%

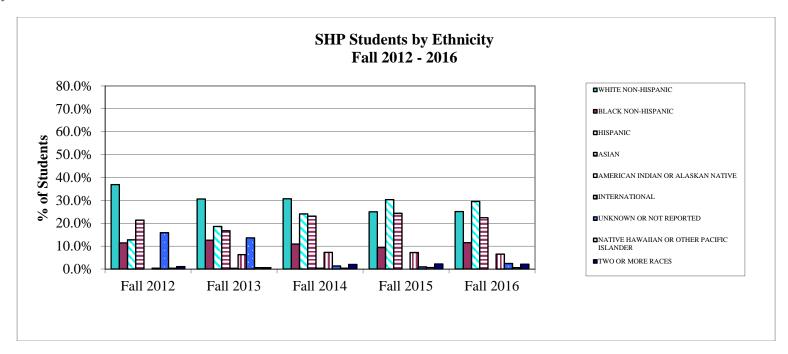
Source: Certified CBM001

Section B: Student Information

B.4 SHP Students by Ethnicity, Fall 2012 – Fall 2016

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
ETHNIC ORIGIN	COUNT	Students								
WHITE NON-HISPANIC	107	36.9%	97	30.6%	93	30.7%	80	25.0%	85	25.1%
BLACK NON-HISPANIC	33	11.4%	40	12.6%	33	10.9%	30	9.4%	39	11.5%
HISPANIC	37	12.8%	59	18.6%	73	24.1%	97	30.3%	100	29.5%
ASIAN	62	21.4%	53	16.7%	70	23.1%	78	24.4%	76	22.4%
AMERICAN INDIAN OR ALASKAN NATIVE	0	0.0%	1	0.3%	1	0.3%	0	0.0%	0	0.0%
INTERNATIONAL	1	0.3%	20	6.3%	22	7.3%	23	7.2%	22	6.5%
UNKNOWN OR NOT REPORTED	46	15.9%	43	13.6%	4	1.3%	3	0.9%	8	2.4%
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	1	0.3%	2	0.6%	1	0.3%	2	0.6%	2	0.6%
TWO OR MORE RACES	3	1.0%	2	0.6%	6	2.0%	7	2.2%	7	2.1%
TOTAL	290	100.0%	317	100.0%	303	100.0%	320	100.0%	339	100.0%

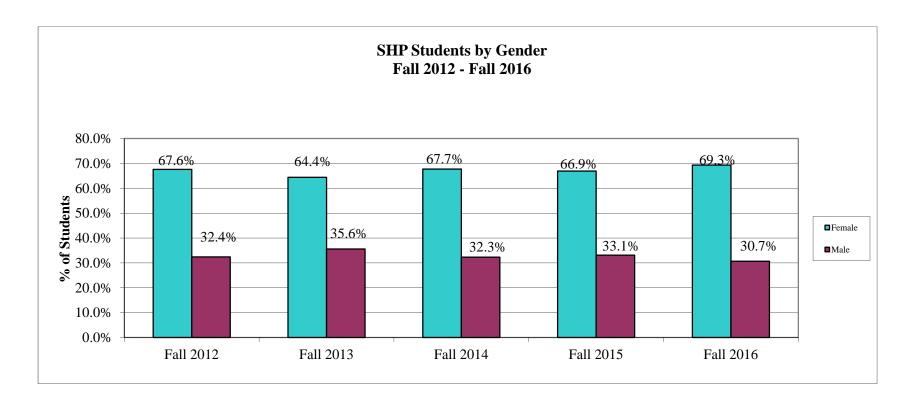
Source: Certified CBM001



B.5 SHP Students by Gender, Fall 2012 – Fall 2016

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
GENDER	COUNT	Students								
FEMALE	196	67.6%	204	64.4%	205	67.7%	214	66.9%	235	69.3
MALE	94	32.4%	113	35.6%	98	32.3%	106	33.1%	104	30.7
TOTAL	290	100.0%	317	100.0%	303	100.0%	320	100.0%	339	100.0%

Source: Certified CBM001



MD Anderson Fact Book Academic Year 2017 Section B: Student Information

B.6a SHP Students by Residency - International, Fall 2012 – Fall 2016

	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016	
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Bolivia	INTERNATIONAL	1	1	0	0	0
China	INTERNATIONAL	0	1	1	3	8
Colombia	INTERNATIONAL	0	0	0	1	1
India	INTERNATIONAL	1	1	2	1	0
Iran	INTERNATIONAL	0	0	1	1	2
Italy	INTERNATIONAL	1	0	0	0	0
Kenya	INTERNATIONAL	0	0	0	1	1
Korea, Republic of	INTERNATIONAL	0	0	1	1	2
Libya	INTERNATIONAL	0	0	0	0	1
Mexico	INTERNATIONAL	0	0	0	1	1
Pakistan	INTERNATIONAL	0	0	0	1	0
Saudi Arabia	INTERNATIONAL	0	0	1	2	1
Singapore	INTERNATIONAL	0	0	0	1	1
Taiwan	INTERNATIONAL	0	1	1	0	0
Thailand	INTERNATIONAL	1	0	0	0	0
United Arab Emirates	INTERNATIONAL	0	0	0	1	1
United Kingdom	INTERNATIONAL	0	0	1	1	0
Vietnam	INTERNATIONAL	3	0	1	1	4
SUBTOTAL, INTERNATIONAL		7	4	9	16	23

International SHP Students by Residency Fall 2012-2016



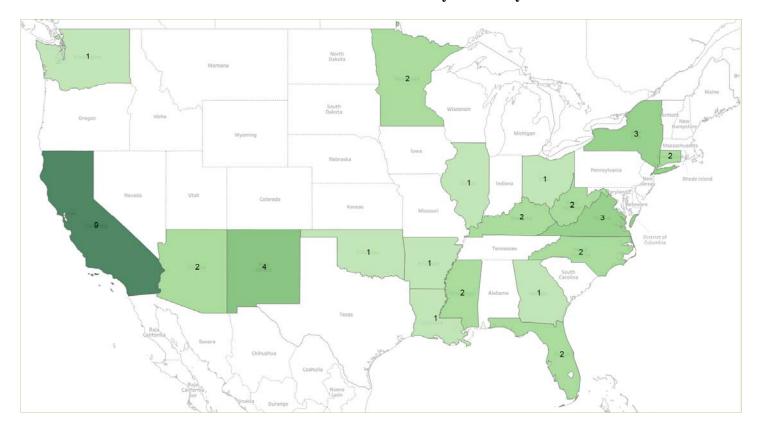
Section B: Student Information

B.6b SHP Students by Residency - Out of State, Fall 2012 - Fall 2016

2.00 SIII Suddenes Sy Ite.	•	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Arizona	OUT OF STATE	0	0	1	1	0
Arkansas	OUT OF STATE	0	0	1	0	0
California	OUT OF STATE	1	0	0	3	5
Connecticut	OUT OF STATE	0	0	1	1	0
Florida	OUT OF STATE	0	0	0	1	1
Georgia	OUT OF STATE	1	0	0	0	0
Illinois	OUT OF STATE	0	0	0	0	1
Kentucky	OUT OF STATE	0	0	0	1	1
Louisiana	OUT OF STATE	0	0	0	0	1
Minnesota	OUT OF STATE	1	0	0	1	0
Mississippi	OUT OF STATE	1	1	0	0	0
New Mexico	OUT OF STATE	0	1	2	1	0
New York	OUT OF STATE	0	0	0	1	2
North Carolina	OUT OF STATE	0	1	1	0	0
Ohio	OUT OF STATE	0	0	0	0	1
Oklahoma	OUT OF STATE	0	0	0	0	1
Virginia	OUT OF STATE	1	0	0	1	1
Washington	OUT OF STATE	0	0	0	0	1
West Virginia	OUT OF STATE	1	1	0	0	0
SUBTOTAL, OUT OF STATE		6	5	6	11	15

Source: Certified CBM001

Continental U.S. Out of State SHP Students by Residency Fall 2012-2016



B.7 SHP Students by Residency - Texas County, Fall 2012 – Fall 2016

5.7 SIII Students	by Residency - Texa					
		Fall 2012*	Fall 2013	Fall 2014	Fall 2015	Fall 2016
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Angelina County	TEXAS COUNTY	0	0	0	0	0
Atascosa County	TEXAS COUNTY	0	1	0	0	0
Austin County	TEXAS COUNTY	0	1	1	1	0
Bell County	TEXAS COUNTY	0	1	0	0	1
Bexar County	TEXAS COUNTY	2	4	6	1	5
Brazoria County	TEXAS COUNTY	0	16	20	17	12
Brazos County	TEXAS COUNTY	12	0	0	1	2
Brown County	TEXAS COUNTY	0	0	0	0	1
Cameron County	TEXAS COUNTY	0	0	0	1	1
Chambers County	TEXAS COUNTY	0	0	0	0	1
Coke County	TEXAS COUNTY	3	0	0	0	0
Collin County	TEXAS COUNTY	0	5	5	8	2
Colorado County	TEXAS COUNTY	0	0	2	0	0
Const County	TEXAS COUNTY	0	0	0		0
•		0	8	3	5	5
Dallas County	TEXAS COUNTY	10	0	0	0	0
Dawson County	TEXAS COUNTY					
Deaf Smith County	TEXAS COUNTY	2	0	0	0	0
Denton County	TEXAS COUNTY	0	3	2	1	1
Duval County	TEXAS COUNTY	0	0	0	1	0
Ellis County	TEXAS COUNTY	3	1	0	0	0
El Paso County	TEXAS COUNTY	0	3	0	1	0
Fayette County	TEXAS COUNTY	0	1	1	0	0
Fort Bend County	TEXAS COUNTY	0	29	26	26	29
Franklin County	TEXAS COUNTY	28	0	0	0	0
Freestone County	TEXAS COUNTY	0	0	1	1	1
Galveston County	TEXAS COUNTY	7	12	11	11	10
Guadalupe County	TEXAS COUNTY	1	0	1	0	0
Hardin County	TEXAS COUNTY	0	1	0	0	0
Harris County	TEXAS COUNTY	0	181	168	174	195
Harrison County	TEXAS COUNTY	0	1	0	0	0
Haskell County	TEXAS COUNTY	4	0	0	0	0
Hemphill County	TEXAS COUNTY	1	0	0	0	0
Hays County	TEXAS COUNTY	0	0	0	0	1
Henderson County	TEXAS COUNTY	168	0	0	0	0
Hidalgo County	TEXAS COUNTY	2	1	2	4	0
Hopkins County	TEXAS COUNTY	1	0	0	1	1
Houston County	TEXAS COUNTY	0	5	4	7	3
Hunt County	TEXAS COUNTY	0	0	0	1	1
Hutchinson County	TEXAS COUNTY	1	0	0	0	0
Jackson County	TEXAS COUNTY	1	0	0	0	0
Jefferson County	TEXAS COUNTY	1	1	1	2	4
Jones County	TEXAS COUNTY	0	0	1	0	0
Kaufman County	TEXAS COUNTY	0	1	0	0	0
Kerr County	TEXAS COUNTY	0	1	1	0	0
Lavaca County	TEXAS COUNTY	0	0	1	1	0
zaraca county	TEM IS COUNTY		J	1		

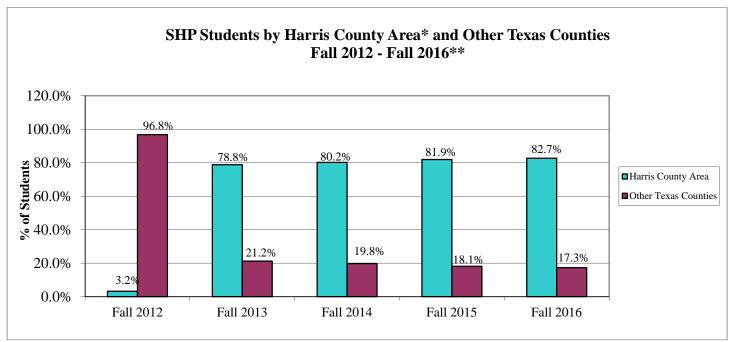
B.7 SHP Students by Residency - Texas County, *continued*

b./ SHP Studen	is by Residency - Tex	Fall 2012*	Fall 2013	Fall 2014	Fall 2015	Fall 2016
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Lee County	TEXAS COUNTY	0	1	1	1	1
Liberty County	TEXAS COUNTY	1	0	0	1	1
Lipscomb County	TEXAS COUNTY	1	0	0	0	0
Live Oak County	TEXAS COUNTY	1	0	0	0	0
Lubbock County	TEXAS COUNTY	0	0	0	0	0
Matagorda County	TEXAS COUNTY	0	2	1	0	0
Maverick County	TEXAS COUNTY	1	0	0	0	0
Montague County	TEXAS COUNTY	0	0	0	0	0
Montgomery County	TEXAS COUNTY	0	16	17	11	12
Morris County	TEXAS COUNTY	11	0	0	0	0
Nueces County	TEXAS COUNTY	2	1	1	1	0
Oldham County	TEXAS COUNTY	0	0	0	1	0
Parker County	TEXAS COUNTY	0	0	1	1	0
Raines County	TEXAS COUNTY	0	0	1	1	0
Randall County	TEXAS COUNTY	0	1	1	2	1
Robertson County	TEXAS COUNTY	0	1	1	0	0
San Saba County	TEXAS COUNTY	2	0	0	0	0
Smith County	TEXAS COUNTY	0	1	0	0	0
Tarrant County	TEXAS COUNTY	3	1	1	4	2
Terrell County	TEXAS COUNTY	4	0	0	0	0
Travis County	TEXAS COUNTY	0	4	4	2	4
Uvalde County	TEXAS COUNTY	0	0	0	0	1
Val Verde County	TEXAS COUNTY	1	0	0	0	0
Walker County	TEXAS COUNTY	0	1	0	0	0
Waller County	TEXAS COUNTY	1	0	0	0	0
Washington County	TEXAS COUNTY	0	1	1	0	0
Wharton County	TEXAS COUNTY	0	1	0	0	0
Williamson County	TEXAS COUNTY	0	0	1	2	0
SUBTOTAL, TEXAS COUNTY		277	307	288	293	301

Source: Certified CBM001

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

MD Anderson Fact Book Academic Year 2017 Section B: Student Information



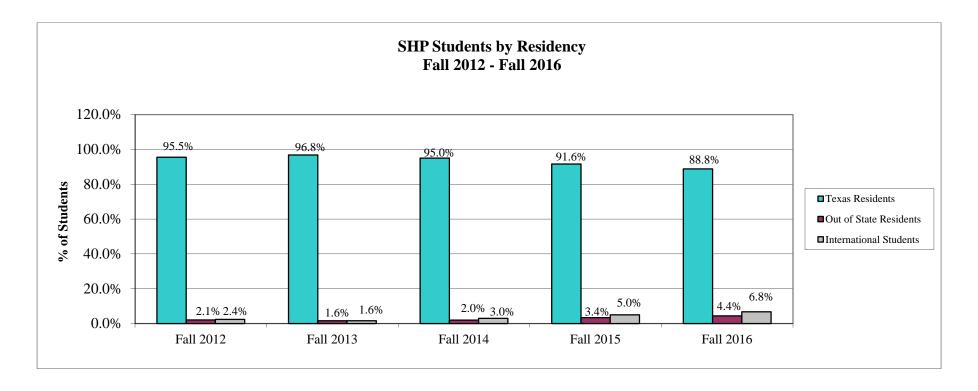
^{*}Consists of Harris and contiguous counties

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

B.8 SHP Students by Residency Type, Fall 2012 – Fall 2016

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
RESIDENCE TYPE	COUNT	Students								
Texas Residents	277	95.5%	307	96.8%	288	95.0%	293	91.6%	301	88.8%
Out of State Students	6	2.1%	5	1.6%	6	2.0%	11	3.4%	15	4.4%
International Students	7	2.4%	5	1.6%	9	3.0%	16	5.0%	23	6.8%
TOTAL	290	100.0%	317	100.0%	303	100.0%	320	100.0%	339	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	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
		M.D./		Individualized	Specialized	-		Average
	Year	Ph.D.*	(M.S.)Ph.D.	M.S.	M.S.	Non-degree	Total	GPA**
Completed Application	2016	-	584	39	174	12	809	-
Admitted Applicant	2016	-	121	21	16	12	170	3.6
Enrolled Applicant	2016	5	64	14	11	12	106	3.5

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

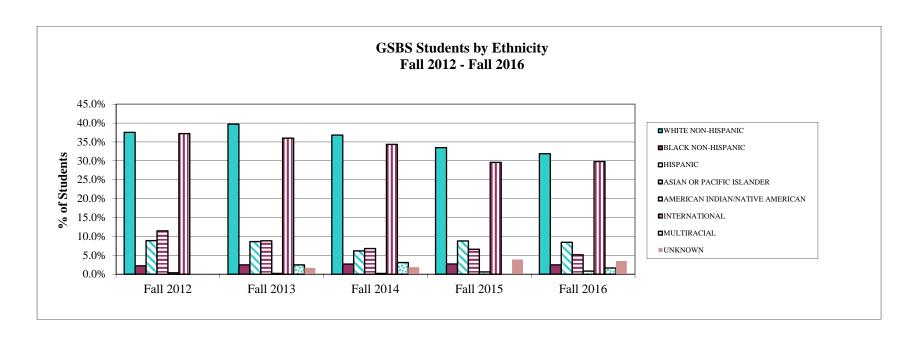
Source: UT Graduate School of Biomedical Sciences

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

B.10 GSBS Students by Ethnicity, Fall 2012– Fall 2016*

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
ETHNIC ORIGIN	COUNT	Students								
WHITE NON-HISPANIC	196	37.5%	193	39.7%	179	36.8%	163	33.5%	155	31.9%
BLACK NON-HISPANIC	12	2.2%	12	2.5%	13	2.7%	13	2.7%	12	2.5%
HISPANIC	48	8.9%	42	8.6%	30	6.2%	43	8.8%	41	8.4%
ASIAN OR PACIFIC ISLANDER	62	11.5%	43	8.8%	33	6.8%	32	6.6%	25	5.1%
AMERICAN INDIAN OR ALASKAN	2	0.4%	1	0.2%	1	0.2%	3	0.6%	4	0.8%
NATIVE										
INTERNATIONAL	201	37.2%	175	36.0%	167	34.4%	144	29.6%	145	29.8%
MULTIRACIAL			12	2.5%	15	3.1%		0.0%	8	1.6%
UNKNOWN OR NOT REPORTED	1	0.2%	8	1.6%	9	1.9%	19	3.9%	17	3.5%
TOTAL	522	100.0%	486	100.0%	447	100.0%	417	100.0%	407	100.0%

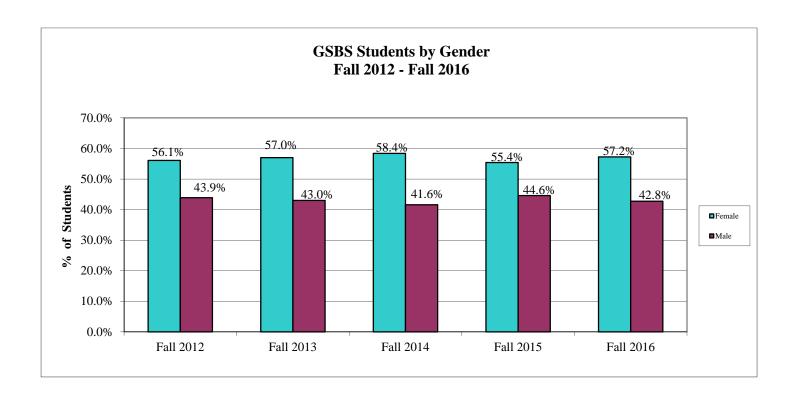
^{*}Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.



B.11 GSBS Students by Gender, Fall 2012 – Fall 2016*

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
GENDER	COUNT	Students								
FEMALE	293	56.1%	277	57.0%	261	58.4%	231	55.4%	233	57.2%
MALE	229	43.9%	209	43.0%	186	41.6%	186	44.6%	174	42.8%
TOTAL	522	100.0%	486	100.0%	447	100.0%	417	100.0%	407	100.0%

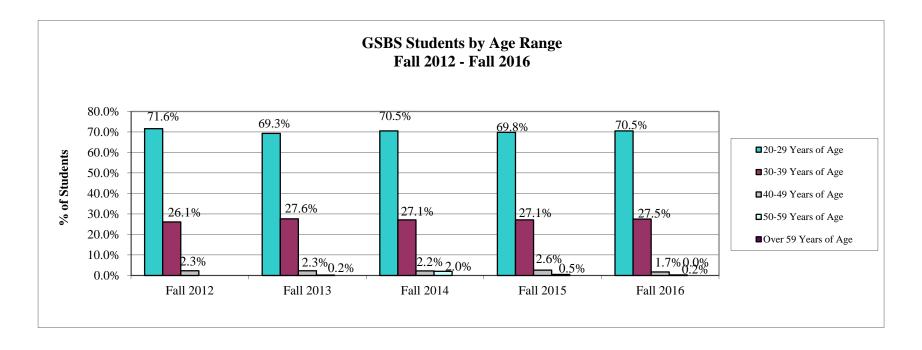
^{*}Data excludes non-degree students. Source: UT Graduate School of Biomedical Sciences.



B.12 GSBS Students by Age Range, Fall 2012 – Fall 2016*

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
AGE RANGE	COUNT	Students								
20 TO 29 YEARS OF AGE	374	71.6%	337	69.3%	315	70.5%	291	69.8%	287	70.5%
30 TO 39 YEARS OF AGE	136	26.1%	134	27.6%	121	27.1%	113	27.1%	112	27.5%
40 TO 49 YEARS OF AGE	12	2.3%	14	2.9%	10	2.2%	11	2.6%	7	1.7%
50 TO 59 YEARS OF AGE	0	0.0%	1	0.2%	1	0.2%	2	0.5%	1	0.2%
OVER 59 YEARS OF AGE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL	522	100.0%	486	100.0%	447	100.0%	417	100.0%	407	100.0%

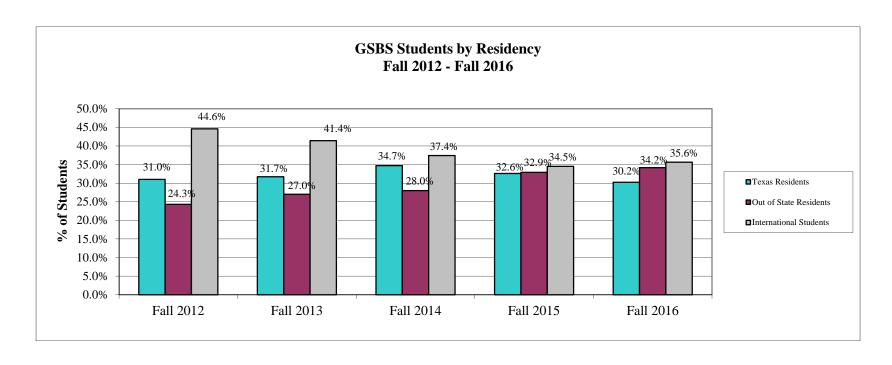
^{*}Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.



B.13 GSBS Students by Residency Type, Fall 2012 – Fall 2016*

RESIDENCE TYPE	Fall 2012 COUNT	% of Students	Fall 2013 COUNT	% of Students	Fall 2014 COUNT	% of Students	Fall 2015 COUNT	% of Students	Fall 2016 COUNT	% of Students
Texas Residents	162	31.0%	154	31.7%	155	34.7%	136	32.6%	123	30.2%
Out of State Students	127	24.3%	131	27.0%	125	28.0%	137	32.9%	139	34.2%
International Students	233	44.6%	201	41.4%	167	37.4%	144	34.5%	145	35.6%
Total	522	100.0%	486	100.0%	447	100.0%	417	100.0%	407	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

School/Program	Certificate	Bachelors	Master's	Doctoral
Graduate School of Biomedical Sciences				
M.S. in Biomedical Sciences Cancer Biology/Clinical Translational Oncology Genetic Counseling Medical Physics Therapeutics and Pharmacology Ph.D. in Biomedical Sciences Biochemistry and Cell Biology Biomedical Sciences Cancer Biology Genetics & Epigenetics Genes and Development Immunology Medical Physics Microbiology & Infectious Diseases Neuroscience Quantitative Sciences Therapeutics & Pharmacology				
C. L. al. CII. all D. C. a.				
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 (SI	HP)	
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
Health Care Disparities, Diversity		
and Advocacy	B.S.	Southern Association of Colleges and Schools
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
Radiologic Sciences	M.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.

C.1 School of Health Professions Degrees by Level, Fall 2012 – Fall 2016

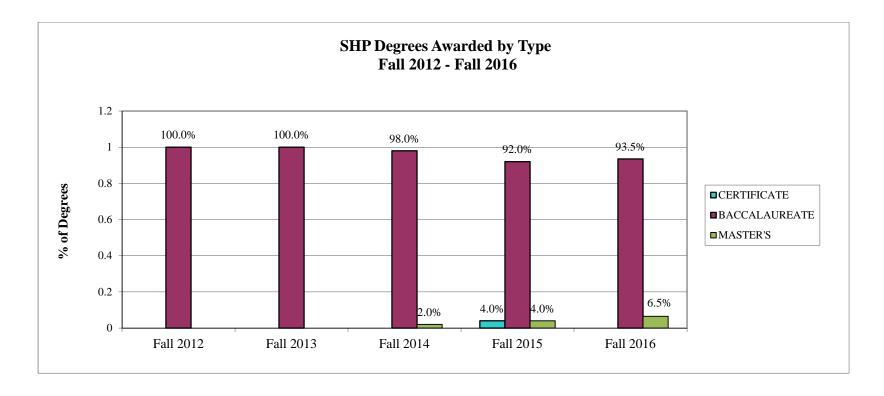
		Fall	Fall	%	Fall	%	Fall	%	Fall	%
SHP PROGRAM	DEGREE CONFERRED	2012	2013	Inc/Dec	2014	Inc/Dec	2015	Inc/Dec	2016	Inc/Dec
CLINICAL LABORATORY										
SCIENCE	BACCALAUREATE	19	15	-21.1%	16	6.7%	14	-12.5%	11	-21.4%
CYTOGENETIC	CERTIFICATE	0	0	0.0%	0		0		0	
TECHNOLOGY	BACCALAUREATE	31	19	-38.7%	15	-21.1%	18	20.0%	10	-44.4%
CYTOTECHNOLOGY	CERTIFICATE	0	0	0.0%	0		0		0	0.0%
CTTOTECHNOLOGI	BACCALAUREATE	6	7	16.7%	1	-85.7%	7	600.0%	3	-57.1%
DIAGNOSTIC IMAGING	CERTIFICATE	0	0	0.0%	0	0.0%	6	0.0%	0	0.0%
	BACCALAUREATE	31	28	-9.7%	28	0.0%	29	3.6%	28	-3.4%
DIAGNOSTIC GENETICS	MASTER'S	NA	NA		3		6	100.0%	10	66.7%
DIAGNOSTIC MEDICAL										
SONOGRAPHY	BACCALAUREATE	NA	NA		7		6	-14.3%	5	-16.7%
HISTOTECHNOLOGY										
11151012011(02001	BACCALAUREATE	11	12		14	16.7%	12	-14.3%	18	50.0%
MEDICAL DOSIMETRY										
	BACCALAUREATE	12	16	33.3%	16	0.0%	16	0.0%	19	18.8%
MOLECULAR GENETIC		•				1.000		10.10		0.00
TECHNOLOGY	BACCALAUREATE	30	31	3.3%	27	-12.9%	14	-48.1%	27	92.9%
RADIATION THERAPY										
	BACCALAUREATE	16	20	25.0%	20	0.0%	21	5.0%	23	9.5%
TOTAL WI	THIN YEAR	156	148	-5.1%	147	-0.7%	149	1.4%	154	3.4%

Source: SHP Dean's Report

C.2 SHP Degrees Awarded by Type, Fall 2012 – Fall 2016

	Fall	Fall	%	Fall	%	Fall	%	Fall	%
DEGREE AWARDED	2012	2013	Inc/Dec	2014	Inc/Dec	2015	Inc/Dec	2016	Inc/Dec
CERTIFICATE	0	0		0		6		0	-100.0%
BACCALAUREATE	156	148	-6.4%	144	-2.7%	137	-4.9%	144	5.1%
MASTER'S				3		6	100%	10	67.7%
Total	156	148	-5.1%	147	-0.7%	149	1.4%	154	3.4%

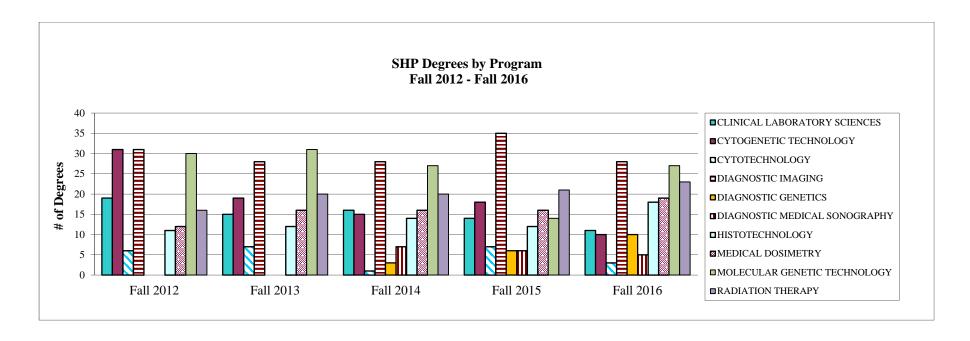
*Source: Certified CBM009



C.3 SHP Degrees by Program, Fall 2012 - Fall 2016

	Fall	Fall	%	Fall	%	Fall	%	Fall	%
PROGRAM	2012	2013	Inc/Dec	2014	Inc/Dec	2015	Inc/Dec	2016	Inc/Dec
CLINICAL LABORATORY SCIENCES	19	15	-21.1%	16	6.7%	14	-12.5%	11	-21.4%
CYTOGENETIC TECHNOLOGY	31	19	-38.7%	15	-21.1%	18	20.0%	10	-44.4%
CYTOTECHNOLOGY	6	7	16.7%	1	-85.7%	7	600.0%	3	-57.1%
DIAGNOSTIC IMAGING	31	28	-9.7%	28	700.0%	35	25.0%	28	-20.0%
DIAGNOSTIC GENETICS				3		6		10	66.7%
DIAGNOSTIC MEDICAL									
SONOGRAPHY				7		6		5	-16.7%
HISTOTECHNOLOGY	11	12	9.1%	14	16.7%	12	-14.3%	18	50.0%
MEDICAL DOSIMETRY	12	16	33.3%	16	0.0%	16	0.0%	19	18.8%
MOLECULAR GENETIC									
TECHNOLOGY	30	31	3.3%	27	-12.9%	14	-48.1%	27	92.9%
RADIATION THERAPY	16	20	25.0%	20	0.0%	21	5.0%	23	9.5%
OVERALL	156	148	-5.1%	147	-0.7%	149	1.4%	154	3.4%

Source: SHP Dean's Report



C.4 SHP Degrees Awarded by Program and Average Age, Fall 2012 – Fall 2016

		Fall	1 2012	Fall	2013	Fal	1 2014	Fal	1 2015	Fall	1 2016
	DEGREE	Avg.		Avg.		Avg.		Avg.		Avg.	
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	29.0	19	31.0	15	30.0	16	27.0	14	29.0	11
CYTOGENETIC TECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0		
	BACCALAUREATE	28.0	31	28.0	19	26.0	15	27.7	18	26.0	10
CYTOTECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0		
	BACCALAUREATE	27.0	6	36.0	7	20.0	1	29.0	7	26.0	3
DIAGNOSTIC IMAGING	BACCALAUREATE	32.0	31	32.0	28	32.0	28	29.5	36	30.0	28
DIAGNOSTIC GENETICS	MASTER'S	NA	NA	NA	NA	29.0	3	26.8	6	30.0	10
DIAGNOSTIC MEDICAL SONOGRAPHY	BACCALAUREATE	NA	NA	NA	NA	29.0	7	27.0	6	29.0	5
SUNUGRAFIT	DACCALAUREATE	INA	INA	INA	NA	29.0	/	27.0	0	29.0	3
HISTOTECHNOLOGY*	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	33.0	11	31.0	12	31.0	14	29.0	12	26.0	18
MEDICAL DOSIMETRY	BACCALAUREATE	30.0	12	31.0	16	29.0	16	28.0	16	28.0	19
MOLECULAR GENETIC											
TECHNOLOGY	BACCALAUREATE	28.0	30	30.0	31	28.0	27	30.8	14	27.0	27
			_		_		_		_		<u> </u>
RADIATION THERAPY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	29.0	16	31.0	20	29.0	20	27.7	21	28.0	23
TOTAL WITHIN YEAR		29.5	156	29.5	148	28.0	147	28.3	149	28.0	154

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

C - 7 MD Anderson Fact Book

C.5 SIII Degrees by 110	gram, Ethnicity, and Gender, F	an 2012 - 1	Fall									
PROGRAM/DEGREE	ETHNICITY	GENDER	2012	% of All		% of All						
CLINICAL	WHITE NON-HISPANIC	FEMALE	0		0		0		0		0	
LABORATORY SCIENCE		MALE	0		0		0		0		0	
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	HISPANIC	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0		0		0	
	NATIVE	MALE	0		0		0		0		0	
	INTERNATIONAL	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	MULTI-RACIAL	FEMALE							0		0	
		MALE							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	5.3%	3	20.0%	2	12.5%	3	21.4%	2	18.2%
		MALE	2	10.5%	1	6.7%	2	12.5%	2	14.3%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	4	21.1%	1	6.7%	2	12.5%	1	7.1%	1	9.1%
		MALE	1	5.3%	0	0.0%	1	6.3%	0	0.0%	1	9.1%
	HISPANIC	FEMALE	2	10.5%	4	26.7%	3	18.8%	1	7.1%	3	27.3%
		MALE	0	0.0%	0	0.0%	1	6.3%	1	7.1%	1	9.1%
	ASIAN OR PACIFIC ISLANDER	FEMALE	5	26.3%	4	26.7%	2	12.5%	4	28.6%	2	18.2%
		MALE	2	10.5%	2	13.3%	0	0.0%	0	0.0%	1	9.1%
	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	1	5.3%	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%
	MULTI-RACIAL	FEMALE					0	0.0%	2	14.3%	0	0.0%
		MALE					0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	1	5.3%	0	0.0%	1	6.3%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	2	12.5%	0	0.0%	0	0.0%
SUBTOTAL BACCALAUREA	BTOTAL BACCALAUREATE DEGREES					100.0%	16	100.0%	14	100.0%	11	100.0%
	CAL, CERTIFICATE & BACCALAUREATE DEGREES				15		16		14		11	

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% 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	
	MULTI-RACIAL	FEMALE							0		0	
		MALE							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	6	19.4%	3	15.8%	2	13.3%	3	16.7%	2	20.0%
		MALE	3	9.7%	2	10.5%	0	0.0%	2	11.1%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	3	9.7%	2	10.5%	0	0.0%	2	11.1%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	10.0%
	HISPANIC	FEMALE	7	22.6%	1	5.3%	1	6.7%	3	16.7%	0	0.0%
		MALE	2	6.5%	0	0.0%	3	20.0%	1	5.6%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	7	22.6%	3	15.8%	3	20.0%	3	16.7%	4	40.0%
		MALE	1	3.2%	1	5.3%	2	13.3%	1	5.6%	1	10.0%
	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	2	6.5%	0	0.0%	0	0.0%	3	16.7%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	6	31.6%	1	6.7%	0	0.0%	0	0.0%
		MALE	0	0.0%	1	5.3%	3	20.0%	0	0.0%	2	20.0%
SUBTOTAL BACCALA	UBTOTAL BACCALAUREATE DEGREES					100.0%	15	100.0%	18	100.0%	10	100.0%
TOTAL, CERTIFICAT	TE & BACCALAUREATE DEGREES	S	<u>31</u>		<u>19</u>		<u>15</u>		<u>18</u>		<u>10</u>	

Source. 01 Housion Health Science Center Registrar 3 Office

PROGRAM/DEGREE	FTHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All
	WHITE NON-HISPANIC	FEMALE	0	UIAII	0	UIAII	0	UI AII	0	UIAII	0	OI AII
CERTIFICATE	WHITE NOW-HISTAINE	MALE	0		0		0		0		0	
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		0		0		0	
	BLACK NON-HISFANIC	MALE	0		0		0		0		0	1
	HISPANIC	FEMALE	0		0		0		0		0	
	IIISI AIVIC	MALE	0		0		0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		0	
	ASDAY OR THEN TO ISLAY SER	MALE	0		0		0		0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0		0		0	1
	NATIVE	MALE	0		0		0		0		0	1
	INTERNATIONAL	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
	MULTI-RACIAL	FEMALE			-							
		MALE										
	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	2	33.3%	0	0.0%	1	100.0%	1	14.3%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	66.7%
	BLACK NON-HISPANIC	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%
	HISPANIC	FEMALE	2	33.3%	4	57.1%	0	0.0%	1	14.3%	1	33.3%
		MALE	0	0.0%	1	14.3%	0	0.0%	1	14.3%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	1	16.7%	1	14.3%	0	0.0%	4	57.1%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	1	16.7%	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%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	1	14.3%	0	0.0%	0	0.0%	0	0.0%
SUBTOTAL BACCALA	UBTOTAL BACCALAUREATE DEGREES			100.0%	7	100.0%	1	100.0%	7	100.0%	3	100.0%
TOTAL, CERTIFICA	ΓAL, CERTIFICATE & BACCALAUREATE DEGREES				7		1		7		3	

PROGRAM/DEGREI	E ETHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	0		0		0		0	0.0%	0	
IMAGING		MALE	0		0		0		1	16.7%	0	
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		0		1	16.7%	0	
		MALE	0		0		0		1	16.7%	0	
	HISPANIC	FEMALE	0		0		0		2	33.3%	0	
		MALE	0		0		0		0	0.0%	0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		1	16.7%	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	
	MULTI-RACIAL	FEMALE							0	0.0%		
		MALE							0	0.0%		
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0		0	0.0%	0	
		MALE	0		0		0		0	0.0%	0	
SUBTOTAL, CERTIF	ICATE		0	0			0		6	100.0%		0
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	7	22.6%	7	25.0%	5	17.9%	6	20.7%	7	25.0%
		MALE	7	22.6%	4	14.3%	3	10.7%	2	6.9%	2	7.1%
	BLACK NON-HISPANIC	FEMALE	0	0.0%	0	0.0%	5	17.9%	2	6.9%	2	7.1%
		MALE	1	3.2%	3	10.7%	0	0.0%	2	6.9%	1	3.6%
	HISPANIC	FEMALE	3	9.7%	5	17.9%	4	14.3%	5	17.2%	6	21.4%
		MALE	6	19.4%	0	0.0%	1	3.6%	5	17.2%	3	10.7%
	ASIAN OR PACIFIC ISLANDER	FEMALE	5	16.1%	3	10.7%	3	10.7%	2	6.9%	2	7.1%
		MALE	2	6.5%	4	14.3%	3	10.7%	3	10.3%	1	3.6%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	1	3.6%	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%	3	10.7%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	3.4%	0	0.0%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							1	3.4%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	2	7.1%	3	10.7%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	3.6%
SUBTOTAL BACCAL	AUREATE DEGREES		31	100.0%	28	100.0%	28	100.0%	29	100.0%	28	100.0%
TOTAL, CERTIFICA	TAL, CERTIFICATE & BACCALAUREATE DEGREES		31		28		28		29		28	

Source: UT Houston Health Science Center Registrar's Office

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA	7 111	NA	7311	()	0.0%	2	33.3%	0	0.0%
GENETICS	WINIDIVOIV INSITIUTE	MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
MASTER'S*	BLACK NON-HISPANIC	FEMALE	NA		NA		1	33.3%	0	0.0%	0	0.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
		MALE	NA		NA		0	0.0%	0	0.0%	2	20.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		0	0.0%	0	0.0%	1	10.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	NA		NA		0	0.0%	0	0.0%	4	40.0%
	INTERNATIONAL	FEMALE	NA		NA		0	0.0%	3	50.0%	3	30.0%
		MALE	NA		NA		0	0.0%	1	16.7%	0	0.0%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		2	66.7%	0	0.0%	0	0.0%
	MALE				NA		0	0.0%	0	0.0%	0	0.0%
TOTAL, BACCALAUR	REATE DEGREE:						3	100.0%	<u>6</u>	100.0%	<u>10</u>	100.0%

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

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA		NA		2	28.6%	0	0.0%	4	80.0%
MEDICAL SONOGRAPHY		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
BACCALAUREATE*	BLACK NON-HISPANIC	FEMALE	NA		NA		1	14.3%	0	0.0%	0	0.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		NA		1	14.3%	3	50.0%	1	20.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		2	28.6%	1	16.7%	0	0.0%
		MALE	NA		NA		0	0.0%	1	16.7%	0	0.0%
	AMERICAN INDIAN/ALASKAN NATIVE	FEMALE MALE	NA NA		NA NA		0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		0	0.0%	1	16.7%	0	0.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		1	14.3%	0	0.0%	0	0.0%
					NA		0	0.0%	0	0.0%	0	0.0%
TOTAL, BACCALAUREAT	E DEGREE:						7	100.0%	<u>6</u>	100.0%	<u>5</u>	100.0%

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

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2012 – Fall 2016

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All
HISTOTECHNOLOGY	WHITE NON-HISPANIC	FEMALE	0	All								
CERTIFICATE	WHITE NON-HISPANIC	MALE	0		0		0		0		0	
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		0		0		0	
	BLACK NON-INSI ANIC	MALE	0		0		0		0		0	
	HISPANIC	FEMALE	0		0		0		0		0	
	THOTANC	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	
	MULTI-RACIAL	FEMALE							0		0	
		MALE							0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
SUBTOTAL, CERTIFICAT	E		0		0		0		0		0	
BACCALAUREATE*	WHITE NON-HISPANIC	FEMALE	4	36.4%	4	33.3%	2	14.3%	1	8.3%	4	22.2%
		MALE	0	0.0%	1	8.3%	1	7.1%	1	8.3%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	2	18.2%	2	16.7%	3	21.4%	0	0.0%	3	16.7%
		MALE	1	9.1%	0	0.0%	1	7.1%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	1	9.1%	1	8.3%	0	0.0%	2	16.7%	4	22.2%
		MALE	1	9.1%	0	0.0%	1	7.1%	1	8.3%	1	5.6%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0	0.0%	0	0.0%	3	21.4%	4	33.3%	4	22.2%
		MALE	2	18.2%	3	25.0%	1	7.1%	3	25.0%	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%	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%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	2	14.3%	0	0.0%	1	5.6%
		MALE	11	0.0%	1	8.3%	0	0.0%	0	0.0%	0	0.0%
	BTOTAL BACCALAUREATE DEGREES			100.0%	12	100.0%	14	100.0%	12	100.0%	18	100.0%
TOTAL, CERTIFICATE &	L, CERTIFICATE & BACCALAUREATE DEGREES				<u>12</u>		<u>14</u>		<u>12</u>		<u>18</u>	

Source: UT Houston Health Science Center Registrar's Office

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2012 – Fall 2016

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All
		1		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	
	A GLAN OR BA GUERG IGLANDER	MALE	0		0		0		0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		0		0	
	AMEDICAN INDIAN/ALACKAN	MALE			0						0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0		0		0	
	NATIVE	MALE	0		0		0		0		0	
	INTERNATIONAL	FEMALE MALE	0		0		0		0		0	
	MILLTIDACIAL		0		U		U		U		0	
	MULTI-RACIAL	FEMALE MALE										
	LINIZNOWN OF NOT REPORTED	-	0		0				0		0	
	UNKNOWN OR NOT REPORTED	FEMALE MALE	0		0		0		0		0	
SUBTOTAL, CERTIFICATI	F.	WALL	0		U		0		0		0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	2	16.7%	5	31.3%	3	18.8%	3	18.8%	1	5.3%
DEGREES	WITTE NOW-HIST AINE	MALE	2	16.7%	4	25.0%	4	25.0%	1	6.3%	2	10.5%
DEGREES	BLACK NON-HISPANIC	FEMALE	1	8.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	BLACK NON-HISFANIC	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	5.3%
	HISPANIC	FEMALE	1	8.3%	0	0.0%	0	0.0%	5	31.3%	3	15.8%
	HISTANIC	MALE	0	0.0%	2	12.5%	1	6.3%	0	0.0%	3	15.8%
	ASIAN OR PACIFIC ISLANDER	FEMALE	5	41.7%	0	0.0%	4	25.0%	4	25.0%	4	21.1%
	ASIAN OR LACIFIC ISLANDER	MALE	1	8.3%	3	18.8%	3	18.8%	1	6.3%	1	5.3%
	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		0.070	- 0	0.070	0	0.070	0	0.0%	0	0.0%
	INILINATIONAL	MALE							1	6.3%	2	10.5%
	MULTI-RACIAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	1	6.3%	1	5.3%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	2	12.5%	1	6.3%	0	0.0%	0	0.0%
	CALLATO THE ORTHOGORIED	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	5.3%
UBTOTAL BACCALAUREATE DEGREES				100.0%	16	100.0%	16	100.0%	16	100.0%	19	100.0%
	TAL, CERTIFICATE & BACCALAUREATE DEGREES			100.070	16	100.070	16	100.070	16	100.070	19	100.070

MD Anderson Fact Book Academic Year 2017 Section C: Degrees

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2012– Fall 2016

			Fall	% of	Fall	% of						
PROGRAM/DEGREE	ETHNICITY	GENDER	2012	All	2013	All	2014	All	2015	All	2016	All
MOLECULAR GENETIC	WHITE NON-HISPANIC	FEMALE	6	20.0%	6	19.4%	10	37.0%	5	35.7%	6	22.2%
TECHNOLOGY		MALE	2	6.7%	4	12.9%	4	14.8%	1	7.1%	4	14.8%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	1	3.3%	2	6.5%	0	0.0%	0	0.0%	1	3.7%
		MALE	1	3.3%	0	0.0%	0	0.0%	0	0.0%	2	7.4%
	HISPANIC	FEMALE	3	10.0%	2	6.5%	3	11.1%	1	7.1%	5	18.5%
		MALE	1	3.3%	5	16.1%	1	3.7%	3	21.4%	1	3.7%
	ASIAN OR PACIFIC ISLANDER	FEMALE	8	26.7%	6	19.4%	1	3.7%	1	7.1%	4	14.8%
		MALE	3	10.0%	1	3.2%	2	7.4%	1	7.1%	3	11.1%
	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	3	10.0%	0	0.0%	0	0.0%	1	7.1%	0	0.0%
		MALE	2	6.7%	0	0.0%	0	0.0%	1	7.1%	0	0.0%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	1	3.7%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	5	16.1%	5	18.5%	0	0.0%	0	0.0%
	MALE		0	0.0%	0	0.0%	1	3.7%	0	0.0%	0	0.0%
TOTAL, BACCALAUREA	TE DEGREE:		<u>30</u>	100.0%	<u>31</u>	100.0%	<u>27</u>	100.0%	<u>14</u>	100.0%	27	100.0%

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

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 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
				All								
RADIATION THERAPY	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	
	MULTI-RACIAL	FEMALE							0		0	
	LINUXIONAL OD NOT DEDODTED	MALE	0		0		0		0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0		0		0	
		MALE	0		0		0		0		0	
SUBTOTAL, CERTIFICAT	<u>TE</u>		0		0		0		0		0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	5	31.3%	5	25.0%	7	35.0%	6	28.6%	3	13.0%
DEGREES		MALE	2	12.5%	0	0.0%	3	15.0%	0	0.0%	4	17.4%
	BLACK NON-HISPANIC	FEMALE	1	6.3%	2	10.0%	0	0.0%	1	4.8%	5	21.7%
		MALE	2	12.5%	1	5.0%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	1	6.3%	3	15.0%	6	30.0%	7	33.3%	2	8.7%
		MALE	0	0.0%	4	20.0%	2	10.0%	2	9.5%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	4	25.0%	1	5.0%	1	5.0%	2	9.5%	4	17.4%
		MALE	1	6.3%	2	10.0%	0	0.0%	2	9.5%	4	17.4%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	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%	1	4.8%	0	0.0%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	1	5.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	0 16	0.0%	20	5.0%	1	5.0%	0	0.0%	1	4.3%
SUBTOTAL, BACCALAUR	UBTOTAL, BACCALAUREATE DEGREES					100.0%	20	100.0%	21	100.0%	23	100.0%
TOTAL, CERTIFICATE A	AND BACCALAUREATE DEGREES:		<u>16</u>		<u>20</u>		<u>20</u>		<u>21</u>		<u>23</u>	

Source: UT Houston Health Science Center Registrar's Office

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2012 – Fall 2016

	begrees by Level, Elimicity, and		Fall	% of								
DEGREE	ETHNICITY	GENDER	2012	Students	2013	Students	2014	Students	2015	Students	2016	Students
CERTIFICATE	WHITE NON-HISPANIC	FEMALE	0		0		0		0	0.0%	0	
		MALE	0		0		0		1	16.7%	0	
	BLACK NON-HISPANIC	FEMALE	0		0		0		1	16.7%	0	
		MALE	0		0		0		1	16.7%	0	
	HISPANIC	FEMALE	0		0		0		2	33.3%	0	
		MALE	0		0		0		0	0.0%	0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		0		1	16.7%	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	
	MULTI-RACIAL	FEMALE							0	0.0%	0	
		MALE							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, CERTIF	FICATE		0		0		0		6	4.0%	0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	33	21.2%	32	21.6%	34	23.6%	28	18.8%	29	18.8%
		MALE	18	11.5%	16	10.8%	17	11.8%	9	6.0%	14	9.1%
	BLACK NON-HISPANIC	FEMALE	12	7.7%	9	6.1%	11	7.6%	6	4.0%	12	7.8%
		MALE	6	3.8%	4	2.7%	2	1.4%	2	1.3%	6	3.9%
	HISPANIC	FEMALE	20	12.8%	20	13.5%	18	12.5%	28	18.8%	25	16.2%
		MALE	10	6.4%	12	8.1%	10	6.9%	14	9.4%	9	5.8%
	ASIAN OR PACIFIC ISLANDER	FEMALE	36	23.1%	21	14.2%	19	13.2%	25	16.8%	24	15.6%
		MALE	11	7.1%	13	8.8%	11	7.6%	12	8.1%	12	7.8%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	1	0.7%	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	7	4.5%	0	0.0%	0	0.0%	6	4.0%	4	2.6%
		MALE	2	1.3%	0	0.0%	0	0.0%	3	2.0%	0	0.0%
	MULTI-RACIAL	FEMALE							2	1.3%	0	0.0%
		MALE							2	1.3%	3	1.9%
	UNKNOWN OR NOT REPORTED	FEMALE	1	0.6%	18	12.2%	14	9.7%	0	0.0%	1	0.6%
	MALE	0	0.0%	3	2.0%	7	4.9%	0	0.0%	5	3.2%	
SUBTOTAL BACCALAUREATE DEGREES			156	100.0%	148	100.0%	144	100.0%	137	92.0%	144	93.5%

Source: UT Houston Health Science Center Registrar's Office

MD Anderson Fact Book Academic Year 2017 Section C: Degrees

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2012 – Fall 2016

DEGREE	ETHNICITY	GENDER	Fall 2012	% of All	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All
MASTER'S	WHITE NON-HISPANIC	FEMALE	NA		NA		0	0.0%	2	33.3%	0	0.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	NA		NA		1	0.6%	0	0.0%	0	0.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
		MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		0	0.0%	0	0.0%	2	20.0%
		MALE	NA		NA		0	0.0%	0	0.0%	1	10.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	NA		NA		0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		0	0.0%	3	50.0%	4	40.0%
		MALE	NA		NA		0	0.0%	1	16.7%	3	30.0%
	MULTI-RACIAL	FEMALE							0	0.0%	0	0.0%
		MALE							0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		2	1.4%	0	0.0%	0	0.0%
MALE			NA		NA		0	0.0%	0	0.0%	0	0.0%
TOTAL MASTER'S	TOTAL MASTER'S DEGREE:						3	2.0%	6	4.0%	10	6.5%
TOTAL, DEGREES	TOTAL, DEGREES BY YEAR			100.0%	148	100.0%	147	100.0%	149	100.0%	154	100.0%

Source: UT Houston Health Science Center Registrar's Office

C.7 SHP Graduates by Gender and Ethnicity, Fall 2012 – Fall 2016

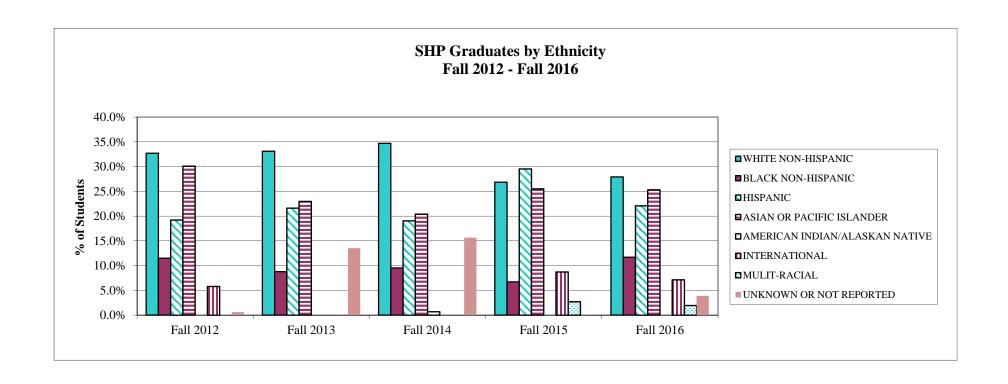
		Fall	% of								
ETHNICITY	GENDER	2012	Students	2013	Students	2014	Students	2015	Students	2016	Students
WHITE NON-HISPANIC	FEMALE	33	21.2%	32	21.6%	34	23.1%	30	20.1%	14	9.1%
	MALE	18	11.5%	16	10.8%	17	11.6%	10	6.7%	29	18.8%
BLACK NON-HISPANIC	FEMALE	12	7.7%	9	6.1%	12	8.2%	7	4.7%	12	7.8%
	MALE	6	3.8%	4	2.7%	2	1.4%	3	2.0%	6	3.9%
HISPANIC	FEMALE	20	12.8%	20	13.5%	18	12.2%	30	20.1%	25	16.2%
	MALE	10	6.4%	12	8.1%	10	6.8%	14	9.4%	9	5.8%
ASIAN OR PACIFIC ISLANDER	FEMALE	36	23.1%	21	14.2%	19	12.9%	26	17.4%	26	16.9%
	MALE	11	7.1%	13	8.8%	11	7.5%	12	8.1%	13	8.4%
AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	1	0.7%	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	7	4.5%	0	0.0%	0	0.0%	9	6.0%	8	5.2%
	MALE	2	1.3%	0	0.0%	0	0.0%	4	2.7%	3	1.9%
MULTI-RACIAL	FEMALE							2	1.3%	0	0.0%
	MALE							2	1.3%	3	1.9%
UNKNOWN OR NOT REPORTED	FEMALE	1	0.6%	18	12.2%	16	10.9%	0	0.0%	1	0.6%
	MALE	0	0.0%	3	2.0%	7	4.8%	0	0.0%	5	3.2%
TOTAL	-	156	100.0%	148	100.0%	147	100.0%	149	100.0%	154	100.0%

Source: UT Houston Health Science Center Registrar's Office

C.8 SHP Graduates by Ethnicity, Fall 2012 – Fall 2016

•	Fall	% of								
ETHNICITY	2012	Students	2013	Students	2014	Students	2015	Students	2016	Students
WHITE NON-HISPANIC	51	32.7%	49	33.1%	51	34.7%	40	26.8%	43	27.9%
BLACK NON-HISPANIC	18	11.5%	13	8.8%	14	9.5%	10	6.7%	18	11.7%
HISPANIC	30	19.2%	32	21.6%	28	19.0%	44	29.5%	34	22.1%
ASIAN OR PACIFIC ISLANDER	47	30.1%	34	23.0%	30	20.4%	38	25.5%	39	25.3%
AMERICAN INDIAN/ALASKAN NATIVE	0	0.0%	0	0.0%	1	0.7%	0	0.0%	0	0.0%
INTERNATIONAL	9	5.8%	0	0.0%	0	0.0%	13	8.7%	11	7.1%
MULTI-RACIAL							0	0.0%	3	1.9%
UNKNOWN OR NOT REPORTED	1	0.6%	20	13.5%	23	15.6%	4	2.7%	6	3.9%
Total	156	100.0%	148	100.0%	147	100.0%	149	100.0%	154	100.0%

Source: UT Houston Health Science Center Registrar's Office

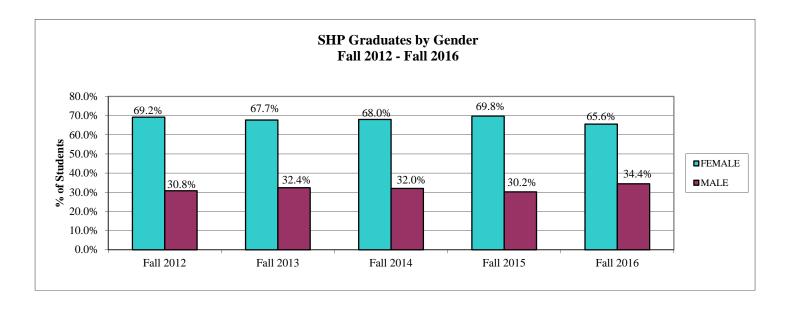


MD Anderson Fact Book Academic Year 2017 Section C: Degrees

C.9 SHP Graduates by Gender, Fall 2012 – Fall 2016

	Fall	% of								
GENDER	2012	Students	2013	Students	2014	Students	2015	Students	2016	Students
FEMALE	108	69.2%	100	67.6%	100	68.0%	104	69.8%	101	65.6%
MALE	48	30.8%	48	32.4%	47	32.0%	45	30.2%	53	34.4%
Total	156	100.0%	148	100.0%	147	100.0%	149	100.0%	154	100.0%

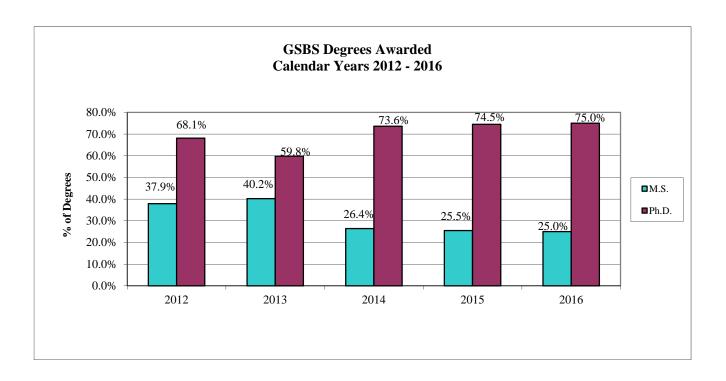
Source: UT Houston Health Science Center Registrar's Office



C.10 GSBS Degrees Awarded, Calendar Years 2012 – 2016*

DEGREE AWARDED	2012	2013	% Inc/Dec	2014	% Inc/Dec	2015	% Inc/Dec	2016	% Inc/Dec
M.S.	38	41	7.9%	32	-22.0%	25	-21.9%	20	-25.0%
Ph.D.	81	61	-24.7%	89	45.9%	73	-18.0%	60	-21.7%
OVERALL	119	102	-14.3%	121	18.6%	98	-19.0%	80	-22.5%

*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 2012 – 2016

Area of Research Interest	11)12)13	20)14	2015		2016	
Area of Research Interest	MS	PhD	MS	PhD	MS	PhD	MS	PhD	MS	PhD
Biochemistry		1								
Biochemistry and Molecular Biology	1		1			2		3		2
Biostatistics, Bioinformatics, and Systems Biology		1		6		2	1	2		2
Biomedical Sciences	11	20	26	13	20	16	10	5	6	4
Cancer Biology	2	17		11	1	27	1	19		14
Cell Biology										
Cell and Regulatory Biology	1	2		2		1		3		
Clinical and Translational Sciences							1		3	
Experimental Therapeutics	2	1		7		3	1	5		6
Genes & Development		8		5		4	1	8	1	6
Genetic Counseling	7		6		7		8			
Human & Molecular Genetics	1	2		1		4		3	8	
Immunology	1	2	1	4		6		8		2
Medical Physics	6	8	7	5	4	9	2	9		1
Microbiology & Molecular Genetics	3	5		2		5			2	8
Molecular Biology		1								4
Molecular Carcinogenesis	1	4		1		1		4		
Molecular Pathology		2				1				
Neuroscience		5		3		8		2		2
Virology & Gene Therapy	2	2		1				1		
Total	38	81	41	61	32	89	25	73	20	56

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 2012 – 2016

2012	2013	2014	2015	2016
Biomedical Sciences	Biophysics	Biomedical Sciences	Biomedical Sciences	Genetic Counseling
Genetic Counseling	Medical Physics	Genetic Counseling	Genetic Counseling	Biomedical Sciences
Medical Physics	Genetic Counseling	Medical Physics	Medical Physics	Clinical and
				Translational Sciences

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 2012 – Fall 2016

2012	2013	2014	2015	2016
Biomedical Sciences	Biophysics	Cancer Biology	Cancer Biology	Cancer Biology
Cancer Biology	Cancer Biology	Biomedical Sciences	Medical Physics	Medical Physics
Genes & Development*	Genes & Development*	Medical Physics	Genes & Development*	Epigenetics and Molecular Carcinogenesis*
Medical Physics*	Medical Physics*		Immunology*	Experimental Therapeutics*

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

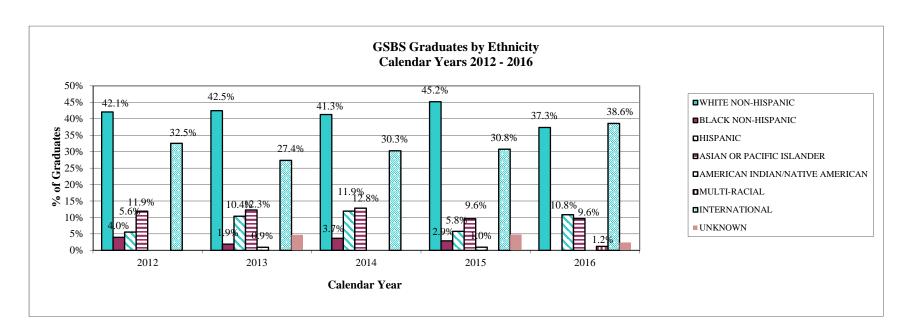
Source: UT MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences

C.14 GSBS Graduates by Ethnicity, Calendar Years 2012 – 2016

, , , , , , , , , , , , , , , , , , , ,	2012	% of	2013	% of	2014	% of	2015	% of	2016	% of
ETHNICITY	COUNT	Students								
WHITE NON-HISPANIC	53	42.1%	45	42.5%	45	41.3%	47	45.2%	31	37.3%
BLACK NON-HISPANIC	5	4.0%	2	1.9%	4	3.7%	3	2.9%	0	0.0%
HISPANIC	7	5.6%	11	10.4%	13	11.9%	6	5.8%	9	10.8%
ASIAN OR PACIFIC ISLANDER	15	11.9%	13	12.3%	14	12.8%	10	9.6%	8	9.6%
AMERICAN INDIAN OR ALASKAN										
NATIVE	0	0.0%	1	0.9%	0	0.0%	1	1.0%	0	0.0%
INTERNATIONAL	41	32.5%	29	27.4%	33	30.3%	32	30.8%	32	38.6%
MULTI-RACIAL							0	0.0%	1	1.2%
UNKNOWN OR NOT REPORTED	5	4.0%	5	4.7%	0	0.0%	5	4.8%	2	2.4%
TOTAL	126	100.0%	106	100.0%	109	100.0%	104	100.0%	83	100.0%

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

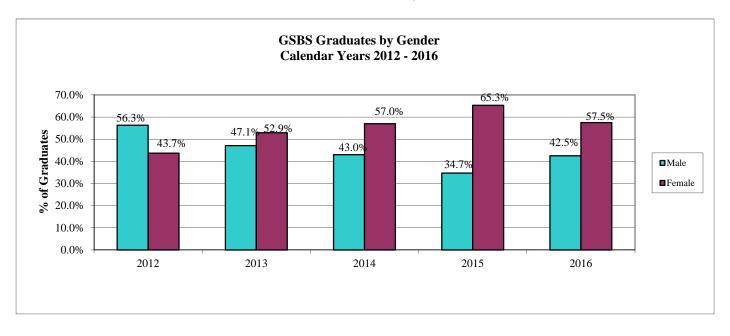
^{*}Starting 2012, GSBS students could declare more than one ethnicity, therefore, ethnicity and degree totals may not match



C.15 GSBS Graduates by Gender, Calendar Years 2012 – 2016

	2012	% of	2013	% of	2014	% of	2015	% of	2016	% of
GENDER	COUNT	Students								
FEMALE	52	43.7%	54	52.9%	69	57.0%	64	65.3%	46	57.5%
MALE	67	56.3%	48	47.1%	52	43.0%	34	34.7%	34	42.5%
TOTAL	119	100.0%	102	100.0%	121	100.0%	98	100.0%	80	100.0%

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



D. Faculty Demographics



Making Cancer History®

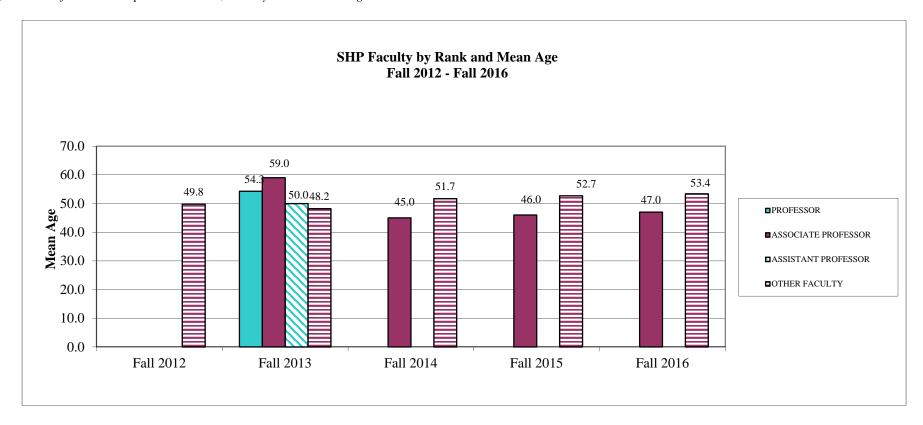
D.1 SHP Faculty by Rank and Mean Age, Fall 2012 – Fall 2016*

	Fa	ll 2012	Fa	ll 2013	Fal	11 2014	Fa	11 2015	Fa	ll 2016
		MEAN		MEAN	MEAN			MEAN		MEAN
MEAN AGE BY RANK	COUNT	AGE								
PROFESSOR	0		7	54.3	0		0		0	
ASSOCIATE PROFESSOR	0		4	59.0	1	45.0	1	46.0	1	47.0
ASSISTANT PROFESSOR	0		1	50.0	0		0		0	
OTHER FACULTY	49	49.8	33	48.2	56	51.7	54	52.7	62	53.4

^{*}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

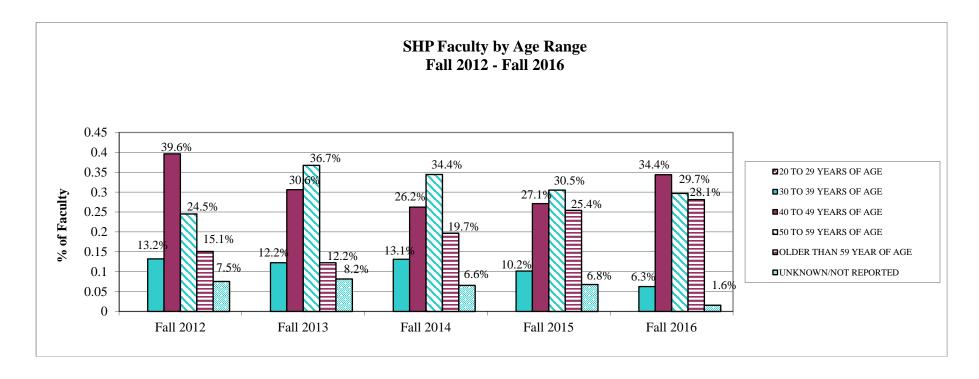


D.2 SHP Faculty by Age Range, Fall 2012 – Fall 2016*

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% 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	13.2%	6	12.2%	8	13.1%	6	10.2%	4	6.3%
40 TO 49 YEARS OF AGE	21	39.6%	15	30.6%	16	26.2%	16	27.1%	22	34.4%
50 TO 59 YEARS OF AGE	13	24.5%	18	36.7%	21	34.4%	18	30.5%	19	29.7%
OLDER THAN 59 YEARS OF AGE	8	15.1%	6	12.2%	12	19.7%	15	25.4%	18	28.1%
UNKNOWN/NOT REPORTED	4	7.5%	4	8.2%	4	6.6%	4	6.8%	1	1.6%
TOTAL	53	100.0%	49	100.0%	61	100.0%	59	100.0%	64	100.0%

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog

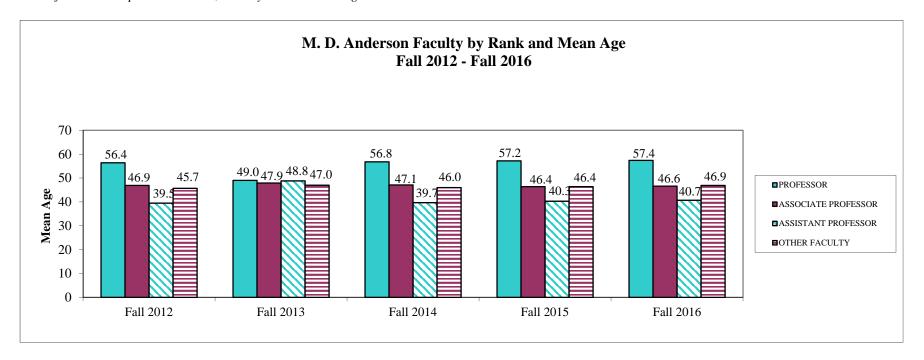


D.3 MD Anderson Faculty by Rank and Mean Age, Fall 2012 - Fall 2016

	Fa	all 2012	Fall 2013		F	all 2014	F	all 2015	Fa	all 2016
RANK	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE	COUNT	MEAN AGE
PROFESSOR	348	56.4	334	49.0	339	56.8	333	57.2	334	57.4
ASSOCIATE PROFESSOR	150	46.9	145	47.9	142	47.1	134	46.4	143	46.6
ASSISTANT PROFESSOR	124	39.5	117	48.8	120	39.7	120	40.3	113	40.7
OTHER FACULTY	1503	45.7	1553	47.0	1586	46.0	1693	46.4	1728	46.9
TOTAL/OVERALL	2125	47.2	2149	47.8	2187	47.4	2280	47.7	2318	48.1

Source: Certified CBM008

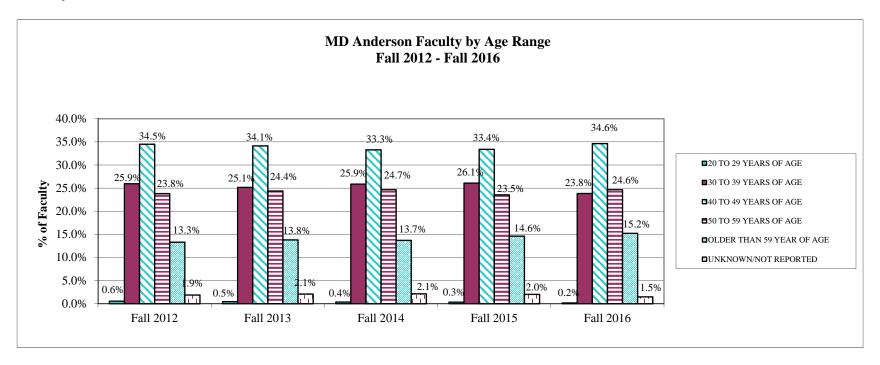
Age at Time of CBM008 Report Submission; Faculty with unknown age are not included



D.4 MD Anderson Faculty by Age Range, Fall 2012 - Fall 2016

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
AGE RANGE	COUNT	Faculty								
20 TO 29 YEARS OF AGE	12	0.6%	10	0.5%	8	0.4%	8	0.3%	4	0.2%
30 TO 39 YEARS OF AGE	562	25.9%	552	25.1%	578	25.9%	607	26.1%	561	23.8%
40 TO 49 YEARS OF AGE	747	34.5%	749	34.1%	744	33.3%	777	33.4%	815	34.6%
50 TO 59 YEARS OF AGE	516	23.8%	535	24.4%	551	24.7%	548	23.5%	580	24.6%
OLDER THAN 59 YEARS OF AGE	288	13.3%	303	13.8%	306	13.7%	340	14.6%	358	15.2%
UNKNOWN/NOT REPORTED	41	1.9%	46	2.1%	48	2.1%	47	2.0%	35	1.5%
TOTAL	2166	100.0%	2195	100.0%	2235	100.0%	2327	100.0%	2353	100.0%

Source: Certified CBM008



D.5 SHP Faculty by Ethnicity and Gender, Fall 2012 – Fall 2016*

ETHNICITY	GENDER	Fall 2012 COUNT	% of Faculty	Fall 2013 COUNT	% of Faculty	Fall 2014 COUNT	% of Faculty	Fall 2015 COUNT	% of Faculty	Fall 2016 COUNT	% of Faculty
WHITE NON-HISPANIC	FEMALE	21	39.6%	12	24.5%	19	31.1%	19	32.2%	20	31.3%
	MALE	9	17.0%	15	30.6%	14	23.0%	14	23.7%	16	25.0%
BLACK NON-HISPANIC	FEMALE	4	7.5%	3	6.1%	7	11.5%	6	10.2%	4	6.3%
	MALE	3	5.7%	4	8.2%	3	4.9%	3	5.1%	3	4.7%
HISPANIC	FEMALE	1	1.9%	1	2.0%	1	1.6%	1	1.7%	1	1.6%
	MALE	1	1.9%	1	2.0%	0	0.0%	0	0.0%	0	0.0%
ASIAN	FEMALE	5	9.4%	3	6.1%	4	6.6%	4	6.8%	5	7.8%
	MALE	4	7.5%	5	10.2%	7	11.5%	6	10.2%	7	10.9%
AMERICAN INDIAN/NATIVE	FEMALE	1	1.9%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
AMERICAN	MALE	0	0.0%	1	2.0%	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	FEMALE	2	3.8%	2	4.1%	3	4.9%	3	5.1%	2	3.1%
	MALE	1	1.9%	1	2.0%	2	3.3%	2	3.4%	4	6.3%
NATIVE HAWAIIAN OR OTHER	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
PACIFIC ISLANDER	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TWO OR MORE RACES	FEMALE	1	1.9%	1	2.0%	1	1.6%	1	1.7%	2	3.1%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL		53	100.0%	49	100.0%	61	100.0%	59	100.0%	64	100.0%

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

Section D: Faculty

D.6 MD Anderson Faculty by Ethnicity and Gender, Fall 2012 - Fall 2016*

ETHNICITY	GENDER	Fall 2012 COUNT	% of Faculty	Fall 2013 COUNT	% of Faculty	Fall 2014 COUNT	% of Faculty	Fall 2015 COUNT	% of Faculty	Fall 2016 COUNT	% of Faculty
WHITE NON-HISPANIC	FEMALE	400	18.5%	426	19.4%	382	17.1%	399	17.2%	397	16.9%
	MALE	722	33.3%	652	29.7%	667	29.8%	691	29.8%	682	29.0%
BLACK NON-HISPANIC	FEMALE	38	1.8%	26	1.2%	42	1.9%	42	1.8%	45	1.9%
	MALE	22	1.0%	41	1.9%	25	1.1%	25	1.1%	26	1.1%
HISPANIC	FEMALE	48	2.2%	51	2.3%	54	2.4%	54	2.3%	56	2.4%
	MALE	82	3.8%	91	4.1%	95	4.3%	86	3.7%	101	4.3%
ASIAN	FEMALE	285	13.2%	267	12.2%	277	12.4%	298	12.8%	311	13.2%
	MALE	524	24.2%	431	19.6%	451	20.2%	444	19.1%	461	19.6%
AMERICAN INDIAN/NATIVE	FEMALE	3	0.1%	2	0.1%	4	0.2%	3	0.1%	3	0.1%
AMERICAN	MALE	1	0.0%	3	0.1%	1	0.0%	1	0.0%	1	0.0%
INTERNATIONAL	FEMALE	0	0.0%	1	0.0%	82	3.7%	107	4.6%	89	3.8%
	MALE	0	0.0%	0	0.0%	113	5.1%	123	5.3%	121	5.1%
UNKNOWN	FEMALE	10	0.5%	13	0.6%	10	0.4%	10	0.4%	12	0.5%
	MALE	23	1.1%	22	1.0%	23	1.0%	24	1.0%	34	1.4%
NATIVE HAWAIIAN OR OTHER	FEMALE	2	0.1%	2	0.1%	2	0.1%	2	0.1%	2	0.1%
PACIFIC ISLANDER	MALE	2	0.1%	1	0.0%	1	0.0%	1	0.0%	1	0.0%
TWO OR MORE RACES	FEMALE	2	0.1%	51	2.3%	4	0.2%	7	0.3%	6	0.3%
	MALE	2	0.1%	115	5.2%	2	0.1%	5	0.2%	5	0.2%
TOTAL		2166	100.0%	2195	100.0%	2235	100.0%	2322	100.0%	2353	100.0%

*Does not include adjunct faculty

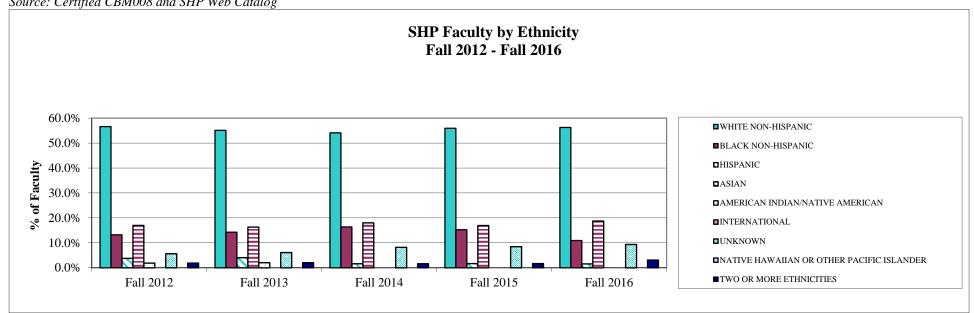
Source: Certified CBM008

SHP Faculty by Ethnicity, Fall 2012 – Fall 2016* **D.7**

ETHNICITY	Fall 2012 COUNT	% of Total	Fall 2013 COUNT	% of Total	Fall 2014 COUNT	% of Total	Fall 2015 COUNT	% of Total	Fall 2016	% of Total
EIRNCIII	COUNT	Total	COUNT	Total	COUNT	Total	COUNT	10141	COUNT	Total
WHITE NON-HISPANIC	30	56.6%	27	55.1%	33	54.1%	33	55.9%	36	56.3%
BLACK NON-HISPANIC	7	13.2%	7	14.3%	10	16.4%	9	15.3%	7	10.9%
HISPANIC	2	3.8%	2	4.1%	1	1.6%	1	1.7%	1	1.6%
ASIAN	9	17.0%	8	16.3%	11	18.0%	10	16.9%	12	18.8%
AMERICAN INDIAN/NATIVE AMERICAN	1	1.9%	1	2.0%	0	0.0%	0	0.0%	0	0.0%
INTERNATIONAL	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
UNKNOWN	3	5.7%	3	6.1%	5	8.2%	5	8.5%	6	9.4%
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	1	1.9%	1	2.0%	1	1.6%	1	1.7%	2	3.1%
TOTAL	53	100.0%	49	100.0%	61	100.0%	59	100.0%	64	100.0%

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog



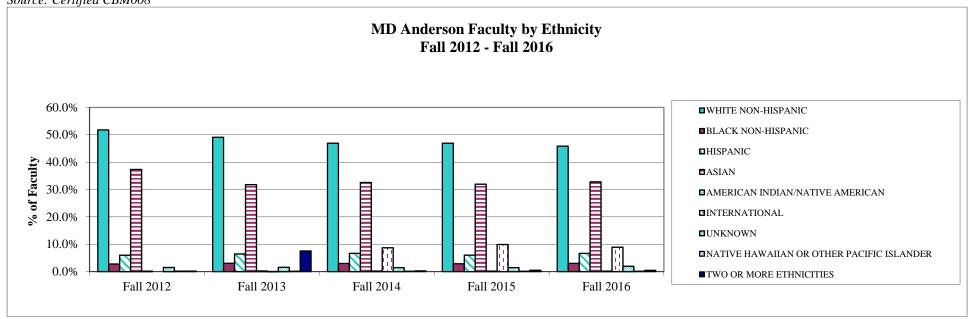
D - 8 MD Anderson Fact Book

D.8 MD Anderson Faculty by Ethnicity, Fall 2012 - Fall 2016*

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
ETHNICITY	COUNT	Faculty								
WHITE NON-HISPANIC	1122	51.8%	1078	49.1%	1049	46.9%	1090	46.9%	1079	45.9%
BLACK NON-HISPANIC	60	2.8%	67	3.1%	67	3.0%	67	2.9%	71	3.0%
HISPANIC	130	6.0%	142	6.5%	149	6.7%	140	6.0%	157	6.7%
ASIAN	809	37.3%	698	31.8%	728	32.6%	742	32.0%	772	32.8%
AMERICAN INDIAN/NATIVE AMERICAN	4	0.2%	5	0.2%	5	0.2%	4	0.2%	4	0.2%
INTERNATIONAL	0	0.0%	1	0.0%	195	8.7%	230	9.9%	210	8.9%
UNKNOWN	33	1.5%	35	1.6%	33	1.5%	34	1.5%	46	2.0%
NATIVE HAWAIIAN OR OTHER PACIFIC										
ISLANDER	4	0.2%	3	0.1%	3	0.1%	3	0.1%	3	0.1%
TWO OR MORE RACES	4	0.2%	166	7.6%	6	0.3%	12	0.5%	11	0.5%
TOTAL	2166	100.0%	2195	100.0%	2235	100.0%	2322	100.0%	2353	100.0%

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

Source: Certified CBM008

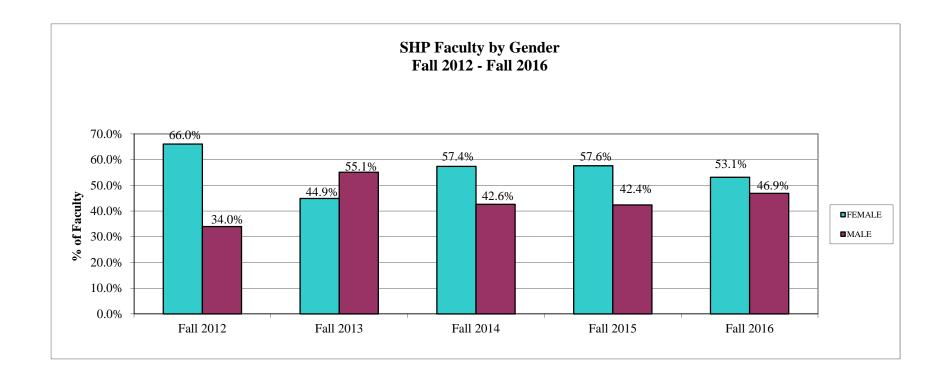


D.9 SHP Faculty by Gender, Fall 2012 – Fall 2016*

GENDER	Fall 2012 COUNT	% of Total	Fall 2013 COUNT	% of Total	Fall 2014 COUNT	% of Total	Fall 2015 COUNT	% of Total	Fall 2016 COUNT	% of Total
FEMALE	35	66.0%	22	44.9%	35	57.4%	34	57.6%	34	53.1%
MALE	18	34.0%	27	55.1%	26	42.6%	25	42.4%	30	46.9%
TOTAL	53	100.0%	49	100.0%	61	100.0%	59	100.0%	64	100.0%

*Does not include adjunct faculty

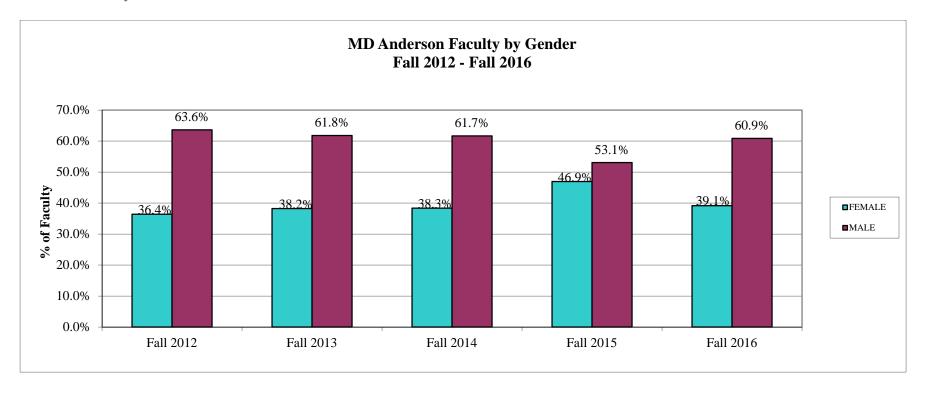
Source: Certified CBM008 and SHP Web Catalog



D.10 MD Anderson Faculty by Gender, Fall 2012 - Fall 2016

	Fall 2012	% of	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of
GENDER	COUNT	Total								
FEMALE	788	36.4%	839	38.2%	857	38.3%	922	46.9%	921	39.1%
MALE	1378	63.6%	1356	61.8%	1378	61.7%	1042	53.1%	1432	60.9%
TOTAL	2166	100.0%	2195	100.0%	2235	100.0%	1964	100.0%	2353	100.0%

Source: Certified CBM008

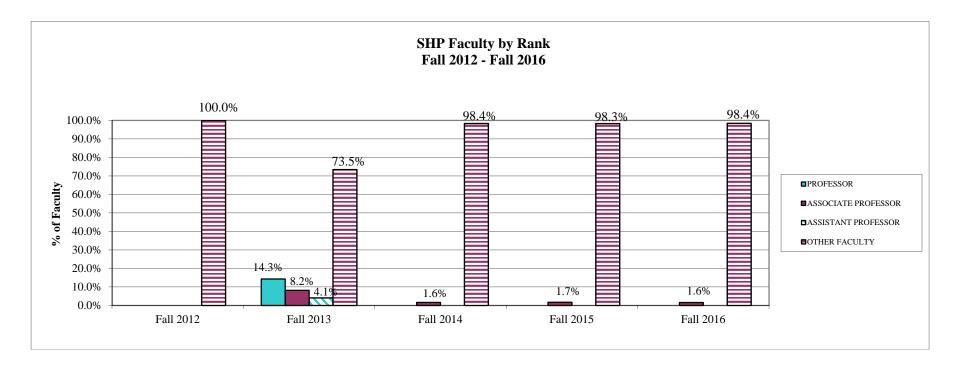


D.11 SHP Faculty by Rank, Fall 2012 – Fall 2016*

	Fa	ll 2012		Fall 2013			Fa	ll 2014		Fa	all 2015		Fa	ll 2016	
		% 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	7	14.3%	3.00	0	0.0%	0.00	0	0.0%	0.00	0	0.0%	0.00
ASSOCIATE															
PROFESSOR	0	0.0%	0.00	4	8.2%	2.00	1	1.6%	1.00	1	1.7%	1.00	1	1.6%	1.00
ASSISTANT															
PROFESSOR	0	0.0%	0.00	2	4.1%	0.00	0	0.0%	0.00	0	0.0%	0.00	0	0.0%	0.00
OTHER FACULTY	53	100.0%	30.00	36	73.5%	23.00	60	98.4%	28.00	58	98.3%	26.00	63	98.4%	25.00
TOTAL	53	100.0%	30.00	49	100.0%	28.00	61	100.0%	29.00	59	100.0%	27.00	64	100.0%	26.00

^{*}Does not include adjunct faculty

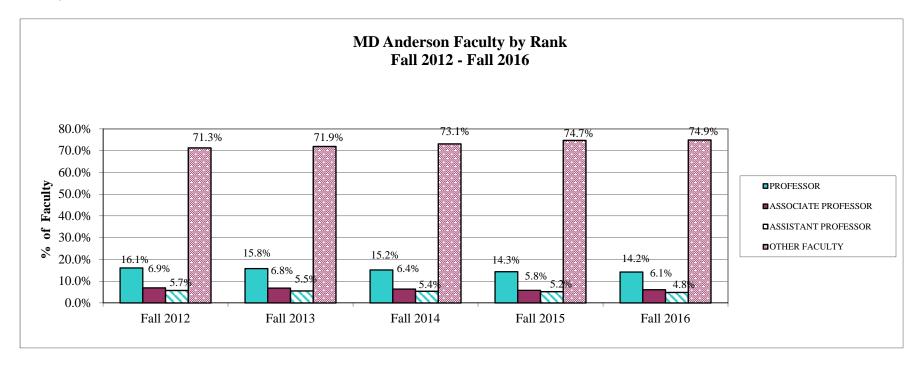
Source: Certified CBM008 and SHP Web Catalog



D.12 MD Anderson Faculty by Rank, Fall 2012 - Fall 2016

		Fall 2012			Fall 2013			Fall 2014			Fall 2015		F	all 2016	
		% OF			% OF			% OF			% OF			% OF	
FACULTY RANK	COUNT	ALL	FTE	COUNT	ALL	FTE									
PROFESSOR	348	16.1%	346.73	346	15.8%	259.31	339	15.2%	338.00	333	14.3%	332.00	334	14.2%	326.00
ASSOCIATE															
PROFESSOR	150	6.9%	149.90	149	6.8%	110.37	142	6.4%	142.00	134	5.8%	134.00	143	6.1%	136.00
ASSISTANT															
PROFESSOR	124	5.7%	123.95	121	5.5%	91.40	120	5.4%	120.00	120	5.2%	120.00	113	4.8%	111.00
OTHER FACULTY	1544	71.3%	1076.29	1579	71.9%	1256.51	1634	73.1%	1126.99	1735	74.7%	1159.77	1763	74.9%	1145
TOTAL	2166	100.0%	1696.87	2195	100.0%	1717.59	2235	100.0%	1726.99	2322	100.0%	1745.77	2353	100.0%	1718

Source: Certified CBM008



Section D: Faculty

D.13 SHP Mean Faculty* Salaries by Rank, Fall 2012 - Fall 2016

	F	all 2012		F	'all 2013		F	all 2014		F	all 2015		F	'all 2016	
	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	\$114,024	3	3.00	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00
ASSOCIATE															
PROFESSOR	\$0	0	0.00	\$167,831	2	2.00	\$122,101	1	1.00	\$126,069	1	1.00	\$130,797	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	\$113,659	30	30.00	\$108,088	23	23.00	\$118,080	28	28.00	\$118,898	26	26.00	\$121,905	25	25.00
OVERALL	\$113,659	30	30.00	\$112,991	28	28.00	\$118,219	29	29.00	\$118,219	27	27.00	\$122,247	26	26.00

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog

D.14 MD Anderson Cancer Center Mean Faculty* Salaries by Rank, Fall 2012 - Fall 2016

		Fall 2012			Fall 2013			Fall 2014 Fall 2015				Fall 2016			
RANK	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE
PROFESSOR	\$353,816	347	346.73	\$236,794	259	257.81	\$368,869	338	338.00	\$377,678	328	328	\$395,709	333	332.74
ASSOCIATE PROFESSOR	\$216,006	150	149.90	\$235,044	111	109.48	\$226,042	142	142.00	\$242,935	134	134	\$246,703	143	143
ASSISTANT PROFESSOR	\$185,665	124	123.95	\$233,434	91	91.00	\$190,556	120	120.00	\$186,666	120	120	\$196,586	113	113
OTHER FACULTY	\$186,660	1075	1067.56	\$219,443	1257	1251.41	\$199,450	1126	1118.65	\$211,772	1151	1143.23	\$227,605	1178	1170.02
OVERALL	\$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	\$258,847	1,767	1,758.76

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

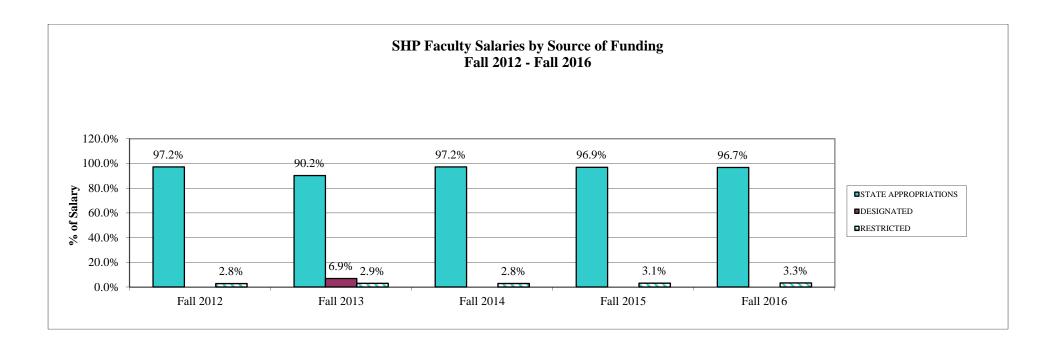
Source: Certified CBM008

D.15 SHP Faculty Salaries by Source of Funds, Fall 2012 – Fall 2016*

	Fall 2	2012	Fall 2013		Fall 2014		Fall 2015		Fall 2016	
		% OF								
SOURCE OF FUNDING	Sum	ALL								
STATE APPROPRIATIONS	\$3,315,302	97.2%	\$2,853,532	90.2%	\$3,331,857	97.2%	\$3,116,594	96.9%	\$3,074,568	96.7%
DESIGNATED	\$0	0.0%	\$217,100	6.9%	\$0	0.0%	\$0	0.0%	\$0	0.0%
RESTRICTED	\$94,479	2.8%	\$93,126	2.9%	\$96,482	2.8%	\$100,824	3.1%	\$103,849	3.3%
TOTAL	\$3,409,781	100.0%	\$3,163,758	100.0%	\$3,428,339	100.0%	\$3,217,418	100.0%	\$3,178,417	100.0%

^{*}Does not include adjunct faculty

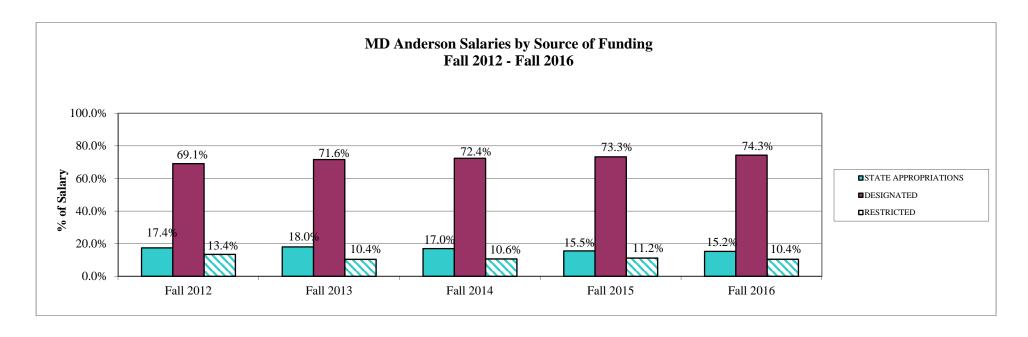
Source: Certified CBM008 and SHP Web Catalog



D.16 MD Anderson Faculty Salaries by Source of Funds, Fall 2012 - Fall 2016

	Fall 201	12	Fall 2013		Fall 20	14	Fall 2015		Fall 2016	
		% of								
SOURCE OF FUNDING	Sum	Total								
STATE APPROPRIATIONS	\$66,430,020	17.4%	\$69,612,503	18.0%	\$69,073,177	17.0%	\$69,073,177	17.0%	\$67,937,456	15.2%
DESIGNATED	\$263,476,302	69.1%	\$276,803,555	71.6%	\$294,333,847	72.4%	\$294,333,847	72.4%	\$331,107,637	74.3%
RESTRICTED	\$51,231,257	13.4%	\$40,196,501	10.4%	\$43,220,286	10.6%	\$43,220,286	10.6%	\$46,502,305	10.4%
TOTAL	\$381,137,579	100.0%	\$386,612,559	100.0%	\$406,627,310	100.0%	\$406,627,310	100.0%	\$445,547,398	100.0%

Source: Certified CBM008



D.17 MD Anderson Faculty American Association for Advancement of Science Fellows Appointments Fiscal Year 2017

Name	Department
Ralph B. Arlinghaus, Ph.D	Translational Molecular Pathology
Powel H. Brown, M.D., Ph.D.	Clinical Cancer Prevention
Junjie Chen, Ph.D	Experimental Radiation Oncology
Andy Futreal, Ph.D	Genomic Medicine
Eugenie S. Kleinerman, M.D	Pediatrics
Jeffrey N. Myers, M.D., Ph.D.	Head and Neck Surgery
David J. Tweardy, M.D.	Internal Medicine

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
MS and PhD Program	Southern Association of Colleges and Schools (SACS)	2010	10 years
MS with specialization in Genetic Counseling	American Board of Genetic Counseling (ABGC)	2014	8 years
MS and PhD with specialization in Medical Physics	Commission on Accreditation of Medical Physics Educational Programs (CAMPEP)	2018	5 years

E.1.3 Accredited Medical Programs Schedule

Institutional ACGME* Review: January 24, 2018

Program	Accrediting Agency	Accreditation Effective Date
Blood Banking & Transfusion Medicine	ACGME	January 29, 2018
Chemical Pathology	ACGME	January 29, 2018
Complex General Surgical Oncology	ACGME	January 18, 2018
Cytopathology	ACGME	January 29, 2018
Dermatopathology	ACGME	January 29, 2018
Gynecologic Oncology	ACGME	Initial Accreditation – April 27, 2017
Hematology and Oncology	ACGME	January 19, 2018
Hematopathology	ACGME	January 29, 2018
Hospice and Palliative Care	ACGME	January 18, 2018
Molecular Genetics Pathology	ACGME	January 29, 2018
Musculoskeletal Oncology	ACGME	January 18, 2018
Ophthalmic Plastic & Reconstructive Surgery	ACGME	January 04, 2018
Pain Management	ACGME	January 29, 2018
Pediatric Hematology/Oncology	ACGME	January 28, 2018
Micrographic surgery and dermatologic oncology (formerly known as Procedural	ACGME	
Dermatology)		January 05, 2018
Radiation Oncology	ACGME	January 18, 2018
Breast Pathology	ACGME	January 29, 2018
Cancer Biomarker Pathology	ACGME	January 29, 2018
Gastrointestinal & Liver Pathology	ACGME	January 29, 2018
Genitourinary Pathology	ACGME	January 29, 2018
Gynecologic Oncology Pathology	ACGME	January 29, 2018
Head & Neck Pathology	ACGME	January 29, 2018
Soft Tissue Pathology	ACGME	January 29, 218
Surgical Pathology	ACGME	January 29, 2018
Thoracic Pathology	ACGME	January 29, 2018
Thoracic Surgery	ACGME	January 12, 2018
Vascular and Interventional Radiology	ACGME	January 25, 2018

^{*} Accreditation Council for Graduate Medical Education

MD Anderson Fact Book Academic Year 2017 Section E: Academic Assessments

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
- 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

MD Anderson Fact Book Academic Year 2017 Section E: Academic Assessments

Texas Medical Board Approved Programs, continued

- Onco-Hospitalist
- 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: Graduate Medical 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

	Nedical Emboratory Scientist Generalist Exam												
Year	# of Graduates	# Graduates Taking BOC Exam	% Passing	Program Mean BOC Score	National Mean BOC Score								
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								
2016	15	15	100%	631	495								

E.2.2 Program in Cytogenetic Technology - Registry Exam Scores

	2007	2008	2009	2010**	2011***	2012	2013	2014	2015	2016
Program Part I	81.00	81.00	75	590	516	456	495	484	544	527
National Part I	78.03	78.83	73.72	516	468	456	494	455	480	453
Program Part II	95.92	92.15	77*	700						
National Part II	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.

MD Anderson Fact Book Academic Year 20 Section E: Academic Assessments

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
2005	3	3	100%	626	478	18	2	589	551	-
2006	3 HT	3 HT	100%	619	455	19	1	676	548	3
	3 HTL	3 HTL	100%	560	433	NA	NA	498	552	NA
2007	3 HT	3 HT	100%	632	463	24	1	Discontinued	NA	NA
	4 HTL	4 HTL	100%	520	422	NA	NA			
2008	2 HT	2 HT	100%	506	448	28	16	Discontinued	NA	NA
	4 HTL	4 HTL	100%	454	422	NA	NA			
2009	2 HT	2 HT	100%	549	480	28	6	Discontinued	NA	NA
	7 HTL	7 HTL	100%	597	435	NA	NA			
2010	1 HT	2 HT	100%	446	478	33	22	Discontinued	NA	NA
	5 HTL	5 HTL	100%	461	432	NA	NA			
2011	9 HTL	9 HTL	100%	491	454	NA	NA	Discontinued	NA	NA
2012	11 HTL	12 HTL	82%	460	440	NA	NA	Discontinued	NA	NA
2013	12 HTL	12 HTL	100%	478	425	6	NA	Discontinued	NA	NA
2014	13 HTL	11 HTL	85%	527	426	7	NA	Discontinued	NA	NA
2015	14 HTL	11 HTL	79%	462	456	8	NA	Discontinued	NA	NA
2016	15 HTL	11 HTL	91%	485	446	8	NA	Discontinued	NA	NA

MD Anderson Fact Book Academic Year 2017 Section E: Academic Assessments

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

		ID ANDERSON m in Histotechno	ology	Progra	NATIONAL ms in Histotechn	nology	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
2005	3	3	100%	18	95	75%	3	100%	72	86%
2006	3 HT	3	100%	19	174	70%	3	100%	160	92%
	2 HTL	2	100%	NA	53	70%	2	100%	39	90%
2007	3 HT	3	100%	24	217	65%	Discontinued	NA	Discontinued	NA
	3 HTL	4	100%	NA	99	59%				
2008	2 HT	2	100%	28	264	75%	Discontinued	NA	Discontinued	NA
	4 HTL	4	100%	NA	95	63%				
2009	2 HT	2	100%	28	271	75%	Discontinued	NA	Discontinued	NA
	7 HTL	7	100%	NA	131	58%				
2010	1 HT	2	100%	33	312	73%	Discontinued	NA	Discontinued	NA
	5 HTL	5	100%	NA	101	70%				
2011	9 HTL	9	100%	NA	109	69%	Discontinued	NA	Discontinued	NA
2012	11 HTL	11	82%	NA	183	66%	Discontinued	NA	Discontinued	NA
2013	12 HTL	12	100%	NA	324	58%	Discontinued	NA	Discontinued	NA
2014	13 HTL	11	85%	7	426	65%	Discontinued	NA	Discontinued	NA
2015	14 HTL	11	79%	8	456	70%	Discontinued	NA	Discontinued	NA
2016	15 HTL	11	91%	8	320	73%	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 Number of Faculty/Lecturers Course/Rotation Evaluations		Number of Faculty/Lecturer Evaluations	Number of Total Evaluations	
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	
Fall 2016	92	58	1172	1576	2748	
Spring 2017	88	50	755	1232	2000	
Summer 2017	64	35	360	384	744	

E.3.2 School of Health Professions Surveys

SHP* Program Evaluation by Program and Year

FY	CLS	CGT	CT	DI	HT	MD	MGT	RT	DG	TOTALS
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 2017 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 2017 Section F: Administrative Reporting Measures

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

Performance Measure	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016
Total number of outpatient visits	1,281,489	1,338,706	1,363,008	1,440,684	1,404,329
Total number of inpatient days	196,180	207,555	202,636	202,483	198,080
Net revenue as a percent of gross revenues	52.39%	52.42%	51.32%	51.58%	49.73%
Net revenue per equivalent patient day	4,173.26	4,275.19	4,483.74	4,733.62	4,689.28
Operating expenses per equivalent patient day	3,598.85	3,735.14	3,776.00	3,837.72	4,269.33
Personnel expenses as a percent of operating expenses	59.38%	58.15%	58.08%	67.80%	57.03%
Total number of residents	149	168	166	169	156
Minority residents as a percent of total residents	9.40%	10.12%	7.23%	5.92%	8.97%
Percent of residency completers practicing in Texas	38.60%	49.10%	42.00%	38.00%	33.00%
Total gross patient charges for un-sponsored charity care provided in state facilities					
Total uncompensated charity care provided in state facilities (costs)	96,345,427	163,452,884	130,077,190	106,306,319	213,856,290
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	63,051,501	61,892,267	66,666,187	65,221,977	73,425,489
Administrative cost as a percent of total expenditures	7.47%	7.56%	7.72%	3.10%	2.87%
Outpatient-related charges as a percent of all charges by faculty	68.88%	70.01%	78.43%	71.57%	71.34%
Percent of charges to managed care contracts by faculty	52.83%	52.06%	57.87%	53.10%	53.55%
Total external research expenditures	365,961,389	373,522,114	406,622,738	447,077,363	451,384,835
External research expenditures as percent of total state appropriations	16.31%	15.30%	16.39%	17.06%	15.87%
External research expenditures as percent of state appropriations for research	220.01%	3463.31%	3241.21%	3254.59%	3598.02%
Value of lost or stolen property	62,370	85,593	260,000	203,169	204,118
Lost or stolen property as a percent of total inventoried property lost or stolen	0.02%	0.03%	0.11%	0.04%	0.06%
Allied health enrollment	316	291	318	317	339
Percent of allied health graduates passing the certification/licensure exam on the first attempt	94.00%	92.00%	90.00%	90.00%	90.00%
Percent of allied health graduates licensed or certified in Texas	86.00%	84.00%	90.00%	90.00%	90.00%
Graduate Training in Biomedical Sciences	421	384	384	350	309
MD Anderson students attending GSBS; from GSBS Data Tables					
Total Number of Post-doctoral Trainees	757	747	730	774	775
Number not reported to LBB; from MD Anderson Trainee Support Services					
Total Number of Research Trainees					
	1,714	1,743	1,853	1,890	1,847

^{*}Courtesy of Tomas Guajardo, Executive Director of State and System Reporting

MD Anderson Fact Book Academic Year 2017 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.

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

Data Source: Hospitals and clinics affiliated with, contracted with, or owned, operated, and funded by the healthrelated 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.

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)

Total Number of Inpatient Days

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Net Revenue as a Percent of Gross Revenues

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

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Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Net Revenue per Equivalent Patient Day

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

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

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Operating Expenses per Equivalent Patient Day

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

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New Measure: No.

Desired Performance: Higher than target.

Personnel Expenses as a Percent of Operating Expenses

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Total Number of MD or DO Residents

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

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Data Limitations: None.

Data Source: Institutional records.

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

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

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

Calculation Type: Non-cumulative.

New Measure: Yes.

Desired Performance: Higher than target.

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

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

Data Limitations: None.

Data Source: Institutional records.

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

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

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

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Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Percent of Medical Residency Completers Practicing in Texas

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

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

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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

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

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

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

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

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

Total Uncompensated Care Provided in State-owned Facilities

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

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

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: Yes.

Desired Performance: Higher than target.

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

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

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

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

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

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

Total Uncompensated Care Provided by Faculty

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

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

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

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

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

Reporting Period: This measure is reportable in November.

Calculation Type: Non-cumulative.

New Measure: Yes

Desired Performance: Higher than target.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: Yes.

Desired Performance: Higher than target.

Administrative Cost as Percent of Total Expenditures

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

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

Data Source: Institutional records and the Annual Financial Report.

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Lower than target.

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

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

Data Limitations: None.

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

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

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

Percent of Patient Charges to Managed Care Contracts by Faculty

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

Data Limitations: None.

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

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

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

Total External Research Expenditures

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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External Research Expenditures as Percent of Total State Appropriations

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

External Research Expenditures as a Percent of State Appropriations for Research

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Value of Lost or Stolen Property

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

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New Measure: No.

Desired Performance: Lower than target.

Percent of Property Lost or Stolen

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Lower than target.

Allied Health Enrollment

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

Data Limitations: None.

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

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

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

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

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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Percent of Allied Health Graduates Licensed or Certified in Texas

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

Data Limitations: None.

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

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

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

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

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

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

Percent Allied Health Passing Exam First Try:

The variance is due to students in two programs that did not score as high as in previous years due to changes in the testing form at and the degree of difficulty of test questions. An action plan has been implemented that will address this issue.

Percent Residents Completers Practicing in Texas:

The target established in 2014 was not reached due to the change in economic climate statewide. The actual target established in the 2026-2017 LAR was 35%. The institution is not a medical school, and as such does not have primary care residents.

Total Uncompensated Charity Care Provided by Faculty:

The variance resulted from the shift in the payer mix in FY 2016- with Medicare increasing about 2.6% compared to FY 2015.

Administrative Costs as a Percentage of Total Expenditures:

Institutional Support was allocated to Hospital & Clinics expenditures, consistent with the other UT HRIs. The result is a lower Adm Cost %.

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Total Uncompensated Charity Care Provided in State Facilities:

The FY 16 LAR project ions were provided based on historical data at that particular time and we conservatively projected only a 3.25% and 4.76% increase in Technical and Professional, respectively over the projected FY15 amounts. However, MDACC experienced a significant increase in the actual FY16 Uncompensated Care, Technical related as compared to the Technical related target FY16. Of the three areas comprising Technical related UCC. i.e. Medicare, Medicaid, and Indigent, the increase was mainly Medicare and due to an increase in mid-year FY16 cost report estimates, as well as an increase in the RCC, Ratio of Cost to Charges.

Total External Research Expenditure:

The institution has seen increased philanthropic donations for research over the past two years, resulting in increased expenditures. When the target for FY 2016 was calculated in FY 2014.the institution was unsure of the funding that would be coming in for CPRIT. In FY 2015, CPR IT funding was released and the institution saw an increase in expenses, creating a portion of the variance. There was a 28% increase in CPRIT expenses from FY 2014 to FY 20 15.

Total Number of MD or DO Residents: The total actual residents for 20 16 were below the target due to lack of funding. The MD Anderson Department of Clinical Education did not receive any additional funding to support new positions.

Total Number of Inpatient Days: The actual inpatient days were lower than the target due to a decline in clinical effort due to the implementation of a new electronic health record system.

Minority Residents as a percent of Total: Our projection was higher in prior years than the actual count. In our recruitment planning, we have increased our focus and outreach within the minority population. Although we did not see significant results, we are continuing our efforts.

Minority Residence as Percent of Total Residence: The percentage of minority resident s was lower than the target because the recruitment of and acceptance of offered positions by minority residents remained consistent with our previous recruiting and outreach efforts.

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

UT M.D. ANDERSON CANCER CENTER - Degrees and Certificates Awarded

Degrees and certificates awarded for students at public 4-year institutions. Percent change is from first to last year displayed.

	2015	2016	2017	Percent Change	
	Count	Count	Count	25/1007	
Total	136	148	154	13.2	
Certificate					
Associate					
Bachelor's	133	142	144	8.3	
Master's	3	6	10	233.3	
Doctoral Research Scholarship					
Doctoral Professional Practice					

UT M.D. ANDERSON CANCER CENTER - Degrees and Certificates Awarded (Economically Disadvantaged)

Economically disadvantaged undergraduates receiving a Certificate, Associate Degree or Bachelor's Degree. Percent change is from first to last year displayed.

	2015	2016	2017	Percent Change	
	Count	Count	Count		
Undergraduates Receiving an Award	81	91	75	-7.4 %	

UT M.D. ANDERSON CANCER CENTER - Fall Headcount

Fall headcount including dual credit students and not including fall flex students. Percent change is from first to last year displayed.

	2015	2016	2017	Percent Change	
	Count	Count	Count	Transition of the Control of the Con	
Total	320	339	357	11.6 %	
Male	108	104	106	0.0 %	
Female	214	235	251	17.3 %	
Total	320	339	357	11.6 %	
White	80	85	84	5.0 %	
African American	31	41	42	35.5 %	
Hispanic	93	96	108	16.1 %	
Asian	81	79	86	6.2 %	
International	27	27	25	-7.4 %	
Other	8	11	12	50.0 %	

UT M.D. ANDERSON CANCER CENTER - Completion by Selected Program Area

Completion by selected professional practice areas. Percent change is from first to last year displayed.

	2015	2016	2017	Percent Change
	Count	Count	Count	
Total				

Pharmacy		
Dental		
Medical		
Audiology		
Physical Therapy		
Nursing Practice		

UT M.D. ANDERSON CANCER CENTER - Working or Enrolled in Texas within One Year after Award

Students found working or enrolled in Texas within one year after earning a degree or certificate. Note that this measure was revised to match the 60x30TX state strategic plan. Percentage point change is from first to last year displayed.

	201	14	20	15	2016		Point Change
	Count	Percent	Count	Percent	Count	Percent	
Total	108	77.7 %	98	77.2 %	101	72.7 %	-5.0
Working Only	101	72.7 %	89	70.1 %	92	66.2 %	-6.5
Enrolled Only	2	1.4 %	5	3.9 %	3	2.2 %	0.8
Working and Enrolled	5	3.6 %	4	3.1 %	6	4.3 %	0.7

UT M.D. ANDERSON CANCER CENTER - Undergraduate Student Debt as Percentage of First Year Wage

Median of undergraduate student loan debt as a percentage of first year wage for graduates of Texas public institutions. Point change is from first to last year displayed.

	2013	2014	2015	Point Change	
	Pct	Pct	Pct		
Median	47.7 %	45.7 %	52.2 %	0.0444	

UT M.D. ANDERSON CANCER CENTER - Percent of Undergraduates Completing with Debt

Percent of undergraduate students earning an associate or bachelor's degree with student loan debt. Percentage point change is from first to last year displayed.

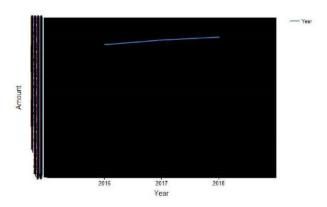
	A THE THE PARTY NAME AND ADDRESS OF				
	2015	2016	2017	Point Change	
	Pct Pct		Pct		
Associate				0.0	
Bachelor's	55.6 %	57.0 %	56.6 %	1.0	
Total	55.6 %	57.0 %	56.6 %	1.0	

UT M.D. ANDERSON CANCER CENTER - Tuition and Fees

Average cost of mandatory tuition and fees charged a student taking 30 semester credit hours. Percent change is from first year to last year displayed.

	2016	2017	2018
	Amount	Amount	Amount
Year	4,992	5,165	5,274

UT M.D. ANDERSON CANCER CENTER - Resident Physicians in Accredited



Programs

M.D. or D.O. filled positions in the Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency programs. Percent change is from first to last year displayed.

	2016	2017	2018	Percent Change
	Count	Count	Count	*
Funded ACGME/AOA Resident Physicians (Total for years 1-7)	141	135	151	7.1 %

UT M.D. ANDERSON CANCER CENTER - Physicians Practicing in Texas

Percentages of medical school graduates and residency completers practicing in Texas. Percent change is from first to last year displayed. State-level data not available for this measure.

	2015	2016	2017	Percent Change
	Pct	Pct	Pct	10000
% Medical School Graduates				
% Med Grads Entering Prim Care Res				
% of Med Residency Completers	38.0 %	33.0 %	29.0 %	-23.7

UT M.D. ANDERSON CANCER CENTER - Students Receiving Pell Grants

Fall undergraduate students receiving a Pell grant as reported in THECB's Financial Aid Database. Percentage point change is from first to last year displayed.

	20	2014		2015		2016	
	Count	Percent	Count	Percent	Count	Percent	
Pell	116	39.7 %	119	39.1 %	108	34.0 %	-5.7
No Pell	176	60.3 %	185	60.9 %	210	66.0 %	5.7

UT M.D. ANDERSON CANCER CENTER - Graduation Rates for Graduate Programs

Students in medical professional practice receiving a doctorate degree within five years. Percentage point change is from first to last year displayed.

2015	2016	2017	Point Change
------	------	------	-----------------

	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	
Pharmacy										
* Graduated with Doctorate										
* Did not graduate										
Dental										
* Graduated with Doctorate										
* Did not graduate										
Medical										
* Graduated with Doctorate										
* Did not graduate										

UT M.D. ANDERSON CANCER CENTER - Graduation Rates for Master's Programs

Master's students receiving a master's degree within five years. Percentage point change is from first to last year displayed.

		2015			2016			2017		Point
	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Change
Master's										
*	 									
Graduated with Master's										
* Did not graduate										

UT M.D. ANDERSON CANCER CENTER - Graduation Rates for Doctoral Programs

Doctoral students receiving a doctorate within ten years. Percentage point change is from first to last year displayed.

		2015			2016			2017		Point
	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Change
Doctoral										
* Graduated with Doctorate										
* Graduated with Master's										
* Did not graduate										

UT M.D. ANDERSON CANCER CENTER - Degrees Awarded by Level

	Associate	Bachelor's	Master's	Doctoral Research Scholarship	Doctoral Professional Practice
	Count	Count	Count	Count	Count
UT M.D. Anderson Cancer Center		141	:	3	

UT M.D. ANDERSON CANCER CENTER - Degrees Awarded by Ethnicity

Degrees awarded by ethnicity for out-of-state peer comparison. Percent change is from first to last year displayed.

	White	African American	Hispanic	Asian	International	Other
	Count	Count	Count	Count	Count	Count
UT M.D. Anderson Cancer Center	49	13	31	28	16	7

UT M.D. ANDERSON CANCER CENTER - Degrees by Gender

Degrees awarded by gender for out-of-state peer comparison. Percent change is from first to last year displayed.

	Male	Female
	Count	Count
UT M.D. Anderson Cancer Center	47	97

UT M.D. ANDERSON CANCER CENTER - Degrees for Medicine

Degree awarded in medicine for out-of-state peer comparison. Percent change is from first to last year displayed.

	2014 Count	2015 Count	2016 Count	Percent Change
UT M.D. Anderson Cancer Center				

UT M.D. ANDERSON CANCER CENTER - Certification and Licensure Pass Rates

State-level data not available for this measure. Percentage point change is from first to last year displayed.

	2015	2016	2017	Point Change
	Pct	Pct	Pct	
Nursing				0.0
Allied Health	90.0 %	90.0 %	90.0 %	0.0
Medical				0.0
Dental				0.0
Pharmacy				0.0

UT M.D. ANDERSON CANCER CENTER - Average Debt of Graduates with Loans

Each student's debt at time of receiving an applicable degree, based on the highest degree earned. Percent change from first year to last year displayed.

2015	2016	2017	Percent Change
Amount	Amount	Amount	

Same	\$29,288	\$28,185	\$30,103	2.8 %
Other	\$25,634	\$25,862	\$28,735	12.1 %
Total	\$27,164	\$26,809	\$29,394	8.2 %

UT M.D. ANDERSON CANCER CENTER - Tuition and Fees

Tuition and fees for out-of-state peer comparison. Percent change is from first year to last year displayed.

	2014	2015	2016	Percent Change	
	Amount	Amount	Amount	10 3200 W 200 305 W	
UT M.D. Anderson Cancer Center	\$5,600	\$5,337	\$5,658	1.0 %	

UT M.D. ANDERSON CANCER CENTER - Federal and Private Research Expenditures per Research FTE Faculty

Federal and private research expenditures divided by the number of fall tenured/tenure-track full-time-equivalent faculty (ranks 1-5) with research responsibilities. Percent change is from first to last year displayed.

	2015	2016	2017	Percent Change	
	Amount	Amount	Amount	***	
Federal and Private Research Expenditures per Research FTE faculty	\$713,700	\$702,658	\$816,278	14.4	

UT M.D. ANDERSON CANCER CENTER - Research Expenditures by Source of Funds

Total research expenditures by source of funds (federal, state, institutional, and private). Percent change is from first to last year displayed.

	2015	2016	2017	Percent Change	
	Amount	Amount	Amount		
Total	\$780,577,467	\$787,289,147	\$839,432,768	7.5 %	
Federal	\$161,170,909	\$155,043,500	\$166,551,539	3.3 %	
State Appropriations	\$244,315,827	\$248,300,750	\$255,960,301	4.8 %	
Institutional	\$121,601,653	\$128,116,128	\$98,048,243	-19.4 %	
Private	\$253,489,078	\$255,828,769	\$318,872,685	25.8 %	

UT M.D. ANDERSON CANCER CENTER - Faculty Headcount by Race/Ethnicity and Gender

Fall faculty by total, race/ethnicity and gender. Percent change is from first to last year displayed.

	201	2014 2015		2015 2016			2015		2016	
	Count	Percent	Count	Percent	Count	Percent	Change			
					-					
Total	2,235	100.0 %	2,322	100.0 %	2,353	100.0 %	5.3 %			
Male	1,378	61.7 %	1,400	60.3 %	1,432	60.9 %	3.9 %			
Female	857	38.3 %	922	39.7 %	921	39.1 %	7.5 %			
Total	2,235	100.0 %	2,322	100.0 %	2,353	100.0 %	5.3 %			
White	1,049	46.9 %	1,090	46.9 %	1,079	45.9 %	2.9 %			
African American	67	3.0 %	68	2.9 %	73	3.1 %	9.0 %			
Hispanic	135	6.0 %	132	5.7 %	151	6.4 %	11.9 %			
Asian	731	32.7 %	745	32.1 %	775	32.9 %	6.0 %			

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International	209	9.4 %	240	10.3 %	216	9.2 %	3.3 %
Other	44	2.0 %	47	2.0 %	59	2.5 %	34.1 %

UT M.D. ANDERSON CANCER CENTER - Total Uncompensated Care Provided by Faculty

The total dollar amount of uncompensated care provided through faculty physician practice plans (i.e. PRS, MSRDP, PIP). Percent change is from first to last year displayed.

	2015	2016	2017	Percent Change	
	Amount	Amount	Amount		
Total Uncompensated Care	\$65,221,977	\$65,221,977	\$76,907,485	17.9 %	

UT M.D. ANDERSON CANCER CENTER - Expenditures Per FTE Student

Expenditures per FTE student for out-of-state peer comparison.

	2014	2015	2016
	Amount	Amount	Amount
UT M.D. Anderson Cancer Center	\$36,474	\$41,580	\$18,657

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2017

F.6 Health Related Accountability Measures and Definitions

COMPLETION - KEY MEASURES

C01UH - Degrees and Certificates Awarded

Definition: Number of certificates, associate degrees, bachelor's (baccalaureate) degrees, master's degrees, doctoral degrees (doctoral research scholarship), and professional (doctoral professional practice)degrees awarded by Texas public institutions of higher education. Certificates are lower-level undergraduate certificates. Note that this

measure includes doctoral degrees (doctoral research scholarship) and professional (doctoral professional practice) degrees when reported for individual sectors; however, doctoral and professional degrees are not included for tracking progress toward the 60x30TX statewide completion

goal. Source: CMB009

C01UH- Degrees and Certificates Awarded (Econ Dis)

Definition: Number of undergraduates who received a certificate, associate degree, or bachelor's (baccalaureate) degree from a Texas public institution of higher education. Certificates are lower-level undergraduate certificates. Economically disadvantaged students are those receiving Pell at any time (from 1997 through the most current fiscal year data is available). Source: CMB009, Financial Aid Database System (FADS)

C04UHC - Enrollment

Definition: Number of students enrolled in fall at a Texas public

institution. Dual credit students are included (if dual credit is offered); flex entry students are not included.

Source: CBM001

C05H - Completion by Selected Program Area

Definition: Number of degrees for selected levels awarded by specialty, including Pharmacy, Dental, Medical, Audiology, Physical Therapy, and

Nursing Practice. Source: CMB009

COMPLETION - CONTEXTUAL MEASURES

C08UH - Students Receiving Pell Grants

Definition: Percentage and number of undergraduate students who received any amount of Pell Grant as reported in the THECB financial aid database (FADS). Matches the fall undergraduate enrollment by valid Social Security Number (SSN) to FADS and includes all students who received a Pell Grant at any time in the academic year. The percentage reported is the number of Pell grant students divided by the fall undergraduate enrollment. Source: CBM001, Financial Aid Database (FADS)

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The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2017

C13UH - Graduation Rates for Graduate Programs

Definition: The cohort was developed by pulling all of 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 does 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, CBM009, CBM00N

C99U - Out-of-State Peer Comparison

Definition: Comparison data for out-of-state peer measures. Source: IPEDS

MARKETABLE SKILLS - KEY MEASURES

M01A - Working or Enrolled within One Year

Definition: Number and percentage of students awarded a degree or certificate in a given year who are employed in the 4th quarter of the calendar year in which the program (fiscal) year ends or enrolled in a Texas public or private (independent) institution in the fall semester after receiving the award. Students are considered employed if they are reported in the Texas Unemployment Insurance (UI) or the U.S. Office of Personnel Management (OPM) wage records. Note that this measure was revised to match the 60x30TX state strategic plan; enrollment is no longer dependent on degree level. Source: CBM001, CBM009, Unemployment Insurance(UI) wage records, Office of Personnel Management (OPM) wage records

MARKETABLE SKILLS - CONTEXTUAL MEASURES

M02H - Certification and Licensure Pass Rates

Definition: Licensure/certification rate on state or national exams. 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. Calculated as 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 (LBB)

Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2017

STUDENT DEBT - KEY MEASURES

S01A - Student Debt as Percentage of Wage

Definition: Median of individual student loan debt as a percentage of first year wage for students awarded a certificate, associate degree, or bachelor's degree in a given year from a Texas public institution. Individual must have student loan debt at time of award and wages in first year following award. Each student's loan debt includes all loans reported in the THECB financial aid database (FADS) report by any institution for that student in the last 15 years. First year wages are based on UI wage data reported to the Texas Workforce Commission. Bachelor's degrees awarded at community colleges are not included. Source: CBM009, Unemployment Insurance (UI) wage records, Financial Aid Database System (FADS)

S02UH - Excess Semester Credit Hours

Definition: Average number of semester credit hours (SCH) attempted by graduates of bachelor's degree programs from a Texas public institution in excess of the degree plan. To determine SCH attempted, compile all college level semester credit hours a graduate attempted for up to 10 years prior to the time of college graduation. Developmental education SCH attempted and dual credit SCH attempted are not included. Two breakouts are also shown: average attempted SCH accumulated by graduates who began and graduated at the same institution and average attempted SCH accumulated among graduates who began at another public institution. Source: CBM001, CBM009, CBM00N

S03UH - Percent of Graduates with Debt

Definition: Percentage of students awarded an associate or bachelor's degree from a Texas public or private (independent) 4-year institution in a given year who have student loan debt. Each student's loan debt includes all loans reported in the THECB financial aid database (FADS) report by any institution for that student in the last 15 years. Source: CBM009, Financial Aid Database System (FADS)

S04UH - Tuition and Fees

Definition: Statutory tuition (state required tuition), designated tuition (set by institutional governing boards), and mandatory fees (charged to all students), for resident undergraduate students at 30 semester credit hours (SCH) for a fall and spring semester. Many institutions charge additional fees that vary by field of study and/or major. The actual cost for 30 SCH of tuition and fees may be higher for some students as only statutory tuition, designated tuition, and mandatory fees are included. Source: College Student Budget

STUDENT DEBT - CONTEXTUAL MEASURES

S06UCH - Average Debt of Graduates with Loans

Definition: Average debt is calculated by averaging each student's loan debt, accumulated at all Texas institutions up to the time of receiving an applicable degree, based on the student's highest degree earned. Only students with debt are included. Each student's loan debt includes all

MD Anderson Fact Book Academic Year 2017 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2017

loans reported in the THECB financial aid database (FADS) report by any institution for that student in the last 15 years, such as federal and state loans, parent Plus loans, and private educational loans. Two breakouts are also shown: average debt accumulated among graduates who began and graduated at the same institution and average debt accumulated among graduates who began at another public institution. Source: CBM001,CBM009, Financial Aid Database System (FADS)

S99U - Out-of-State Peer Comparison

Definition: Comparison data for out-of-state peer measures. Source: IPEDS

SECTOR-SPECIFIC/OTHER - KEY MEASURES

X01H - Residents in Accredited Programs

Definition: M.D. or D.O. filled positions at any level in 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

X02H - Physicians Practicing in Texas

Definition: Percentage of medical school graduates practicing in Texas

(LBB: I-5& H-2) are M.D. or D.O. graduates practicing medicine at a Texas address as of August 31 of the current calendar year. Percentage 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. Percentage 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; Legislative Budget Board (LBB)

SECTOR-SPECIFIC/OTHER - CONTEXTUAL MEASURES

X05H - Research Expenditures per FTE Faculty

Definition: Federal and private research expenditures divided by the number of fall tenured/tenure-track full-time-equivalent faculty (ranks 1-5) with research responsibilities. Source: Institutions' Annual Financial Reports. CBM008

X06UH - Research Expenditures by Source of Funds

Definition: Total research expenditures by source of funds (federal, state, private, and institutional). To qualify as research, the primary purpose of the contract, gift, or grant must be research. Source: Institutions' Annual Financial Reports

MD Anderson Fact Book Academic Year 201/ Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2017

X09H - Faculty Headcount

Definition: Number of faculty by total, race/ethnicity and gender.

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.

Source: CBM004, CBM008

X10H - Total Uncompensated Care 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. Uncompensated care definition provided by the Legislative Budget Board (LBB) (and located in Article III, Special

Provisions of the General Appropriations Act). The definition applies to all practice plans, including medical, dental, allied health, nursing, or other health care discipline. Source: Institutional data reported to the LBB

X99U - Out-of-State Peer Comparison

Definition: Comparison data for out-of-state peer measures. Source: IPEDS

G. Other MD Anderson Academic Programs



Making Cancer History®

G.1 MD Anderson Educational Trainees, 2015 - 2016

Clinical			
Audiology Fellow	2	Special Programs	
	274	Chaplaincy Fellows	4
HIM Students	2	Chaplaincy Interns	10
Medical Physics Fellows	3	Clinical Chemistry Fellow	1
•	10	Clinical Ethics Fellow	3
	17	Clinical Ethics Interns	3
Physician Assistant Fellows & Residents	4	Dietetic Interns	3
Psychology Fellows	3	Hospital Administration Fellows	6
Radiation Physics Proton Therapy Fellows	2	Social Work Interns	7
	25	Veterinary Residents	6
Rotating Affiliated Pharm Tr	23	Veterinary Residents Veterinary Students	13
	214	Subtotal	56
8		Subtotal	50
Rotating Fellow Research	4	Observers	
2	310	Observers	474
Rotating Pharmacy Residents	6	STEP Observers	308
Rotating Psychology Fellow	2	Subtotal	782
\mathcal{C}	47	Student Programs	
\mathcal{C}	64	College Students	420
Rotating Veterinary Residents	2	Genetics Counseling Students	8
Subtotal 1,6	593	High School Students	135
		Pharmacy Students	56
Research		Physical/Occupational Therapy Students	26
Business Administrative Intern	1	Physician Assistant Students	49
Graduate Research Assistants-GSBS 3	304	Psychology Graduate Students	6
Graduate Research Assistants-UTHSCH 1	.11	Rotating Medical Student Research	1
Graduate Student-non-UTHSCH 2	243		2
MD/PhD Student – GSBS	3	Speech Pathology Students	
Odyssey Fellows	19	Technology Students	107
	75	Subtotal	810
Research Interns 1	.77	Nursing Programs*	
	.83	Nursing Outreach Education**	0
Rosalie B. Hite Graduate Research Assts.	4	Academic Undergraduate	933
Visiting Postdoctoral Fellows	9	Academic Graduate Students	
	18	Academic Oraduate Students Academic Doctoral Students	296
Subtotal 1,8			33
Subtotui 1,0)-T <i>1</i>	Academic High School	133
School of Health Professions**		Professional Student Nurse Externs	72
	30	Professional Student Nurse Externs -	22
•	25	Summer	32
, ,	13	PEPED ***	0
,		Subtotal	1,499
2 2	92	TOTAL	7.004
2,	27		•
	38	* Annual metrics are provided by the Div.	
Molecular Genetic Technology Students		** Nursing Outreach Education program i	s no longer in
<u>c</u>	47	place.	
1.0	45	*** PEPED program ended subsequent to	$completion\ of$
Subtotal 3	317	CPRIT grant funding, August 2012	

Source: Trainee & Alumni Affairs

MD Anderson Fact Book Academic Year 2017 Section G: Other MD Anderson Academic Programs

G.2 Trainee Demographics by Group, 2015 - 2016

Demographic	Clinical Resident	s & Fel	llows	Postdoctoral l	Fellows	*	GSBS	5	
Profile	Description	N	Percent	Description	N	Percent	Description	N	Percent
Number of Trainees	Total Population	299		Total Population	794		Total Population	309	
Number of Programs Served	Total Programs	66		Total Programs	61		Total Programs	51	
Ethnicity	White, Non-Hispanic Asian	130 76	43% 25%	Foreign White, Non-Hispanic	615 94	77% 12%	White, Non-Hispanic Foreign	128 118	41% 38%
	Foreign Hispanic	68 12	23%	Asian Hispanic	56 22	7% 3%	Hispanic Asian	30 23	10% 7%
	Black, Non-Hispanic	11	4%	Black, Non-Hispanic	7	1%	Black, Non-Hispanic	7	2%
	2+race	2	1%	Pacific Islander	0	0%	American Indian Alaskan Native	2	1%
	Pacific Islander	0	0%	2+race	0	0%	2+race	1	0%
Gender	Male	164	55%	Male	438	55%	Male	139	45%
	Female	135	45%	Female	356	45%	Female	170	55%
Average Age						1 1 1	N		

^{*}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, 2015 – 2016

G.5 Trainee Country of Origin & visa Types, 2015 – 2010									
	Clinical Residents	& Fel	lows	Postdoctora	l Fello	ws*	GSI	BS	
Demographic Profile	Country/Visa	N	Percent	Country/Visa	N	Percent	Country/Visa	N	Percent
Top 5 Countries	USA	195	65%	China	254	32%	USA	178	58%
of Origin	India	20	7%	USA	113	14%	China	39	13%
	Canada	10	3%	India	83	10%	India	34	11%
	China	9	3%	South Korea	59	7%	Taiwan	15	5%
	Egypt, Japan and Lebanon	6	2%	Japan	28	4%	South Korea	8	3%
Citizenships and	US Citizen	195	65%	US Citizen	113	50%	US Citizen	178	58%
Most Frequent Visa Types	US Permanent Resident	36	12%	H1-B	123	15%	US Permanent Resident	13	4%
	H1-B	16	5%	F1	67	8%	F-1	113	37%
	J-1	49	16%	J-1	398	14%	J-1	3	1%

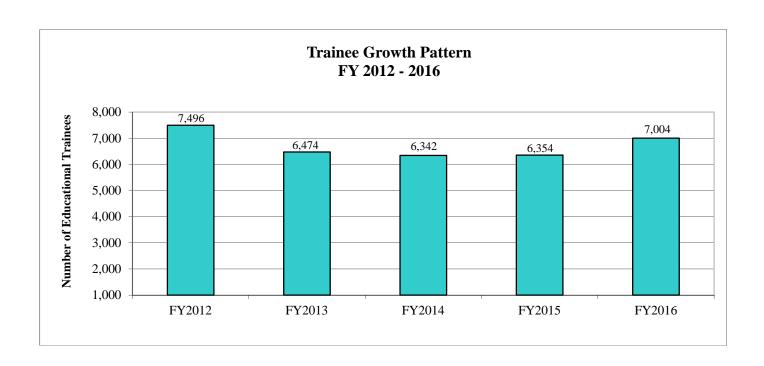
^{*}Postdoctoral Fellows include Postdoctoral Fellows, Odyssey Fellows, Odyssey Scholars and Veterinary Fellows. Total head count may not be equal to the total number of postdoctoral on this report because some trainees had more than one title during this reporting period.

Source: Trainee & Alumni Affairs

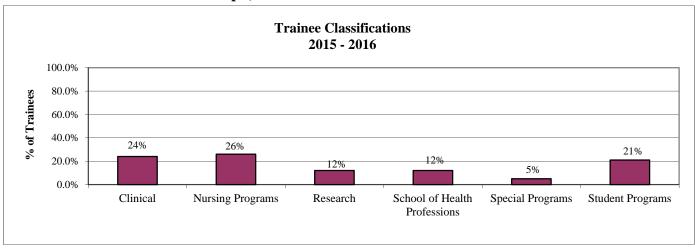
G.4 Five Year Trainee Growth Pattern, FY 2012 – FY 2016

	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	Percent of Growth 2012 - 2016
Clinian	1 107	1 221	1 276	1 226	1 602	270/
Clinical	1,187	1,231	1,276	1,236	1,693	37%
Research	1,714	1,743	1,854	1,890	1,847	-2%
Special Programs						
&Observers	431	507	452	489	838	71%
Student Programs	1,317	1,396	1,204	1,084	810	-25%
School of Health Professions	316	291	318	303	317	5%
Nursing Students/Rotations	2,531	1,306	1,238	1,352	1,499	11%
Grand Total	7,496	6,474	6,342	6,354	7,004	10%
Grand Total (excluding Nursing)	4,965	5,168	5,104	5,002	5,505	10%

Source: Trainee & Alumni Affairs



G.5 Trainee Classifications Graph, 2015 – 2016



Source: Trainee & Alumni Affairs

G.6 Summary of Internal Awards, 2015 - 2016

Type of Award	Number Awarded	Total Funding Awarded
One-time Trainee Cash Award - Bioinformatics and Computational Biology	1	\$3,000.00
One-time Trainee Cash Award - Biostatistics	1	\$3,000.00
One-time Trainee Cash Award - Cancer Biology	1	\$1,500.00
One-time Trainee Cash Award - Cancer Biology	1	\$8,841.00
One-time Trainee Cash Award - Cancer Biology	2	\$20,000.00
One-time Trainee Cash Award - Cardiology	1	\$500.00
One-time Trainee Cash Award - Cardiology/Cardiology Fellowship Program	1	\$500.00
One-time Trainee Cash Award - Computational Biology	1	\$10,000.00
One-time Trainee Cash Award - Development Office	2	\$2,700.00
One-time Trainee Cash Award - Epigenetics & Molecular Carcinogenesis	6	\$6,000.00
One-time Trainee Cash Award - Epigenetics & Molecular Carcinogenesis	1	\$3,000.00
One-time Trainee Cash Award - Epigenetics & Molecular Carcinogenesis	1	\$4,000.00
One-time Trainee Cash Award - Experimental Radiation Oncology	1	\$1,444.00
One-time Trainee Cash Award - Experimental Radiation Oncology	1	\$5,000.00
One-time Trainee Cash Award - Experimental Therapeutics	1	\$1,800.00
One-time Trainee Cash Award - Gastroenterology, Hepatology & Nutrition	1	\$750.00
One-time Trainee Cash Award - Genetics	1	\$829.00
One-time Trainee Cash Award - Genetics	1	\$1,500.00
One-time Trainee Cash Award - Genetics	1	\$2,875.14
One-time Trainee Cash Award - Genitourinary Medical Oncology	1	\$6,500.00
One-time Trainee Cash Award - Head and Neck Surgery	12	\$12,000.00
One-time Trainee Cash Award - Health Services Research	1	\$500.00
One-time Trainee Cash Award - Hematopathology	1	\$1,500.00
One-time Trainee Cash Award - Imaging Physics	1	\$2,000.00
One-time Trainee Cash Award - Infectious Disease	3	\$9,090.90
One-time Trainee Cash Award - Interventional Radiology	1	\$2,000.00
One-time Trainee Cash Award - Leukemia	1	\$1,000.00
One-time Trainee Cash Award - Radiation Physics	1	\$6,000.00
One-time Trainee Cash Award - Surgical Oncology	1	\$9,999.00
One-time Trainee Cash Award - Translational Molecular Patholgy	1	\$840.00
Postdoctoral Endowed Fellowship Award - Anne Eastland Spears Fellowship in GI Cancer Research	1	\$3,000.00
Postdoctoral Endowed Fellowship Award - Ben Love Fellowship in Innovative Cancer	3	\$7,500.00
Postdoctoral Endowed Fellowship Award - Harold C. and Mary L. Daily Endowment Fellowships	5	\$25,000.00
Postdoctoral Endowed Fellowship Award - Sheskey Family Fellowship in Breast Cancer Research	1	\$2,500.00
Postdoctoral Endowed Fellowship Award - The Diane Denson Tobola Fellowship in Ovarian Cancer Res.	5	\$25,000.00
Postdoctoral Endowed Fellowship Award - The Jeffrey Lee Cousins Fellowship in Lung Cancer Research	2	\$6,000.00
Postdoctoral Endowed Fellowship Award - The Kimberly Patterson Fellowship in Leukemia Research	1	\$4,000.00
Postdoctoral Endowed Fellowship Award - The Lupe C. Garcia Fellowship in Cancer Research	3	\$9,000.00
Postdoctoral Endowed Fellowship Award - Thomas H. and Mayme P. Scott Fellowship in Cancer Res.	2	\$6,000.00
Trainee Research Day Award - Amgen	1	\$500.00
Trainee Research Day Award - Amgen	1	\$700.00
Trainee Research Day Award - Amgen	1	\$1,000.00
Trainee Research Day Award - Bayer Healthcare Pharmaceuticals, Inc.	2	\$1,000.00
Trainee Research Day Award - Bayer Healthcare Pharmaceuticals, Inc.	2	\$1,400.00
Trainee Research Day Award - Bayer Healthcare Pharmaceuticals, Inc.	2	\$2,000.00
Trainee Research Day Award - Bristol-Meyers Squibb	1	\$500.00
Trainee Research Day Award - Bristol-Meyers Squibb	1	\$700.00
Trainee Research Day Award - Bristol-Meyers Squibb	1	\$1,000.00
TOTAL	85	\$225,469.04

Source: Trainee & Alumni Affairs