1. What are the environmental conditions of the Schnitzer campus property and what type of mitigation does OHSU have to do before developing?

The Schnitzer family conducted a substantial amount of environmental remediation prior to donating the land to OHSU. All of the land in the Schnitzer Campus has been remediated prior to our taking possession to the point where it has either received NFA (No Further Action) letters or, in some cases, is governed by formal consent decrees. We have not found any substantial barriers to development of the land, nor has it dramatically increased costs. We have adopted a strategy of raising the grade in the district, which was also done in the central district of the South Waterfront, for purposes of both flood protection and to reduce any potential remediation costs. By going up instead of down when we build, we reduce the amount of soil which we have to disturb. This strategy is implicit in the City's street plan for the district, including the new light rail line going into the area. In sum, we have not found it necessary to do anything more with this property than we have with our other holdings on the waterfront. The costs are within normal expectations for building in an urban area and have not dramatically affected our development plans there.

2. What are the current and future student enrollment capacities for the DMD, MD, and Undergraduate (UG) and Graduate (G) SON programs?

	DMD	MD	SON-UG	SON-G
Current	300	522	~800	~275
Future	360	640	~850	~300

3. How many WICHE students do we have in our SOD program?

	2007	2008	2009	2010	2011	2012
Matriculated*	12	18	20	15	14	12
Funded through WICHE	6	5	2	2	2	2

^{*}The number of students with primary residency in a WICHE State at the time they matriculated at OHSU

4. What is the percentage of women as a function of total enrollment in the DMD, MD, and Undergraduate (UG) and Graduate SON programs?

	2007	2008	2009	2010	2011	2012
DMD	35.7%	32.1%	30.4%	31.1%	33.1%	37.7%
MD	53.6%	52.4%	53.3%	55.3%	52.1%	52.7%
SON-UG	85.5%	85.2%	83.5%	85.7%	84.3%	83.5%

SON-MS/MN	79.6%	78.2%	79.6%	71.8%	76.9%	78.9%
SON-DNP	77.8%	81.8%	73.3%	76.0%	88.9%	84.2%
SON-PHD	95.0%	89.2%	88.6%	88.2%	90.2%	90.0%

5. What is the reason for the uptick in services delivered in the CDRC KPM? Is that related to more diagnoses? Or an increase in awareness by parents?

The increased number of services delivered by CDRC is a result of a number of factors. For example, CDRC has developed new programs to serve the unique healthcare needs of Oregonians. A strong emphasis has also been placed on conducting statewide outreach, which has resulted in an increased awareness of what services CDRC has to offer resulting in greater referral numbers. CDRC has also worked hard to implement process improvements to increase the productivity of its clinical staff.

6. What is the current wait time for the CDRC's autism program? It seems to vary.

The current wait time for youth over the age of 9 yrs for an appointment in our Autism program is 16-18 months. The current wait time for children under the age of 5 yrs is 8 months. The longer wait times for older children reflects an increased identification and referral to CDRC of children during the school years. Our staffing has also fluctuated over the last two years due to departures and recruitments of new faculty. The hope is that with these new faculty there will be reduction in these wait times.

7. Is there any coordination among the schools for anatomy courses?

As part of the Interprofessional Education Initiative at OHSU, there are active discussions to determine how best to deliver anatomy curriculum to DMD, MD, Physician Assistant and Radiation Therapy Students. In the Fall Quarter of 2014, all programs will utilize the same faculty, support staff and anatomy facility to deliver the required curriculum.

Similar discussions are also occurring with regards to other parts of the curriculum that are similar between two or more programs in the hope that these too can be delivered in a more interprofessional manner.

8. Given that rural heritage is considered part of diversity for OHSU SOM admissions, does the national accreditation body consider rural heritage part of diversity for its purposes?

The LCME has asked Medical Schools to focus their diversity efforts in ways that have measurable outcomes and allows each School to propose individual categories against which progress in its diversity efforts will be assessed by the LCME. Rural Heritage was one of the categories proposed by OHSU that was subsequently accepted by the LCME.