



Tomorrow's Doctors, Tomorrow's Cures®

Missions Management Tool

2015

Prepared for

University of North Carolina at Chapel Hill School of
Medicine

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Introduction

The Missions Management Tool (MMT) has been released each year since 2009. The MMT is designed to highlight the various missions of our member medical schools. However, each medical school is unique and its mission and goals will depend on its history, its location, its governing body, its faculty, and its local constituency. Because of the various missions and goals of our member medical schools, the AAMC thinks it is inappropriate to create a single value from the many different variables that help express the diverse missions across the medical schools. Rather, each medical school should be viewed in its own context. This year's MMT includes data on forty-five measures in six mission areas:

- Graduate a Workforce that Will Address the Priority Health Needs of the Nation.
- Prepare a Diverse Physician Workforce
- Foster the Advancement of Medical Discovery
- Provide High Quality Medical Education as Judged by Your Recent Graduates
- Prepare Physicians to Fulfill the Needs of the Community
- Graduate a Medical School Class with Manageable Debt

The MMT provides comparative outcomes data for medical education programs with full LCME accreditation as of January 1, 2015. The complementary Missions Dashboard has been released in conjunction with the MMT each year since 2012. The Missions Dashboard is interactive where one is able to see the five-year trend data displayed by selecting the measure. The AAMC no longer considers the MMT and Missions Dashboard "limited access" reports. As a result, the AAMC encourages you to distribute them widely in your academic community.

Methodology

The data in the MMT are presented in customized tables with percentile distributions based on all reporting institutions. Some tables, such as those requiring data on graduates from multiple years, will have fewer medical schools. The customized tables show how your medical school compares to other medical schools on key measures across the six missions.

The customized benchmark tables array decile distributions (e.g., 10th percentile, 20th percentile) for each column included in the report. Your medical school's values are displayed in highlighted boxes at their relative percentile standing. For example, the first column of Table 1 shows the decile distribution of total graduates from 2000 through 2004. The 50th percentile for total graduates is 622 and the 60th percentile is 705. If your medical school's total graduates is 679, that value will appear in a highlighted box midway between the 50th and 60th percentiles. Medical schools without data will see the decile distributions in their custom reports but will not see their relative standing in that distribution.

The data are shown for medical education programs that were fully accredited during the time period indicated by the column header. The calculation of the valid number (Valid N) and the decile distributions in the customized benchmark tables exclude medical schools reporting with missing and/or null values. Zero values are included unless otherwise noted. For a given benchmark item, the mean is calculated by dividing the sum of medical school values on the item by the count of medical schools. The number of medical schools for each value is listed as the Valid N.

Corrections

Past iterations of the MMT and Missions Dashboard had problems with Table 1 and Table 4. Table 1 had incorrect formulas for "Percent of graduates practicing in medically underserved areas" and for "Percent of graduates practicing in rural areas." The formulas unintentionally excluded graduates who were not involved in direct patient care. Moreover, Table 4 mistakenly labelled "Basic Science Content had Sufficient Illustrations of Clinical Relevance" as "Basic Science Content Provided Relevant Preparation for Clerkships." The 2014 iteration of the MMT and Missions Dashboard had a problem with Table 3—"Total Federal Research Grants and Contracts for Organized Research" incorrectly included all federal research grants and contracts, not just those for organized research.

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

Measure	Description
<i>Total graduates from 2000 through 2004</i>	The total number of graduates from the medical school who received an M.D. degree between academic years 1999-2000 and 2003-2004, inclusive. The source of these counts is the AAMC Student Records System.
<i>Percent of graduates practicing in primary care</i>	The practice specialty in 2013 was taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated between academic years 1999-2000 and 2003-2004. Primary care includes the specialties of internal medicine, internal medicine/family medicine, internal medicine/pediatrics, pediatrics, family medicine, and general practice.
<i>Percent of graduates practicing in-state</i>	The practice location in 2013 was taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated between academic years 1999-2000 and 2003-2004. The practice state was compared with the state in which the medical school of graduation is located..
<i>Percent of graduates practicing in rural areas</i>	The practice location in 2013 was taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated between academic years 1999-2000 and 2003-2004. Rural areas are defined as areas with a primary RUCA codes between 4 and 10. Geocoded practice locations include the 50 states, the District of Columbia, and Puerto Rico (excluding other U.S. territories).
<i>Percent of graduates practicing in medically underserved areas</i>	The practice location in 2013 was taken from the American Medical Association Physician Masterfile for physicians providing direct patient care who graduated between academic years 1999-2000 and 2003-2004. Underserved areas are geographically defined Medically Underserved Areas (MUAs) as of February 6, 2014, but excludes other types of MUAs (see http://bhpr.hrsa.gov/shortage). MUA designation is based on an Index of Medical Underservice, which is derived from an area's ratio of primary medical care physicians per 1,000 population, infant mortality rate, percentage of the population with incomes below the poverty level, and percentage of the population age 65 or over. Geocoded practice locations include the 50 states, the District of Columbia, and Puerto Rico.
<i>Total graduates entering post-graduate training</i>	The total number of M.D. graduates from medical school who entered post-graduate training anytime from January 1, 2011 through December 31, 2013. The source of these data is the GME Track of records on residents and residencies. These data include first-year residents regardless of graduation date from medical school.
<i>Percent of graduates estimated to practice family medicine</i>	Percent of M.D. graduates entering a family medicine residency program anytime from January 1, 2011 through December 31, 2013. The source of these data is the GME Track of records on residents and residencies.
<i>Percent of graduates estimated to practice primary care</i>	Percent of M.D. graduates entering a residency program in family medicine, internal medicine, pediatrics or internal medicine/pediatrics anytime from January 1, 2011 through December 31, 2013, minus the M.D. graduates entering fellowships in subspecialties of internal medicine or pediatrics in the same time period. The source of these data is the GME Track of records on residents and residencies.

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Table 2 – Prepare a Diverse Physician Workforce

Measure	Description
<i>Total graduates from 2008 through 2013</i>	The total number of graduates from the medical school who received an M.D. degree between academic years 2007-2008 and 2012-2013, inclusive. The source of these counts is the AAMC Student Records System (SRS).
<i>Number and percent of graduates who are Hispanic or Latino</i>	The total number and percent of graduates who indicated Hispanic or Latino on their AMCAS application. Through 2012, AMCAS conformed to the federal OMB Directive 15 on asking race and Hispanic or Latino origin as a two part, multiple response question where applicants self-describe their race and/or ethnicity. The applicant’s self-description is imported into the AAMC SRS and remains the racial and/or ethnic description throughout their medical school enrollment and completion, unless modified on behalf of the student by an SRS user.
<i>Number and percent of graduates who are American Indian or Alaska Native</i>	The total number and percent of graduates who indicated American Indian or Alaska Native on their AMCAS application. Through 2012, AMCAS conformed to the federal OMB Directive 15 on asking race and Hispanic or Latino origin as a two part, multiple response question where applicants self-describe their race and/or ethnicity. The applicant’s self-description is imported into the AAMC SRS and remains the racial and/or ethnic description throughout their medical school enrollment, unless modified on behalf of the student by an SRS user.
<i>Number and percent of graduates who are Black or African-American</i>	The total number and percent of graduates who positively indicated Black or African-American on their AMCAS application. Through 2012, AMCAS conformed to the federal OMB Directive 15 on asking race and Hispanic or Latino origin as a two part, multiple response question where applicants self-describe their racial and/or ethnicity. The applicant’s self-description is imported into the AAMC SRS and remains the race and/or ethnic description throughout their medical school enrollment and completion, unless modified on behalf of the student by an SRS user.
<i>Total faculty</i>	The total number of faculty members with active, full-time appointments as of December 31, 2013, as reported to the AAMC Faculty Roster. Full-time faculty are defined as the number of all paid individuals who are considered by the medical school to be full-time medical school faculty whether supported by the medical school directly or supported by affiliated organizations, including full-time faculty based in affiliated hospitals, in schools of basic health sciences, and research faculty. Residents and fellows are not included.
<i>Number of faculty who are women</i>	The total number of female faculty members with active, full-time appointments as of December 31, 2013, as reported to the AAMC Faculty Roster.
<i>Percent of faculty who are women</i>	The total number of female faculty members as a percent of the total number of faculty members with active, full-time appointments at the same medical school as of December 31, 2013, as reported to the AAMC Faculty Roster.
<i>Number of faculty who are Hispanic or Latino, American Indian or Alaska Native, Black or African-American</i>	The total number of faculty members with active, full-time appointments as of December 31, 2013, who were reported to the AAMC Faculty Roster with any Hispanic or Latino background, with only American Indian or Alaska Native as a race, or with only Black or African-American as a race. To allow for an unduplicated faculty count by medical school, a faculty member’s Hispanic or Latino origin classification takes priority over a faculty member’s race classification. An individual in more than one race is classified under the category of multiple race (not shown).
<i>Percent of faculty who are Hispanic or Latino, American Indian or Alaska Native, Black or African-American</i>	Total number of faculty members as a percent of the total number of faculty members with active, full-time appointments as of December 31, 2013, who were reported to the AAMC Faculty Roster with any Hispanic or Latino background, with only American Indian or Alaska Native as a race, or with only Black or African-American as a race as a percent of the total number of full-time faculty members at the same medical school.

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Table 3 – Foster the Advancement of Medical Discovery

Measure	Description
<i>Total graduates from 2008 through 2013</i>	The total number of graduates from the medical school who received an M.D. degree between academic years 2007-2008 and 2012-2013, inclusive. The source of these counts is the AAMC Student Records System (SRS).
<i>Number and percent of those students who graduate with an M.D. and a Ph.D.</i>	In the AAMC SRS, the medical school registrars have the ability to select degrees conferred beyond just the M.D. degree. The numbers are tallied based on the registrars' indication of dual degrees conferred by the medical school and/or the graduate or professional school. Only medical schools reporting M.D.-Ph.D. graduates are included.
<i>Percent of graduates who did research during medical school</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates that participated in an elective research project with a faculty member while in medical school.
<i>NIH awards</i>	The total NIH award dollars attributed to medical school for federal fiscal year 2013.
<i>Total federal research grants and contracts for organized research</i>	The total amount of federal research grants and contracts expenditures (direct and indirect costs) for organized research reported on the LCME Part I-A Annual Financial Questionnaire for fiscal year 2012-2013.
<i>Total graduates from 2000 through 2009</i>	The total number of graduates from the medical school who received an M.D. degree between academic years 1999-2000 and 2008-2009, inclusive. The source of these counts is the AAMC Student Records System.
<i>Number of graduates from 2000 through 2009 becoming faculty</i>	The total number of graduates from the medical school who received an M.D. degree between academic years 1999-2000 and 2008-2009, inclusive, who became full-time faculty members at a U.S. medical school at any point between their graduation and December 31, 2013. Graduate counts are taken from the AAMC Student Records System and faculty appointments are taken from the AAMC Faculty Roster.
<i>Percent of graduates from 2000 through 2009 becoming faculty</i>	The percent of graduates from the medical school who received an M.D. degree between academic years 1999-2000 and 2008-2009, inclusive, who became full-time faculty members at a U.S. medical school at any point between their graduation and December 31, 2013, as a percent of total graduates from the same medical school. Graduate counts are taken from the AAMC Student Records System and faculty appointments are taken from the AAMC Faculty Roster.

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Table 4 – Provide High Quality Medical Education as Judged by Your Recent Graduates

Measure	Description
<i>Rate the quality of your educational experiences in family medicine clinical clerkships</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Good” or “Excellent.”
<i>Rate the quality of your educational experiences in internal medicine clinical clerkships</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Good” or “Excellent.”
<i>Rate the quality of your educational experiences in obstetrics-gynecology clinical clerkships</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Good” or “Excellent.”
<i>Rate the quality of your educational experiences in pediatrics clinical clerkships</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Good” or “Excellent.”
<i>Rate the quality of your educational experiences in psychiatry clinical clerkships</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Good” or “Excellent.”
<i>Rate the quality of your educational experiences in general surgery clinical clerkships</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Good” or “Excellent.”
<i>Basic science content had sufficient illustrations of clinical relevance</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Agree” or “Strongly agree.”
<i>Overall I am satisfied with the quality of my medical education</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding “Agree” or “Strongly agree.”

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Table 5 – Prepare Physicians to Fulfill the Needs of the Community

Measure	Description
<i>Field experience in community health on an elective or volunteer basis during medical school</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates indicating that they participated in an elective field experience in community health while in medical school.
<i>Required curricular activities with students from different health professions</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates indicating that they participated in any required curricular activities where they had the opportunity to learn with students from different health professions.
<i>Time devoted to your instruction in women's health</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding "Appropriate."
<i>Time devoted to your instruction in culturally appropriate care for diverse populations</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding "Appropriate."
<i>Time devoted to your instruction in role of community health and social service agencies</i>	Of the 2012, 2013, and 2014 graduates responding to this question on the AAMC Graduation Questionnaire, the percent of graduates responding "Appropriate."

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Table 6 – Graduate a Medical School Class with Manageable Debt

Measure	Description
<i>Cost of attendance for a 2014 graduate – in-state graduates</i>	The total cost of attendance for four years of medical school for a resident of the state where the medical school is located as reported on the AAMC Tuition and Student Fees Questionnaire between academic years 2010-2011 and 2013-2014. Cost of attendance includes tuition, fees, health insurance, and estimated costs for living expenses, transportation, books and equipment, computers/PDAs, and miscellaneous non-living expenses.
<i>Cost of attendance for a 2014 graduate – out-of-state graduates</i>	The total cost of attendance for four years of medical school for a non-resident of the state where the medical school is located as reported on the AAMC Tuition and Student Fees Questionnaire between academic years 2010-2011 and 2013-2014. Cost of attendance includes tuition, fees, health insurance, and estimated costs for living expenses, transportation, books and equipment, computers/PDAs, and miscellaneous non-living expenses.
<i>Average medical school debt of indebted 2014 graduates</i>	Total amount of medical school debt (excluding joint, dual, or combined degree programs) of 2014 graduates divided by the total number of 2014 graduates with medical school debt, as reported on the LCME Part I-B Student Financial Aid Questionnaire for the academic year 2013-2014.
<i>Average medical school debt 2009-2014 CAGR</i>	Estimated average annually compounded growth rate of average graduate medical school debt between academic years 2008-2009 and 2013-2014, assuming constant growth, as reported on the LCME Part I-B Student Financial Aid Questionnaire between academic years 2008-2009 and 2013-2014. Formula = $[(2014 \text{ Average Graduate Debt} / 2009 \text{ Average Graduate Debt})^{(1/5)}] - 1$.

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TABLE 1

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

University of North Carolina at Chapel Hill School of Medicine
Benchmarked against All Medical Schools



Percentile	Areas of Practice for Graduates from 2000 through 2004					Areas of Estimated Practice for Graduates from 2011 through 2013		
	Total Graduates	Percent in Primary Care Medicine	Percent Practicing In-state	Percent Practicing in Rural Areas	Percent Practicing in Underserved Areas	Total Graduates Entering Post-Graduate Training	Percent in Family Medicine	Percent in Primary Care
90	956	34.1%	55.4%	13.5%	25.4%	595	15.0%	35.6%
80	822	29.9%	48.7%	10.1%	21.9%	519	12.2%	32.2%
70	766	28.0%	43.8%	8.6%	20.3%	470	10.6%	27.2%
60	705	26.1%	40.9%	6.9%	18.9%	442	9.6%	26.0%
50	622	25.2%	37.9%	5.6%	17.6%	406	8.5%	24.2%
40	523	24.0%	31.4%	4.4%	16.2%	344	7.1%	22.8%
30	483	21.7%	28.1%	3.5%	15.5%	314	6.0%	21.1%
20	452	20.1%	20.7%	2.5%	14.2%	269	4.8%	18.3%
10	308	16.9%	14.9%	2.0%	12.5%	208	3.2%	16.3%
Mean	633	25.3%	35.8%	6.8%	18.9%	402	8.8%	25.0%
Valid N	124	124	124	124	124	126	126	126

Note: The percentile distributions include reported zero values but exclude missing values.

Source: AAMC Student Records System; American Medical Association Physician Masterfile; GME Track System

Staff Contact: For general report questions, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org. For the data contributors to this table, see the definitions section of the report (pages 5 through 10).

TABLE 2 Prepare a Diverse Physician Workforce
 University of North Carolina at Chapel Hill School of Medicine
 Benchmarked against All Medical Schools



Percentile	Graduates from 2008 through 2013							Full-Time Faculty as of December 31, 2013				
	Total Graduates	Number who are Hispanic or Latino	Percent who are Hispanic or Latino	Number who are American Indian or Alaska Native	Percent who are American Indian or Alaska Native	Number who are Black or African-American	Percent who are Black or African-American	Total Faculty	Number who are Women	Percent who are Women	Number who are Hispanic or Latino, American Indian or Alaska Native, or Black or African-American	Percent who are Hispanic or Latino, American Indian or Alaska Native, or Black or African-American
90	1,165	127	13.5%	12	1.3%	117	12.5%	2,199	853	44.4%	156	11.6%
80	1,020	72	9.3%	9	1.0%	73	8.8%	1,751	701	41.8%	103	8.9%
70	977	63	6.7%	7	0.8%	64	7.5%	1,574	512	39.8%	87	7.5%
60	936	48	5.2%	5	0.7%	53	6.5%	1,384	426	38.3%	79	6.2%
50	899	48	5.2%	5	0.7%	53	6.5%	1,136	426	38.3%	73	6.2%
40	828	35	4.8%	5	0.6%	43	5.3%	956	358	36.8%	55	5.7%
30	696	29	3.9%	4	0.5%	36	4.5%	822	283	35.5%	47	5.1%
20	620	22	3.0%	3	0.4%	24	3.6%	634	222	34.1%	37	4.3%
10	569	17	2.0%	2	0.3%	20	2.3%	396	142	32.6%	27	3.7%
Mean	416	9	1.8%	1	0.2%	7	1.4%	230	81	31.5%	17	3.2%
Mean	811	60	8.5%	6	0.8%	54	7.1%	1,159	440	37.4%	74	9.4%
Valid N	126	126	126	126	126	126	126	129	129	129	129	129

Note: The percentile distributions include reported zero values but exclude missing values.

Source: AAMC Student Records System; AAMC Faculty Roster

Staff Contact: For general report questions, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org. For the data contributors to this table, see the definitions section of the report (pages 5 through 10).

TABLE 3 Foster the Advancement of Medical Discovery
 University of North Carolina at Chapel Hill School of Medicine
 Benchmarked against All Medical Schools



Percentile	Graduates from 2008 through 2013			Participation in Medical School Electives (Average Percent Participating, 2012-2014)	Fiscal Year 2013		Graduates from 2000 through 2009 Becoming Faculty at Any Time through December 2013		
	Total Graduates	Number with Combined M.D.-Ph.D. Degrees	Percent with Combined M.D.-Ph.D. Degrees	Percent who Did Research During Medical School	NIH Awards	Total Federal Research Grants and Contracts for Organized Research	Total Graduates	Number Becoming Faculty	Percent Becoming Faculty
90	1,165	65	8.2%	93.1%	\$261,454,276	\$339,666,850	1,911	461	29.8%
					\$255,948,474	\$298,487,316		399	
80	1,020	52	5.6%	85.4%	\$151,050,486	\$212,240,105	1,644	391	27.6%
		42							26.3%
70	977	40	4.9%	74.3%	\$104,199,768	\$140,803,472	1,518	355	24.9%
	936		4.5%				1,517		
60	899	27	3.1%	72.0%	\$66,458,110	\$105,562,552	1,439	337	23.2%
				70.3%					
50	828	22	2.2%	67.5%	\$43,913,605	\$59,902,900	1,273	296	21.7%
40	696	16	1.9%	61.9%	\$31,557,264	\$48,613,618	1,079	253	20.0%
30	620	13	1.5%	58.7%	\$19,184,504	\$29,128,234	979	218	19.1%
20	569	8	0.9%	55.4%	\$9,549,418	\$13,022,768	883	173	17.4%
10	416	3	0.4%	48.5%	\$5,498,324	\$8,397,222	632	118	14.8%
Mean	811	30	3.7%	68.4%	\$87,467,210	\$131,742,820	1,279	288	22.3%
Valid N	126	110	110	126	129	129	124	124	124

Note: The percentile distributions for the two M.D.-Ph.D. columns exclude reported zero values and missing values. The remaining percentile distributions include reported zero values but exclude missing values.
 Source: AAMC Student Records System; AAMC Graduation Questionnaire; NIH; LCME Part I-A Annual Financial Questionnaire; AAMC Faculty Roster
 Staff Contact: For general report questions, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org. For the data contributors to this table, see the definitions section of the report (pages 5 through 10).

TABLE
4

Provide High Quality Medical Education as Judged by Your Recent Graduates

University of North Carolina at Chapel Hill School of Medicine
Benchmarked against All Medical Schools



Percentile	Evaluation of Medical School Clerkships (Average Percent Responding Good or Excellent, 2012-2014)						Evaluation of Medical School Experiences (Average Percent Responding Agree/Strongly Agree, 2012-2014)	
	Rate the Quality of Educational Experiences in Family Medicine Clinical Clerkships	Rate the Quality of Educational Experiences in Internal Medicine Clinical Clerkships	Rate the Quality of Educational Experiences in Obstetrics-Gynecology Clinical Clerkships	Rate the Quality of Educational Experiences in Pediatrics Clinical Clerkships	Rate the Quality of Educational Experiences in Psychiatry Clinical Clerkships	Rate the Quality of Educational Experiences in General Surgery Clinical Clerkships	Basic Science Content had Sufficient Illustrations of Clinical Relevance	Overall, I am Satisfied with the Quality of my Medical Education
90	92.0%	96.5%	89.4%	96.4%	95.3%	92.2%	85.7%	96.8%
80	89.8%	94.8%	87.9%	94.9%	92.1%	88.5%	83.5%	95.4%
70	88.9%	94.4%	84.4%	92.4%	90.6%	88.5%	79.4%	93.8%
60	87.9%	94.0%	82.4%	90.7%	89.6%	86.2%	77.4%	92.7%
50	85.9%	93.3%	80.6%	89.3%	88.0%	84.7%	74.2%	91.9%
40	83.7%	92.0%	78.6%	87.4%	86.6%	84.4%	84.4%	90.7%
30	81.6%	90.7%	76.1%	85.8%	84.4%	81.9%	72.1%	89.2%
20	79.9%	89.5%	73.8%	83.5%	83.4%	80.9%	71.3%	88.6%
10	76.2%	87.3%	71.1%	82.3%	78.2%	78.5%	69.0%	86.8%
Mean	71.5%	84.8%	67.2%	78.4%	73.0%	74.5%	65.1%	85.0%
Valid N	82.2%	91.0%	77.5%	86.9%	84.7%	82.9%	72.0%	90.0%
	126	126	126	126	126	126	126	126

Note: The percentile distributions include reported zero values but exclude missing values.

Source: AAMC Graduation Questionnaire

Staff Contact: For general report questions, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org. For the data contributors to this table, see the definitions section of the report (pages 5 through 10).

TABLE 5 Prepare Physicians to Fulfill the Needs of the Community
 University of North Carolina at Chapel Hill School of Medicine
 Benchmarked against All Medical Schools



Percentile	Field Experience in Community Health on an Elective or Volunteer Basis During Medical School	Required Curricular Activities with Students from Different Health Professions	Evaluation of Time Devoted to Instruction (Average Percent Responding Appropriate, 2012-2014)		
	Average Percent Participating, 2012-2014	Average Percent Participating, 2012-2014	Instruction in Women's Health	Instruction in Culturally Appropriate Care for Diverse Populations	Instruction in Role of Community Health and Social Service Agencies
90	56.9%	96.6%	97.3%	88.1%	80.8%
80	49.0%	90.5%	92.8%	86.3%	78.4%
70	48.0%	83.6%	91.9%	86.1%	76.5%
60	45.3%	79.6%	90.7%	85.5%	74.2%
50	43.2%	74.7%	90.2%	83.9%	72.0%
40	39.0%	71.1%	89.7%	82.1%	69.3%
30	36.5%	69.3%	88.0%	81.0%	67.4%
20	33.1%	64.5%	86.5%	79.0%	64.8%
10	30.6%	60.9%	84.8%	77.4%	61.2%
Mean	30.6%	53.5%	84.8%	76.0%	61.2%
Mean	42.3%	74.5%	89.6%	82.0%	71.4%
Valid N	126	126	126	126	126

Note: The percentile distributions include reported zero values but exclude missing values.

Source: AAMC Graduation Questionnaire

Staff Contact: For general report questions, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org. For the data contributors to this table, see the definitions section of the report (pages 5 through 10).

TABLE
6

Graduate a Medical School Class with Manageable Debt

*University of North Carolina at Chapel Hill School of Medicine
Benchmarked against All Medical Schools*



Percentile	Cost of Attendance for a 2014 Graduate		Average Medical School Debt for Graduates	
	In-state Graduates	Out-of-state Graduates	Average Debt of Indebted 2014 Graduates	Average Debt 2009-2014 CAGR
90	\$305,013	\$343,196	\$207,294	5.4%
80	\$288,367	\$327,903	\$178,633	4.5%
70	\$271,823	\$312,844	\$169,487	3.9%
60	\$249,093	\$307,873	\$161,634	3.3%
50	\$233,586	\$298,252	\$151,594	2.6%
40	\$227,400	\$292,051	\$146,197	2.0%
		\$291,326		1.8%
30	\$217,784	\$282,065	\$140,204	1.3%
20	\$202,760	\$272,862	\$122,866	0.6%
	\$188,936			
10	\$182,559	\$257,720	\$110,613	(0.3%)
			\$94,354	
Mean	\$241,657	\$298,515	\$153,974	2.5%
Valid N	125	120	129	125

Note: The percentile distributions include reported zero values but exclude missing values.

Source: AAMC Tuition and Student Fees Questionnaire; LCME Part I-B Student Financial Aid Questionnaire

Staff Contact: For general report questions, contact Henry Sondheimer, M.D., at hsondheimer@aamc.org. For the data contributors to this table, see the definitions section of the report (pages 5 through 10).