Blueprint for Academic Excellence in the University of South Carolina School of Medicine (SOM)

2014-2015

28 March 2014

Section I.   Executive Summary

School of Medicine Contributions to Meeting the Academic Dashboard Targets

Since it only enrolls post-baccalaureate students, many of the University Academic Dashboard targets are inapplicable to the School of Medicine. The School of Medicine uses the following items for its Dashboard (Appendix G).

1. MCAT score – The School of Medicine median MCAT score for accepted applicants held steady at 29 compared to its peers (30) and its aspirants (32).

2. Percentage of Graduates Choosing Primary Care Specialties (Family Medicine, Internal Medicine, Pediatrics) – While the percentage of School of Medicine graduates choosing primary care specialties (40%) is very close to its peers (43%), this percentage is higher than its aspirants (37%). For the Class of 2014, 45.8% matched in primary care compared to 49.1% nationally.

3. Percentage of Graduates Practicing in Primary Care and Practicing In-state – The School of Medicine ranks in the 94th percentile nationally for percent of graduates practicing in primary care and ranks in the 85th percentile nationally for percent of graduates practicing in-state.

4. United States Medical Licensing Examination (USMLE) Step 2 Clinical Knowledge First Time Percent Pass Rate – The 100% first time pass rate of School of Medicine graduates exceeded the national average this year of 97%.

5. Research Awards – School of Medicine extramural funding awards increased to a total of $47.9 million with federal research funding (NIH, NSF, HHS) at $21.8 million and half of federal funding coming from NIH awards.

School of Medicine Contributions to Key Performance Parameters

Teaching Excellence – The School of Medicine has collaborated with other health sciences schools to expand inter-professional education, continued to maintain a global presence as a leader in ultrasound education, initiated strategic planning for curriculum innovation, had the Class of 2014 attain a 100-percent first-time pass rate on the United States Medical Licensing Examination (USMLE) Step 2 Clinical Knowledge exam, and had a faculty member recognized with the Michael J. Mungo Graduate Teaching Award.

Research/scholarship reputation and productivity - The School of Medicine has fostered research and promoted collaborations and interdisciplinary research which resulted in extramural funding increasing to $47.9 million, and has expanded its research efforts in telemedicine, health disparities, and personalized medicine.

Service to state, community, profession and university- The School of Medicine has provided exceptional clinical care to patients in the community, strengthened its relationships with its clinical partners, formed a new partnership with Francis Marion University, McLeod Regional Medical Center, and Carolinas Health System to establish medical student clinical rotations in Florence, and expanded its telepsychiatry and teleneurology services.

Sustainability – The School of Medicine is seeking to establish a stronger financial base through its collaboration with Palmetto Health on clinical integration, initiation of strategic planning for improvement of clinical business operations, and improved relationship with the Dorn VA.

Section II.   Meeting the University's Academic Dashboard Targets

School of Medicine Contributions to Meeting the Academic Dashboard Targets

Since it only enrolls post-baccalaureate students, many of the University Academic Dashboard targets are inapplicable to the School of Medicine. The School of Medicine uses the following items for its Dashboard (Appendix G).

1. MCAT score – The School of Medicine median MCAT score for accepted applicants held steady at 29 compared to its peers (30) and its aspirants (32).

2014-15 Strategy – Optimize student recruitment strategies including investigation of a combined BS/MD degree with the USC Honors College. Increase SOM endowment to provide additional tuition scholarships for academically gifted and underrepresented minority students.

2. Percentage of Graduates Choosing Primary Care Specialties (Family Medicine, Internal Medicine, Pediatrics) – While the percentage of School of Medicine graduates choosing primary care specialties (40%) is very close to its peers (43%), this percentage is higher than its aspirants (37%).

2014-15 Strategy – Maintain commitment to current rural primary care training sites and seek additional sites which provide students with first-hand experience in rural practice. Continue inclusion of Primary Care Week in curriculum. Encourage faculty participation in the Institute for Primary Care Education and Practice, an initiative from the South Carolina Area Health Education Consortium. Implement third year medical student rotations in Florence with a focus on primary care.
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3. Percentage of Graduates Practicing in Primary Care and Practicing In-state – The School of Medicine ranks in the 94th percentile nationally for percent of graduates practicing in primary care and ranks in the 88th percentile nationally for percent of graduates practicing in-state.

2014-15 Strategy – Maintain commitment to rural primary care training sites which provide students with first-hand experience in rural practice. Continue inclusion of Primary Care Week in curriculum. Encourage faculty participation in the Institute for Primary Care Education and Practice, an initiative from the South Carolina Area Health Education Consortium. Introduce third year medical students to rural practice environments through their clinical rotations in Florence and potentially other rural practice sites in South Carolina.

4. United States Medical Licensing Examination (USMLE) Step 2 Clinical Knowledge First Time Percent Pass Rate and Mean Score – The first time pass rate of School of Medicine graduates exceeded the national average this year of 97%.

2014-15 Strategy – Will continue to provide multiple opportunities for formative evaluation of clinical knowledge through the use of internal and end of clerkship subject exams plus the provision of a low teaching faculty-student ratio.

6. Research Awards – School of Medicine extramural funding awards increased to a total of $47.9 million with federal research funding (NIH, NSF, HHS) at $21.8 million and half of federal funding coming from NIH awards.

2014-15 Strategy – Expand translational research efforts at School of Medicine through the addition of a special advisor to the dean to facilitate clinical and translational research by enhancing integration of clinical research efforts between USC SOM and Palmetto Health and addressing issues surrounding inadequacy of IRB approval processes for clinical research. Ensure that research collaboration is addressed during the clinical integration with Palmetto Health. Expand and enhance research infrastructure by completing renovation of Building One research space and SOM animal resource facility, plus leasing research space from VA. Promote research collaborations and enable additional VA eligibility for SOM faculty. Assemble Research and Basic Science Task Force to assess new research opportunities.

2014-2015 Academic Year Goals

Goal 1.   Establish a stronger financial base and infrastructure in the SOM.

Key Performance Parameters: Service to State, Community, Profession, and University; Sustainability

Progress: Collaborating to establish a new 501(c)(3) between the University of South Carolina School of Medicine Educational Trust (dba University Specialty Clinics, or otherwise known as, the Practice Plan) and Palmetto Health – to be a physician-led, multidisciplinary organization. Initiated search for the CEO of the integrated medical group and Executive Dean of the School of Medicine. Established Task Force for Review & Support Improvements in Clinical Operations - "USCSOM Best Practices". Cerner EHR/EMR/PM system was fully implemented for those eligible including Stage I Meaningful Use criteria by University Specialty Clinics by the Fall of 2013 for all ongoing clinical care areas and yielded better than expected results in productivity and new capabilities for quality and financial reporting.

Stage II planning to obtain the Meaningful Use funds associated with next stage implementation of the new EHR/EMR/PM system is underway for 2013-2014; this will include building required clinical care initiatives data sets, as well as integrating these benchmarks and identified data sets into population healthcare measurement systems with our partners in the Palmetto Health Quality Collaborative. Also note that other significant clinical initiatives include the federally mandated roll-out of the new patient care and disease classification system ICD-10 that is expected to have a significant impact on documentation of healthcare services, as well as a high potential to slow or impact cash receipts/cash flows from payors due to the complexity of the coding system claims filed moving from approximately 14,000 total codes to over 87,000. The Practice Plan has been leading training sessions for providers, staff and others on a system and practice level and will continue to training through the rest of calendar 2014 till the ICD-10 system is implemented.

Plans for Upcoming Year: Work with Management Committee, Physician Steering Committee, and Transition Team to complete the design and creation of the new integrated medical group. Complete the search for the CEO of the integrated medical group and Executive Dean. Fully implemented ICD-10.

Goal 2.   Continue to expand inter-professional education, strengthen education infrastructure, and improve educational programs.

Key Performance Parameters: Teaching Excellence

Progress: Inter-professional seminar was expanded to include nursing, social work, and public health students. Renovation of space for Objective Structured Clinical

Examinations (OSCE) is on target to be completed this year. Architectural feasibility studies for a learner-centered, flipped classroom and a media production studio were completed. A strategic planning task force was appointed to examine curriculum innovation. Assistant Dean for Medical Student Education – Florence appointed.

Plans for Upcoming Year: Continue to expand inter-professional seminar to include genetic counseling students and streamline online delivery of content. Secure funding for the learning studio (flipped classroom) and media production studio. Identify potential areas for curriculum innovation. Continue work on development of clinical branch campus in Florence. Assess and evaluate current graduate school programs in the SOM. Continue work on program planning for physician assistant program.

Goal 3.   Continue to maintain a global presence in medical education as a leader in ultrasound medical education.

Key Performance Parameters: Teaching Excellence; Service to State, Community, Profession, and University

Progress: Hosted the Second World Congress on Ultrasound in Medical Education in Columbia. Partnered with American Institute of Ultrasound in Medicine on 2013: Year of Ultrasound campaign. Participated in AAMC's Global Health Learning Opportunities (GHLO) pilot program with focus on global ultrasound education and hosted one student from Italy. Provided leadership, infrastructure, and web-based learning modules for Society of Ultrasound in Medical Education. Completed memorandum of understanding with the University of Santo Tomas in Philippines. Seven ultrasound-related patents in process.

Plans for Upcoming Year: Implement a learning management system for portions of ultrasound curriculum. Expand continuing medical education program in Ultrasound Institute. Establish memorandum of understanding with University of Sharjah in the United Arab Emirates. Expand offerings for international students to participate in ultrasound education through GHLO. Establish partnerships with the American Registry for Diagnostic Medical Sonography and Pri-Med, a national CME delivery organization.

Goal 4.   Foster research and promote collaborations and interdisciplinary research.

Key Performance Indicators: Research/Scholarship Reputation and Productivity

Progress: SOM funded ten innovative and exploratory grant applications or bridge funds totaling over $200,000. Investigators funded last year by the Research Development Fund submitted eighteen grant applications to federal agencies (NIH, VA, DOD) or foundations, and one application has already been awarded.

VA-eligible SOM faculty submitted several VA Merit Award applications, and SOM faculty now have four funded VA Merit Awards. A joint VA Shared Equipment Evaluation Program (ShEEP) award was funded, and large equipment for high throughput genomics and proteomics is currently coming online. This is a truly joint

SOM-VA effort since the VA-purchased equipment is housed in SOM space leased from the VA and the SOM Instrumentation Resource Facility (IRF) provides direct oversight of the equipment. Additional VA laboratory space is now being utilized by SOM faculty, including IRF staff, through a new leasing arrangement.

Plans for Upcoming Year: Appoint a special advisor to the Dean for Clinical Research and integrating research with Palmetto Health. Create Research and Basic Science Task Force for SWOT analysis in order to identify new research opportunities. Renovate Building One research space and Animal Resource Facilities at SOM. Promote research collaborations and enable additional VA eligibility for SOM faculty. Explore opportunities for research collaborations with USC SOM-Greenville. Continue SOM-wide peer review of applications to enhance funding success.

Goal 5.   Increase the School of Medicine endowment to provide full tuition scholarships for underrepresented minority and academically gifted students.

Key Performance Parameters: Service to state, community, profession and university; Sustainability

Progress: Dean identified additional funds for scholarships for students. School of Medicine Development department dissolved and established closer partnership with USC Development and Alumni Relations. Potential donor identified to support a scholarship for an Honors College graduate.

Plans for Upcoming Year: Work with USC Development and Alumni Relations to strengthen School of Medicine endowment.

Five-Year Goals

Goal 1.   Pursue new clinical opportunities that align service, education, and research.

Key Performance Parameters: Service to State, Community, Profession, and University; Sustainability

Form an integrated clinical practice with Palmetto Health. Establish a clinical presence at Palmetto Health Parkridge, both inpatient and outpatient areas. Actively pursue new practice opportunities centered on healthcare technology, telehealth, the Medical Home/Medical Neighborhood Concept, multidisciplinary teaching/learning experiences, and outcomes research. The advance of telecommunications is allowing the virtual classroom to cross distances to locations remote from our SOM host site. This is saving faculty time and other opportunity costs. Telemedicine specifically telepsychiatry and teleneurology is extending SOM clinical expertise to underserved populations and to smaller hospital systems. Work to establish and expand clinical service agreements with other healthcare systems in the state in rural and metropolitan areas.

Goal 2.   Establish a Master's in Physician Assistant Program

Key Performance Parameters: Teaching Excellence; Service to State, Community, Profession, and University; Sustainability

Plan to establish a Master's in Physician Assistant program with a target date of summer 2017 for the first entering class. Submit program planning document to Commission on Higher Education. Hire program director in winter 2015. Accreditation site visit scheduled for February 2016. Organize working group to develop curriculum.

Goal 3.   Develop a progressive interdisciplinary research agenda as part of SOM Strategic Plan.

Key Performance Parameters: Research/Scholarship Reputation and Productivity; Service to State, Community, Profession, and University

SOM faculty will continue to collaborate with researchers across the university, the state, the nation, and globally in targeted areas of strength, such as inflammation, stroke, heart disease, regenerative medicine, neuropsychiatric diseases, technology in medicine, and health care delivery. A special advisor to the Dean for Clinical Research will work on better integration of research and IRB issues with Palmetto Health. The Research and Basic Science Task Force will assess research strengths and identify emerging research opportunities, and determine strategies to address the falling indirect cost rates for SOM. Faculty will actively pursue integrated, large funding opportunities such as COBRE, EPSCoR, and USAID.

Goal 4.   Establish a clinical branch campus in Florence.

Key Performance Parameters: Teaching Excellence; Service to State, Community, Profession, and University

Move forward with preparations for clinical branch campus. Work with new Assistant Dean for Medical Student Education-Florence to establish Office of Medical Student Education in Florence. Students begin clinical rotations in Summer 2014. Work with LCME/CHE/SACS on accreditation and related issues.

Goal 5.   Strengthen infrastructure for educational programs.

Key Performance Parameters: Teaching Excellence; Services to State, Community, Profession, and University; Sustainability

Secure funding for the learning studio (flipped classroom) and media production studio. Identify potential areas for curriculum innovation. Establish a prematriculation curriculum.

Section IV.   <u>Appendices</u>

Appendix A. <u>Resources Needed</u>

Goal 1 - Foster research and promote collaborations and interdisciplinary research.			
Type of Resource	Existing	Additional: State source	Strategy
Fiscal	E-funds	VP Research Provost	Provide researchers with bridge and seed funding to catalyze proposals. Continue peer review sessions across campus. Develop COBRE proposals with units on main campus.

Goal 2 - Increase SOM endowment to provide full tuition scholarships for underrepresented minority and academically gifted students.			
Type of Resource	Existing	Additional: State source	Strategy
Fiscal	Endowment	Contributions to endowment	Work with USC Development and Alumni Relations to create a strategic plan for expanding SOM endowments.

Goal 3 – Establish a Master's in Physician Assistant Program			
Type of Resource	Existing	Additional: State source	Strategy
Personnel		Provost and grants	Work with Provost and pursue grant opportunities. Form task force to review resources needs associated with PA program and other graduate programs.

Goal 4 – Strengthen infrastructure for educational programs			
Type of Resource	Existing	Additional: State source	Strategy
Fiscal	E-funds/ Philanthropy	Donors, grants, Provost	Pursue funding campaigns and naming opportunities, grants, and work with Provost on funding for media production studio and Learning Studio (flipped classroom).

Appendix B. <u>Benchmarking Information</u>

5 Aspirant Institutions – (*Public Medical Schools in the South)*: Medical College of Georgia at Georgia Regents University, University of Kentucky, University of North Carolina – Chapel Hill, University of Tennessee Health Science Center, University of Virginia

5 Peer Institutions (*Teague-Cranston Act Medical Schools*): East Carolina University, East Tennessee State University, Marshall University, Texas A&M University, Wright State University

Appendix C. School of Medicine's Top Strengths and Important Accomplishments

<u>Strengths</u>

- Strong, fully-accredited educational programs.
- Largest physician and provider practice in the Midlands.
- Unique clinical services provider for Midlands in infectious diseases, pediatrics, and neurology.
- Faculty who are dedicated and committed to the educational programs.
- Global leader in ultrasound undergraduate medical education.
- University of South Carolina School of Medicine Educational Trust dba University Specialty Clinics continues to explore opportunities with key healthcare education partners to integrate or collaborate in order to provide resources for a more secure and stable teaching and financial environment.

<u>Important Accomplishments</u>

- Collaborated with Palmetto Health to establish a new 501(c)(3) between the University of South Carolina School of Medicine Educational Trust (dba University Specialty Clinics, or otherwise known as, the Practice Plan) and Palmetto Health – to be a physician-led, multidisciplinary organization.
- Initiated search for CEO of the integrated medical group and Executive Dean of the School of Medicine.
- Initiated faculty-driven strategic planning effort to explore learning and curriculum innovation, review our research mission to determine what areas are best to pursue in face of declining funding, and review best practices and potential improvements and in clinical operations.
- The Class of 2014 achieved a 100% first time pass rate on the USMLE Step 2 Clinical Knowledge exam.
- Hosted highly successful Second World Congress on Ultrasound in Medical Education in 2013 attended by over 500 medical educators and students from 20 countries and 80 universities.
- Recognized by the Association of American Medical Colleges for being the first medical school in its Global Health Learning Opportunities (GHLO) program to host a student, Alessandra Bertone, University of Pavia (Italy).
- Focused growth in research (neuroscience, inflammation, cardiovascular, healthcare delivery, telemedicine, and ultrasound). Extramural funding continued to increase from $26M in 2005 to ~$47.9 million in 2013, with federal research funding (NIH, NSF, HHS) of ~$22 million in 2013; half of the federal funding is from NIH awards.
- Annual external funding per tenured/tenure-track faculty member is >$300,000. The School of Medicine also had >200 submissions for external funding during the year.
- Additional SOM faculty became VA-eligible and four SOM faculty are now VA-funded. USC faculty also received a VA ShEEP award for major equipment, in a new joint facility for personalized medicine and biomarker studies.
- Dr. James Stallworth, professor of clinical pediatrics and director of the Pediatric Clerkship Program, received the Michael J. Mungo Graduate Teaching Award. He is the first faculty member of the School of Medicine to receive this award.

- Dr. Mitzi Nagarkatti, chair of the Department of Pathology, Microbiology and Immunology, was recognized as a Carolina Distinguished Professor.
- Dr. Allan Brett, professor of clinical internal medicine, director of the Division of General Internal Medicine and vice chair of the Department of Medicine, received the Clinical Practice Teaching Award.
- Dr. R. Caughman Taylor, Chair of Pediatrics, and Sr. Medical Director, Children's Hospital, was appointed Interim Dean.
- Dr. Richard A. Hoppmann, was appointed Director of the Ultrasound Institute and the Dorothea H. Krebs Endowed Chair of Ultrasound Education
- Dr. E.J. Mayeaux, Jr., was appointed professor and chair of the Department of Family and Preventive Medicine.
- Dr. William D. Anderson, III, associate professor of family and preventive, was appointed associate dean for clinical affairs and chief medical officer.
- Dr. Marion Burton, associate professor of pediatrics, was appointed director of community affairs.
- The National Committee for Quality Assurance (NCQA) has again designated the Family Medicine Center as a Level-III Patient-Centered Medical Home – the highest possible designation.
- Operated by the Department of Internal Medicine, the Ryan White Program, the Midlands of South Carolina's primary provider of HIV and AIDS treatment and support services, celebrated its 20-year anniversary.
- Department of Neurology, along with Palmetto Health, was awarded the Get With The Guidelines Gold Plus award and the Target: Stroke Honor Roll award for excellence in stroke care.
- Internal Medicine garnered over $4 million in grant-type external support for clinical programs and research and is involved in national clinical trials.
- Internal Medicine developed a new Infectious Diseases Fellowship that is fully accredited and collaborating with the University of the West Indies on an ID fellowship with fellow and faculty exchange.
- The Pediatric Pulmonology division was selected as a Primary Ciliary Dyskinesia Center, one of 22 such centers in the country.
- The new Palmetto Health Children's Hospital Sleep Center was opened to assist pediatricians and primary care physicians in diagnosing children's sleep disorders.
- Surgery led the efforts for Palmetto Health Richland's verification by the American College of Surgeons as a Level 1 Trauma Center.
- General Psychiatry and Forensic Psychiatry received 5 years accreditation with commendations.
- Statewide Telepsychiatry featured on the Agency for Health Care Research and Quality as a National Model (Dec, 2013). This project has served over 18,000 patients thus far.
- Dr. Meera Narasimhan, chair of Department of Neuropsychiatry and Behavioral Sciences, received the HIND Rattan Award, one of the highest Indian diasporic awards for outstanding contributions, achievements, and services to our society globally.
- Dr. James Scully appointed President of the American College of Psychiatrists.
- Pharmacology, Physiology and Neuroscience expanded Masters in Nurse Anesthesia Program, based in the department of Pharmacology, Physiology, and Neuroscience at the USCSOM-Columbia to include a second primary training site at Greenville Hospital System, and

successfully graduated our first classes of Certified Nurse Anesthetists (CRNAs) from Greenville.

- Presentations by Cell Biology and Anatomy faculty were among a record eleven presentations given by USC faculty at the 2013 American Heart Association Scientific Sessions.
- Dr. Prakash Nagarkatti, Carolina Distinguished Professor and USC Vice President for Research, was the recipient in 2012 of a 5-year, National Institutes of Health (NIH)-funded Center of Biomedical Research Excellence (COBRE) grant on Dietary Supplements and Inflammation for $10million.
- In 2013, Pathology, Microbiology, and Immunology was ranked #1 among all departments at USC in total extramural funding which was >$13 million and also in NIH funding of ~$6.9 million.   The department also ranked 27th in NIH funding among Departments of Pathology across all medical schools in the nation in 2013.
- Diversity efforts at the SOM continue and in the last few years 50% of newly hired tenure–track assistant professors were women and 10% were underrepresented minority, plus > 30% of graduate and certificate students in the Biomedical Sciences Graduate and post-baccalaureate programs are underrepresented minorities.
- Implemented Electronic Health Record/Electronic Medical Record/Practice Management Reporting System with Palmetto Health (PH).
- Department of Neurology faculty were instrumental in helping Palmetto Health establish the first Joint Commission accredited Primary Stroke Center in the Midlands.

Appendix D. <u>School of Medicine's Weaknesses and How They are Being Addressed</u>

<u>Weaknesses</u>

- Loss of substantive financial support from the state.
- Lack of minority faculty members and students
- Lack of scholarship monies to support medical education
- Decrease in negotiated NIH Indirect Cost rates making us the medical school with the lowest rate in the nation.
- Limited resources for addressing needs for additional research infrastructure and classroom space.
- Some competitive disadvantages with other health systems in state

<u>Plans to address weaknesses</u>
- Develop an integrated clinical practice with PH, continue to pursue new revenue streams (i.e., corporate medicine, international medicine (Philippines, India, Brazil, United Arab Emirates), expand/develop revenue generating clinical practices, encourage entrepreneurial activity.
- Seeking additional endowments for minority scholarships, infrastructure improvements, and institutional support through donors, grateful patients, and health systems.
- Research & Basic Science Task force is discussing avenues for addressing the reduced indirect cost rate.
- Seeking to strengthen collaborations with Greenville Hospital System, McLeod Regional Medical Center, and Carolinas Health System.
- Task Force for Review & Support Improvements in Clinical Operations - "USCSOM Best Practices" – is reviewing clinical operations to improve efficiency and obtain more favorable contracts.
- Address lack of state funding support.

Appendix E. Statistical Data for School of Medicine

1. **Number of entering freshman for Fall 2010, Fall 2011, Fall 2012 and Fall 2013 classes and their average SAT and ACT scores. Not applicable to SOM**

2. **Freshman retention rate for classes entering Fall 2010, Fall 2011 and Fall 2012. Not applicable to SOM**

3. **Sophomore retention rate for classes entering Fall 2009, Fall 2010 and Fall 2011. Not applicable to SOM**

4. **Number of majors enrolled in Fall 2010, Fall 2011, Fall 2012 and Fall 2013 by level: undergraduate, certificate, first professional, masters, or doctoral (headcount)**

	Headcount			
	Fall 2010	Fall 2011	Fall 2012	Fall 2013
Certificate	33	55	51	63
First Professional	327	347	360	367
Masters	144	100	102	144
Doctoral	61	56	43	51
Total	**565**	**558**	**556**	**625**

5. **Number of entering first professional and graduate students: Fall 2010, Fall 2011, Fall 2012 and Fall 2013 and their average GRE, MCAT, LSAT, etc.**

	Fall 2010		Fall 2011		Fall 2012		Fall 2013	
	Number	MCAT	Number	MCAT	Number	MCAT	Number	MCAT
First Professional	90	27.4	92	28.3	94	28	94	28.7

	Fall 2010		Fall 2011		Fall 2012		Fall 2103	
	Number	GRE	Number	GRE	Number	GRE	Number	GRE*
Doctoral	15	1178	15	1153	16	1094	12	309

* New scoring system

6. **Number of graduates in Fall 2012, Spring 2013, Summer 2013 by level (undergraduate, certificate, first professional, masters, doctoral)**

	Fall 2012	Spring 2013	Summer 2013
Certificate	3	24	3
First Professional	2	83	0
Masters	7	44	4
Doctoral	3	2	1
Total	**15**	**153**	**8**

Placement	Fall 2012	Spring 2013	Summer 2013
Terminal Masters	7	39	3
Terminal Doctoral	3	2	1
Total	**10**	**41**	**4**

7. **Four-, Five- and Six-Year Graduation rates for the three most recent applicable classes (undergraduate only) Not applicable to SOM**

8. **Total credit hours generated by your unit regardless of major for Fall 2012, Spring 2013 and Summer 2013.**

	Fall 2012	Spring 2013	Summer 2013
Credit Hours	2,528	2,791	543

9. **Percent of credit hours by undergraduate major taught by faculty with a highest terminal degree. Not applicable to the SOM**

10. **Percent of credit hours by undergraduate major taught by full-time faculty. Not applicable to SOM**

11. **Number of faculty by title (tenure-track by rank, non-tenure track (research or clinical) by rank) as Fall 2011, Fall 2012 and Fall 2013 (by department where applicable).**

	Fall 2011	Fall 2012	Fall 2013
Tenure-Track Faculty			
Professor	28	26	23
Associate Professor	23	21	18
Assistant Professor	10	11	13
Librarian	7	7	7

	Fall 2011*	Fall 2012*	Fall 2013*
Research Faculty			
Professor	4 (26)	4 (1)	7 (3)
Associate Professor	5 (4)	5 (2)	5
Assistant Professor	22 (10)	15 (3)	13 (1)
Instructor	1 (1)	1 (1)	2

	Fall 2011*	Fall 2012*	Fall 2013*
Clinical Faculty			
Professor	20 (149)	23 (103)	25 (38)
Associate Professor	47 (158)	49 (136)	48 (57)
Assistant Professor	83 (566)	83 (649)	77 (225)
Instructor	11 (42)	13 (39)	11 (13)
Librarian	1	1	1

*Includes all salaried and (unsalaried/volunteer) faculty.

12. **Current number and change in the number of tenure-track and tenured faculty from underrepresented minority groups from FY 2012.**

FY2012	Currently	Change
0	1	+ 1

Due to the majority of the School of Medicine faculty being non-tenure-track, particularly our clinical faculty, it should be noted that 14 unsalaried and 25 unsalaried/volunteer non-tenure-track faculty are from underrepresented minority groups.

Appendix F. Statistical Research Data for School of Medicine

1. **The total number and amount of external sponsored research proposal submissions by funding source for FY2013.**

	Total	FEDERAL	STATE	FOUNDATION	COMMERCIAL	OTHER	Agency
Number Applications Submitted	201	139	8	27	18	4	5
Amount (First Year)	$41,292,288	$31,799,039	$1,006,788	$2,750,616	$1,777,845	$449,500	$3,508,500

2. **Summary of external sponsored research awards by funding source for FY2013. Total extramural funding processed through Sponsored Awards Management (SAM) in FY2013, and federal extramural funding processed through SAM in FY2013.**

Total Extramural Funding	Commercial	Federal	Local	Other	Private (PHI)	State
$47,893,852	$463,588	$21,786,839	$250,000	$2,675,967	$19,610,199	$3,107,259

Total Extramural Funding	Total Federal Extramural Funding	Total NIH Funding
FY 2013	FY 2013	FY 2013
$47,893,852	$21,786,839	$10,907,335

** Includes funding from PHR

3. Total sponsored research awards per tenured/tenure-track faculty for FY 2013, by rank and by department if applicable.

ASSISTANT PROFESSOR:

BY DEPT	TOTAL FUNDED IN RANK	RANK	Total Funding	FEDERAL	STATE	LOCAL	PHI	COMM	OTHER	TOTAL # FACULTY IN RANK*
CBA	3	Assistant Professor	1,235,313	1,081,313	-	-	154,000	-	-	7
PMI	6	Assistant Professor	1,584,784	1,584,784	-	-	-	-	-	13
PPN	2	Assistant Professor	135,774	-	-	-	135,774	-	-	5
FAMILY MEDICINE	4	Assistant Professor	252,311	198,964	-	-	53,347	-	-	12
GENETICS	0	Assistant Professor	-	-	-	-	-	-	-	0
INTERNAL MED	2	Assistant Professor	860,450	610,450	-	250,000	-	-	-	15
NEUROLOGY	1	Assistant Professor	9,144	-	-	-	-	9,144	-	3
NEUROPSYCHIATRY	1	Assistant Professor	151,380	147,380	4,000	-	-	-	-	13
OB/GYN	2	Assistant Professor	14,225	-	-	-	10,500	3,725	-	3
OPHTHALMOLOGY	0	Assistant Professor	-	-	-	-	-	-	-	3
ORTHOPAEDICS	0	Assistant Professor	-	-	-	-	-	-	-	6
NEUROSURGERY	0	Assistant Professor	-	-	-	-	-	-	-	0
PEDIATRICS	2	Assistant Professor	56,032	3,735	-	-	39,000	13,297	-	21
RADIOLOGY	0	Assistant Professor	-	-	-	-	-	-	-	2
SURGERY	0	Assistant Professor	-	-	-	-	-	-	-	5
DEAN'S OFFICE	0	Assistant Professor	-	-	-	-	-	-	-	0
STRATEGIC AFFAIRS	0	Assistant Professor	-	-	-	-	-	-	-	1
LIBRARY	0	Assistant Professor	-	-	-	-	-	-	-	0
Total	**23**		**4,299,413**	**3,626,626**	**4,000**	**250,000**	**392,621**	**26,166**	**-**	**109**

*Of the 109 Assistant Professors, 13 are on tenure-track.   Spreadsheet has been collapsed to only show those funded.

ASSOCIATE PROFESSOR:

BY DEPT	TOTAL FUNDED IN RANK	RANK	Total Funding	FED NIH	STATE	LOCAL	PHI	COMM	OTHER	TOTAL # FACULTY IN RANK*
CBA	4	Associate Professor	502,073	343,573	-	-	158,500	-	-	11
PMI	2	Associate Professor	562,769	562,769	-	-	-	-	-	4
PPN	4	Associate Professor	156,446	141,446		-	-	15,000	-	9
FAMILY MED	1	Associate Professor	225,546	225,546	-	-	-	-	-	12
GENETICS	0	Associate Professor	-	-	-	-	-	-	-	0
INTERNAL MED	5	Associate Professor	368,210	411,693	-	-	(50,661)	7,178	-	11
NEUROLOGY	1	Associate Professor	359	-	-	-	-	359	-	1
NEUROPSYCHIATRY	1	Associate Professor	425	-	-	-	-	425	-	4
NEUROSURGERY	0	Associate Professor	-	-	-	-	-	-	-	0
OB/GYN	0	Associate Professor	-	-	-	-	-	-	-	0
OPHTHALMOLOGY	1	Associate Professor	406,759	-	-	-	406,759	-	-	1
ORTHOPAEDICS	0	Associate Professor	-	-	-	-	-	-	-	3
PEDIATRICS	7	Associate Professor	4,132,553	3,216,216	871,325	-	43,100	1,912	-	15
RADIOLOGY	1	Associate Professor	1,984,163	1,569,663.00	-	-	414,500.00		-	1
SURGERY	1	Associate Professor	(349,470)	(349,470)	-	-	-	-	-	2
Total	**28**		**7,989,833**	**6,121,436**	**871,325**	**-**	**972,198**	**24,874**	**-**	**74**

*Of the 74 Associate Professors, 20 are on tenure-track or tenured.   Spreadsheet has been collapsed to only show those funded.

PROFESSOR:

BY DEPT	TOTAL FUNDED IN RANK	RANK	Total Funding	FED NIH	STATE	LOCAL	PHI	COMM	OTHER	TOTAL # FACULTY IN RANK*
CBA	4	Professor	3,685,986	1,962,979	-	-	7,000	49,339	1,666,668	7
PMI	4	Professor	10,881,803	5,572,140	-	-	4,300,364		1,009,299	7
PPN	1	Professor	7,500	7,500	-	-	-	-	-	5
FAMILY MED	2	Professor	2,972,735	1,588,744	30,762	-	1,353,229	-	-	4
GENETICS	1	Professor	69,664	-	69,664	-	-	-	-	1
INTERNAL MED	6	Professor	6,344,748	1,425,378	2,131,508	-	2,434,408	353,454	-	6
NEUROLOGY	1	Professor	324,878	162,579	-	-	152,544	9,755	-	2
NEUROPSYCHIATRY	2	Professor	1,955,578	1,103,605	-	-	851,973	-	-	6
OB/GYN	1	Professor	1,319,856	-	-	-	1,319,856	-	-	2
ORTHOPAEDICS	1	Professor	979,825	-	-	-	979,825	-	-	2
PEDIATRICS	2	Professor	924,382	38,616	-	-	885,766	-	-	5
SURGERY	1	Professor	1,024,425		-	-	1,024,425	-	-	4
DEANS'S OFFICE	1	Professor	4,905,990	-	-	-	4,905,990	-	-	1

20

SCHOOL OF MEDICINE - BLUEPRINT 2013

Question 3. Total sponsored research awards per tenured/ tenure-track faculty for FY 2013, by rank and by department, if applicable.

Assistant Professors:

Department	Funding per Tenured/Tenure-Track Faculty FY 2013	Total Tenured/ Tenure-Track Faculty FY 2013	Funding FY 2013
Cell Biology & Anatomy	$289,578	4	$1,158,313
Pathology, Microbiology & Immunology	$264,131	6	$1,584,784
Pharmacology, Physiology & Neuroscience	$45,258	3	$135,774
Total	**$221,452**	**13**	**$2,878,871**

Associate Professors:

Department	Funding per Tenured/Tenure-Track Faculty FY 2013	Total Tenured/ Tenure-Track Faculty FY 2013	Funding FY 2013
Cell Biology & Anatomy	$71,725	7	$502,073
Family Medicine	$112,773	2	$225,546
Pathology, Microbiology & Immunology	$0	3	$0
Pharmacology, Physiology & Neuroscience	$15,851	8	$126,806
Total	**$42,721**	**20**	**$854,425**

Professors:

Department	Funding per Tenured/Tenure-Track Faculty FY 2013	Total Tenured/ Tenure-Track Faculty FY 2013	Funding FY 2013
Cell Biology & Anatomy	$705,822	5	$3,529,108
Family Medicine	$990,912	3	$2,972,735
Internal Medicine	$997,607	2	$1,995,214
Neurology	$324,878	1	$324,878
Neuropsychiatry	$883,484	2	$1,766,967
Pathology, Microbiology & Immunology	$2,176,361	5	$10,881,803
Pediatrics	$0	1	$0
Pharmacology, Physiology & Neuroscience	$0	2	$0
Surgery	$0	1	$0
Total	**$975,941**	**22**	**$21,470,705**

Librarian:

Department	Funding per Tenured/Tenure-Track Faculty FY 2013	Total Tenured/ Tenure-Track Faculty FY 2013	Funding FY 2013
Medical Library	$4,262	7	$29,837
Total All Ranks	**$406,997**	**62**	**$25,233,838**

*The funding above excludes VA awards.

4. **Number of patents, disclosures, and licensing agreements in fiscal years 2011, 2012 and 2013.**

| Fiscal Year	Invention Disclosures	Provisional Patent Applications	Non-Provisional Patent Applications	Issued patents	Licensing Agreements
2011	5	4	3	4	
2012	11	2	1	0	
2013	9	11	1	4	1

*Non-provisional patent applications include only newly filed US Utility and PCT applications.

Appendix G. <u>School of Medicine Academic Dashboard</u>

Academic Dashboard Measures for School of Medicine

1. MCAT Score

2. Percentage of Graduates Choosing Primary Care Specialties (Family Medicine, Internal Medicine, Pediatrics)

3. Percentage of Graduates Practicing in Primary Care and Practicing In-state

4. United States Medical Licensing Examination (USMLE) Step 2 First Time Percent Pass Rate

5. Research Funding Awards
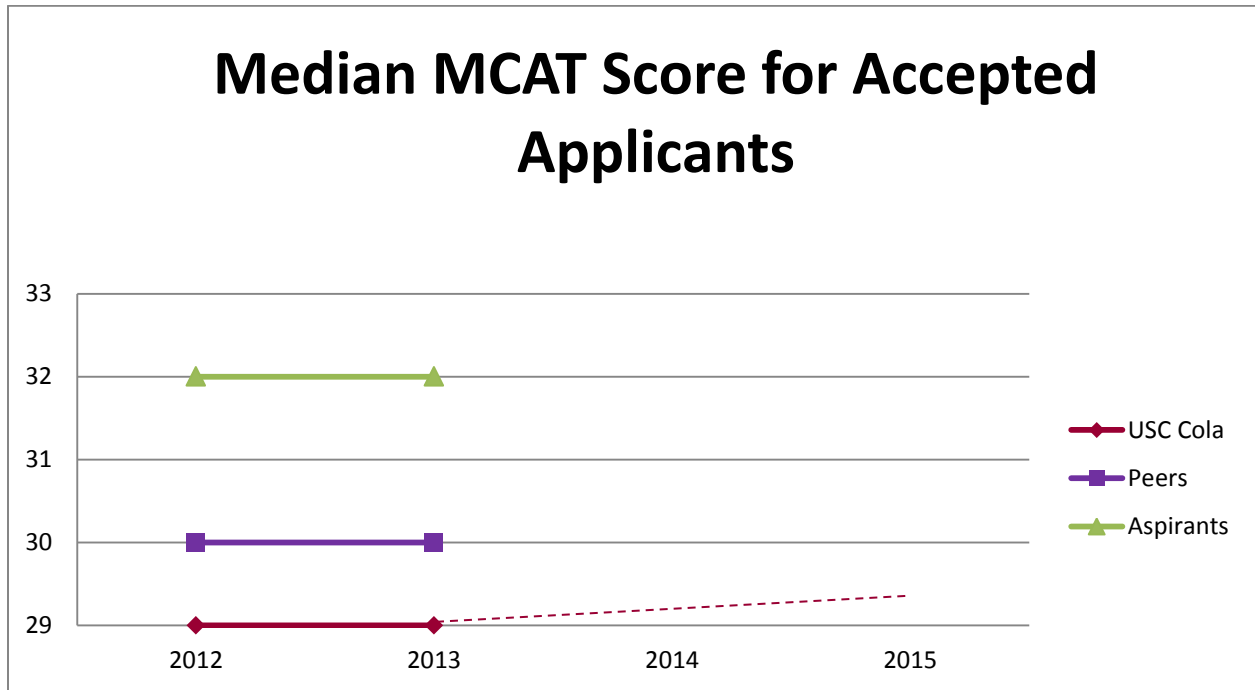
Median MCAT Score for Accepted Applicants
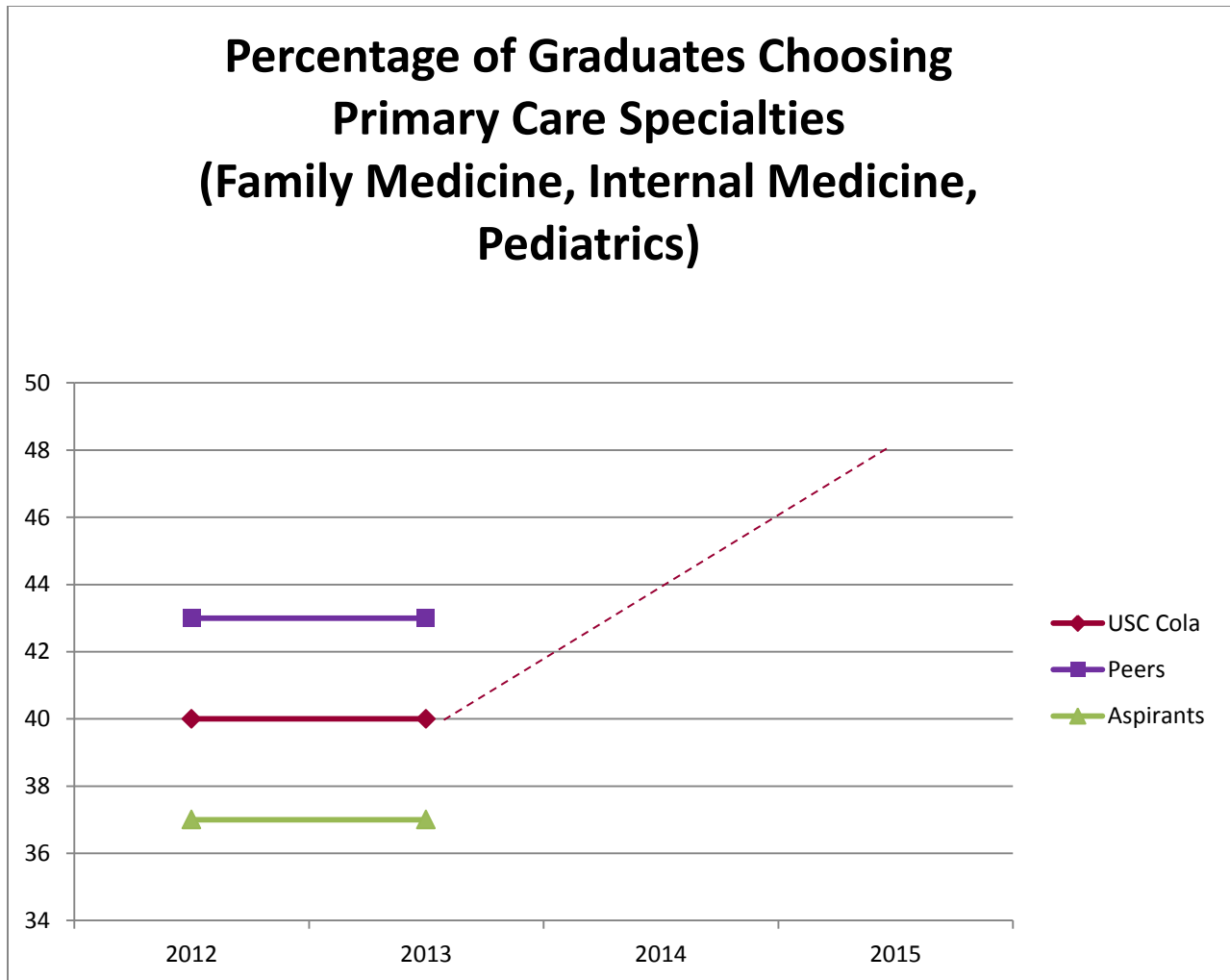

Source: Association of American Medical Colleges/Medical School Admission Requirements.

Percentage of Graduates Choosing Primary Care Specialties (Family Medicine, Internal Medicine, Pediatrics)
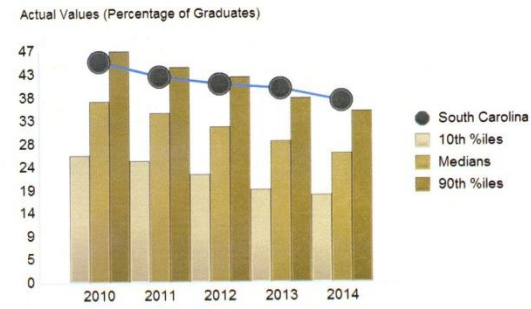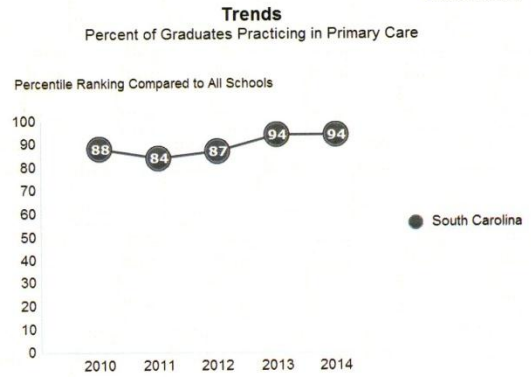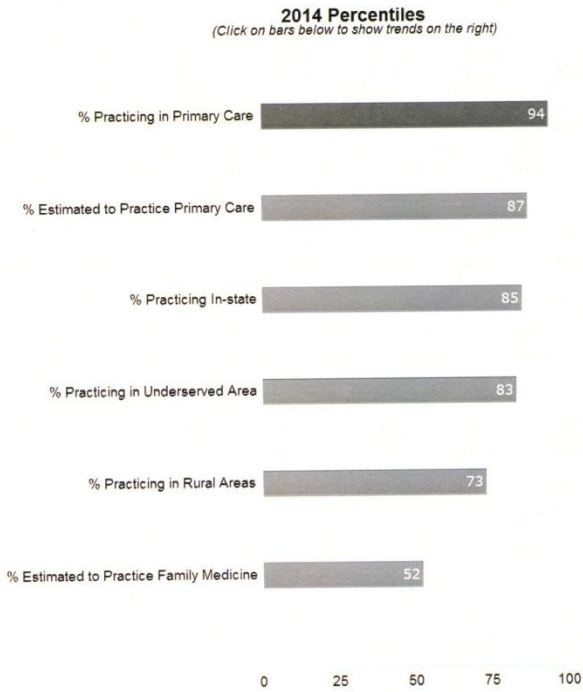

Source: Association of American Medical Colleges/Medical School Admission Requirements.
National Graduate Medical Education Census.

No. 3: Percentage of Graduates Practicing in Primary Care

Medical School Missions Dashboard
University of South Carolina School of Medicine

AAMC

1. Graduate a Workforce that Will Address the Priority Health Needs of the Nation

Select a mission

2014 Percentiles
(Click on bars below to show trends on the right)

Trends
Percent of Graduates Practicing in Primary Care

Percentile Ranking Compared to All Schools

% Practicing in Primary Care — 94

% Estimated to Practice Primary Care — 87

% Practicing In-state — 85

% Practicing in Underserved Area — 83

% Practicing in Rural Areas — 73

% Estimated to Practice Family Medicine — 52

0   25   50   75   100

Percentile ranking chart values: 88, 84, 87, 94, 94 (2010–2014) — ● South Carolina

Actual Values (Percentage of Graduates)

● South Carolina
□ 10th %iles
■ Medians
■ 90th %iles

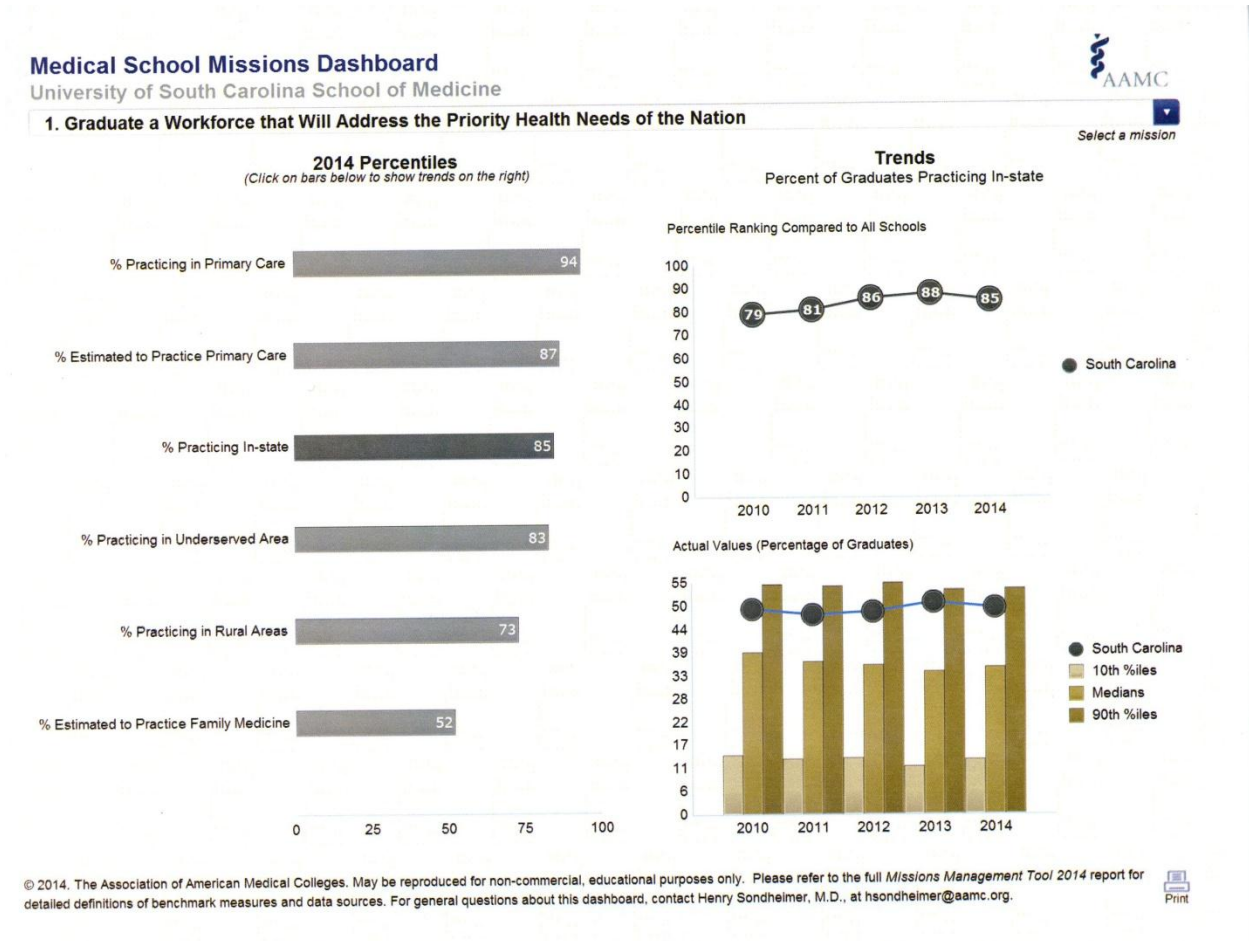© 2014. The Association of American Medical Colleges. May be reproduced for non-commercial, educational purposes only. Please refer to the full *Missions Management Tool 2014* report for detailed definitions of benchmark measures and data sources. For general questions about this dashboard, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org.

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Source: Association of American Medical Colleges

No. 3: Percentage of Graduates Practicing In-state

Medical School Missions Dashboard
University of South Carolina School of Medicine

AAMC

1. Graduate a Workforce that Will Address the Priority Health Needs of the Nation

Select a mission

2014 Percentiles
(Click on bars below to show trends on the right)

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Percent of Graduates Practicing In-state

Percentile Ranking Compared to All Schools

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% Practicing in Underserved Area — 83

% Practicing in Rural Areas — 73

% Estimated to Practice Family Medicine — 52

Trend values: 79, 81, 86, 88, 85 (2010–2014) — South Carolina

Actual Values (Percentage of Graduates)

South Carolina
10th %iles
Medians
90th %iles

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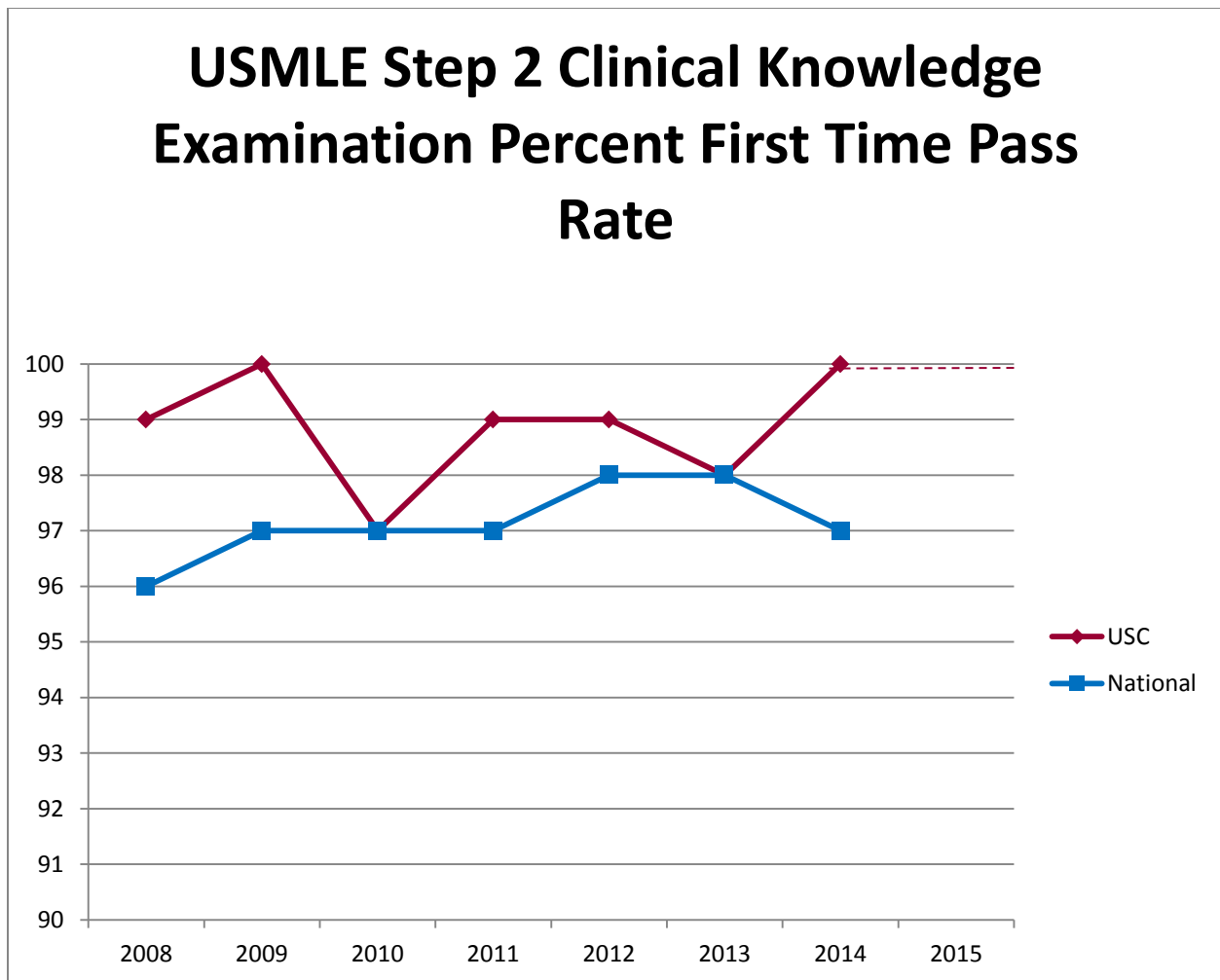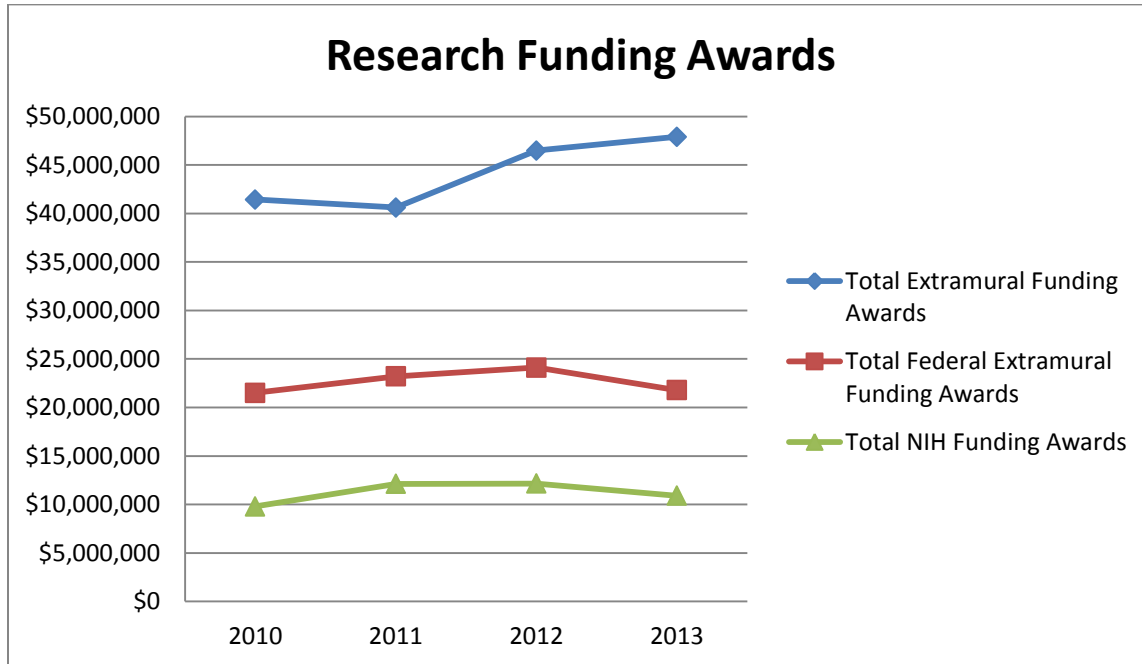
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Source: Association of American Medical Colleges

Source: National Board of Medical Examiners. Performance of Examinees Taking USMLE® Step 2 Clinical Knowledge (CK) for the First Time.

No. 5: Research Funding Awards

Research Funding Awards

Legend:
- Total Extramural Funding Awards
- Total Federal Extramural Funding Awards
- Total NIH Funding Awards

Source: University of South Carolina Sponsored Awards Management Awards & Reports