The University of Texas MD Anderson Cancer Center Fact Book 2018

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



Making Cancer History®

Acknowledgements

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MD Anderson Academic Operations:

Maureen Cagley, Senior Vice President, Academic Operations

School of Health Professions

Peter Hu, Ph.D., William Undie, Ed.D, Co-Deans
Brandy Greenhill, Clinical Laboratory Sciences, Program Director
Jun Gu, Cytogenetic Technology, Program Director
Liza Di Filippo, Cytotechnology, Program Director
William Undie, Diagnostic Imaging/Diagnostic Sonography/Radiological Sciences Program
Director
Mark Bailey, Histotechnology, Program Director
Mahsa Dehghanpour, Medical Dosimetry, Program Director
Peter Hu, Molecular Genetics Technology/Diagnostics Genetics, Program Director
Shaun Caldwell, Radiation Therapy, Health Care Disparities, Diversity and Advocacy
Program Director
Angela Adcox, Office Manager

Academic and Visa Administration Department Dana Kurtin, Associate Vice President Asha Varghese, Senior Applications Systems Analyst

- MD Anderson Office of the Chief Financial Officer Tomas Guajardo, Executive Director, State & System Reporting
- MD Anderson Business Analytics, William W. Cruz, Project Manager, Finance

University of Texas MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences Dean's Office

Nguyen Cao, Senior Analyst, Data Management

University of Texas Health Science Center – Houston Office of the Registrar *Robert Jenkins, Director*

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If you would like more information about data contained in the Fact Book, please contact: Dr. Jorge Herskovic, Director: (713) 745-7294; email: jrherskovic@mdanderson.org Jaime Garcia, Senior Metrics Analyst: (713) 563-6033; email: jrgarcia2@mdanderson.org

Table of Contents

Se	ction	Page
A.	About MD Anderson Cancer Center	A - 1
	The University of Texas MD Anderson Mission Statement	A - 2
	The University of Texas MD Anderson Strategic Plan	A - 2
	About The University of Texas MD Anderson Cancer Center	A - 3
	The University of Texas MD Anderson Cancer Center Addresses	A - 5
	The University of Texas MD Anderson Cancer Center Organizational Chart	A - 6
	The University of Texas MD Anderson Cancer Center Executive Leadership	A - 7
	The University of Texas System Board of Regents	A - 8
	The University of Texas System Executive Offices	A - 9
	The University of Texas MD Anderson Cancer Center Board of Visitors	A - 9
	The University of Texas MD Anderson Cancer Center Institutes	A - 10
	The University of Texas MD Anderson Cancer Center Core Facilities:	
	CCSG Shared Resources	A - 11
	A.1 Top Ten Newly Diagnosed Cancers at UT MD Anderson Cancer	
	Center	A - 16
	A.2 Origin Mix of Patients Served	A - 16
	A.3 Institutional Statistics, Current Year to Date, Prior Fiscal Years	A - 17
	A.4 MD Anderson Work Report	A - 18
B.	Student Information	B - 1
	B.1 SHP Applied, Admitted and Enrolled Data by Program	В-2
	B.2 SHP Students by Mean Age and Level	В-3
	B.3 SHP Students by Gender and Ethnicity	B - 4
	B.4 SHP Students by Ethnicity	В-5
	B.5 SHP Students by Gender	B - 6
	B.6 SHP Students by Residency - International and Out of State	B - 7
	B.7 SHP Students by Residency - Texas County	B - 11
	B.8 SHP Students by Residency Type	B - 14
	B.9 University of Texas MD Anderson Cancer Center and UTHealth	
	Graduate School of Biomedical Sciences (GSBS) Applications,	
	Accepted, and Admitted, by Program and Year	B - 15
	B.10 GSBS Students by Ethnicity	B - 16
	B.11 GSBS Students by Gender	B - 17
	B.12 GSBS Students by Age Range	B - 18
	B.13 GSBS Students by Residency Type	B - 19

Table of Contents Continued

Se	ction	Page
C.	Degrees	C - 1
	Exhibit C.1 Degrees Offered at The University of Texas MD Anderson	
	Cancer Center	C - 2
	University of Texas MD Anderson Cancer Center Accreditation	C - 3
	University of Texas Health Science Center at Houston Accreditation	C - 3
	C.1 SHP Degrees by Level	C - 4
	C.2 SHP Degrees Awarded by Type	C - 5
	C.3 SHP Degrees by Program	C - 6
	C.4 SHP Degrees by Program and Average Age	C - 7
	C.5 SHP Degrees by Program, Ethnicity, and Gender	C - 8
	C.6 SHP Total Degrees by Level, Ethnicity, and Gender	C - 21
	C.7 SHP Graduates by Gender and Ethnicity	C - 22
	C.8 SHP Graduates by Ethnicity	C - 23
	C.9 SHP Graduates by Gender	C - 24
	C.10 GSBS Degrees Awarded	C - 25
	C.11 GSBS Graduates by Area of Research Concentration	C - 26
	C.12 GSBS M.S. Program Top Areas of Research Concentration	C - 27
	C.13 GSBS Ph.D. Program Top Areas of Research Concentration	C - 27
	C.14 GSBS Graduates by Ethnicity	C - 28
	C.15 GSBS Graduates by Gender	C - 29
D.	Faculty Demographics	D - 1
	D.1 SHP Faculty by Rank and Mean Age	D - 2
	D.2 SHP Faculty by Age Range	D - 3
	D.3 MD Anderson Faculty by Rank and Mean Age	D - 4
	D.4 MD Anderson Faculty by Age Range	D - 5
	D.5 SHP Faculty by Ethnicity and Gender	D - 6
	D.6 MD Anderson Faculty by Ethnicity and Gender	D - 7
	D.7 SHP Faculty by Ethnicity	D - 8
	D.8 MD Anderson Faculty by Ethnicity	D - 9
	D.9 SHP Faculty by Gender	D - 10
	D.10 MD Anderson Faculty by Gender	D - 11
	D.11 SHP Faculty by Rank	D - 12
	D.12 MD Anderson Faculty by Rank	D - 13
	D.13 SHP Mean Faculty Salaries by Rank	D - 14
	D.14 MD Anderson Mean Faculty Salaries by Rank	D - 14
	D.15 SHP Faculty Salaries by Source of Funds	D - 15
	D.16 MD Anderson Faculty Salaries by Source of Funds	D - 16
	D.17 MD Anderson American Association for Advancement of Science	
	Fellows Appointments Awards	D - 17

Table of Contents

Continued

Se	ction		Page
E.	Academ	ic Assessments	E - 1
-		Accreditation Status	E - 2
		E.1.1 SHP Program Accreditation Schedule	E - 2
		E.1.2 GSBS Program Accreditation Schedule	E - 2
		E.1.3 Accredited Medical Programs Schedule	E - 3
		E.1.4 Texas Medical Board Approved Programs	E - 4
	E.2	Results of Selected National Certification Exams	E - 6
		E.2.1 Program in Clinical Laboratory Sciences	E - 6
		E.2.2 Cytogenetic Technology Program	E - 6
		E.2.3 Program in Histotechnology	E - 7
	E.3	Summary of Surveys	E - 9
		E.3.1 Summary of SHP Course/Rotation, Faculty, and Lecturer	
		Evaluations	E - 9
F.		trative and Academic Reporting Measures bry of the State of Texas Strategic Planning Process	F - 1 F - 2
	F.1	MD Anderson Performance Measures Reported to the Legislative	
		Budget Board	F - 3
	F.2	Health Related Institutions Performance Measures Definitions	F - 4
	F.3	Definitions of Performance Measures Not Submitted to the Legislative	
		Budget Board	F - 22
	F.4	Explanation for Significant Variances in Legislative Budget Board	
		Measures	F - 22
	F.5	MD Anderson Accountability Report	F - 24
	F.6	Health-Related Accountability Measures and Definitions	F - 33
G.	Other M	ID Anderson Academic Programs	G - 1
	G.1	MD Anderson Educational Trainees	G - 2
	G.2	Trainee Demographics by Group	G - 3
	G.3	Trainee Country of Origin & Visa Types	G - 3
	G.4	Five Year Trainee Growth Pattern	G - 4
	G.5	Trainee Classifications Graph	G - 5
	G.6	Summary of Internal Awards	G - 6

Summary of Internal Awards G.6

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, 1.4 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 146,600 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 about 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 10,000 participants enrolled in 1,250-plus clinical trials exploring innovative treatments. MD Anderson provided more than \$170 million in uncompensated care to Texans with cancer in FY18. 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.

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 2018, MD Anderson had 1,252 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 2018, MD Anderson's total research expenditure was \$862 million, including over \$84 million in state funding, approximately \$171 million from philanthropy and foundations, and over \$173 million in federal research funding. MD Anderson's Moon Shots Program started in 2012 is a collaborative effort to more quickly turn scientific discoveries into clinical advances that save patients' lives. The program has yielded notable discoveries across the spectrum of cancer care, including prevention, early detection and treatment. The program's 13 Moon ShotsTM are disease-focused initiatives targeting 20 types of cancer. The Moon Shots Program also established 10 platforms that provide unique expertise, technical capabilities and novel infrastructure to support the program's team-science approach.

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 155 students in 2017 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 20,000 people and enjoys a volunteer workforce of over 1,000 on-site, trained volunteers and over 2,000 off site myCancerConnection trained survivor volunteers contributed over 117,000 hours of service in FY18. 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

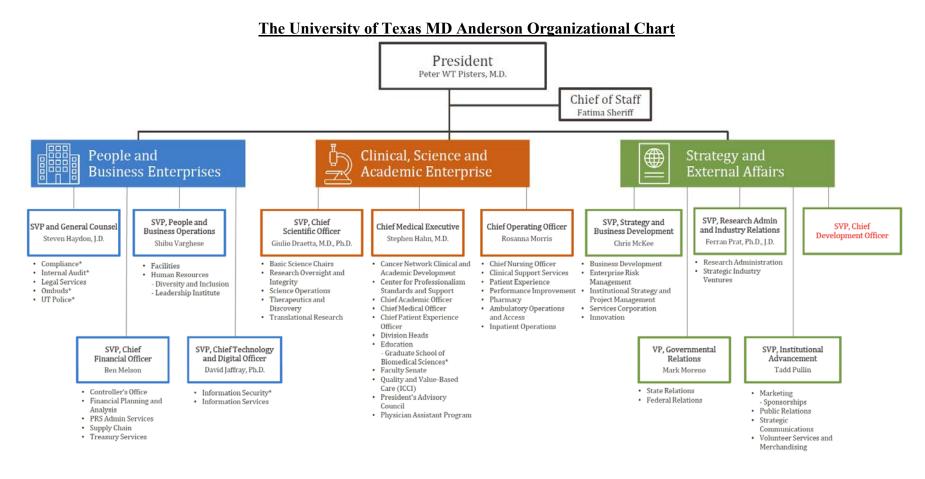
University of Texas MD Anderson Cancer Center Office of the Executive Vice President & Provost 1515 Holcombe Blvd. Unit 113 Houston, Texas 77030

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



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

5/21/2019

The University of Texas MD Anderson Cancer Center Executive Leadership Team

Name	Title
Peter WT Pisters, M.D.	President
Stephen Hahn, M.D.	Chief Medical Executive
Steven Haydon, J.D.	Senior Vice President, Regulatory Affairs
Christopher McKee	Senior Vice President, Strategy and Business Development
Ben Melson	Senior Vice President, Chief Financial Officer
Mark Moreno	Vice President, Governmental Relations
Ferran Prat, Ph.D, J.D.	Senior Vice President, Strategic Industry Ventures
Tadd Pullin	Senior Vice President, Institutional Advancement
Fatima Sheriff	Chief of Staff, Office of the President
Shibu Varghese	Senior Vice President, People and Business Operations

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

Kevin P. Eltife, Chairman Janiece Longoria , Vice Chairman Regent James C. "Rad" Weaver, Vice Chairman

Members

Term Expires May 2019 Student Regent Brittany E. Jewell

Terms Expire February 2021 Regent David J. Beck Regent R. Steven Hicks Regent Nolan Perez

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

> Terms Expire February 2025 Regent Christina Melton Crain Regent Jodie Lee Jiles Regent Kelcy L. Warren

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

Office	Name	Position
Office of the Chancellor	James B. Milliken	Chancellor
Office of Academic Affairs	Steven Leslie	Executive Vice Chancellor for Academic Affairs
Office of Health Affairs	Amy Shaw Thomas	Executive Vice Chancellor for Health Affairs ad Interim
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	Stacy Napier	Vice Chancellor and Chief
Relations		Governmental Relations Officer
Office of External Relations	Randa S. Safady, Ph.D.	Vice Chancellor for External
	-	Relations, Communications, and
		Advancement Services
Office of Institutional Research	Stephanie A. Bond Huie, Ph.D.	Vice Chancellor for Institutional
and Analysis		Research and Analysis

The University of Texas System Executive Offices

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 Cancer Center Institutes

Multidisciplinary Care Centers

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

Centers of Excellence

Basic Sciences

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

Duncan Family Institute

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

Advanced Technology Genomics Core

The Advanced Technology Genomics Core is the primary, "one-stop" genomics core facility for researchers at MD Anderson Cancer Center. Its goal is to use state-of-the-art instrumentation and innovative technical expertise in order to provide investigators with the highest quality genomic data from a comprehensive range of genomic services in a timely manner. Such a centralized facility minimizes duplication of expensive equipment and facilitates continued technical excellence.

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 \geq 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.

*Source: CCSG Shared Resources Website

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.

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.

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 Genomics Core

Functional Genomics aims to study the complicated interactions between genotype and phenotype at a genomewide scale. Genome-scale gain- and loss-of-function genetic screens are important approaches to conduct such studies. ShRNA knockdown and ectopic gene expression are important techniques to carry out loss- and gain-offunction experiments for biomedical research.

Functional Proteomics Reverse Phase Protein Array Core

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

Genetically Engineered Mouse Facility

The purpose of the MD Anderson Genetically Engineered Mouse Facility (GEMF) is to provide technologically advanced and efficient mouse mutation resources to faculty members at the institution. Functional Genomics aims to study the complicated interactions between genotype and phenotype at a genome-wide scale. Genome-scale gain- and loss-of-function genetic screens are important approaches to conduct such studies. ShRNA knockdown and ectopic gene expression are important techniques to carry out loss- and gain-of-function experiments for biomedical research.

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.

Institutional Tissue Bank

The Institutional Tissue Bank (ITB) at MD Anderson is a CLIA-certified research specimen repository developed for the purpose of collection, processing, storage and distribution of patient tissue samples, fluids, and related clinical data across the MD Anderson research investigators and on behalf of the institutional protocols.

Laboratory Animal Genetic Services

Laboratory Animal Genetic Services (LAGS), supported by the institutional Cancer Center Support Grant (P30 CA16672), provides 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, and genetic quality control for mice and rats. PCR testing for infectious diseases of laboratory mice and rats is also provided, as is general consultation on the genetics of mice and rats.

Metabolomics Facility

The Metabolomics Facility at MD Anderson provides state-of-the-art mass spectrometry analysis of metabolites for basic and clinical cancer research. We offer our services to both MD Anderson and external investigators.

Microbiome Facility

The mission of the Microbiome Core Facility is to support the research at MD Anderson Cancer Center by providing high quality of sequencing technologies to profile microbiota for microbiome studies.

Monoclonal Antibody Core Facility

The Monoclonal Antibody Facility (MAF) provides newly generated custom monoclonal antibodies and purification from user's or commercially available hybridomas, plus additional services to researchers at MD Anderson and beyond.

ORION

The purpose of our core is to provide state-of-the-art immunoprofiling services to MDACC investigators as well as local investigators. Our services range from single service instrument use to entire project design and analysis. Researchers and Investigators will need to provide the samples for analysis. Samples can be stored short-term prior to assessment.

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.

Research Histopathology Core Facility

The Research Histology Core Laboratory (RHCL) provides histological and molecular expertise, technical support and consultation to research investigators, which in turn produces positive outcomes for their research protocols. The purpose of the RHCL is to allow researchers to concentrate their grant funds to their protocols, without the expense of hiring technical personnel or buying costly instrumentation. The services offered are all routine histology procedures along with some specialty services that include alcohol fixation, RNASE and DNASE preparation and sectioning, cell pellets and special stains.

Shared Decision Making Core

The Shared Decision Making Core (SDM Core) provides researchers with access to decision science expertise and state-of-the-art methods necessary to develop, evaluate, and disseminate SDM interventions to enhance the quality of cancer care delivery at MD Anderson and its partner institutions.

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.

		% of All Cance	ers - All Ages, Rac	es, and Regions	
Top Ten Newly Diagnosed Cancer Cases	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017
Breast	15.20%	16.52%	16.09%	15.40%	14.18%
Lung & Bronchus	9.50%	9.44%	9.70%	6.43%	7.13%
Prostate	8.60%	8.14%	8.42%	7.19%	7.16%
Melanomas of the Skin	5.40%	4.76%	5.30%	4.27%	3.98%
Leukemia	4.60%	4.78%	4.47%	3.90%	4.03%
Non-Hodgkin's Lymphoma	4.90%	4.60%	5.03%	4.32%	4.49%
Colon & Rectum	6.20%	5.97%	6.11%	5.81%	6.47%
Oral Cavity & Pharynx	4.30%	4.01%	4.32%	3.26%	3.33%
Kidney & Renal Pelvis	3.60%	4.26%	3.88%	2.73%	2.66%
Brain & Other Nervous System	2.60%	2.94%	2.74%	3.51%	3.64%
Pancreas	3.30%	3.29%	3.05%	N/A	N/A

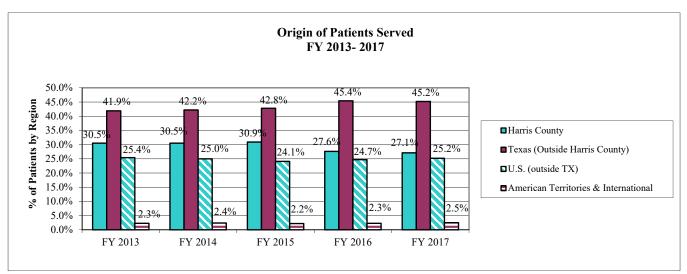
A.1 Top Ten Newly Diagnosed Cancers at MD Anderson Cancer Center, FY 2013 – FY 2017*

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

A.2 Origin Mix of Total Patients Served, FY 2013 – FY 2017*

		% of Patients Served by Region										
Regions	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017							
Harris County	30.5%	30.5%	30.9%	27.6%	27.1%							
Texas (outside of Harris County)	41.9%	42.2%	42.8%	45.4%	45.2%							
U.S. (outside of Texas)	25.4%	25.0%	24.1%	24.7%	25.2%							
American Territories & International	2.3%	2.4%	2.2%	2.3%	2.5%							

*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*

CEO II				[
CFO - Hyperion,						
Statement of Operations	FY18	EV17	FY16	FY15	FY14	EV12
Total Operating	FY18	FY17	F Y 10	FTIS	FY14	FY13
Revenue	5,225,221,554	4,999,342,760	4,480,444,361	4,495,768,037	4,412,923,943	4,135,238,891
Total Operating	3,223,221,334	4,999,342,700	4,480,444,501	4,495,708,057	4,412,925,945	4,155,258,891
Expense	4,438,334,915	4,299,888,209	4,272,911,647	3,928,889,508	3,683,180,248	3,589,179,436
Total Margin	4,438,554,915	4,299,000,209	4,2/2,911,04/	5,928,889,508	5,065,160,246	5,569,179,450
Contributed to Capital						
Plan	786,886,639	699,454,551	207,532,714	566,878,529	729,743,695	\$546,059,455
CFO- Hyperion,	700,000,000	077,101,001	207,552,711	500,070,525	729,713,095	\$510,059,155
Operating Statistics	FY18	FY17	FY16	FY15	FY14	FY13
Admissions	29,118	28,793	27,391	28,167	27,761	27,905
Patient Days	207,071	202,411	198,080	202,483	202,636	202,553
Average Daily Census	587	577	,	574	571	569
6		5//	561	5/4	5/1	309
Average Occupancy Rate	87%	85%	85%	86%	87%	90%
Average # of Operating	0/70	0.370	0.570	0070	0770	9070
Beds	673	681	661	665	654	656
Average Length of Stay	7.1	7.0	7.2	7.2	7.3	7.3
Outpatient Billable	/.1	/.0	1.2	1.2	1.5	1.5
Visits	1,458,076	1,441,403	1,404,329	1,440,684	1,363,008	1,338,706
CFO- Hyperion,	1,438,070	1,441,403	1,404,323	1,440,084	1,505,008	1,558,700
Operating Statistics	YTD FY18	FY17	FY16	FY15	FY14	FY13
Total Surgeries	22,267	21,913	21,108	21,835	19,828	21,056
Surgery Hours	71,462	· · ·		,	69,506	
CFO- Hyperion,	/1,402	70,459	67,936	69,987	09,300	70,221
Operating Statistics	YTD FY18	FY17	FY16	FY15	FY14	FY13
Lab Med / Pathology	11D1110	ΓΙΙ/	F I 10	F115	Г I I4	F115
Billed Procedures	13,280,436	12,700,333	12,073,679	12,334,917	12,005,766	11,718,405
Diagnostic Imaging	13,200,430	12,700,555	12,075,077	12,554,717	12,005,700	11,710,405
Billed Procedures	611,190	574,018	524,044	530,590	523,297	501,887
Radiation Oncology	011,190	571,010	021,011			201,007
Billed Procedures	266,619	228,974	207,425	254,361	283,536	284,740
Stem Cell Transplants	770	735	732	857	847	815
Public Affairs	YTD FY18	FY17	FY16	FY15	FY14	FY13
Volunteer Hours	117,993	122,637	121,356	145,452	164,970	193,921
	,	,	· · · · · · · · · · · · · · · · · · ·	,	· · · · ·	· · · · ·
Internet Services Visits:	YTD FY18	FY17	FY16	FY15	FY14	FY13
v 1sits: www.mdanderson.org	12 022 429	12 522 707	15 125 175	17 042 052	12 022 092	11 200 279
Www.mdanderson.org Visits:	12,933,438	12,532,707	15,135,175	17,043,853	12,023,983	11,299,378
insida mdandarsan ara	12 127 240	12 220 100	12 266 165	12 727 492	12 272 120	12 272 120
inside.mdanderson.org	13,137,349	12,228,498	13,366,165	12,737,482	12,273,139	12,273,139

*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 2018

	Total	Change		Change		nange Full-Time Ch		nge	Total Full-	Change		Total Part-	Change	
MONTH	Employees	#	%	Equivalents	quivalents # %		Time	# %		Time	#	%		
August, 2017	19,503			19,503.00			17,789			1,714				
September, 2017	19,560	57	0%	19,070.74	-432.26	-2.27%	17,806	17	0.10%	1,754	40	2.28%		
October, 2017	19,705	145	0.74%	19,206.57	135.83	0.71%	17,931	125	0.70%	1,774	20	1.13%		
November, 2017	19,819	114	0.58%	19,317.37	110.80	0.57%	18,042	111	0.62%	1,777	3	0.17%		
December, 2017	19,746	-73	-0.37%	19,241.56	-75.81	-0.39%	17,971	-71	-0.40%	1,775	-2	-0.11%		
January, 2018	19,888	142	0.71%	19,353.65	112.09	0.58%	18,056	85	0.47%	1,832	57	3.11%		
February, 2018	19,965	77	0.39%	19,426.42	72.77	0.37%	18,107	51	0.28%	1,858	26	1.40%		
March, 2018	20,021	56	0.28%	19,483.01	56.59	0.29%	18,152	45	0.25%	1,869	11	0.59%		
April, 2018	20,151	130	0.65%	19,611.69	128.68	0.66%	18,268	116	0.63%	1,883	14	0.74%		
May, 2018	20,248	97	0.48%	19,706.39	94.70	0.48%	18,361	93	0.51%	1,887	4	0.21%		
June, 2018	20,377	129	0.63%	19,850.62	144.23	0.73%	18,524	163	0.88%	1,853	-34	-1.83%		
July, 2018	20,483	106	0.52%	19,950.63	100.01	0.50%	18,613	89	0.48%	1,870	17	0.91%		
August, 2018	20,318	-165	-0.81%	19,792.39	-158.24	-0.80%	18,465	-148	-0.80%	1,853	-17	-0.92%		

MD Anderson Workforce Report- FY 2018

Reporting Source: PeopleSoft

Data provided as of last day of each month.

Includes Hourly and Temp Employees.

B. Student Information

THE UNIVERSITY OF TEXAS MDAnderson Cancer Center

Making Cancer History®

MD Anderson Fact Book Academic Year 2018

Section B: Student Information

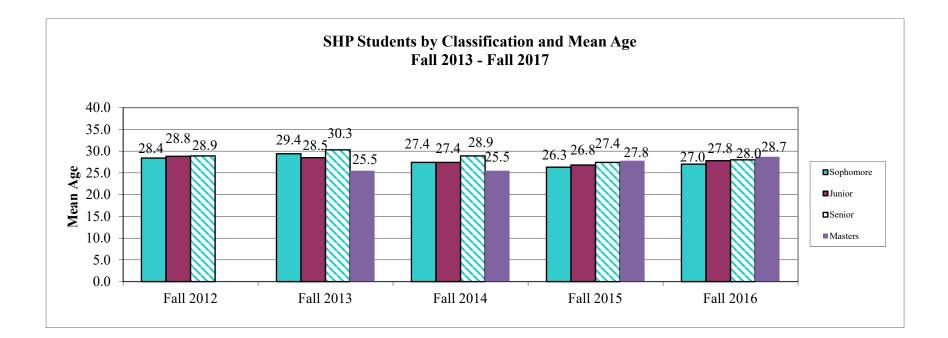
B.1 SHP Applied, Admitted and Enrolled Data by Program

		Fall 2014			Fall 2015			Fall 2016			Fall 2017		
Program	Applied	Admitted	Enrolled	Applied	Admitted	Enrolled*	Applied	Admitted	Enrolled	Applied	Admitted	Enrolled	
BS Clinical Laboratory Sciences	70	13	13	52	28	28	44	15	15	38	13	13	
BS Cytogenetic Technology	35	20	20	26	17	16	27	14	14	40	25	25	
BS Cytotechnology	17	6	6	35	9	9	4	0	0	2	0	0	
MS Diagnostic Genetics	40	8	8	28	9	9	48	11	11	27	6	5	
BS Diagnostic Imaging	130	38	38	99	33	33	117	38	38	137	39	39	
CRT Diagnostic Imaging	0	0	0	11	7	7	6	4	4				
BS Diagnostic Medical Sonography*	79	9	9	48	9	9	42	12	12	62	11	11	
BS Health Care Disparities, Diversity & Advocacy							24	10	10	20	7	7	
BS Histotechnology*	28	21	21	25	18	18	35	19	19	36	19	19	
BS Medical Dosimetry	64	22	22	58	21	21	52	20	20	62	21	21	
BS Molecular Genetic Technology	45	23	23	33	22	22	52	33	33	32	22	22	
BS Radiation Therapy	95	24	24	39	23	23	46	25	25	58	25	25	
Total	603	184	184	454	196	195	497	201	201	514	188	187	

Source: SHP Dean's Report *MS in Diagnostics Genetics, BS in Diagnostic Medical Sonography, and CRT in Diagnostic Imaging implemented in 2013

MEAN STUDENT AGE	AN STUDENT AGE Fall 2013		Fall 2)14	Fall 20	015	Fall 20)16	Fall 2017		
BY CLASSIFICATION	CLASSIFICATION MEAN AGE COUNT		MEAN AGE	COUNT	MEAN AGE COUNT		MEAN AGE	COUNT	MEAN AGE	COUNT	
SOPHOMORE	29.4	74	27.4	97	26.3	35	27.0	69	26.3	35	
JUNIOR	28.5	113	27.4	80	26.8	165	27.8	157	27.1	178	
SENIOR	30.3	126	28.9	115	27.4	104	28.0	92	28.2	108	
MASTERS	25.5	4	25.5	11	27.8	16	28.7	21	32.2	36	
OVERALL	29.5	317	27.9	303	27	320	27.7	339	27.9	357	

B.2 SHP Students by Mean Age and Level, Fall 2013 – Fall 2017



B.3 SHP Students by Gender and Ethnicity, Fall 2013 – Fall 2017

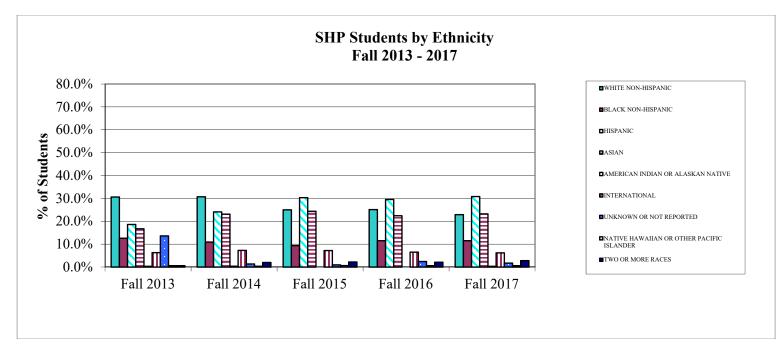
		Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
ETHNIC ORIGIN	GENDER	COUNT	Students								
WHITE NON-HISPANIC	FEMALE	66	20.8%	65	21.5%	53	16.6%	61	18.0%	60	16.8%
	MALE	31	9.8%	28	9.2%	27	8.4%	24	7.1%	22	6.2%
Subtotal		97	30.6%	93	30.7%	80	25.0%	85	25.1%	82	23.0%
BLACK NON-HISPANIC	FEMALE	25	7.9%	27	8.9%	21	6.6%	24	7.1%	23	6.4%
	MALE	15	4.7%	6	2.0%	9	2.8%	15	4.4%	18	5.0%
Subtotal		40	12.6%	33	10.9%	30	9.4%	39	11.5%	41	11.5%
HISPANIC	FEMALE	39	12.3%	48	15.8%	70	21.9%	73	21.5%	80	22.4%
	MALE	20	6.3%	25	8.3%	27	8.4%	27	8.0%	30	8.4%
Subtotal		59	18.6%	73	24.1%	97	30.3%	100	29.5%	110	30.8%
ASIAN	FEMALE	28	8.8%	42	13.9%	52	16.3%	56	16.5%	57	16.0%
	MALE	25	7.9%	28	9.2%	26	8.1%	20	5.9%	26	7.3%
Subtotal		53	16.7%	70	23.1%	78	24.4%	76	22.4%	83	23.2%
AMERICAN INDIAN OR	FEMALE	1	0.3%	1	0.3%	0	0.0%	0	0.0%	1	0.3%
ALASKAN NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Subtotal		1	0.3%	1	0.3%	0	0.0%	0	0.0%	1	0.3%
INTERNATIONAL	FEMALE	14	4.4%	16	5.3%	13	4.1%	12	3.5%	16	4.5%
Subtotal BLACK NON-HISPANIC Subtotal HISPANIC Subtotal ASIAN ASIAN AMERICAN INDIAN OR ALASKAN NATIVE Subtotal NTERNATIONAL Subtotal NNKNOWN OR NOT REPORTED Subtotal NATIVE HAWAIIAN OR PACIFIC ISLANDER Subtotal TWO OR MORE RACES Subtotal Subtotal	MALE	6	1.9%	6	2.0%	10	3.1%	10	2.9%	6	1.7%
Subtotal		20	6.3%	22	7.3%	23	7.2%	22	6.5%	22	6.2%
UNKNOWN OR NOT	FEMALE	29	9.1%	2	0.7%	1	0.3%	5	1.5%	5	1.4%
REPORTED	MALE	14	4.4%	2	0.7%	2	0.6%	3	0.9%	1	0.3%
Subtotal		43	13.6%	4	1.3%	3	0.9%	8	2.4%	6	1.7%
NATIVE HAWAIIAN OR OTHER	FEMALE	1	0.3%	1	0.3%	2	0.6%	1	0.3%	1	0.3%
	MALE	1	0.3%	0	0.0%	0	0.0%	1	0.3%	1	3.0%
Subtotal		2	0.6%	1	0.3%	2	0.6%	2	0.6%	2	0.6%
	FEMALE	1	0.3%	3	1.0%	2	0.6%	3	0.9%	8	2.2%
I WO OK MORE RACES	MALE	1	0.3%	3	1.0%	5	1.6%	4	1.2%	2	0.6%
Subtotal		2	0.6%	6	2.0%	7	2.2%	7	2.1%	10	2.8%
TOTAL		317	100.0%	303	100.0%	320	100.0%	339	100.0%	357	100.0%

MD Anderson Fact Book Academic Year 2018

Section B: Student Information

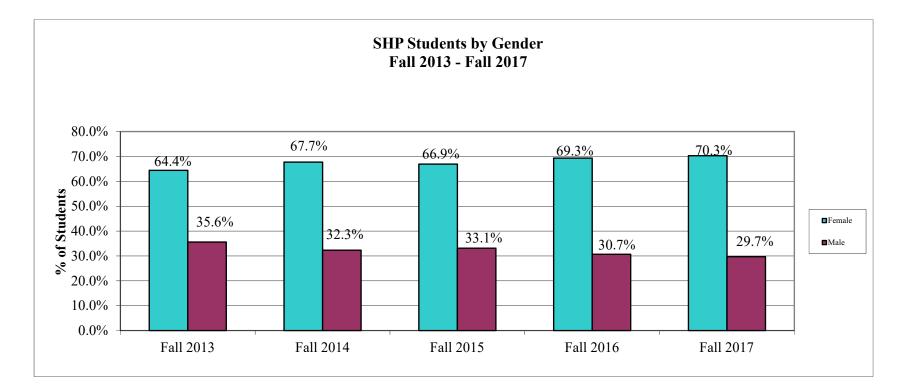
B.4 SHP Students by Ethnicity, Fall 2013 – Fall 2017

	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
ETHNIC ORIGIN	COUNT	Students								
WHITE NON-HISPANIC	97	30.6%	93	30.7%	80	25.0%	85	25.1%	82	22.9%
BLACK NON-HISPANIC	40	12.6%	33	10.9%	30	9.4%	39	11.5%	41	11.5%
HISPANIC	59	18.6%	73	24.1%	97	30.3%	100	29.5%	110	30.8%
ASIAN	53	16.7%	70	23.1%	78	24.4%	76	22.4%	83	23.2%
AMERICAN INDIAN OR ALASKAN										
NATIVE	1	0.3%	1	0.3%	0	0.0%	0	0.0%	1	0.3%
INTERNATIONAL	20	6.3%	22	7.3%	23	7.2%	22	6.5%	22	6.2%
UNKNOWN OR NOT REPORTED	43	13.6%	4	1.3%	3	0.9%	8	2.4%	6	1.7%
NATIVE HAWAIIAN OR OTHER		0.604		0.00/		0.604		0.604		0.604
PACIFIC ISLANDER	2	0.6%	1	0.3%	2	0.6%	2	0.6%	2	0.6%
TWO OR MORE RACES	2	0.6%	6	2.0%	7	2.2%	7	2.1%	10	2.8%
TOTAL	317	100.0%	303	100.0%	320	100.0%	339	100.0%	357	100.0%



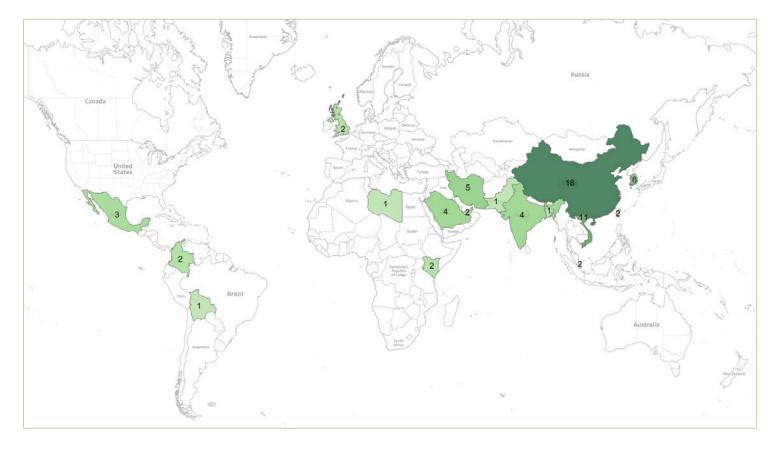
	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
GENDER	COUNT	Students								
FEMALE	204	64.4%	205	67.7%	214	66.9%	235	69.3	251	70.3%
MALE	113	35.6%	98	32.3%	106	33.1%	104	30.7	106	29.7%
TOTAL	317	100.0%	303	100.0%	320	100.0%	339	100.0%	357	100.0%

B.5 SHP Students by Gender, Fall 2013 – Fall 2017



		Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Bangladesh	INTERNATIONAL	0	0	0	0	1
Bolivia	INTERNATIONAL	1	0	0	0	0
China	INTERNATIONAL	1	1	3	8	5
Colombia	INTERNATIONAL	0	0	1	1	0
India	INTERNATIONAL	1	2	1	0	0
Iran	INTERNATIONAL	0	1	1	2	1
Kenya	INTERNATIONAL	0	0	1	1	0
Korea, Republic of	INTERNATIONAL	0	1	1	2	2
Libya	INTERNATIONAL	0	0	0	1	0
Mexico	INTERNATIONAL	0	0	1	1	1
Pakistan	INTERNATIONAL	0	0	1	0	0
Saudi Arabia	INTERNATIONAL	0	1	2	1	0
Singapore	INTERNATIONAL	0	0	1	1	0
Taiwan	INTERNATIONAL	1	1	0	0	0
United Arab Emirates	INTERNATIONAL	0	0	1	1	0
United Kingdom	INTERNATIONAL	0	1	1	0	0
Vietnam	INTERNATIONAL	0	1	1	4	5
SUBTOTAL, INTERNATIONAL		4	9	16	23	15

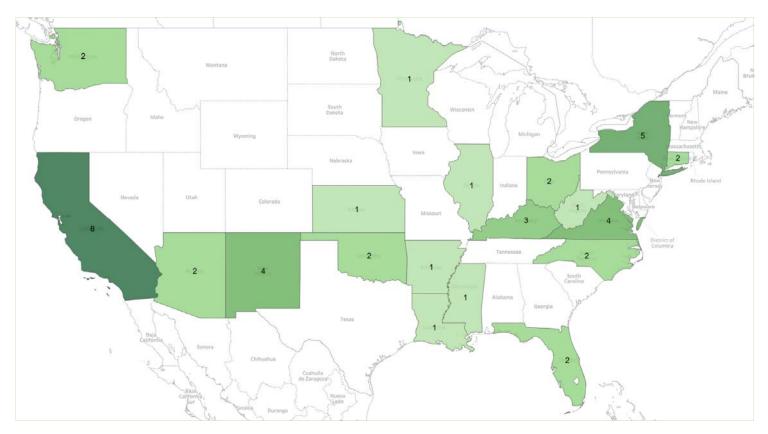
B.6a SHP Students by Residency - International, Fall 2013 – Fall 2017



International SHP Students by Residency Fall 2013-2017

D.00 SHP Students by Ke	stately out of state	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Arizona	OUT OF STATE	0	1	1	0	0
Arkansas	OUT OF STATE	0	1	0	0	0
California	OUT OF STATE	0	0	3	5	0
Connecticut	OUT OF STATE	0	1	1	0	0
Florida	OUT OF STATE	0	0	1	1	0
Illinois	OUT OF STATE	0	0	0	1	0
Kansas	OUT OF STATE	0	0	0	0	1
Kentucky	OUT OF STATE	0	0	1	1	1
Louisiana	OUT OF STATE	0	0	0	1	0
Minnesota	OUT OF STATE	0	0	1	0	0
Mississippi	OUT OF STATE	1	0	0	0	0
New Mexico	OUT OF STATE	1	2	1	0	0
New York	OUT OF STATE	0	0	1	2	2
North Carolina	OUT OF STATE	1	1	0	0	0
Ohio	OUT OF STATE	0	0	0	1	1
Oklahoma	OUT OF STATE	0	0	0	1	1
Virginia	OUT OF STATE	0	0	1	1	2
Washington	OUT OF STATE	0	0	0	1	1
West Virginia	OUT OF STATE	1	0	0	0	0
SUBTOTAL, OUT OF STATE		5	6	11	15	9

B.6b SHP Students by Residency - Out of State, Fall 2013 – Fall 2017



Continental U.S. Out of State SHP Students by Residency Fall 2013-2017

	s by Residency - Texa	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Angelina County	TEXAS COUNTY	0	0	0	1	1
Atascosa County	TEXAS COUNTY	1	0	0	0	0
Austin County	TEXAS COUNTY	1	1	1	0	0
Bell County	TEXAS COUNTY	1	0	0	1	1
Bexar County	TEXAS COUNTY	4	6	1	5	4
Brazoria County	TEXAS COUNTY	16	20	17	12	16
Brazos County	TEXAS COUNTY	0	0	1	2	1
Brown County	TEXAS COUNTY	0	0	0	1	1
Burleson County	TEXAS COUNTY	0	0	0	0	1
Cameron County	TEXAS COUNTY	0	0	1	1	0
Chambers County	TEXAS COUNTY	0	0	0	1	1
Collin County	TEXAS COUNTY	5	5	8	2	1
Colorado County	TEXAS COUNTY	0	2	0	0	0
Comal County	TEXAS COUNTY	0	0	1	0	0
Dallas County	TEXAS COUNTY	8	3	5	5	3
Denton County	TEXAS COUNTY	3	2	1	1	1
Duval County	TEXAS COUNTY	0	0	1	0	0
Ellis County	TEXAS COUNTY	1	0	0	0	0
El Paso County	TEXAS COUNTY	3	0	1	0	1
Fayette County	TEXAS COUNTY	1	1	0	0	0
Fort Bend County	TEXAS COUNTY	29	26	26	29	34
Freestone County	TEXAS COUNTY	0	1	1	1	0
Galveston County	TEXAS COUNTY	12	11	11	10	12
Guadalupe County	TEXAS COUNTY	0	1	0	0	0
Hardin County	TEXAS COUNTY	1	0	0	0	1
Harris County	TEXAS COUNTY	181	168	174	195	223
Harrison County	TEXAS COUNTY	1	0	0	0	0
Hays County	TEXAS COUNTY	0	0	0	1	1
Hidalgo County	TEXAS COUNTY	1	2	4	0	0
Hopkins County	TEXAS COUNTY	0	0	1	1	1
Houston County	TEXAS COUNTY	5	4	7	3	4
Hunt County	TEXAS COUNTY	0	0	1	1	0
Jefferson County	TEXAS COUNTY	1	1	2	4	2
Jones County	TEXAS COUNTY	0	1	0	0	0
Kaufman County	TEXAS COUNTY	1	0	0	0	0
Kerr County	TEXAS COUNTY	1	1	0	0	0
Lavaca County	TEXAS COUNTY	0	1	1	0	0
Lee County	TEXAS COUNTY	1	1	1	1	0
Liberty County	TEXAS COUNTY	0	0	1	1	0
Matagorda County	TEXAS COUNTY	2	1	0	0	0
Montgomery County	TEXAS COUNTY TEXAS COUNTY	16	17	11	12	12
Nueces County	TEXAS COUNTY	1	1	1	0	0
Oldham County	TEXAS COUNTY	0	0	1	0	0

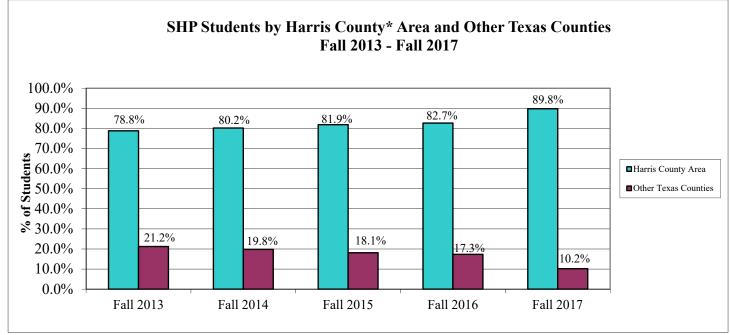
B.7 SHP Students by Residency - Texas County, Fall 2013 – Fall 2017

	ts by Residency - Tex	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017
RESIDENCE	RESIDENCE TYPE	COUNT	COUNT	COUNT	COUNT	COUNT
Parker County	TEXAS COUNTY	0	1	1	0	0
Raines County	TEXAS COUNTY	0	1	1	0	0
Randall County	TEXAS COUNTY	1	1	2	1	0
Robertson County	TEXAS COUNTY	1	1	0	0	0
Smith County	TEXAS COUNTY	1	0	0	0	0
Tarrant County	TEXAS COUNTY	1	1	4	2	1
Travis County	TEXAS COUNTY	4	4	2	4	5
Uvalde County	TEXAS COUNTY	0	0	0	1	1
Victoria County	TEXAS COUNTY	0	0	0	0	1
Walker County	TEXAS COUNTY	1	0	0	0	0
Waller County	TEXAS COUNTY	0	0	0	0	1
Washington County	TEXAS COUNTY	1	1	0	0	0
Williamson County	TEXAS COUNTY	0	1	2	2	0
SUBTOTAL, TEXAS COUNTY		307	288	293	301	333

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

Source: Certified CBM001

*Fall 2012 counts may or may not represent accurate data

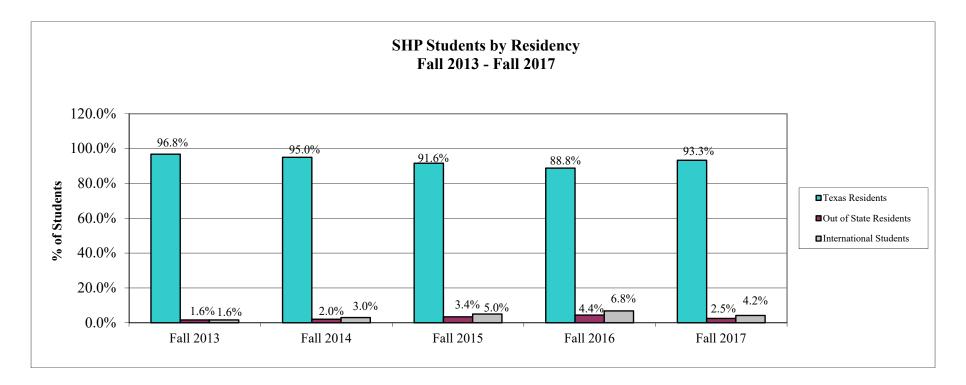


*Consists of Harris and contiguous counties

MD Anderson Fact Book Academic Year 2018 Section B: Student Information B.8 SHP Students by Residency Type, Fall 2013 – Fall 2017

	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
RESIDENCE TYPE	COUNT	Students								
Texas Residents	307	96.8%	288	95.0%	293	91.6%	301	88.8%	333	93.3%
Out of State Students	5	1.6%	6	2.0%	11	3.4%	15	4.4%	9	2.5%
International Students	5	1.6%	9	3.0%	16	5.0%	23	6.8%	15	4.2%
TOTAL	317	100.0%	303	100.0%	320	100.0%	339	100.0%	357	100.0%

Source: Certified CBM001



		-	-	-				
		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
		<u>.</u>	-	-	-			
		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
		M.D./		Individualized	Specialized			Average
	Year	Ph.D.*	(M.S.)Ph.D.	M.S.	M.S.	Non-degree	Total	GPA**
Completed Application	2017		563	52	142	6	763	-
Admitted Applicant	2017		107	30	12	5	154	3.6
Enrolled Applicant	2017	5	53	21	12	4	95	3.5

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

*Excludes M.D./Ph.D. applicants and admissions

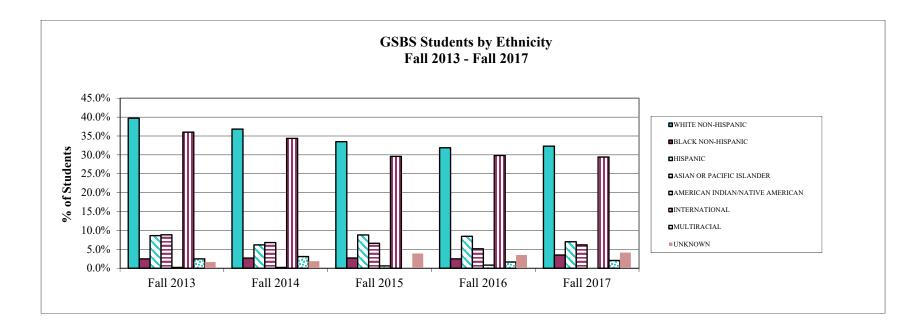
** Average undergrad GPA for Ph.D. applicants

Source: UT Graduate School of Biomedical Sciences

	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
ETHNIC ORIGIN	COUNT	Students								
WHITE NON-HISPANIC	193	39.7%	179	36.8%	163	33.5%	155	31.9%	157	32.3%
BLACK NON-HISPANIC	12	2.5%	13	2.7%	13	2.7%	12	2.5%	17	3.5%
HISPANIC	42	8.6%	30	6.2%	43	8.8%	41	8.4%	34	7.0%
ASIAN OR PACIFIC ISLANDER	43	8.8%	33	6.8%	32	6.6%	25	5.1%	30	6.2%
AMERICAN INDIAN OR ALASKAN	1	0.2%	1	0.2%	3	0.6%	4	0.8%	0	0.0%
NATIVE										
INTERNATIONAL	175	36.0%	167	34.4%	144	29.6%	145	29.8%	143	29.4%
MULTIRACIAL	12	2.5%	15	3.1%		0.0%	8	1.6%	10	2.1%
UNKNOWN OR NOT REPORTED	8	1.6%	9	1.9%	19	3.9%	17	3.5%	20	4.1%
TOTAL	486	100.0%	447	100.0%	417	100.0%	407	100.0%	411	100.0%

B.10 GSBS Students by Ethnicity, Fall 2013– Fall 2017*

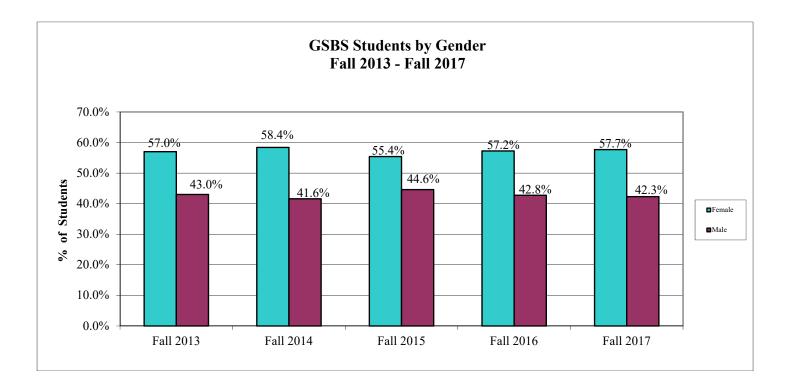
*Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.



	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
GENDER	COUNT	Students								
FEMALE	277	57.0%	261	58.4%	231	55.4%	233	57.2%	237	57.7%
MALE	209	43.0%	186	41.6%	186	44.6%	174	42.8%	174	42.3%
TOTAL	486	100.0%	447	100.0%	417	100.0%	407	100.0%	411	100.0%

B.11 GSBS Students by Gender, Fall 2013 – Fall 2017*

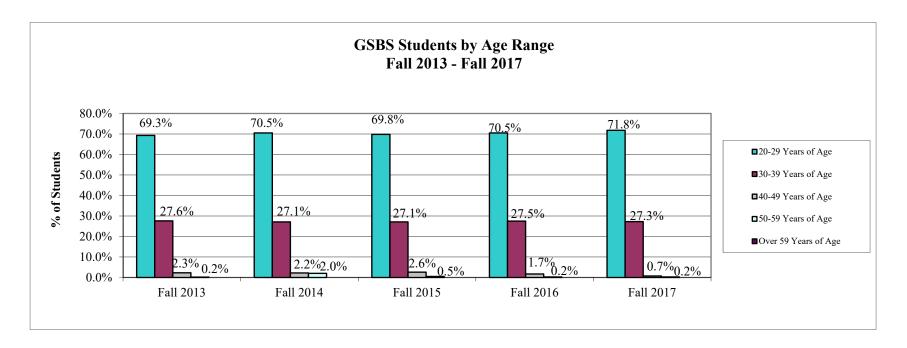
*Data excludes non-degree students. Source: UT Graduate School of Biomedical Sciences.



	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
AGE RANGE	COUNT	Students								
20 TO 29 YEARS OF AGE	337	69.3%	315	70.5%	291	69.8%	287	70.5%	295	71.8%
30 TO 39 YEARS OF AGE	134	27.6%	121	27.1%	113	27.1%	112	27.5%	112	27.3%
40 TO 49 YEARS OF AGE	14	2.9%	10	2.2%	11	2.6%	7	1.7%	3	0.7%
50 TO 59 YEARS OF AGE	1	0.2%	1	0.2%	2	0.5%	1	0.2%	1	0.2%
OVER 59 YEARS OF AGE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL	486	100.0%	447	100.0%	417	100.0%	407	100.0%	411	100.0%

B.12 GSBS Students by Age Range, Fall 2013 – Fall 2017*

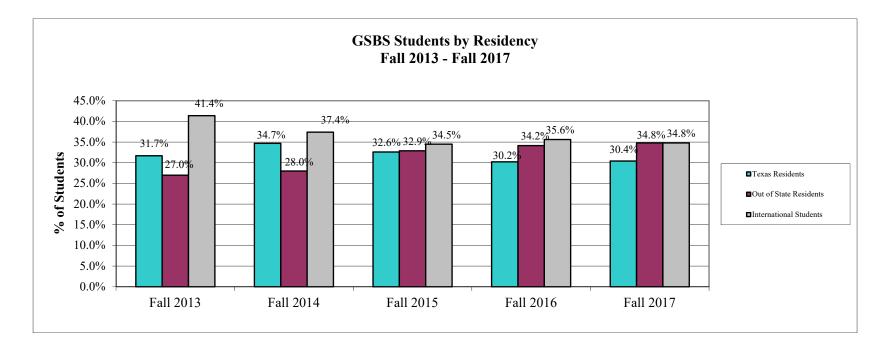
*Data excludes non-degree students. Source: Certified CBM001 & UT Graduate School of Biomedical Sciences.



	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
RESIDENCE TYPE	COUNT	Students								
Texas Residents	154	31.7%	155	34.7%	136	32.6%	123	30.2%	125	30.4%
Out of State Students	131	27.0%	125	28.0%	137	32.9%	139	34.2%	143	34.8%
International Students	201	41.4%	167	37.4%	144	34.5%	145	35.6%	143	34.8%
Total	486	100.0%	447	100.0%	417	100.0%	407	100.0%	411	100.0%

B.13 GSBS Students by Residency Type, Fall 2013 – Fall 2017*

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



C. Degrees



Making Cancer History®

Degrees Offered at The University of				
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				
School of Health Professions				
Clinical Laboratory Science				
Cytogenetic Technology				
Cytotechnology				
Diagnostic Genetics				
Diagnostic Imaging				
Diagnostic Medical Sonography				
Health Care Disparities, Diversity and Advocacy				
Histotechnology				
Medical Dosimetry				
Molecular Genetic Technology				
Radiation Therapy				
Radiologic Sciences				

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

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, <u>http://www.sacs.org</u>. Many of the academic degree programs offered at MD Anderson undergo accreditation by specialized accrediting bodies*. They are as follows:

School/Program	Degree	Accrediting Agency
School of Health Professions (SF	IP)	
Clinical Laboratory Sciences	B.S.	National Accrediting Agency for Clinical Laboratory Sciences
Cytogenetic Technology	B.S.	National Accrediting Agency for Clinical Laboratory Sciences
Cytotechnology	B.S.	Commission on Accreditation of Allied Health Education Programs
Diagnostic Imaging	B.S.	Joint Review Committee on Education in Radiologic Technology
Diagnostic Genetics	M.S	National Accrediting Agency for Clinical Laboratory Technology Sciences
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, <u>http://www.sacs.org</u>. 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 2013 – Fall 2017

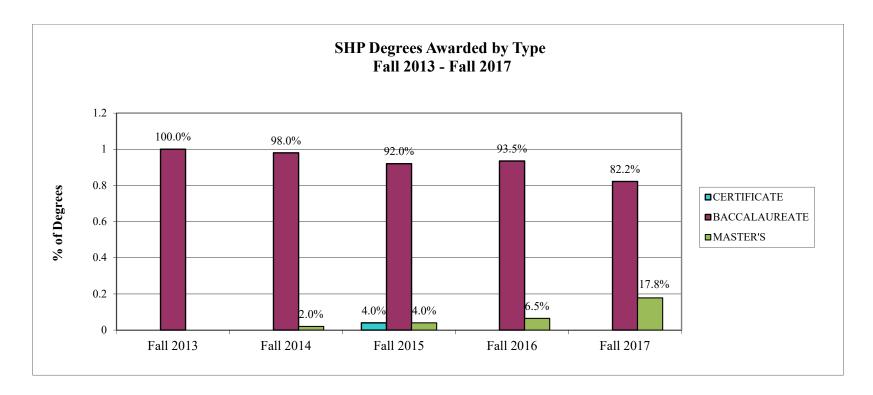
		Fall	Fall	%	Fall	%	Fall	%	Fall	%
SHP PROGRAM	DEGREE CONFERRED	2013	2014	Inc/Dec	2015	Inc/Dec	2016	Inc/Dec	2017	Inc/Dec
CLINICAL LABORATORY										
SCIENCE	BACCALAUREATE	15	16	6.7%	14	-12.5%	11	-21.4%	16	45.5%
CYTOGENETIC	CERTIFICATE	0	0	0.0%	0		0			
TECHNOLOGY	BACCALAUREATE	19	15	-21.1%	18	20.0%	10	-44.4%	14	40.0%
CYTOTECHNOLOGY	CERTIFICATE	0	0	0.0%	0		0			0.0%
	BACCALAUREATE	7	1	-85.7%	7	600.0%	3	-57.1%	0	-100.0%
DIAGNOSTIC IMAGING	CERTIFICATE	0	0	0.0%	6	0.0%	0	0.0%	0	0.0%
	BACCALAUREATE	28	28	0.0%	29	3.6%	28	-3.4%	30	7.1%
DIAGNOSTIC GENETICS	MASTER'S	NA	3		6	100.0%	10	66.7%	10	0.0%
DIAGNOSTIC MEDICAL SONOGRAPHY	BACCALAUREATE	NA	7		6	-14.3%	5	-16.7%	10	100.0%
SUNUGRAPHY	BACCALAUKEATE	INA	/		0	-14.370	5	-10.770	10	100.070
HISTOTECHNOLOGY										
mstottechnologi	BACCALAUREATE	12	14	16.7%	12	-14.3%	18	50.0%	15	
	DACCALAORLATE	12	17	10.770	12	-14.370	10	50.070	15	
HEALTH DISPARITIES,										
DIVERSITY & ADVOCACY	BACCALAUREATE	NA	NA		NA		NA		2	
	Differinition	1.11	1.11		1111		111			
MEDICAL DOSIMETRY										
	BACCALAUREATE	16	16	0.0%	16	0.0%	19	18.8%	18	-5.3%
		-							2	
MOLECULAR GENETIC										
TECHNOLOGY	BACCALAUREATE	31	27	-12.9%	14	-48.1%	27	92.9%	18	-33.3%
RADIATION THERAPY										
	BACCALAUREATE	20	20	0.0%	21	5.0%	23	9.5%	16	-30.4%
RADIOLOGICAL										
SCIENCES	MASTER'S	NA	NA		NA		NA		20	
TOTAL WI	THIN YEAR	148	147	-0.7%	149	1.4%	154	3.4%	169	9.7%

Source: SHP Dean's Report

C.2 SHP Degrees Awarded by Type, Fall 2013 – Fall 2017

	Fall	Fall	%	Fall	%	Fall	%	Fall	%
DEGREE AWARDED	2013	2014	Inc/Dec	2015	Inc/Dec	2016	Inc/Dec	2017	Inc/Dec
CERTIFICATE	0	0		6		0		0	0.0%
BACCALAUREATE	148	144	-2.7%	137	4.9%	144	5.1%	139	-3.5%
MASTER'S		3		6		10		30	200.0%
Total	148	147	-0.7%	149	-1.4%	154	3.4%	169	9.7%

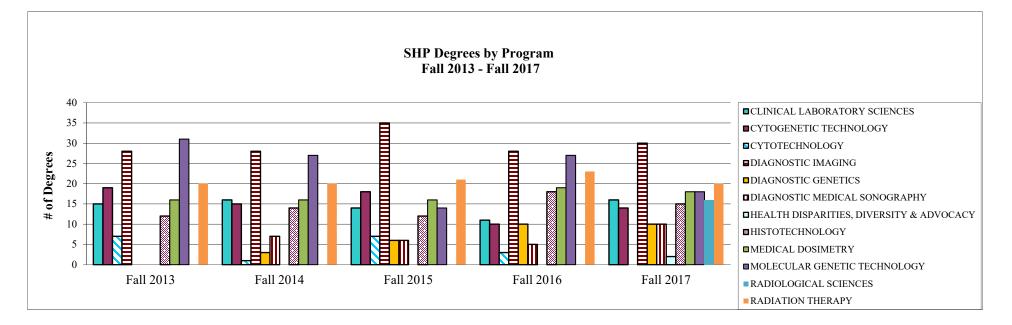
*Source: Certified CBM009



C.3 SHP Degrees by Program, Fall 2013 - Fall 2017

	Fall	Fall	%	Fall	%	Fall	%	Fall	%
PROGRAM	2013	2014	Inc/Dec	2015	Inc/Dec	2016	Inc/Dec	2017	Inc/Dec
CLINICAL LABORATORY SCIENCES	15	16	6.7%	14	-12.5%	11	-21.4%	16	45.5%
CYTOGENETIC TECHNOLOGY	19	15	-21.1%	18	20.0%	10	-44.4%	14	40.0%
CYTOTECHNOLOGY	7	1	-85.7%	7	600.0%	3	-57.1%	0	-100.%
DIAGNOSTIC IMAGING	28	28	0.0%	35	700.0%	28	-20.0%	30	7.1%
DIAGNOSTIC GENETICS		3		6		10	66.7%	10	0.0%
DIAGNOSTIC MEDICAL SONOGRAPHY		7		6		5	-16.7%	10	100.0%
HEALTH DISPARITIES, DIVERSITY & ADVOCACY								2	
HISTOTECHNOLOGY	12	14	16.7%	12	-14.3%	18	50.0%	15	-16.7%
MEDICAL DOSIMETRY	16	16	0.0%	16	0.0%	19	18.8%	18	-5.3%
MOLECULAR GENETIC TECHNOLOGY	31	27	-12.9%	14	-48.1%	27	92.9%	18	-33.3%
RADIATION THERAPY	20	20	0.0%	21	5.0%	23	9.5%	16	-30.4%
RADIOLOGICAL SCIENCES								20	
OVERALL	148	147	-0.7%	149	1.4%	154	3.4%	169	9.7%

Source: SHP Dean's Report



C.4 SHP Degrees Awarded by Program and Average Age, Fall 2013 – Fall 2017

C.4 Shi Degrees Awarded by H			2013		2014	Fel	1 2015	Fal	1 2016	Fell	2017
	DEGREE	Avg.	2015	Avg.	2014	Avg.	2013	Avg.	1 2010	Avg.	2017
PROGRAM	CONFERRED	Avg. Age	COUNT	Avg. Age	COUNT	Avg. Age	COUNT	Avg. Age	COUNT	Avg. Age	COUNT
CLINICAL LABORATORY SCIENCE	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	31.0	15	30.0	16	27.0	14	29.0	11	27.0	16
CYTOGENETIC TECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0	0.0	0.0	0
	BACCALAUREATE	28.0	19	26.0	15	27.7	18	26.0	10	27.0	14
			0		0	0.0	0				
CYTOTECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0 7	26.0	2	0.0	0
	BACCALAUREATE	36.0	7	20.0	1	29.0	7	26.0	3	0.0	0
DIAGNOSTIC IMAGING	BACCALAUREATE	32.0	28	32.0	28	29.5	36	30.0	28	30.0	30
DIAGNOSTIC GENETICS	MASTER'S	NA	NA	29.0	3	26.8	6	30.0	10	28.0	10
DIAGNOSTIC MEDICAL SONOGRAPHY	BACCALAUREATE	NA	NA	29.0	7	27.0	6	29.0	5	24.0	10
HEALTH DISPARITIES, DIVERSITY & ADVOCACY	BACCALAUREATE	NA	NA	NA	NA	NA	NA	NA	NA	47.0	2
HISTOTECHNOLOGY	CERTIFICATE	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
	BACCALAUREATE	31.0	12	31.0	14	29.0	12	26.0	18	27.0	15
MEDICAL DOSIMETRY	BACCALAUREATE	31.0	16	29.0	16	28.0	16	28.0	19	28.0	18
MOLECULAR GENETIC TECHNOLOGY	BACCALAUREATE	30.0	31	28.0	27	30.8	14	27.0	27	27.0	18
RADIATION THERAPY	CERTIFICATE BACCALAUREATE	0.0 31.0	0 20	0.0 29.0	0 20	0.0	0 21	0.0 28.0	0 23	31.0	16
	DACCALAUKEATE	51.0	20	29.0	20	21.1	∠1	20.0	23	51.0	10
RADIOLOGICAL SCIENCES	MASTER'S	NA	NA	NA	NA	NA	NA	NA	NA	37.0	20
TOTAL WITHIN YEAR		29.5	148	28.0	147	28.3	149	28.0	154	30.0	169

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2013 – Fall 2017

	grunn, Dennier, y		Fall		Fall		Fall		Fall		Fall	
PROGRAM/DEGREE	ETHNICITY	GENDER	2013	% of All	2014	% of All	2015	% of All	2016	% of All	2017	% of All
CLINICAL	WHITE NON-HISPANIC	FEMALE	3	20.0%	2	12.5%	3	21.4%	2	18.2%	2	12.5%
LABORATORY SCIENCE		MALE	1	6.7%	2	12.5%	2	14.3%	0	0.0%	1	6.3%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	1	6.7%	2	12.5%	1	7.1%	1	9.1%	0	0.0%
		MALE	0	0.0%	1	6.3%	0	0.0%	1	9.1%	0	0.0%
	HISPANIC	FEMALE	4	26.7%	3	18.8%	1	7.1%	3	27.3%	4	25.0%
		MALE	0	0.0%	1	6.3%	1	7.1%	1	9.1%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	4	26.7%	2	12.5%	4	28.6%	2	18.2%	8	50.0%
		MALE	2	13.3%	0	0.0%	0	0.0%	1	9.1%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	6.3%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	MULTI-RACIAL	FEMALE			0	0.0%	2	14.3%	0	0.0%	0	0.0%
		MALE			0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	1	6.3%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	2	12.5%	0	0.0%	0	0.0%	0	0.0%
TOTAL BACCALAUREATE	DTAL BACCALAUREATE DEGREES			100.0%	<u>16</u>	100.0%	<u>14</u>	100.0%	<u>11</u>	100.0%	<u>16</u>	100.0%

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2013 – Fall 2017

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
CYTOGENETIC	WHITE NON-HISPANIC	FEMALE	3	15.8%	2	13.3%	3	16.7%	2	20.0%	2	14.3%
TECHNOLOGY		MALE	2	10.5%	0	0.0%	2	11.1%	0	0.0%	1	7.1%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	2	10.5%	0	0.0%	2	11.1%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	10.0%	0	0.0%
	HISPANIC	FEMALE	1	5.3%	1	6.7%	3	16.7%	0	0.0%	3	21.4%
		MALE	0	0.0%	3	20.0%	1	5.6%	0	0.0%	3	21.4%
	ASIAN OR PACIFIC ISLANDER	FEMALE	3	15.8%	3	20.0%	3	16.7%	4	40.0%	3	21.4%
		MALE	1	5.3%	2	13.3%	1	5.6%	1	10.0%	1	7.1%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	3	16.7%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	7.1%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	0	0.0%
		MALE					0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	6	31.6%	1	6.7%	0	0.0%	0	0.0%	0	0.0%
		MALE	1	5.3%	3	20.0%	0	0.0%	2	20.0%	0	0.0%
TOTAL BACCALAUR		<u>19</u>	100.0%	<u>15</u>	100.0%	<u>18</u>	100.0%	<u>10</u>	100.0%	<u>14</u>	100.0%	

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2013 – Fall 2017

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
CYTOTECHNOLOGY	WHITE NON-HISPANIC	FEMALE	0	0.0%	1	100.0%	1	14.3%	0	0.0%	0	0.0%
BACCALAUREATE		MALE	0	0.0%	0	0.0%	0	0.0%	2	66.7%	0	0.0%
	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	4	57.1%	0	0.0%	1	14.3%	1	33.3%	0	0.0%
		MALE	1	14.3%	0	0.0%	1	14.3%	0	0.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	1	14.3%	0	0.0%	4	57.1%	0	0.0%	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	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%	0	0.0%
		MALE					0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	1	14.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL BACCALAUR	EATE DEGREES		7	100.0%	1	100.0%	7	100.0%	3	100.0%	<u>0</u>	0.0%

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2013 – Fall 2017

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	0		0		0	0.0%	0	0	0	0
IMAGING		MALE	0		0		1	16.7%	0	0	0	0
CERTIFICATE	BLACK NON-HISPANIC	FEMALE	0		0		1	16.7%	0	0	0	0
		MALE	0		0		1	16.7%	0	0	0	0
	HISPANIC	FEMALE	0		0		2	33.3%	0	0	0	0
		MALE	0		0		0	0.0%	0	0	0	0
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		1	16.7%	0	0	0	0
		MALE	0		0		0	0.0%	0	0	0	0
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0	0.0%	0	0	0	0
	NATIVE	MALE	0		0		0	0.0%	0	0	0	0
	INTERNATIONAL	FEMALE	0		0		0	0.0%	0	0	0	0
		MALE	0		0		0	0.0%	0	0	0	0
	MULTI-RACIAL	FEMALE					0	0.0%	0	0	0	0
		MALE					0	0.0%	0	0	0	0
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0	0.0%	0	0	0	0
		MALE	0		0		0	0.0%	0	0	0	0
SUBTOTAL, CERTIFI	CATE		0	0			6	100.0%				0
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	7	25.0%	5	17.9%	6	20.7%	7	25.0%	3	10.0%
		MALE	4	14.3%	3	10.7%	2	6.9%	2	7.1%	4	13.3%
	BLACK NON-HISPANIC	FEMALE	0	0.0%	5	17.9%	2	6.9%	2	7.1%	2	6.7%
		MALE	3	10.7%	0	0.0%	2	6.9%	1	3.6%	2	6.7%
	HISPANIC	FEMALE	5	17.9%	4	14.3%	5	17.2%	6	21.4%	9	30.0%
		MALE	0	0.0%	1	3.6%	5	17.2%	3	10.7%	1	3.3%
	ASIAN OR PACIFIC ISLANDER	FEMALE	3	10.7%	3	10.7%	2	6.9%	2	7.1%	4	13.3%
		MALE	4	14.3%	3	10.7%	3	10.3%	1	3.6%	3	10.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	1	3.6%	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%	3	10.7%	1	3.3%
		MALE	0	0.0%	0	0.0%	1	3.4%	0	0.0%	0	0.0%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	$\begin{array}{c cccc} 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 $	0.0%
		MALE					1	3.4%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	2	7.1%	3	10.7%	0	0.0%	0	0.0%	1	3.3%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	3.6%	0	0.0%
SUBTOTAL BACCALA	AUREATE DEGREES		28	100.0%	28	100.0%	29	100.0%	28	100.0%	30	100.0%
TOTAL. CERTIFICA	TE & BACCALAUREATE DEGREE	S	28		28		35		28		30	

			Fall	% of	Fall	% of	Fall	% of	Fall	% of	Fall	% of
PROGRAM/DEGREE	ETHNICITY	GENDER	2013	All	2014	All	2015	All	2016	All	2017	All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA		0	0.0%	2	33.3%	0	0.0%	3	30.0%
GENETICS		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
MASTER'S*	BLACK NON-HISPANIC	FEMALE	NA		1	33.3%	0	0.0%	0	0.0%	0	0.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		0	0.0%	0	0.0%	0	0.0%	2	20.0%
		MALE	NA		0	0.0%	0	0.0%	2	20.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		0	0.0%	0	0.0%	1	10.0%	0	0.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	NA		0	0.0%	0	0.0%	4	40.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		0	0.0%	3	50.0%	3	30.0%	3	30.0%
		MALE	NA		0	0.0%	1	16.7%	0	0.0%	2	20.0%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	0	0.0%
		MALE					0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		2	66.7%	0	0.0%	0	0.0%	0	0.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL, BACCALAUR	EATE DEGREE:				<u>3</u>	100.0%	<u>6</u>	100.0%	<u>10</u>	100.0%	<u>10</u>	100.0%

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2013 – Fall 2017*

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

C.5 SHP Degrees by Program, Ethnicity, and Gender, Fall 2013 – Fall 2017*

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
DIAGNOSTIC	WHITE NON-HISPANIC	FEMALE	NA	AII	2014	28.6%	0	0.0%	4	80.0%	2017	20.0%
MEDICAL SONOGRAPHY	WHITE NON-HISPANIC	MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
					1		0					
BACCALAUREATE*	BLACK NON-HISPANIC	FEMALE	NA		1	14.3%	0	0.0%	0	0.0%	0	0.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	HISPANIC	FEMALE	NA		1	14.3%	3	50.0%	1	20.0%	3	30.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	ASIAN OR PACIFIC											
	ISLANDER	FEMALE	NA		2	28.6%	1	16.7%	0	0.0%	2	20.0%
		MALE	NA		0	0.0%	1	16.7%	0	0.0%	0	0.0%
	AMERICAN											
	INDIAN/ALASKAN NATIVE	FEMALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		0	0.0%	1	16.7%	0	0.0%	1	10.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	0	0.0%
		MALE					0	0.0%	0	0.0%	1	10.0%
	UNKNOWN OR NOT											
	REPORTED	FEMALE	NA		1	14.3%	0	0.0%	0	0.0%	1	10.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL, BACCALAUREAT	'E DEGREE:				7	100.0%	6	100.0%	5	100.0%	<u>10</u>	100.0%

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

			Fall	% of								
PROGRAM/DEGREE	ETHNICITY	GENDER	2013	All	2014	All	2015	All	2016	All	2017	All
HEALTH DISPARITIES,	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		NA		0	0.0%
DIVERSITY & ADVOCACY		MALE	NA		NA		NA		NA		0	0.0%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		NA		2	100.0%
		MALE	NA		NA		NA		NA		0	0.0%
	HISPANIC	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		NA		0	0.0%
	NATIVE	MALE	NA		NA		NA		NA		0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	MULTI-RACIAL	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
TOTAL BACCALAUREATE	DEGREES										2	100.0%

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2013 – Fall 2017

Health Disparities, Diversity and Advocacy program began conferring baccalaureate degrees in 2017 Source: UT Houston Health Science Center Registrar's Office

		CENDED	Fall	% of								
PROGRAM/DEGREE	ETHNICITY	GENDER	2013	All	2014	All	2015	All	2016	All	2017	All
HISTOTECHNOLOGY	WHITE NON-HISPANIC	FEMALE	4	33.3%	2	14.3%	1	8.3%	4	22.2%	5	33.3%
BACCALAUREATE		MALE	1	8.3%	1	7.1%	1	8.3%	0	0.0%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	2	16.7%	3	21.4%	0	0.0%	3	16.7%	0	0.0%
		MALE	0	0.0%	1	7.1%	0	0.0%	0	0.0%	1	6.7%
	HISPANIC	FEMALE	1	8.3%	0	0.0%	2	16.7%	4	22.2%	6	40.0%
		MALE	0	0.0%	1	7.1%	1	8.3%	1	5.6%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0	0.0%	3	21.4%	4	33.3%	4	22.2%	0	0.0%
		MALE	3	25.0%	1	7.1%	3	25.0%	1	5.6%	0	0.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	6.7%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	6.7%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	1	6.7%
		MALE					0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	0	0.0%	2	14.3%	0	0.0%	1	5.6%	0	0.0%
		MALE	1	8.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL BACCALAUREAT	DTAL BACCALAUREATE DEGREES			100.0%	14	100.0%	12	100.0%	18	100.0%	15	100.0%

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2013 – Fall 2017

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
MEDICAL DOSIMETRY	WHITE NON-HISPANIC	FEMALE	5	31.3%	3	18.8%	3	18.8%	1	5.3%	2	11.1%
BACCALAUREATE		MALE	4	25.0%	4	25.0%	1	6.3%	2	10.5%	2	11.1%
	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%	1	5.3%	1	5.6%
	HISPANIC	FEMALE	0	0.0%	0	0.0%	5	31.3%	3	15.8%	3	16.7%
		MALE	2	12.5%	1	6.3%	0	0.0%	3	15.8%	3	16.7%
	ASIAN OR PACIFIC ISLANDER	FEMALE	0	0.0%	4	25.0%	4	25.0%	4	21.1%	4	22.2%
		MALE	3	18.8%	3	18.8%	1	6.3%	1	5.3%	2	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					0	0.0%	0	0.0%	0	0.0%
		MALE					1	6.3%	2	10.5%	0	0.0%
	MULTI-RACIAL	FEMALE	0	0.0%	0	0.0%	1	6.3%	1	5.3%	1	5.6%
		MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	2	12.5%	1	6.3%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	0	0.0%	0	0.0%	1	5.3%	0	0.0%
TOTAL, CERTIFICATE &	BACCALAUREATE DEGREES		<u>16</u>	100.0%	<u>16</u>	100.0%	<u>16</u>	100.0%	<u>19</u>	100.0%	<u>18</u>	100.0%

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2013 – Fall 2017

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
MOLECULAR GENETIC	WHITE NON-HISPANIC	FEMALE	6	19.4%	10	37.0%	5	35.7%	6	22.2%	4	22.2%
TECHNOLOGY		MALE	4	12.9%	4	14.8%	1	7.1%	4	14.8%	1	5.6%
BACCALAUREATE	BLACK NON-HISPANIC	FEMALE	2	6.5%	0	0.0%	0	0.0%	1	3.7%	1	5.6%
		MALE	0	0.0%	0	0.0%	0	0.0%	2	7.4%	0	0.0%
	HISPANIC	FEMALE	2	6.5%	3	11.1%	1	7.1%	5	18.5%	3	16.7%
		MALE	5	16.1%	1	3.7%	3	21.4%	1	3.7%	1	5.6%
	ASIAN OR PACIFIC ISLANDER	FEMALE	6	19.4%	1	3.7%	1	7.1%	4	14.8%	4	22.2%
		MALE	1	3.2%	2	7.4%	1	7.1%	3	11.1%	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%	1	7.1%	0	0.0%	2	11.1%
		MALE	0	0.0%	0	0.0%	1	7.1%	0	0.0%	0	0.0%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	1	5.6%
		MALE					0	0.0%	1	3.7%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	5	16.1%	5	18.5%	0	0.0%	0	0.0%	0	0.0%
		MALE	0	0.0%	1	3.7%	0	0.0%	0	0.0%	0	0.0%
TOTAL, BACCALAUREA			<u>31</u>	100.0%	27	100.0%	<u>14</u>	100.0%	27	100.0%	<u>18</u>	100.0%

C.5 SHP Degrees by Program, Gender, and Ethnicity, Fall 2013– Fall 2017

PROGRAM/DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
RADIATION THERAPY	WHITE NON-HISPANIC	FEMALE	5	25.0%	7	35.0%	6	28.6%	3	13.0%	2	12.5%
BACCALAUREATE		MALE	0	0.0%	3	15.0%	0	0.0%	4	17.4%	0	0.0%
	BLACK NON-HISPANIC	FEMALE	2	10.0%	0	0.0%	1	4.8%	5	21.7%	0	0.0%
		MALE	1	5.0%	0	0.0%	0	0.0%	0	0.0%	4	25.0%
	HISPANIC	FEMALE	3	15.0%	6	30.0%	7	33.3%	2	8.7%	2	12.5%
		MALE	4	20.0%	2	10.0%	2	9.5%	0	0.0%	0	0.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	1	5.0%	1	5.0%	2	9.5%	4	17.4%	0	0.0%
		MALE	2	10.0%	0	0.0%	2	9.5%	4	17.4%	5	31.3%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	6.3%
	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%	1	4.8%	0	0.0%	0	0.0%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	1	6.3%
		MALE					0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	1	5.0%	0	0.0%	0	0.0%	0	0.0%	1	6.3%
		MALE	1	5.0%	1	5.0%	0	0.0%	1	4.3%	0	0.0%
TOTAL, CERTIFICATE A	ND BACCALAUREATE DEGREES:		<u>20</u>	100.0%	<u>20</u>	100.0%	<u>21</u>	100.0%	<u>23</u>	100.0%	<u>16</u>	100.0%

			Fall	% of								
PROGRAM/DEGREE	ETHNICITY	GENDER	2013	All	2014	All	2015	All	2016	All	2017	All
RADIOLOGICAL SCIENCES	WHITE NON-HISPANIC	FEMALE	NA		NA		NA		NA		4	20.0%
MASTER'S*		MALE	NA		NA		NA		NA		4	20.0%
	BLACK NON-HISPANIC	FEMALE	NA		NA		NA		NA		2	10.0%
		MALE	NA		NA		NA		NA		4	20.0%
	HISPANIC	FEMALE	NA		NA		NA		NA		2	10.0%
		MALE	NA		NA		NA		NA		1	5.0%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		NA		NA		NA		1	5.0%
		MALE	NA		NA		NA		NA		1	5.0%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		NA		NA		NA		0	0.0%
	NATIVE	MALE	NA		NA		NA		NA		0	0.0%
	INTERNATIONAL	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
	MULTI-RACIAL	FEMALE	NA		NA		NA		NA		1	5.0%
		MALE	NA		NA		NA		NA		0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		NA		NA		NA		0	0.0%
		MALE	NA		NA		NA		NA		0	0.0%
TOTAL BACCALAUREATE	DEGREES						_			-	20	100.0%

*Radiological Sciences program began conferring master's degrees in 2017 Source: UT Houston Health Science Center Registrar's Office

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2013 – Fall 2017

			Fall	% of								
DEGREE	ETHNICITY	GENDER	2013	Students	2014	Students	2015	Students	2016	Students	2017	Students
CERTIFICATE	WHITE NON-HISPANIC	FEMALE	0		0		0	0.0%	0		0	
		MALE	0		0		1	16.7%	0		0	
	BLACK NON-HISPANIC	FEMALE	0		0		1	16.7%	0		0	
		MALE	0		0		1	16.7%	0		0	
	HISPANIC	FEMALE	0		0		2	33.3%	0		0	
		MALE	0		0		0	0.0%	0		0	
	ASIAN OR PACIFIC ISLANDER	FEMALE	0		0		1	16.7%	0		0	
		MALE	0		0		0	0.0%	0		0	
	AMERICAN INDIAN/ALASKAN	FEMALE	0		0		0	0.0%	0		0	
	NATIVE	MALE	0		0		0	0.0%	0		0	
	INTERNATIONAL	FEMALE	0		0		0	0.0%	0		0	
		MALE	0		0		0	0.0%	0		0	
	MULTI-RACIAL	FEMALE					0	0.0%	0		0	
		MALE					0	0.0%	0		0	
	UNKNOWN OR NOT REPORTED	FEMALE	0		0		0	0.0%	0		0	
		MALE	0		0		0	0.0%	0		0	
SUBTOTAL, CERTII	FICATE		0		0		6	4.0%	0		0	
BACCALAUREATE	WHITE NON-HISPANIC	FEMALE	32	21.6%	34	23.6%	28	18.8%	29	18.8%	22	13.0%
		MALE	16	10.8%	17	11.8%	9	6.0%	14	9.1%	9	5.3%
	BLACK NON-HISPANIC	FEMALE	9	6.1%	11	7.6%	6	4.0%	12	7.8%	5	3.0%
		MALE	4	2.7%	2	1.4%	2	1.3%	6	3.9%	8	4.7%
	HISPANIC	FEMALE	20	13.5%	18	12.5%	28	18.8%	25	16.2%	33	19.5%
		MALE	12	8.1%	10	6.9%	14	9.4%	9	5.8%	8	4.7%
	ASIAN OR PACIFIC ISLANDER	FEMALE	21	14.2%	19	13.2%	25	16.8%	24	15.6%	30	17.8%
		MALE	13	8.8%	11	7.6%	12	8.1%	12	7.8%	8	4.7%
	AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	1	0.7%	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%	6	4.0%	4	2.6%	7	4.1%
		MALE	0	0.0%	0	0.0%	3	2.0%	0	0.0%	2	1.2%
	MULTI-RACIAL	FEMALE					2	1.3%	0	0.0%	3	1.8%
		MALE					2	1.3%	3	1.9%	1	0.6%
	UNKNOWN OR NOT REPORTED	FEMALE	18	12.2%	14	9.7%	0	0.0%	1	0.6%	3	1.8%
		MALE	3	2.0%	7	4.9%	0	0.0%	5	3.2%	0	0.0%
SUBTOTAL BACCA	SUBTOTAL BACCALAUREATE DEGREES			100.0%	144	100.0%	137	92.0%	144	93.5%	139	82.2%

C.6 SHP Total Degrees by Level, Ethnicity, and Gender, Fall 2013 – Fall 2017

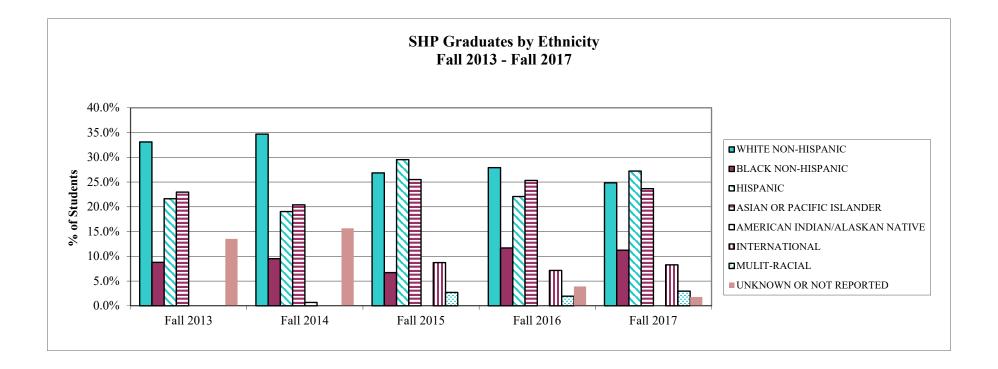
DEGREE	ETHNICITY	GENDER	Fall 2013	% of All	Fall 2014	% of All	Fall 2015	% of All	Fall 2016	% of All	Fall 2017	% of All
MASTER'S	WHITE NON-HISPANIC	FEMALE	NA		0	0.0%	2	33.3%	0	0.0%	7	4.1%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	4	2.4%
	BLACK NON-HISPANIC	FEMALE	NA		1	0.6%	0	0.0%	0	0.0%	2	1.2%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	4	2.4%
	HISPANIC	FEMALE	NA		0	0.0%	0	0.0%	0	0.0%	4	2.4%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	1	0.6%
	ASIAN OR PACIFIC ISLANDER	FEMALE	NA		0	0.0%	0	0.0%	2	20.0%	1	0.6%
		MALE	NA		0	0.0%	0	0.0%	1	10.0%	1	0.6%
	AMERICAN INDIAN/ALASKAN	FEMALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	NATIVE	MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
	INTERNATIONAL	FEMALE	NA		0	0.0%	3	50.0%	4	40.0%	3	1.8%
		MALE	NA		0	0.0%	1	16.7%	3	30.0%	2	1.2%
	MULTI-RACIAL	FEMALE					0	0.0%	0	0.0%	1	0.6%
		MALE					0	0.0%	0	0.0%	0	0.0%
	UNKNOWN OR NOT REPORTED	FEMALE	NA		2	1.4%	0	0.0%	0	0.0%	0	0.0%
		MALE	NA		0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL MASTER	TOTAL MASTER'S DEGREE:					2.0%	6	4.0%	10	6.5%	30	17.8%
TOTAL, DEGREE	TOTAL, DEGREES BY YEAR				147	100.0%	149	100.0%	154	100.0%	169	100.0%

C.7 SHP Graduates by Gender and Ethnicity, Fall 2013 – Fall 2017

Ĩ		Fall	% of								
ETHNICITY	GENDER	2013	Students	2014	Students	2015	Students	2016	Students	2017	Students
WHITE NON-HISPANIC	FEMALE	32	21.6%	34	23.1%	30	20.1%	14	9.1%	29	17.2%
	MALE	16	10.8%	17	11.6%	10	6.7%	29	18.8%	13	7.7%
BLACK NON-HISPANIC	FEMALE	9	6.1%	12	8.2%	7	4.7%	12	7.8%	7	4.1%
	MALE	4	2.7%	2	1.4%	3	2.0%	6	3.9%	12	7.1%
HISPANIC	FEMALE	20	13.5%	18	12.2%	30	20.1%	25	16.2%	37	21.9%
	MALE	12	8.1%	10	6.8%	14	9.4%	9	5.8%	9	5.3%
ASIAN OR PACIFIC ISLANDER	FEMALE	21	14.2%	19	12.9%	26	17.4%	26	16.9%	31	18.3%
	MALE	13	8.8%	11	7.5%	12	8.1%	13	8.4%	9	5.3%
AMERICAN INDIAN/ALASKAN	FEMALE	0	0.0%	1	0.7%	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%	9	6.0%	8	5.2%	10	5.9%
	MALE	0	0.0%	0	0.0%	4	2.7%	3	1.9%	4	2.4%
MULTI-RACIAL	FEMALE					2	1.3%	0	0.0%	4	2.4%
	MALE					2	1.3%	3	1.9%	1	0.6%
UNKNOWN OR NOT REPORTED	FEMALE	18	12.2%	16	10.9%	0	0.0%	1	0.6%	3	1.8%
	MALE	3	2.0%	7	4.8%	0	0.0%	5	3.2%	0	0.0%
TOTAL		148	100.0%	147	100.0%	149	100.0%	154	100.0%	169	100.0%

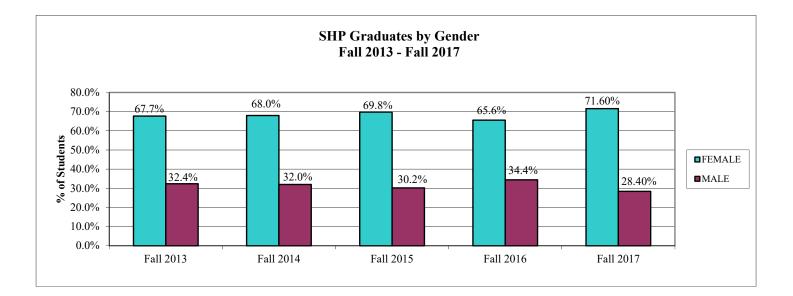
C.8 SHP Graduates by Ethnicity, Fall 2013 – Fall 2017

	Fall	% of								
ETHNICITY	2013	Students	2014	Students	2015	Students	2016	Students	2017	Students
WHITE NON-HISPANIC	49	33.1%	51	34.7%	40	26.8%	43	27.9%	42	24.9%
BLACK NON-HISPANIC	13	8.8%	14	9.5%	10	6.7%	18	11.7%	19	11.2%
HISPANIC	32	21.6%	28	19.0%	44	29.5%	34	22.1%	46	27.2%
ASIAN OR PACIFIC ISLANDER	34	23.0%	30	20.4%	38	25.5%	39	25.3%	40	23.7%
AMERICAN INDIAN/ALASKAN NATIVE	0	0.0%	1	0.7%	0	0.0%	0	0.0%	0	0.0%
INTERNATIONAL	0	0.0%	0	0.0%	13	8.7%	11	7.1%	14	8.3%
MULTI-RACIAL					0	0.0%	3	1.9%	5	3.0%
UNKNOWN OR NOT REPORTED	20	13.5%	23	15.6%	4	2.7%	6	3.9%	3	1.8%
Total	148	100.0%	147	100.0%	149	100.0%	154	100.0%	169	100.0%



	Fall	% of								
GENDER	2013	Students	2014	Students	2015	Students	2016	Students	2017	Students
FEMALE	100	67.6%	100	68.0%	104	69.8%	101	65.6%	121	71.6%
MALE	48	32.4%	47	32.0%	45	30.2%	53	34.4%	48	28.4%
Total	148	100.0%	147	100.0%	149	100.0%	154	100.0%	169	100.0%

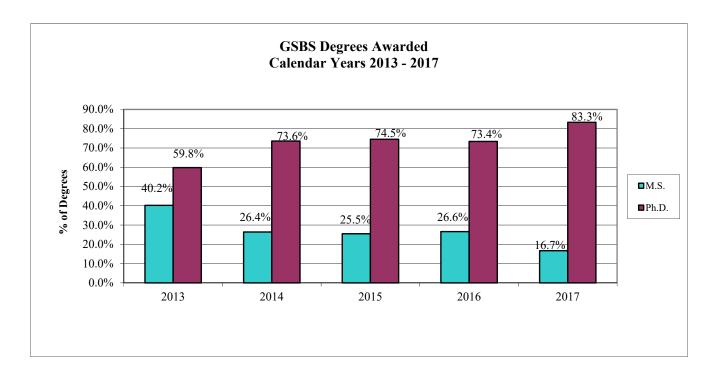
C.9 SHP Graduates by Gender, Fall 2013 – Fall 2017



DEGREE AWARDED	2013	2014	% Inc/Dec	2015	% Inc/Dec	2016	% Inc/Dec	2017	% Inc/Dec
M.S.	41	32	-28.1%	25	-28.0%	20	-25.0%	20	0.0%
Ph.D.	61	89	31.5%	73	-21.9%	56	-30.4%	75	25.3%
OVERALL	102	121	15.7%	98	-23.5%	76	-28.9%	95	20.0%

C.10 GSBS Degrees Awarded, Calendar Years 2013 – 2017*

*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	y Area of Research	Concentration,	Calendar Years 2013 – 2017
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GSBS Graduates by Area of Research Concenti		13)14	20	15	20	16	20)17
Area of Research Interest	MS	PhD								
Biochemistry										
Biochemistry and Molecular Biology	1			2		3		2		4
Biostatistics, Bioinformatics, and Systems Biology		6		2	1	2		2	1	6
Biomedical Sciences	26	13	20	16	10	5	6	4	5	
Cancer Biology		11	1	27	1	19		14		17
Cell Biology										
Cell and Regulatory Biology		2		1		3				2
Clinical and Translational Sciences					1		3		2	1
Epigenetics and Molecular Carcinogenesis								6		2
Experimental Therapeutics		7		3	1	5		6		4
Genes & Development		5		4	1	8	1	5		7
Genetic Counseling	6		7		8				8	
Human & Molecular Genetics		1		4		3	8			1
Immunology	1	4		6		8		2	1	7
Medical Physics	7	5	4	9	2	9		1	3	7
Microbiology & Molecular Genetics		2		5		1	2	8		5
Molecular Biology								4		
Molecular Carcinogenesis		1		1		4				
Molecular Pathology				1						
Neuroscience		3		8		2		2		12
Virology & Gene Therapy		1				1				
Total	41	61	32	89	25	73	20	56	20	75

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

-~ 11		s of Research Concentr	anon, carendar i car	2015 2017	
	2013	2014	2015	2016	2017
	Biophysics	Biomedical Sciences	Biomedical Sciences	Genetic Counseling	Genetic Counseling
	Medical Physics	Genetic Counseling	Genetic Counseling	Biomedical Sciences	Biomedical Sciences
	Genetic Counseling	Medical Physics	Medical Physics	Clinical and	Medical Physics
				Translational Sciences	

C.12 GSBS M.S. Program Top Areas of Research Concentration, Calendar Year 2013 – 2017

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 2013 – Fall 2017

2013	2014	2015	2016	2017
Biophysics	Cancer Biology	Cancer Biology	Cancer Biology	Cancer Biology
Cancer Biology	Biomedical Sciences	Medical Physics	Medical Physics	Neuroscience
Genes & Development*	Medical Physics	Genes & Development*	Epigenetics and Molecular Carcinogenesis*	Genes & Development*
Medical Physics*		Immunology*	Experimental Therapeutics*	Immunology*
				Microbiology & Molecular Genetics*

*Same number of graduates within given year.

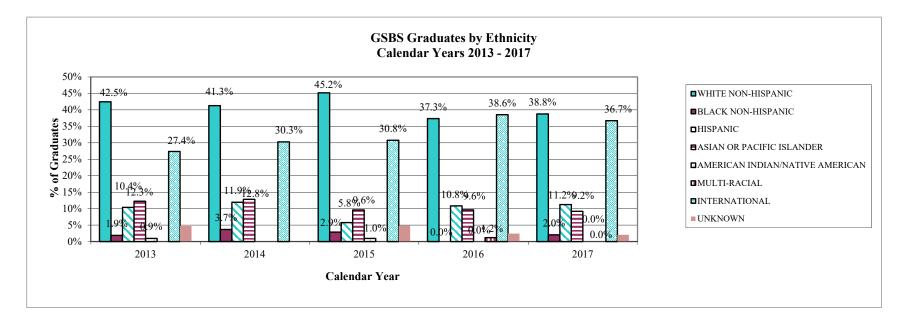
Source: UT MD Anderson Cancer Center and UTHealth Graduate School of Biomedical Sciences

	2013	% of	2014	% of	2015	% of	2016	% of	2017	% of
ETHNICITY	COUNT	Students								
WHITE NON-HISPANIC	45	42.5%	45	41.3%	47	45.2%	31	37.3%	38	38.8%
BLACK NON-HISPANIC	2	1.9%	4	3.7%	3	2.9%	0	0.0%	2	2.0%
HISPANIC	11	10.4%	13	11.9%	6	5.8%	9	10.8%	11	11.2%
ASIAN OR PACIFIC ISLANDER	13	12.3%	14	12.8%	10	9.6%	8	9.6%	9	9.2%
AMERICAN INDIAN OR ALASKAN										
NATIVE	1	0.9%	0	0.0%	1	1.0%	0	0.0%	0	0.0%
INTERNATIONAL	29	27.4%	33	30.3%	32	30.8%	32	38.6%	36	36.7%
MULTI-RACIAL					0	0.0%	1	1.2%	0	0.0%
UNKNOWN OR NOT REPORTED	5	4.7%	0	0.0%	5	4.8%	2	2.4%	2	2.0%
TOTAL	106	100.0%	109	100.0%	104	100.0%	83	100.0%	98	100.0%

C.14 GSBS Graduates by Ethnicity, Calendar Years 2013 – 2017

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

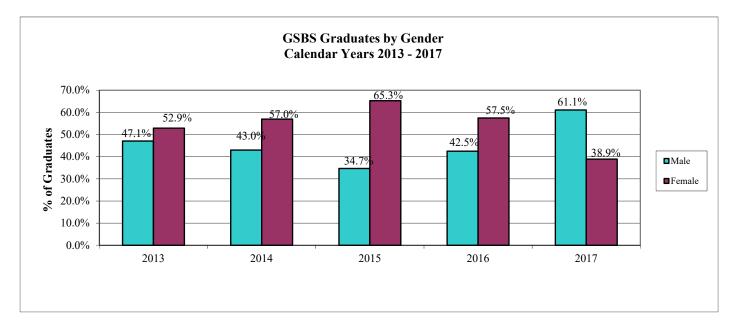
*Starting 2012, GSBS students could declare more than one ethnicity, therefore, ethnicity and degree totals may not match



	2013	% of	2014	% of	2015	% of	2016	% of	2017	% of
GENDER	COUNT	Students								
FEMALE	54	52.9%	69	57.0%	64	65.3%	46	57.5%	58	61.1%
MALE	48	47.1%	52	43.0%	34	34.7%	34	42.5%	37	38.9%
TOTAL	102	100.0%	121	100.0%	98	100.0%	80	100.0%	95	100.0%

C.15 GSBS Graduates by Gender, Calendar Years 2013 – 2017

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



D. Faculty Demographics



Making Cancer History®

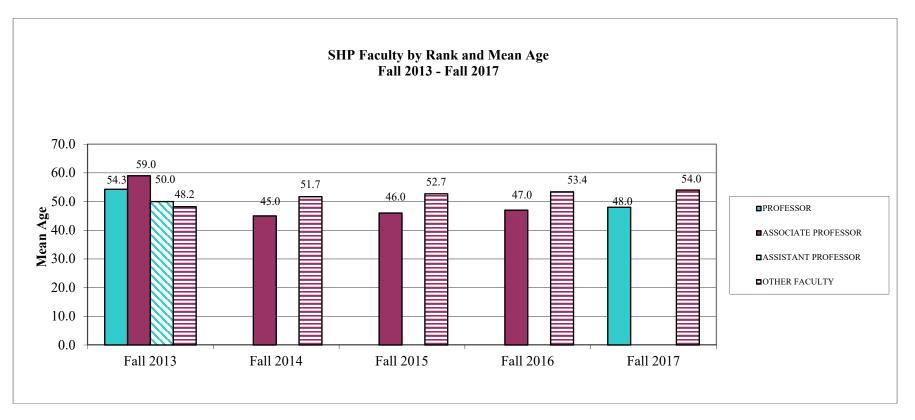
Fall 2013 Fall 2014 Fall 2015 Fall 2016 Fall 2017 MEAN MEAN MEAN MEAN MEAN COUNT COUNT COUNT COUNT **MEAN AGE BY RANK** AGE AGE AGE COUNT AGE AGE PROFESSOR 7 54.3 0 0 0 48.0 1 ASSOCIATE PROFESSOR 4 59.0 45.0 1 46.0 1 47.0 0 1 ASSISTANT PROFESSOR 50.0 0 0 0 0 1 33 48.2 56 51.7 54 52.7 62 53.4 71 54.0 OTHER FACULTY

D.1 SHP Faculty by Rank and Mean Age, Fall 2013 – Fall 2017*

**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

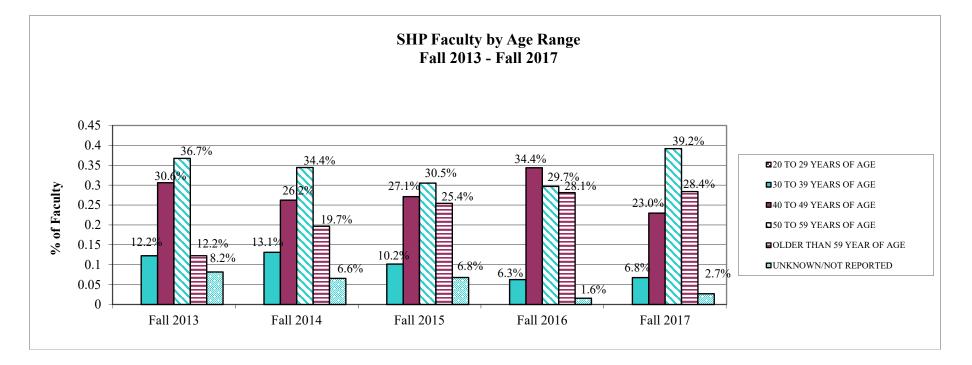


	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
AGE RANGE	COUNT	Faculty								
20 TO 29 YEARS OF AGE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
30 TO 39 YEARS OF AGE	6	12.2%	8	13.1%	6	10.2%	4	6.3%	5	6.8%
40 TO 49 YEARS OF AGE	15	30.6%	16	26.2%	16	27.1%	22	34.4%	17	23.0%
50 TO 59 YEARS OF AGE	18	36.7%	21	34.4%	18	30.5%	19	29.7%	29	39.2%
OLDER THAN 59 YEARS OF AGE	6	12.2%	12	19.7%	15	25.4%	18	28.1%	21	28.4%
UNKNOWN/NOT REPORTED	4	8.2%	4	6.6%	4	6.8%	1	1.6%	2	2.7%
TOTAL	49	100.0%	61	100.0%	59	100.0%	64	100.0%	74	100.0%

D.2 SHP Faculty by Age Range, Fall 2013 – Fall 2017*

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog

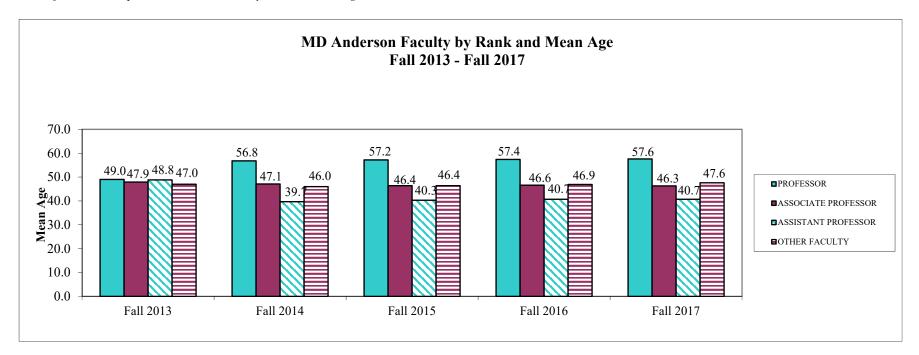


D.3 MD Anderson Faculty by Rank and Mean Age, Fall 2013 - Fall 2017

	Fa	all 2013	Fa	all 2014	Fa	all 2015	F	all 2016	Fa	all 2017
RANK	<u> </u>		COUNT	MEAN AGE						
PROFESSOR	334	49.0	339	56.8	333	57.2	334	57.4	344	57.6
ASSOCIATE PROFESSOR	145	47.9	142	47.1	134	46.4	143	46.6	146	46.3
ASSISTANT PROFESSOR	117	48.8	120	39.7	120	40.3	113	40.7	108	40.7
OTHER FACULTY	1553	47.0	1586	46.0	1693	46.4	1728	46.9	1715	47.6
TOTAL/OVERALL	2149	47.8	2187	47.4	2280	47.7	2318	48.1	2313	48.7

Source: Certified CBM008

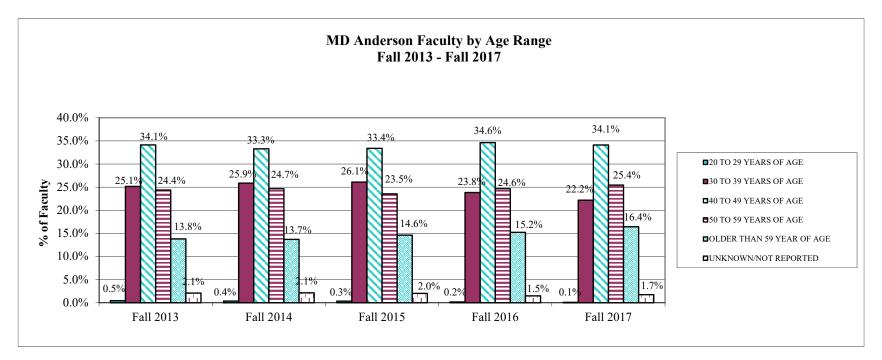
Age at Time of CBM008 Report Submission; Faculty with unknown age are not included



	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
AGE RANGE	COUNT	Faculty								
20 TO 29 YEARS OF AGE	10	0.5%	8	0.4%	8	0.3%	4	0.2%	2	0.1%
30 TO 39 YEARS OF AGE	552	25.1%	578	25.9%	607	26.1%	561	23.8%	522	22.2%
40 TO 49 YEARS OF AGE	749	34.1%	744	33.3%	777	33.4%	815	34.6%	803	34.1%
50 TO 59 YEARS OF AGE	535	24.4%	551	24.7%	548	23.5%	580	24.6%	599	25.4%
OLDER THAN 59 YEARS OF AGE	303	13.8%	306	13.7%	340	14.6%	358	15.2%	387	16.4%
UNKNOWN/NOT REPORTED	46	2.1%	48	2.1%	47	2.0%	35	1.5%	41	1.7%
TOTAL	2195	100.0%	2235	100.0%	2327	100.0%	2353	100.0%	2354	100.0%

D.4 MD Anderson Faculty by Age Range, Fall 2013 - Fall 2017

Source: Certified CBM008



		Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
ETHNICITY	GENDER	COUNT	Faculty								
WHITE NON-HISPANIC	FEMALE	12	24.5%	19	31.1%	19	32.2%	20	31.3%	20	27.0%
	MALE	15	30.6%	14	23.0%	14	23.7%	16	25.0%	20	27.0%
BLACK NON-HISPANIC	FEMALE	3	6.1%	7	11.5%	6	10.2%	4	6.3%	4	5.4%
	MALE	4	8.2%	3	4.9%	3	5.1%	3	4.7%	4	5.4%
HISPANIC	FEMALE	1	2.0%	1	1.6%	1	1.7%	1	1.6%	1	1.4%
	MALE	1	2.0%	0	0.0%	0	0.0%	0	0.0%	1	1.4%
ASIAN	FEMALE	3	6.1%	4	6.6%	4	6.8%	5	7.8%	5	6.8%
	MALE	5	10.2%	7	11.5%	6	10.2%	7	10.9%	8	10.8%
AMERICAN INDIAN/NATIVE	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
AMERICAN	MALE	1	2.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
INTERNATIONAL	FEMALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
UNKNOWN	FEMALE	2	4.1%	3	4.9%	3	5.1%	2	3.1%	6	8.1%
	MALE	1	2.0%	2	3.3%	2	3.4%	4	6.3%	5	6.8%
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	2.0%	1	1.6%	1	1.7%	2	3.1%	0	0.0%
	MALE	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
TOTAL		49	100.0%	61	100.0%	59	100.0%	64	100.0%	74	100.0%

D.5 SHP Faculty by Ethnicity and Gender, Fall 2013 – Fall 2017*

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

D.6 MD Anderson Faculty by Ethnicity and Gender, Fall 2013 - Fall 2017*

		Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
ETHNICITY	GENDER	COUNT	Faculty								
WHITE NON-HISPANIC	FEMALE	426	19.4%	382	17.1%	399	17.2%	397	16.9%	402	17.1%
	MALE	652	29.7%	667	29.8%	691	29.8%	682	29.0%	707	30.1%
BLACK NON-HISPANIC	FEMALE	26	1.2%	42	1.9%	42	1.8%	45	1.9%	45	1.9%
	MALE	41	1.9%	25	1.1%	25	1.1%	26	1.1%	25	1.1%
HISPANIC	FEMALE	51	2.3%	54	2.4%	54	2.3%	56	2.4%	59	2.5%
	MALE	91	4.1%	95	4.3%	86	3.7%	101	4.3%	99	4.2%
ASIAN	FEMALE	267	12.2%	277	12.4%	298	12.8%	311	13.2%	317	13.5%
	MALE	431	19.6%	451	20.2%	444	19.1%	461	19.6%	464	19.8%
AMERICAN INDIAN/NATIVE	FEMALE	2	0.1%	4	0.2%	3	0.1%	3	0.1%	2	0.1%
AMERICAN	MALE	3	0.1%	1	0.0%	1	0.0%	1	0.0%	1	0.0%
INTERNATIONAL	FEMALE	1	0.0%	82	3.7%	107	4.6%	89	3.8%	61	2.6%
	MALE	0	0.0%	113	5.1%	123	5.3%	121	5.1%	99	4.2%
UNKNOWN	FEMALE	13	0.6%	10	0.4%	10	0.4%	12	0.5%	18	0.8%
	MALE	22	1.0%	23	1.0%	24	1.0%	34	1.4%	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	1	0.0%	1	0.0%	1	0.0%	1	0.0%	1	0.0%
TWO OR MORE RACES	FEMALE	51	2.3%	4	0.2%	7	0.3%	6	0.3%	5	0.2%
	MALE	115	5.2%	2	0.1%	5	0.2%	5	0.2%	6	0.3%
TOTAL		2195	100.0%	2235	100.0%	2322	100.0%	2353	100.0%	2347	100.0%

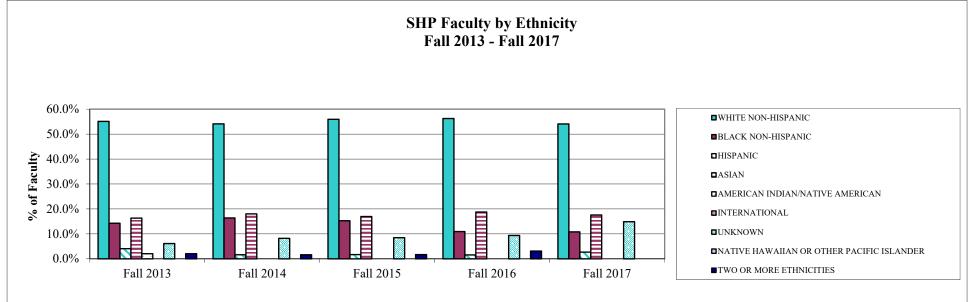
*Does not include adjunct faculty Source: Certified CBM008

D.7 SHP Faculty by Ethnicity, Fall 2013 – Fall 2017*

	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
ETHNICITY	COUNT	Total								
WHITE NON-HISPANIC	27	55.1%	33	54.1%	33	55.9%	36	56.3%	40	54.1%
BLACK NON-HISPANIC	7	14.3%	10	16.4%	9	15.3%	7	10.9%	8	10.8%
HISPANIC	2	4.1%	1	1.6%	1	1.7%	1	1.6%	2	2.7%
ASIAN	8	16.3%	11	18.0%	10	16.9%	12	18.8%	13	17.6%
AMERICAN INDIAN/NATIVE AMERICAN	1	2.0%	0	0.0%	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	6.1%	5	8.2%	5	8.5%	6	9.4%	11	14.9%
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	2.0%	1	1.6%	1	1.7%	2	3.1%	0	0.0%
TOTAL	49	100.0%	61	100.0%	59	100.0%	64	100.0%	74	100.0%

**Does not include adjunct faculty*

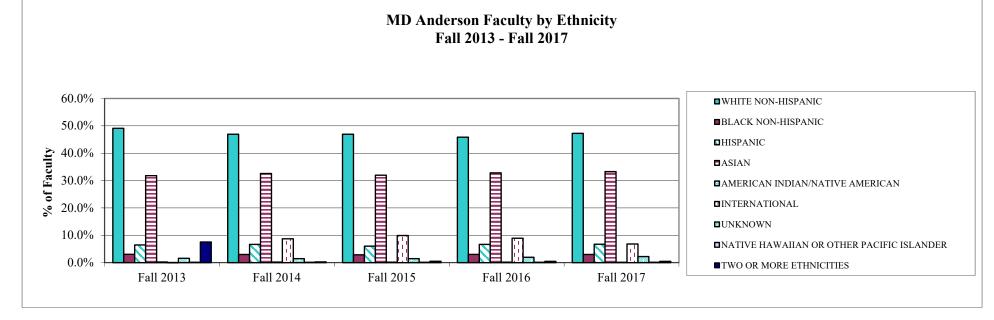
Source: Certified CBM008 and SHP Web Catalog



	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
ETHNICITY	COUNT	Faculty								
WHITE NON-HISPANIC	1078	49.1%	1049	46.9%	1090	46.9%	1079	45.9%	1109	47.3%
BLACK NON-HISPANIC	67	3.1%	67	3.0%	67	2.9%	71	3.0%	70	3.0%
HISPANIC	142	6.5%	149	6.7%	140	6.0%	157	6.7%	158	6.7%
ASIAN	698	31.8%	728	32.6%	742	32.0%	772	32.8%	781	33.3%
AMERICAN INDIAN/NATIVE AMERICAN	5	0.2%	5	0.2%	4	0.2%	4	0.2%	3	0.1%
INTERNATIONAL	1	0.0%	195	8.7%	230	9.9%	210	8.9%	160	6.8%
UNKNOWN	35	1.6%	33	1.5%	34	1.5%	46	2.0%	52	2.2%
NATIVE HAWAIIAN OR OTHER PACIFIC										
ISLANDER	3	0.1%	3	0.1%	3	0.1%	3	0.1%	3	0.1%
TWO OR MORE RACES	166	7.6%	6	0.3%	12	0.5%	11	0.5%	11	0.5%
TOTAL	2195	100.0%	2235	100.0%	2322	100.0%	2353	100.0%	2347	100.0%

D.8 MD Anderson Faculty by Ethnicity, Fall 2013 - Fall 2017*

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

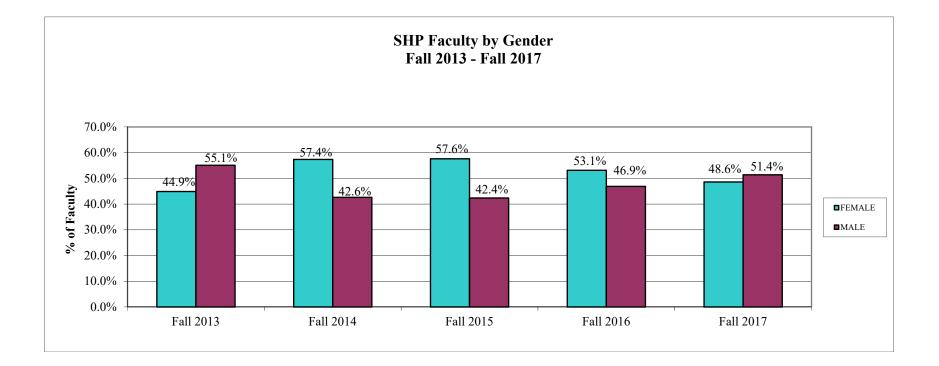


	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
GENDER	COUNT	Total								
FEMALE	22	44.9%	35	57.4%	34	57.6%	34	53.1%	36	48.6%
MALE	27	55.1%	26	42.6%	25	42.4%	30	46.9%	38	51.4%
TOTAL	49	100.0%	61	100.0%	59	100.0%	64	100.0%	74	100.0%

D.9 SHP Faculty by Gender, Fall 2013 – Fall 2017*

*Does not include adjunct faculty

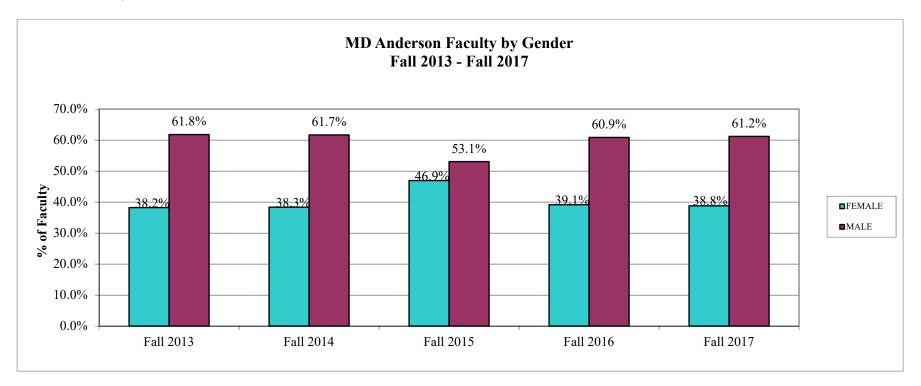
Source: Certified CBM008 and SHP Web Catalog



	Fall 2013	% of	Fall 2014	% of	Fall 2015	% of	Fall 2016	% of	Fall 2017	% of
GENDER	COUNT	Total								
FEMALE	839	38.2%	857	38.3%	922	46.9%	921	39.1%	911	38.8%
MALE	1356	61.8%	1378	61.7%	1042	53.1%	1432	60.9%	1436	61.2%
TOTAL	2195	100.0%	2235	100.0%	1964	100.0%	2353	100.0%	2347	100.0%

D.10 MD Anderson Faculty by Gender, Fall 2013 - Fall 2017

Source: Certified CBM008

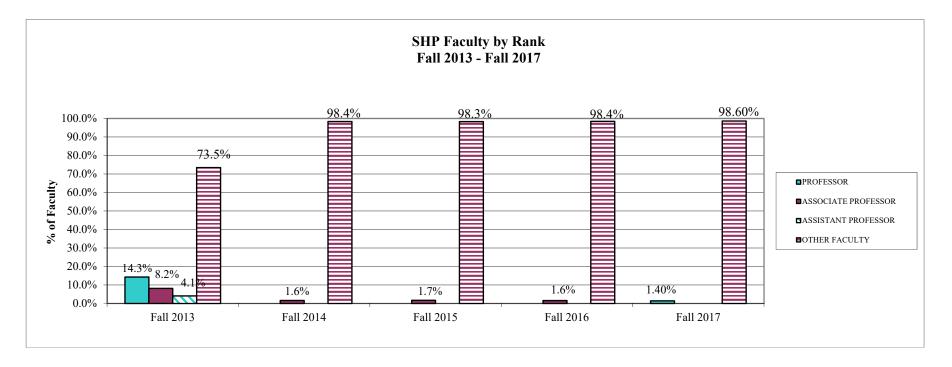


	Fa	ll 2013		ŀ	Fall 2014		Fa	all 2015		Fa	all 2016		Fa	all 2017	
		% of			% of			% of			% of			% of	
RANK	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE
PROFESSOR	7	14.3%	3.00	0	0.0%	0.00	0	0.0%	0.00	0	0.0%	0.00	1	1.4%	1.00
ASSOCIATE															
PROFESSOR	4	8.2%	2.00	1	1.6%	1.00	1	1.7%	1.00	1	1.6%	1.00	0	0.0%	0.00
ASSISTANT															
PROFESSOR	2	4.1%	0.00	0	0.0%	0.00	0	0.0%	0.00	0	0.0%	0.00	0	0.0%	0.00
OTHER FACULTY	36	73.5%	23.00	60	98.4%	28.00	58	98.3%	26.00	63	98.4%	25.00	73	98.6%	26.00
TOTAL	49	100.0%	28.00	61	100.0%	29.00	59	100.0%	27.00	64	100.0%	26.00	74	100.0%	27.00

D.11 SHP Faculty by Rank, Fall 2013 – Fall 2017*

*Does not include adjunct faculty

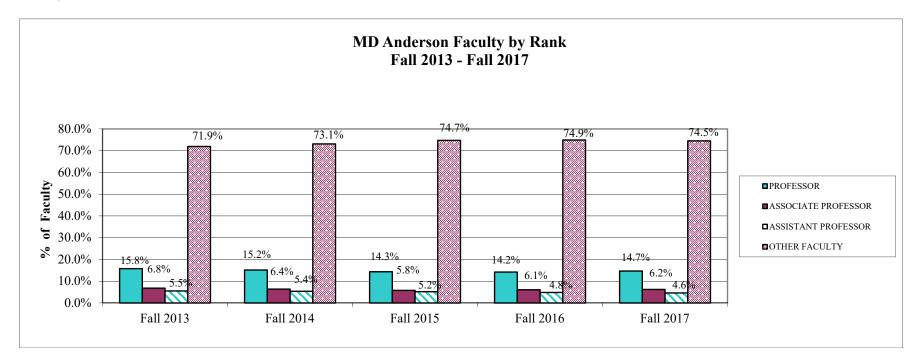
Source: Certified CBM008 and SHP Web Catalog



]	Fall 2013			Fall 2014			Fall 2015			Fall 2016		F	all 2017	
		% OF			% OF			% OF			% OF			% OF	
FACULTY RANK	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE	COUNT	ALL	FTE
PROFESSOR	346	15.8%	259.31	339	15.2%	338.00	333	14.3%	332.00	334	14.2%	326.00	344	14.7%	342.96
ASSOCIATE															
PROFESSOR	149	6.8%	110.37	142	6.4%	142.00	134	5.8%	134.00	143	6.1%	136.00	146	6.2%	145.99
ASSISTANT															
PROFESSOR	121	5.5%	91.40	120	5.4%	120.00	120	5.2%	120.00	113	4.8%	111.00	108	4.6%	107.99
OTHER FACULTY	1579	71.9%	1256.51	1634	73.1%	1126.99	1735	74.7%	1159.77	1763	74.9%	1145	1749	74.5%	1194.02
TOTAL	2195	100.0%	1717.59	2235	100.0%	1726.99	2322	100.0%	1745.77	2353	100.0%	1718	2347	100.0%	1790.96

D.12 MD Anderson Faculty by Rank, Fall 2013 - Fall 2017

Source: Certified CBM008



	F	all 2013		F	all 2014		F	all 2015		F	all 2016		F	all 2017	
	MEAN			MEAN			MEAN			MEAN			MEAN		
RANK	SALARY	COUNT	FTE												
PROFESSOR	\$114,024	3	3.00	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00	\$141,797	1	1.00
ASSOCIATE															
PROFESSOR	\$167,831	2	2.00	\$122,101	1	1.00	\$126,069	1	1.00	\$130,797	1	1.00	\$0	0	0.00
ASSISTANT															
PROFESSOR	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00	\$0	0	0.00
OTHER															
FACULTY	\$108,088	23	23.00	\$118,080	28	28.00	\$118,898	26	26.00	\$121,905	25	25.00	\$126,468	26	26.00
OVERALL	\$112,991	28	28.00	\$118,219	29	29.00	\$118,219	27	27.00	\$122,247	26	26.00	\$127,035	27	27.00

D.13 SHP Mean Faculty* Salaries by Rank, Fall 2013 - Fall 2017

*Does not include adjunct faculty

Source: Certified CBM008 and SHP Web Catalog

D.14 MD Anderson Cancer Center Mean Faculty* Salaries by Rank, Fall 2013 - Fall 2017

	Fall 2013				Fall 2014			Fall 2015			Fall 2016			Fall 2017	
RANK	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE	MEAN SALARY	COUNT	FTE
NAM	SALANI	COUNT	FIE	SALANI	COUNT	FIL	SALANI	COUNT	L I F	SALANI	COUNT	FIE	SALANI	COUNT	FIE
PROFESSOR	\$236,794	259	257.81	\$368,869	338	338.00	\$377,678	328	328	\$395,709	333	332.74	\$392,393	342	341.95
ASSOCIATE PROFESSOR	\$235,044	111	109.48	\$226,042	142	142.00	\$242,935	134	134	\$246,703	143	143	\$241,026	146	145.98
	\$255,044	111	109.40	\$220,042	142	142.00	\$272,933	154	134	\$240,705	145	145	\$241,020	140	145.96
ASSISTANT PROFESSOR	\$233,434	91	91.00	\$190,556	120	120.00	\$186,666	120	120	\$196,586	113	113	\$198,740	108	107.99
OTHER															
FACULTY	\$219,443	1257	1251.41	\$199,450	1126	1118.65	\$211,772	1151	1143.23	\$227,605	1178	1170.02	\$230,079	1198	1186.2
OVERALL	\$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	\$260,026	1,794	1,782.12

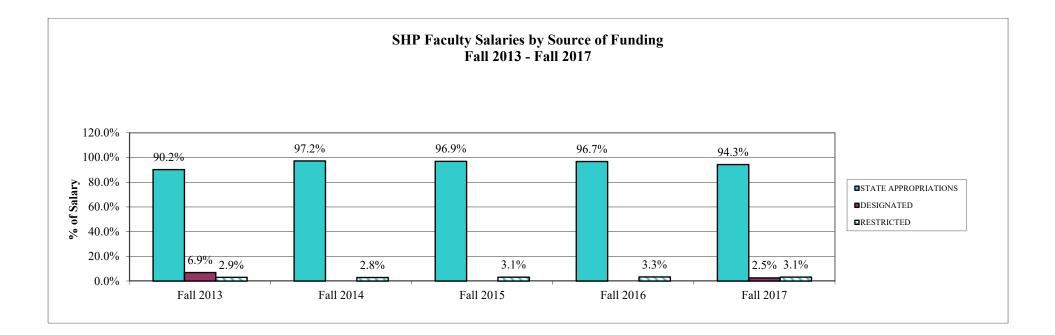
*Includes only faculty with non-zero salary and total appointment greater than or equal to 50%. Source: Certified CBM008

	Fall 2	Fall 2013		Fall 2014		Fall 2015		Fall 2016		017
		% OF		% OF		% OF		% OF		% OF
SOURCE OF FUNDING	Sum	ALL	Sum	ALL	Sum	ALL	Sum	ALL	Sum	ALL
STATE APPROPRIATIONS	\$2,853,532	90.2%	\$3,331,857	97.2%	\$3,116,594	96.9%	\$3,074,568	96.7%	\$3,235,469	94.3%
DESIGNATED	\$217,100	6.9%	\$0	0.0%	\$0	0.0%	\$0	0.0%	\$87,000	2.5%
RESTRICTED	\$93,126	2.9%	\$96,482	2.8%	\$100,824	3.1%	\$103,849	3.3%	\$107,484	3.1%
TOTAL	\$3,163,758	100.0%	\$3,428,339	100.0%	\$3,217,418	100.0%	\$3,178,417	100.0%	\$3,429,953	100.0%

D.15 SHP Faculty Salaries by Source of Funds, Fall 2013 – Fall 2017*

*Does not include adjunct faculty

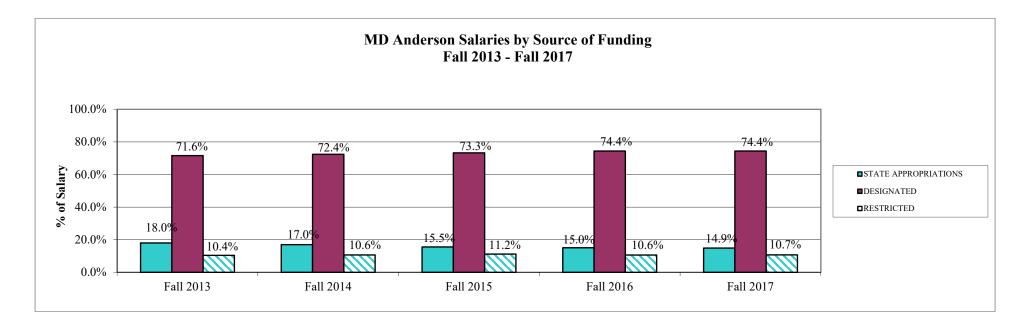
Source: Certified CBM008 and SHP Web Catalog



D.16 MD Anderson Faculty Salaries by Source of Funds, Fall 2013 - Fall 2017

	Fall 2013		Fall 2014		Fall 20	Fall 2015)16	Fall 2017	
		% of		% of		% of		% of		% of
SOURCE OF FUNDING	Sum	Total	Sum	Total	Sum	Total	Sum	Total	Sum	Total
STATE APPROPRIATIONS	\$69,612,503	18.0%	\$69,073,177	17.0%	\$69,073,177	17.0%	\$67,937,456	15.2%	\$69,819,178	14.9%
DESIGNATED	\$276,803,555	71.6%	\$294,333,847	72.4%	\$294,333,847	72.4%	\$331,107,637	74.3%	\$349,164,229	74.4%
RESTRICTED	\$40,196,501	10.4%	\$43,220,286	10.6%	\$43,220,286	10.6%	\$46,502,305	10.4%	\$50,216,106	10.7%
TOTAL	\$386,612,559	100.0%	\$406,627,310	100.0%	\$406,627,310	100.0%	\$445,547,398	100.0%	\$469,199,513	100.0%

Source: Certified CBM008



D.17 MD Anderson Faculty American Association for Advancement of Science Fellows Appointments Fiscal Year 2018

Name	Department
Jeffrey Gershenwald, M.D	Surgical Oncology
Patrick Hwu, M.D.	Cancer 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

		Date of Last	Length of
Program	Accrediting Agency	Review	Certification
MS and PhD Program	Southern Association of		
	Colleges and Schools	2010	10 years
	(SACS)		
MS with specialization in	American Board of Genetic	2014	Q 1/2017G
Genetic Counseling	Counseling (ABGC)	2014	8 years
MS and PhD with specialization	Commission on		
in Medical Physics	Accreditation of Medical	2018	5 1100
	Physics Educational	2018	5 years
	Programs (CAMPEP)		

E.1.3 Accredited Medical Programs Schedule

Institutional ACGME* Review: March 16, 2019

Program	Accrediting Agency	Accreditation Effective Date
Blood Banking & Transfusion Medicine	ACGME	January 14, 2019
Chemical Pathology	ACGME	January 14, 2019
Complex General Surgical Oncology	ACGME	January 17, 2019
	ACGME	J
Cytopathology		January 14, 2019
Dermatopathology	ACGME	January 14, 2019
Gynecologic Oncology	ACGME	Initial Accreditation – April 27, 2017
Hematology and Oncology	ACGME	September 28,2018
Hematopathology	ACGME	January 14, 2019
Hospice and Palliative Care	ACGME	January 16, 2019
Molecular Genetics Pathology	ACGME	January 14, 2019
Musculoskeletal Oncology	ACGME	January 18, 2018
Ophthalmic Plastic & Reconstructive Surgery	ACGME	January 3, 2019
Pain Management	ACGME	January 28, 2019
Pediatric Hematology/Oncology	ACGME	January 28, 2019
Micrographic surgery and dermatologic oncology (formerly known as Procedural	ACGME	L 4 2010
Dermatology)	ACCME	January 4, 2019
Radiation Oncology	ACGME ACGME	January 16, 2019
Breast Pathology Cancer Biomarker Pathology	ACGME	January 14, 2019 January 14, 2019
Gastrointestinal & Liver Pathology	ACGME	January 14, 2019 January 14, 2019
Gastronitestinar & Liver Fathology Genitourinary Pathology	ACGME	January 14, 2019 January 14, 2019
Gynecologic Oncology Pathology	ACGME	January 14, 2019
Head & Neck Pathology	ACGME	January 14, 2019
Soft Tissue Pathology	ACGME	January 14, 2019
Surgical Pathology	ACGME	January 14, 2019
Thoracic Pathology	ACGME	January 14, 2019
Thoracic Surgery	ACGME	January 11, 2019
Vascular and Interventional Radiology	ACGME	October 8, 2018

* Accreditation Council for Graduate Medical Education

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

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

Year	# of Graduates	# Graduates Taking BOC Exam	% Passing	Program Mean BOC Score	National Mean BOC Score
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
2017	14	11	91%	548	509

E.2.2 Program in Cytogenetic Technology - Registry Exam Scores

	2008	2009	2010**	2011***	2012	2013	2014	2015	2016	2017
Program Part I	81.00	75	590	516	456	495	484	544	527	512
National Part I	78.83	73.72	516	468	456	494	455	480	453	458
Program Part II	92.15	77*	700							
National Part II	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.

E.2.3 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			
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			
2017	15 HTL	15 HTL	93%	500	463	9	NA	Discontinued	NA	NA			

Program in Histotechnology erformance on ASCP Board of Certification Exam

		MD ANDERSON Program in Histotechnology			NATIONAL Programs in Histotechnology			RSON n in nology	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
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
2017	15 HTL	15	93%	9	176	66%	Discontinued	NA	Discontinued	NA

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

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

Semester	Number of Courses/Rotations	Number of Faculty/Lecturers	Number of Course/Rotation Evaluations	Number of Faculty/Lecturer Evaluations	Number of Total Evaluations
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
Fall 2017	96	47	35	884	919
Spring 2018	87	52	19	676	695
Summer 2018	54	37	111	428	539

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

E.3.2 School of Health Professions Surveys

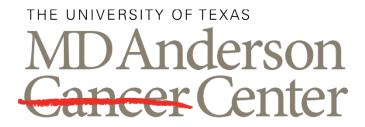
SHP* Program Evaluation by Program and Year

FY	CLS	CGT	СТ	DI	НТ	MD	MGT	RT	DG	TOTALS
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
2017	0	0	0	0	0	0	0	0	0	0

*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®

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 2018 Section F: Administrative Reporting Measures

F.1 MD Anderson Performance Measures Reported to the Legislative Budget Board*									
Performance Measure	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017				
Total number of outpatient visits	1,338,706	1,363,008	1,440,684	1,404,329	1,441,403				
Total number of inpatient days	207,555	202,636	202,483	198,080	202,411				
Net revenue as a percent of gross revenues	52.42%	51.32%	51.58%	49.73%	48.89%				
Net revenue per equivalent patient day	4,275.19	4,483.74	4,733.62	4,689.28	4,889.49				
Operating expenses per equivalent patient day	3,735.14	3,776.00	3,837.72	4,269.33	4,102.10				
Personnel expenses as a percent of operating expenses	58.15%	58.08%	67.80%	57.03%	57.67%				
T otal number of residents	168	166	169	156	153				
Minority residents as a percent of total residents	10.12%	7.23%	5.92%	8.97%	10.46%				
Percent of residency completers practicing in Texas	49.10%	42.00%	38.00%	33.00%	29.00%				
Total gross patient charges for un-sponsored charity care provided in state facilities									
Total uncompensated charity care provided in state facilities (costs)	163,452,884	130,077,190	106,306,319	213,856,290	102,467,082				
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	61,892,267	66,666,187	65,221,977	73,425,489	76,907,485				
Administrative cost as a percent of total expenditures	7.56%	7.72%	3.10%	2.87%	2.95%				
Outpatient-related charges as a percent of all charges by faculty	75.72%	95.15%	116.43%	57.87%	129.21%				
Percent of charges to managed care contracts by faculty	52.06%	57.87%	53.10%	53.55%	54.88%				
Total external research expenditures	373,522,114	406,622,738	447,077,363	451,384,835	539,621,032				
External research expenditures as percent of total state appropriations	15.30%	16.39%	17.06%	15.87%	19.26%				
External research expenditures as percent of state appropriations for research	3463.31%	3241.21%	3254.59%	3598.02%	3928.28%				
Value of lost or stolen property	85,593	260,000	203,169	204,118	247,808				
Lost or stolen property as a percent of total inventoried property lost or stolen	0.03%	0.11%	0.04%	0.06%	0.08%				
Allied health enrollment	291	318	317	339	357				
Percent of allied health graduates passing the certification/licensure exam on the first attempt	92.00%	90.00%	90.00%	90.00%	90.00%				
Percent of allied health graduates licensed or certified in Texas	84.00%	90.00%	90.00%	90.00%	100.00%				
Graduate Training in Biomedical Sciences	384	384	350	309	295				
MD Anderson students attending GSBS; from GSBS Data Tables									
Total Number of Post-doctoral Trainees	747	730	774	775	756				
Number not reported to LBB; from MD Anderson Trainee Support Services									
Total Number of Research Trainees									
	1,743	1,853	1,890	1,847	1,779				

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

The University of Texas MD Anderson Cancer Center Accountability Report January 2018 <u>F.2 Health Related Institutions Performance Measures Definitions</u>

Total Number of Outpatient Visits

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

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

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

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

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

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

Calculation Type: Non-cumulative.

New Measure: No.

Desired Performance: Higher than target.

Total Number of Inpatient Days

Definition: An "inpatient day" occurs when an individual, who is admitted by institutional faculty, or postgraduate 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.

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.

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.

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.

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.

MD Anderson Fact Book Academic Year 2018 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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.

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.

MD Anderson Fact Book Academic Year 2018 Section F: Administrative Reporting Measures

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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.

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.

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.

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 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.

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.

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.

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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.

The University of Texas MD Anderson Cancer Center Accountability Report January 2018 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.

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.

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.

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.

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.

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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.

The University of Texas MD Anderson Cancer Center Accountability Report January 2018 F.3 Definitions of Performance Measures Not Submitted to the Legislative Budget Board

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

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

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

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

TOTAL # MD OR DO RESIDENTS:

The total actual residents for 2018 was lower than 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 # OUTPATIENT VISITS:

During FY 2016, the institution embarked on one of its largest clinical and business transformations: the Electronic Health Record (EHR) OneConnect effort. The optimization of the EHR returned the institution to pre-implementation productivity levels, however slightly below the target.

AVG COST TUITION AND FEES 15 SCH:

Tuition and fee rates as approved by the Board of Regents.

MINORITY ADMISSIONS AS % 1ST-YEAR:

Minority admission as a percent of 1st year increased from last year and is above the target.

% STUDENTS RECEIVING FINANCIAL AID:

The percent of students receiving financial aid increased as compared to last year, but it is slightly lower than target.

MINORITY RESIDENTS AS % TOTAL:

Percentage increased as compared to last year. Slightly exceeding the target.

% ALLIED HEALTH GRADS LICENSED – TX:

Our graduates exceeded the target for passing board certifications. Students need this certification to practice in Texas.

% RESID COMPLETERS PRACTICE IN TX:

While the rate is slightly lower than the target, it improved as compared to the previous fiscal year. The institution is not a medical school, and as such does not have primary care residents.

TOTAL UNCOMPENSATED CARE PROV. FAC.:

The variance resulted from the shift in the payor mix - with Medicare increasing as compared to the prior year.

ADM COST AS % TOTAL EXPENDITURES:

As a result of hospital and clinic expenditures increasing at a faster rate than institutional support expenditures.

TTL UNCOMP. CARE PROV. ST. FACILITY: MDACC experienced a significant decrease in the actual FY 2017 Uncompensated Care, particularly Technical related as compared to the Technical related target. Of the three areas comprising Technical related UCC, i.e. Medicare, Medicaid and Indigent, the decrease was mainly Medicare.

TOTAL EXTERNAL RESEARCH EXPENDITURE: Increasing research expenditures for the institution. The FY 2018 amount is similar to that reported in FY 2017.

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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

Degrees and Certificates Awarded

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

	2016	2017	2018	Dorsont Change
	Count	Count	Count	Percent Change
Total	148	154	169	14.2 %
Certificate				
Associate				
Bachelor's	142	144	139	-2.1 %
Master's	6	10	30	400.0 %
Doctoral Research Scholarship				
Doctoral Professional Practice				

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.

	2016	2017	2018	Dereent Change
	Count	Count	Count	Percent Change
Undergraduates Receiving an Award	91	75	73	-19.8 %

Fall Headcount

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

	2016	2017	2018	Descent Ober an
	Count	Count	Count	Percent Change
Total	339	357	376	10.9 %
Male	104	106	92	-11.5 %
Female	235	251	284	20.9 %
Total	339	357	376	10.9 %
White	85	84	94	10.6 %
African American	41	42	28	-31.7 %
Hispanic	96	108	122	27.1 %
Asian	79	86	90	13.9 %
International	27	25	31	14.8 %
Other	11	12	11	0.0 %

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

Completion by Selected Program Area

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

	2016	2017	2018	Borcont Chango
	Count	Count	Count	Percent Change
Total				
Pharmacy				
Dental				
Medical				
Audiology				
Physical Therapy				
Nursing Practice				

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.

	2015		2016		20	Point	
	Count	Count Percent Co		Percent	Count	Percent	Change
Total	98	77.2 %	101	72.7 %	96	66.7 %	-10.5
Working Only	89	70.1 %	92	66.2 %	88	61.1 %	-9.0
Enrolled Only	5	3.9 %	3	2.2 %	3	2.1 %	-1.8
Working and Enrolled	4	3.1 %	6	4.3 %	5	3.5 %	0.4

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.

	2014	2015	2016	Point Change	
	Pct	Pct	Pct	Point Change	
Median	45.7 %	52.2 %	42.0 %	-0.0371	

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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.

	2016	2017	2018	Point Change	
	Pct	Pct	Pct		
Associate				0.0	
Bachelor's	57.0 %	56.6 %	51.8 %	-5.2	
Total	57.0 %	56.6 %	51.8 %	-5.2	

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.

	2017	2018	2019	Percent Change
	Amount	Amount Amount Per		Percent Change
Average Tuition and Fees	\$5,165	\$5,274	\$5,637	9.1 %

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.

	2017	2018	2019	Percent Change
	Count	Count	Count	Fercent Change
Funded ACGME/AOA Resident Physicians (Total for years 1-7)	135	151	147	8.9 %

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.

	2016	2017	2018	Percent Change
	Pct	Pct	Pct	Fercent Change
% Medical School Graduates				
% Med Grads Entering Prim Care Res				
% of Med Residency Completers	33.0 %	29.0 %	31.0 %	-6.1 %

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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.

	2015		2016		20	Point	
	Count	Percent	Count	Percent	Count	Percent	Change
Pell	119	39.1 %	108	34.0 %	112	34.9 %	-4.2
No Pell	185	60.9 %	210	66.0 %	209	65.1 %	4.2

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.

		2016			2017			2018		
	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Point Change
Pharmacy										
Graduated with Doctorate										
Did not graduate										
Dental										
Graduated with Doctorate										
Did not graduate										
Medical										
Graduated with Doctorate										
Did not graduate										

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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.

		2016			2017			2018		
	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Point Change
Master's										
Graduated with Master's										
Did not graduate										

Graduation Rates for Doctoral Programs

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

		2016			2017			2018		
	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Entering Fall Cohort	Count	Percent	Point Change
Doctoral										
Graduated with Doctorate										
Graduated with Master's										
Did not graduate										

Degrees Awarded by Level

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

	Associate	Bachelor's	Master's	Doctoral Research Scholarship	Doctoral Professional Practice
	Count	Count	Count	Count	Count
UT M.D. Anderson Cancer Center		143	6		

The University of Texas MD Anderson Cancer Center Accountability Report January 2018 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	44	11	41	37	11	5

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	46	103

Degrees for Medicine

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

	2015	2016	2017	Percent Change
	Count	Count	Count	Fercent Change
UT M.D. Anderson Cancer Center				

Fall Headcount

Fall headcount 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	84	41	110	94	23	5

The University of Texas MD Anderson Cancer Center Accountability Report January 2018 Certification and Licensure Pass Rates

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

	2016	2017	2018	Doint Change
	Pct	Pct	Pct	Point Change
Nursing				0.0
Allied Health	90.0 %	90.0 %	90.0 %	0.0
Medical				0.0
Dental				0.0
Pharmacy				0.0

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.

	2016	2017	2018	Borcont Chango
	Amount	Amount	Amount	Percent Change
Same	\$28,185	\$30,103	\$25,910	-8.1 %
Other	\$25,862	\$28,735	\$25,310	-2.1 %
Total	\$26,809	\$29,394	\$25,585	-4.6 %

Tuition and Fees

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

	2015	2016	2017	Dercent Change
	Amount	Amount	Amount	Percent Change
UT M.D. Anderson Cancer Center	\$5,337	\$5,658	\$5,658	6.0 %

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.

	2016	2017	2018	Dereent Change
	Amount	Amount	Amount	Percent Change
Federal and Private Research Expenditures per Research FTE faculty	\$702,658	\$816,278	\$843,865	20.1 %

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

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. Peer groups displayed as an average.

	2016	2017	2018	Dorcont Change
	Amount	Amount	Amount	Percent Change
Total	\$787,289,147	\$839,432,768	\$857,950,511	9.0 %
Federal	\$155,043,500	\$166,551,539	\$173,899,855	12.2 %
State Appropriations	\$248,300,750	\$255,960,301	\$259,701,431	4.6 %
Institutional	\$128,116,128	\$98,048,243	\$111,338,720	-13.1 %
Private	\$255,828,769	\$318,872,685	\$313,010,505	22.4 %

Faculty Headcount by Race/Ethnicity and Gender

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

	20	15	2016		20	2017 Percent		
	Count	Percent	Count	Percent	Count	Percent	Change	
Total	2,322	100.0 %	2,353	100.0 %	2,347	100.0 %	1.1 %	
Male	1,400	60.3 %	1,432	60.9 %	1,436	61.2 %	2.6 %	
Female	922	39.7 %	921	39.1 %	911	38.8 %	-1.2 %	
Total	2,322	100.0 %	2,353	100.0 %	2,347	100.0 %	1.1 %	
White	1,090	46.9 %	1,079	45.9 %	1,109	47.3 %	1.7 %	
African American	68	2.9 %	73	3.1 %	71	3.0 %	4.4 %	
Hispanic	132	5.7 %	151	6.4 %	150	6.4 %	13.6 %	
Asian	745	32.1 %	775	32.9 %	784	33.4 %	5.2 %	
International	240	10.3 %	216	9.2 %	168	7.2 %	-30.0 %	
Other	47	2.0 %	59	2.5 %	65	2.8 %	38.3 %	

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.

	2016	2017	2018	Percent Change	
	Amount	Amount	Amount		
Total Uncompensated Care	\$65,221,977	\$76,907,485	\$83,573,013	28.1 %	

The University of Texas MD Anderson Cancer Center Accountability Report January 2018

Research Expenditures

Research Expenditures for out-of-state peer comparison.

	2015	2016	2017	Percent Change	
	Amount	Amount	Amount		
UT M.D. Anderson Cancer Center	\$1000	\$13,089	\$8,607	760.7 %	

Research Funds

Research funds for out-of-state peer comparison.

	2015	2016	2017	Bercent Change	
	Amount	Amount	Amount	Percent Change	
UT M.D. Anderson Cancer Center					

Expenditures Per FTE Student

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

	2015	2016	2017	Percent Change		
	Amount	Amount	Amount	Percent Change		
UT M.D. Anderson Cancer Center	\$20,790	\$20,720	\$21,240	2.2 %		

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)

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)

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 loans reported in the THECB financial aid database (FADS) report by any institution for that student in the last 15 years, such as federal

The University of Texas MD Anderson Cancer Center Health-Related Accountability Measures and Definitions January 2018

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

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, 2016 - 2017

C	lir	nic	al
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Cilincal	
Audiology Fellow	2
Fellows	277
Medical Physics Fellows	4
Medical Physics Residents	10
Pharmacy Residents	18
Physician Assistant Fellows & Residents	5
Psychology Fellows	1
Residents	26
Rotating Affiliated Pharm Tr	1
Rotating Fellows	203
Rotating Fellow Research	4
Rotating Medical Students	304
Rotating Pharmacy Residents	9
Rotating Psychology Fellow	1
Rotating Residents	815
Rotating Residents Research	74
Rotating Veterinary Residents	1
Subtotal	1,755
Research	
Graduate Research Assistants-GSBS	293
Graduate Research Assistants-UTHSCH	86
Graduate Student-non-UTHSCH	261
MD/PhD Student – GSBS	1
Odyssey Fellows	14
Postdoctoral Fellows	756
Research Interns	160
Research Medical Students	176
Rosalie B. Hite Graduate Research Assts	. 5
Visiting Postdoctoral Fellows	9
Visiting Research Collaborator	18
Subtotal	1,779
	,
School of Health Professions**	
Clinical Laboratory Science Students	29
Cytogenetic Technology Students	18
Cytotechnology Students	3
Diagnostic Genetics Students	21
Diagnostic Imaging Students	81
Diagnostic Medical Sonography Students	s 17
Health Disp. Diversity &	
Advocacy Students	8

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		А
School of Health Professions**		А
Clinical Laboratory Science Students	29	А
Cytogenetic Technology Students	18	Pi
Cytotechnology Students	3	Pı
Diagnostic Genetics Students	21	Si
Diagnostic Imaging Students	81	P
Diagnostic Medical Sonography Students	17	S
Health Disp. Diversity &		
Advocacy Students	8	
Histotechnology Students	32	*
Medical Dosimetry Students	39	*:
Molecular Genetic Technology Students	47	pl
Radiation Therapy Students	44	*:

339

Special Programs Administrative Fellows Business Administrative Intern Chaplaincy Interns Clinical Chemistry Fellow Clinical Ethics Fellow Dietetic Interns Social Work Interns Veterinary Residents Veterinary Students Subtotal	4 11 2 2 8 5 8 43
Observers Observers STEP Observers Subtotal	453 410 863
Student Programs College Students Genetics Counseling Students High School Students Pharmacy Students Physical/Occupational Therapy Students Physician Assistant Students Psychology Graduate Students Social Work Students Speech Pathology Students Technology Students Subtotal	413 10 119 57 37 58 6 2 2 102 806
Nursing Programs* Nursing Outreach Education** Academic Undergraduate Academic Graduate Students Academic Doctoral Students Academic High School Academic Observation Professional Student Nurse Externs Professional Student Nurse Externs - Summer*** PEPED **** Subtotal	0 964 385 29 102 7 19 0 0 0 1,506
TOTAL	·

Annual metrics are provided by the Div. of Nursing. * Nursing Outreach Education program is no longer in lace.

***This program was not offered in FY12 *** PEPED program ended subsequent to completion of CPRIT grant funding, August 2012

Source: Trainee & Alumni Affairs

Subtotal

G.2 ITal	nee Demographics	e e	• •			-1-	COD		
Demographic	Clinical Resident	is & Fel	llows	Postdoctoral Fellows*			GSBS) 	
Profile	Description	Ν	Percent	Description	Ν	Percent	Description	Ν	Percent
			-		_				
Number of Trainees	Total Population	303		Total Population	770		Total Population	295	
Number of Programs Served	Total Programs	62		Total Programs	60		Total Programs	54	
Ethniaita	White, Non-Hispanic	127	42%	Foreign	599	78%	White, Non-Hispanic	119	40%
Ethnicity	Asian	65	21%	White, Non-Hispanic	79	10%	Foreign	111	38%
	Foreign	71	23%	Asian	65	8%	Hispanic	24	8%
	Hispanic	18	6%	Hispanic	18	2%	Asian	27	9%
	Black, Non-Hispanic	15	5%	Black, Non-Hispanic	7	1%	Black, Non-Hispanic	8	3%
	2+race	6	2%	Pacific Islander	0	0%	American Indian Alaskan Native	2	1%
	American Indian Alaskan Native	1	0%	2+race	2	0%	2+race	4	1%
Conden	Male	162	53%	Male	423	55%	Male	134	45%
Gender	Female	162	<u> </u>	Female	423 347	45%	Female	134	45% 55%
		1	.,,,,		0.,			1.01	2270
Average Age	35 years			34 years old		29 years old			

G.2 Trainee Demographics by Group, 2016 - 2017

*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, 2016 – 2017

0.5 Trainee Country of Origin & Visa Types, 2010 – 2017									
	Clinical Residents & Fellows			Postdoctoral Fellows*			GSBS		
Demographic Profile	Country/Visa	N	Percent	Country/Visa	N	Percent	Country/Visa	N	Percent
Top 5 Countries	USA	196	65%	China	253	33%	USA	169	57%
of Origin	India	19	6%	USA	98	13%	China	37	13%
	Canada	13	4%	India	89	12%	India	34	12%
	Lebanon	10	3%	South Korea	51	7%	Taiwan	11	4%
	China	7	2%	Japan	30	4%	South Korea	6	2%
Citizenships and	US Citizen	196	65%	US Citizen	98	49%	US Citizen	169	57%
Most Frequent Visa Types	US Permanent Resident	36	12%	H1-B	112	15%	US Permanent Resident	15	5%
	H1-B	15	5%	F1	74	10%	F-1	104	35%
	J-1	52	17%	J-1	378	13%	J-1	4	1%

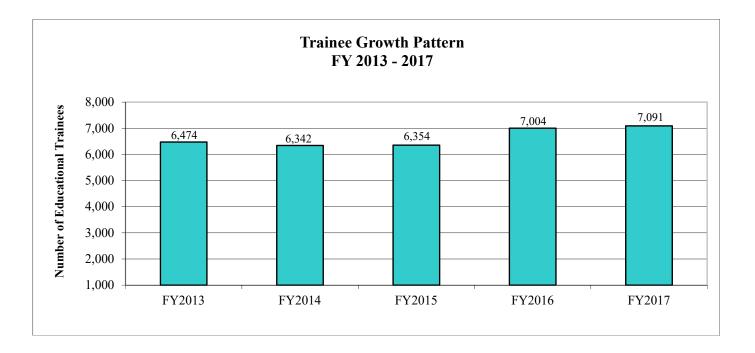
*Postdoctoral Fellows include Postdoctoral Fellows, Odyssey Fellows, Odyssey Scholars and Veterinary Fellows. Total head count may not be equal to the total number of postdoctoral on this report because some trainees had more than one title during this reporting period.

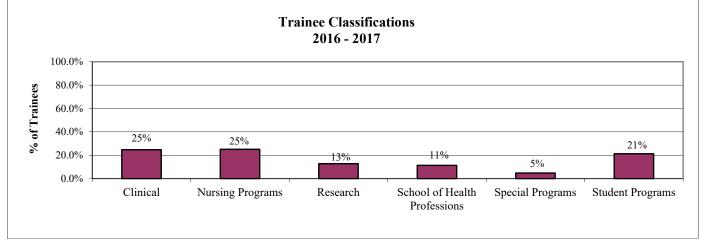
Source: Trainee & Alumni Affairs

	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	Percent of Growth 2016 - 2017
Clinical	1,231	1,276	1,236	1,693	1,755	4%
Research	1,743	1,854	1,890	1,847	1,779	-4%
Special Programs &Observers	507	452	489	838	906	8%
Student Programs	1,396	1,204	1,084	810	806	0%
School of Health Professions	291	318	303	317	339	7%
Nursing Students/Rotations	1,306	1,238	1,352	1,499	1,506	0%
Grand Total	6,474	6,342	6,354	7,004	7,091	1%
Grand Total (excluding Nursing)	5,168	5,104	5,002	5,505	5,585	1%

G.4 Five Year Trainee Growth Pattern, FY 2013 – FY 2017

Source: Trainee & Alumni Affairs





G.5 Trainee Classifications Graph, 2016 – 2017

Source: Trainee & Alumni Affairs

G.6 Summary of Internal Awards, 2016 - 2017

Type of Award	Number Awarded	Total Funding Awarded
Cancer Survivorship Resarch Award - Bristol-Myers Squibb Award in Clinical Research	1	\$1,000.00
Cancer Survivorship Resarch Award - Bristol-Myers Squibb Award in Clinical Research	1	\$750.00
Cancer Survivorship Research Award - AMGEN Award in Basic Science Research	1	\$750.00
Cancer Survivorship Research Award - AMGEN Award in Basic Science Research	1	\$500.00
Cancer Survivorship Research Award - AMGEN Award in Basic Science Research	1	\$1,000.00
Cancer Survivorship Research Award - Bayer HealthCare Pharmaceuticals, Inc. Award in Population Science	1	\$1,000.00
Cancer Survivorship Research Award - Bayer HealthCare Pharmaceuticals, Inc. Award in Population Science	1	\$500.00
Cancer Survivorship Research Award - Bayer HealthCare Pharmaceuticals, Inc. Award in Population Science	1	\$750.00
Cancer Survivorship Research Award - Bristol-Myers Squibb Award in Clinical Research	1	\$500.00
Cancer Survivorship Research Award - Bristol-Myers Squibb Award in Translational Research	1	\$500.00
Cancer Survivorship Research Award - Bristol-Myers Squibb Award in Translational Research	1	\$1,000.00
Cancer Survivorship Research Award - The Cancer Survivorship Research Award	1	\$500.00
Cancer Survivorship Research Award - The Cancer Survivorship Research Award	1	\$750.00
Cancer Survivorship Research Award - The Cancer Survivorshop Research	1	\$1,000.00
Cancer Survivorshop Research Award - Bristol-Myers Squibb Award in Translational Research	1	\$750.00
Clinical Fellowship Award - Jesse H. Jones Fellowship in Cancer Education	2	\$4,000.00
Clinical Fellowship Award - Susan Papizan Dolan Fellowship in Breast Oncology	1	\$3,000.00
Clinical Fellowship Award - The A. Lavoy Moore Endowment Fund	1	\$2,500.00
Clinical Fellowship Award - The Connie and Jim Walter Fellowship in Sarcoma Research	2	\$5,000.00
Clinical Fellowship Award - The Daniel Bendict Gazan Fellowship in Sarcoma Research	1	\$2,500.00
Clinical Fellowship Award - The Diane Denson Tobola Fellowship in Ovarian Cancer Research	2	\$10,000.00
Clinical Fellowship Award - The Janice Davis Singletary Fellowship for Lymphoma	1	\$3,000.00
Clinical Fellowship Award - The Jeffrey Lee Cousins Fellowship in Lung Cancer Research	1	\$2,500.00
Clinical Fellowship Award - The Kimberly Patterson Fellowship in Leukemia Research	3	\$12,000.00
Clinical Fellowship Award - The Linda K. Manning Fellowship in Ovarian Cancer Research	1	\$5,000.00
Clinical Fellowship Award - The Marion D. Edwards Fellowship in Hepatic Oncology	1	\$2,000.00
Clinical Fellowship Award - The Shannon Timmins Fellowship for Leukemia Research	2	\$4,000.00
Clinical Fellowship Award - The Thomas H. and Mayme P. Scott Fellowship in Cancer Research for FY15	2	\$6,000.00
Clinical Fellowship Award - The William L. Pippin, Jr. Fellowship in Genitourinary Research	1	\$4,000.00
One-time Trainee Cash Award - Bio-Innovation Fellowship	1	\$4,900.00
One-time Trainee Cash Award - Cancer Biology	1	\$8,000.00
One-time Trainee Cash Award - Cancer Biology	1	\$7,562.00
One-time Trainee Cash Award - Molecular and Celluar Oncology	1	\$2,156.00
One-time Trainee Cash Award - Pathology Research	1	\$3,600.00
One-time Trainee Cash Award - Surgical Oncology	1	\$9,440.00
One-time Trainee Cash Award - Symptom Research	1	\$1,000.00
Postdoctoral Fellowship Award - Maryanne Rosenstein Family Fellowship in Merkel Cell Carcinoma Research	2	\$5,000.00
Postdoctoral Fellowship Award - The Anne Eastland Spears Fellowship for GI Cancer Research	1	\$3,000.00
Postdoctoral Fellowship Award - The Ben F. Love Fellowship in Innovative Cancer Therapies	3	\$7,500.00
Postdoctoral Fellowship Award - The Den P. Dove Fellowship in Innovative Cancer Therapies	5	\$25,000.00
Postdoctoral Fellowship Award - The Brane Denson Tobola Fellowship in Ovarian Cancer Research	5	\$25,000.00
Postdoctoral Fellowship Award - The Jeffrey Lee Cousins Fellowship in Lung Cancer Research	2	\$6,000.00
Postdoctoral Fellowship Award - The Sentey Lee Cousins Fellowship in Lung Calleer Research	1	\$4,000.00
Postdoctoral Fellowship Award - The Kniherty Fatterson Fellowship in Leutenna Research	3	\$9,000.00
Postdoctoral Fellowship Award - The Sheskey Family Fellowship for Breast Cancer Research	1	\$2,500.00
Postdoctoral Fellowship Award - The Thomas H. and Mayme P. Scott Fellowship in Cancer Research for FY15	2	\$6,000.00
TOTAL Source: Trainee & Alumni Affairs	68	\$206,408.00

Source: Trainee & Alumni Affairs