



University of Colorado at Denver and Health Sciences Center

Health Sciences Programs



Dear Reader,

In achieving the mission of education, research, health care and community service, the health sciences programs at the University of Colorado at Denver and Health Sciences Center (UCDHSC) are nationally known. This "Fact Book 2005" summarizes many reasons for these programs' preeminence.

The "Fact Book" that follows provides abundant evidence of the health sciences programs' stature, including noteworthy achievements of the faculty, students, and staff, nationally recognized educational programs, significant research activities and accomplishments, and extensive involvement in caring for the people of Colorado and the Rocky Mountain Region. I invite you to discover the many remarkable accomplishments of these unique programs in the pages that follow.

James Shore

James H. Shore, M.D., Chancellor University of Colorado at Denver and Health Sciences Center

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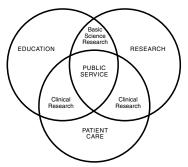
On July 1, 2004, the Regents of the University of Colorado voted to consolidate the University of Colorado at Denver and the University of Colorado Health Sciences Center campuses into one entity, now called the University of Colorado at Denver and Health Sciences Center (UCDHSC). The mission statement below and the data in this fact book cover the Health Sciences portion of the consolidated institution. Data about the Downtown Denver Campus are included in a separate document.

Mission Statement

The mission statement of the Health Sciences Center (HSC) reflects the main purposes of the institution:

- the education of health professionals;
- the delivery of both health care and community service; and
- the advancement of knowledge through research in the health sciences.

Interrelationship among HSC's Missions



Legislative Mission

The legislative mission for the HSC is mandated by the Constitution of Colorado. The Colorado Revised Statutes (C.R.S. 23-20-101) state that the HSC campus' role is to "be a specialized professional institution offering baccalaureate and graduate programs in health-related disciplines". This mission statement was created during the early history of the institution and, although reviewed by the state legislature and the Board of Regents, has not changed since that time.

History

- 1883 The Medical Department of the University of Colorado opened with two students and two senior faculty members.
- 1898 The School of Nursing was established.
- 1913 The School of Pharmacy became an independent school after it had been a department in the School of Medicine for two years.
- 1925 The new medical center at Ninth Avenue near Colorado BÍvd. was formally dedicated.
- 1965 The Medical Center had been greatly expanded to 47 acres including a new Colorado General Hospital and modern quarters for the Medical and Nursing Schools.
- 1973 The School of Dentistry enrolled its first class.
- 1992 School of Pharmacy moved to Health Sciences Center from the Boulder campus.
- 1995 The federal government conveyed 217 acres of the Fitzsimons site in Aurora, Colorado, to the University of Colorado to build a 21st century health sciences center from the ground up. The first phase of transition from the current campus at Ninth Avenue and Colorado Boulevard in Denver to the Fitzsimons will be completed in 2010.
- 2000 The Anschutz Outpatient Pavilion, the Anschutz Cancer Pavilion, and the Building 500 renovation for support space were finished.
- 2001 The Preservation and Access Service Center for Colorado Academic Libraries – Library archive facility, the Rocky Mountain Lions Eye Institute, and the Perinatal Research Center Expansion were completed.
- 2002 The Nighthorse Campbell Native Health Building was dedicated.
- 2004 The Anschutz Inpatient Pavilion opened. The Research Complex I was completed. Included in the Research Complex I facilities are wet and dry research laboratories, core laboratories, lab support space (including space for linear equipment), researcher and program offices, conference rooms, a central vivarium, auditoria, and building support space.
- 2004 The University of Colorado at Denver and the University of Colorado Health Sciences Center joined into a single major urban research university. The consolidated institution boasts some 27,070 students and more than 100 degree programs. The new entity operates on a budget of \$866 million and attracts more than \$300 million a year in research grants and contracts.
- 2005 The Barbara Davis Center for Childhood Diabetes, the largest diabetes and endocrine care research and training program in Colorado, transitioned into a new facility at Fitzsimons.

Programs and Units

The University of Colorado Health Sciences Center encompasses the Schools of Medicine, Nursing, Dentistry, Pharmacy and the Graduate School. It also has a teaching hospital, the University of Colorado Hospital, and more than 40 distinguished centers and institutes such as the NCI-designated University of Colorado Cancer Center.

School Nu	ımber of Academic Departments/Programs
Medicine	25
Nursing	9
Dentistry	5
Pharmacy	5
Graduate Scl	hool 26

Affiliated hospitals

University of Colorado Hospital The Children's Hospital of Denver Veterans Affairs Medical Center National Jewish Medical and Research Center Denver Health Medical Center

HSC's Outreach Programs

Students and faculty from HSC provide a wide range of services and programs, most voluntary, to Coloradoans including:

- · "Buff Buddy" for children with sickle cell anemia
- · Barnes Pharmacy diabetes program, Sterling
- · Brighton Pharmacy, Brighton
- Case Management at Samaritan House, and Randolph School Based Health Clinic (Denver Public Schools)
- Clinical trials for cancer treatment enroll thousands of participants
- Collaborative Partnerships through the School of Medicine's Perinatal/Pediatric Outreach Education Program to enhance maternal/child health care
- Colorado Rural Health Scholars program for minority and/or economically disadvantaged rural high school students
- · Colorado/Wyoming Junior Academy of Sciences
- Community nutrition education programs in metropolitan Denver and collaborative programs to develop the Colorado Nutrition Network
- · CU's Day on Campus
- · Daniels Fund Summer Program
- Dental Outreach for Clinical Services and Training (including the "ACTS" program)
- Denver School-Based Health Centers to increase access to primary health care for underserved children
- Department of Pediatrics has provided outreach through the Junglemobile – a retrofitted ambulance replete with internet capabilities and injury prevention information and interactive programs for kids
- · Grocery Warehouse, Pueblo
- · Health Careers Pre-Collegiate Development Program
- · Health Promotion at Brighton Senior Center, Brighton
- High School Teachers Research Residency program
- Inner-city self-sufficiency program for low-income single parent families

- Jeff's Valley Pharmacy anticoagulation program, Colorado City
- · Jeff's Valley Pharmacy, Pueblo
- K-12 outreach programs, such as the Westminster Judo Club Parents' Association, the Denver Public School Executive Internship program
- K-12 Outreach/Service Programs introduces economically disadvantaged rural high school students to health science careers
- Minority Health Professions Opportunity Days
- Miracles Program- a substance abuse program for women on probation, located in Denver
- School of Medicine's Area Health Education Centers (AHEC) Health Institute focuses on community-based, primary health care career
- Partnership in Prevention Youth Mentoring program
- Primary Care at Arapahoe County Detention Center and Denver Women's Correctional Facility
- · Public Health Outreach Nursing Services
- Rural Colorado Community Assessment of Medically Underserved
- Safe Clinic (part of Women in Crisis clinical) serves Jefferson County women and children survivors of domestic violence
- · Salud clinic anticoagulation program, Fort Lupton
- · San Luis Valley Medical Center, Alamosa
- School-Based Care at Carin' Clinic (Arvada), Baker Elementary (Adams District 50) and Sheridan Middle School (Sheridan)
- Service to Regional or Rural Communities to address the pipeline issue with respect to underrepresented minorities
- St. Mary-Corwin Medical Center anticoagulation and diabetes programs, Pueblo
- Student Ambassador Program provides community outreach
- Summer Cancer Fellowships provide opportunities for nearly 100 high school students and college undergraduates to work in the School of Medicine's research laboratories and clinics during summer months

- The Healthy Nations Initiative, launched with funding from the RWJ Foundation, provides financial support, programmatic supervision and technical assistance to 14 American Indian and Alaska Native communities
- The Center for Human Nutrition links with Colorado State University to provide community outreach relative to human nutrition. The Nutrition Center partners with Denver Public Schools Student Services in the development of a Comprehensive Health Initiative and collaborates with the Denver School Based Health Centers
- The Colorado AHEC system links CU's academic resources with local educational, clinical and planning resources to provide educational services to students, faculty and health care practitioners throughout the state and particularly in rural Colorado
- The Colorado AIDS Education and Training Center educates primary health care providers about HIV infection, including prevention, diagnosis, treatment and psychosocial issues
- The CU Student Rural Health and Primary Care Interest Group hosts an annual Rural Health Week to support and stimulate interest in rural and primary health care
- The Mini-Med School is an award-winning 8 week lecturebased course open free to the community. It is now broadcast live to five outlying sites in Colorado via satellite. Rural audiences are able to participate in the question and answer sessions at the end of each lecture
- The program of prenatal and infancy home visitation for low-income women bearing first children
- The Programs in Public Psychiatry interface with the state's Mental Health Institutes in Pueblo and Fort Logan, where psychiatrists perform medical student education, research and collaborative functions as well as clinical roles
- The School of Medicine supports tele-education outreach for several outlying communities. Grand Rounds are delivered via interactive video to remote sites throughout Colorado
- The Seeds for Health program, which targets Colorado 3rd graders for its "5 a Day" program.

- The Stout Street Clinic for the Homeless, Gilliam Youth Services Center, and Samaritan House Clinic
- The Tar Wars program to educate 5th graders about the dangers of tobacco
- The University of Colorado and Camp Wapiyapi (Lakota Sioux for "healing") work in conjunction to provide a camping experience and a year-round support system of caring for children with cancer and their families
- Valley Wide Health Systems, Inc anticoagulation program, Alamosa
- Warren Village, a transitional housing development for low-income single parents

Ranking of HSC Programs

	Latest Ranking	Rank Year
School of Medicine Research	30 th	2005
School of Medicine Primary Care	110	2005
School of Medicine Program Ranking		
AIDS Program	1311	2005
Drugialcohol Abuse	14"	2005
Family Medicine Program	14,0	2005
Internal Medicine	23"	2005
Masters' Program in Public Health	6"	2003
Pediatrics Program	98	2005
Physician Assistant/Child Health Associate Program	-9	2003
Physical Therapy Program	40 th	2004
School of Nursing Program Ranking		
Adult Nurse Practitioner Program	111	2003
Clinical Nurse Specialist Program	24	2003
Family Nurse Practitioner Program	9,	2003
Gerontological/Geriatric	10,,,	2003
Nursing Master's Program	150	2003
Pediatric Nurse Practitioner Program	15	2003
School of Pharmacy ranking among 81 schools of pharmacy nationally in National Institutes of Health (NIH) grant support*	14 ^{tt} (FY2003), 1 ^{3t} per faculty FTE	10th (FY 2004), 3th per faculty FTE
Ranking among public institutions in National Institutes of Health (NIH) grant support (HSC		
only)	10th (FY 2002)	10th (FY 2003)
School of Pharmacy, PharmD	23"	2005

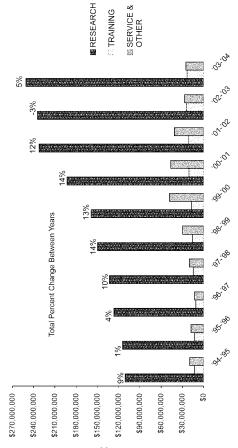
Research Programs

Top 20 Sponsored Program Awards

Principal Investigator	Title	Sponsor	Total
Richard Krugman	General Clinical Research Center - Adult	National Center for Research Resources (DHHS)	\$6,988,202
Paul Bunn	Cancer Center Core Grant	National Cancer Institute	\$3,562,736
Richard Krugman	General Clinical Research Center - Pediatrics	National Genter for Research Resources (DHHS)	\$3,433,517
George Eisenbarth	Virginia Mason/UCHSC Autoimmune Prevention Center	National Institute of Allergy and Infectious Diseases (DHHS)	\$2,988,760
Paul Bunn	Spore in Lung Cancer - Administrative Extension	National Cancer Institute	\$2,253,947
Paul Bunn	Spore in Lung Cancer	National Cancer Institute	\$2,250,000
Ivan McMurtry	Adaptations to Hypoxia	National Heart, Lung and Blood Institute (DHHS)	\$2,230,469
Tom J. Brewster	Signal MSO Treatment Funding Contract	Signal Behavioral Health Network	\$2,139,105
James Hill	Look Ahead: Action for Health in Diabetes	National Institute of Diabetes, Digestive and Kidney Diseases (DHHS)	\$2,079,999
Robert Schooley	Immunopathogenesis of Acute HIV-1 Infection	National Institute of Allergy and Infectious Diseases (DHHS)	\$1,966,328

nosu	Constance A. Benson Regional AIDS Education and Training Center	Health Resources & Services Administration	\$1,964,000
Kathryn V. Holmes	SARS Coronavirus: Inhibition of Entry	National Institute of Allergy and Infectious Diseases (DHHS)	\$1,838,728
	Adult AIDS Clinical Trials Unit (AACTU)	National Institute of Allergy and Infectious Diseases (DHHS)	\$1,838,275
	Antisocial Drug Dependence: Genetics	National Institute on Drug Abuse (DHHS)	\$1,758,975
	China Leukemia Lymphoma Project	American Petroleum Institute	\$1,748,061
	Adolescent Antisocial Drug Dependence Genetics	National Institute on Drug Abuse (DHHS)	\$1,739,850
	National Replication of the Nurse-Family Partnership	Robert Wood Johnson	\$1,553,468
	University of Colorado Center for AIDS Research	National Institute of Allergy and Infectious Diseases (DHHS)	\$1,541,289
	Rocky Mountain Regional Clinical Trials Node	National Institute on Drug Abuse (DHHS)	\$1,500,000
	Gene Array Technology Center for Alcohol Research	National Institute on Alcohol Abuse and Alcoholism (DHHS)	\$1,460,556
E E	Top 20 Awards Equal 15.6% of Total Awards	Top 20 Total Award Amount	\$46,836,265

Sponsored Program Awards by Function



Faculty Information

Noteworthy Accomplishments by HSC Faculty

- Discovery that a naturally occurring protein in the blood prevents the AIDS virus from reproducing and spreading to healthy cells.
- First identification of a genetic factor that converts normal cells into cancer cells.
- First 3-D computerized images of the entire human body derived from anatomical sections ("visible human")
- First classification and numbering system for human chromosomes
- First demonstration of cancer cells killed by genetic manipulation of toxin genes
- · First description of Toxic Shock Syndrome
- First successful liver transplant assisted by the drug cyclosporin
- · First successful open-heart surgeries using hypothermia
- · First identification of the Battered Child Syndrome
- First to define ARDS (Adult Respiratory Distress Syndrome)
- First Sim Suite™ advanced heart surgery simulator
- Pioneered Denver Developmental Screening Test, establishing a national model to assess child development
- First instance of what has come to be known as "cloning"
- Pioneered the first Child Health Associate program in the nation
- Conducted pioneering research leading to development of influenza vaccines and the eradication of smallpox
- Analysis of the molecular structure that allows T-cells to recognize antigens
- Discovery that lymphocytes are preprogrammed to respond to antigens, cornerstone of immunology
- · First in nation to use ultrasound on a patient
- First human thyroid autograft, using tissue from one's own body to repair damaged or diseased tissues
- First arterial homograft (use of human arterial tissue in heart surgery)

Recent Accomplishments by Faculty

U. S. News & World Report's top 50 ranking of America's Best Hospitals for 2004 involved the following Department of Medicine Divisions (rank in parentheses): Respiratory Disorders (9), Kidney Disease (11), Geriatrics (17), Hormonal Disorders (18), Cancer (24), Heart & Heart Surgery (38) and Digestive Diseases (43).

The Department of Medicine ranked 12 of 126 Departments of Medicine throughout the country for NIH research funding for the most recently reported year.

A Women's Health Research Center was established with Drs. Judith Regensteiner, JoAnn Lindenfeld and Lorna Moore as the primary leaders.

The Department of Otolaryngology has received a \$2.8 million grant from the Centers for Disease Control to establish an International Hearing Center for Information, Education, Resources and Research.

Faculty Headcounts by Tenure Status, Rank, and Race/Ethnicity, November 2004

Tenured/Tenure Track Faculty

	Biack non-	American Indian or Alaska	Asian/Pacific		White, non-	Race/Ethnicity	
Rank	Hispanic	Native	Islander	Hispanic	Hispanic	Unknown	Total
Professor	2	1	6	7	308	10	337
Associate Professor	3	_	17	1	267	24	323
Assistant Professor	2	4	49	6	292	70	429
Total	10	9	75	27	867	104	1089

Faculty Not on Tenure Track

		Indian or					
	Black non-	Alaska	Asian/Pacific		White, non-	Race/Ethnicity	
Rank	Hispanic	Native	Islander	Hispanic	Hispanic	Unknown	Total
Professor					19	2	21
Associate Professor			2	-	38	2	43
Assistant Professor	-	-	S.	2	78	£	86
Sr. Instructor	2	2	တ	89	111	41	173
Instructor	4	ю	28	16	295	62	408
Lecturer					_	_	2
Emeritus/Other Faculty					-		-
Total	7	9	44	27	543	119	746
Grand Total	17	12	119	54	1410	223	1835

Faculty Headcounts by Tenure Status and Gender, November 2004

	Tenured/Te	enured/Tenure-track	Not on te	Not on tenure track	<u></u>	Total
Rank	male	female	male	female	male	female
Professor	271	99	20	-	291	29
Associate Professor	196	127	23	20	219	147
Assistant Professor	218	211	44	54	262	265
Sr. Instructor			65	108	65	108
Instructor			121	287	121	287
Lecturer				2	0	2
Emeritus/Other Faculty			-		~	0
Total	685	404	274	472	959	876

Faculty Headcounts by School and Rank, November 2004

Pharmacy 11	9	17		3			37			6	1		9	26			_	4	က	80	71
Nursing 11	17	80	Ę	10			22			_	4	5	34	44		_	-	ဇ		5	106
Dentistry 19	23	7		•			20		2	8	24		21	20				2		2	102
Medicine 299	297	409	151	294	2	-	1,453		15	80	35	9	35	66				3	-	4	1,556
Regular Professor	Associate Professor	Assistant Professor	Sr. Instructor	Instructor	Lecturer	Emeritus/Other Faculty	Total	Clinical	Professor	Associate Professor	Assistant Professor	Senior Instructor	Instructor	Total	Research	Professor	Associate Professor	Assistant Professor	Instructor	Total	Grand Total

Student Information

Admission Data, Fall 2004

Program	# of Applicants	Incoming Class	Selectivity rate*
PhD Basic and Clinical Sciences	471	103	22.0%
MS-Biometrics CHA/PA	6 161	4 39	66.7% 26.2%
MS-Genetics Counseling	62	7	8.9%
MSPH	75	40	54.1%
SOO ,	926	46	4.8%
1 BSDH	98	24	30.4%
ND	95	37	44.6%
PhD-Nursing	21	7	33.3%
MS-Nursing	98	20	70.4%
BSN	730	165	23.4%
PharmD	902	130	15.3%
MD	2,512	132	2.5%

Note: Data for DPT, which started in June 2004, are not included in this report.

* Selectivity rate is calculated as class size divided by the total number of applicants minus those who refused the HSC.

Enrollment by School, Race/Ethnicity, and Gender, Fall 2004

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School	Total	SHIPS .	ibo _{Silly}	iue _{isk}	JESHIA.	onen	G _B IO,	olen,	Relue Y
Cohool of Modicino	1 000	000	ć	90	ç	u	ç	4	7
SCHOOL OF IMPORTING	7 00.1	000,1	50	00	23	٥	32	0.0	0.0
Medical Students	555	447	42	40	22	4	0	288	267
Graduate Students	471	377	30	28	Ŋ	0	31	162	309
CHA/PA Students	142	131	2	6	0	0	0	14	128
DPT Students	92	28	4	2	0	-	0	10	22
Nondegree Students	66	75	13	7	2	-	-	41	58
School of Dentistry	216	184	15	13	2	0	0	101	115
Undergraduate Students	46	40	4	-	0	_	0	0	46
Dental Students	170	144	F	12	2	_	0	101	69
School of Nursing	672	240	38	34	21	4	ıc	28	614
Undergraduate Students	312	263	19	19	7	9	-	35	277
Graduate Students	231	195	12	თ	1	0	4	11	220
Nursing Doctorate Students	127	110	7	မ	က	-	0	1	116
Nondegree Students	5	2	0	0	0	0	0	-	-
School of Pharmacy	535	352	14	94	28	2	15	167	368
Graduate Students	48	30	-	2	0	0	12	24	54
PharmD Students	485	320	40	89	28	5	က	143	342
Nondegree Students	2	2	0	0	0	0	0	0	8
Campus Total	2,755	2,194	185	227	80	17	52	841	1,914

Enrollment by School, Enrollment Level, Status, and Residency, Fall 2004

School	Total	Full-Time	Part-Time	Resident	Nonresident
School of Medicine	1,332	1,218	114	1,187	145
Medical Students	555	552	က	520	35
Graduate Students	471	446	25	382	88
CHA/PA Students	142	142	0	135	7
DPT Students	65	99	9	22	8
Nondegree Students	66	19	80	93	9
School of Dentistry	216	216	0	163	53
Undergraduate Students	46	46	0	43	က
Dental Students	170	170	0	120	90
School of Nursing	672	575	26	648	24
Undergraduate Students	312	287	25	304	80
Graduate Students	231	172	69	216	15
Nursing Doctorate Students	127	116	7	126	-
Nondegree Students	2	0	2	2	0
School of Pharmacy	535	519	16	481	54
Graduate Students	48	46	2	28	20
PharmD Students	485	473	12	452	33
Nondegree Students	2	0	7	—	-
Campus Total	2,755	2,528	227	2,479	276

Graduation Rates of Most Recent Class by Program, 2004

Program	Class Year	Graduation Rate	Still Enrolled
PhD-Basic and Clinical Sciences	1998	40.6%	15.6%
MS-Biometrics, Medical Physics, Genetics	2001	58.3%	16.7%
CHA/PA	2001	41.8%	34.3%
MSPT	2001	%9'.26	%0.0
MSPH	2001	35.3%	44.1%
MD	2000	76.4%	17.3%
SDD 2	2000	97.4%	2.6%
O BSDH	2002	100.0%	%0.0
N	1999	65.4%	19.2%
PhD-Nursing	1998	57.1%	28.6%
MS-Nursing	2001	65.3%	20.4%
BSN	2002	%1.7%	8.0%
PharmD	2000	%0.08	10.0%
PhD-Pharmaceutical Sciences, Toxicology,			
and Pharmacology	1998	45.9%	%0.0

Degrees Conferred by Gender and Race/Ethnicity, AY 2003-2004



Source: IPEDS Completion Survey, Fall 2004.

Passing Rates of Licensure Examinations by Subject

C Gas State Ons to Ju	Paly Sharp	HSC	93%	%26	%26	95%	94%	%96	93%	%56
	The Three	HSC	94%	%56	%26	91%	%56	%86	100%	%86
** Tenders Of	V ₁₀ ,	SN	NA	Ϋ́	Α̈́	%82	%92	%82	78%	82%
40.	TON SELL	HSC	%1			100%				
36 Ray 100	Plo,	SO	%58	N A	71%	78%	%92	78%	78%	85%
OHEN MESSIS	Their Stoy + FTON Strue	HSC	85%	%98	%06	83%	%06	%06	%68	%98
	JOSE KILL		100%	91%	100%	100%	100%	100%	100%	100%
	Ì	Year	2004	2003	2002	2001	2000	1999	1998	1997

Average Tuition by Level and Residency Status, AY 2004-2005

Level	In-State	Out-of-State
Full-time undergraduate students Per credit hour charge Dental Hygiene (Annual Tuition) Nursing	\$6,289 \$212/hour	\$21,398 \$720/hour
Full-time graduate students Per credit hour charge (excluding 1st Professional)	(a)	
Genetic Counseling Rasin and Clinical Science	\$224/hour \$80/hour	\$477/hour \$374/hour
MS- Public Health	\$224/hour	\$477/hour
Child Health Assoc/Physicians Asst. Physical Therapy- MS	\$150/hour \$181/hour	\$359/hour \$556/hour
Nursing	\$302/hour	\$936/hour
Pharmaceutical Sciences Toxicology- Pharmacy	\$172/hour \$172/hour	\$594/hour \$594/hour
Full-time first-professional students Dentistry (DDS) Annual Tuition Maclicine (MD) Annual Tuition	\$12,185	\$38,919 \$60.178
Pharmacy (PharmD) Annual Tutton Nursing (Nursing Doctorate) Physical Therapy- DPT	\$11,088 \$302/hour \$329/hour	\$24,444 \$24,444 \$936/hour \$778/hour

Financial Aid Awarded in FY 2003-2004

Number of Awards
92
158
35
463
210
208
410
88
1798

Select Colorado Occupational Projections (2002-2012) Compared to HSC's Degrees Granted (AY 2003-2004)

	Average Annual	HSC Degrees Granted in
Occupation Title	Openings	2003-200
Dental Hygienists	227	21
Dentists	53	40
Pharmacists	328	82
Physical Therapists	242	42
Physician Assistants	142	22
Registered Nurses	2,412	191

Source: Office of Labor Market Information, Colorado Department of Labor & Employment, Colorado Occupational Projections, 2002-2012.

MD Graduates by Specialty of Residency, 2004

Number of	
students	Specialty Choice
21	Family Medicine
13	General/Preliminary Surgery
19	Internal Medicine
9	Anesthesiology
9	Emergency Medicine
11	Pediatrics
1	Diagnostic Radiology
2	Neurological Surgery
2	Neurology
3	Obstetrics/Gynecology
6	Orthopaedic Surgery
1	Otolaryngology
6	Pathology
4	Psychiatry
1	Radiation Oncology
2	Urology
1	Dermatology
1	Physical/Rehabilitation Medicine
2	Ophthalmology

State Where 2003 HSC Graduate Survey Respondents Worked or Lived

State	Frequency	Percent
CO	124	69.3%
CA	9	5.0%
WA	6	3.4%
NM	4	2.2%
NY	4	2.2%
AZ	3	1.7%
TX	3	1.7%
HI	3 2 2	1.1%
MI	2	1.1%
NV	2 2	1.1%
OR	2	1.1%
VA	2	1.1%
VT	2	1.1%
FL	1	0.6%
IA	1	0.6%
IL	1	0.6%
KY	1	0.6%
LA	1	0.6%
MA	1	0.6%
NE	1	0.6%
SD	1	0.6%
TN	1	0.6%
UT	1	0.6%
WV	1	0.6%
WY	1	0.6%
Unspecified	2	1.1%
Total	179	100.0%

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2003 HSC Graduate Survey Respondents' Primary Responsibility at Work

Primary Responsibility	Frequency	Percent
Patient care	153	85.5%
Teaching/consulting/training	8	4.5%
Research	7	3.9%
Administration/management	6	3.4%
Pharmacy (e.g., dispense meds)	2	1.1%
Unspecified	3	1.7%
Total	179	100.0%

Type of Setting Where Employed 2003 HSC Graduate Survey Respondents Spent the Majority of Working Time

Setting	Frequency	Percent
Hospital	95	53.1%
Clinic/private office	48	26.8%
College, university or school	8	4.5%
Pharmacy	8	4.5%
LTC/nursing home	5	2.8%
Government agency	1	0.6%
Other or Unspecified	14	7.8%
Total	179	100.0%

Employment Status of 2003 HSC Graduate Survey Respondents

Employment Status	Frequency	Percent
Employed	179	94.7%
Looking for work	4	2.1%
Family responsibilities	4	2.1%
Further education	2	1.1%
Total	189	100.0%

Number and Percent of 2003 HSC Graduate Survey Respondents Reporting that HSC Instructional Program(s) Met Her/His Educational Goals

	Frequency	Percen
Yes, completely	113	59.8%
Yes, partially	72	38.19
No, not at all	4	2.19
Missing	,	

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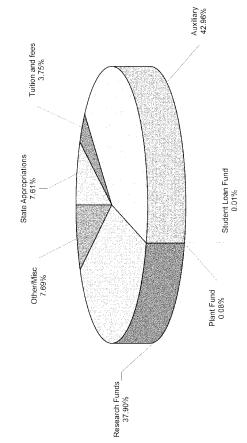
100.0%

Total

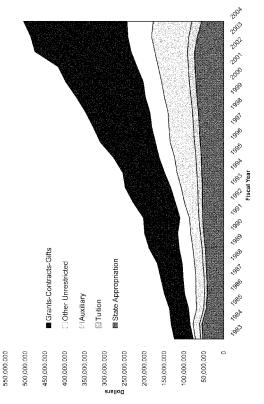
Budget, Resources, and **Economic Impacts**

HSC Budget FY 2005

Total Budget Amount: \$728,501,299



HSC Sources of Revenue



The Economic Impact of HSC

- ❖ The Health Sciences Center (HSC) represents a \$1.26 billion dollar campus economy in FY 2004.
- ♦ In the past ten years, funding for the HSC's sponsored programs (grants and contracts) has more than doubled, from \$143 million in FY 1994 to nearly \$300 million in FY 2004.
- As of December 2004, the HSC directly employed 6,279 (including full-time, part-time, and temporary employees), and the affiliated University of Colorado Hospital has 3,316 paid employees.

The Economic Impact of Anticipated Development at Fitzsimons¹

- ❖ The Fitzsimons site encompasses approximately 578 developable acres of land. About 7.0 million square feet of the total building space is expected to be complete by 2010, with the remaining 6.6 million square feet developed in response to private sector demand for bioscience research facilities and public sector demand for health care delivery, research and health care education.
- ❖ Completion of the anticipated Fitzsimons building program will entail a capital investment of nearly \$4.0 billion in current dollars. Of that total, about \$3.0 billion represents investments in "bricks and mortar" for utility infrastructure, parking facilities and buildings. The remainder will be for services and fees, such as, architectural design and legal fees, and furnishings and equipment. Construction expenditures average nearly \$115 million per year between 2003 and 2007.
- Construction at Fitzsimons will support 32,905 job-years in construction and other parts of the

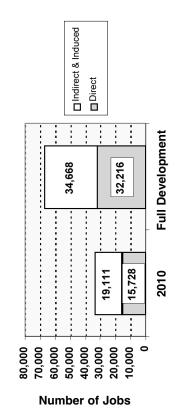
economy, providing an important near-term economic stimulus to the regional economy. Total labor income related to construction through 2010 is estimated at \$1.34 billion

❖ Construction related state and local sales taxes would total \$50.7 million through 2010. State income tax revenue related to the development of Fitzsimons is estimated to be \$27.2 million, and the motor vehicle license fees accrued will approximate \$1.7 million.

Long-Term Economic Impact

- ❖ By 2010, more than 34,800 long-term on-site jobs will be directly and indirectly supported by the Fitzsimons redevelopment project.
- ❖ At full development, Fitzsimons will support more than 66,800 jobs in Colorado, about 32,200 direct, onsite and another 34,700 jobs elsewhere in the metropolitan area and the state. The latter category includes jobs supported indirectly by the purchases of goods and services by the establishments located at Fitzsimons and the households deriving income from those establishments.
- ❖ Economic activities occurring at Fitzsimons will support annual output across Colorado totaling \$3.1 billion by 2010 and \$6.3 billion when full development is achieved.
- ❖ Total labor income in the state from the long-term jobs located at Fitzsimons will reach \$1.17 billion per year by 2010 and \$2.45 billion at full development.
- Significant tax revenues will accrue to state and local governments as a result of the Fitzsimons development. State corporate and personal income, sales taxes and motor vehicle registration fees will total \$93.8 million annually at build out. Statewide, local

Long-Term Jobs Supported by Bioscience, Health Care and Related Activities at Fitzsimons



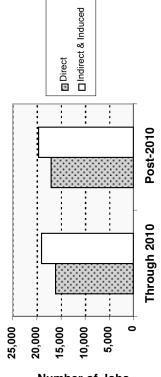
sales and use taxes supported by Fitzsimons will total \$40.5 million per year at build out.

• Over time, the Fitzsimons project will become a major source of local tax revenue. At full development, on-site development and activity will generate an estimated \$32.5 million in annual tax sales and property tax revenues. Initially most of these revenues will accrue to the tax increment financing district established to finance infrastructure improvements required to help bring the redevelopment project to reality and realize the economic development opportunities and benefits afforded.

Construction Related Impacts

- In addition to the long-term economic gains, the onsite construction and development activities at Fitzsimons through 2010 will directly and indirectly support an estimated 32,905 job-years throughout the state.
- ❖ On-site construction will support another 36,640 job-years of employment beyond 2010 − 16,950 direct jobs and 19,690 jobs supported indirectly by the circulation of expenditures by suppliers, contractors and households associated with the construction.
- Future development activities at Fitzsimons will generate total economic activity of more than \$7.2 billion in Colorado. Of that amount, nearly \$2.8 billion will accrue as income to entrepreneurs, employees, business owners and property owners.
- The economic activity associated with the Fitzsimons redevelopment will generate significant public sector revenues as well. Nearly \$107 million in corporate and personal income taxes, sales taxes and motor vehicle registration fees will accrue to the Colorado state treasury by the completion of the project.

Jobs Supported by Construction and Redevelopment **Activities at Fitzsimons**



Number of Jobs

Other Benefits

- ♦ Developing a major research and education effort can have widespread economic impacts beyond those captured in an economic model. For example the 7,000+ acre Research Triangle Park (RTP) in North Carolina is widely credited with transforming the state's economy and image from a traditional, rural manufacturing area to a progressive, technology-driven, quality-lifestyle environment.
- At full development, Fitzsimons will support nearly as much total floor space as presently exists at RTP. And while Fitzsimons will host a diversified mix of research, health care and education uses which are less intensive in terms of space utilization than the primarily research and office functions at RTP, on-site employment at Fitzsimons will nevertheless reach about 65 percent of the on-site jobs at RTP today.
- ❖ The RTP and other co-located major research and education facilities have demonstrated the added long-term economic development and diversification gains that occur as industries cluster and achieve a degree of critical mass. Such gains include serving as magnets to attract yet other firms seeking to capitalize on the proximity to similar firms, the positive influences of such clustering on labor force development and recruiting, and the boost in business formation in other nearby communities as new startups, spin-offs and large-scale production facilities locate elsewhere in the surrounding region.
- Medical advances developed at Fitzsimons will contribute to improved quality of life and health care for people the world over. As documented by the Lasker Foundation, such benefits have real, tangible value in

terms of better health, greater life expectancies, and lower health care outlays. Coloradoans stand to realize those benefits in a more direct and timely manner.

- ❖ Much of the operating income supporting the research and health care entities located at Fitzsimons will come from outside the state. Such sources also include funded research from the federal government, research foundations and private sector clients. Other sources of such income include out-of-state patients receiving treatment at Fitzsimons that is unavailable in their own community and much of the financing and sale revenues of bioscience firms located in the bioscience park. The net inflow of wealth from these sources, in particular the funded research, will strengthen the state's economy.
- ❖ The influx of new jobs will provide enhanced employment opportunities for area residents. The associated housing needs and the business and consumer expenditure potentials associated with Fitzsimons will provide a vital stimulus for new capital investment, enhancing nearby property values and local government's fiscal position.

Hammer · Siler · George · Associates, (April 2002). Economic Impacts of the Fitzsimons Redevelopment Project. And Hammer · Siler · George · Associates, (February 2003). Economic Benefits of Accelerated Development of UCHSC at Fitzsimons.