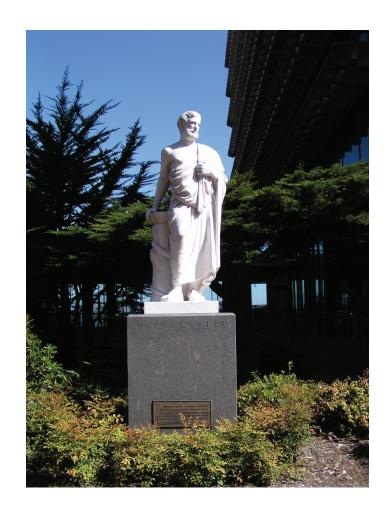


San Francisco

advancing health worldwide $^{\scriptscriptstyle{\mathsf{M}}}$



INSTITUTIONAL PROFILE

FY 2007-08

Introduction	1
UCSF at a Glance	7
Summary Statistics	21
Faculty	25
Staff	37
Students	45
Rankings	76
UCSF History	95
Research	213
Financial Data	233
Campus Sites	261
Service & Outreach	279
Departments and Services	280
Resources	282
Health Care Information & Services	288
Education and Outreach Programs for the Community	292
Arts and Recreation	294
News and Events	296
Alumni & Development	297
Chancellor's Office	309
Executive Vice Chancellor and Provost	317
Academic Geriatric Research Center (AGRC)	323
Academic Senate	325
Affirmative Action/Equal Opportunity/Diversity	327

Associate Vice Chancellor-Student Academic Affairs	329
Center for Bioentrepreneurship (CBE)	335
Graduate Division	338
Langley Porter Psychiatric Institute	343
Library	349
Office of Research, Associate Vice Chancellor	352
Office of Research, Assistant Vice Chancellor	359
Office of Technology Management	363
Proctor Foundation	366
Work-Life Resource Center	373
Senior Vice Chancellor of Finance & Administration	379
Office of the Associate Vice Chancellor - Administration	381
Audit Management Services	383
Associate Vice Chancellor - Budget/Finance	385
Campus Life Services (CLS)	401
Campus Projects and Facilities Management (CPFM)	407
Office of the Associate Vice Chancellor - Administration	410
Vice Chancellor of University Advancement & Planning	425
Campus Planning	429
Development and Alumni Relations - UCSF Foundation	431
Real Estate Services	434
University Relations	437
School/Department Profiles	447
School of Dentistry	449

Cell and Tissue Biology	463
Oral and Maxillofacial Surgery	467
Orofacial Sciences	472
Preventive and Restorative Dental Sciences	477
School of Medicine	483
Basic Science Departments	502
Anatomy	503
Anthropology, History and Social Medicine	508
Biochemistry & Biophysics	516
Cellular & Molecular Pharmacology	527
Epidemiology & Biostatistics	533
Microbiology and Immunology	539
Physiology	544
Clinical Departments	550
Anesthesia and Perioperative Care	551
Dermatology	557
Emergency Medicine	563
Family and Community Medicine	567
Laboratory Medicine	574
Medicine	578
Neurological Surgery	596
Neurology	602
Obstetrics, Gynecology and Reproductive Sciences	608
Ophthalmology	616

	Orthopaedic Surgery	624
	Otolaryngology	630
	Pathology	639
	Pediatrics	646
	Physical Therapy and Rehabilitation Science	654
	Psychiatry	659
	Radiation Oncology	667
	Radiology and Biomedical Imaging	675
	Surgery	681
	Urology	688
Interd	isciplinary Centers and Programs	695
	AIDS Research Institute	696
	Cancer Center	700
	Center for Health and Community	707
	Center for Tobacco Control Research and Education	709
	Diabetes Center	711
	Institute for Regeneration Medicine	717
	Osher Center for Integrative Medicine	718
	Wheeler Center for the Neurobiology of Addiction	720
Organ	ized Research Units	722
	Cancer Research Institute	723
	Cardiovascular Research Institute	727
	Center for Reproductive Sciences	732
	Hooper Foundation	733

Institute for Global Health	737
Institute for Health Policy Studies	742
Institute for Neurodegenerative Diseases	748
School of Nursing	753
Community Health Systems	767
Family Health Care Nursing	775
Physiological Nursing	780
Social and Behavioral Sciences	786
Institute for Health and Aging	792
School of Pharmacy	797
Biopharmaceutical Sciences	815
Clinical Pharmacy	819
Pharmaceutical Chemistry	825
UCSF Medical Center	833
California Institute for Quantitative Biosciences (QB3)	845
Global Health Sciences	849
Affiliated Institutions	855
San Francisco General Hospital (SFGH)	856
San Francisco Veteran Affairs Medical Center (SFVAMC)	857
Ernest Gallo Clinic & Research Center	859
The J. David Gladstone Institutes	860
Howard Hughes Medical Institute (HHMI)	862
Appendix - Chancellor's Annual Letters	865
Index	919

This is the second annual Institutional Profile of the University of California, San Francisco and covers the period of July 1, 2007 to June 30, 2008. It is a view of contemporary time and contains facts and figures about the university as a whole, as well as its various organizational units. Budget & Resource Management compiled this information from the UCOP website, various UCSF websites, UCSF promotional material, internal correspondence, and input from the departments and schools. In addition, we generated statistical data from the general ledger and other internal sources of record. This profile is designed as a reference volume, allowing the reader to access select information without reading the entire volume. The volume is organized with general information on the University followed by profiles of the major divisions, including central campus administration, schools, departments, the UCSF Medical Center, and affiliated organizations.

The Regents of the University of California

The University of California is governed by The Regents, a 26 member board, as established under Article IX, Section 9 of the California Constitution.

The Board of Regents appoints the President of the University and the Officers of The Regents: the General Counsel; the Treasurer; the Secretary and Chief of Staff; and the Chief Compliance and Audit Officer

It Starts Here: UC at the Frontier

When it first opened its doors in 1869, the University of California had just 10 faculty members and 38 students. Today, the UC system includes more than 220,000 students and more than 170,000 faculty and staff, with more than 1.5 million alumni living and working around the world.

From its inception 20 years after the California Gold Rush, UC faculty and students have looked to cross the horizons of what we know about our selves and our world, and what we can do in it. That was the vision of the pioneers living at the farthest frontiers of the American continent when they created a University for the Golden State. As we chart our course through the 21st century, the University of California is still at the frontier.

UC researchers are pioneers in agriculture, medicine, technology and the environment and many other fields. Thousands of California jobs, billions of dollars in revenues, and countless every-day household items – from more plentiful fruits and vegetables to compact fluorescent light bulbs – can be traced back to UC discoveries. Similarly, many of the world's leading businesses have connections to UC. Those companies were either based on technology developed by the

university, were founded by our faculty or alumni, or are headed by UC graduates.

UC's ten campuses at Berkeley, Davis, Irvine, Los Angeles, Merced, Riverside, San Diego, San Francisco, Santa Cruz and Santa Barbara provide exciting environments that foster world-class educational and research opportunities and generate a wide range of benefits and services that touch the lives of Californians every day.

Besides world-class classrooms and labs, UC has dozens of museums, concert halls, art galleries, botanical gardens, observatories and marine centers – academic resources but also exciting gathering places for the community. Another half million people benefit from UC Extension's continuing education courses and from Cooperative Extension's agricultural advice and educational programs located throughout the state.

UC also manages three U.S. Department of Energy national laboratories. The Lawrence Berkeley laboratory was founded on the Berkeley campus in 1931 as an interdisciplinary research center. Some years later, the Livermore and Los Alamos laboratories were established to serve U.S. defense needs; they continue today in new aspects of that mission, including response to terrorism and homeland defense. With nearly 19,000 employees, the three labs have become unparalleled research and development centers whose programs and activities address national interests and concerns in areas such as energy, environment, and health. While the mechanism for managing two of the labs has changed recently, UC is still integrally involved in their operations.

UC's five medical centers support the clinical teaching programs of the University's medical and health sciences schools and handle more than three million patient visits each year. The medical centers provide a full range of health care services in their communities and are sites for the development and testing of new diagnostic and therapeutic techniques. Collectively, these centers comprise one of the largest health care systems in California.

University of California, San Francisco (UCSF)

UCSF, which became part of the University of California in 1873, is the only UC campus dedicated exclusively to the health sciences. Built in 1897 at its original Parnassus Heights site, UCSF is home to graduate professional schools in dentistry, medicine, nursing and pharmacy; a graduate division for predoctoral and postdoctoral scientists; the UCSF Medical Center; the UCSF Children's Hospital; and Langley Porter Psychiatric Institute.

Prior to 1954, the deans of the various schools on the San Francisco campus reported directly to the President of the University. An administrative advisory committee composed of deans and administrative chiefs, with the dean of the School of Medicine as chairman, was established

in 1954 to supervise the campus. In 1958, the title of chairman was changed to provost, and in 1964, to chancellor. In 1970 the campus (then known as the San Francisco Medical Center) was named officially University of California, San Francisco.

UCSF now encompasses several major sites in San Francisco in addition to its original 107 acre Parnassus Heights location above Golden Gate Park. In 2003, UCSF opened its 43 acre Mission Bay campus, just south of downtown San Francisco. It also includes UCSF Mount Zion and maintains partnerships with two affiliated hospitals, San Francisco General Hospital Medical Center and the Veterans Affairs Medical Center.

Building for the Future

FY 2007-08 marked the continued development of UCSF's Mission Bay campus with the following projects under construction or in the planning stages:

- Helen Diller Family Cancer Research Building
- · Cardiovascular Research Institute Building
- Neurosciences Building

Development of the campus will continue in phases over the next 15 years, and will contain approximately 20 buildings at full buildout. As of 2008, the Mission Bay campus had a population of 3,500 staff, students, faculty and visitors which is expected to rise to around 13,381 persons at full buildout.

UCSF plans to build a 289-bed, integrated hospital complex to serve children, women and cancer patients on a 14.5-acre parcel adjacent to its existing 43-acre biomedical campus at Mission Bay. Upon completion of the first phase in late 2013 or early 2014, the plans for the 869,000-plus-gross-square-foot hospital complex include:

- Children's Hospital The 183-bed facility, designed specifically for children and their families, will provide emergency and urgent care services. About 20 percent of hospitalized children at UCSF are treated for cancer and cancer-related issues, and they will benefit from the close proximity of cancer specialists.
- Women's Hospital The hospital will offer inpatient and outpatient services, specialty surgeries and a 36-bed birth center. Babies born at the facility will have the advantage of being right next door to the children's hospital should they require follow-up care.
- Cancer Hospital This 70-bed facility will build on UCSF's reputation as one of the top 10 cancer programs in the country. Specialists will provide inpatient and outpatient care, and serve the unique needs of women and pediatric cancer patients at the adjoining hospitals.

The UCSF Medical Center at Mission Bay will provide a world-class, sophisticated, efficient, flexible and family-centered healing environment. The hospital complex will provide comprehensive diagnostic, interventional and support services, and use advanced robotic and imaging technology during surgery - all in an environment centered around the care of patients and their families.

At the Mt. Zion campus, plans are underway to construct a new building to house the Osher Center for Integrative Medicine and several facilities of the UCSF Medical Center. The mission of the Osher Center is to search for the most effective treatments for patients by combining both conventional and alternative approaches that address all aspects of health and wellness - biological, psychological, social and spiritual.

At the Parnassus Heights campus, plans have been completed for a laboratory building to serve as headquarters for the UCSF Institute for Regenerative Medicine, partially funded by the California Stem Cell Initiative. In addition, Parnassus Heights has close to a dozen floors of research space under renovation in preparation for new recruitments.

UCSF is renovating existing space at Parnassus, Mt. Zion, and San Francisco General Hospital to create additional instruction space, including "smart" classrooms, equipped with telemedicine, video conference and other technology to enable remote participation and interaction; a modern clinical skills center to enable "hands-on" training for medical procedures both in-person and via telemedicine; establishing technology infrastructure to enable greater interaction with faculty, clinicians, students, and others at sites such as UC medical schools and distant health care facilities.

Advancing Health Worldwide: A Strategic Plan for UCSF

Representing a milestone in its 143-year history, UCSF completed its first-ever campuswide strategic plan, which charts the University's course as a global leader in health sciences over the next two decades.

The University engaged in a highly inclusive, two-year process of institutional introspection to develop a comprehensive strategic plan that will serve as a guide to advance its fourfold mission of education, health sciences research, patient care and community service.

UCSF faces challenges such as unprecedented growth in the last 15 years, including expansion at Mount Zion, Laurel Heights and Mission Bay campuses, and steadily declining financial support from the State of California. At the same time, however, dramatic advances in science, medicine and technology have presented UCSF with unparalleled opportunities to improve human health.

Against the backdrop of this reality and promise, Chancellor J. Michael Bishop in July 2005 appointed a Strategic Planning Board comprising faculty, staff, students, residents, fellows and postdoctoral scholars to oversee the creation of the strategic plan. Board members included representatives from the schools of dentistry, medicine, nursing and pharmacy, Graduate Division, Academic Senate, campus administration and UCSF Medical Center.

The goals for the strategic plan were twofold: first, to develop a comprehensive, integrated plan based on academic priorities to guide UCSF's direction; and second, to collaboratively engage the UCSF community in the process.

To assist in the planning process, the board retained the services of AMC Strategies, a firm specializing in strategic planning for academic health centers. Additional assistance came from the UCSF Foundation through its Strategic Planning Committee, the Chancellor's University-Community Partnerships Council and the Community Advisory Group.

Members of the campus community at large participated in the process through focus groups, indepth interviews, town hall meetings at all five major campus sites and a campuswide survey. In that survey, 2,092 respondents gave their opinions on the key issues to be considered in developing the plan.

UCSF also conducted a thorough assessment of national peer institutions and an extensive analysis of campus resources, finances, facilities and infrastructure. At its retreat in July 2006, the board reviewed and discussed the findings and began constructing the framework for the strategic plan.

After significant deliberations, the board adopted *advancing health worldwide* TM as the UCSF mission statement. Building upon this mission, a formal vision with strategies emerged. In October 2006, six strategy design teams with about 40 representative stakeholders per team, including some board members, developed specific recommendations to realize UCSF's vision.

The strategic plan is a great testimony to the collaborative culture of the campus community and its collective wisdom on how UCSF can fulfill its mission of advancing health worldwide.

The plan summarizes the UCSF Mission, Vision, & Strategic Direction as follows:

Mission:

advancing health worldwide $^{\mathrm{TM}}$

Vision:

In advancing health worldwide, we will:

- Be a world leader in scientific discovery and its translation into improved health
- Develop the world's future leaders in health care delivery, research and education
- Deliver the highest-quality, patient-centered care
- Develop innovative, collaborative approaches for education, health care and research that span disciplines within and across the health sciences
- Build upon our commitment to diversity
- Provide a supportive work environment to recruit and retain the best people and position UCSF for the future
- Serve our local, regional and global communities and eliminate health disparities

Strategic Direction

- 1. Fostering Innovation and Collaboration
- 2. Translating Discoveries Into Improved Health
- 3. Educating Future Leaders
- 4. Providing Highest-Quality Care
- 5. Nurturing Diversity
- 6. Promoting a Supportive Work Environment
- 7. Serving Our Community

A complete copy of the UCSF Strategic Plan is available at the following address:

http://strategy.ucsf.edu/contents/ucsf-strategic-plan/

UCSF AT A GLANCE

Chapter Contents

Campus Senior Leadership	8
Campus Organizational Chart	9
Key Statistics	11
UCSF Employee and Student Counts	11
Tuition and Fees	11
Library Collection	11
Campus Land Area	11
UCSF Financial Facts in Brief	12
Singular Achievements	13
Accolades	15
Nobel laureates	15
National Academy of Science members	16
Institute of Medicine members	17
American Academy of Arts & Sciences members	19
Lasker Award recipients	20
Gardner Award winners	20
McCarthur Award recipient	20
National Medal of Technology winner	20
Royal Society of London member	20
California Scientists of the Year	20
Albany Medical Center Prize in Medicine and Biomedical Research winner	20

Campus Senior Leadership

J. Michael Bishop, Chancellor

A. Eugene Washington, Executive Vice Chancellor and Provost

Steve Barclay, Senior Vice Chancellor, Finance and Administration

Bruce Spaulding, Senior Vice Chancellor, Advancement & Planning

Sam Hawgood, Interim Dean, School of Medicine

Kathleen Dracup, Dean, School of Nursing

John Featherstone, Dean, School of Dentistry

Mary Anne Koda-Kimble, Dean, School of Pharmacy

Regis Kelly, Director, California Institute for Quantitative Biosciences (QB3)

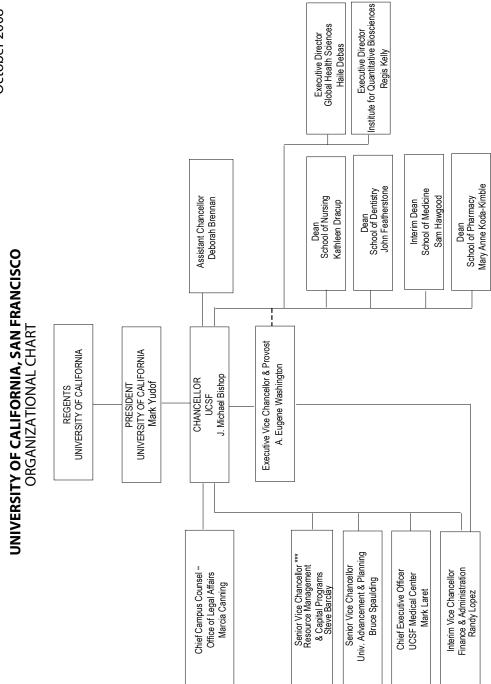
Haile Debas, Director, Global Health Sciences

Mark Laret, Chief Executive Officer, Clinical Enterprise

October 2008

University of California, San Francisco Institutional Profile - FY 2007-08 UCSF at a Glance

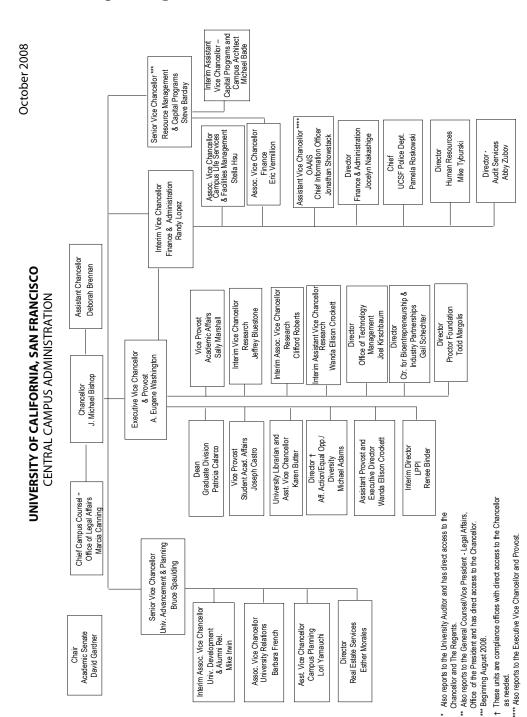
Campus Organizational Chart



** Also reports to the General Counsel/Vice President - Legal Affairs,

Office of the President.
*** Beginning August 2008.

Campus Organizational Chart - Continued



Key Statistics

UCSF Employee and Student Counts

	FY 2001-02	FY 2002-03	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08
Faculty ¹ (Headcount)							
Full-Time	999	1,049	1,044	1,088	1,071	1,099	1,834
Part-Time	843	884	927	953	1,013	1,038	427
Other Academic ¹ (Headcount)							
Full-Time	1,707	1,775	1,924	2,152	2,233	2,314	2,347
Part-Time	738	829	832	809	868	902	889
Residents ² (Headcount)	743	747	923	1,168	1,004	1,017	967
Staff ¹ (Headcount)							
Full-Time	7,559	7,908	8,276	8,533	8,843	9,059	9,131
Part-Time	4,849	5,313	5,315	5,371	5,650	6,142	6,702
Students ³ (Fall Enrollment)							
DDS	334	353	350	365	365	360	361
MS (Nursing)	459	450	462	471	445	474	522
PharmD	477	480	488	491	490	491	491
MD	606	622	620	599	582	603	594
Ph.D	667	744	789	819	874	901	895
International	101	111	110	111	116	111	139
Other	57	77	75	87	110	123	143
Total:	2,701	2,837	2,894	2,943	2,982	3,063	3,145
Residents ⁴ (Includes Education, Registration Dentistry DDS	\$10,519	\$10,525	\$15,484	\$21,778	. ,	. ,	
Medicine MD	\$10,899	\$10,905	\$15,977	\$20,471	\$22,328	\$22,854	\$23,438
Nursing MS	\$7,244						
Pharmacy PharmD	\$8,468						
Graduate Academic	\$5,239	\$5,245	\$7,089	\$8,133	\$8,899	\$9,075	\$9,822
Nonresidents ⁴ (Includes Education, Regist	ration, Professional Schoo	l and Campu	s-based fees)			
Dentistry DDS	\$21,651	. ,	. ,		. ,	\$37,451	\$38,201
Medicine MD	\$22,031		. ,			. ,	. ,
Nursing MS	\$18,376						
Pharmacy PharmD	\$19,600						
Graduate Academic	\$16,561	\$16,567	\$19,579	\$23,072	\$23,860	\$24,036	\$24,810
	Libra	ry Collection	on				
Volumes	805,935	811,580	815,128	820,362	824,852	836,490	839,488
Volumos	505,955	011,000	010,120	020,002	024,002	000,490	000,400
	Camp	us Land A	rea				
Acres	137	137	180	180	181	185	255

¹Source: UCOP-Statistical Summary of Students & Staff - October, 2007

²Source: Human Resources database ³Source: Student Academic Affairs database

⁴Source: Budget & Resource Management Regents Budget Tables

⁵Source: UCOP-Campus Facts in Brief

Key Statistics - Continued

UCSF Financial Facts in Brief

UCSF Financial Facts (Dollars in Thousands)	FY 2001-02	FY 2002-03	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08
Current Funds Expenditures by Uniform Classifi	cation Category ¹						
Instruction	\$139,422	\$150,364	\$149,238	\$151,494	\$161,572	\$183,135	\$213,984
Research	\$412,992	\$464,116	\$505,727	\$521,108	\$558,149	\$587,376	\$618,250
Public Service	\$49,197	\$53,355	\$54,723	\$58,268	\$60,399	\$60,746	\$66,898
Academic Support	\$193,401	\$199,431	\$207,755	\$200,512	\$222,798	\$249,864	\$276,168
Medical Centers	\$791,948	\$851,327	\$988,310	\$1,040,844	\$1,146,488	\$1,227,486	\$1,409,687
Student Services	\$10,262	\$11,307	\$11,743	\$10,465	\$13,707	\$12,458	\$15,054
Institutional Support	\$59,213	\$66,174	\$67,782	\$68,976	\$80,918	\$98,094	\$106,473
Operation and Maintenance of Plant	\$37,453	\$35,828	\$43,613	\$48,467	\$49,095	\$52,673	\$56,452
Student Financial Aid	\$28,053	\$31,203	\$33,521	\$35,002	\$35,408	\$38,758	\$33,165
Auxiliary Enterprises	\$13,762	\$16,061	\$17,384	\$17,476	\$24,253	\$29,958	\$31,215
Total:	\$1,735,703	\$1,879,166	\$2,079,797	\$2,152,613	\$2,352,788	\$2,540,548	\$2,827,346
Current Funds Expenditures by Fund Source ²							
General Funds	\$230,511	\$230.090	\$212,397	\$199,521	\$210,689	\$220,922	\$226.752
Tuition and Fees	\$39,798	\$45,192	\$61,302	\$71,547	\$79,150	\$84,215	\$97,939
Federal Government	\$278.508	\$313,764	\$351,894	\$373,087	\$397,845	\$400,712	\$405,204
State Special Appropriations and Contracts	\$34,178	\$37,376	\$42,942	\$40,948	\$40,884	\$43,771	\$49,394
Local Government	\$73,224	\$78,214	\$81,733	\$80,662	\$91,195	\$97,546	\$104,795
Private Gifts, Grants and Contracts	\$147,745	\$164,354	\$174,103	\$182,677	\$207,656	\$231,560	\$255,889
Endowment and Similar Funds	\$27.979	\$28,217	\$35,493	\$37,965	\$43,164	\$56,593	\$55,641
Sales and Services of Educational Activities	\$80,882	\$98,922	\$91,573	\$91,778	\$91,430	\$112,764	\$142,319
Sales and Services of Auxiliary Enterprises	\$13,438	\$14,210	\$14,152	\$15,076	\$21,070	\$26,072	\$27,865
Sales and Services of Medical Centers	\$780,612	\$839,708	\$976,667	\$1,030,402	\$1,135,447	\$1,216,620	\$1,397,660
Other Sources	\$34,927	\$28,387	\$37,926	\$29,613	\$35,612	\$49,225	\$67,803
Reserves	(\$6,100)	\$732	(\$385)	(\$663)	(\$1,353)	\$548	(\$3,914)
Total:	\$1,735,703	\$1,879,166	\$2,079,797	\$2,152,613	\$2,352,788	\$2,540,548	\$2,827,346
University Endowments ³							
Endowment, at fair value	\$565,605	\$581,624	\$657,478	\$711.814	\$774,164	\$893,682	\$850,381
Annual Income Distribution	\$27.302	\$28.071	\$29.506	\$29.729	\$30.528	\$32.235	\$33.906
Allitual income distribution	φ21,302	φ20,07 I	\$29,500	φ29,129	φ30,328	φυΖ,Ζυυ	φ33,900
Plant ³							
Capital Assets	\$1,416,802	\$1,574,993	\$1,794,282	\$2,012,458	\$2,125,617	\$2,218,337	\$2,404,287
Capital Expenditures	\$252,771	\$263,834	\$346,357	\$353,665	\$252,771	\$265,963	\$336,419
Debt ⁴							
Outstanding Debt					\$520,112	\$592,660	\$560,430
Debt Service					\$29,395	\$33,409	\$33,839
					,		,

¹Source: UCSF Financial Schedule 8B

Singular Achievements

- First university west of the Mississippi to offer a doctoral degree in nursing 1965.
- First to train pharmacists as drug therapy specialists 1966.
- First to synthesize human growth hormone and clone into bacteria, setting the stage for genetically engineered human growth hormone 1971.
- First to discover (together with Stanford) the techniques of recombinant DNA, the seminal step in the creation of the biotechnology industry 1973.
- First to develop prenatal tests for sickle cell anemia and thalassemia 1976.
- First to invent marketable Magnetic Resonance Imaging at UCSF's Radiological Imaging Lab 1976.
- First to develop a cochlear implant device that brings hearing to the deaf 1979.
- First to discover that a missing substance called surfactant is the culprit in the death of newborn with respiratory distress syndrome; first to develop a synthetic substitute for surfactant, reducing infant death rates significantly 1980.
- First to perform a successful surgery on a baby still in the mother's womb 1981.
- First to develop catheter ablation therapy for tachycardia, which cures "racing" hearts without surgery 1981.
- Co-founded the field of embryonic stem cell research (with the University of Cambridge) 1981
- First to clone an insulin gene into bacteria, leading to the mass production of recombinant human insulin to treat diabetes 1982.
- First to establish special care units for AIDS patients (1983) and among the first to identify HIV as the causative agent of the disease.
- First to discover the precise recombinant DNA techniques that led to the creation of a hepatitis B vaccine 1986.

Singular Achievements - Continued

- First to discover that normal cellular genes can be converted to cancer genes (Nobel Prize in Medicine, J. Michael Bishop and Harold Varmus, 1989).
- First to discover and name prions (PREE-ons), an infectious agent that is responsible for a variety of neurodegenerative diseases (Nobel Prize in Medicine, Stanley Prusiner, 1997).

Accolades

Nobel laureates:

- **J. Michael Bishop** and **Harold Varmus**, 1989, for discovery of proto-oncogenes, showing that normal cellular genes can be converted to cancer genes;
- **Stanley Prusiner,** 1997, for discovery of prions, an entirely new infectious agent implicated in rare, slowly progressing brain diseases such as mad cow disease.

Accolades - Continued

National Academy of Science members

Biochemistry

- 1. Agard, David 2007
- 2. Alberts, Bruce 1981
- 3. Blackburn, Elizabeth 1993
- 4. Boyer, Herbert 1985
- 5. Walter, Peter 2004
- 6. Wells, James 1999

Biophysics and Computational Biology

- 1. Stoeckenius, Walther 1978
- 2. Stroud, Robert 2003

Cellular and Developmental Biology

- 1. Bishop, J. Michael 1980
- 2. Martin, Gail 2002
- 3. Vale, Ronald 2001
- 4. Yamamoto, Keith 1990

Cellular and Molecular Neuroscience

- 1. Jan, Yuh Nung 1996
- 2. Nicoll, Roger 1994

Genetics

- 1. Gross, Carol 1992
- 2. Guthrie, Christine 1993
- 3. Kenyon, Cynthia 2003

Immunology

1. Weiss, Arthur -2003

Medical Genetics, Hematology, and Oncology

- 1. Bourne, Henry 1994
- 2. Cleaver, James 1999
- 3. Kan, Yuet Wai 1986
- 4. Prusiner, Stanley 1992
- 5. White, Raymond 1992

Medical Physiology and Metabolism

- 1. Baxter, John 2003
- 2. Clements, John 1974
- 3. Coughlin, Shaun 2004
- 4. Grumbach, Melvin 1995
- 5. Havel, Richard 1983

Physiology and Pharmacology

- 1. Jan, Lily 1995
- 2. Julius, David 2004

Systems Neuroscience

1. Merzenich, Michael - 1999

- 1. List includes faculty inducted while at UCSF.
- 2. Year is year inducted to academy.
- 3. Source: National Academy of Science website, May 2008.

Accolades - Continued

Institute of Medicine members

- 1. Abbas, Abul K.
- 2. Adler, Nancy E.
- 3. Ascher, Nancy L.
- 4. Bainton, Dorothy F.
- 5. Barondes, Samuel H.
- 6. Basbaum, Allan I.
- 7. Baxter, John D.
- 8. Benet, Leslie Z.
- 9. Bishop, J. Michael
- 10. Blackburn, Elizabeth
- 11. Bourne, Henry R.
- 12. Braveman, Paula A.
- 13. Callaham, Michael L.
- 14. Chater, Shirley S.
- 15. Cohen, Fred E.
- 16. Coughlin, Shaun R.
- 17. Cummings, Steven R.
- 18. Darney, Phillip D.
- 19. Debas, Haile T.
- 20. Dracup, Kathleen A.
- 21. Epstein, Charles J.
- 22. Estes, Carroll L.
- 23. Feachem, Richard G
- 24. Ferriero, Donna M.
- 25. Fields, Howard L.
- 26. Ganem, Donald E.
- 27. Giacomini, Kathleen
- 28. Giudice, Linda C.
- 29. Glantz, Stanton A.
- 30. Goldman, Lee
- 31. Greene, John C.
- 32. Greene, Warner C.

- 1. List includes faculty inducted while at UCSF.
- 2. Source: Institute of Medicine website May 2008

- 33. Greenspan, Deborah
- 34. Greenspan, John S.
- 35. Grumbach, Kevin
- 36. Grumbach, Melvin M.
- 37. Hall, Zach W.
- 38. Harrington, Charlene A.
- 39. Hauser, Stephen L.
- 40. Havel, Richard
- 41. Holzemer, William L.
- 42. Jaffe, Robert B.
- 43. Jamison, Dean T.
- 44. Kenyon, Cynthia J.
- 45. Kerr, William B.
- 46. Kessler, David A.
- 47. King, Talmadge E.
- 48. Koda-Kimble, Mary Anne
- 49. Krevans, Julius R.
- 50. Langridge, Robert
- 51. Lee, Philip R.
- 52. Lo, Bernard
- 53. Luft, Harold S.
- 54. Margulis, Alexander R.
- 55. Marks, James
- 56. Martinson, Ida M.
- 57. McCormick, Frank
- 58. Miller, Ronald D.
- 59. Milstein, Arnold
- 60. Norbeck, Jane S.
- 61. Nussbaum, Robert L.
- 62. Padian, Nancy S.
- 63. Perez-Stable, Eliseo J.
- 64. Phillips, Theodore L.

Accolades - Continued

Institute of Medicine members-continued

- 65. Prusiner, Stanley B.
- 66. Ptácek, Louis J.
- 67. Rice, Dorothy P.
- 68. Rubenstein, John
- 69. Rudolph, Abraham M.
- 70. Schroeder, Steven A
- 71. Smith, Lloyd H.
- 72. Volberding, Paul A.
- 73. Wara, Diane W.
- 74. Washington, A. Eugene
- 75. Weiss, Arthur
- 76. Werb, Zena
- 77. White, Raymond L.
- 78. Wiener-Kronish, Jeanine P.
- 79. Yamamoto, Keith R.

- 1. List includes faculty inducted while at UCSF.
- 2. Source: Institute of Medicine website May 2008

Accolades - Continued

American Academy of Arts & Sciences members

Biochemistry and Molecular Biology

- 1. Abelson, John Normal 1985
- 2. Alberts, Bruce Michael 1978
- 3. Blackburn, Elizabeth 1991
- 4. Bourne, Henry Reid 1992
- 5. Boyer, Herbert Wayne 1979
- 6. Cohen, Fred E. 2008
- 7. Gross, Carol A. 1992
- 8. Guthrie, Christine 1991
- 9. Hanahan, Douglas 2007
- 10. Stroud, Robert M. 2007

Cellular and Developmental Biology, Microbiology, and Immunology (including Genetics)

- 1. Bishop, J. Michael 1984
- 2. Ganem, Donald Emil 2004
- 3. Johnson, Alexander Dixon 2007
- 4. Kenyon, Cyntha J. 1997
- 5. Kornberg, Thomas B. 2003
- 6. Martin, Gail Roberta 1991
- 7. Vale, Ronald D. 2002
- 8. Walter, Peter 2002
- 9. Yamamoto, Keith Robert 1989

Neurosciences, Cognitive Sciences, and Behavioral Biology

- 1. Basbaum, Allan 2003
- 2. Doupe, Allison Jane 2008
- 3. Jan, Lily 2007

4. Jan, Yuh Nung - 2007

- 5. Julius, David 2005
- 6. Lisberger, Stephen G. 2008
- 7. Nicoll, Roger Andrew 1999
- 8. Reichardt, Louis French 2005
- 9. Stryker, Michael P. 2002

Medical Sciences (including Physiology and Pharmacology), Clinical Medicine, and Public Health

- 1. Bainton, Dorothy Ford 1996
- 2. Bluestone, Jeffrey Allen 2006
- 3. Clements, John Allen 2002
- 4. Coughlin, Shaun Robert 2002
- 5. Debas, Haile Tesfaye 1992
- 6. Epstein, Charles J. 2004
- 7. Grumbach, Melvin Malcom 1995
- 8. Hauser, Stephen L. 1997
- 9. Havel, Richard J. 1992
- 10. Kan, Yuet Wai 1993
- 11. Levy, Jay A. 2004
- 12. Locksley, Richard Michael 2005
- 13. Mahley, Robert W. 2006
- 14. Ptácek, Louis J. 2008
- 15. Prusiner, Stanley Ben 1993
- 16. Schmid, Rudi 1982
- 17. Schroeder, Steven A.
- 18. Weiss, Arthur 2003
- 19. Werb, Zena 2003
- 20. White, Raymond L. 2005

- 1. List includes faculty inducted while at UCSF.
- 2. Year is year inducted to academy.
- 3. Source: American Academy of Arts & Sciences website May 2008

Accolades - Continued

Lasker Award Recipients

- 1. Bishop, J. Michael
- 2. Blackburn, Elizabeth
- 3. Boyer, Herbert
- 4. Clements, John
- 5. Kan, Yuet Wai
- 6. Prusiner, Stanley B.

Gardner Award Winners

- 1. Blackburn, Elizabeth
- 2. Bishop, J. Michael
- 3. Clements, John
- 4. Kan, Yuet Wai
- 5. Prusiner, Stanley B.

McCarthur Award Recipient

1. Derisi, Joseph

National Medal of Technology

1. Boyer, Herbert

Royal Society of London

1. Basbaum, Allan

California Scientists of the Year

- 1. Bishop, J. Michael -1982
- 2. Blackburn, Elizabeth-1999
- 3. Varmus, Harold-1982

Albany Medical Center Prize in Medicine and Biomedical Research

1. Blackburn, Elizabeth

Note

1. List includes faculty inducted while at UCSF.

SUMMARY STATISTICS

This section contains campus-wide statistics from the following sources:

- UCSF Strategic Planning Strategic Planning Environmental Assessment (prepared by consulting firm AMC Strategies)
- UCSF Academic Affairs
- UCSF Control Point websites
- UCOP website (Statistical Summary of Students and Staff)
- American Association of Medical Colleges (AAMC) website
- USNews.com

Chapter Contents

Facult	ty Statistics	25
	UCSF Faculty Headcount by School/Unit	26
	UCSF Distribution of Faculty by Rank	27
	UCSF Distribution of Faculty by Series	28
	UCSF Proportion of Female Faculty	29
	UCSF School of Dentistry Faculty Headcount	30
	UCSF School of Medicine Clinical Departments Faculty Headcount	31
	School of Medicine Basic Science Departments Faculty Headcount	33
	UCSF School of Medicine All Other Departments Faculty Headcount	34
	UCSF School of Nursing Faculty Headcount	35
	UCSF School of Pharmacy Faculty Headcount	36

Staff Statistics Section	37
Full-Time and Part-Time Headcount	38
Full-Time Equivalents	39
Personnel Headcount by Ethnicity, Personnel Program, and Gender	40
UCSF Total Staff Count	41
UCSF Staff by Ethnicity	42
UCSF Staff Count by Age Group	43
UCSF Staff Count by Control Point/Department	44
Student Statistics Section	45
Enrollment by Degree - All Schools	46
Tuition and Fees	46
Medical School Enrollment by Sex	47
Medical School Graduates by Sex	47
Enrollment by Ethnicity, Gender, and Level	48
UCSF School of Medicine Applicants and Matriculants	49
GPAs amd Testing Scores of Incoming UCSF Medical Students	50
Tuition and Fees for First Year Medical Students	52
UCSF Residency Programs Offers and Acceptances by Department	53
Fellowships/Subspecialty Training	54
Race/Ethnicity of UCSF Residents and Fellowx	55
Caliber of UCSF Incoming DDS Students Compared to National Averages	56
Gender Distribution of UCSF Dental Classes Relative to U.S. Average	57
Racial/Ethnic Distribution - UCSF Predoctoral Enrollees vs. U.S. Average	58

	Racial/Ethnic Distribution of UCSF Dental Postgraduate Enrollees vs. U.S. Average	39
	UCSF Dental Postgraduate Program Applications and Admissions	60
	UCSF International Dentist Program Applications and Admissions	61
	UCSF International Students Racial/Ethnic Distribution	62
	UCSF PharmD Applicants and Matriculants by Year	63
	UCSF PharmD Total Program Enrollment	64
	GPA's of UCSF PharmD Entering Applicants	65
	Gender and Ethnicity of UCSF PharmD Enrollees	66
	Ethnicity of UCSF PharmD Enrollees	67
	UCSF School of Nursing Program Applications and Enrollment by Program	68
	UCSF Entering Nursing Students - Undergraduate GPA and Mean GRE Scores	69
	Distribution of UCSF Nursing Enrollees by Gender	70
	Distribution of UCSF Nursing Enrollees by Race/Ethnicity	71
	Distribution of UCSF Nursing Enrollees by State of Residency	72
	UCSF Graduate Division Applications and Acceptances	73
	UCSF Graduate Division Matriculated Students and Total Enrollment	74
	Graduate Student Profile	75
Rankir	ngs Section	76
	Top 10 Medical Schools - U.S. News and World Report	77
	UCSF Medical School Specialty Rankings - U.S. News and World Report	78
	UCSF Graduate Division Program Rankings - U.S. News and World Report	78
	Top Ten Pharmacy Graduate Programs - U.S. News and World Report	79
	UCSF Nursing Discipline Rankings - U.S. News and World Report	79

Top Ten Hospitals - U.S. News and World Report	80
Best Hospitals	80
Cancer	80
Ear, Nose, & Throat	81
Endocrinology	81
Gastrointestinal Disorders	82
Geriatric Care	82
Gynecology	83
Heart & Heart Surgery	83
Kidney Disease	84
Neurology and Neurosurgery	84
Orthopedics	85
Ophthalmology	85
Psychiatry	86
Respiratory Disorders	86
Rheumatology	87
Urology	87
Top 10 Transplant Hospitals (United Network of Organ Sharing)	88
Heart	88
Kidney	89
Liver	90
Lung	91
Newsweek International - Top Global Universities	92
Top Fund-Raising Institutions	93

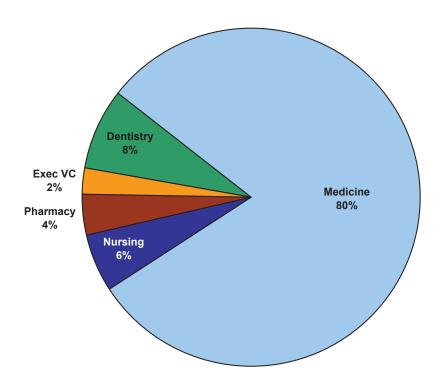
FACULTY STATISTICS SECTION

UCSF Faculty Headcount by School/Unit, 2005 vs. 2008

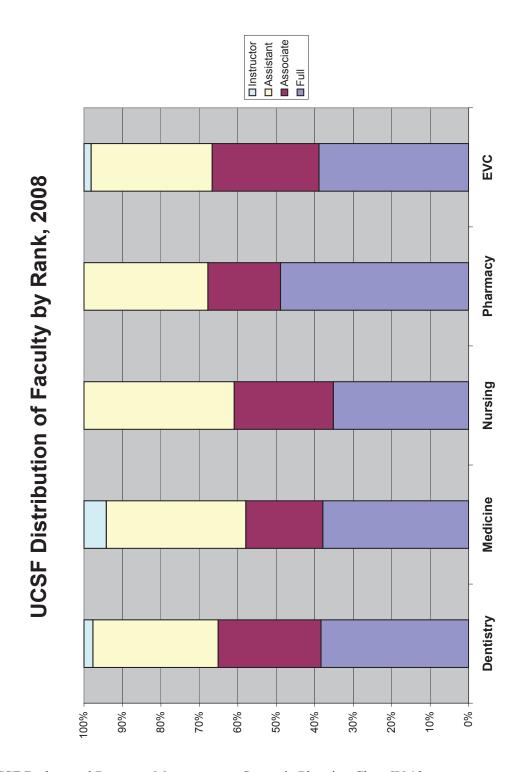
2005 vs. 2008

School/Unit	2005	2008	CAGR
Dentistry	186	180	-1.1%
Medicine	1,606	1,833	4.5%
Nursing	127	128	0.3%
Pharmacy	79	90	4.4%
Exec VC	53	54	0.6%
Total	2,051	2,285	3.7%

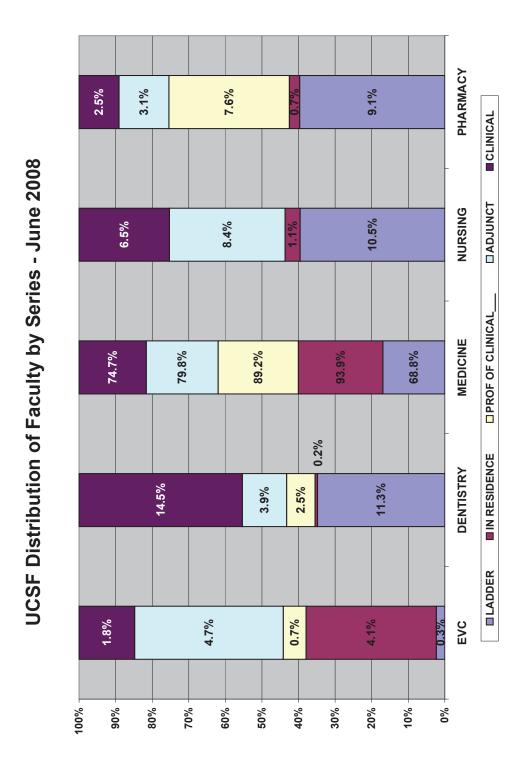
2008 Distribution



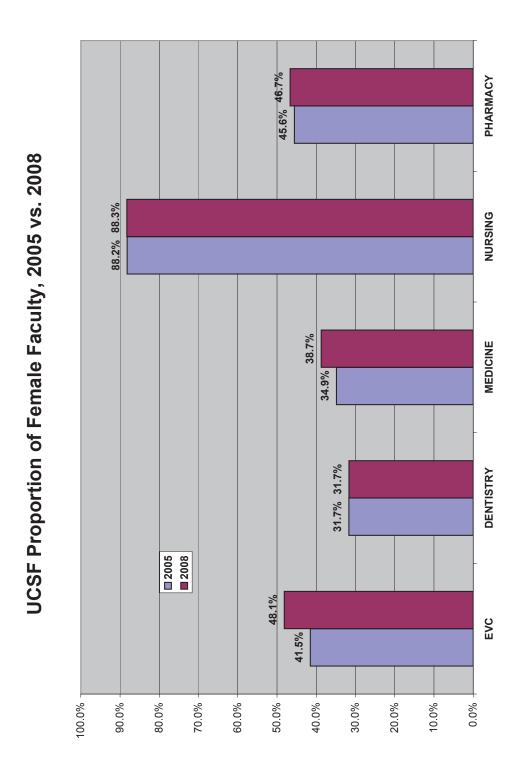
Source: UCSF Budget and Resource Management - Strategic Planning Chart IV-9



Source: UCSF Budget and Resource Management - Strategic Planning Chart IV-12



Source: UCSF Budget and Resource Management - Strategic Planning Chart IV-13

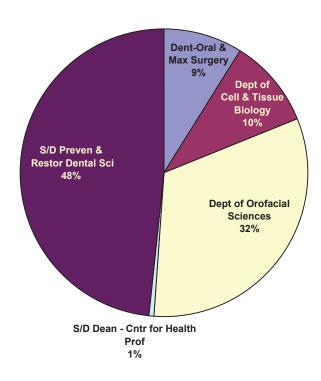


School of Dentistry Faculty Headcount

2005 vs. 2008

School/Unit	2005	2008	CAGR
Dean's Office	2	0	-100.0%
Dent-Oral & Max Surgery	18	16	-3.9%
Dept of Cell & Tissue Biology	0	18	0.0%
Dept of Orofacial Sciences	0	58	0.0%
Growth & Development	36	0	-100.0%
S/D Dean - Cntr for Health Prof	0	1	0.0%
S/D Preven & Restor Dental Sci	88	87	-0.4%
Stomatology	42	0	-100.0%
Total	186	180	-1.1%

2008 Distribution

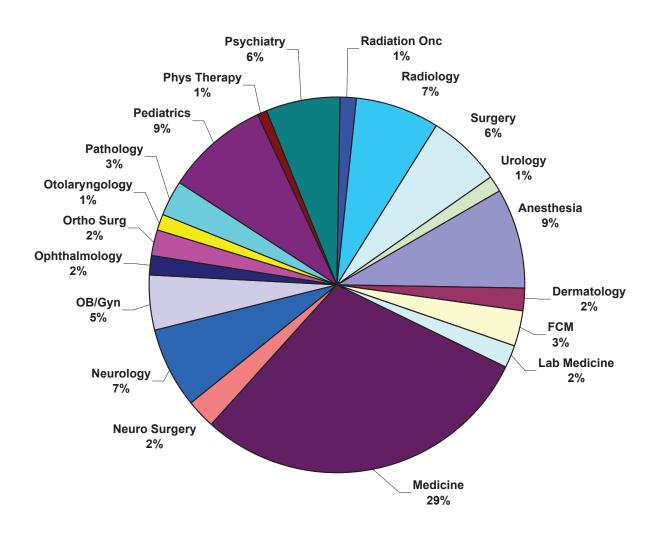


UCSF School of Medicine Clinical Departments Faculty Headcount

2005 vs. 2008

School/Unit	2005	2008	CAGR
Anesthesia	102	140	11.1%
Dermatology	29	28	-1.2%
FCM	43	52	6.5%
Lab Medicine	34	31	-3.0%
Medicine	414	473	4.5%
Neuro Surgery	42	39	-2.4%
Neurology	86	112	9.2%
OB/Gyn	69	79	4.6%
Ophthalmology	25	26	1.3%
Ortho Surg	35	36	0.9%
Otolaryngology	23	21	-3.0%
Pathology	39	52	10.1%
Pediatrics	111	143	8.8%
Phys Therapy	14	11	-7.7%
Psychiatry	87	104	6.1%
Radiation Onc	26	23	-4.0%
Radiology	110	117	2.1%
Surgery	95	103	2.7%
Urology	15	21	11.9%
Total	1,399	1,611	4.8%

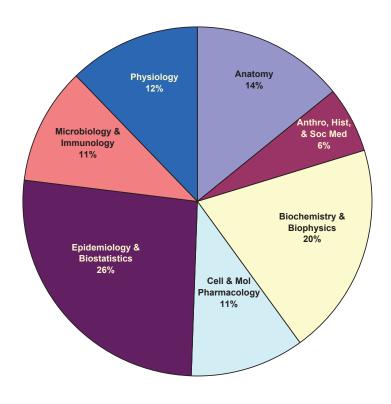
UCSF School of Medicine Clinical Departments Faculty Headcount 2008 Distribution



UCSF School of Medicine Basic Science Departments Faculty Headcount 2005 vs. 2008

School/Unit	2005	2008	CAGR
Anatomy	21	21	0.0%
Anthro, Hist, and Soc Med	7	9	8.7%
Biochemistry & Biophysics	25	29	5.1%
Cell & Mol Pharmacology	15	16	2.2%
Epidemiology & Biostatistics	32	39	6.8%
Microbiology & Immunology	12	16	10.1%
Physiology	17	18	1.9%
Total	129	148	4.7%

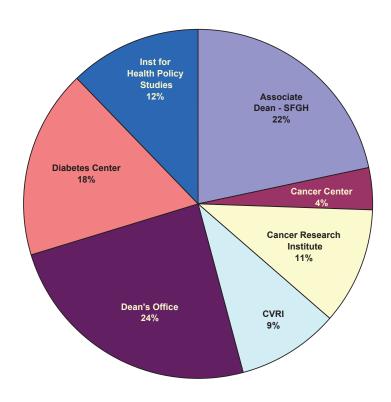
2008 Distribution



UCSF School of Medicine All Other Departments Faculty Headcount 2005 vs. 2008

School/Unit	2005	2008	CAGR
Associate Dean - SFGH	17	16	-2.0%
Cancer Center	4	3	-9.1%
Cancer Research Institute	12	8	-12.6%
Cardiovascular Research Inst	10	7	-11.2%
Dean's Office	13	18	11.5%
Diabetes Center	13	13	0.0%
Inst for Health Policy Studies	9	9	0.0%
Total	78	74	-1.7%

2008 Distribution

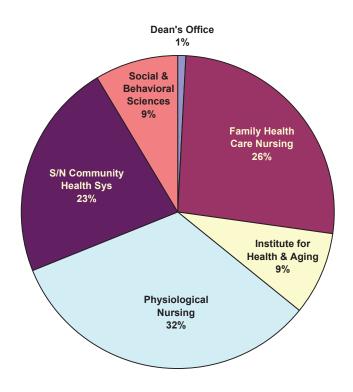


UCSF School of Nursing Faculty Headcount

2005 vs. 2008

School/Unit	2005	2008	CAGR
Dean's Office	2	1	-20.6%
Family Health Care Nursing	28	34	6.7%
Institute for Health & Aging	15	11	-9.8%
Physiological Nursing	44	42	-1.5%
S/N Community Health Sys	27	29	2.4%
Social & Behavioral Sciences	11	11	0.0%
Total	127	128	0.3%

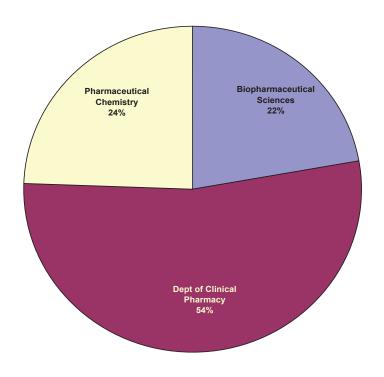
2008 Distribution



UCSF School of Pharmacy Faculty Headcount 2005 vs. 2008

School/Unit	2005	2008	CAGR
Biopharmaceutical Sciences	16	20	7.7%
Dept of Clinical Pharmacy	41	48	5.4%
Pharmaceutical Chemistry	22	22	0.0%
Total	79	90	4.4%

2008 Distribution



STAFF STATISTICS SECTION

UNIVERSITY OF CALIFORNIA FULL-TIME AND PART-TIME HEADCOUNT SMG MSP, ACADEMIC AND PSS PERSONNEL OCTOBER 2007

SMG & MSP	1,020	348
		0.0
ACADEMIC STAFF		
ACADEMIC ADMINISTRATORS S	64	12
REGULAR TEACHING FACULTY - LADDER RANKS 0	363	63
REGULAR TEACHING FACULTY - ACTING RANKS 1	4	1
LECTURERS 2	3	3
OTHER TEACHING FACULTY 3	1,458	360
STUDENT ASSISTANTS 4	981	620
RESEARCH 5	1,299	243
LIBRARIAN 6	9	3
COOPERATIVE EXTENSION 7	0	0
UNIVERSITY EXTENSION 8	0	0
OTHER ACADEMIC PERSONNEL 9	0	11
OTHER - UNKNOWN	0	0
SUBTOTAL ACADEMIC STAFF:	4,181	1,316
NON-ACADEMIC STAFF		
CLERICAL & ALLIED SERVICES B	1,890	928
COMMUNICATIONS - ARTS & GRAPHICS D	70	24
ARCHITECTURE, ENGINEERING & APPLIED SVC E	66	9
FISCAL, MANAGEMENT & STAFF SVC F	2,404	589
FOOD & LINEN SERVICES C	135	161
HEALTH CARE & ALLIED SERVICES H	2,054	3,908
MAINTENANCE, FABRICATION, & OPERATIONS G	445	90
PROTECTIVE SERVICES J	126	28
SCIENCES, LABORATORY & ALLIED SERVICES	875	389
STUDENT SERVICES A	46	218
OTHER Z	0	10
SUBTOTAL:	8,111	6,354
NONE		
NOT ASSIGNED	0	1
TOTAL:	13,312	8,019

SOURCE: OCTOBER 2007 CORPORATE PERSONNEL SYSTEM

^{*} THE CLASS TITLE OUTLINE (CTO), ALSO IDENTIFIED AS THE OCCUPATION SUB-CLASSIFICATION (OSC), IS USED TO GROUP ACADEMIC POSITIONS ON THE BASIS OF TEACHING AND ACADEMIC FUNCTION OR PROGRAM CONSIDERATIONS AND STAFF POSITIONS ON THE BASIS OF SALARY AND OTHER PERSONNEL CONSIDERATIONS. CLASSIFICATION OF TITLE CODES TO OSC GROUPS CAN BE DETERMINED FROM THE U.C. POSITION TITLE LISTING, AVAILABLE IN CAMPUS PERSONNEL & ACCOUNTING OFFICES.

UNIVERSITY OF CALIFORNIA FULL-TIME EQUIVALENTS SMG MSP, ACADEMIC AND PSS PERSONNEL OCTOBER 2007

	CTO* OSC	SAN FRANCISCO
SMG & MSP		1,203.94
ACADEMIC STAFF ACADEMIC ADMINISTRATORS REGULAR TEACHING FACULTY - LADDER RANKS REGULAR TEACHING FACULTY - ACTING RANKS LECTURERS OTHER TEACHING FACULTY STUDENT ASSISTANTS RESEARCH LIBRARIAN COOPERATIVE EXTENSION	S 0 1 2 3 4 5 6 7	70.67 382.26 4.00 4.62 1,649.10 1,211.23 1,385.20 10.60 0.00
UNIVERSITY EXTENSION OTHER ACADEMIC PERSONNEL OTHER - UNKNOWN SUBTOTAL ACADEMIC STAF	8 9 F:	0.00 3.71 0.00 4,721.39
NON-ACADEMIC STAFF CLERICAL & ALLIED SERVICES COMMUNICATIONS - ARTS & GRAPHICS ARCHITECTURE, ENGINEERING & APPLIED SVC FISCAL, MANAGEMENT & STAFF SVC FOOD & LINEN SERVICES HEALTH CARE & ALLIED SERVICES MAINTENANCE, FABRICATION, & OPERATIONS PROTECTIVE SERVICES SCIENCES, LABORATORY & ALLIED SERVICES STUDENT SERVICES OTHER SUBTOTAL	B D E F C H G J I A Z	2,434.05 84.02 71.15 2,795.52 229.10 4,801.72 506.24 145.03 1,056.97 90.48 0.81
NONE NOT ASSIGNED		0.00
TOTAL	L:	18,140.42

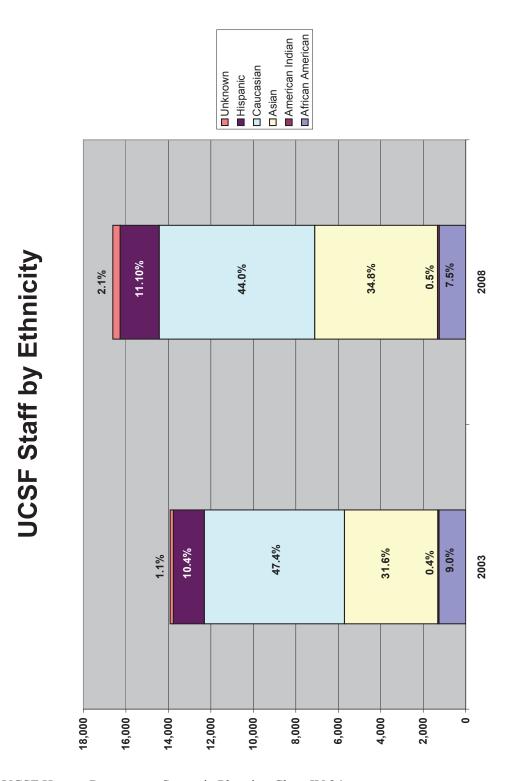
SOURCE: OCTOBER 2007 CORPORATE PERSONNEL SYSTEM

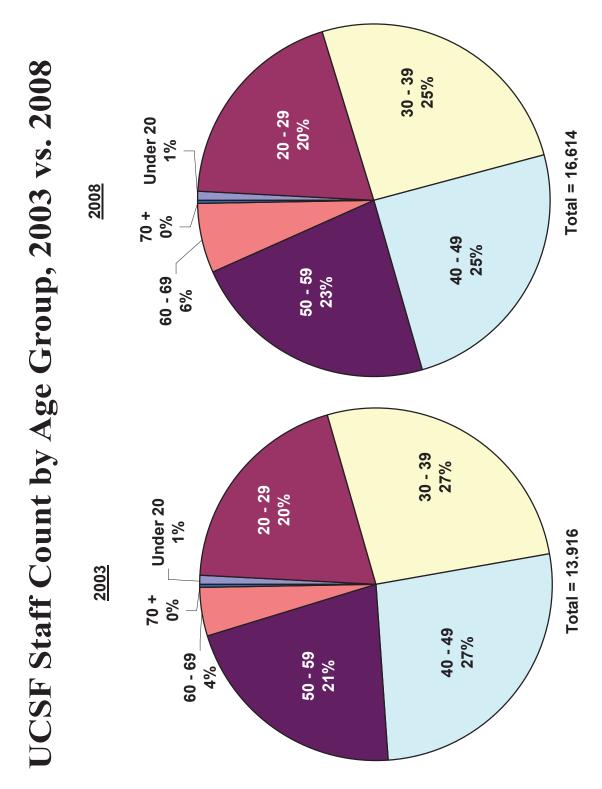
^{*} THE CLASS TITLE OUTLINE (CTO), ALSO IDENTIFIED AS THE OCCUPATION SUB-CLASSIFICATION (OSC), IS USED TO GROUP ACADEMIC POSITIONS ON THE BASIS OF TEACHING AND ACADEMIC FUNCTION OR PROGRAM CONSIDERATIONS AND STAFF POSITIONS ON THE BASIS OF SALARY AND OTHER PERSONNEL CONSIDERATIONS. CLASSIFICATION OF TITLE CODES TO OSC GROUPS CAN BE DETERMINED FROM THE U.C. POSITION TITLE LISTING, AVAILABLE IN CAMPUS PERSONNEL & ACCOUNTING OFFICES.

Table 11h: Personnel Headcount by Ethnicity, Personnel Program, and Gender: San Francisco

		Oct 2006		(Oct 2007		Percent
	Female	Male	Total	Female	Male	Total	Change
American Indian	57	34	91	57	29	86	-5%
Unclassified	1	0	1	2	0	2	100%
Academic	10	7	17	11	5	16	-6%
Non-Academic	46	27	73	44	24	68	-7%
SMG & MSP	3	2	5	4	1	5	0%
PSS	43	25	68	40	23	63	-7%
Asian	4,193	2,445	6,638	4,478	2,623	7,101	7%
Unclassified	32	14	46	44	17	61	33%
Academic	762	764	1,526	815	812	1,627	7%
Non-Academic	3,399	1,667	5,066	3,619	1,794	5,413	7%
SMG & MSP	127	119	246	144	143	287	17%
PSS	3,272	1,548	4,820	3,475	1,651	5,126	6%
African American	869	439	1,308	884	434	1,318	1%
Unclassified	8	5	13	7	5	12	-8%
Academic	67	62	129	75	57	132	2%
Non-Academic	794	372	1,166	802	372	1,174	19
SMG & MSP	38	15	53	42	15	57	89
PSS	756	357	1,113	760	357	1,117	0%
Hispanic	1,177	688	1,865	1,249	730	1,979	6%
Unclassified	13	8	21	15	5	20	-5%
Academic	112	113	225	115	132	247	109
Non-Academic	1,052	567	1,619	1,119	593	1,712	69
SMG & MSP	29	36	65	32	36	68	5%
PSS	1,023	531	1,554	1,087	557	1,644	6%
White	6,155	3,990	10,145	6,336	4,001	10,337	29
Unclassified	60	35	95	61	28	89	-69
Academic	1,440	1,844	3,284	1,465	1,835	3,300	0%
Non-Academic	4,655	2,111	6,766	4,810	2,138	6,948	39
SMG & MSP	467	387	854	507	399	906	69
PSS	4,188	1,724	5,912	4,303	1,739	6,042	29
Unknown/Not Stated	307	200	507	306	204	510	19
Unclassified	7	1	8	3	2	5	-389
Academic	69	103	172	77	99	176	29
Non-Academic	231	96	327	226	103	329	19
SMG & MSP	8	4	12	7	8	15	25%
PSS	223	92	315	219	95	314	09
Total Campus	12,758	7,796	20,554	13,310	8,021	21,331	49
Unclassified	121	63	184	132	57	189	39
Academic	2,460	2,893	5,353	2,558	2,940	5,498	3%
Non-Academic	10,177	4,840	15,017	10,620	5,024	15,644	49
SMG & MSP	672	563	1,235	736	602	1,338	89
PSS	9,505	4,277	13,782	9,884	4,422	14,306	49







UCSF Staff Count by Control Point/Department

			% 2008	
Control Point	2003	2008	Total	CAGR*
CHANCELLOR'S IMMEDIATE OFFICE	12	19	0.1%	%9.6
SCHOOL OF DENTISTRY	446	379	2.3%	-3.2%
SCHOOL OF MEDICINE	4,448	4,929	29.7%	2.1%
SCHOOL OF NURSING	270	298	1.8%	2.0%
SCHOOL OF PHARMACY	256	250	1.5%	%9'0-
EXECUTIVE VICE CHANCELLOR	872	828	5.2%	-0.3%
VC-UNIV ADVANCEMENT & PLANNING	167	213	1.3%	2.0%
SR VC-ADMINISTRATION & FINANCE	1,725	2,148	12.9%	4.5%
MEDICAL CENTER	5,720	7,520	45.3%	2.6%
Grand Total	13,916	16.614	100.0%	

STUDENT STATISTICS SECTION

Tuition & Fees (Includes Education, Registration, Professional School, and Campus-based Fees)

School or Program	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08
Tuition and Fees for Residents	3				
Dentistry DDS	\$15,484	\$21,778	\$24,327	\$25,206	\$25,956
Medicine MD	\$15,977	\$20,471	\$22,328	\$22,854	\$23,438
Nursing MS	\$10,274	\$10,268	\$11,958	\$12,553	\$12,423
Pharmacy PharmD	\$12,248	\$17,456	\$19,682	\$20,457	\$20,877
Graduate Academic	\$7,089	\$8,133	\$8,899	\$9,075	\$9,822
Tuition and Fees for Nonreside	ents				
Dentistry DDS	\$27,729	\$34,023	\$36,572	\$37,451	\$38,201
Medicine MD	\$28,222	\$32,716	\$34,573	\$35,099	\$35,683
Nursing MS	\$22,519	\$22,513	\$24,203	\$24,798	\$24,668
Pharmacy PharmD	\$24,493	\$29,701	\$31,927	\$32,702	\$33,122
Graduate Academic	\$19,579	\$23,072	\$23,860	\$24,036	\$24,810

Enrollment by Degree - All Schools

Degree	2003	2004	2005	2006	2007
BS	26	8	0	0	0
Certificate	30	31	48	65	68
DDS	350	365	365	360	361
DPT	0	16	16	13	30
DPTSc	0	3	2	3	3
DNS	0	0	0	0	0
MAS	19	29	44	42	42
MD	620	599	582	603	594
MS	462	471	445	474	522
PharmD	488	491	490	491	491
PhD	789	819	874	901	895

Medical School Enrollment by Sex

Year	Female	Male	All
2002	370	332	702
2003	375	325	700
2004	362	326	688
2005	380	312	692
2006	379	325	704
2007	382	325	707

Medical School Graduates by Sex

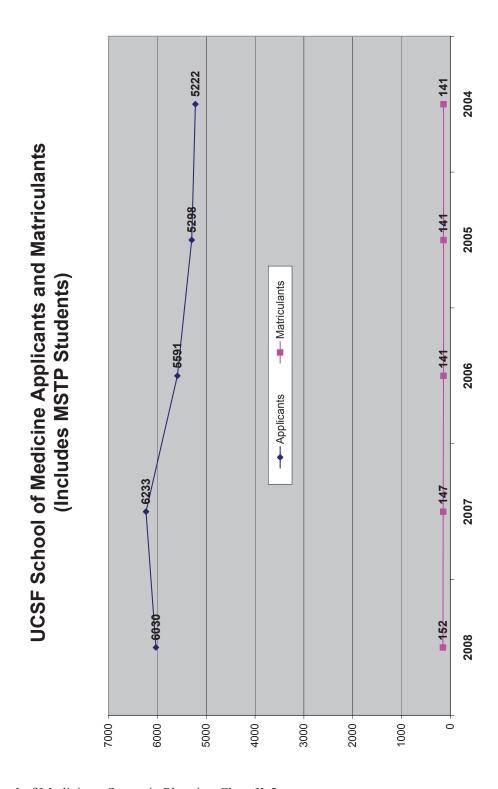
Year	Female	Male	All
Class of 2002	78	57	135
Class of 2003	88	67	155
Class of 2004	89	74	163
Class of 2005	77	73	150
Class of 2006	84	58	142
Class of 2007	88	66	154
Class of 2008	76	73	149

Source: www.AAMC.Org

Table 7h: Enrollment by Ethnicity, Gender, and Level: San Francisco

		Fall 2006			Fall 2007		Oı	ne-year chan	ge
	Ug	Gr	Total	Ug	Gr	Total	Ug	Gr	Total
International	0	133	133	0	148	148	n/a	11%	11%
Female	0	81	81	0	99	99	n/a	22%	22%
Male	0	52	52	0	49	49	n/a	-6%	-6%
Unknown	0	0	0	0	0	0			
American Indian	0	30	30	0	25	25	n/a	-17%	-17%
Female	0	18	18	0	18	18	n/a	0%	0%
Male	0	12	12	0	7	7	n/a	-42%	-42%
Unknown	0	0	0	0	0	0			
African American	0	131	131	0	132	132	n/a	1%	1%
Female	0	80	80	0	83	83	n/a	4%	4%
Male	0	51	51	0	49	49	n/a	-4%	-4%
Unknown	0	0	0	0	0	0			
Chicano/Chicana	0	152	152	0	159	159	n/a	5%	5%
Female	0	95	95	0	93	93	n/a	-2%	-2%
Male	0	57	57	0	66	66	n/a	16%	16%
Unknown	0	0	0	0	0	0			
Latino/Latina	0	128	128	0	121	121	n/a	-5%	-5%
Female	0	76	76	0	70	70	n/a	-8%	-8%
Male	0	52	52	0	51	51	n/a	-2%	-2%
Unknown	0	0	0	0	0	0			
Filipino/Pilipino	0	100	100	0	110	110	n/a	10%	10%
Female	0	73	73	0	79	79	n/a	8%	89
Male	0	27	27	0	31	31	n/a	15%	15%
Unknown	0	0	0	0	0	0			
Chinese	0	520	520	0	488	488	n/a	-6%	-6%
Female	0	341	341	0	318	318	n/a	-7%	-79
Male	0	179	179	0	170	170	n/a	-5%	-5%
Unknown	0	0	0	0	0	0			
Japanese	0	70	70	0	54	54	n/a	-23%	-23%
Female	0	36	36	0	25	25	n/a	-31%	-31%
Male	0 0	34 0	34 0	0	28 1	28 1	n/a	-18%	-18%
Unknown	-				•	-			
Korean	0	103	103	0	102	102	n/a	-1%	-19
Female	0	67	67	0	69	69	n/a	3%	3%
Male	0 0	36 0	36 0	0	33 0	33 0	n/a	-8%	-8%
Unknown	-								
Other Asian	0	333	333	0	308	308	n/a	-8%	-8%
Female	0 0	208	208	0	192	192	n/a	-8%	-8%
Male Unknown	0	125 0	125 0	0	116 0	116 0	n/a	-7%	-79
	-							-01	
Pakistani/East Indian/Other	0	379	379	0	406	406	n/a	7%	7%
Female Male	0 0	249 130	249	0	257	257 149	n/a	3% 15%	3%
Unknown	0	0	130 0	0	149 0	0	n/a	15%	15%
	-							40/	40
White	0	1,952	1,952	0	1,981	1,981	n/a	1%	19
Female Male	0 0	1,136 816	1,136 816	0	1,170 811	1,170 811	n/a n/a	3% -1%	39 -19
Unknown	0	0	010	0	0	0	II/a	-170	-17
								000/	000
Not Stated/Unknown	0	295	295	0	359	3 59	n/a	22%	229
Female Male	0 0	152	152	0	190	190	n/a	25%	25%
Male Unknown	0	138 5	138 5	0	163 6	163 6	n/a	18%	189
							,		
Campus Total	0	4,326	4,326	0	4,393	4,393	n/a	2%	2%
Female	0	2,612	2,612	0	2,663	2,663	n/a	2%	29
Male Unknown	0 0	1,709 5	1,709 5	0	1,723 7	1,723 7	n/a	1%	19

Unknown 0 5
Graduate student headcounts include health sciences residents.



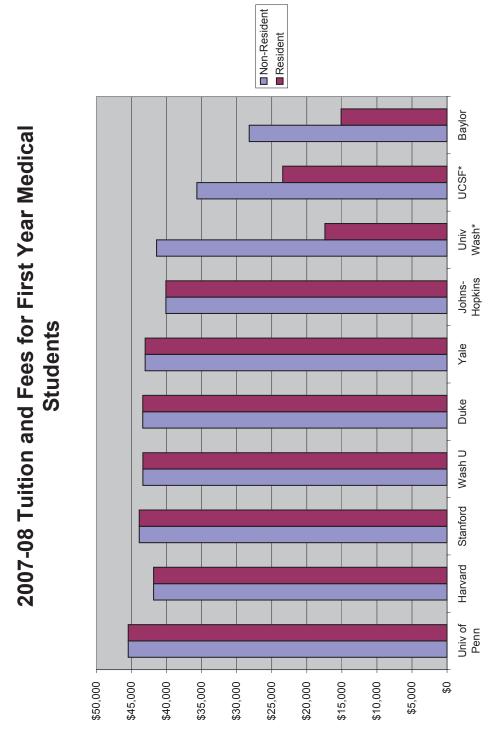
Source: School of Medicine - Strategic Planning Chart II-5

GPAs and Testing Scores of Incoming UCSF Medical Students

	Overall	Science	
Year	GPA	GPA	MCAT
2008	3.71	3.68	11
2007	3.73	3.7	11
2006	3.75	3.74	11
2005	3.79	3.79	12
2004	3.77	3.77	11

Racial/Ethnic Representation among 1st Year Medical Other %6 %0 ■ 2002 UCSF ■2007 UCSF □2007 U.S. Native Am 2% Students UCSF vs. U.S. Black 13% 4% Hispanic 18% 12% 22% Asian 42% 46%47% %02 %09 40% 30% 20% 10% %0 20%

Source: School of Medicine - Strategic Planning Chart II-13



Source: AAMC.org

UCSF Residency Programs Offers and Acceptances by Department, 2007-08

Department Name	Offers	Acceptances	% Filled
Internal Medicine	56	56	100.0%
Pediatrics	28	28	100.0%
Anesthesiology	22	17	77.3%
Surgery	28	9	32.1%
Psychiatry	15	15	100.0%
Family & Community Medicine	13	13	100.0%
Emergency Medicine	12	12	100.0%
Pathology (Anatomic & Clinical)	10	10	100.0%
Radiology	12	12	100.0%
Obstetrics - Gynecology	8	8	100.0%
Neurology	6	6	100.0%
Orthopaedic Surgery	6	6	100.0%
Dermatology	5	5	100.0%
Ophthalmology	5	5	100.0%
Neurological Surgery	3	3	100.0%
Otolaryngology	3	3	100.0%
Radiation Oncology	3	3	100.0%
Urology	3	3	100.0%
Nuclear Medicine	1	1	100.0%
Plastic Surgery	3	3	100.0%
Total	242	218	90.1%

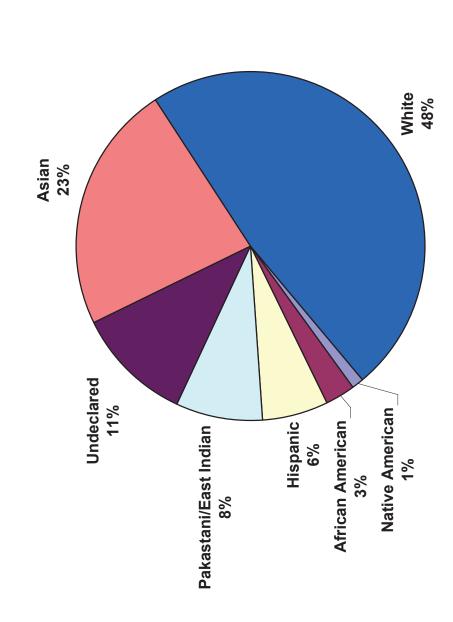
Source: UCSF Office of Graduate Medical Education - Strategic Planning Chart II-21

Fellowships/Subspecialty Training, 2007-08

	# of		
	Fellowship	# of	% Total
Department	Programs	Fellows	Fellows
Internal Medicine	34	184	40.0%
Pediatrics	20	75	16.3%
Surgery	10	36	7.8%
Radiology	12	54	11.7%
Neurology	10	20	4.3%
Obstetrics & Gynecology	5	16	3.5%
Pathology (Anatomic & Clinical)	8	16	3.5%
Psychiatry	3	9	1.9%
Anesthesiology	4	8	1.7%
Dermatology	7	9	1.9%
Opththalmology	6	11	2.4%
Urology	6	8	1.7%
Orthopaedic Surgery	4	8	1.7%
Family Practice	1	2	0.4%
Otolaryngology	2	2	0.4%
Neurosurgery	2	2	0.4%
Total	134	460	

Source: UCSF Office of Graduate Medical Education - Strategic Planning Chart II-24

Race/Ethnicity of UCSF Residents and Fellows



Source: UCSF Office of Graduate Medical Education - Strategic Planning Chart II-26

Caliber of UCSF Incoming DDS Students Compared to National Average

	Sr	Grade Point Average (GPA)	۱verage (G	PA)	Dei	Dental Aptitude Test (DAT)	de Test (D/	T)
	Overa	Overall GPA	Scienc	Science GPA	Academic /	: Average	PA	PAT**
Year	UCSF	SN	UCSF	SN	UCSF	SN	UCSF	SN
2008*	3.52	N/A	3.48	A/A	19.98	N/A	20.08	N/A
2007	3.70	3.30	3.67	3.20	21.67	19.50	19.84	18.70
2006	3.65	3.28	3.61	3.16	21.14	19.30	19.48	18.30
2002	3.50	N/A	3.40	A/N	20.30	A/A	18.00	N/A
2004	3.40	3.40	3.40	3.40	20.80	18.70	18.30	17.30

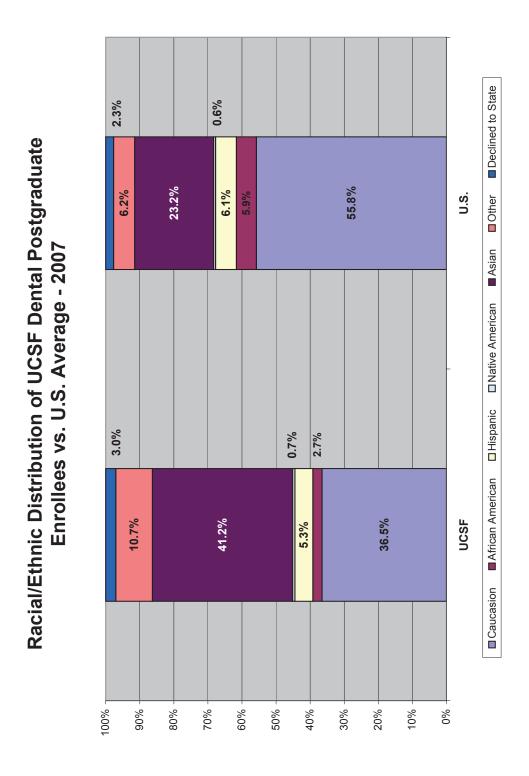
*We believe the 2008 GPA and DAT scores may be reflective of our shift in focus for our review process which is now more holistic in nature (for example, but not limited to dental experience, knowledge of the profession, commitment to community service, evidence of disadvantage, and evidence of leadership.

Dental Postgradu Enti	ate Female P ollees	rogram	
Program	Applied	Admitted	Rate
Dental Public Health	2	0	0.0%
Endodontics	6	1	16.7%
General Practice	13	2	15.4%
Oral and Maxillofacial			
Pathology	2	1	50.0%
Oral and Maxillofacial Surgery			
	9	0	0.0%
Oral Medicine	5	0	0.0%
Orthodontics	60	1	1.7%
Pediatric Dentistry	39	2	5.1%
Periodontology	11	1	9.1%
Prosthodontics	13	3	23.1%
Total:	160	11	6.9%

The admissions reflect a representative distribution in gender. The admissions total reflects the competitiveness and popularity of our programs.

The DPH program requires an additional degree, the MPH, so the the applicant pool is smaller than it is for our other programs. Oral and Maxillofacial Pathology is a relatively new program.

■ Declined to State %9.0 2.3% Racial/Ethnic Distribution of UCSF Dental Postgraduate 55.8% 23.2% 6.2% 6.1% U.S. Other Applicants vs. U.S. Average - 2007 ■Asian ■ Native American ☐ Hispanic 0.7% 3.0% African American 10.7% 41.2% 36.5% UCSF 5.3% ■ Caucasion %08 %06 %02 %09 20% 40% 30% 10% %0



UCSF Dental Postgraduate Program Applications and Admissions Class Entering 2008

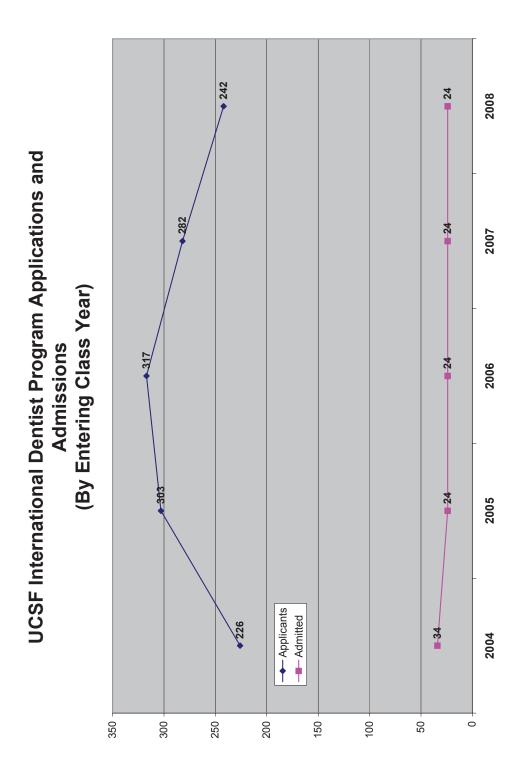
Program	# Applications	# Admitted	Acceptance Rate
Dental Public Health	3	_	33.3%
Endodontics	21	2	9.5%
General Practice	23	4	17.4%
Oral and Maxillofacial Pathology	3	1	33.3%
Oral and Maxillofacial Surgery	52	4	%2.2
Oral Medicine	2	0	%0.0
Orthodontics	124	2	4.0%
Pediatric Dentistry	22	3	2.5%
Periodontology	39	3	%2.7
Prosthodontics	24	3	12.5%
Total:	349	26	7.4%

The admissions reflect a representative distribution in gender.

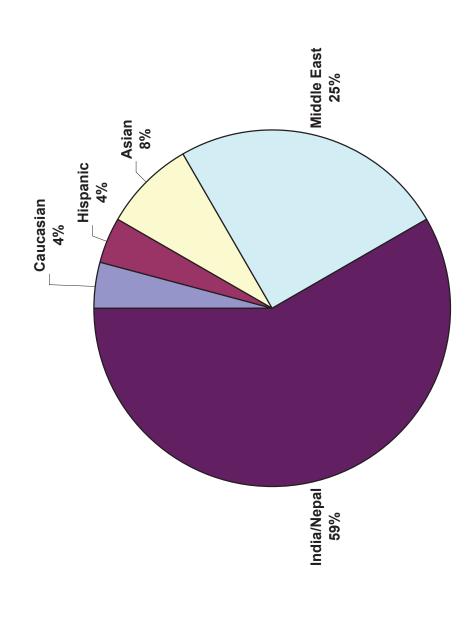
The admissions total reflects the competitiveness and popularity of our programs. The DPH program requires an additional degree, the MPH, so the applicant pool

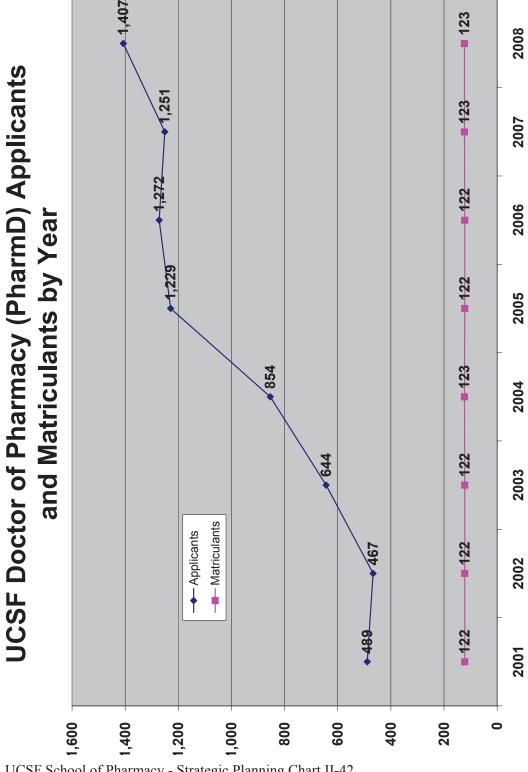
is smaller than it is for our other programs.

Oral and Maxillofacial Pathology is a relatively new program

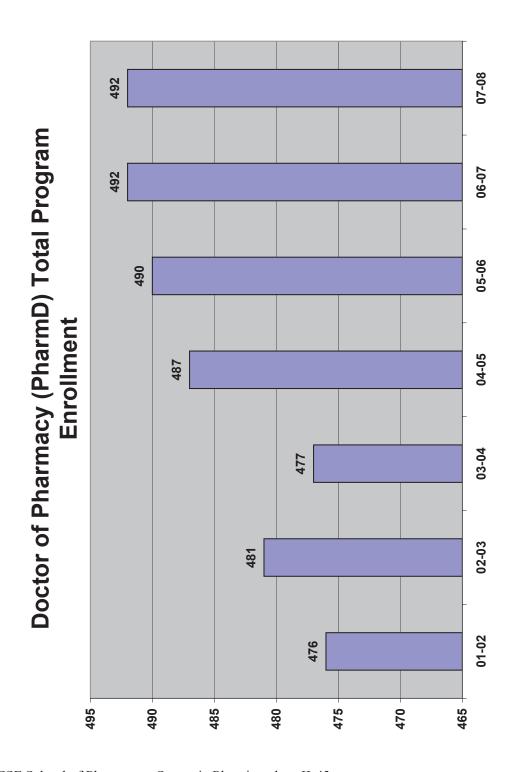


UCSF International Students Racial/Ethnic Distribution - 2008

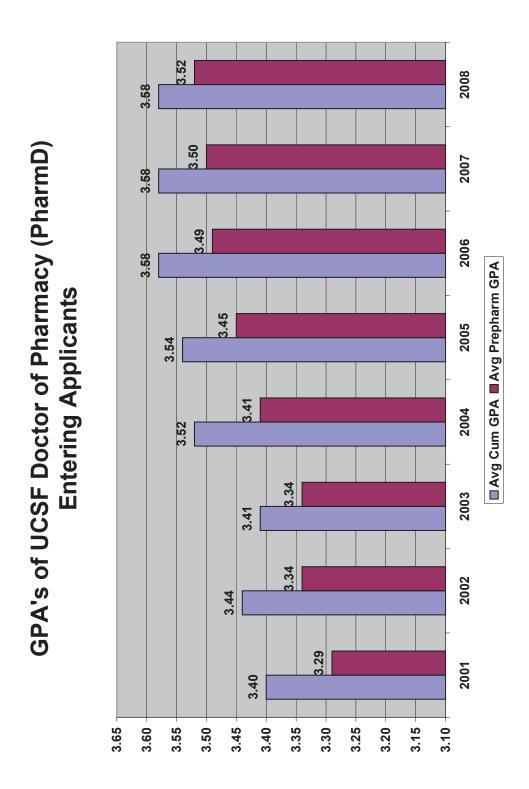




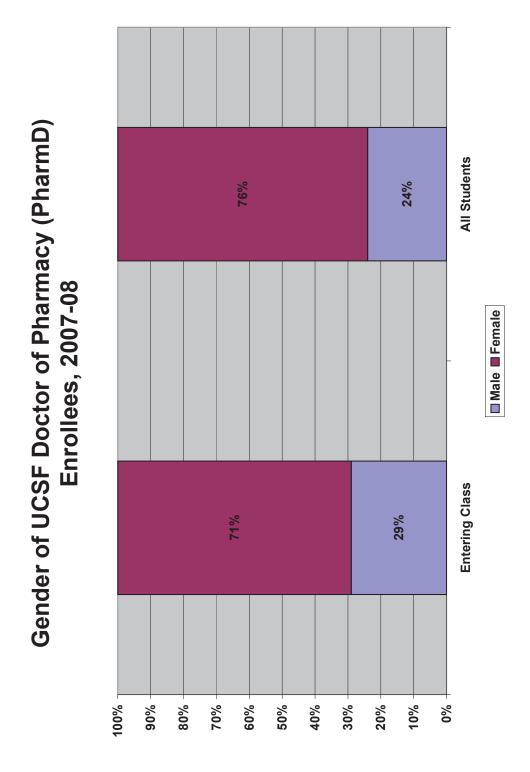
Source: UCSF School of Pharmacy - Strategic Planning Chart II-42



Source: UCSF School of Pharmacy - Strategic Planning chart II-43

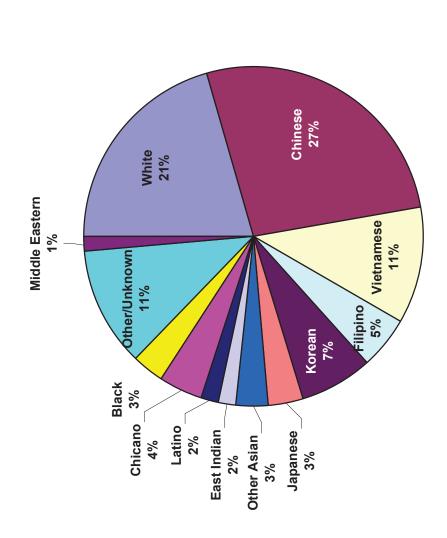


Source: UCSF School of Pharmacy - Strategic Planning Chart II-44



Source: UCSF School of Pharmacy - Strategic Planning Chart II-45

Ethnicity of UCSF Doctor of Pharmacy (PharmD) **Enrollees, 2007-08**



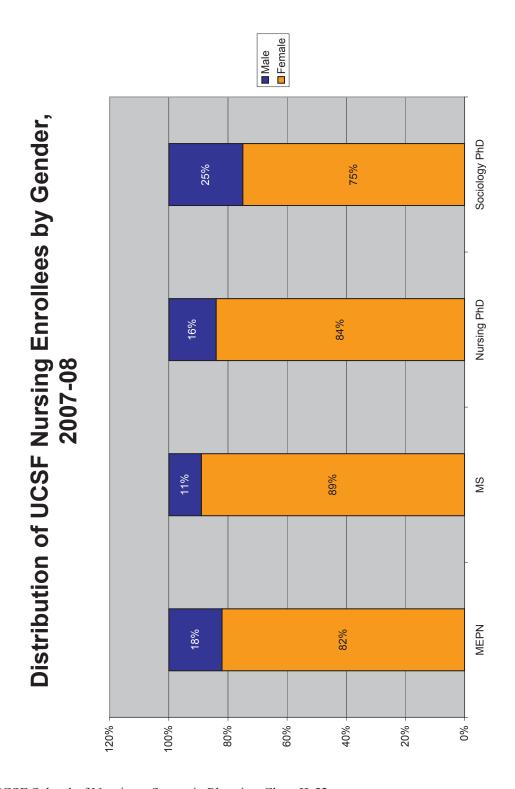
Source: UCSF School of Pharmacy - Strategic Planning Chart II-45

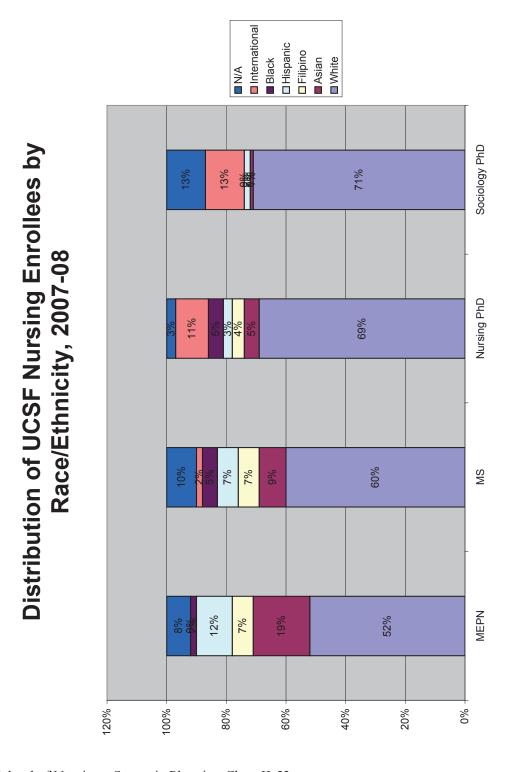
UCSF School of Nursing Program Applications and Enrollment by Program

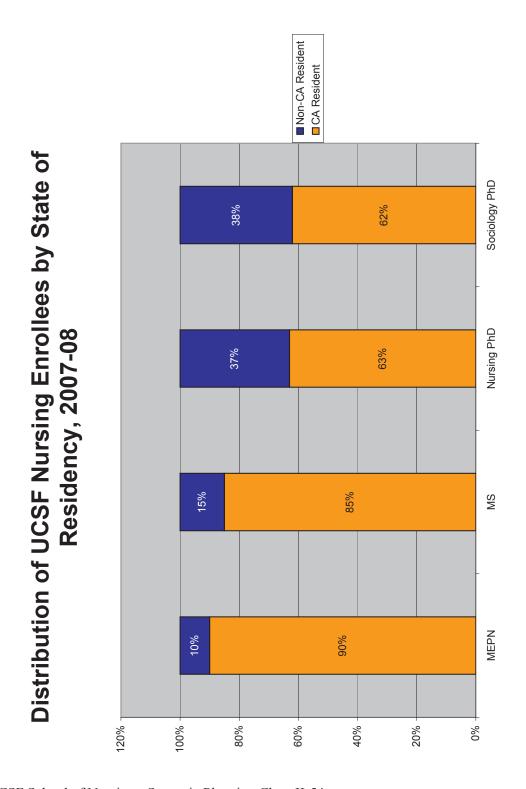
	Fall 2007		2003			2007	
	Size of Program	Appl.	Enrid	Acceptance Rate	Appl.	Enrid	Acceptance Rate
MEPN	84	422	68	16%	592	84	14%
MS	398	201	122	61%	197	124	63%
N-PhD	130	63	28	44%	45	23	51%
S-PhD	32	32	4	13%	54	5	9%
Total	644	718	222	31%	888	236	27%

UCSF Entering Nursing Students Undergraduate GPA and Mean GRE Scores

	200)3	20	07
	GPA	GRE	GPA	GRE
MEPN	3.47	V=570	3.47	V=570
		Q=630		Q=650
		A=640		A=650
MS	3.43	V=500	3.43	V=480
		Q=540		Q=560
		A=600		A=600
N-PhD	3.84	V=510	3.84	V=510
		Q=540		Q=560
		A=560		A=600
S-PhD	3.53	V=570	3.53	V=570
		Q=630		Q=630
		A=643		A=643







		L		_	C	-			
University of California, San Francisco - Graduate Division FY 2005-06 / FY 2006-07 / FY 2007-08 Applications and Acceptances	Y 2006-07 /	FY 2007-0	University of California, San Francisco - Graduate Division 005-06 / FY 2006-07 / FY 2007-08 Applications and Acceptal	radua ons al	ate DIVI	eptan	seo		
		Applications			St	ndents	Students Accepted	p	
Graduate Program	FY 2005-06	FY 2006-07	FY 2007-08	Fall	Fall 2005	Fall Number/	Fall 2006 Number / % of Apps	Fall Number/	Fall 2007 Number / % of Apps
Biochemistry*	350	358	369	72	20.6%	72	20.1%	62	16.8%
Bioengineering	323	437	388	56	17.3%	56	12.8%	58	14.9%
Biological & Medical Informatics	70	29	63	1	15.7%	13	19.4%	17	27.0%
Biomedical Sciences	299	327	259	65	21.7%	09	18.3%	69	26.6%
Biophysics	58	99	99	26	44.8%	28	42.4%	26	39.4%
Cell Biology*	0	0	0	0	0.0%	0	0.0%	0	%0.0
Chemistry & Chemical Biology	93	136	98	22	23.7%	19	14.0%	19	19.4%
Developmental Biology*	0	0	0	4	0.0%	0	0.0%	0	%0.0
Genetics*	0	0	0	0	0.0%	0	0.0%	0	%0.0
History of Health Sciences**	12	12	11	4	33.3%	4	33.3%	7	63.6%
Medical Anthropology***	31	42	42	5	16.1%	9	14.3%	9	14.3%
Neuroscience	268	274	262	36	13.4%	43	15.7%	30	11.5%
Nursing	71	71	46	41	57.7%	38	53.5%	36	78.3%
Oral & Craniofacial Sciences	21	13	13	5	23.8%	2	15.4%	4	30.8%
PSPG	69	71	75	16	23.2%	18	25.4%	22	29.3%
Sociology	52	42	39	11	21.2%	6	21.4%	6	23.1%
Campus Total	1717	1916	1731	374	21.8%	368	19.2%	365	21.1%
* All applications are received by, and admissions are to, Biochemistry.	dmissions are	to, Biochemis	try.						
** History of Health Sciences Application Data for Fall 2005 (Listed in Fall 2005 column) and Fall 2007 only.	on Data for Fall	2005 (Listed ir	r Fall 2005 colu	mn) an	d Fall 200	7 only.			
** Medical Anthropology Application Data for Fall 2004 (Listed in Fall 2005 column) and Fall 2006 only	ta for Fall 2004	t (Listed in Fall	2005 column)	and Fal	1 2006 on	\			

Source: Graduate Division - Strategic Planning Chart II-59

22/2006

FY 2005	Unive	rsity of C	University of California, San Francisco - Graduate Division FY 2005-06 / 2006-07 / 2007-08 Matriculated Students and Total Enrollment	ı, San Matric	Francisculated S	co - Grae Students	duate I	Division otal Enr	ollment			
				Mat	Matriculated Students	tudents				Total P	Total Ph.D. Enrollment	ollment
Graduate Program		Fall 2005	2		Fall 2006	9.		Fall 2007	7			
	Number	Percent of Acceptances	Percent of Applications	Number	Percent of Acceptances	Percent of Applications	Number	Percent of Acceptances	Percent of Applications	Fall 2005	Fall 2006	Fall 2007
Biochemistry*	32	44.4%	9.1%	29	40.3%	8.1%	19	30.6%	5.1%	112	117	114
Bioengineering	37	66.1%	11.5%	23	41.1%	5.3%	28	48.3%	7.2%	74	68	72
Biological & Medical Informatics	5	45.5%	7.1%	_	7.7%	1.5%	9	35.3%	9.5%	34	30	33
Biomedical Sciences	29	44.6%	9.7%	31	51.7%	9.5%	34	49.3%	13.1%	114	125	125
Biophysics	6	34.6%	15.5%	10	35.7%	15.2%	12	46.2%	18.2%	65	57	65
Cell Biology*	0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%	46	35	37
Chemistry & Chemical Biology	6	40.9%	9.7%	9	31.6%	4.4%	1	57.9%	11.2%	51	47	50
Developmental Biology*	3	75.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%	0	9	80
Genetics*	0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%	13	9	10
History of Health Sciences**	3	75.0%	25.0%	3	75.0%	25.0%	5	71.4%	45.5%	4	2	7
Medical Anthropology***	2	100.0%	16.1%	4	66.7%	9.5%	4	%2'99	9.5%	15	16	28
Neuroscience	12	33.3%	4.5%	14	32.6%	5.1%	16	53.3%	6.1%	88	92	97
Nursing	30	73.2%	42.3%	30	78.9%	42.3%	25	69.4%	54.3%	140	152	139
Oral & Craniofacial Sciences	5	100.0%	23.8%	2	100.0%	15.4%	5	125.0%	38.5%	15	10	12
PSPG	12	75.0%	17.4%	7	38.9%	9:9%	10	45.5%	13.3%	47	49	52
Sociology	5	45.5%	9.6%	9	66.7%	14.3%	9	66.7%	15.4%	34	36	34
Campus Total	196	52.4%	11.4%	166	45.1%	8.7%	181	49.6%	10.5%	852	851	883
* All applications are received by, and admissions are to, Biochemistry.	dmissio	ns are to, B	iochemistry									
** History of Health Sciences Application Data for Fall 2005 (Listed in Fall 2005 column) and Fall 2007 only.	on Data f	or Fall 2005	(Listed in F	-all 2005	column) aı	nd Fall 2007	only.					
** Medical Anthropology Application Data for Fall 2004 (Listed in Fall 2005 column) and Fall 2006 only.	ata for Fa	II 2004 (Lis	ted in Fall 2	005 colt	ımn) and Fa	all 2006 onl	×					

Source: Graduate Division - Strategic Planning Chart II-59

Graduate Student Profile Fall 2007

		Under-	
Program	Female	Represented	Total
		Minority	Students
Adv Tr in Clin Research	61.5%	51.9%	52
Biochem & Molecular Bio	52.3%	41.4%	111
Bioengineering	39.1%	44.9%	69
Biol & Med Informatics	25.0%	34.4%	32
Biomedical Sciences	63.6%	37.1%	140
Biophysics	29.0%	27.4%	62
Cell Biology	59.4%	31.3%	32
Certif Pgm Biomed Resrch	53.3%	66.7%	15
Chemistry and Chem. Biol	46.7%	37.8%	45
Developmental Biology	42.9%	42.9%	7
Genetics	50.0%	30.0%	10
Global Health Sciences	0.0%	100.0%	1
History of HIth Sciences	71.4%	28.6%	7
Medical Anthropology	69.2%	30.8%	13
Neuroscience	56.5%	38.0%	92
Nursing (MS)	90.3%	41.0%	268
Nursing (PhD)	84.0%	37.4%	131
Nursing MEPN	86.5%	40.9%	215
Oral & Craniofacial Sci	50.0%	63.6%	22
Ph Sciences & Phgenomics	53.8%	50.0%	52
Physical Therapy (DPT)	66.7%	26.7%	30
Physical Therapy (DPTSc)	66.7%	0.0%	3
Physical Therapy (MS)	63.6%	27.3%	33
Postgrad Certif Pain Mgt	63.2%	31.6%	19
Sociology	75.0%	43.8%	32
Total	67.6%	39.7%	1,493

Source: Graduate Division - Strategic Planning Chart II-61

RANKINGS SECTION

Top Ten Medical Schools U.S. News & World Report 2008

	Research
1	Harvard University (MA)
2	Johns Hopkins University (MD)
3	Washington University in St. Louis
4	University of Pennsylvania
5	University of California, San Francisco
6	Duke University (NC)
	University of Washington
8	Stanford University (CA)
9	Univeristy of California, Los Angeles (Geffen)
9	Yale University (CT)

	Primary Care
1	University of Washington
2	Oregon Health and Science University
3	University of North Carolina, Chapel Hill
4	University of Colorado, Denver
5	Uiversity of Vermont
6	University of California, San Francisco
7	Baylor College of Medicine (TX)
7	Harvard University, (MA)
7	Michigan State University College of Osteopathic Medicine
7	Univeristy of Iowa (Carver)
7	University of Minnesota Medical School

UCSF Medical School Specialty Rankings U.S. News & World Report 2008

	UCSF
Specialty Programs	Rank
AIDS	1
Women's Health	2
Drug/Alcohol Abuse	5
Internal Medicine	3
Family Medicine	8
Geriatrics	9
Pediatrics	9

UCSF Graduate Division Program Rankings U.S. News & World Report 2008

	UCSF
Sciences - Area	Rank
Biological Sciences	7
Immunology/Infectious Disease	3
Biochemistry/Biophysics/Structural Biology	4
Cell Biology	4
Molecular Biology	4
Genetics/Genomics/Bioinformatics	6
Neuroscience/Neurobiology	6
Microbiology	7
Chemistry	28
Biochemistry	4
Physical Therapy	14
Psychology	66

Top Pharmacy Graduate Programs U.S. News & World Report 2008

Rank	University
1	University of California, San Francisco
2	University of North Carolina, Chapel Hill
3	University of Minnesota
4	University of Texas, Austin
5	Ohio State University
5	University of Kentucky
5	University of Michigan, Ann Arbor
5	University of Washington
9	Purdue University
9	University of Arizona
9	University of Florida
9	University of Illinois, Chicago
9	University of Maryland, Baltimore
9	University of Wisconsin, Madison

UCSF Nursing Discipline Rankings U.S. News & World Report 2008

UCSF Disciplines	UCSF Rank
Nursing	2
Adult	2
Adult/Medical/Surgical	1
Family	2
Gergontological/Geriatric	7
Midwifery	3
Nursing Service Administration	7
Pediatric	5
Psychiatric/Mental Health	2

Top Ten Hospitals U.S. News & World Report 2008

Rank	Hospital
1	Johns Hopkins Hospital
2	Mayo Clinic
3	Ronald Reagan UCLA Medical Center
4	Cleveland Clinic
5	Massachusetts General Hospital
6	New York-Presbyterian Univ. Hosp.
7	UCSF Medical Center
8	Brigham and Women's Hospital
8	Duke University Medical Center
10	Hosp. of the Univ. of Pennyslyvania
10	Univ. of Washington Medical Center

Best Hospitals - Cancer U.S. News & World Report 2008

Rank	Hospital
1	University of Texas M.D. Anderson Cancer Center, Houston
2	Memorial Sloan-Kettering Cancer Center, New York
3	Johns Hopkins Hospital, Baltimore
4	Mayo Clinic, Rochester, Minn.
5	Dana-Farber Cancer Institute, Boston
6	University of Washington Medical Center, Seattle
7	Massachusetts General Hospital, Boston
8	University of California, San Francisco Medical Center
9	Stanford Hospital and Clinics, Stanford, CA
10	Ronald Reagan UCLA Medical Center, Los Angeles

Best Hospitals - Ear, Nose, & Throat U.S. News & World Report 2008

Rank	Hospital
1	Johns Hopkins Hospital, Baltimore
2	University of Iowa Hospitals and Clinics, Iowa City
3	UPMC-University of Pittsburgh Medical Center
4	University of Texas M.D. Anderson Cancer Center, Houston
5	Massachusetts Eye and Ear Infirmary, Boston
6	Barnes-Jewish Hospital/Washington University, St. Louis
7	Hospital of the University of Pennsylvania
8	Mayo Clinic, Rochester, Minn.
9	Ronald Reagan UCLA Medical Center, Los Angeles
10	University of Michigan Hospitals and Health Centers, Ann Arbor
16	University of California, San Francisco Medical Center

Best Hospitals - Endocrinology U.S. News & World Report 2008

Rank	Hospital
1	Mayo Clinic, Rochester, Minn.
2	Massachusetts General Hospital, Boston
3	Johns Hopkins Hospital, Baltimore
4	University of California, San Francisco Medical Center
5	New York-Presbyterian Univ. Hosp. of Columbia and Cornell
6	Cleveland Clinic
7	University of Virginia Medical Center, Charlottesville
8	Brigham and Women's Hospital, Boston
	Hospital of the University of Pennsylvania, Philadelphia
10	Barnes-Jewish Hospital/Washington University, St. Louis

Best Hospitals - Gastrointestinal Disorders U.S. News & World Report 2008

Rank	Hospital
1	Mayo Clinic, Rochester, Minn.
2	Cleveland Clinic
3	Johns Hopkins Hospital, Baltimore
4	Massachusetts General Hospital, Boston
	Ronald Reagan UCLA Medical Center, Los Angeles
6	University of Chicago Medical Center
7	Mount Sinai Medical Center, New York
8	Cedars-Sinai Medical Center, Los Angeles
9	University of Michigan Hospitals and Health Centers, Ann Arbor
10	Hospital of the University of Pennsylvania, Philadelphia
11	University of California, San Francisco Medical Center

Best Hospitals - Geriatric Care U.S. News & World Report 2008

Rank	Hospital
1	Ronald Reagan UCLA Medical Center, Los Angeles
2	Johns Hopkins Hospital, Baltimore
3	Mount Sinai Medical Center, New York
	Massachusetts General Hospital, Boston
5	Duke University Medical Center, Durham, N.C.
6	Yale-New Haven Hospital, New Haven, Conn.
7	Mayo Clinic, Rochester, Minn.
8	UPMC-University of Pittsburgh Medical Center
9	Beth Israel Deaconess Medical Center, Boston
10	University of Michigan Hospitals and Health Centers, Ann Arbor
12	University of California, San Francisco Medical Center

Best Hospitals - Gynecology U.S. News & World Report 2008

Rank	Hospital
1	Birgham and Women's Hospital, Boston
2	Johns Hopkins Hospital, Baltimore
3	Mayo Clinic, Rochester, Minn.
4	Duke University Medical Center, Durham, N.C.
5	University of California, San Francisco Medical Center
6	New York-Presbyterian Univ. Hosp. of Columbia and Cornell
7	Magee-Womens Hospital of UPMC, Pittsburgh
8	Cleveland Clinic
9	Vanderbilt University Medical Center, Nashville
10	Ronald Reagan UCLA Medical Center, Los Angeles

Best Hospitals - Heart & Heart Surgery U.S. News & World Report 2008

Rank	Hospital
1	Cleveland Clinic
2	Mayo Clinic, Rochester, Minn.
3	Johns Hopkins Hospital, Baltimore
4	Massachusetts General Hospital, Boston
5	Brigham and Women's Hospital, Boston
6	New York-Presbytherian Univ. Hosp. of Columbia and Cornell
7	Texas Heart Institute at St. Luke's Episcopal Hospital, Houston
8	Duke University Medical Center, Durham, N.C.
9	Barnes-Jewish Hospital/Washington University, St. Louis
10	Ronald Reagan UCLA Medical Center, Los Angeles
39	University of California, San Francisco Medical Center

Best Hospitals - Kidney Disease U.S. News & World Report 2008

Rank	Hospital
	Brigham and Women's Hospital, Boston
2	Mayo Clinic, Rochester, Minn.
3	New York-Presbyterian Univ. Hosp. of Columbia and Cornell
4	Cleveland Clinic
5	Massachusetts General Hospital, Boston
6	Johns Hopkins Hospital, Baltimore
	Ronald Reagan UCLA Medical Center, Los Angeles
8	Barnes-Jewish Hosptial/Washington University, St. Louis
9	Vanderbilt-University Medical Center, Nashville
10	Hospital of the University of Pennsylvania, Philadelphia
11	University of California, San Francisco Medical Center

Best Hospitals - Neurology and Neurosurgery U.S. News & World Report 2008

Rank	Hospital
1	Mayo Clinic, Rochester, Minn.
2	Johns Hopkins Hospital, Baltimore
3	Massachusetts General Hospital, Boston
4	University of California, San Francisco Medical Center
5	New York-Presbyterian Univ. Hosp. of Columbia and Cornell
6	Cleveland Clinic
7	Ronald Reagan UCLA Medical Center, Los Angeles
8	Barnes-Jewish Hospital/Washington University, St. Louis
9	St. Joseph's Hospital and Medical Center, Phoenix
10	NYU Medical Center, New York

Best Hospitals - Ophthalmology U.S. News & World Report 2008

Rank	Hospital
1	Bascom Palmer Eye Institute at the University of Miami
2	Wilmer Eye Institute, Johns Hopkins
	Wills Eye Hospital, Philadelphia
4	Massachusetts Eye and Ear Infirmary
5	Jules Stein Eye Institute, UCLA Medical Center, Los Angeles
6	University of Iowa Hospitals and Clinics, Iowa City
7	Doheny Eye Institute, USC University Hospital, Los Angeles
8	Duke University Medical Center, Durham N.C.
9	Emory University Hospital, Atlanta
10	University of California, San Francisco Medical Center

Best Hospitals - Orthopedics U.S. News & World Report 2008

Rank	Hospital
1	Hospital for Special Surgery, New York
2	Mayo Clinic, Rochester, Minn.
3	Cleveland Clinic
4	Massachusetts General Hospital, Boston
	New York-Presbyterian Univ. Hosp. of Columbia and Cornell
6	Johns Hopkins Hospital, Baltimore
7	Duke University Medical Center, Durham, N.C.
8	NYU Hospital for Joint Diseases, New York
9	UPMC-University of Pittsburgh Medical Center
10	Rush University Medical Center, Chicago
19	University of California, San Francisco Medical Center

Best Hospitals - Psychiatry U.S. News & World Report 2008

Rank	Hospital
1	Massachusetts General Hospital, Boston
2	Johns Hopkins Hospital, Baltimore
3	New York-Presbyterian Univ. Hosp. of Columbia and Cornell
4	McLean Hospital, Belmont, Mass.
5	UCLA's Neuropsychiatric Hospital, Los Angeles
6	Menninger Clinic, Houston
7	Sheppard and Enoch Pratt Hospital, Baltimore
8	Mayo Clinic, Rochester, Minn.
9	UPMC-University of Pittsburgh Medical Center
10	Stanford Hospital and Clinics, Stanford, Calif.
18	University of California, San Francisco Medical Center

Best Hospitals - Respiratory Disorders U.S. News & World Report 2008

Rank	Hospital			
1	National Jewish Health, Denver			
2	Mayo Clinic, Rochester, Minn.			
3	Johns Hopkins Hospital, Baltimore			
4	Massachusetts General Hospital, Boston			
5	Cleveland Clinic			
6	University of California, San Diego Medical Center			
7	Hospital of the University of Pennsylvania, Philadelphia			
8	University of California, San Francisco Medical Center			
9	Duke University Medical Center, Durham N.C.			
10	New York-Presbyterian Univ. Hosp. of Columbia and Cornell			

Best Hospitals - Rheumatology U.S. News & World Report 2008

Rank	Hospital			
1	Johns Hopkins Hospital, Baltimore			
2	Cleveland Clinic			
3	Mayo Clinic, Rochester, Minn.			
4	Hospital for Special Surgery, New York			
5	Ronald Reagan UCLA Medical Center, Los Angeles			
6	Massachusetts General Hospital, Boston			
7	Brigham and Women's Hospital, Boston			
8	University of Alabama Hospital at Birmingham			
9	University of California, San Francisco Medical Center			
10	UPMC-University of Pittsburgh Medical Center			

Best Hospitals - Urology U.S. News & World Report 2008

Rank	Hospital			
1	Johns Hopkins Hospital, Baltimore			
2	Cleveland Clinic			
3	Mayo Clinic, Rochester, Minn.			
4	Ronald Reagan UCLA Medical Center, Los Angeles			
5	Memorial Sloan-Kettering Cancer Center, New York			
6	Duke University Medical Center, New York			
7	University of California, San Francisco Medical Center			
8	New York-Presbytherian Univ. Hosp. of Columbia and Cornell			
9	University of Texas M.D. Anderson Cancer Center, Houston			
10	Vanderbilt University Medical Center, Nashville			

Top 10 Heart Transplant Hospitals (by 2007 Volume): Volume Trends

Rank	Hospital	2002	2003	2004	2005	2006	2007
_	The Presbyterian Hosp in NYC	82	87	98	118	106	97
2	UCLA	95	96	77	86	83	88
3	Cleveland Clinic Foundation	09	73	28	72	74	61
4	Stanford Univ Med Ctr	47	55	62	29	99	29
2	The Hosp of the Univ of PA	51	53	47	67	54	22
9	Tampa General Hospital	42	22	54	09	29	53
7	Duke University Med Center	09	51	48	32	40	48
80	Univ of Pittsburgh Med Ctr	40	33	37	28	22	46
6	Shands Hosp at Univ of FI	25	37	37	14	34	41
10	Cedars Sinai Medical Center	47	34	28	20	25	43
10	St. Lukes Episcipal Hospital	47	27	24	35	39	43
40	UCSF Medical Center	1	13	10	21	20	18

Source: United Network of Organ Sharing (UNOS)

Top 10 Kidney Transplant Hospitals (by 2007 Volume): Volume Trends

	Hospital	2002	2003	2004	2002	2006	2007
	JCSF Medical Center	298	342	370	251	295	366
2 NC	UCLA	266	302	311	279	289	316
3 Un	Univ of Alabama	314	293	249	298	303	294
4 Un	Univ of Wisconsin	288	286	302	304	310	289
Ne.	New York-Presbyterian/Columbia	92	106	138	199	250	260
6 Jac	Jackson Memorial Hospital	118	138	186	202	197	254
7 Un	Univ of Michigan	183	190	218	215	271	250
No No	Northwestern Memorial	186	195	223	241	256	246
nU 6	Univ. of Maryland Med System	252	185	215	202	229	244
10 Cla	Clarian Health-Methodist/IU/Riley	233	233	249	283	226	219

Source: United Network of Organ Sharing (UNOS)

Top 10 Liver Transplant Hospitals (by 2007 Volume): Volume Trends

Rank	Hospital	2002	2003	2004	2005	2006	2007
1	NCLA	195	185	182	203	234	230
2	Jackson Memorial	186	168	153	141	147	192
3	Univ of Pittsburgh	179	276	243	222	183	183
4	St. Luke's Florida	191	171	245	246	218	165
5	Clarian Health-Methodist/IU/Riley	139	166	161	176	154	155
9	Cleveland Clinic Foundation	32	40	93	122	125	148
7	Mount Sinai	124	112	123	164	131	145
8	Baylor University	155	169	158	135	117	132
6	UCSF Medical Center	105	127	124	160	149	127
10	Presbyterian Hospital in NYC	94	86	108	128	152	122

Source: United Network of Organ Sharing (UNOS)

Top 10 Lung Transplant Hospitals (by 2007 Volume): Volume Trends

Rank	Hospital	2002	2003	2004	2002	2006	2007
1	Univ of Pittsburgh	49	40	58	28	66	123
2	Cleveland Clinic Fndtn	36	47	63	64	62	69
3	UCLA	27	28	37	24	09	29
4	Duke University	20	29	29	29	09	22
2	The Presbyterian Hosp in NYC	22	26	32	43	51	22
9	The Hosp of the Univ of PA	28	32	39	69	51	53
7	Barnes-Jewish	58	47	28	24	28	53
8	Univ of Washington Med Ctr	36	37	43	42	55	52
6	Tampa General Hospital	8	4	11	41	36	41
10	The Methodist Hosptial	20	20	11	22	36	40
14	UCSF Medical Center	13	28	31	32	29	35

= hospital with the highest volume for the year Source: United Network of Organ Sharing (UNOS)

Newsweek International

Top 10 Global Universities

- 1. Harvard University
- 2. Stanford University
- 3. Yale University
- 4. California Institute of Technology
- 5. University of California at Berkeley
- 6. University of Cambridge
- 7. Massachusetts Institute of Technology
- 8. Oxford University
- 9. University of California at San Francisco
- 10. Columbia University

Top Fund-Raising Institutions FY 2007-08

		Funds	% Change from	% Change from
No.	University	Raised	2006-07 to	2002-03 to
		2007-08	2007-08	2007-08
1	Stanford University	\$785,042,846	-5.7%	61.5%
2	Harvard University	\$650,625,000	6.0%	17.1%
3	Columbia University	\$495,106,753	16.8%	75.9%
4	Yale University	\$486,610,483	24.4%	119.1%
	University of Pennsylvania	\$475,957,652	21.3%	19.1%
6	University of California, Los Angeles	\$456,654,332	25.2%	42.9%
7	Johns Hopkins University	\$448,964,324	4.3%	40.5%
8	University of Wisconsin at Madison	\$410,227,266	26.1%	43.0%
9	Cornell University	\$409,422,892	0.6%	29.1%
10	University of Southern California	\$409,183,101	-12.9%	33.7%
11	Indiana University system	\$408,620,812	46.7%	63.5%
12	New York University	\$387,608,993	34.8%	86.4%
13	Duke University	\$385,672,922	3.6%	29.9%
14	University of California at San Francisco	\$366,068,018	45.3%	62.3%
15	University of Michigan system	\$333,445,185	13.6%	81.3%
16	Massachusetts Institute of Technology	\$311,902,992	-5.2%	62.9%
17	University of Minnesota system	\$307,609,387	6.5%	25.6%
18	University of Washington	\$302,770,825	0.9%	-2.7%
19	University of North Carolina at Chapel Hill	\$292,389,028	18.4%	78.7%
20	University of California, Berkeley	\$285,346,548	17.6%	49.6%

Source: Council for Aid to Education

UCSF HISTORY

UCSF is home to graduate professional schools in dentistry, medicine, nursing and pharmacy; a graduate division for predoctoral and postdoctoral scientists; the UCSF Medical Center; the UCSF Children's Hospital; and Langley Porter Psychiatric Institute. The following paragraphs chronicle UCSF's history in brief over the past 144 years. A much more complete history of UCSF can be found later in this section.

UCSF was founded in 1864 as Toland Medical College, making it the oldest continuously operating medical school in the Western United States. In 1868, the University of California was created and in 1873, Toland Medical College affiliated with the University and became the Medical Department of the University of California.

The School of Pharmacy was founded in 1872 as the California College of Pharmacy by members of the California Pharmaceutical Society. This was the first college of pharmacy established in the West and the tenth in the United States. In 1873, the college affiliated with the University and became the College of Pharmacy of the University of California.

In 1881, the University of California Regents organized and established the Dental College in which was the first dental educational institution to be established west of the Mississippi River.

A diploma program for the education of nurses was first offered by the University of California in 1907. This ultimately led to the establishment of the School of Nursing, the first autonomous school of nursing in any state university, in 1939. The School of Nursing faculty achieved full academic status in the University in 1941.

In 1895, the California Legislature appropriated \$250,000 for the construction of the "Affiliated Colleges" of the University of California on a 13-acre parcel in Parnassus Heights donated by San Francisco Mayor Adolph Sutro. By the turn of the century, 400 students were receiving professional instruction at the Parnassus campus.

In response to the acute need for hospital facilities after the 1906 earthquake, the University established its first teaching hospital on the Parnassus campus in 1907. To create space for the new clinical facilities, the departments of Physiology, Anatomy, and Pathology were transferred to Berkeley, not to return until the 1950's. A new UC Hospital building was completed and opened in 1917 at a cost of \$600,000 raised from private donations.

In 1912, the name of Medical Department of the University of California was changed to the University of California College of Medicine, and by 1915 it was designated of-

ficially as the University of California Medical School.

In 1949, the Regents officially designated the Parnassus campus as the UC Medical Center in San Francisco and renamed the UC Medical School the "UC School of Medicine."

Prior to 1954, the deans of the various schools on the San Francisco campus reported directly to the President of the University. An administrative advisory committee composed of deans and administrative chiefs, with the dean of the School of Medicine as chairman, was established in 1954 to supervise the campus. In 1958, the title of chairman was changed to provost, and in 1964, to chancellor. In 1970 the campus (then known as the San Francisco Medical Center) was named officially University of California, San Francisco.

In 1955, the twelve-story, Moffitt Hospital opened with two stories added later. The adjoining fourteen-story medical sciences building opened in 1956 as basic science faculty in anatomy, biochemistry and physiology prepared their move from Berkeley. Long Hospital was constructed adjacent to Moffitt Hospital in 1982, bringing the combined capacity of the two hospitals to 526 beds as of 2007. Planned renovations will bring the capacity up to 580 beds by 2013.

In 1997, UC Regents approved Mission Bay as the site for UCSF's 2nd major campus site on 43 acres of property south of downtown San Francisco. At full buildout, the campus will contain approximately 20 buildings and will be populated by around 9,100 persons. As of 2008, the Mission Bay campus had a population of 3,500 staff, students, faculty and visitors.

UCSF plans to build a 289-bed, integrated hospital complex to serve children, women and cancer patients on a 14.5 acre parcel adjacent to its existing 43-acre Mission Bay campus. Upon completion of the first phase in late 2013 or early 2014, the plans for the 869,000-plus-gross-square-foot hospital complex include:

- A 183-bed children's hospital with urgent/emergency care and pediatric primary care and special ambulatory facilities;
- A 70-bed adult hospital for cancer patients;
- A women's hospital for cancer care, specialty surgery and select outpatient services, plus a 36 bed birth center;
- An energy center, helipad, parking and support services.

1868-1898

Origins of the University of California and Affiliated Colleges



INTRODUCTION

The story of UCSF's nineteenth-century beginnings provides a distinct contrast to more conventional accounts of the development of America's health professions in the long-established medical centers of the East and Midwest. This is especially true in light of its early development in Gold Rush San Francisco, which in five decades developed from an isolated village into a heterogeneous American metropolis of more than 300,000 inhabitants. San Francisco's founding decade of the 1850s was marked by the arrival of hordes of immigrant gold seekers of many nationalities, substandard housing, devastating city fires, cholera and typhoid epidemics, and governance by vigilance committees. Fixed in the social and economic chaos of the Gold Rush were the roots of California's emerging health professions: Dentistry, Medicine, Nursing and Pharmacy.

Despite the geographical isolation and unique social conditions of this urban frontier, the western health professions did not develop in a vacuum. As this history reveals, professional leaders persistently corresponded with leaders in the eastern universities and traveled to visit professional schools, searching for ideal templates for their own developing institutions. And, although they borrowed freely from curricula, clinical teaching techniques, classroom and lab designs, San Francisco's professional leaders often created a distinctive environment.

Rapid technological and theoretical developments within the professions themselves helped to transform medical education. In medicine this took the form of replacing traditional didactic lectures with hands-on instruction in pathology, physiology, bedside clinical training, and autopsy studies. In the last decades of the century, the development of bacteriology, immunology, antiseptic techniques, and anesthesia revolutionized medical practice and medical education. Dentistry, which by the mid-nineteenth century split from medicine as a specialty of its own, moved from crude tooth-pulling towards a primary concern with replacing and restoring teeth. In so doing, dentists pioneered nitrous oxide and ether anesthesia and introduced a number of new materials and devices, from gold foil and vulcanized rubber, to rotary instruments and adjustable chairs. In the field of pharmacy, the practice of manually preparing dosage forms (tinctures, extracts, pills, powder papers etc.) from a mere handful of effective drugs, and a pronounced interest in botanicals, gradually gave rise to patent medicines and industrially-produced drugs. This led eventually to increasingly sophisticated pharmaceutical chemistry and the development of the disciplines of pharmacognosy and pharmacology, revolutionizing the relationship between pharmacists and physicians. Finally, in the late nineteenthcentury hospitals evolved from pest-houses and poorhouses into functional institutions for healing and acute care. Nursing emerged as a separate profession, created by women who took on responsibility for hospital cleanliness, nutrition, safeguarding the sterility of the operating room and medical and surgical supplies, and for the consistent provision of disciplined bedside care, initially in hospitals and later in homes.

In the case of medicine, the development of private medical colleges predated the founding of the University of California itself. The Organic Act of 1868 created the University of California and designated 160 acres of land in Berkeley for its use. Section 8 of the Act directed the Board of Regents "to affiliate with the university any incorporated college of medicine or law, or other special course of instruction now existing or may be created." In 1872, as the structure of the divisions of the University was still under development and buildings were still under construction in Berkeley, a "medical department" was established under the control of physicians in San Francisco. Soon pharmacists moved to affiliate formally. In so doing, they put their instructional programs "on an academic basis" with the support of UC's first president Daniel Coit Gilman, who promoted the addition of advanced scientific training to the young university. In 1881 the College of Dentistry was created by the Board of Regents as one of the "affiliated colleges" based in San Francisco. The three colleges—medicine, pharmacy, and dentistry—were not mere satellite appendages to Berkeley, however.

The affiliated colleges shaped and bolstered the developing University in many ways. At the turn of the century, the creation of fulltime scientific faculty positions in anatomy,

pathology and physiology in connection with the affiliated colleges set a precedent for the University of California's subsequent leadership in the basic biological sciences and their application to clinical problems. Owing to the consistent support of a long line of UC Presidents, the health sciences remained a significant feature of the public service mandate of the state's university.

PRELUDE: The California Gold Rush

Any history of the health professions involving a boomtown like San Francisco would have to take into account the unique geographical and social environment created by the Gold Rush. In 1846 San Francisco was a colony of around 200 people called Yerba Buena. A year later the population had grown to 457, and most of these were men under forty, including one minister, three doctors, three lawyers, and one schoolteacher.`



View of San Francisco: San Francisco before the Gold Rush, March 1847, with Montgomery Street bordering the bay.

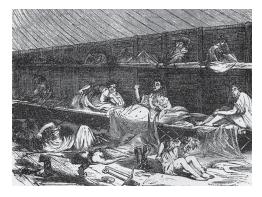
On January 24, 1848, a worker found gold nuggets in the millrace at John Sutter's encampment on the American River, setting off a decade-long nationwide wave of "Gold Fever." On February 2, 1848, President Polk signed the Treaty of Guadalupe Hidalgo with the Mexican government, transferring the Mexican lands, including California, to the U. S. for 15 million dollars. The Treaty was proclaimed on June 19th, but news did not reach California until August of 1848. That same month news of the gold discovery reached the East, and by November the first ship carrying goldseekers

left the east coast. Twenty-five years later, when the Colleges of Pharmacy and Medicine officially affiliated with the University, San Francisco's population had swelled to 183,723.

A City of Transients



Forest of Masts: Panoramic View of San Francisco, ca 1850s. Left to right: Nob Hill, Russian Hill, Telegraph Hill; and far right: a harbor full of abandoned ships.



Artist's depiction of lodging conditions in San Francisco, ca. 1850s.

Already by 1849, San Francisco had been transformed into a chaotic city of 40,000, with 4,000 immigrants arriving by ship each month. Abandoned ships cluttered the harbor and most of the available lumber was used to build saloons. Citizens lived in cellars and makeshift tents crowded into the flatlands that surrounded the bay. Health conditions were frightful, with a third of the deaths caused by diarrhea and dysentery. Malnutrition, scurvy, malaria, and typhus fever were also prevalent and the population was subjected to deaths from starvation, exposure, murder, executions, and various wounds and accidents. To make matters worse, in autumn of

1850, cholera arrived in California, brought in by ship, just in time to mar any celebration of state-hood. One physician observer estimated that from 1851 to 1853, one of every five persons reaching California died within six months of arrival. By 1855 over 150,000 persons had come to seek gold in California, swelling the new state's population, and San Francisco became a full-fledged city of over 60,000 served by nearly 2,000 dentists, physicians, and pharmacists with varying credentials.



Street Conditions in San Francisco during the Gold Rush.

Coming To California

From the beginning, physicians, pharmacists, and dentists were as enthusiastic about seeking their fortunes as most other prospectors. California's early dentists provided their services to the throngs of gold miners. Dr J. Foster Flagg, one of the early fortyniners, studied dentistry in the eastern US and arrived in San Francisco in late 1849. He described his outdoor workspace in a mining community, "my chair is a barrel cut in this wise, with a stick with head rest attached. The lower half of the barrel stuffed firmly with pine needles and covered with a strong potato sack, over which I had an elegant cover of striped calico. A tin cup of water sufficed to rinse the mouth, and the patient, from force of habit, spit on the floor of the office—which was the ground."

Dr. Hans Herman Behr, a German-educated physician-naturalist and student of Alexander von Humboldt, came to San Francisco in 1851. He found his intellectual treasure in studying the flora and fauna of California. Preferring botany to medical practice, he served on the faculty of the California College of Pharmacy for its first two decades.



Portrait of Hugh Toland

In 1852, South Carolina surgeon Dr. Hugh H. Toland joined a wagon train heading west in search of gold and a healthier climate for his ailing wife, who died just days after their arrival in California. After a few discouraging months as a miner, Dr. Toland realized that his medical knowledge was potentially more profitable than his mill, so he sold his claim and headed to the coast to establish a surgical practice in booming San Francisco.

Toland located his office near the waterfront at Montgomery and Merchant Streets and within months became the city's foremost surgeon, managing what was reportedly the largest practice on the West Coast. His interest in pharmacy and his experience in the mining camps prompted him to devise packaged medicines which he shipped to the mines by Wells Fargo messengers. His favorite remedies were labeled "anti-scrof" (iodide of potash) and "anti-syph" (mercury with a dash of lobelia) to treat the miners' most common problems: tuberculosis and syphilis.



This 19th-century surgical kit contained nine instruments including a charriere saw, four knives, a hook, a bone cutter, dressing forcep, two needles, a cloth, and brass tourniquet.

As the Sponge Case demonstrated, the medical milieu in San Francisco at mid-century was a mix best described by the state medical society president, who wrote in 1858, "We are a heterogeneous mass, an army of incompatibles. No country in the world is supplied with physicians so diverse in character. We have all the peculiarities of all the schools in the world, coupled with all the peculiarities of all the nations in the world."

Toland's fame often thrust him into controversy and he soon ran afoul of his colleague, Dr. R. Beverly Cole, a Philadelphia-trained physician who also came to California in search of gold. In 1856 Dr. Toland was called to attend a wounded newspaper editor, and medical judgment and vigilante justice became entwined in the famous Sponge Case.



This portable medical kit belonged to Dr. F. L. Miner. It contains such 19th-century remedies as chloral hydrate, chloroform, and potassium bromide.

SAN FRANCISCO'S FIRST MEDICAL INSTITUTIONS: Hospitals and Pesthouses

Well before individual practitioners succeeded in organizing themselves into professional societies, the needs of the public's health prompted official government action on behalf of the San Francisco citizens. The task of removing the seriously ill or indigent from the streets and the threat of major epidemics prompted the city to provide for hospital care, first in tents and board sheds under supervision of contracting physicians. In 1850 a state bill appropriated \$50,000 to build a State Marine Hospital in San Francisco.



U.S. Marine Hospital, created by Congress and built in 1853.

Meanwhile, in 1851 the U.S. Congress created a U.S. Marine Hospital in San Francisco, which was completed in 1853 and provided accommodations for an additional 500 patients. In 1855 the State Marine Hospital building was transformed into the City and County Hospital of San Francisco, supported by fees collected by a public health officer who inspected every vessel that entered the port.

In 1854, six Sisters of Mercy arrived from Ireland. They won praise for cleaning up the hospital environment after a series of scandals over poor care and for nursing patients through cholera and smallpox. The Sisters of Mercy stayed in San Francisco and continued to provide hospital care in a setting that eventually became St. Mary's Hospital. By 1857 the City and County Hospital was located in the former North Beach School at the southwest corner of Francisco and Stockton Streets. In order to help relieve crowding, in 1867 the city of San Francisco built a large almshouse near Laguna Honda on eighty acres of city-owned land on the western side of Twin Peaks. The following year the city created a 24-bed smallpox isolation hospital on the Laguna Honda grounds.

San Francisco's First Medical Schools

In 1858 California surgeon Elias Samuel Cooper organized the Medical Department of the University of the Pacific with a board of trustees consisting of ten clergymen and three physicians. The first session opened in May 1859, with a class of ten attending lectures in materia medica, chemistry, physiology, anatomy and medical jurisprudence. Dr. Cooper's death in 1862 brought confusion to the new school, and in 1864 the Pacific Medical faculty "suspended" activities and joined Dr. Hugh Toland in his efforts to found a viable medical school in San Francisco.

As San Francisco's population continued to grow, Hugh Toland's influence and wealth also increased,



Hugh Huger Toland (b. 1806, d. 1880)

earning an estimated \$40,000 per year. In 1864, he decided to establish a medical school in San Francisco and purchased land for that purpose in North Beach, at Stockton and Francisco, opposite the San Francisco City and County Hospital. A handsome building was soon completed, and Toland Medical College was open for enrollment. Clinical instruction and dissecting experience were the centerpieces of Toland's educational program, reflecting his training and experience in Parisian hospitals where clinical findings were carefully correlated with autopsy results.



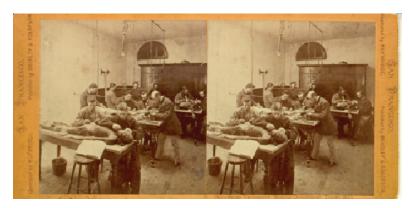
In his inaugural speech, Dr. Toland offered the hope that the school would "spring into usefulness and become an ornament to the city and an honor to the state." From 1864 to 1872 Toland Medical College benefited from close proximity to the City-County Hospital (adjacent at right).

The school catalogue reflected Toland's insistence on the importance of clinical instruction. Lectures were given at San Francisco City and County Hospital where a "senior student examines the patient; announces the diagnosis and prognosis and views about treatment before class, discussion follows, complete clinical histories are kept and there are broad opportunities for autopsies." Just a month after classes began, the state of California approved a dissection law permitting pauper bodies to be studied by accredited physicians, thus opening the way for Toland students to gain experience doing dissection.

Toland's first class consisted of eight students, mostly drawn from the Cooper Medical College. The faculty of this lapsed medical college were asked to serve on the Toland roster, and Drs. Levi Cooper Lane, Henry Gibbons, Sr., and John F. Morse joined the faculty with some ambivalence. Significantly, R. Beverly Cole, the Dean and professor of obstetrics and diseases of women and children at Cooper, was not asked by Toland to join his new faculty.

The Toland Medical College quickly prospered. Its faculty of eight offered two fourmonth courses costing \$130 and leading to the degree of doctor of medicine. In the valedictory address to the first graduating class of Toland Medical College in 1865, Toland urged his graduates to devote a portion of every day to the study of monographs and medical journals to remain professionally competitive.

While boasting that he had built and furnished the school with his own resources, Toland also made a direct pitch to the new alumni to help their alma mater by supplying medical books. "When success crowns your efforts," he urged, "contribute in proportion to your ability and prepare a niche in this institution which will bear your names and transmit them to posterity."



Medical Students in Toland Medical College Dissecting Room, ca 1870. Photo by Eadweard Muybridge (Courtesy of the Bancroft Library, UC Berkeley).

R. Beverly Cole returned from a tour of Europe in 1867 and was appointed Surgeon General of the State of California in recognition of his valuable public health efforts. As a member of the Outside Lands Committee of the San Francisco Board of Supervisors, Cole became a well-known figure in the city's political arena. He supported the establishment of Golden Gate Park on the western edge of the city. Cole simultaneously persuaded the local health board to condemn the old City and County Hospital building, and a new institution was planned at Potrero Nuevo, a site nearly four miles south-



Prof. R. Beverly Cole, Medical Department of the University of California.

east of Toland's College. The impression among San Francisco's medical fraternity was that Cole had finally achieved his revenge for Toland's past rebuffs by weakening the College's vital link to the world of clinical medicine. Eventually, however, Dr. Cole would join the Toland medical faculty and become instrumental in the affiliation negotiations with the University of California.

University Affiliation

By 1870, Toland Medical College had a class of thirty students and had already granted diplomas to forty-five graduates. In that year, Toland sought to affiliate his medical school to the University of California, which itself was not yet two years old. In March 1873, the trustees deeded the Toland Medical College to the University of California Regents and the faculty minutes for the

first time bore the heading, "The Medical Department of the University of California."

R. Beverly Cole became the dean and twenty-seven students were enrolled in the first class. Toland's donation was appraised at the time at \$100,000 in buildings, lands, and instructional equipment, a gift that substantially increased the holdings of the young state university. On September 15, 1874, the regents adopted a resolution stating that "young women offering themselves for admission and passing the required examination must be received to all the privileges of the Medical Department." Responding to this new policy, schoolteacher Lucy Wanzer matriculated and in 1876 became the first female graduate of the Medical Department of the University of California. Many other young women followed her precedent, among them Mayor Adolf Sutro's daughter. In the subsequent five decades, roughly 10 percent of each graduating class was female, far in advance of the national average of 4 percent.

California Pharmaceutical Society

"The practice of medicine and pharmacy should go hand in hand and the more we endeavor to increase our individual knowledge and practical skill, so much more we confer dignity upon our own and a sense of security to the sister profession. The time has gone by when the educated and skillful pharmacist can be considered in the derogatory light of 'cook to the Doctor'. We are what our efforts make us; and as surely as water finds its level, so surely will the labors of the conscientious receive, in due time, their appointed reward." -

1870 minutes of the California Pharmaceutical Society.

In autumn of 1868, just four years after the foundation of Toland Medical College, an activist group of seventeen city pharmacists organized the California Pharmaceutical Society. The stated goal of the new association was "the advancement of pharmaceutical knowledge and the elevation of the professional character of apothecaries throughout the state of California." Regular monthly meetings of the Society continued, attracting a growing number of participating pharmacists, who presented papers on such subjects as, "Drug and Poison Bills," "State and Preparation for Commerce of the Crude and Refined Chemical products of California," Characteristic Botany of California," "California Wines, Brandies, etc", and "Fluid Extracts vs. Tinctures." Proceedings of the young Society reveal their concerns with "dispensing medicines of less than standard value", "indiscriminant" sale of poisons, introducing new formulas to the pharmaceutical Society were two enterprising individuals who devoted their time to pharmaceutical education and

professional standards while managing multiple city pharmacies.

In 1871 the Pharmaceutical Society drafted a bill "to regulate the practice of pharmacy in the City and County of San Francisco" which passed the legislature in 1872, and a Board of Pharmacy was appointed to administer the new law. This regulation predated the Medical Practice Act by five years, and the records of the California Pharmaceutical Society reveal a striking degree of unanimity among pharmacists of San Francisco. Minutes of the first annual meeting recorded 99 members and stated that "only three or four of the apothecaries of San Francisco have chosen to keep beyond the pale of our regulations." Their new constitution stated explicit goals: "to improve the science and art of Pharmacy, by diffusing knowledge among Apothecaries and druggists, fostering pharmaceutical literature, developing talent, stimulating discovery and invention... establishing the relations between druggists, Pharmaceutists, Physicians and the people at large, upon just principles, which shall promote the public welfare and tend to mutual advantage." By late 1871 the California Pharmaceutical Society incorporated and, in 1872, established the California College of Pharmacy, one of ten such colleges in the United States, and the first in the West. The first faculty included two pharmacists with medical degrees out of four members who taught courses in chemistry, pharmacy, materia medica, and botany.

The new pharmacy college had barely begun its first series of lectures when affiliating with the new state University was proposed, a move wholly supported by UC President Daniel Coit Gilman, whose support for science education in the young university set an important precedent. Agreement was reached with the Regents and by June 1873 the Pharmacy Department was formally affiliated with the University. Just three months earlier President Gilman had negotiated the conveyance of Toland's medical college to the university. UC now had its first two professional "affiliated colleges."

Creating a UC Dental Department

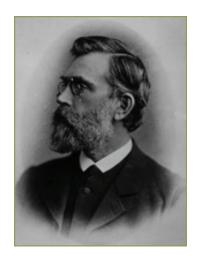
"We need a college of dentistry on this coast and if we have not a necessary talent among ourselves, we can import it. We owe those who take our places, greater facilities for study and professional breadth than the times have afforded us. The future will demand men educated in all that constitutes the scholar and professional man, and refined in all that makes the gentleman."

Dr. CC Knowles, June 26, 1870

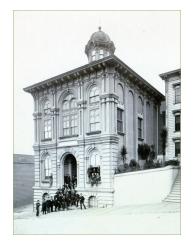
The same impulse that prompted physicians and pharmacists to organize, standardize, and regulate their professions motivated a group of the city's leading dentists to call for creation of a professional dental school. S.W. Dennis, M.D., D.D.S., was typical of this group of early organizers. He had graduated from the medical department of the University of Pennsylvania, received

an honorary D.D.S. degree from the Indiana Dental College, and began practice in San Francisco after studying with a local dentist. In the midst of general lobbying for a school of dentistry, Dr. Dennis contacted colleagues at Harvard and the University of Pennsylvania to help plan for a dental college in San Francisco.

In the late nineteenth century, dentistry was regarded as a recently separated area of medical specialization. Many dentists had M.D. degrees in addition to their dental training and most agreed that dental education should be closely linked to the medical curriculum, especially with respect to the teaching of anatomy and pathology. They desired university affiliation and they worked in close conjunction with the faculty of the Medical Department. On May 28, 1881, the medical faculty formally proposed the creation of an affiliated Dental Department to the UC Regents, using the affiliation of the medical and pharmacy departments as precedent. Part of their appeal included their promise of free lecture and clinic space for dental students at the Toland Medical College building.



S. W. Dennis, M.D., DDS



Toland Medical Building was the site of science instruction for the College of Pharmacy (in 1875-1876) and Dentistry (1882-1891) as well as the Medical School (1864-1898)

The Regents responded favorably, and in September of 1881 they established a Dental College to be organized with seven professors, nine instructors and four demonstrators. The eight members of the Dental Class of 1882 took courses of instruction in anatomy, physiology, chemistry and surgery alongside medical students in the Toland Medical College building at the corner of Stockton and Francisco Streets. A dental clinic was also located there and dental students were invited to attend selected bedside teaching clinics given by the medical faculty. While the UC Dental Department was not the only dental school to be organized in San Francisco, its founding in the context of the state university placed it in the forefront of academic schools in the West.

Thus by 1882 the University of California had three affiliated colleges in San Francisco. Faculty salaries were paid by tuition and fees and the individual schools retained control over choice of faculty, but the Toland Medical College building was officially made the property of the

university, and graduates of the schools wore university gowns at graduation. From the beginnings of affiliation, reciprocity in course offerings and programs was a feature of the three colleges: medical and dental students took anatomy and physiology side-by side, and all three schools allowed their graduates to expand their careers by matriculating in the other schools, with course credit allowed.

Trained Nurses for San Francisco

Nationally the impetus for nursing reform grew out of the experiences of the Civil War and the proliferation of hospitals in the second half of the nineteenth century. In 1873 the first class of "trained" nurses graduated from the New England Hospital For Women And Children, and in that same year three other large eastern hospitals, Bellevue (New York), Massachusetts General (Boston) and, the New Haven Hospital (Connecticut) developed training programs. By 1880 there were fifteen nurse's training schools in the nation.

San Francisco's experience in training nurses was shaped by the existence of female leadership from the growing number of locally active women physicians, some graduates of the UC Medical Department and some trained at various eastern medical schools. San Francisco physician Charlotte Amanda Blake Brown took her medical training in Philadelphia and was, to her colleagues, "a most favorably known surgeon, obstetrician, medical organizer and good citizen of San Francisco." In 1875, she joined with her daughter—physician Adelaide Brown— to develop the Pacific Dispensary for Women and Children, which subsequently (1879) became the Women's and Children's Hospital. This was a unique institution, governed by an exclusively female medical staff and it offered rare opportunities for women physicians to gain postgraduate experience.



Charlotte Blake Brown

Growth of the Affiliated Colleges

The 1880s marked a period of growth and transition for all three affiliated colleges. The foremost feature of this change was the move towards more elaborate clinical and laboratory instruction. Although UC President Daniel Coit Gilman left for Baltimore in 1875, his legacy was reflected in the educational tone of the University of Califor-



Closeup of Toland Medical Building; the three story City County Hospital is on the right. The hospital moved to its Portrero site in 1872, making clinical training more difficult for students who had to travel four miles for clinical sessions.

nia's affiliated colleges throughout the nineteenth century. Gilman had urged that medical training include "the habits of observation, manipulation, and reasoning," and over the next two decades, the three affiliated colleges developed curriculum that gradually reduced the number of didactic lectures and stressed direct clinical experience. Laboratory instruction expanded as wet preparations and vivisection were added to the physiology courses, the use of surgical tools was demonstrated on cadavers, and quantitative and qualitative chemical analysis were taught in all three colleges. Dental, medical, and pharmacy students were given lectures on the principles of the microscope. Gradually the college faculties expanded beyond the original full professors and included a corps of assistants and demonstrators.

Such profound changes in curriculum placed pressure upon the built environment of the colleges. Toland Medical building was the original center of instruction, providing "ample accommodations" for the College of Pharmacy from 1873 to

1876 and sharing space with Dentistry for its entire first decade. The Toland Medical College building contained a large lecture hall, clinical amphitheater, dissecting room, and laboratory space with chemicals and equipment "necessary for practical teaching." Throughout the 1880s, much of the basic coursework for the dental students was nearly identical to that of medical students, including lectures in physiology, surgery, chemistry and materia medica, anatomy, and pathology, and, for dental students, emphasis on diseases and injuries of the head, face, jaws and mouth. Pathology for dental students was divided into General Pathology and the disease process, and Special Pathology, which included the causes of dental decay, dental hygiene and prophylaxis, diseases of the dentine and dentinal pulp, diseases of the mucous membranes, alveolar abscesses, and tumors, benign and malignant. Dental students took instruction in "Neuralgia and other nervous affections" and were invited to attend clinical lectures at the City and County Hospital. Medical and dental students shared the same commencement ceremony.

Despite their similarities in instructional program, the unique needs of dentistry inevitably put pressure on Toland Medical Building facilities. When the Dental Department

was first founded in 1881, space at Toland was described as "beautifully situated, well ventilated and lighted, and admirably constructed and arranged for the work at hand." Several rooms were set aside for dispensary work, and the faculty raised funds for the purchase of "five Morrison dental chairs, 5 Archer dental chairs, three S.S. White dental engines, 10 spittoons, turnkeys, forceps elevators and stools." The laboratory requirements for dentistry instruction were unique to that profession, and the dental lab in Toland Medical Building was described in the mid 1880s as "commodius, furnished with benches, lathes, furnaces for melting, forge, rolling mill, continuous gum furnace and all other requisites for thorough work." The Dental Department flourished in terms of numbers of students, size of the faculty, and scope of instruction. By the mid-1880s, over half of the dental curriculum involved direct clinical work or laboratory work, and the more dynamic the instruction became, the more space was required.

Expanded Pharmacy Instruction at 113 Fulton Street

Pharmacy instruction became more elaborate as well. Toland Medical Building had been the site of pharmacy instruction for the first three years after the founding and affiliation of the California College of Pharmacy, but in 1876 pharmacy instruction moved to larger quarters in the California Academy of Sciences. Although the College of Pharmacy was affiliated with the University, it was governed by its own board of trustees. In 1883, desiring larger, more centrally located quarters, the trustees purchased a lot at 113 Fulton Street where they erected a three-story building designed exclusively for pharmacy instruction. In this new space, courses in chemistry, materia medica, botany,

and theoretical and practical pharmacy were taught by a five-member faculty: William T. Wenzell, M.D., PhG, Professor of Chemistry, Herman H. Behr, M.D., Professor of Botany, Frederick A Grazer, Ph.G., Professor of Materia Medica, and Edward W. Runyon, Ph.G, Dean and Professor of Pharmacy.

Throughout the 1880s, the college continued to upgrade its admissions requirements and course offerings. Previously, the completion of one year of high school or its equivalent was sufficient, but by the mid-1880s applicants needed to demonstrate skill in English reading and composition, geography and arithmetic through examination. Requirements for graduation included attendance of two full years of courses "in each of the [Col-



The California College of Pharmacy at 113 Fulton St.

lege of Pharmacy] departments," plus four years of experience "in a pharmacy where prescriptions are compounded." Candidates for the PharmG degree had to be at least 21 years old, "of good moral character," and each student had to present an original thesis, "on some subject relating to Pharmacy or its collateral branches, or a chemical analysis conducted by himself."

Enhanced Curricula within the Affiliated Colleges

Reciprocity existed among the affiliated colleges. Pharmacy graduates were allowed to be examined for the MD in either the Medical Department of Cooper Medical College after attending medical school for two years instead of the otherwise required three. MD graduates, in turn were encouraged to pursue the PharmG degree after one year's attendance of the two years course in the College of Pharmacy. Dental graduates with the D.D.S. were able to gain a year towards their MD degree by enrolling in the Medical



Dental Clinics.

Department. Many of the graduates and faculty of the nineteenth century held degrees in both Dentistry and Medicine.

An interesting feature of the expanded courses and admission requirements of the 1880s was the attempt to bolster the preparatory curriculum for all three departments. In 1884 the UC Academic Senate resolved that all that students of all three affiliated colleges "may have a free course of lectures at Berkeley" to include work in "Botany, comparative anatomy and physiology, organic and inorganic chemistry with

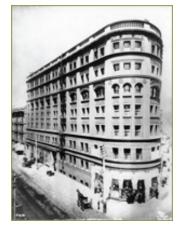
laboratory work, microscopic technology and physiological and pathological histology, physics with laboratory work and free hand drawing." The 1885 prospectus for the College of Dentistry praised: "this wise and liberal action of the Academic Senate," which provided, "the opportunity...for those students of intellectual capacity and professional ambition to attain that technical knowledge and practical laboratory training and experience so necessary to the scientific investigation of the aetiology of disease." This optional offering was directed at all the colleges and foreshadowed later upgrades in the requirements for pre-professional training in dentistry, medicine, and pharmacy.

Dentistry Instruction at the Donohoe Building

In 1891, as the business center of San Francisco shifted away from the Stockton Street location of the Toland Medical Building, the Dental Department moved its clinical and

mechanical instruction closer to downtown, occupying the entire fourth floor of the Donohoe Building on the corner of Market and Taylor. As dentistry's facilities acquired rows of new chairs and drills, enrollment increased, and entering students encountered a thriving clinical setting.

The Donohoe Building facility was the site of the practical aspect of dentistry, as students learned to work with gold foil and vulcanized rubber dentures, utilizing an array of drills and tools. Throughout the 1890s, UC's Dental Department was closely connected to San Francisco's population through its large dispensary service, providing free dental care upon need.



The College of Dentistry was located in the top two floors of the Donohoe building.

The Basic Sciences and the Practice of Medicine



Dentistry students studying bacti, 1894

The 1890s brought epochal changes in the content of basic science. Since the 1870s, when Sir Joseph Lister introduced antiseptic surgery and Louis Pasteur disproved the theory of spontaneous generation and developed the rabies vaccine, a new science of bacteriology found its "golden age." European bacteriologists developed rigorous techniques for isolating and identifying causative organisms, and isolated the organisms of anthrax (1876), tuberculosis (1882) cholera (1883), diphtheria (1884), typhoid (1884), Staphylcoccus (1884), tetanus (1884), Pneumococcus (1886), gas gangrene (1892), and plague (1894).

Bacteriology was gradually accepted into American medicine. In the late nineteenth century, the UC Medical Department retained basic science instruction in anatomy, physiology and pathology for medical and dental students at Toland Medical Building on the corner of Stockton and Francisco Streets. In an effort to modernize the cur-

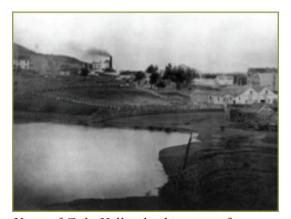
riculum, the Medical Department_invited Professor George H. F. Nuttall of Johns Hopkins University to give a special course of lectures in bacteriology. In 1893 the faculty installed a new bacteriology lab containing a "complete apparatus" imported directly from Berlin.

By the 1890s, dentistry, medicine and pharmacy were vitally involved in incorporating the expanding content of laboratory science. Bacteriology, along with microscopic histology, urinalysis, salivary analysis, toxicology, and parasitology were added to the curriculum. By the turn of the century, white gowns, enameled furniture, scrubbable surfaces, and rubber gloves transformed the appearance of the hospital ward, operating room and dental office. The use of diphtheria antitoxin and other antiserum products were added to the pharmacopiea, and chemistry instruction was expanded in the College of Pharmacy.



College of Pharmacy graduation invitation featuring illustrated content of the fields of chemistry, materia medica, botany, and pharmacognosy.

Building the Parnassus Campus



View of Cole Valley looking east from Parnassus in 1892.

By the mid 1890s, as the content of medical science expanded, faculty and trustees of the three colleges were concerned, for, despite the fact that they were affiliated in name, their teaching facilities were scattered throughout the city, and the schools were rapidly running out of room to expand. In 1893 the Medical College Dean Robert McLean complained to the UC President that Toland Medical Building "has become unfit for the teaching of modern medicine." The President in turn reported to the Governor that "the professional colleges in SF are still suffering for want of suitable accommodations...[they] are better housed and

equipped than three years ago, but ask for ampler rooms." In his 1893 report, Medical College Dean Robert McClean appealed to the UC President and the Regents, asking for support for a building for all the colleges, declaring that "Its influence upon the esprit de corps of the Faculties of the various affiliated colleges upon the university as a whole and upon the public at large could not be overestimated." A committee comprised of faculty and alumni lobbied the legislature for three years, and finally in 1895 the Governor James H. Budd (a California alumnus) approved the legislature's unanimous appropriation of \$250,000 for construction of the University colleges of medicine dentistry, pharmacy, veterinary medicine, and law.



Grading the site of the Affiliated Colleges, August 29, 1895, John Tuttle, contractor.

Controversy developed over the potential sites for the colleges, and as late as May 1895, seven different sites were still being considered. In July of 1895, San Francisco Mayor Adolph Sutro donated a 13-acre site overlooking Golden Gate Park for the proposed affiliated colleges. Some speculated that this generous donation was possibly a result of Beverly Cole's and Arnold D'Ancona's tactful persuasion, others were suspicious of Sutros' motives. Several faculty disagreed with the choice of the Sutro site, considering the Parnassus shelf as totally inaccessible. Nevertheless a majority of faculty and alumni of the colleges eventually weighed in on the Sutro site, and records exist of

the Pharmacy faculty's trip to the site. After plans and bids were settled, construction began on October 20, 1896. One observer noted that "On request, the State Prison Directors supplied granite quarried by the prisoners of Folsom at a saving of \$10,000, the medical faculty subscribed over \$1,100 for plans, the architects reduced their fees, and builders accepted changes reasonably, and as the four structures rose, it was granted that planning and building were well and honestly done."



Pharmacy faculty upgraded laboratory facilities in the Fulton street building, and redoubled their efforts to create ideal modern teaching facilities in the new college buildings.

Faculty from the three colleges formed a "General Site and Building Committee of the Professional Departments of the University of California" to conduct research and oversee construction of the buildings. This Committee inspected building sites and surveyed eastern and Midwestern schools for comparisons and direction on national trends in laboratory instruction. One surviving product of their diligent research was the 76-page "Inspection Report of Colleges of Pharmacy, conducted in summer of 1895 by a group consisting of Dr. Beverly Cole, F. A. Beckett of the California College of Pharmacy, and Albert Sutton, an architect. They spent two months visiting schools of pharmacy and laboratories in nine cities. The report was detailed and critical in tone. At one point the Colored ribbon from pharmacy cornerstone laying ceremony authors note sarcastically that one college had "a building rather more imposing than our own on the exterior, but in order to continue this desirable deceit, it is advisable to remain on the outside." Their survey covered the minute details of laboratory furnishings and curriculum offerings, as well as the financial structure of the schools and salaries of faculty and janitors.

Upon returning from his travels, F. A. Beckett approached the pharmacy faculty, convinced by of the urgent need for expanding laboratory instruction. He proposed conversion of the janitor's quarters and sectioning off other rooms to create two additional labs, noting that the new college buildings at best would not be ready for three or four years, and "we could not afford to wait." He went on to propose an additional year of instruction and the granting of a Pharm D degree for more advanced study. Arguing persuasively for immediate action, he declared "We have the opportunity now to establish our reputation as the leading [College of Pharmacy] for all time, and not only for the present."



Colored ribbon from pharmacy cornerstone laying ceremony



<u>Laying cornerstone for the Affiliated Colleges on a stormy day, March 27, 1897.</u>

After five years of planning, construction and anticipation, the buildings of the Affiliated Colleges were ready for occupancy by 1898 and in October the Medical Department relocated. Pharmacy occupied its quarters over the Christmas holidays of 1898-1899. The buildings were impressive, but state support was limited to construction of the buildings themselves. The furnishing of labs and lecture halls was the responsibility of the college faculties and trustees. The Medical Department succeeded in developing a 1220-seat auditorium, the finest dis-

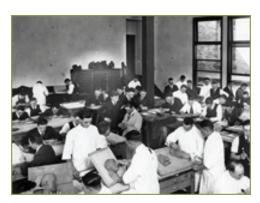
secting room in the world at the present time," and "spacious laboratories for pathology, bacteriology, chemistry and physiology," all featured in a glossy brochure.



Reproduction of pharmacy architect's drawing as published in the Pacific Druggist

Pharmacy alumni hosted several events and sold tickets to help furnish the building. Once finished, the facilities were the source of much professional pride. The California College of Pharmacy Announcement for 1901 described a four-story building with 40,000 square feet "entirely devoted to pharmacy." Facilities included a large general lecture hall designed to seat two hundred students; chemical, pharmaceutical, and microscopical labs designed to handle 100 students at a time; review classrooms, a museum, library, student's study rooms, faculty and staff offices, store rooms, and a boiler room. The facility was designed

to foster "a larger amount of personal contact between professor and pupil."



Specialized dentistry labs, 1903

While dentistry's clinical operations remained in the downtown Donohoe Building as before, the teaching space in the new Affiliated Colleges building contained several specialized dental labs, designed for detailed work in prosthetic dentistry. Other laboratories were designed for the teaching of bacteriology, chemistry and metallurgy. A special Technic room was outfitted for the teaching of operative and mechanical manipulations, "a leading feature in professional training." By 1903, the Department's Announcement listed "an

original Jenkin's porcelain outfit from Dresden, Germany, for "porcelain work is attracting more and more attention." By the early twentieth century orthodontia had grown in importance and was taught in a full course. A physiology lab was equipped with kymographs., electro magnet chronographs, induction coils, moist chambers, a galvanometer and other instruments for experiments and measurements.

1899-1918

Early Academic Programs and Teaching Hospitals

Beginnings of Fulltime Academic Chairs



An imposing view of the completed Affiliated Colleges from Golden Gate Park, photographed in 1904.

The Affiliated Colleges faculty had no sooner moved into their new quarters on Parnassus Avenue in late 1898 when it became apparent that changes in the content and form of professional education would require changes in intellectual geography and architecture. The first move toward significant structural change came from Arnold D'Ancona, a former physiology professor who became Dean of the Medical Department in 1899. With the cooperation of UC President Benjamin Ide Wheeler and several wealthy donors, he began transforming the

Medical Department from an affiliated proprietary college to a University-supported institution. In 1900, he requested that the Regents provide financial support to the Medical Department for equipment and maintenance. In his appeal, he acknowledged the changes occurring within the University itself as it matured as an institution, and pointed out that "it has been the misfortune of the Medical Department that it was established as a private institution. It became an integral department of the University at a time when in fact the University was a mere experiment...".

Firmly convinced of the importance of the Medical Department for the developing University, President Wheeler supported Dean D'Ancona's efforts. As the accommodations at the new Affiliated Colleges buildings were being readied for classes, D'Ancona argued the need for full-time academic professors, noting that "it is impossible for a physician actively engaged in the practice of medicine to teach the fundamental subjects in a medical course satisfactorily. Efficient instruction and original investigation in these subjects are possible only when the instructors devote their entire time to



Dean Arnold D'Ancona, 1904.

their College work." The Dental Department also published its aspirations for endowment of special chairs by "public spirited citizens so that ...men of ripe scholarship and experience untrammeled by the cares of active practice...may have the opportunity for independent investigation to the glory of the University and the State." Within months, with President Wheeler's support and the financial assistance of Mrs. Phoebe Hearst, three new academic departments—Pathology, Anatomy, and Physiology—were created, and a national search for full-time professors in the preclinical sciences began.

Alonzo E. Taylor, first full-time Professor of Pathology at UC, 1899-1910. In 1899 Alonzo E. Taylor was recruited from the University of Pennsylvania to direct a new academic Department of Pathology that would promote research in experimental pathology. The new unit was organized into four divisions: morphological pathology, chemical pathology, bacteriology, and original research.

Mrs. Hearst equipped the laboratory with brand new Leitz microscopes, microtomes, paraffin ovens, reagents, stains and lockers. For the research lab she provided a variety of Zeiss microscopes and equipment for microphotography and projection; analytical balances; autoclaves; and a Zuntz respiration apparatus. Mrs. Hearst also agreed to pay half of Dr. Taylor's full-time salary.



Alonzo E. Taylor, first fulltime Professor of Pathology at UC, 1899-1910.



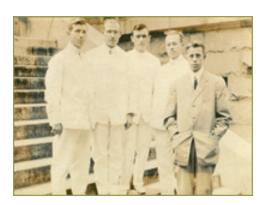
UC's new Pathology Laboratory, ca 1902.

In 1901 Drs. Irving Hardesty and Joseph Marshall Flint came to UC from the University of Chicago to direct a new Department of Anatomy. Again Mrs. Hearst generously equipped the histology laboratory, providing an additional fifty Bausch and Lomb microscopes. The anatomy lab developed by Flint in the Medical School building was seen as a national exemplar for anatomy instruction, and the lab was the subject of a feature article in the Johns Hopkins Hospital Bulletin.

A final and crucial basic science recruitment was made in 1902 when Dr. Jacques Loeb of the University of Chicago accepted a joint appointment as member of Colleges of Letters and Sciences at UC Berkeley and in Physiology at the Medical Department in

San Francisco. Loeb was to do research in addition to teaching medical and college students, and Regent Rudolph Spreckels and Dr. Max Herzstein endowed Physiology Hall at the Berkeley campus and a private lab in Pacific Grove for Dr. Loeb's research with marine animals. Thus by 1903, a distinct emphasis on basic research was added to the standard professional education provided by UC's Affiliated Colleges. Now three salaried full-time scientists chaired academic preclinical departments and began their research into chemical pathology and experimental biology "on a physico-chemical rather than zoological basis."

The Impact of Fulltime Pre-Clinical Faculty



UC house staff poses in front of the Medical School Building in 1911. Left to right: Interns Best, Markel, Bryan, Baldwin; Resident Howard C. Naffziger.

The new changes were not accepted as an unmitigated good, however, for practical conflicts emerged between the new full-time professors interested in pure research and those faculty in medicine, pharmacy, and dentistry who were pressed by the more immediate need for instructing

students in gross anatomy, diagnostic pathology, and therapeutics. Complaining of the insular needs of medical, dental, and pharmacy students, Alonzo Taylor wrote to President Wheeler, "There was a time when physiology and pathol-

ogy were the handmaids of medicine and surgery, that day has passed forever. To limit instruction in physiology and pathology to that which is today of practical application, would be educational suicide.....we are here arrived at the parting of the ways of the commercial school of medicine and the university school of medicine."

Eventually a workable compromise was reached with Dean Arnold D'Ancona, who, in addition to his duties as Dean of the Medical Department taught physiology and microscopy to dentistry students for a decade. The College of Pharmacy arranged for necessary anatomy, physiology and bacteriology



After completing medical school at the University of California, Howard C. Naffziger (b. 1884, d. 1961) studied neurosurgery at Johns Hopkins with Harvey Cushing, returned to UC and rose through the ranks, eventually becoming first full-time chair of surgery.

instruction to be done by their own faculty in their facilities on Parnassus.

In some respects, the recruitment of Taylor, Flint and Loeb was ahead of its time, for pure research was still an exceptional activity at the University of California. In fact, at the turn of the twentieth century, while research was a professed ideal, instruction was the major mandate of a state university. As Physiologist Jacques Loeb wrote after leaving the University of California, "in a democracy today there is as yet no room in a state university for pure research. It may be done on the sly, but public pressure is against it."

In 1904, in the wake of this profound change in the preclinical sciences instruction, the Medical Department also upgraded admission standards, ruling that all successful applicants have at least two full years of college before admission, thus ensuring adequate preparation for the more advanced science training they would receive. Specifically required were the study of chemistry, physics, biology, as well as English, French, or German.

Herbert McLean Evans (b. 1882, d. 1971) completed his medical training at Johns Hopkins and became Chair of Anatomy at UC in 1915. Unfortunately for the Medical Department's finances, the first impact of the new system was a huge reduction in qualified applicants and a much smaller entering class. Only nine new students matriculated in 1905, in sharp contrast to the thirty-three students admitted the previous year. This elite class included Howard C. Naffziger of Nevada City, California, and Herbert MacLean Evans, who later left San Francisco after one year to complete his instruction at Johns Hopkins. Naffziger later trained in neurosurgery at Johns Hopkins under Harvey Cushing and returned to San Francisco to a distinguished career at the medical school. Herbert Evans returned to the University of California to chair the anatomy department at Berkeley in 1915. Despite the reduced enrollment that came with higher standards, the UC Medical Department fared well in its drive to upgrade the quality of education. In 1906 the AMA Council of Medical Education inspected 160 medical schools and fully approved only half of these. The Medical Department of the University of California was rated Class A in this early survey.



Herbert McLean Evans (b. 1882, d. 1971) completed his medical training at Johns Hopkins and became Chair of Anatomy at UC in 1915.

Plans for a New Teaching Hospital

"The student of medicine has his place in the hospital as part if its machinery just as much as he has in the anatomical laboratory, and ...to combine successfully in his education practice with science, the academic freedom of the university must be transplanted to the hospital."

- William Osler

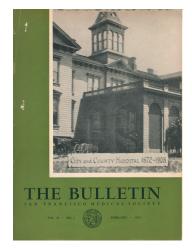


Campus with streetcar.

While the Medical and Dental Departments and the College of Pharmacy adjusted to the impact of major curriculum reform and the elusive promise of research activities, President Wheeler redoubled his efforts to improve the clinical side of medical instruction. He clearly wanted the University of California to be regarded as a center for medical science that ranked alongside Berlin, Paris, Johns Hopkins, and Harvard. In 1902 he revealed his plans for the development of a University teaching hospital "based on the newer scientific development of medicine."

But, he cautioned, "science in this sense would not be construed as a heedlessly impersonal idea, careless of the needs and sufferings of humanity, but rather as the one thing which will do much to make the prevention of these conditions possible." Wheeler felt that once the Affiliated Colleges had a teaching hospital, "the University would be then free to call to the clinical chairs the best men in the county, and offer them, in the shelter of its walls, an opportunity to devote their lives to the treatment of the sick, the teaching of students and the solution of some of the perplexing problems in medicine."

The clinical facilities used by the Medical Department by this time were severely overtaxed. The City and County Hospital had been built on the Portrero site in 1872 as an exemplar of order and cleanliness, but it quickly became overcrowded and within one year of its opening, patients



The old City County Hospital is featured here in a historical edition of the Bulletin of the San Francisco Medical Society, 25 (February 1952).



Nurses, interns, and attending physicians in the men's ward at the old City County Hospital. This hospital provided teaching material for five medical schools, including UC and Stanford.

were being placed in the chapel. The UC Medical Department operated a public dispensary for the needy and sick at the corner of New Montgomery and Howard streets, and a series of emergency hospitals were built at strategic points throughout the city, but no fewer than six medical schools had to share intern and ward assignments at the City and County Hospital. The positive effects of new additions to the original building were gradually offset by meager budgets, poor maintenance and political scandal. This decline in available clinical facilities for medical instruction was suddenly and abruptly accelerated in spring of 1906.

The 1906 Earthquake and Response

On April 18, 1906, in the early morning, a violent earthquake centered north of San Francisco on the San Andreas fault shook San Francisco, breaking the city's two major water mains and toppling brick buildings. With the city's water supply severely crippled, several fires burned out of control, destroying thousands of buildings. Total casualties were officially estimated at (nearly 700 persons with 352 missing) but the actual death toll probably stood in the thousands. Still worse, a city of 350,000 suddenly became totally dependent on outside aid.



Down Market from Mason: This photo of the post-earthquake destruction on Market street, April 1906, reveals the site of the Donohoe Building (far left) which housed UC's dental clinics at the time.

The disaster took a huge toll on the city's medical facilities—many of the city's hospitals were damaged or destroyed, including UC Medical Department's dispensary clinic at Montgomery Street and the Park Central Emergency Hospital near Golden Gate Park. The injured were evacuated to the Presidio's Post and General Hospitals in the far western portion of the city. The antiquated City and County Hospital, which had survived

relatively undamaged, was quickly overloaded with patients. Within a week, over 100 refugee camps were set up throughout the city and more than 40,000 people took shelter in Golden Gate Park, where improvised outdoor hospitals served the sick and wounded, and outdoor kitchens were set up to feed the public. The Affiliated Colleges, located in what was once the far western section of the city at the end of the Masonic streetcar line, were now much closer to the center of the San Francisco population.



San Francisco residents took refuge in a tent city in Golden Gate Park in 1906. The Affiliated Colleges are visible in the background.

In just three cataclysmic days, San Francisco reverted to that sort of civic chaos reminiscent of the gold rush days of the nineteenth century. With the help of the U.S. Army, a self-appointed Citizen's Committee of Fifty took on the task of managing the provision of sanitation, food, clothing and adequate shelter for the city's newly destitute and homeless population. Some medical care was available in the semi-permanent camps, where supervised sanitation, outpatient medical care, and tent hospitals were arranged. In the midst of this emergency, University officials quickly began to assess damages to the Affiliated Colleges and moved to meet the immediate needs of the University and its public. Six days after the quake, the Univer-

sity academic council met and formally ended the academic year. Students were to be passed or failed without examinations and women students were encouraged to return to their homes outside of the disaster area.

The California College of Pharmacy Responds



Drawing of the chemistry lab, pharmacy lecture hall, pharmaceutical lab 1910

Since it had consolidated its instruction in its building at Parnassus in 1899, the California College of Pharmacy suffered relatively minor damage, limited to cracked plaster, broken glassware, and ruined chemical supplies. Although instructional facilities had suffered little, the economic impact on the trustees and faculty was devastating, for hundreds of downtown drug stores were destroyed. Dean William Searby lost his flourishing Union Square Pharmacy and several other businesses, and he never fully recovered financially. Classes opened on time in autumn of 1906, and a faculty of eight professors, instructors and demonstrators taught courses in five laboratories. By this time Pharmacy's intact facilities included four floors measuring fifty by 150 feet, a lecture hall designed for an audience of 200 persons, and a large Garden of Medicinal Plants, which was "available for special research work on active constituents."

Reconstructing Dentistry's Clinical Facilities

The Dental Department's losses were far more severe, for all of its clinical instruction was carried out in the Donohoe Building near downtown. The entire clinical teaching facility that had recently been equipped with new chairs, fountain cuspidors, the prosthetic labs and furnaces, and a surgical amphitheater was reduced to charred rubble in the earthquake and the resulting fires. Meeting just three weeks after the disaster, the Dental Department's treasurer succeeded in compiling a "trial balance of \$22,803.01." Despite the fact that "all markings and records of students at the infirmary" were destroyed, the faculty compiled their existing data and recommended twenty-four students for graduation, thus bringing the session of 1905-1906 to a premature, but official end.

New Facilities at Parnassus

The Affiliated Colleges buildings had symbolized generous state support of ample facilities and educational reform. Preparing for the reopening of the Affiliated Colleges in autumn of 1906 was difficult because for the first time the consolidation of outlying facilities created compression at Parnassus. In the months following the earthquake, as the Dental Department combined all of its instructional programs at Parnassus, the inevitable problem of competition for space materialized.



Dentistry prosthetic lab at Parnassus; Post-earthquake Pharmacy instructional space: Microscopy lab, lecture hall.

The sudden destruction of Dentistry's entire clinical program in the earthquake and fire forced the faculty to consolidate its programs in the easternmost college building, which it shared with Pharmacy. Rooms that had housed spacious basic science labs and lecture rooms were refitted to make room for dentistry's labs, furnaces, and infirmary facilities. On the ground floor the chemical, metallurgical, dental technic and prosthetic labs were relocated, along with lockers, lavatories and furnace rooms. The second floor was dedicated to the bacteriology and histological labs, and lockers for women students; the third contained lecture halls, a faculty room, and a museum and library. To serve the urgent dental needs of the San Francisco refugees, the entire first floor was remodeled to house clinic facilities, including surgical and extracting rooms. Making use of the planned adjacent facilities of the medical school, dental faculty performed "the more serious operations" in the new University Hospital adjoining the college building. Unfortunately, these massive changes compromised Pharmacy's main lecture hall, an arrangement directly opposed by the Pharmacy faculty. In a revealing episode, President Wheeler stepped into the dispute and ruled that space would be made available for the needs of Dentistry.

Founding of the University of California Medical Center

Perhaps the most important lasting impact of the earthquake emergency was the creation of a dedicated University Teaching Hospital on the Parnassus campus, a facility designed to serve the public as well as to fulfill the instructional mandate of the University of California. President Wheeler's long-expressed wish for a teaching hospital at Parnassus had suddenly become an urgent civic responsibility. In May, just a month after the disaster, the medical faculty voted to solve the hospital problem, recommending that

the Board of Regents transfer the work of the Departments of Physiology and Anatomy and Pathology to Berkeley "in order that the college building may be devoted to the purposed of the clinical years." Anatomist Austin Flint wrote to Wheeler in 1907, "there can be no question that the atmosphere of Berkeley is pleasanter than the isolation of the city if one is interested in university work. … the work in Berkeley will be much more interesting than it was in the city and we look forward to living there."

Your committee recommends a grant of \$10,000 to be given immediately, and most strongly urges a further appropriation by the Finance Committee of \$100,000 as a fund, the income of which shall make possible a first-rate free hospital in San Francisco. Several members of the committee visited the building at the Affiliated Colleges which is now being converted into a hospital. ... The deplorable condition of the City and County Hospital, over-crowded as it is, renders it almost imperative that there be some such well-administered institution as the contemplated University Hospital would become under the management of the Well-known physicians who are interested in it."

- The Committee on Rehabilitation of Charitable Institutions, June 4, 1907

Creating the First UC Hospital



Operating room in the old UC Hospital, 1913.

Within weeks, the Regents approved the faculty appeal and appointed a Ways and Means Committee to raise funds for the building's conversion. Dean Arnold D'Ancona was appointed first director of the nascent teaching hospital. His correspondence for that period contains optimistic progress reports to the Regents, but also reveals the enormity of the task. Throughout 1906 and spring of 1907 he records the acquisition of litters, ward carriages, steam heat boilers and radiators, anesthetics, disinfectants, drugs, fuel, gauze, cotton, crockery, glassware, bed linens and towels. Anticipating the day when the University would take over hospital expenses,

he developed an accounting system for nursing, housekeeping, telephone, water, x-ray equipment and lab instruments.



Men's ward in the old UC Hospital, Medical School Building at Parnassus, ca 1915.

Conversion to a fully functional hospital was a monumental architectural shift for the medical school building, which had only recently been remodeled to suit the basic science teaching needs of the Departments' three new fulltime faculty, now at Berkeley. To take advantage of the north light, an operating room with rooms for anesthetizing, sterilizing, and x-ray apparatus, were located on the third floor, where histology labs had once been sited. Dean D'Ancona worked diligently to create an obstetrics ward, and soon after, a six-bed pediatric ward was arranged within the hospital as well as a specialized newborn nursery under the direction of pediatrics. The second floor was

equipped with separate men's and women's wards of fourteen to fifteen beds each for medical and surgical needs. To replace the city's decimated outpatient facilities, the entire ground floor of the Medical building was opened by October 1906 as an outpatient clinic.



Medical students joined student nurses in the Pediatrics Ward in the old UC Hospital, 1912.

The variability of recorded founding dates for the hospital reveals the haste and improvisational nature of its creation. D'Ancona had intended to have the hospital opened for patients by the University of California's Charter Day celebration in March 1907, but the actual date of opening was sometime in mid-April, just a year after the earthquake. Records reveal three different accounts of the opening of the hospital and the arrival of the "first" patient. Collectively, the response to disaster resulted in the construction of a new "idea and ideals of the teaching of medicine and the care of the sick on the Pacific Coast," in the words of the California State Journal of Medicine in 1907.

The Medical School building at Parnassus was refitted to house a 75-bed teaching hospital in 1907. Donors were assured that "the maintenance of this hospital will do much for the care of the sick poor, but far more for the advancement of scientific medicine in this state...."

Founding the UC Hospital Training School for Nurses



The Medical School building at Parnassus was refitted to house a 75-bed teaching hospital in 1907.

Arguably, in the long term, the most significant change prompted by the earthquake emergency for the University's Affiliated Colleges was the development of a University of California Training School For Nurses in connection with the new teaching hospital. This educational venture would eventually result in the permanent creation of a fourth professional school located at Parnassus.

By 1900 San Francisco had several nurses' training schools that set precedents for nursing education on the Pacific Coast. As the hospital was being outfitted, the medical faculty committee on hospitals authorized D'Ancona to recruit graduate nurses and attendants. Orthopedic Surgeon Dr. Harry Sherman

and other enthusiastic medical faculty selected Miss Margaret A. Crawford, a highly regarded graduate nurse from the St Luke's Hospital school, to direct both the training school and nursing services in the UC teaching hospital. Although formal regential approval for a training school for nurses was not announced until December of 1907, well after the hospital opened for patients, the first student nurse entered in June of 1907, and two more trainees arrived in September and December.

Announcement of creation of the Training School in the SF Chronicle November 13, 1907; The California Nurses Association had organized in 1903 and by 1905 they had secured passage of a licensing law for registered nurses. Dean D'Ancona seemed well aware of the problems of exploitation in many of the first training schools, where students were seen as a source of free labor and were barely given time for coursework or supervised hands-on instruction. A minor conflict over the planned term of instruction arose in 1907, when the activist nurses of the California Nursing Association lobbied for a three-year course requirement for registration eligibility, while the UC physicians preferred a two-year course. In consultation with the faculty's Committee on the University Hospital, the Dean outlined a curriculum of 24 months of "active practical work, with a probationary period of three months" Anxious to reassure the nurses that there was no



Announcement of creation of the Training School in the SF Chronicle November 13, 1907;

intention of short-changing the new students, he emphasized that, "the faculty considers that in the conduct of the training school the university should follow the same ideals and purposes that guide all other departments of the University." A third year of instruction was incorporated officially in 1909.

Miss Crawford's high standards for selecting UC nursing matriculants, sometimes created difficulties, but there is evidence that faculty and the dean yielded to her judgment of the potential character and stamina of nursing students. Applicants for admission had to provide proof of high school graduation, a letter of character from family clergyman, and a letter of good health from family physician. A distinctive feature of the UC Hospital's policy with respect to nursing labor was the hiring of graduate nurses to supervise key departments in a higher proportion to other nursing schools in the city or in the nation. This seems to be correlated with the faculty's desire to create an exemplary teaching facility, staffed adequately with graduate nurses, and their reluctance to rely chiefly on untutored student labor.

"it is with some regret that I have come to the conclusions that in the main, training schools for nurses have been est. to meet the convenience of hospital and lessen their expenses, rather than for the purpose of training qualified nurses. The training school of our hospital should be conducted for the purpose of preparing a given number of nurses for an honorable professional career, and to provide the public with thoroughly qualified nurses....the nurses should be so trained that...they will look upon their profession as a means of social service."

- Dean Arnold D'Ancona



Dean Arnold D'Ancona awarding diplomas at the first graduation ceremony in 1910

In spring of 1910 the Training School held its first formal graduation ceremony, with Dean D'Ancona enthusiastically presenting diplomas to the handful of new university-trained nurses.

In the first two years Miss Crawford shouldered the burden of instruction, using a text in practical nursing to guide her students, and key Medical Department faculty, including Drs. Sherman, Moffitt, and a young surgical resident named Howard Naffziger taught evening lectures. Other changes within the training school were determined by external forces. California's 1913

labor law mandating an eight-hour day for student nurses prompted Dean Moffitt to budget money for hiring more graduate staff nurses and to plan for an increased number of students, in an effort to maintain an adequate ratio of nurses to patients.

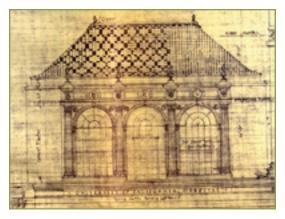
Dean Herbert C. Moffitt's Influence

In 1913 Dean Arnold D'Ancona retired to serve on the San Francisco Board of Education and Herbert C. Moffitt became Dean of the College of Medicine. A Harvard graduate with postgraduate training in Vienna, Moffitt had served on the faculty since 1889 as professor of the Principles and Practice of Medicine. During his time at UC, he became known as the leading physician on the West Coast and was a much-beloved mentor to his early twentieth century students. His businessman brother James K. Moffitt became a regent of the University in 1911, and occupied a chair on the Board for 37 years, exerting great influence on behalf of the Parnassus campus throughout his long period of service. James Moffitt's presence on the UC Board of Regents created a powerful impetus for keeping San Francisco as the essential location for the medical school, and in 1916 the Regents commissioned Dean Herbert Moffitt to study medical education around the county and to draw up a plan for



Dean Herbert C. Moffitt and Hooper Researcher William J. Kerr (later the first full-time Professor and Chair of Medicine) pose on Parnassus Ave.

future development of a reconsolidated Medical School at Parnassus.



Architectural drawing of UC Hospital

Moffitt's ambitious plan, drafted at the same time that he was fundraising and planning for a new UC Hospital building, recommended that new buildings to house anatomy and pathology be built in back of the new hospital at a cost of \$150,000. To house physiology and biochemistry and the requisite student labs, he urged that the old Medical School building be refitted for laboratory instruction and that the outpatient facilities located in the basement be removed to a new building to be erected for this purpose in front of the UC Hospital on Parnassus Avenue. A second phase of his plan would "remove the

Dental and Pharmacy Schools, and transform...[the building]...into laboratories suitable to the needs of the state departments of Hygiene, Pure Foods and Sanitary Engineering." With the exception of the nurses' dorm built across the street from the hospital in 1919, little of Moffitt's plan ever came to pass, but it identified the potentially controversial and conflicting space requirements and shifting priorities that would plague the Parnassus campus for the remainder of the century.

Once the first UC hospital in the medical school building was up and running, its limitations became all too apparent. D'Ancona's optimistic reports to the Regents on the progress and ease of converting the building were complicated by the actual difficulties of patient care in a three-story building with no elevators. Flexner had reported in 1910 that the hospital was "small, but adequate" and was doubtless made aware that the Regents and the Faculty had long been working on plans for a much larger facility. Almost from the opening day of the first hospital, medical staff began planning for a new building to be built as had been originally designed as an elaborate pavilion plan backing up to the Sutro Forest. A special Regent's committee was appointed to plan for financing and building a new hospital in 1913, and active fundraising began under the direction of the Medical Department's popular Dean, Herbert Moffitt. Secure in his community connections, Dean Moffitt initiated a successful private fund drive to raise \$750,000 to build a new UC Hospital at the west end of the Affiliated Colleges site.



"Modern" operating room in the new UC Hospital, 1924.

In January 1914 President Wheeler announced to the regents that planning could begin on the new hospital and in 1915 they appointed Louis Parsons Hobart as architect for this projected new hospital. Hobart, a leading architect in the Bay Area, also designed Grace Cathedral, the California Academy of Sciences, and Steinhart Aquarium. Construction proceeded with much anticipation and delay but by August 1917 the new 225-bed hospital was ready for occupancy.

The Medical School Building, which had housed the first hospital for a decade, was refitted as an extensive outpatient department; basic science instruction remained on the Berkeley campus; and fulltime clinical professors finally had a fully adequate infrastructure to support their academic ambitions.

A Divided Campus: Berkeley and San Francisco

Within twelve months of the near total destruction of the city of San Francisco, the Affiliated Colleges had restored and improved their instructional programs and converted the Parnassus campus into a clinical center. For the first time a full-service dental infirmary, a complete outpatient department, the College of Pharmacy-supervised drugstore, and a functional 75-bed teaching hospital provided service to the community from a centralized location along Parnassus Avenue. The hospital, staffed by graduate nurses and nurses in training, provided services in obstetrics, gynecology, pediatrics, medicine and surgery and was fully ready to "accommodate all of the cases of the kinds that medicine and surgery can benefit." The next challenge to the newly formed "medical center" came in the form of Flexner's scrutiny on behalf of national reform in medical education.



UC Berkeley (left) and San Francisco (right) were two "severed" campuses training medical students from 1906-1958.

To cap San Francisco's turbulent first decade of the new century, just two years after the makeshift UC hospital had been pressed into service, and the basic sciences removed to the Berkeley campus, Abraham Flexner visited the Medical Department of the University of California as part of his extensive investigation into the conditions of medical education in the United States.

In his report, which was published by the Carnegie Foundation for the Advancement of Teaching the following year, Flexner listed the UC Medical Department among the top sixteen institutions already requiring two years of college work for admission, but he expressed reservations about the odd split between preclinical instruction at UC Berkeley and clinical instruction at San Francisco

Reform of Clinical Instruction: Fulltime Chairmen

In 1910, in his biennial report on the affairs of the University to the governor of California, Wheeler reaffirmed Dean D'Ancona's (and Flexner's) point of view regarding the need for full-time clinical instructors. He declared that "the needs of education in modern scientific medicine demand that all members of the teaching



University President Benjamin Ide Wheeler led a failed attempt to merge with Stanford in 1914

staff, whether of the first two years or the last two years, shall have a philosophical point of view, a scientific method, academic ideals and



Dean Arnold D'Ancona

enthusiasm in the pursuit of truth. If the teachers are not themselves investigators, the students will be mere artisans in medicine." Wheeler went on to identify the most urgent needs of the Medical Department: (1) establishment of a well-equipped dispensary in a suitable location, (2) organization of the university hospital on a permanent basis, and (3) a plan of placing clinical departments on a full-time academic plane. President Wheeler's interest in developing full-time teaching positions in clinical instruction at Parnassus prompted the hiring in 1912 of a full-time professor of Obstetrics and Gynecology. The following year Dr. William Palmer Lucas was recruited to a full-time clinical chair in Pediatrics.

- "... the needs of education in modern scientific medicine demand that all members of the teaching staff, whether of the first two years or the last two years, shall have a philosophical point of view, a scientific method, academic ideals and enthusiasm in the pursuit of truth. If the teachers are not themselves investigators, the students will be mere artisans in medicine."
- UC President, Benjamin Ide Wheeler

The name of Medical Department of the University of California was changed to the University of California College of Medicine in 1912, and by 1915 it was designated officially as the University of California Medical School.

Basic Science Instruction for Pharmacy and Dentistry Unlike medical students, who took all of their first two years of instruction in preclinical and clinical sciences at Berkeley after 1906, basic science courses for dentistry and pharmacy students were taught in well-equipped lecture halls and labs in the Dentistry/Pharmacy building. In 1903 Albert Schneider, M.S., M.D., Ph.D. was recruited to the College of Pharmacy from Northwestern University to teach microscopy, bacteriology and histology of Food and Drugs. He also taught courses in Pharmacognosy and advanced pharmaceutical bacteriology, using four textbooks that he had written. Basic science faculty traveled from Berkeley to Parnassus to present lectures and supervise laboratories. From 1906 on, Franklin T. Green, a Berkeley faculty member in physiological chemistry, taught



William Palmer Lucas created the Department of Pediatrics at UC in 1913 and became one of the first full-time professors at the UC Medical School.

chemistry to pharmacy students. He became Dean of the school of pharmacy in 1909 and served for nearly two decades as dean and principal professor of chemistry for the college. Arnold D'Ancona taught physiology to dental students until 1909 in addition to his duties as Dean of the Medical School and director of the first hospital. Henry Benjamin Carey, B.S. MD, was a significant and versatile faculty presence at Parnassus for both Dentistry and Pharmacy from 1907 until the mid 1920s. He began teaching in the College of Pharmacy as professor of vegetable organography, materia medica, and pharmacognosy, and in 1907 he served the Dental Department as instructor in materia medica and therapeutics. Throughout the next decade he taught anatomy and physiology to pharmacy and dental students.

The Hooper Foundation

Meanwhile, as the academic basic science departments developed infrastructure on the Berkeley campus, a new research institute, second in size only to New York's famed Rockefeller Institute, was founded on the Parnassus campus.

The Hooper Foundation for Medical Research opened in 1914 supported by a generous endowment provided by the widow of George W. Hooper, a San Francisco lumber



The Hooper Foundation was housed in one of the original Affiliated Colleges buildings, to the rear of the School of Pharmacy building.

merchant and philanthropist. The Hooper's first Director, George Whipple, conducted significant research in metabolism and epidemiology, eventually winning the Nobel Prize in Physiology or Medicine for his work on pernicious anemia, much of it conducted at the Hooper. Medical students were granted certain fellowships to participate in research, but little of the research focus affected the clinical curriculum that dominated the final two years of Parnassusbased medical education. Eventually, the San Francisco research location mandated by the Hooper Foundation became another strong argument for maintaining the UC Medical School in San Francisco rather than Berkeley.

Public Health Concerns and the Affiliated Colleges

Progressive reform flourished in the West, as San Francisco rebuilt after the earth-quake and prepared to advertise itself as a gateway city in the Panama Pacific exposition. In 1906 the Civic League of Improvement Clubs was organized to rebuild San Francisco as "a beautiful and modern sanitary city." One of the most appealing features of Progressive social reform was the reliance upon scientific expertise and efficiency through the public health movement, and San Francisco was no exception.

As the science of bacteriology became more sophisticated, the role of human carriers in diseases like diphtheria, tuberculosis, typhoid and venereal disease became a major focus of prevention. San Francisco had one of the highest rates of tuberculosis in the nation, and citizens organized along with health officers, creating voluntary associations to help fight the disease by enforcing anti-spitting ordinances and opening a tuberculosis clinic. In the early twentieth century, the UC Medical School took the lead in diagnosis and treatment of syphilis, utilizing the Wasserman Test, and Dr. L. S. Schmitt pioneered the use of Salvarsan in a special clinic at Parnassus. City physicians like Dr. Adelaide Brown became active in campaigns to provide clean milk, sanitary garbage disposal, and to enhance maternal and child welfare through visiting nurses services.

The extreme disruptions of the 1906 earthquake and fire refocused professional and public attention to the needs of the public's health. Bubonic plague appeared in the city

in 1907, and officers from the U.S. Public Health Service worked alongside local health officials, isolating patients, cleaning up filth and rubble, and trapping rats in an effort to control the spread of the disease by rat fleas. The outbreak produced 77 deaths out of 159 cases, a 50 percent fatality rate, but a major epidemic was halted, and in 1908 the decrepit rat-infested buildings of the city county hospital were burned to the ground. County patients were re-housed in horse stalls at the Ingleside race track and the city drafted plans to build a new City and County Hospital.

Preventive Hygiene and Dentistry

The popularity of public health concerns also had an impact on the College of Dentistry, which had long been concerned with providing dental care for the city's indigent population. The disruptions of the earthquake reinforced this tradition of assessing and treating the dental needs of all the city's inhabitants. One of the school's more famous graduates was M. Evangeline Jordon, who graduated from UC Dental Department in 1898 and developed the specialty of pedodontia, at a time when the care of children's teeth was not a professional priority. In the early twentieth century, she actively taught and did research, developing programs in dental care for pregnant women and children. She characterized dental caries as a disease of childhood, connected it with bottle-feeding, and wrote, "Rid the country of the deadly candy shop and grocery store, get most of your living from the vegetable garden and the family cow, and apply the teaching of oral hygiene." In 1915 she presented a paper on oral hygiene at the Panama Pacific Exposition and remained active in organized dentistry throughout her career.

The most visible leadership in dental public health at the University of California came from Guy Milberry D.D.S., a 1901 UC dentistry graduate who joined the faculty as an assistant in chemistry and metallurgy in 1907, and became Dean in 1914. He was present when the dental infirmary was established at Parnassus after the earthquake and in early 1909 he outlined a series of cooperative plans for an "out-clinic" at the Relief Home for the Aged and Infirm for patients who could not access the new dental facilities at Parnassus. Making use of older dental chairs and gathering surplus materials, he arranged for junior students to do simple extractions and vulcanite dentures on a gratuitous basis.



Guy S. Millberry

As the role of bacteria and nutrition in dental caries was debated, the field of dental hygiene emerged. In 1918 Guy S. Millberry created a one-year course for dental assistants and dental hygienists, one of the first in the nation. The program was increased to two years of instruction by 1924.

Public Safety and the Reform of Pharmacy Education

"...there is from east to West a more urgent demand than ever before for well-educated and well-trained pharmacists. Employers are looking for men who have a college education, and the supply is not equal to the demand. Furthermore, the national and state pure food and drug laws call for such constant care in the making of pharmaceuticals, such vigilance in the examination and testing of drugs and chemicals, that no drug store can be considered properly equipped that has not in it at least one person who is capable of applying the tests of the Pharmacopaeia.Pharmacists must adjust themselves to public sentiment, and the public expect reasonably pure drugs and medicines and reasonably competent persons to manufacture and dispense them."

- (Bulletin 1907-1908)

One of the most emblematic legislative initiatives of Progressive reform at the federal level was the passage of the Pure Food and Drugs Act of 1906, which sought to protect consumers from dangerous, adulterated, and mislabeled or contaminated food and drugs. This brought a unique focus to the pharmacy profession and a direct mandate for more sophisticated chemical analysis in the early twentieth century. At the inaugural meeting of the California Pharmaceutical Society in 1869, a major agenda item concerned the need to "prescribe the manner of dispensing poisons." In 1891 the State Board of Pharmacy was established to regulate pharmacies and the sale of poisons and narcotics, requiring warning labels and a sales registry.

The pharmacy curriculum had included courses in toxicology in its earliest curriculum, and pharmaceutical chemistry was considered a basic preparation for its graduates. After 1906, a special course was added on "Histology of Food and Drugs" to include microscopical examination of "food products and drugs and their more common adulterants." This course was designed "to better prepare the student to meet the demands of the Pure Food and Drug Law. Similarly, bacteriology was expanded to include study of "microbic contaminations of pharmaceutical preparations of water, of foods, etc." A full

course in Pharmacal Jurisprudence was also added by 1910. The course was intended to present, "the trend of recent legislation affecting the pharmacist," including liability issues and "pure food and drug decisions." By 1914, the school provided "special advanced instruction" for students "seeking to qualify themselves to serve as examiners under the Pure Food and Drugs Laws."

Nursing and Public Health

The ethos of the new public health was an explicit subject in the nursing curriculum of the early twentieth century. The rhetoric of the early UC nursing bulletins reveal a ubiquitous concern with the social environment of patient care, even in routine bedside training. During four months of outpatient work, students "not only learn[ed] to handle large numbers of ambulatory patients, but... gain [ed] an insight into the social problems of the poor." Maternity instruction included "deliveries in homes and complete social studies of these cases." Work in public health nursing included field assignments in Juvenile court, work with the city's active Society For The Study And Prevention Of Tuberculosis, and opportunities in industrial and workplace medicine. Coursework included "The Control of Poverty" and work within the Medical School's social service department included training in vital statistics, milk inspection, foster home work, and contagious disease nursing.

War and the Affiliated Colleges



American medicine organizes for war. Base Hospital #115, Special Head Hospital, August 7, 1918.

After months of "Preparedness," on April 4, 1917, President Wilson asked for a declaration of war on Germany. The School of Medicine was quick to respond, and within

days of the declaration the faculty submitted a proposal for the school to participate in the national defense. They envisioned the organization of a Red Cross unit as a mobile base hospital with fourth-year medical students assigned to it for instruction, and began drilling as early as June of 1917. Recent graduates in the classes of 1915 and 1916 were urged to join the Army, Navy, or Reserves. Dentistry, Medical, and Nursing faculty, as part of Base Hospital Thirty, were eventually sent to south-central France to care for the wounded. There they treated hundreds of wounds and gas injuries, and witnessed the beginning of the influenza pandemic among the troops. In all, 35 officers, 765 nurses, and 150 enlisted men served in the Thirtieth. In early 1917, the College of Pharmacy recorded the call of several pharmacy students "to the colors", and Chemistry instructor James N. Patterson was drafted into the army. Major F. Dowdall, a veteran of the Spanish American War was recruited to the pharmacy college faculty as instructor in first aid and military hygiene. Eventually an estimated 38,000 physicians served in the military, along with 5600 dentists and approximately 16,000 trained nurses.



UC nurses, World War I, Base Hospital # 30

The armistice of November 11, 1918 came just as the nation was in the midst of the great Spanish Influenza epidemic of 1918. The epidemic struck San Francisco in September and health officials, drawing upon their experience after the earthquake and fire, organized the city into health districts, recruited drivers and volunteers and set up emergency hospitals in advance of the epidemic. Citizens were told to "wear a mask and save your life!" Nurses were in high demand, and the UC training school cancelled classes and placed everyone on twelve-hour duty, sending nurses to other locations as needed. The epidemic peaked again in late December and in all, an estimated one in eleven persons contracted the disease in the city of San Francisco; at least 3500 died, and the disease was most fatal for people between twenty and forty years old. The national death toll was estimated at 500,000 to 700,000, more than ten times the combat death toll of 50,000 for American servicemen. In May of 1919 members Base Hospital

30 returned to the Presidio, were demobilized and came back to the Affiliated colleges. They had missed the flu epidemic in their home city, but had witnessed its ferocity among troops and medical personnel in France. With the strain of wartime and the epidemic emergency over, the affiliated colleges settled into a new decade, moving into an expansive future as a collection of professional schools, that would eventually constitute a modern medical center.



UC doctors headed off to war, to serve in Base Hospital #30. Left to Right: William J. Kerr, Herbert C. Moffitt, Howard C. Naffziger

1919-1939

The Formation of Schools and the Rise of Clinical Instruction

Debates over Medical Education

In the postwar years, as the nursing school flourished and strengthened its ties with Berkeley academics, university and medical school officials again turned their attention to the problem of the split medical school. Their interest was prompted by rumors that the General Education Board, an organization backed by Rockefeller philanthropy and committed to rebuilding American medical education, wished to endow a school of public hygiene at Berkeley, on par with those already created and endowed at Johns Hopkins and Harvard. As part of this plan, they indicated that they would financially assist the UC Medical School in upgrading instruction and reconsolidation. The main requirement of the Rockefeller donors, however, was that the UC Medical School be relocated at Berkeley in close proximity to established academic programs in anatomy, bacteriology, immunology, and biochemistry.

In 1920, University President David P. Barrows, who was anxious to meet the criteria for this potential multi-million dollar donation, traveled east to speak with the Rockefeller board members in person. In consultation with Abraham Flexner himself. President Barrows was succinctly reminded of the current reforms deemed necessary in medical education. This was a time in American medicine when substandard schools identified in the Flexner report were rapidly being closed and the remaining institutions were realigning themselves according to Flexner's blueprint for reform. The UC Medical School's plight was not unique--the report indicated that of twenty-five top university-affiliated institutions, five (Rush Medical College, California, Nebraska, Kansas, and Stanford) had similarly separated instructional programs. Flexnerian reforms mandated the



David P. Barrows

implementation of salaried full-time positions for both scientists and clinicians, consolidation of science and clinical instruction in one geographical location near a major university, and designation of a large teaching hospital completely dedicated to clinical training. In response to these requirements, President Barrows drafted a plan for bring-

ing full-time "vocational" professors to the medical school, consolidation of instruction in one place, and reconfiguration and expansion of the UC Hospital teaching bed capacity along with plans for a school of public health. He then asked the Regents to develop a budget corresponding to these reforms, hoping that in so doing he would secure "the generous participation" of the General Education Board.

As he managed these negotiations, President Barrows was well aware of the local political obstacles to relocating the school at Berkeley. By the early 1920s there were substantial reasons for keeping the medical school in San Francisco, especially in terms of the city's potential as an inexhaustible source of talented practitioners and patients. Moreover, the medical school's major endowments of the late nineteenth and early twentieth centuries dictated a commitment to the Parnassus site. Sutro's donation of land for the Affiliated Colleges in 1895 was contingent on the use of the site expressly for professional medical education, and the Hooper Foundation specified that Hooper-funded research be conducted in San Francisco. Then in 1917, the new UC Hospital was built with \$750,000 of private subscriptions from a supportive San Francisco community. President Barrows hoped that the Regents might solve the problem and bend to the wishes of the



Page from The Blue and Gold in the 1920s showing University President Barrow's office

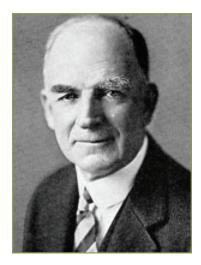
General Education Board, or conversely, that the General Education Board might be flexible on the issue of the school's actual location.

On March 12, 1921, in a move reflecting local politics and the lobbying influence of San Francisco clinicians, the UC Regents voted to reaffirm their 1912 decision, stating flatly that "as a prudential measure. . . . it shall be the policy of the Board to consolidate the medical department in San Francisco." That summer the General Education Board received the UC proposal for consolidation at San Francisco and never replied. It was clear that consolidation of the medical school would have to take place at the university campus in Berkeley in order to satisfy the terms of a Rockefeller endowment.

This was a major loss for California higher education: Rockefeller money was transforming the national landscape of medical education in the interwar years and would eventually provide over \$50 million to sixteen medical schools. Philanthropy came from other sources as well. Between 1910 and 1932 foundations would pour a total of

\$150 million into the reform of American medical education. The Regents' stubborn adherence to the San Francisco location prevented UC School of Medicine from obtaining national philanthropic financial support during this time of flush private endowments.

The matter of the Rockefeller endowment surfaced again in 1923, when the incumbent UC president, astronomer William W. Campbell, made a last forceful attempt to resolve the medical school situation, which he regarded as "the University's largest and most difficult problem." Like Barrows before him, President Campbell traveled east to confer directly with Abraham Flexner and the Rockefeller board, and discovered that, although the donors' offer of endowing a school of public health at Berkeley was still on the table, they would not assist the medical school if it remained in San Francisco. On the other hand, if the Medical Department was consolidated at Berkeley it was clear that the Rockefeller interests would be "instantly and tremendously interested in its financial problems." President Campbell delivered an ultimatum to the regents in 1 argu-



William W. Campbell

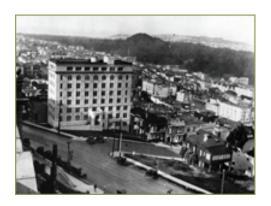
ing that "the Berkeley location of the medical school would tend to make it a statewide institution, in greater degree than it is today, and it would bring many millions of help from outside the State." He emphatically pointed out that "if the location is to remain in San Francisco, then I respectfully represent, the regents should be prepared to find in San Francisco or elsewhere, very soon, many millions of dollars for the consolidation expansion and maintenance of the Medical School and Hospitals."

Once again, the Regents stood firm for the Parnassus location, sealing the fate of the UC Medical School for the next three decades. Despite their stubborn rejection of an all-Berkeley medical campus, the Regents did respond to President Campbell's call for dramatic reform at the medical school and joined him in mobilizing state resources to accomplish the task

Developments in Nursing Education

On November 19, 1917, just a few months after the opening of the new UC Hospital, University President Wheeler announced a five-year nursing baccalaureate degree which included two years of university work at Berkeley, followed by three years of training in the UC Hospital. The ideal

of a nursing baccalaureate was a welcome development, but its appearance at this time was a top-down decision made by a committee composed primarily of Berkeley faculty and Parnassus physicians. In late 1917 Hospital superintendent H.T. Summersgill protested the timing of the new program, in a letter revealing the realities of wartime depletion of medical personnel on the homefront. He feared an unmanageable increase in the student body, given the loss of many supervising nurses and teaching physicians due to wartime staffing, as well as the lack of proper accommodations for nursing students. Despite these objections, the Academic Senate approved the baccalaureate nursing program on March 1, 1918. By mid 1918 superintendent Summersgill left and was replaced by Dr. William E. Musgrave, who had been superintendent of Children's Hospital, and was a well-known supporter of nursing education. At the same time, Louise Morrow, a pediatrician with training in social economics from Berkeley, took over as director of nursing for both the training school and hospital. Dr. Morrow held a concurrent position as Chair of the Medical School's department of Social Service until 1921 and she helped link the training school intellectually and academically with the school of medicine. Another crucial nursing faculty appointment occurred in autumn of 1918 when Edith Bryan, a nurse from Pasadena Hospital, was named by the Regents as assistant professor to create the public health nursing program at Berkeley. She effectively developed the certificate program from a summer session into an impressive and popular eight-month academic year program. In the mid-1920s she took a leave and completed a Master's and Ph.D. in psychology at Johns Hopkins. Not only was she the first nurse to be appointed to the university faculty, she was the first American nurse to earn a doctoral degree. Her influence and her competent direction of the public health



<u>Aerial view showing the nurses'</u> <u>dormitory</u>

certificate program became an important factor effectively linking the Parnassus based nurses' training school with Berkeley's departments of Hygiene and Social Economics.

The immediate postwar years saw the permanent establishment of the five-year baccalaureate program, with students from Berkeley, Mills College and the College of the Pacific matriculating for their clinical nurses training at Parnassus. The public health certificate program was continuously enhanced and elaborated by Edith Bryan, who remained director of the program in the Department of Hygiene until 1933.

Although upgrades in curriculum served as evidence of the growth and maturation of the training school for nurses, the most visible enhancement came in the form of the long-awaited completion and occupancy of a seven-story nurses dormitory building across from the UC Hospital at 610 Parnassus.

As negotiations among two UC Presidents and medical faculty at Berkeley and Parnassus continued unsuccessfully and somewhat acrimoniously in the 1920s, a remarkably different story of cooperation between campuses evolved in the training school for nurses. The name of the school itself reflected this shift in focus. The "University of California Hospital Training School for nurses" officially became the "University of California Training School." In 1922 Mary May Pickering,



Mary May Pickering

a graduate of the Massachusetts Hospital training program, was appointed Director of the Training School and Superintendent of Nursing. In a series of subtle policy shifts during the 1920s she successfully aligned the training school with the University in several ways involving curriculum, governance, and academic schedule. Admissions requirements for nursing students had required a high school diploma from the school's beginnings, and under Pickering's direction, requirements began to resemble University admission standards. In 1923 Miss Pickering persuaded the Academic Senate to review the training school curriculum, thus placing the school directly under the supervision of the University rather than solely the Medical School. Over time, the training school's advisory board shifted in composition towards a greater ratio of Berkeley faculty to Medical School officials. In a final important change, the University's term schedules and letter grading system were adapted to the training school years. An important symbolic incident occurred in 1923 when nurses were formally invited to participate in the UC graduation ceremony at Berkeley. While strategically steering the training school, Miss Pickering also maintained an active role in the nursing profession, serving as editor of the Pacific Coast Journal of Nursing. She also supported the Training School's membership in the Association of Collegiate Schools of Nursing, representing UC at the founding of the Association in 1934.

Another important Berkeley landmark for nurses' training in California occurred in 1925 with the creation of the Foundation in Nursing Education with funds accumulated from the Bureau of Registration of Nurses. In a remarkable show of cooperation, nurses secured legal advice, and introduced a legislative bill appropriating funds to the Univer-

sity of California to create a chair in Nursing Education in the Department of Hygiene at Berkeley. The governor signed the bill on May 23, 1925 and in 1926 an advisory committee worked on recruitment and curriculum. On January 1, 1927 the committee appointed Miss Pickering professor of nursing education at Berkeley. Thus, while the matter of the split medical school assumed the proportions of an all-out feud throughout the 1920s, the UC Training School for Nurses was by far the most successful of all the affiliated colleges in maintaining productive, harmonious connections between academic and clinical training at Berkeley and Parnassus.

UC Dentistry



School of Dentistry class of 1923

In the years after World War I, the field of dentistry became increasingly committed to educational reform. Nationally the immediate cause for concern was the proliferation of proprietary dental schools, unconnected with universities, which were turning out graduates with diplomas, but limited skills. Although the dental department had formally affiliated with the University in 1907, UC funds did not sufficiently subsidize the costly technical curriculum and numerous instructor salaries. The administration of the college still depended on fees generated by tuition, and enrollments grew to their highest level in the college's history. In 1918-1919

182 students were enrolled, while in the postwar 1920s enrollment steadily rose: 1919-1920: 230; 1920-1921: 337; 1921-1922:393; 1922-1923: 462, leveling off in 1923-1924 at 448.

"The work of the School is greatly handicapped not only by the inability of the teachers of the medical sciences at Berkeley, twelve miles distant, to cooperate in the instruction of dental students, but also by the unconcern for the correlations between clinical medicine and clinical dentistry in the instruction of medical and dental students, which seems to be shared equally by the Medical and Dental Schools."

- Gies, Dental Schools in the United States, p 272

Well before World War I, the Flexner Report exposed severe deficiencies in American medical education, prompting extensive reform. In 1922, the Carnegie Foundation commissioned a similar report on the status of American dental education. Published in 1926 as the Gies report, the study was conducted by William Gies, a Columbia biochemistry professor who had founded the Journal for Dental Research in 1918. He recognized that of all the health professions, dentistry had the closest correlation with medicine, and thus shared its achievements and problems. Consequently, his report also briefly evaluated the medical schools connected with the dental schools that he encountered. Like Flexner before him, Gies was disturbed by the medical school's geographic split between basic science on the Berkeley campus and clinical instruction at San Francisco, noting "this condition prevents effective cooperation between the school of Medicine and the College of Dentistry in teaching the medico-dental subjects to students of dentistry." He further found that this separation was carried over to the clinical environment at Parnassus, where "teachers of medical subjects did not give dental students instruction in clinical medicine; teachers of dental subjects did not give medical students instruction in clinical dentistry."

Gies traveled to the University of California in April of 1922 and conferred with dentistry Dean Guy S. Millberry to do a complete survey of the university's dental college. He described a school housed in the Dental/Pharmacy building utilizing 39,200 square feet of space that contained an impressive dental infirmary with 128 chairs and special facilities for children, oral surgery and roentgenography. He noted approvingly that the college had its own library containing 3800 bound volumes related to dental subjects and was supervised by a full-time librarian. In another positive note, he acknowledged Millberry's program intended to "create a demand for good dental service" by placing "dental graduates in various institutions, including public schools ... teaching hospitals...and institutional clinics of various sorts."

From his report, it is evident that Dr. Gies was both impressed and irritated with the UC College of Dentistry's program. On one hand the college's highly coordinated research program "is the most comprehensive investigation now in progress in dentistry." He noted that a special fund for the promotion of dental research had been set up by the University in which five-year grants from the American Dental Association and the Carnegie corporation were matched by the University Regents. With the collaboration of dental faculty and the warden of San Quentin, in 1924-1925, a dozen research programs were in progress: studying the effects of nutrition and the etiology of dental caries, anatomical studies of the salivary glands and radium therapy in oral cavity infections. Ongoing studies included the relations of bacteria to gum disease, the "presence and possible role of anaerobic bacteria in dental infections", and various microbiological and nutritional studies of pyorrheic inflammation in trauma, scurvy and Vincent's angina."

On the other hand, despite the existence of these well funded, pioneering research projects, Gies bemoaned the fact that UC College of Dentistry was "the only dental school in a state university that continues to base its DDS curriculum directly on a high-school education." Characterizing this matter as "an extreme educational disparity between the Medical and Dental schools", he continued to advocated preparatory program of four years high school and two years college, with three years training program in dentistry as the optimum. He complained that "the University of California exacts very high academic requirements for admission to the study of medicine, but adheres to the lowest for dentistry."



Guy S. Millberry

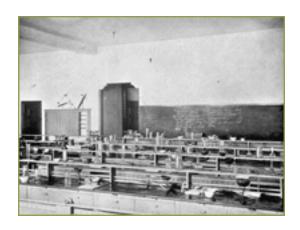
A versatile and able Dean, Guy Millberry pursued reform in the area of admissions requirements and by 1929 college work was established as a fixed pre-dental requirement at the UC College of Dentistry.

UC Pharmacy

The 1920s was a decade of ferment for Pharmacy education. In a speech in 1915, Abraham Flexner had declared that pharmacy was not a profession, stating that while the physician "thinks, decides, and orders; the pharmacist obeys—obeys of course with discretion, intelligence, and skill-yet in the end obeys and does not originate." The collective profession was stung by this public assertion as well as pharmacy's disappointing experience in the First World War —pharmacists were not considered officers and the army trained its own enlisted men to dispense medications. In the postwar period, the need for professional recognition prompted leaders to develop a study of pharmaceutical education similar to the Flexner and Gies Reports. They looked to the Carnegie Foundation for assistance, and eventually commissioned a study of pharmaceutical curriculum with support from the Commonwealth Fund. This work, published in 1927, recommended a four year B.S. curriculum and its author argued that pharmacy was a profession because the materials used were "dangerous and require ultimate acquaintance with the fundamental sciences upon which the art depends."

Throughout the 1920s, the faculty and trustees of the California college of pharmacy

participated in a general upgrading of the curriculum, sending annual delegates to the national conferences of the American Association of Colleges of Pharmacy. Conscious of its status as one of the few university-affiliated schools in the nation, the college of pharmacy stressed its legacy and distanced itself from the proprietary schools where large enrollments brought profits to faculty. Its Bulletin stated "from the first, the college endeavored to keep abreast of the best pharmaceutical schools in this county. It has not sought to enroll the greatest number of students, but to do the greatest amount of good. It has created a sentiment among pharmacists in favor of higher education." Nevertheless, tension existed between the cost of raising academic standards and concern for financial viability of the school, since it had been affiliated with the University of California since 1872, but financial control remained in the hands of the Trustees, not the UC Regents. In 1914 the College of Pharmacy had established a four year program, maintaining it along with two and three year programs. Throughout the 1920s, as professional standards were being constructed at the national level, the college offered a series of two and three-year courses leading to degrees entitled PharmC, Pharm G and Pharm B, with a progressive tightening of admissions requirements involving more years of high school work and preparatory courses in Latin.



Upgraded lab equipment for Pharmacy

In 1927, with strong support from the administration of the California College of Pharmacy, the legislature passed a new law requiring three years of formal instruction for candidates presenting themselves to the state board of pharmacy for licensing examination. National recommendations for a four-year course were heeded by the California Pharmacy trustees, but they insisted on also retaining their popular three year course which had helped finance the school. Ironically the college dean, Ph.D. Chemist H. C. Biddle, was one of five members of the American Association of Colleges

of Pharmacy committee appointed to consider a national educational policy promoting the new four-year curriculum. It was under his direction that the California College of Pharmacy briefly resigned its membership in the organization rather than lose accreditation. The problem would be solved at the university level in the next decade as President Sproul and the trustees finally agreed on full integration with the University and the Board of Regents took on financial responsibility for the increasing instructional needs of the College of Pharmacy.

The 1920s marked a troubled decade in the history of pharmaceutical education as career opportunities diminished with the industrialization of pharmaceuticals, and the drugstore became a more broad commercial enterprise. This growing rift in professional life between trade concerns and intellectual challenge was reflected in lecture titles given in 1926 at the college for "publicity week". Mr. E. B Kipfer from the Eli Lilly company lectured on "The Discovery And Uses Of Insulin," and C. L. Stevens of the Western Company of Chicago talked on "The Development And Possibilities Of The Tooth Brush Industry." Nevertheless, the decade was marked by an increasingly sophisticated curriculum and a lively student presence at the College of Pharmacy.

The Langley Porter Reforms

During the 1920s, the Medical School had gone virtually leaderless during the many years of uncertain negotiations with the General Education Board. After Herbert Moffitt's retirement from the deanship following World War I, the office was filled only briefly by George Whipple before his departure for Rochester in 1921. President Barrows served as acting dean from 1921-1923, and Lionel Schmitt, director of the University Hospital, served as acting dean for the next four years.

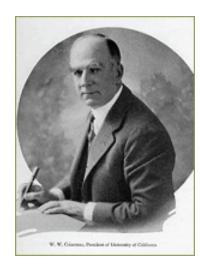
On December 13, 1927, President Campbell presented a plan to the Regents asking that the popular San Francisco physician Dr. R. Langley Porter be brought out of retirement to lead the medical school in a program of reform. The Regents quickly approved Porter's appointment and



Dr. Langley Porter

President Campbell enhanced the new dean's authority by mandating that the advisory board of the medical school should advise the University president through the dean's office. Heads of finance and appointees in the school were ordered to report to the dean rather than the president, and in the future the dean would serve as the sole representative of the president of the University to the faculty, students, and nurses.

One of Campbell's primary concerns as he recruited Langley Porter was the need to reorganize a curriculum that suffered gaps and duplication due to the geographical separation between east and west bay instruction. The new dean shared his concerns. Upon his arrival in the summer of 1927 Dean Porter did a quick survey and described the medical school as "a disintegrated institution," with special weakness in the second-year teaching of the clinical sciences of bacteriology and pharmacology. He proposed that the second year of preclinical science teaching be brought back to San Francisco and received immediate regential approval for the move. In 1928, Pharmacologist Chauncey Leake was recruited from a first rate department at Wisconsin. In early 1928, the Departments of Bacteriology and Pharmacology were transferred from Berkeley to new labs outfitted on the third floor of the medical school building.



University President William Campbell



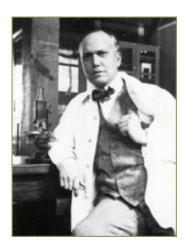
The pathology lab in old medical school building

Although the school remained geographically split, Dean Langley Porter still held the power of appointment over all medical educational activities at both Berkeley and San Francisco, and he quickly began to strengthen both the clinical and scientific sides of the curriculum through recruitment and appointments. Dr. Ian MacClaren Thompson was appointed to chair the Department of Anatomy, and J. M. D. Olmsted from Toronto was recruited to chair the Department of Physiology. John B. Saunders came from Edinburgh to teach anatomy.

On the clinical side at San Francisco, Dean Porter appointed full-time professors to head medicine (William J. Kerr) and Surgery (Howard Naffziger). By the end of the decade, with an effective new Dean in office and a Board of Regents committed to reform, President Campbell addressed the campus community with optimism, announcing that "it is confidently hoped that the wise administration of the medical school and the devoted service and splendid abilities of the dean and the faculty of the school, will in due time cause our medical school to take its place in the front rank of the world's greatest service institutions." A new university president, Robert G. Sproul, succeeded Campbell in 1930, and he soon proved to be a strong supporter of coordination of all the health professions at Parnassus. Although financial limitations put further consolidation plans on hold throughout the Depression, Dean Porter persisted in his ambitious vision for a merged medical center at Parnassus. Ultimately his program of reform would influence the development of the Colleges of Dentistry and Pharmacy by coalescing training in the clinical sciences of bacteriology, pathology and pharmacology into curriculum for all the health professions at Parnassus.

The Preclinical Sciences at Berkeley

Although the Great Depression halted any plans for complete reunification, there were some bright spots for medical education and research on both sides of the bay. In their disillusionment following the Rockefeller funding debacle, several key science faculty left UC, but the void was soon filled with more local talent. Biochemist Carl L. A. Schmidt was made chair of biochemistry and began his research into the chemistry of amino acids and proteins. With the loss, first of Jacques Loeb, and then Robert Gesell, the Physiology Department went into a period of decline. In contrast, the Department of Anatomy at Berkeley flourished under the leadership of young Californiaborn Johns Hopkins graduate Herbert M. Evans beginning in 1915.



Dr. Herbert M. Evans

Evans had studied anatomy under Franklin Mall at Johns Hopkins and before returning to California had published his first work on the embryology of the vascular system. Throughout the next three decades, Evans taught an entire generation of first-year medical students the rigors of bench research. He disdained the more applied nature of gross anatomy, and, when clinicians traveled from San Francisco to teach the necessary skills to medical students, he referred to them derisively as "the hat-rack boys."

In 1930, when the Depression reached California, effectively halting any plans to construct research labs at San Francisco, a 375,000 square foot Life Sciences building was erected on the Berkeley campus, funded by a state bond issue and a WPA appropriation. This building, for its time one of the largest academic structures in the nation, provided labs and classroom space for anatomy, physiology, biochemistry, botany, and zoology, and stood as an important architectural symbol for basic biological research and instruction on the Berkeley campus.

Another direction in medical research developed at Berkeley as a by-product of the landmark work in physics being done by Ernest Lawrence and others who developed the cyclotron in the early 1930s. Isotopes produced in the Berkeley cyclotron were used in several of the first radioisotope studies in man, some involving collaborations between Berkeley scientists and San Francisco physicians. In 1937, Harvard-trained neurologist John Lawrence, a brother of Ernest, used radiophosphorus to treat leukemia and other blood disorders. Later Iodine-131 was used in the diagnosis and therapy of thyroid disease by collaborating investigators at San Francisco and Berkeley. Biochemistry professor David Greenberg performed many of the early studies using radioactive manganese, cobalt, iron, potassium, sodium-24, phosphorus, strontium, and calcium. Such work led to the establishment of a division of Medical Physics within Berkeley's eminent Department of Physics, and in 1941 the Donner Laboratory was built to focus the work of the division on the study of biological systems.



One of the Toland Hall murals depicting the "wheel of science". The murals were painted by Bernard Zakheim in 1938.

Strengthening Clinical and Science Instruction at Parnassus



William J. Kerr, LeRoy Briggs, Harold Brunn

In 1937, John Saunders became chair of the Anatomy Department and continued his role as a popular instructor and authority on the history of anatomy.

Clinical training expanded under the tutelage of full-time chair in Medicine William J. Kerr, a Harvard-trained physician with a strong interest in cardiology, and master clinicians like LeRoy Briggs.

Harold Brunn developed thoracic surgery at the County hospital and revitalized the teaching programs at Mt. Zion Hospital, while Howard Naffziger dominated surgery at Parnassus. As one of Harvey Cushing's close colleagues and a graduate of Johns Hopkins, Naffziger brought surgical prestige to the Parnassus campus and developed several unique neurosurgical operations which brought him national recognition. Once Naffziger was made full-time head of surgery in 1929, he developed an advanced residency training program at Parnassus in the tradition of the nation's most revered surgical mentor, William S. Halsted.

This involved an extended hierarchical training system for surgical residents that included substantial work in surgical research in an animal laboratory provided expressly for that purpose. Naffziger's successor, H. Glenn Bell, carried on this tradition, and UC became known for its consistent training of expert technical surgeons.

As experimental biology prospered at Berkeley, other basic science instruction took root in San Francisco. It is difficult to decipher from the historical record who deserves the most credit for this turn to science instruction. University President Robert Sproul was interested in uniting all the health professions at Parnassus and he lent support for the creation of new departments. Langley Porter's recruitment



H. Glenn Bell

of Chauncey Leake, coupled with parallel changes in the College of Pharmacy contributed to a remarkable development of basic research in pharmacology and pharmaceutical chemistry in the 1930s. Something of a polymath, Chauncey Leake taught the first formal course in the history of medicine on the San Francisco campus in 1929 and the following year the Department of Medical History was created. He also assumed the post of campus librarian.



Chauncey Leake

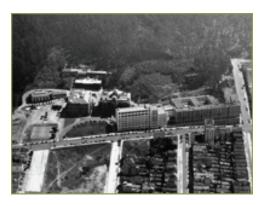
Meanwhile Leake's major interest was in pharmacological research and he quickly developed a strong instructional program in anesthesia, blood formation, and chemotherapy. His acquaintance with Berkeley Biochemist C. L. A. Schmidt turned into active collaboration when, in 1934, Schmidt was appointed Dean of Pharmacy at San Francisco. By this time, the College of Pharmacy was fully integrated into the University and the Regents took over responsibility for the school. In 1929, a physical chemist, Troy Daniels, arrived to do important basic research

in physical chemistry. By 1937, CL. A. Schmidt was appointed Dean of Pharmacy. Through Schmidt, Troy Daniels, and Chauncey Leake, a collegial synergy was formed to promote basic research in biophysics and chemistry in connection with the Schools of Pharmacy and Medicine.

By 1938, just a year after C.L.A. Schmidt was appointed Dean of Pharmacy, a college press release announced that remodeling in progress would make it "one of the best plants for the teaching of pharmacy in the country...." This project involved installing a central still for distilled water, modern lecture rooms, student research labs, space for housing animals, a shop for glass blowing and modern lab equipment. The program was designed to train pharmacists in the manufacture of drugs and sick room chemicals, provide inspection of drugs and cosmetics, and to pursue careers in food chemistry, sugar chemistry, pharmacology, dairy chemistry, narcotic law enforcement, wine chemistry, chemical control of water supplies, and hospital pharmacy. During the last years of the decade, Schmidt announced the school's involvement in research that "improve[s] over nature by synthesizing in the lab chemical substances that have specific effects in the alleviation and treatment of disease." He described projects conducted by John Oneto on ephedrine compounds, and Troy Daniels with new sulfanilamide drugs. In 1937 a graduate program in pharmaceutical chemistry was added to the School of Pharmacy's offerings and the first M.S. was awarded in 1940 and the Ph.D. in 1942.

"despite the depression there has been a greater demand for graduates of the College of Pharmacy than we have been able to meet."

- CLA. Schmidt, Dean of Pharmacy, July 15, 1938

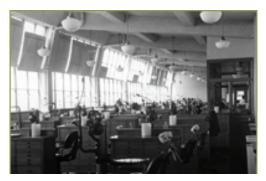


Aerial view: UCSF campus before Moffitt Hospital was built. Note the Clinics building adjacent to UC Hospital.

In 1934, after intense lobbying, the state legislature allocated \$600,000 for a 103,160 square foot Clinics Building designed to house the growing outpatient teaching service at Parnassus. This facility was quickly filled to capacity with small offices, making medical and dental care available to San Francisco citizens regardless of their ability to pay. It also served a function in uniting activities of all the colleges and the training school. Although dentistry, pharmacy, medicine and the training school formerly occupied space in distinctly defined buildings, and maintained them as architectural territory, after the mid-1930s they shared commingled space on the floors of the Clinics building.

Dentistry occupied the sixth and seventh floors and new space provided not only opportunity for improved facilities but created unprecedented cooperation with other schools housed in the building. Upon the opening of the Clinics Building in 1934, officials observed, "consultation with members of the medical faculty concerning unusual cases are easily possible to the reciprocal advantage of the students and members of the faculties in both the medical and dental schools." Consolidation of dentistry's roentgenology lab with that of the UC Hospital department was also seen as "providing opportunity for a broader understanding of this science and the means for effective coordination among physicians and dentists in the field of Roentgenological di-





agnosis." Although some of this rhetoric undoubtedly was designed to fulfill the expectations outlined in the Gies Report a decade earlier, there is ample evidence that the arrangement of the Clinics building created a greater integration of the colleges and the training school. Nursing was able to move offices from the Dormitory building into the clinics space, and pharmacy occupied dispensary space on the ground floor.

Campus Life in the Great Depression



Nursing Students in Toland Hall, 1941 (murals in background).

Throughout the depression, student life flourished in all the schools, despite the fact that the Clinics Building was the only outward sign of progress at Parnassus. An important uniting factor was the school of dentistry's sponsorship of student facilities, consistently supported by Dean Guy Millberry. In 1925 students and faculty built a dental supply store that soon expanded to include a stock of medical, dental, and pharmacy textbooks and supplies, along with a "complete stock" of dental instruments. Students were given a "liberal

discount" on cash purchases and any profits reverted to Associated Dental Students and used for "the general benefit of all the students." In 1933 and 1934—the midst of the depression—these facilities generated a surplus of \$52,000. Eventually these activities would provide impetus for the construction of Millberry Student Union.

In 1938, artist Bernard Zakheim, a student of Diego Rivera who worked on the Coit Tower murals, painted a series of murals in Toland Hall depicting the history of medicine in California, with financial support from the New Deal's Works Progress Administration.







Toland Hall murals. In 1938, artist Bernard Zakheim painted a series of murals in Toland Hall depicting the history of medicine in California.

The straitened economics of the depression overtook the UC Hospital as well as other parts of the Parnassus campus. By the 1930s, the UC Hospital employed a relatively large staff of graduate nurses, in positions funded with the support of University comptroller, Robert Sproul. He became University President in 1930 and almost immediately turned his attention to reorganization of the nursing curriculum. This process would be influenced directly throughout the decade by a succession of innovative nursing faculty. In 1931 Miss Waterman arrived to serve as director of the training school and nursing. She clearly articulated the vision of nursing as a true academic subject matter in 1931, when she urged the curriculum committee to adopt two years of lower division college courses as requirement for admission and to award the baccalaureate degree after four years of college work, with the fifth year reserved for postgraduate study leading to a masters degree. This proposal, when accepted marked the end of the three-year diploma track in the UC Training School.

In 1932, Edith Bryan, assistant professor of public health nursing at Berkeley, set an intellectual milestone for the entire nursing profession. In a remarkably prescient speech delivered at the San Antonio convention of the National League of Nursing Education, she delineated a clear area for nursing research. She urged her fellow nurses to "seek to understand the complexity of her [nurses'] problem as revealed by a study of the social sciences." She went on to define three realms of research for nurses: pure science, applied science and social science, adding that "no one of these scientific divisions of nursing is complete or free from distortion unless the other two are taken into consideration." Throughout the 1930s, other forces shaped the transformation of the training school.

In 1933 May Pickering left her position and the head of the training school departed in the same year. In 1934 Margaret Tracy was appointed to the joint position of training school director and superintendent of nurses, and by May was also made director of nursing education at Berkeley. Almost immediately, she proposed the establishment of a full-fledged academic School of Nursing. Support for the proposal came from Lucy Ward Stebbins, the dean of women at Berkeley who recommended the proposal to President Sproul. The proposal was halted in a bureaucratic tangle of committee debate, but by April 10, 1939, Regent's approval went to the Academic Senate. The School of Nursing was now established.

1940-1958

The Growth of Organized Research and Consolidation of the Parnassus Campus

Wartime and New Opportunities



Langley Porter Clinic, 1942 Hospital psychiatric hospital was necessary.

The quickening of the American economy that came with war in Europe and then Pearl Harbor began to alter the status quo at the San Francisco campus, and the first signs of change occurred at the state level. As early as 1937, while the nation was still in the grip of the Depression, Dean Langley Porter began a campaign to cooperate with the State Department of Mental Hygiene to build a psychiatric hospital on land belonging to the university at the Parnassus campus. State officials, concerned with indigents and migrants flocking to California, were persuaded that a state acute

Dean Porter wisely proposed to operate the facility jointly with the state, thereby obtaining psychiatric teaching beds for the medical school. After long negotiations, the state and the UC Regents reached agreement, and a cornerstone was laid in 1941, a symbol,



Architectural Drawing of Moffitt Hospital

according to local observers, of "a new era of empathy and understanding of the mentally ill." In 1942 the Langley Porter Clinic, which would later become the Neuropsychiatric Institute, opened its new Architectural Drawing of Moffitt Hospital facility: a 105,000 square foot building that contained 100 beds, a large outpatient department, and a special children's ward. The facility, built on university land, was owned by the California State Department of Mental Hygiene and the School of Medicine received 10% of the space. This symbiotic relationship with the state contin-

ued for the next thirty years, and the establishment of the Langley Porter Clinic led to the founding in 1941 of a Department of Psychiatry on the Parnassus campus. While Dean Porter was negotiating with the state over the psychiatric hospital, another ambitious group of San Francisco clinical faculty petitioned the state for money to build a modern teaching hospital at Parnassus. The state's response was definite: a \$2 million bond issue was approved for this purpose in 1940 by Governor Earl Warren, although the war delayed construction for many years.

Base Hospital 30 in World War II



The 30th General Hospital CA. 1942. Howard Naffziger (center front) is the tall man in a dark suit.

The Medical School's leading physicians and surgeons reactivated Base Hospital #30, transforming it into the Thirtieth General Hospital. Hundreds of officers, nurses and enlisted men from the Medical faculty, and the Schools of Nursing, Pharmacy and Dentistry traveled to Europe to support American troops overseas, in England, and after the Normandy invasion in Europe.

During the war, Medical School classes were accelerated and compressed from four full years into seven terms of sixteen weeks each, and the M.D. degree was granted before the year of internship. New curriculum was introduced reflecting the health problems of the war, and the remaining faculty and house staff worked overtime to fill the many vacancies in the teaching hospitals. Although the military again in World War II did not grant officer status to pharmacists, they were given first lieutenant status by the U. S. Public Health Service. The pharmacy curriculum was compressed into three "semesters" per year, so that the required eight full semesters of study could be completed in a little more than two years.



Ward at the 30th General Hospital, June 1943.

As the war dragged on, manpower needs were fulfilled through the Army and Navy War Service Training Programs in both the Medical School and College of Dentistry. Here students were matriculated into an accelerated course track and emerged with commissions as 2nd lieutenants or ensigns in the reserve corps, available for active duty as needed. Tuition, fees, and books were provided by contract between the University and the federal government. By 1944, 90 percent of the dentistry student body was enrolled in these programs,

and civilian matriculants were accepted and deferred from selective service.



Nurses at the 30th General Hospital, June 1943.

Similarly, wartime nursing needs were met by huge enrollments, accelerated clinical training, and the Cadet Nurse corps administered by the U. S. Public Health Service. In 1944, a new Cadet nurses' dorm to house eighty students was built with federal funds, near the Langley Porter Institute and the campus tennis courts. The Cadet program also funded additional graduate education for nurse teachers and public health nurses

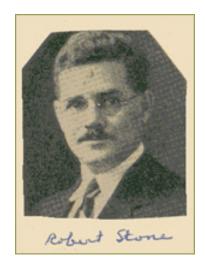
Such a massive effort in training personnel in the health professions consumed much of the efforts of college administrators on the home front, and when war ended, political issues that experienced a long hiatus reemerged in the complicated setting of the postwar years.

Postwar Research Initiatives

The war effort prompted new initiatives in scientific research which were organized on a massive scale. In the 1930s Congress created a National Institute of Health (NIH) from the former Hygienic Laboratory of the US Public Health Service. During the war, federal programs in medical research were organized loosely by a Committee on Medical Research (CMR) which administered research grants involving malaria research, evaluation and production of penicillin, new surgical procedures, mental health and aviation medicine. At war's end, the CMR converted wartime grants into ongoing grants in aid and positioned the NIH to become the principal federal funding agency for medical research in the postwar period.

Research had been conducted at all the schools at Parnassus as well as Berkeley. Pharmacy faculty collaborated on projects involving sonar studies, night landings of naval aircraft, treatment of brain injuries, improving the production of high-yelding strains of Penicillium sp., and spectrographic analysis of metals. In the school of medicine K. F. Meyer lent his bacteriological expertise to the production of an effective plague vaccine. During the draft, dental defects were the leading cause for rejection for service, and the armed services lowered requirements and brought restorative dental care to thousands of recruits. This created political will for a federal dental research institution and the National Institute of Dental Research was created on September 16, 1948 as the third of the National Institutes of Health. Research in the etiology and mechanism of dental caries flourished in the post war years, and by 1962 tooth decay was characterized as disease caused by the interaction of diet and specific microorganisms.

Robert Stone, former chair of radiology at the San Francisco Medical School served on the Manhattan Project throughout the war years and was well-placed to direct research funding from the Atomic Energy Commission (AEC) to the San Francisco campus after the war. Radiology research at San Francisco grew out of the earlier work in medical physics done with cyclotron-produced isotopes before the war. In 1949, under contract with the AEC, a Radiological Laboratory was established to allow Dr. Stone to investigate the effects of supervolt radiation therapy for cancer. Funded by an annual contract with the AEC, a seventy million volt synchrotron was installed at Parnassus and the radiological laboratory combined physics, biology, and clinical radiology to study the general effects of radiation. In 1951 a Radioactivity Research Center was founded



Robert Stone

for supervision of the radioisotopes used for medical research at San Francisco, funded with a combination of university, American Cancer Society, Atomic Energy Commission, and NIH money.

Cancer Research



The Consultative Tumor board, pictured discussing cancer cases at Parnassus, ca. 1952.

Dr. Robert Stone was also appointed at war's end to an influential federal planning committee for cancer research and collaborated with UC President Robert Sproul and medical school Dean Francis Smyth about funding opportunities.

In 1947 President Sproul appointed a Cancer Research Coordinating Committee to administer a \$250,000 state appropriation for cancer research. Federal funding arrived for cancer research in California by 1947 and a mouse colony for cancer research genetics was built on the Berkeley campus. At UCLA, a fully-

funded Cancer Research Institute was opened along with a new school of medicine. San Francisco received funding for its own Cancer Research institute. A "field station" for cancer research, the Laboratory of Experimental Oncology, was located at the Laguna Honda Hospital and staffed by Public Health Services officers who worked alongside UC faculty to do experiments on the biology of cancer and to test cancer treatments on

terminally-ill patients.



Dr. R. L. Byron performs a biopsy on a subcutaneous nodule of a cancer patient, assisted by Dr. K. H. Kelly and Mrs. Anna Lance.

This facility was closed when the NIH opened its Clinical Center at Bethesda in the mid 1950s, but cancer research at San Francisco continued under the aegis of the Cancer Research Institute which continued to coordinate chemotherapy trials and research projects. Eventually the CRI occupied the twelfth floor of the new Medical Sciences building, outfitted for cancer research with the aid of a \$1 million grant from the US Public Health Service.

Cardiovascular Research

Although he never sat on influential Washington committees, UC's Chair of Medicine, Dr. William J. Kerr, influenced the outcome of federal research funding at San Francisco through his insistence on developing research space in the new Moffitt Hospital during the extended planning stages of the 1940s.



Moffitt Hospital under construction

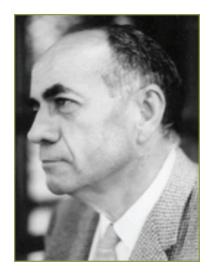
He persuaded the legislature to provide an additional \$50,000 to strengthen the foundations of the hospital to accommodate an additional thirteenth floor, hoping to clear the way for an entire floor devoted to heart research. In the late 1940s, Dean of the School of Medicine, Francis Smyth, organized a committee with representatives from Medicine, Surgery, Radiology and Pediatrics to develop cardiac catheterization at San Francisco. This committee received one of the first National Heart Institute training

grants and renamed itself the Cardiovascular Board, acting as a coordinating force for developing cardiovascular activities on the campus. The most important of these involved creation of an interdisciplinary, interdepartmental research group devoted to the study of cardiovascular, pulmonary and renal problems.

Dr. Julius Comroe was recruited in 1957 to direct this new Cardiovascular Research Institute (CVRI). When the CVRI opened in 1958 it featured eight clinical research beds, radiological facilities, twenty-two individual labs, a mechanical and electronics shop, dark rooms and animal quarters. Julius Comroe proved to be an excellent leader, persuading entire teams of researchers to relocate to San Francisco, recruiting new investigators, and involving many departments of the school in collaborative research.

Metabolic Research

Another research opportunity was based on public enthusiasm for study of the uses of the new drug, cortisone. In



Julius Comroe

1949 Merck sent its first experimental batches of the hormone to selected investigators throughout the country. At that time UC had no laboratory capable of doing such work, but by coincidence during that same year UC Medical School faculty physiologist, Dr. Leslie Bennett, was just beginning a year's sabbatical in clinical metabolic research in George Thorn's research lab at the Peter Bent Brigham Hospital at Harvard.

When the new drug was evaluated at the Brigham lab, Dr. Bennett saw its remarkable therapeutic effects firsthand. When he returned the next year to California, the state legislature made a special appropriation of \$200,000 to the University of California for research in arthritis and allied diseases and Dr. Bennett took charge of the project, remodeling two houses on Parnassus Avenue to serve as a site for his new Metabolic Research

Unit. Meanwhile on the Berkeley campus a Hormone Research Laboratory was created as a discrete research site for the work of Dr. Cho Hao Li, who had synthesized many related ACTH compounds. In response to the rapid development of metabolic and hormone studies throughout the nation, an additional National Institute was created in 1950 at Bethesda: the National Institute of Arthritis and Metabolic Diseases (NIAMD). Some of the postwar research activities at the UC Medical School were funded from a variety of state and local donors and foundations attracted to individual faculty capabilities. One of the first of these was the Biomechanics Laboratory, a collaborative unit set up in 1945 by Berkeley engineers and San Francisco anatomists and orthopedic surgeons.



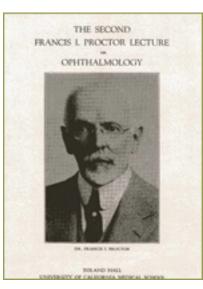
Dr. Leslie Bennett



Biomechanics Laboratory

The Biomechanics Lab had been initially funded by the Polio Foundation for research into muscle action and physiology, but with the coming of war the research was shifted to work on development of prosthetic devices for veterans. A related pain clinic was organized at San Francisco to study ghost pain and other problems of amputees.

In 1947 Mrs. Francis I. Proctor, widow of an ophthal-mologist who had been active in trachoma research before his death, established the Proctor Foundation for Research in Ophthalmology at San Francisco. The Proctor's research program brought Parnassus microbiologists and ophthalmologists together in the study of ocular microbiology, immunology and experimental pathology.



Dr. Francis I. Proctor

Reconsolidation of Medical Instruction at Parnassus



Looking west down Parnassus Avenue in the 1940s.

With the end of the war, as the Medical School obtained research funding from a variety of sources and the faculty became more involved in bona fide research efforts at Parnassus, the decades-old controversy over the proper site for consolidating all four years of medical instruction reemerged.

In 1944 the San Francisco faculty formed a Committee on Unification and Consolidation of the Medical School and submitted a detailed report on the history of the reconsolidation issue. Citing the Regents' repeated decisions to reunify

the school "as rapidly as space to accommodate them on Parnassus Heights" could be developed, the committee concluded that despite several exploratory reports and policies, there had been a "dissipation of effort" due primarily to "financial stringency." In a positive reaffirmation of the principle of unification they argued that scientific departments must be more closely associated with clinical departments to create "biological inspiration." They cited the need for complete revision of the medical curriculum into a "coordinated and progressive course" and argued for group investigation in research problems, using the "facilities of several departments." To make this possible in the im-

mediate postwar years, the committee proposed, in addition to building the new teaching hospital, that the state provide funds to construct a science building to provide lecture rooms, student laboratories, animal quarters, and research laboratories. In 1946 the Governor and legislature responded by allocating additional funds guarantee completion of an adequate 450-bed teaching hospital and then appropriated an additional \$4 million for construction of a Medical Science Building.



UC Hospital 1952

A few months after this commitment to the Parnassus campus was announced, the Academic Senate of the Berkeleybased northern section of the University proposed that the Medical School be moved to Berkeley.

The San Francisco faculty jumped into the controversy, rejecting the Academic Senate proposal by acclamation and arguing that the teaching program that utilized seven San Francisco hospitals could not be duplicated in the East Bay. Her-

bert Evans, a confirmed member of the Berkeley faculty, warned that the Regents' repeated decisions in favor of the Parnassus campus, which he called "a bleak, fog ridden hillside," would cause "permanent intellectual injury of medicine in the state through all futurity."

Nursing's Postwar Struggle for Academic Parity

Since the UC hospital was founded at Parnassus in 1907 nursing education had gained the staunch support of a variety of key individuals who argued for equal academic status for nurses. These included a succession of hospital supervisors and directors, medical school deans, Berkeley faculty and the dean of women, as well as highly placed members of the University of California Administration. However, some influential officials were opposed to the rapid academic advancement of nursing, preferring a "trained" nurse to a "professional" one. Among those were Berkeley Academic Senate members representing the more "mature disciplines" who were unwilling to broaden the definition of scholarly work. Allied with them was an influential minority of medical school physicians who argued outspokenly for limiting nursing students' education to practical "training" and keeping nursing subordinate to medicine.

In 1939 by the Regent's authority, the UC Training School at Parnassus had officially become the UC School of Nursing, and, since that formal announcement, the school's publications described it as "the first autonomous school of nursing in a state university." Although the School's director, later Dean, Margaret Tracy reported directly to UC President Robert Sproul, true autonomy in the form of equivalent academic status and a faculty voice in the Academic Senate was a contested issue that persisted for another two decades. In 1944, in the midst of her crucial service as head of the Wartime Nurse Cadet corps, President Sproul conferred the official title of Dean of the School of Nursing to Margaret Tracy.



Dedication ceremony for cadet nurses' dormitory, R.G. Sproul and Margaret Tracy

Unfortunately, during the war years and after, the Academic Senate had stubbornly refused to promote Tracy from assistant to associate professor, attempting instead to strip her of her title as assistant professor. When Margaret Tracy's promotion was repeatedly turned down by the Academic Senate, the future status of the nursing school itself was threatened. Proposals to place nursing faculty in the specialist or clinical professor series were made, but they unanimously rejected these alternatives, correctly fearing that any lessened academic status would fatally compromise the future of the School. Future recruitment was at stake, along with the nurses' time to do the kind of research

that would lead to acceptance as a true academic unit of the university.

In early 1948, in a stunning move to find a solution to the impasse, Margaret Tracy convened her faculty, secured their agreement, and requested that President Sproul put a hold on appointments and promotions in the school for at least two years, allowing the entire faculty to devote its time and energy to earning higher academic degrees. President Sproul welcomed this compromise, and in a remarkable show of diligence, the faculty "went to school" for the next five years, collectively earning six doctorates and seven masters degrees. In a parallel move, beginning in 1949, nursing faculty were removed from supervisory and service roles in connection with the hospital, to allow them more time for creative research, with the support of the hospital administrator Stanley Durie. In a sense, Edith Bryan's prophetic statement on the importance of nursing research, made twenty years earlier, had now come to pass.

"If we are to develop the science of nursing to its greatest achievement, we must accord the scientific research worker in nursing a position of increasing dignity, honor and power in the profession." Edith Bryan, "Methods of Research and Study," paper presented at NLNE, 1932.

Finally, in 1951 the Academic Senate gave recognition to the UC Berkeley-San Francisco School of Nursing, as well as a School of Nursing at UCLA.

A perceptive Margaret Tracy acknowledged that, although the University of California was holding her faculty to a higher standard than any other university, ultimately the UC School of Nursing "would be stronger for it." The Academic Senate's demands for constant redefinition and goal-setting for the School of Nursing during the 1950s led to a series of reports on curriculum and mission that ultimately prompted productive curriculum reform and expansion. In 1947 the director of nursing at the Langley Porter Clinic developed an advanced psychiatric nursing program with funding from the U.S. Public Service and the National Mental Health Act of 1946. Also during this time, Mildred Newton developed and negotiated acceptance of a Masters Degree program that would satisfy the requirements of the University's Graduate Council.

Throughout the 1950s, as they completed academic degrees and planned for their move into new facilities at Parnassus, the nursing faculty joined together to preserve their gains. In 1951, Margaret Tracy's health began to fail, but her commitment to securing the school's academic position kept her firmly in the deanship. She continued with the assistance of supportive faculty members until she retired in spring of 1955. In 1954 nursing faculty began meeting on a bi-monthly basis as a committee named "Full Time Members of the Faculty of the School of Nursing at the Medical Center." In order to maintain the direction of the school while the recruitment and hiring of a permanent dean continued, June Bailey served as interim dean for the year 1956, and three faculty formed a "committee deanship" in 1957. The preferred candidate, Helen Nahm, was appointed in mid-March, with advice from the existing faculty that she should not accept the deanship unless she was made full professor. As late as 1957 the Academic Senate's powerful budget committee attempted to thwart the school by drastically cutting its budget. Yet, by the mid-1950s, the contested status of the school of nursing would be visibly strengthened by the construction of a multimillion dollar complex of a new university hospital and health sciences buildings designed to accommodate instructional and research facilities for all four Parnassus health professions.

A Giant Step Towards the Future in Health Sciences



Aerial View of the UCSF Campus in the early 1960s.

By mid-century, the University and the state embarked on a massive postwar construction plan involving all campuses. The regents' long-stated intention to consolidate the school at San Francisco prevailed over the arguments of the Berkeley faculty and in 1949 they officially designated the Parnassus campus as the UC Medical Center in San Francisco, and renamed the UC Medical School the "UC School of Medicine." After forty-four years of pronouncements on the need to unify the instructional programs of the medical school, actual plans were finally being made to expand the Parnassus campus to include

departments of biochemistry, anatomy and physiology. In early 1950 blueprints were released revealing plans for a twelve-story cross-shaped teaching hospital with two additional stories to be completed at a later date.



UCSF campus under construction, 1951

This hospital would be linked to a fourteen-story Medical Sciences Building. Construction at Parnassus continued for the next five years and the new medical center officially opened on March 13, 1955. Newspapers hailed the new structures as "shining functional monuments to health and health education." In June, 240 patients were moved into the 485 bed Moffitt Hospital, named for Herbert C. Moffitt who had served as dean, faculty member and chief of medicine for thirty seven years. Construction continued, and Increment I of the Medical sciences building was completed in 1956 as basic

science faculty in anatomy, biochemistry and physiology prepared for their move across the bay.



Physiology Lab, Anatomy Lab, Research-teaching Lab

Months before Moffitt Hospital was dedicated, Dentistry, Pharmacy and Nursing moved into increment one of the Medical Sciences Building, which was completed in 1954. The expanding chemical laboratory needs of Pharmacy prompted its occupancy of four full floors of the Medical Sciences Building. With its new demands for patient service as well as research, Dentistry moved into three floors, and retained its clinic space on the top two floors of the clinics building. The School of Nursing, which was reaching full academic status and achieving the long-awaited separation from the hospital nursing service, occupied the entire second floor of the Medical Sciences Building, space that allowed for classrooms, skills and nutrition laboratory space, and adequate offices for faculty and administration. Increment II, the North-South wing of the Medical Sciences Building was completed in 1958, in time for newly arrived basic science faculty in anatomy, biochemistry and physiology to prepare instructional laboratories for the entering freshman class of 100 medical students.

Important shifts in UC leadership occurred during the construction of these imposing new buildings, for the entire university system was undergoing dramatic expansion and decentralization in the postwar years. By the mid-1950s university enrollment stood at 44,000 and administrators were anticipating a tripling of enrollment in the next two decades. In response to these pressures, acquisition and development of new and existing campuses began in earnest. Between 1945-1958 the University acquired the Santa Barbara campus and developed liberal arts colleges at Davis and Riverside, and in 1951 a new four-year medical school began admitting students at UCLA. New general campuses would be added in the next decade bringing the total to nine separate sites, and five medical schools would eventually become a part of the UC system including the oldest one in San Francisco. In 1952, Clark Kerr, a young Berkeley professor of Economics and Industrial Relations, was appointed first chancellor of the Berkeley campus and he proceeded to work on academic and physical planning for the University.

In 1954, UC School of Medicine Dean Francis Smyth resigned after twelve years of service. In 1956 he was replaced by anatomist John Saunders, a popular choice among Parnassus clinicians. By assuming the deanship, Saunders became, in effect, the leading campus spokesman in the UC hierarchy, for he also held the influential position of Chief Campus Officer, representing San Francisco on the administrative advisory committee composed of deans from all campuses. As the University expanded, a system of provosts and chancellors replaced this advisory committee, part of a general movement towards autonomy for the individual campuses.

John Saunders. Provost

Thus, in 1958 John Saunders was named provost of the San Francisco campus as part of the decentralization process, and in 1964 became the first chancellor of the new

San Francisco campus. The other colleges and schools flourished in their spacious new quarters in the medical sciences building. In 1955, Pharmacy was officially designated as the School of Pharmacy under the continuing leadership of Dean Troy Daniels. In 1956 the Academic Senate made the College of Dentistry into the School of Dentistry with Willard Fleming serving as both Dean and Vice-Provost of the San Francisco campus. At this juncture, Dentistry, Medicine, Nursing, and Pharmacy were officially named as schools, bringing bureaucratic uniformity to the historical professional programs at the San Francisco Campus.

1958: The Watershed Year for the San Francisco Campus



Aerial View of the UCSF Campus in 1958

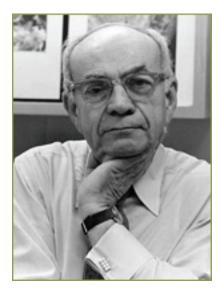
The San Francisco campus at mid-century was undergoing its most visible changes since the Affiliated Colleges had been built at Parnassus a half-century earlier. Moreover, the transformation of the campus could be measured in ways far more important than mere bricks and mortar. As the Moffitt Hospital and the medical sciences buildings took shape, physiologists (Leslie Bennett, Ralph Kellogg, Francis Ganong), biochemists (Harold Tarver, David Greenberg), and anatomists (William Reinhardt, Miriam Simpson, Ian Monie) made plans to create new basic science departments.

The University itself was undergoing a huge metamorphosis in the postwar years as enrollment skyrocketed and new campuses were added rapidly to meet the demand. In 1958 Berkeley's first Chancellor, Dr. Clark Kerr, was appointed President of the University of California. Presiding over the design and implementation of the University Master Plan, Kerr became vitally involved in the fate of the medical school much as his predecessors, Daniel Coit Gilman, Benjamin Ide Wheeler, David P. Barrows, William W. Campbell and R. G. Sproul, had been. Kerr recognized that the postwar world of higher education was a new environment of research opportunities made possible by unprecedented sources of extramural funding. He also understood the political importance of expert service to the public to be provided by a state university. Throughout its history, the University of California's support of agriculture had been its most important contribution to the well-being of the state. As late as 1948, 38 percent of the university budget was invested in agricultural activities compared to 9 percent for medicine. From his vantage point as university president, Clark Kerr observed that health sciences could now be "higher education's best current ambassador," and he turned his attention to the development of science-based medical education for the University of California.

Also in 1958, in an unrelated move that had huge implications for San Francisco's clinical teaching environment, officials at Stanford University in Palo Alto moved their Medical School's clinical training to be closer to basic science instruction at Stanford. This move was highly contested by eminent Stanford clinicians who wished to stay in the more abundant clinical environment of San Francisco. Stanford's departure for Palo Alto created unequaled opportunities for UC professors, house staff, residents and medical students who took over the busy clinical services at San Francisco General, much to the advantage of the University of California.

By the mid-1950s federal grants from the National Institutes of Health soared to new levels bringing in unprecedented amounts of support to equip new research labs, hire research faculty and train graduate scientists. Pharmacologist Julius Comroe lost no time in recruiting investigators and applying for NIH training and research grants. The CVRI opened in 1958 and its first research programs involved participation of investigators from thirteen existing departments as well as CVRI staff. In an optimistic reaffirmation of Flexner's view of the proper configuration for a medical school, Comroe wrote: "Everything had suddenly come together in San Francisco. For the first time in fifty years, there was a structurally complete medical school with basic scientists and clinical faculty (a complete faculty) using the same corridors, lecture rooms, elevators, and lunchroom. Where once had stood an unimpressive group of outdated buildings housing only half the school's faculty, there was now a magnificent, connected group of high-rise buildings with new laboratories, many not yet occupied."

Despite these high hopes for the benefits of reconsolidating the medical school, one skeptical onlooker, physiologist Leslie Bennett, observed that "proximity doesn't guarantee that you'll have collaboration." Indeed, despite the promise of new facilities, the Parnassus campus was dominated by clinicians with an entrenched system of financial arrangements who were a long way from a strict full time system. Although the arrival of the first-year basic sciences was heralded as a major improvement for campus instruction, this handful of new professors had little political clout on their new campus and would continue to be a minority voice in the medical politics of the Parnassus campus. In its first year, the CVRI was already fostering some important interdisciplinary research, but most influential campus department chairs had held office for many years with no outside review and remained suspicious of any radical campus change.



Julius Comroe

In 1958 the UC School of Medicine had a strong reputation for being a good regional medical school, known for excellence in technical surgery and expert physical diagnosis, but only a handful of new recruits were struggling to set up research programs. The most important question for the immediate future was how quickly this relatively isolated, tradition-bound west coast medical school would be able to integrate itself into the transforming mainstream of American medical education and biological research.

Millberry Union and the Social Unification of the Campus

Dentistry continued under the leadership of Dean Willard Fleming, whose popularity with students was well-known and whose stature as vice-Provost kept dentistry in the mainstream of the developing Parnassus campus. It was a fitting tribute to the School of Dentistry, and its longtime dean Guy S. Millberry, when, in 1958, the 175,000 square foot Millberry Union opened, for the first time creating, ample facilities for recreation, student housing, cafeteria, and a bookstore on the Parnassus campus. Millberry Union's very existence was the direct result of Dentistry's long history of promoting student body spirit, recreation and unity. The Millberry Union site on the north side of Parnassus Avenue had been acquired by the College of Dentistry in the early twentieth century and donated to the Regents for erection of a student union. Moreover, Dentistry's maintenance of tennis courts on campus, its sponsorship of "the shack" cafeteria in 1921, and the Dental Supply Store in 1925, created a precedent for recreational facilities and served as a financial foundation for the 1958 facility. Proceeds from the cafeteria and

store acted as a focus for matching alumni donations and state funds to build a state of the art student union.



Construction of Millberry Union, 1956

Throughout the first half of the twentieth century, a disparate group of affiliated colleges and a training school for nurses had united geographically at Parnassus, and became mutually involved in delivery of patient care to the San Francisco and California public. Integration of the schools was a gradual process and was enhanced during the Depression by construction of the Clinics Building in 1933. Following World War II, they were nominally linked in the Regent's formal naming of the University of California Medical Center in 1949, and by 1956, all four were designated as "Schools."

The construction of the impressive high-rise medical buildings along Parnassus Avenue, and the return of the Medical School's basic science departments in 1958 was the final culmination of a long process. A campus observer in the mid-1960s, wrote that with the completion of Moffitt Hospital, two phases of the Medical Science buildings, and Millberry Union, "the interaction of the four schools became a reality in practice as well as theory."

Each school had, in its own way, heeded the call to professionalize by working for legal regulation, determining more rigorous educational standards, and absorbing and applying new scientific disciplines and technological developments. The University of California Medical Center and its fully integrated professional schools would now move beyond the instructional and professionalizing tasks of the early twentieth century into the era of federally funded research and ever more sophisticated modes of patient care. For the remaining decades of the twentieth century, the major institutional challenge would be to achieve an effective balance of teaching, scientific research, and patient care within a fully independent UC Health Sciences campus.

1959-1989

Modernization and the Expansion of Scientific and Clinical Training

An Emerging Identity for the Health Sciences Campus

The period 1959-1989 witnessed a revolution in the health sciences and biomedical industries. At the beginning of the period there was no recombinant DNA technology, no biotechnology industry, no genetically engineered human growth hormone, interferon or hepatitis B vaccine, no "transgenic" mice to serve as disease models for everything from cancer to obesity, no proof for oncogenes, no genetically altered food, no gene therapy, no gene patents, no DNA fingerprinting. It was a revolutionary period for genetics research, and faculty at UCSF became leaders in multiple fields. Whether in research, teaching or community service, each school during this era of UCSF's history made substantial innovations and contributions.



UCSF, aerial view, 1975

The San Francisco campus of the University of California was given full administrative independence to control its educational and financial matters in 1964. In 1970, the University of California, San Francisco Medical Center was renamed the University of California, San Francisco, by the Regents, in recognition of the diversity of disciplines on campus and for uniformity with the other UC campuses. The "Medical Center" continued to refer to the hospitals and clinics on Parnassus. The period saw a revolution in the health sciences and the creation of the biotechnology industry that has

made the San Francisco Bay Area and UCSF so notable as an innovator in biomedical research. Beginning in the mid 1960s, reforms in graduate teaching and interschool collaboration—particularly integrating basic science training with clinical instruction—resulted in pioneering programs across all four Schools, the new Graduate Division, and the UCSF Medical Center, catapulting UCSF to the top ranks of US institutions for education and research in the health sciences.

At the beginning of the period 1959-1989, no pharmacists or pharmacy students worked

in patient areas in hospitals. But in the mid 1960s the UCSF School of Pharmacy initiated a national trend by introducing its Clinical Pharmacy program, training pharmacists as patient-oriented drug therapists. A number of its faculty received the Ebert Prize, awarded by the American Pharmaceutical Association for best research paper in the profession, and the school's programs in biopharmaceutics, pharmacokinetics and computer graphics were the most advanced in the world.



The new School of Nursing building, completed in 1972, is located just off 'Saunders Court' where the original building that housed the Schools of Medicine, Pharmacy and Dentistry once stood.

In 1972, when the new School of Nursing building was dedicated, it served the needs of some 600 students, 120 campus faculty and 80 adjunct faculty members.

Under the direction of Helen Nahm, who was appointed Dean of Nursing in 1958, the School was the first in the West to develop a doctoral program in nursing, and was unique by being the only School of Nursing in the country to establish a Department of Social and Behavioral Science, demonstrating its educational emphasis in both biological and social sciences.

In 1959, the American Dental Association's Council on Dental Education reported that the UCSF School of Dentistry led the nation's den-

tal schools in the performance of graduates on the Dental National Board Examination, a requirement for state or regional licensure. In 1980, a year before its 100th anniversary, the School of Dentistry dedicated its own new building with outstanding new clinical facilities to replace obsolete clinics and equipment, which had jeopardized the school's accreditation a few years previously.

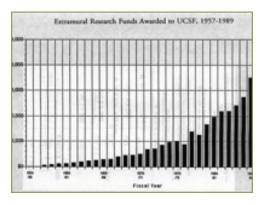


Mobile Dental Clinic 1966

Establishing a tradition of community outreach as represented in its establishment of the Mobile Dental Clinic in 1965, the school opened two outreach facilities in 1979 in underserved areas of San Francisco—the UCSF Community Dental Clinics at 100 Buchanan Street and at San Francisco General Hospital.

The Medical Center continued to expand. By the 1980s, the hospitals cared for an average

of 20,000 inpatients annually, while the clinics at the Ambulatory Care Center received an average of 190,000 patient visits each year, plus 25,000 emergency room visits. By 1990, UCSF's four schools and the Graduate Division graduated an average of 244 advanced practice or doctorally prepared nurses, 146 physicians, 108 dentists, 110 pharmacists, and 44 doctoral researchers each year. The University employed over 11,000 people, making UCSF one of the largest employers in San Francisco. Always highly ranked in obtaining competitive research grants, it had by the 1980s regularly received more NIH dollars than any other health science campus in the country. At the end of the 1980s, UCSF's annual operating budget was \$555 million.



This graph shows the increase in extramural research funding at UCSF from the mid-1950s to the 1980s

Throughout this period, the San Francisco campus began to find its own identity as a fully-fledged university. Developments in student and campus life services generated new special interest opportunities and events on campus. In September of 1958, Guy S. Millberry Union opened and became a hub of campus life on Parnassus Avenue for students, faculty, staff, alumni, neighbors and guests. The University of California had provided Student Union facilities at all campuses with undergraduate education programs, but that policy left out the San Francisco "Medical Center". The original idea for a student center stretched back to the 1920s, when students from the School of Dentistry developed

a student store and cafeteria. Guy Millberry, dean of dentistry from 1914-1939, both supported that enterprise and invested its proceeds. By the 1950s, that investment fund provided the financing for the complex of a gymnasium, swimming pool, fitness and recreation centers, conference rooms and cafeterias now named in his honor.



Student Council in Millberry Union lobby, 1966

Throughout the years, numerous student organizations within the schools of dentistry, medicine, nursing, pharmacy, and the Graduate Division have been established, ranging from chapters of professional organizations to groups whose purpose is outreach via various health-related projects to the emergence of an interdisciplinary Medical Humanities program.

Among the members of the UCSF community who were able to enjoy the benefits of Millberry

Union's facilities were the personnel of the General Services Department, the employees who provided all the services with regard to facility maintenance without which no medical center or university could exist. The extension of these privileges to these employees was not automatic, however, and took the efforts of campus organizations

including the Black Caucus, founded on May 4, 1968, exactly one month after the assassination of Dr. Martin Luther King, Jr. Recognizing that UCSF itself reflected social and economic relations as they exist in Bay Area communities, the Black Caucus was established as a forum to obtain a black consensus on racial matters that affect every person on campus. The Caucus, which was responsible for publishing the Black Bulletin, communicated directly with the Chancellor's office and fought for changes in the employment conditions for minorities on campus, including immediate changes in the classification from janitors to custodian, resulting in a retroactive pay increase by 25%, and creating an Outstanding Performance Award for persons in the General Services Department. The Caucus was also instrumental in establishing new student recruitment goals for each of the schools at UCSF to increase minority admissions by 25% each year.

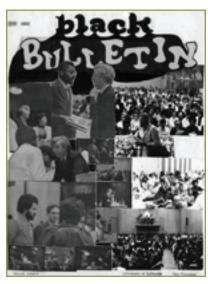


Photo montage from the June 1971 issue of the Black Bulletin.

Modernizing the UC Medical Center



Langley Porter Psychiatric Institute

By the 1960s the Parnassus site was shedding its identity as "Cal's medical center" and reference to the UC Medical Center pertained to a variety of clinics, research centers, and hospitals that provided a diverse range of patient care and teaching programs for medical, nursing, dental, pharmacy, and graduate students. In 1960 the UC Hospital began two refurbishment projects to update the 1917 structure.

The Medical Center included the Langley Porter Neuropsychiatric Institute (completed in 1943 and became part of the Medical Center's accreditation in 1962), the Herbert C. Mof-

fitt Hospital (the largest general teaching hospital in the western US when it opened in 1955), and the new 'clinics building', later referred to as the Ambulatory Care Center, which opened in 1973. In addition, the Medical Center was responsible for the teaching programs and assisting in the provision of patient care through affiliation with San Francisco General Hospital, Laguna Honda Hospital, and the Veterans Administration Hospital at Fort Miley.



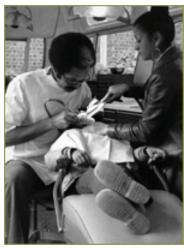
The Ambulatory Care Center, 1974

The three School of Medicine departments that were formerly at Berkeley—Anatomy, Biochemistry, and Physiology—had, by winter 1958, completed their move to the new Medical Sciences Building at Parnassus, thus returning the first 2 years of medical school instruction to the San Francisco campus. But the Medical Center—as UCSF was then called —also promoted campus events and activities across all the schools and the Graduate Division in lunch hour Discussion Series such as the "Health Sciences and the Problems of Man" interdepartmental seminar. The Medical Center Library

was equipped with a broad reference collection in all aspects of the health sciences. The literature ranged from contemporary formulations of biological theory to handbooks of psychiatric nursing.

UCSF's clinical and teaching activities also moved beyond San Francisco to provide service to underserved populations in rural California. In 1972, the University of California Area Health Education Center (AHEC) was established, as part of a nationwide program funded by the Department of Health, Education and Welfare, to help address the health care shortage in underserved areas such as the Central San Joaquin Valley. This led to the creation of the UCSF School of Medicine in Fresno to train medical students and house staff in Valley medical facilities. Also as part of this effort, the School of Pharmacy established a Drug Information and Analysis Center that employed pharmacists and rotated pharmacy students in what was then known as the Valley Medical Center. The Regional Medical Program was another federally-funded program in the 1960s that was designed to speed dissemination of information and services from university healthcare centers to practicing clinicians in community facilities throughout smaller towns and rural areas. This program also enabled the spread of UCSF expertise to outlying areas of Northern California and the central valley.

Also providing care to underserved communities in the Valley was UCSF School of Dentistry. The Mobile Dental Clinic program, headed by Marvin Stark, DDS, had been working in the community since 1965, regularly visiting such places as the California School of the Deaf to offer screening and referral services. Beginning in 1970, the program enlarged and began visiting migrant farm workers' camps in the San Joaquin and Sacramento Valleys with mobile clinics to provide definitive dental treatment to the workers' children. Recruitment efforts at the School of Dentistry had also focused on students from disadvantaged and minority backgrounds under the school's federally-funded Program for the Recruitment and Retention of Disadvantaged Students (RAR). More than 90% of the disadvantaged and minority students who graduated from UCSF School



UCSF dentists in the Mobile Dental Clinic, 1974

of Dentistry in the decade following its inception in 1968 returned to the communities from which they came.

The Medical Center had long faced financial struggles owing to the unique medical challenges commonly faced by academic medical centers and which tertiary care facilities and referral hospitals often face. The costs of running the center were always substantial, involving a number of expenses beyond patient care, including teaching costs, training grants and trainees, research expenses, costs to modernize and purchase new



By the 1980s, the UC Medical Center at Parnassus oversaw 570 beds that served 20,000 inpatients each year. The outpatient clinics provided care for more than 135,000 patient visits each year.

equipment. Yet the UCSF Medical Center has been required to operate on a substantially self-supporting basis.

In November 1982, Dr. William B. Kerr, director of the UCSF Hospitals and Clinics, was advised by the office of the MediCal Special Negotiator that UCSF would not be one of the hospitals in San Francisco County to receive a contract to provide care for MediCal patients. As a state-wide referral center for patients who needed specialized care and in some cases unique diagnostic and treatment services, this was a discouraging decision. It was estimated at that time that approximately 15% of all patients at Moffitt and UC Hospital were Medi-

Cal beneficiaries (about 2900 patients a year). This translated into a projected loss of \$16 million a year in revenue.

Despite many challenges to the management of the Medical Center, expansion continued. In 1983 the fifteen-story Joseph M. Long Hospital was dedicated. The new hospital featured the Francis A. Sooy Surgical Pavilion and an adjacent post-anesthesia recovery room on the fourth floor, the Herbst Emergency Service Pavilion on the first floor; the Walter Haas Radiation Oncology Pavilion on the ground floor; new physical therapy, inhalation therapy and pharmacy units, plus a whole array of new diagnostic facilities, including a newly-invented Nuclear Magnetic Resonance (NMR) imaging (now known as Magnetic Resonance Imaging [MRI]).



UCSF Mt. Zion Hospital

The Cardiovascular Research Institute expanded its thirteenth floor space from Moffitt. It cost \$71 million, supported by \$36 million from state and university funds, an \$11 million state bond, and millions from foundations and private individuals.

In December 1984 UCSF and Mt. Zion Hospital and Medical Center entered into an agreement committing both to develop a strategic plan to consolidate and coordinate programs and resources.

This arrangement led to the establishment of a Mt. Zion / UCSF Foundation to coordinate fund-raising, and collaboration on determining functions and responsibilities of academic leadership, coordination of teaching and clinical programs, and providing a broader primary care base in the community.

Updates to Campus Buildings

The old Medical School Building was demolished in 1967. In the period from the 1960s to 1980s, the University negotiated a number of refurbishments to the aging buildings such as the UC Hospital, originally completed in 1917, and the Clinics Building which was originally completed in 1933 to accommodate medical and dental outpatient clinics.

Other buildings were demolished in this period, such as the old Medical School Building – completed in 1898 and located in what is now the quad between the Medical Sciences Building and the School of Nursing – as well as the Residence Hall at 610 Parnassus which was demolished in 1973.



The old Medical School Building was demolished in 1967.



Health Sciences West tower, completed in 1966

New buildings included University House which opened in 1965 to be used as the Chancellor's Residence, and the two glass towers behind the Medical Science and Clinical buildings called Health Science East and West, which were completed in 1966. In 1972, the "Moffitt Modernization Project" was finalizing plans for updating the hospital. The

School of Nursing building was competed in 1972 and the Ambulatory Care Center building on the opposite side of Parnassus

Avenue was completed in 1973. In 1975, UCSF occupied over 3,000,000 square feet of clinical, research and office space.

Francis A. Sooy became the fourth chancellor of the campus in 1972. His tenure saw the culmination of efforts that began in the 1950s that gained UCSF recognition locally and nationally as a premier health sciences campus and UCSF became one of the most successful research universities in the country. The new School of Dentistry building



Francis A. Sooy

(1980), the modernized Moffitt Hospital projects (1980), and the new Long Hospital (1983) were completed. Sooy recruited outstanding physicians and researchers for some of the top campus positions, including three new deans.

In addition, UCSF was able to turn around its relationship with the surrounding community from outright hostility in some quarters to pride and participation in UCSF. As part of a series of accommodations to neighborhood and state legislative concerns about further growth, in the 1976 Long Range Development Plan, the Regents adopted several policies to limit growth at the Parnassus Heights site. The Regents designated 58 acres on the steep slopes of Mount Sutro as an open space reserve, and designated the boundaries of the campus so as to limit the further acquisition or leasing of property by UCSF. Certain houses at the western border of the campus, on Third and Fifth Avenues in particular, were to be returned to residential use from office uses, and a transportation study was funded. Most importantly, the Regents limited the amount of built space at the Parnassus Heights site to 3.55 million gross square feet, and recognized the principle of limiting the average daily population there.



The old dental clinics in what is now referred to as the Clinical Sciences Building.



The new School of Dentistry building, completed in 1980

With the space limitation in place, Parnassus researchers found themselves in increasingly cramped quarters. This lack of space prevented faculty from pursuing additional research as the National Institutes of Health (NIH) budget expanded and forced some to share space with researchers in unrelated fields. Ironically, this intermingling of researchers ultimately led to scientific collaborations that would not have otherwise taken place.

Meanwhile the School of Dentistry – one of only two dental schools in northern Califor-

nia – had long outgrown its previous space in the Clinical Sciences and Medical Sciences buildings, and was at risk of losing its accreditation if the problems of shortage of space and facilities were not resolved. By 1980, both the refurbishment of Moffitt Hospital and the construction of the new School of Dentistry were complete.



Construction of the UCSF Library (the building to the left of the crane)

In 1977 the University of California Office of the President agreed to plans for the construction of a new UCSF library. With help from a \$400 million general obligation bond, the plan was to start construction in 1987 for the new facility to house the 600,000 volume collection as well as reading rooms, study rooms and facilities for instructional technology. The building opened in 1990 and was officially dedicated in March 1991 at UCSF's Founders Day.

In 1985 UCSF acquired the Laurel Heights site in an effort to alleviate crowded conditions on the Parnassus campus. This episode began a

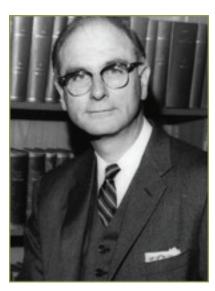
long legal battle with the Laurel Heights Improvement Association, concerned about the Environmental Impact Report that detailed plans for UCSF's use of Laurel Heights. The report included plans for the relocation the majority of the faculty, staff and research facilities of the School of Pharmacy and pharmacology labs. In 1991 the California Court of Appeal ruled in UCSF's favor that it did not misrepresent development plans and Laurel Heights eventually grew to become a fully occupied campus of UCSF, housing social science and humanities departments, health policy researchers, and administrative arms of various university and departmental offices. Only a small contingent of the School of Pharmacy's faculty and staff eventually took up occupancy at Laurel Heights.

The Formation of the Graduate Division

In 1961, the Regents of the University decentralized graduate education and San Francisco, which had previously been under the jurisdiction of Berkeley's administration, was organized as an independent Graduate Division with its own dean and graduate council. The Division was formed to provide leadership for graduate education and to serve as an administrative home for student admissions, degree progression, the appointment and advancement of postdoctoral scholars, and the development of campus policies affecting both students and postdoctoral scholars (post-docs). These responsibilities soon grew to include student recruitment, the acquisition and management of fellowship

awards, review of graduate academic programs, development of new academic degree programs, and the provision of student and post-doc services to enhance campus life. The dean of the Graduate Division shared overall responsibility for graduate academic matters and postdoctoral scholar appointments with the Graduate Council, a standing committee of the San Francisco Division of the Academic Senate.

In the fall of 1961, Dean Harold Harper, UCSF Professor of Biochemistry, was appointed and the Graduate Council was established to oversee graduate programs in: anatomy, biochemistry, comparative biochemistry, biophysics, dental surgery, dentistry, endocrinology, history of medicine, medical physics, microbiology, nursing, nutrition, pathology, comparative pathology, pharmaceutical chemistry, pharmacology, comparative pharmacology and toxicology, physiology, and animal physiology. In 1965, a doctorate degree in nursing science and in psychology commenced and in 1968 the Sociology PhD program in the School of Nursing was established. Harold Harper served as graduate dean for twenty years, and in 1981, UCSF Professor of Microbiology and Immunology Lloyd Kozloff was appointed as dean and served until 1991.



Harold Harper, first Dean of the Graduate Division



Dr. Barbara Koenig and Dr. Jessica Muller conducting research as part of a Medical Anthropology participant observation study, "On the Boundary of Life and Death: Care of the Dying by Medical Residents."

Throughout the 1970s and 1980s the list of graduate programs that were approved continued to grow, including PhD programs in medical anthropology (approved in 1973), human development (1975), neuroscience (1976), Doctor of Mental Health Degree (DMH) (1976), genetics (1977), immunology (1979), and nursing (1983). Additionally, a unique organizational structure was formed between UCSF and other UC campuses through the offering of joint Ph.D. degree programs: Speech and Hearing Sciences (UCSF and UC Santa Barbara 1972); Medical Anthropology (UCSF and UC Berkeley 1975); and, Bioengineering (UCSF and UC Berkeley 1983). A partnership was also formed between UCSF and the California State Univer-

sity system through the development of the joint M.S. degree in Physical Therapy with San Francisco State University in 1989. The growth of graduate education has substantially shaped the prominence of innovative research at UCSF.

A new area of recruitment that involved both the School of Dentistry and the Graduate Division was generated by a grant from the National Institute of Dental Research to support graduate training in the basic sciences called the Research Teacher Training Grant, supporting eleven students a year for work leading to the PhD. This program, which was initiated in 1958, was directed by Dr. Howard Meyers, graduate advisor for the School of Dentistry.

Along similar lines, the School of Medicine and the Graduate Division sponsored the creation of the Medical Scientist Training Program (MSTP) in 1969. Funded by the US Public Health Service, the program offered a special stipend to students to pursue graduate work along with a medical degree in order to correct for the "lack of academic programs designed specifically to prepare physicians for faculty careers." The MSTP curriculum originally consisted of three years of medical school plus three years of formal graduate study, leading to the MD degree and either an MS or PhD degree depending on which requirements were satisfied. Originally, funding covered the costs for six students, which was expanded to twelve students in 1972, the same number of students who are admitted on this program in 2008. Applicants to this program are admitted separately to the medical school and to the graduate program.



School of Dentistry Prosthetics Lab

Intensive recruitment programs designed to increase the participation of underrepresented students in graduate programs began in the early 1980s with the advent of the NIMH-funded Undergraduate Summer Research Training Program. This program, which prepares undergraduates for careers in biomedical and social science research, continues today as a national model. The Graduate Division also led and funded numerous campus efforts to increase diversity in graduate education, both at UCSF and at other UC campuses.

Beginning with fewer than 300 students in 1961, the Division grew to 894 registered students in 1985: 361 PhD candidates, 443 master's students and 90 postgraduate professional doctoral students. The Graduate Division also oversaw the administration of some 700 postdoctoral scholars in 36 departments or Organized Research Units (ORUs).

Also by 1985 the remarkable advances in graduate education on campus generated enough demand for the creation of a separate graduation ceremony. The first Graduate Division commencement was held on June 7, 1985 in Cole Hall on Parnassus Campus.

In 2008 the Graduate Division oversees approximately 1,500 students in twenty graduate programs and five graduate certificate programs, as well as 1,100 postdoctoral scholars

Innovations in Professional Education

In 1964, Provost John Saunders became UCSF's first chancellor. A veteran of the medical school faculty, Chancellor Saunders came to the University in 1931 as an anatomy professor and was chair of the department from 1938-1956. He also served as chair of the History of the Health Sciences department from 1942-1975, Dean of the School of Medicine from 1956-63, University Librarian from 1943-1971, and the first provost from 1958-1964. Saunders resigned as Chancellor in 1966 and took a special Regents Chair in History of Medicine on the San Francisco Campus.

Saunders believed that training students and healing patients were the paramount duties of the medical center, with research ranking third. There was a well-documented perception that Saunders expressed his priorities by allocating resources to clinicians while stalling on approving appointments and allocating space to meet the needs of research-

minded department chairs.

In November 1964, frustrated by this lack of support for research, a group of ten professors from the School of Medicine, including Dean Reinhardt, sent a letter to UC President Clark Kerr asking for an urgent appointment to discuss the future of the San Francisco campus. These professors were committed to the vision of transforming the San Francisco Medical Center into a world-class research university.

In 1966, Willard C. Fleming, who had been an outstanding Dean of the School of Dentistry since 1939, became the second Chancellor of the campus. Chancellor Fleming was chosen from outside of the School of Medicine to



Willard C. Fleming

avoid further conflict between clinicians and researchers within the school, and his calm demeanor proved useful for stabilizing the faculty and supporting the growing research enterprise. The San Francisco Campus was now on the road to becoming a full-fledged research university.

In 1965 the School of Medicine announced a new division that marked another major shift in medical education and interschool collaboration. The Division of Ambulatory and Community Medicine developed a four year integrated curriculum to provide training in the problems of poverty, overpopulation, urbanization, rural health, community mental health and aging populations. Dr. William Reinhardt, Dean of the School of Medicine, appointed Dr. Robert H. Credé as its first chairman, who put in motion the development of a training program to emphasize out-of-hospital care, including family medicine and management of the patient in the home, the function of community health services, leadership by physicians in community medicine and the coordination of health care among professional groups. He also actively supported inter-professional learning between nursing and medical students, one factor in the later development of the nurse practitioner role.

In 1966, the School of Pharmacy developed an innovative program to test the use of clinically skilled pharmacists in a patient care area—the first such program in the United States.

Under what became known as the Clinical Pharmacy Program, pharmacy students, residents and faculty were trained to work at patients' bedsides to help administer drugs and make treatment decisions. Associate Dean Jere Goyan (who went on to become dean and later serve as Commissioner of the FDA), was instrumental in establishing the Clinical Pharmacy Program and continued to advocate for it during his deanship. Goyan, Department of Pharmacy Chair Sidney Riegelman and Vice-Chair Donald Sorby sought to establish a program in which physicians would have the opportunity to discuss drug uses and prescriptions with the pharmacist. With the support of School



A UCSF pharmacist advising a patient.

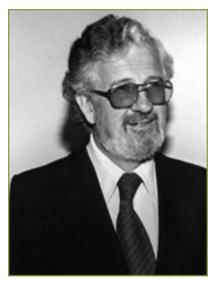
of Pharmacy Dean Troy C. Daniels and the approval of J. Englebert-Dunphy, acting Chancellor and Chair of the Department of Surgery, a "test site" was established in the surgical service on the ninth floor of Moffitt Hospital.

In a round-the-clock service available seven days a week—an operating schedule that was the first of its kind in the nation—a pharmacist was available to receive all orders, fill them if possible from unit-dose stock in the mini-pharmacy, and dispatch the remainder to the central pharmacy. Pharmacists also monitored patients for side effects and offered advice on "rational drug therapy" providing on-site recommendations for prescribing any of the approved hospital drugs (which in 1985 had grown to the order of some 850 different drugs). From the beginning, the presence of pharmacists in the wards and at the beside stimulated drug-related queries from nurses, intern/residents, and residents, and pharmacists became part of the hospitals Code Blue (cardiopulmonary resuscitation) Team bringing emergency drugs to the patient. Within the first year following its foundation in 1966, the progress of clinical pharmacy was articulated by William E. Smith, the first resident organizer:

The practice of pharmacy on the hospital floor appears to be a logical and direct method to help solve the various problems associated with modern complex drug therapy and drug distribution. Several members of the surgical and nursing personnel ... have expressed their acceptance of the pharmacist on the patient care team because he adds to the overall effort of providing care. The pharmacists believe that the type of service developed ... is the only kind of pharmaceutical service that should exist in the hospital.

During Jere Goyan's tenure as dean, the UCSF School of Pharmacy became the leader among pharmacy schools nationwide in research as measured by federal research funding, and has since consistently ranked first in the academic quality of its doctor of pharmacy program. Goyan's conviction that clinical experience should be part of a pharmacist's training and practice, while revolutionary when he proposed it, is now accepted internationally. Thousands of pharmacists across the nation owe a debt of gratitude to this man for his influence on their practices.

In a ten-year development plan written in 1967 (the year that Goyan became Dean), the School of Pharmacy committed itself to a revision of the curriculum that would enable the entire terminal year to be devoted to a combination of inpatient and outpatient clerkships. It was a



Pharmacy Dean Jere Goyan

radical shift in the training of pharmacists and in the organization of hospital pharmaceutical care. Clinical pharmacy also created the pain consultation service, organized by Peter Koo and physicians James Morris and Richard Crayne in 1979 as a low back pain program under the aegis of the Department of Orthopaedic Surgery.

Under Dean Helen Nahm's leadership from January 1958, a number of curricular changes in the School of Nursing occurred, revolutionizing the education of nurses in a number of pioneering undergraduate and graduate programs. In fall 1959, all nursing instruction moved from Berkeley to the San Francisco campus, while a number of new faculty appointments were made which paved the way for the development of new courses and areas of concentration. By 1960 the school had 42 faculty members and grants from the National Institute for Mental Health, National Heart Institute, National Cancer Institute and the Rockefeller Sealantic Fund to help support new teaching and research innovations for faculty and students. Throughout the 1960s and early 1970s, the number of master's degree students in nursing surged from eighteen students in 1958 to over 200 in 1975. In



Helen Nahm

the period from 1959 to 1975 the framework of the master's program in nursing shifted from an emphasis on teaching and administration to a clinical focus, initially in four major areas (medical-surgical, maternal-child, psychiatric-mental health, and community health nursing) and then to a wider range of more defined specialties, with the clinical specialist, and somewhat later, the nurse practitioner roles joining educator and administrator roles.

Another significant development in the School of Nursing curricula was the establishment of a doctoral program in nursing in 1965. In 1972 the School of Nursing established the Department of Social and Behavioral Sciences, another first at a health science campus anywhere, following the establishment of the PhD program in Medical Sociology in 1968 with the leadership of Professor Anselm Strauss. During the 1970s nurse practitioner programs developed, initially in pediatric and maternity areas, then to address adult health needs, and then families. These transitioned in a few years from continuing education offerings, designed for practicing nurses, into specializations in the masters program. The programs used a wide range of clinical teaching sites, including community clinics, physician offices, and outpatient clinics in the Bay area, even, for the family nurse practitioner program, extending to the Fresno AHEC Center.

The Medical Scientist Training Program (MSTP) was a significant development of an earlier innovation in the form of the Summer Research Training Program (SRTP), which also emphasized basic science research training for medical students. In 1962 a grant was obtained from the NIH to support the program, which was soon directed by Dr. Chauncey Leake. The program gathered further financial support from US Public Health Service grants, voluntary health agencies and private industry. Similar to the aims of the MSTP, the purpose of this program was "to recognize, encourage and prepare outstanding students to enter some field of academic medicine" and to provide competitive stipends to compete with alternate non-medical jobs students may pursue in the summer to earn money.

Rapid technological developments stimulated by the Bay Area orientation to Silicon Valley and information technology helped the early development of innovative computer research labs. In 1977, the School of Pharmacy's Computer Graphics Laboratory was established through the efforts of Robert Langridge and Tom Ferrin to make computer models of proteins and molecules.

Langridge had been a graduate student in Maurice Wilkins's lab at King's College, London, conducting x-ray studies of DNA and by the time of his arrival at UCSF had spent time at Yale, Harvard, Chicago and MIT. Langridge's lab allowed researchers to analyze the interaction of molecules using three-dimensional computer modeling. Among the first investigations using the Computer Graphics Laboratory was the Acting Dean of the School of Pharmacy, Eugene Jorgensen's, study of the thyroid hormone thyroxine which led to his development of the drug DIMIT. Today the UCSF Computer Graphics Laboratory (CGL) is home to the Resource for Biocomputing, Visualization, and Informatics (RBVI), a NIH National Center for Research Resources Biomedical Technology



UCSF faculty, students, and staff protest the US invasion of Cambodia, May 1970

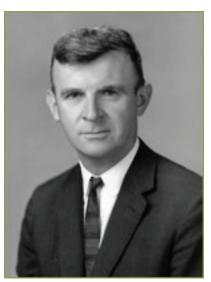
Resource Center for the integrated analysis of biological sequence, structure, and functional information. The other major components of the Center include the Babbitt Laboratory and the Sequence Analysis and Consulting Service (SACS).

Phillip R. Lee became UCSF's third chancellor in 1969, coming to UCSF from his post as U.S. Assistant Secretary for Health and Scientific Affairs, Department of Health, Education, and Welfare.

He was also given a title unique in the UC system, Professor of Social Medicine, because of his national and international background in health policy. Chancellor Lee led the campus during a time of political and social turmoil created by Viet Nam war protests and the Civil Rights Movement. His understanding of social forces and his close relationship to students and staff allowed UCSF to continue its commitment to academic excellence and establish affirmative action. He was especially noted for his efforts to stimulate minority recruitment and enrollment.

During his tenure as chancellor, the San Francisco Medical Center was renamed the "University of California, San Francisco" in 1970 and became the only health sciences campus in UC's nine-campus system.

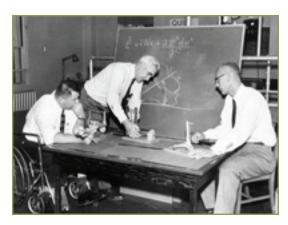
Lee remained chancellor until 1972, when he started UCSF's Health Policy Program – the first of its kind in the U.S., now emulated by many institutions across the country as a legitimate discipline in which to study health sciences issues. Under his leadership, the program became an Organized Research Unit in 1981, when it was renamed the Institute for Health Policy Studies. As one of the nation's foremost authorities in the study of equal access to health care, Dr. Lee was a frequent adviser to federal health policy makers.



Philip R. Lee

Other technologies such as those in neonatal intensive care transformed the practice of pediatrics at UCSF, but not without raising ethical and moral questions about life-preserving technological interventions. In 1972, Chancellor Lee invited Albert Jonsen, PhD, to join the new Institute for Health Policy to study the ethical aspects of health policy. Trained in philosophy and theology, Jonsen had left his position as President of the University of San Francisco and UCSF's was one of only two secular medical schools (the other being Pennsylvania State University) to have a professor of medical ethics on the faculty. In 1974, under the encouragement of Dean Julius Krevans, Jonsen was appointed associate professor of bioethics and developed innovative courses for medical students on the social impact of evolving medical technologies and practices. Aspects of this work continue to this day in the Department of Anthropology, History and Social Medicine.

Innovations in Research



Biomechanics laboratory, 1957

From the time of the creation of the Biomechanics Laboratory (1957) and the Cardio-vascular Research Institute (1958), organized research units (ORUs) and centers continued to be established largely as a result of the successful recruitment of national research grants and private endowments. Among the developments throughout this period were:

1963	Clinical Study Center at San Francisco General Hospital
1964	The Kidney Transplant service begins under John Najarian. Sam Kountz takes over as Director in 1967 and helps to make the service the world's largest
1967	Hormone Research Laboratory moves from Berkeley to Parnassus under Choh Hao Li . Four years later Li synthesizes human growth hormone.
1969	Benson Roe performs UCSF's first heart transplant.
1972	The Brain Tumor Research Center opens
1972	Health Policy Program, supported with a grant from the Robert Wood Johnson Foundation and directed by Philip Lee, established to identify major health policy issues and provide government officials with technical assistance.
1972	Herbert Boyer and Stanford colleague Stanley Cohen develop rDNA technology.
1974	Julius Schachter discovers Chlamydia as a cause of pneumonia in newborns. His lab moves to SFGH and becomes world leader in Chlamydia research.

When Helen Nahm became Dean of the School of Nursing in 1958, she was advised of the central role that original research was expected to play in faculty work in profession-

al schools. In 1963, the School of Nursing Faculty Organization established the Research Committee, which early on had \$7,500 to allocate annually for research projects, and throughout the following decade approaches to research modeled after the laboratory sciences on the one hand, and the social sciences on the other, began to take shape. However a number of projects among School of Nursing faculty resulted in publications that had immediate and long-lasting impact on both the clinical and social understanding of health care and became landmark publications for research methodologies. This includes Jeanne Quint's 1967 book The Nurse and the Dying Patient and the studies on death in hospitals by Barney Glaser and Anselm Strauss, Awareness of Dying (1965) and Discovery of Grounded Theory: Strategies for Qualitative Research (1967). With increasing numbers of faculty trained with PhDs, research further



Margretta Styles

flourished in the 1980s, particularly under the leadership of Dean Margretta Styles (dean 1977-1986). Styles allocated resources, catalyzed the development of a faculty that viewed research as an integral part of their work, and supported successful efforts to develop extramural research funding.

When Jane Norbeck became Dean of the School of Nursing in 1989, faculty identified "research clusters" that promoted innovative approaches in areas such as symptom management, HIV/AIDS, family health and disease prevention. These initiatives subsequently evolved into organized centers for research such as the Institute for Health and Aging, The Research Center for Symptom Management, the International Center for HIV/AIDS Research and Clinical Training in Nursing.

Biotechnology



Some of the UCSF/UC Berkeley crew in 1981 working on the development of an early clinical MRI

In 1975, following its success in proving the usefulness of CT Scanning, the UCSF Department of Radiology funded a small startup R&D operation involving a handful of engineers and physicists charged with the task of developing Nuclear Magnetic Resonance (NMR, now known as MRI) as a viable imaging instrument for soft tissues in the human body.

In 1983, this pioneering group produced clear, dramatic images, featured at the Radiological Society of North America in 1983, obtained FDA pre-market approval for their device, and directed some of the first clinical placements of NMR imagers in the United States.

In 1973 UC San Francisco biochemist Herbert Boyer and his Stanford collaborator Stanley Cohen revolutionized the field of biology by sketching out, on a paper napkin in a Hawaii delicatessen, a plan which became the technique for recombinant DNA or gene splicing. Boyer went on to co-found Genentech Corporation in 1976.

In 1977, William Rutter and colleagues achieved the first major triumph of genetic engineering by isolating the gene for rat insulin and transplanting it into bacteria, creating protein "factories" in the process. This led to the development at UCSF and elsewhere of a whole new group of artificially-created therapeutic products, such as

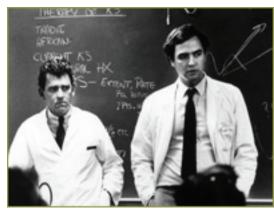
hepatitis B vaccine, and the mass-production of substances produced naturally in only minute amounts, such as human growth hormone and human insulin. It also created a whole new approach to research in the biological sciences. In 1986, William Rutter cloned the gene for hepatitis B and Chiron Corporation, which Rutter co-founded, distributed the first genetically engineered human vaccine.

In 1976 virologists J. Michael Bishop and Harold Varmus discovered that "oncogenes" – cancer-causing genes – can be found in many forms of life, including humans. This finding led to a new understanding of how normal cells are transformed into cancer cells by environmental, hormonal or other factors. It also led to the now widely accepted view that oncogenes are responsible for at least some cancers. Bishop and Varmus received numerous awards, including the Albert Lasker Award for Basic Medical Research (1982) and the Nobel Prize in Physiology or Medicine (1989), for this work.

In 1982, Stanley Prusiner identified prions, an entirely new infectious agent implicated in rare slowly progressing brain diseases such as mad cow disease in cattle and Creutzfeldt-Jakob disease in humans. Composed solely of protein, prions are able to replicate, aggregate and cause deadly infections without RNA or DNA, the first infectious agents known to do so. The discovery of prions led to breakthroughs in research for neurogenerative diseases such as Alzheimer's and Parkinson's. In 1990, UCSF received \$3 million to establish the W.M. Keck Foundation Center for Integrative Neuroscience. Under the direction of Stephen G. Lisberger, the Center combines studies of the brain and behavior in an effort to uncover the biology underlying such serious health problems as Alzheimer's and Parkinson's diseases. Dr. Prusiner has won numerous awards for this research, including the Nobel Prize in Physiology or Medicine in 1997.

UCSF and the AIDS epidemic

In 1983 UCSF clinicians and researchers started the country's first outpatient AIDS clinic and inpatient ward at San Francisco General Hospital and mounted an enormous multidisciplinary effort to fight the disease. This was barely two years after the first AIDS cases from Los Angeles were reported in the Morbidity and Mortality Weekly Report (MMWR) on June 5, 1981. Before long it was recognized that the mysterious illness—which was first known as GRID,



Marcus Conant and Paul Volberding discussing Kaposi's Sarcoma, 1981

gay-related immune deficiency—was present among gay men in San Francisco, where the number of reported cases rapidly multiplied over the next few years. Unlike anywhere else, the gay community in San Francisco united to encourage political and social support and care for the patients, while the medical teams at UCSF and San Francisco General Hospital struggled to identify and treat the disease, which was linked to HIV in 1984.

A diverse group of physicians and researchers were brought together to explore the epidemic:

- Dr. Jay Levy, a virologist who originally recognized what he termed ARV—AIDS Related Virus;
- Dr. Merle Sande, Chief of Medical Services at SFGH who brought together the State of California, the City and County of San Francisco, the University of California San Francisco, San Francisco General Hospital, and the Gladstone Foundation to build and fund the Gladstone Institute of Virology and Immunology, a research institute dedicated to the study of virology and immunology with a focus on HIV and AIDS;
- Dr. Paul Volberding, who developed the AIDS Clinic at SFGH, and was instrumental in developing the "San Francisco Model" of comprehensive AIDS care.
- Dr. John Ziegler, who moved to UCSF in 1981 as professor of medicine in residence, and Chief of Staff for Education at the VA Hospital, and who was the first to show an association with malignant lymphoma. Ziegler became the Director of the UCSF AIDS Clinical Research Center and made many scientific contributions in the area of HIV-associated malignancies, both in the USA and in Uganda;
- Dr. Arthur Ammann, a pediatric immunologist who observed a puzzling case of immune deficiency in three infant sisters and recognized the link to AIDS, initiating pediatric AIDS research;
- Dr. Marcus Conant, a dermatologist who observed the unusual cases of Kaposi's sarcoma and was one of the organizers of the SFGH clinic;
- Dr. Constance Wofsy, an infectious disease specialist who treated patients with Pneumocytosis and began referring them to be seen by Dr. Paul Volberding who was treating patients with Kaposi's Sarcoma.

Wofsy, who went on to become an international expert in Pneumocytosis and AIDS

in women, joined Volberding and Dr. Donald Abrams as the original "AIDS physician team" in the new clinic at SFGH. Another addition to AIDS research and treatment was provided by Drs. Deborah Greenspan, a specialist in oral medicine, and John Greenspan, an oral pathologist, both at UCSF's School of Dentistry. The Greenspans pioneered the role of dentistry in AIDS research. Deborah Greenspan investigated the relation of oral lesions to the presence and progression of AIDS, and, with help from basic scientists Evelyne Lennette and Harold zur Hausen, identified hairy leukoplakia which became a diagnostic marker of AIDS. Through his pathological investigations, John Greenspan linked lymphoma to the immunodeficiency of the patients with Pneumocytosis and Kaposi's sarcoma. The list of faculty from across UCSF and the Medical Center who were involved in the crucial early developments in the recognition and treatment of HIV/AIDS continues, and researchers are encouraged to consult the collections in the AIDS History Project for more information.

Program in Biological Research (PIBS)

In 1988, UCSF received a \$13.75 million five year grant from Miami-based Lucille P. Markey Charitable Trust to help create a new academic program that transcends departmental boundaries for biological research, called the Program in Biological Research (PIBS). It focused on using tools from genetics, molecular biology, and immunology, and was directed by J. Michael Bishop, who was also the Director of the Hooper Foundation. That same year, UCSF received \$7.1 million four year grant from the National Institute of Mental Health and the National Institute of Drug Abuse to expand its AIDS research. This grant supplemented a \$3 million grant awarded the previous year to establish a new Center for AIDS Prevention Studies (CAPS). The program created a unique collaborative partnership between UCSF, the San Francisco Department of Public Health, and the Bayview Hunters Point Foundation.

Planning the Future

In 1987 chancellor Julius Krevans formed the Faculty Committee on the Future of UCSF consisting of members elected by the schools' and Graduate Division's deans. The committee reviewed programmatic goals, involving existing and new academic programs, and considered issues surrounding the development of the campus and future space needs. The committee identified six programmatic goals that would begin to shape the future of the curriculum and strengthen research collaborations. The areas were:

- 1. To develop interdisciplinary clinical research with close ties to the basic sciences
- 2. To consolidate and expand social and behavioral sciences
- 3. To develop shared facilities involving the application of large instruments for structural biology groups
- 4. To consider the possibility of creating advanced undergraduate programs in the health sciences
- 5. To promote interactions with biotechnology and other relevant health-related disciplines in the industrial sector
- 6. To develop programs to conquer AIDS and other diseases caused by retroviruses

The future space requirements for the campus were identified as requiring action along the following lines:

- 1. To develop Laurel Heights as a vital academic center
- 2. To acquire 50-100 acres to develop as a major campus site to preserve options for the future
- 3. To acquire additional clinical facilities to free up clinical space immediately with no net increase of beds in the community
- 4. To maximize utilization of Parnassus Heights space resources by scrutinizing existing space use and programs, renovate, and build new research space

A number of these goals have been met over the past twenty years. As the campus continues to grow—developing into new spaces at Mission Bay, integrating teaching in the Social and Behavioral Sciences and Medical Humanities within the core curricula and graduate instruction, promoting bioentrepreneurship and biotechnological advancement, and continuing to receive outstanding support for research in all areas of the health sciences—UCSF will have exceeded these goals and will be moving forward to reach its new mission: "advancing health worldwide." A summary of some of the achievements and innovations post-1989 is provided in the final section of this history.

1990-2000



UCSF, aerial view, 1988

1990	UCSF acquires Mount Zion Hospital.
1990	Construction begins on Gladstone Institute of Virology and Immunology at SFGH.
1990	UCSF receives \$3 million to establish the W.M. Keck Foundation Center for Integrative Neuroscience.
1991	Millie-Hughes Fulford, UCSF research scientist becomes part of space shuttle Columbia crew that conducts experiments on bone density loss.
1991	School of Nursing introduces the Master's Entry Program in Nursing (MEPN).
1991	School of Nursing establishes the Research Center for Symptom Management.
1991	School of Dentistry establishes the NIH Pain Research Center within the department of oral and maxillofacial surgery.
1992	DNSc degree program in the School of Nursing closes admissions; PhD remains the only doctoral program.
1993	Gladstone Institute of Virology opens at SFGH.
1994	Valencia Pediatric Practice, later renamed with expanded services, Valencia Health Services, sponsored by the School of Nursing.
1995	Completion of ground floor classrooms, part of campus education center re-development, and enhanced mezzanine commons and café space in the School of Nursing building.
1995	School of Pharmacy establishes the San Francisco Branch of the United States Cochrane Center.
1996	Graduate Division combines Ph.D. programs in Anatomy, Endocrinology, Experimental Pathology, and Physiology to form a new Graduate Group and Ph.D. program in Biomedical Sciences.

1997	Stanley Prusiner wins Nobel Prize in Physiology or Medicine for his dis-
	covery of prions.
1997	UC Regents approve Mission Bay as the site for UCSF's new campus and enter into an agreement with Catellus Development Corporation and the City and County of San Francisco for the donation of 43 acres of property in Mission Bay. The Mission Bay campus allows UCSF to double its research space, speed the pace of biomedical discovery, and help prepare a new generation of students. Phase 1 construction of \$800 million included four research buildings, a campus community center, a student housing complex, two parking structures, and development of large open space. By 2006, about 1400 faculty, students, scholars and staff are located at the UCSF Mission Bay campus. At full build-out, 9,100 people are expected to work and study there.
1997	School of Pharmacy develops and establishes the California Poison Control System, a system for providing uniform poison services for the entire state via satellite centers at four locations throughout the State.
1997	UCSF Medical Center merges with Stanford Health Services to become UCSF Stanford Health Care. The merger is ultimately deemed unsuccessful and the 2 institutions de-merge in 2000.
1997	Glide Memorial Clinic, as a joint project of the School of Nursing and Catholic Healthcare West, begins operation.
1998	School of Dentistry creates The Postbaccalaureate Program, aimed at preparing disadvantaged students for entry into oral health care higher education.
1998	School of Pharmacy leads in the creation of three new cross-campus PhD programs: Biological and Medical Informatics, Pharmaceutical Sciences and Pharmacogenomics, and, with the School of Medicine, Chemistry and Chemical Biology.
1998	School of Pharmacy radically alters its Doctor of Pharmacy curriculum to establish innovative specialty pathways (Pharmaceutical Care, Pharmaceutical Health Policy and Management, Pharmaceutical Sciences).
1999	School of Dentistry completes modernization of all its Predoctoral Clinics.
1999	School of Nursing ranks first among nursing schools in NIH funding.
2000	De-merger of the UCSF Stanford Health Care.

Leadership

UCSF Chancellors:

- Julius R. Krevans (1982-1993)
- Joseph B. Martin (1993-1997)
- Haile T. Debas (1997-1998)
- J. Michael Bishop (1998-present)

Deans (Dentistry):

- John C. Greene (1981-1994)
- Karin Vargervik, Interim (1994-1995)
- Charles N. Bertolami (1995-2007)
- John Featherstone, Interim (2007-present)

Deans (Graduate Division):

- Lloyd Kozloff, PhD (1981-1991)
- C. Clifford Attkisson, Ph.D., Interim (1991-1992); Dean and Associate Vice Chancellor of Student Academic Affairs (1992-2005)
- Patricia Calarco, Ph.D., Interim (2005-2007); Dean (2007-present)

Deans (Medicine):

- Joseph Martin (1989-1993)
- Haile Debas (1993-2003)
- David Kessler (2003-2007)
- Samuel Hawgood, Interim (2007-present)

Deans (Nursing):

- Jane S. Norbeck: (1989-1999)
- Kathleen Dracup (2000-present)

Deans (Pharmacy):

- Jere E. Goyan (1967-1992)
- George L. Kenyon (1993-1998)
- Mary Anne Koda-Kimble (1998-present).

Directors (Medical Center): William B. Kerr (1977-2000)

• Mark R. Laret (2001-Present)

2000+



UCSF Mission Bay campus, 2003. Photo by Majed.

2000	School of Medicine radically redesigns the core curriculum to promote integration of disciplines, bringing cultural, social, and behavioral factors into the teaching of biomedical and clinical issues.
2000	School of Pharmacy establishes the Center for Consumer Self Care.
2000	The name of the Graduate Division's M.S. and Ph.D. program in Medical Information Science is changed to the M.S. and Ph.D. program in Biological and Medical Informatics by approval of the Graduate Council and Chancellor Bishop.
2000	Ph.D. program in Chemistry and Chemical Biology is established in the Graduate Division.
2000	UCSF Certificate Program in Clinical Research is approved by the Graduate Council.
2001	The newly created International Dentist Program enrolls its first class of students
2001	The Ph.D. program in Pharmaceutical Sciences and Pharmacogenomics is established.
2002	The Master's of Advanced Studies degree (MAS) in Clinical Research is established in the Graduate Division.
2002	Graduate Division establishes joint UCSF/San Francisco State University Doctorate in Physical Therapy Sciences (DPTSc).
2002	School of Pharmacy establishes satellite clinical teaching programs in Fresno and South Bay.

2003	Genentech Hall opens at the Mission Bay campus. With more than 400,000 gross square feet, it houses programs in structural and chemical biology and molecular cell and developmental biology, the Molecular Design Institute, the Center for Advanced Technology, a library, an auditorium, and commercial space.
2003	The names of the M.S. and Ph.D. programs in Oral Biology are changed to the M.S. and Ph.D. programs in Oral and Craniofacial Sciences with approval of the Graduate Council and Chancellor Bishop.
2004	Arthur and Toni Rembe Rock Hall opens at the Mission Bay campus. It houses programs in human genetics, developmental biology, developmental neuroscience, and the Center for Brain Development.
2004	Revised curriculum implemented for the School of Dentistry, creating new interdepartmental courses developed around five thematic streams that emphasize and reinforce the integration of basic sciences and clinical sciences in dental education.
2004	Graduate Division establishes joint UCSF/San Francisco State University Doctorate in Physical Therapy (DPT).
2004	The Betty Irene Moore Doctoral Fellowship program launched in the School of Nursing.
2005	School of Dentistry re-aligns its departmental structure to form the departments of: Cell and Tissue Biology, Oral and Maxillofacial Surgery, Orofacial Sciences, and Preventive and Restorative Dental Sciences.
2005	Byers Hall, The California Institute for Quantitative Biosciences (QB3) opens as the home for the California Institute of Science and Innovation (Cal ISI) at the Mission Bay campus. This is the headquarters for the Institute, which is a partnership with UC Berkeley and UC Santa Cruz. QB3 is one of the four California Institutes for Science and Innovation, developed at the initiative of Governor Grey Davis, and the only one focused on biomedical research to advance human health. Research here is intensely computational, integrating physical, mathematical and engineering sciences to tackle the complexities of genomics, proteomics, protein folding and interactions, and developing imaging systems of unprecedented power and resolution for diagnosis and treatment of disease.
2005	UCSF On-Line Certificate Program in Pain Management is approved by Graduate Council.
2006	Elizabeth Blackburn wins Albert Lasker Award for Medical Research for the prediction and discovery of the telomerase enzyme which plays a key role in cell aging and human cancer.

2006	UCSF establishes Clinical and Translational Science Institute as largest recipient of NIH Clinical and Translational Science Awards.
2006	Helen Diller Family Cancer Research Building breaks ground on the Mission
2000	Bay campus. It will contain research and development programs in neurologi-
	cal surgery, urology and cancer research.
2006	School of Dentistry celebrates its 125th anniversary.
2006	Graduate Division establishes Ph.D. program in Developmental Biology.
2006	UCSF Certificate Program in Global Health Sciences is approved by Graduate
2000	Council.
2006	School of Pharmacy is the #1 recipient among schools of pharmacy of NIH
	funding for the 27th consecutive year.
2006	The Schools of Dentistry, Pharmacy, Nursing, Medicine and the Graduate Division offer the first inter-disciplinary class for all enrolled students.
2007	School of Medicine expands enrollment for first time in three decades with
	launch of the Program in Medical Education for the Urban Underserved
	(PRIME-US,) aimed at educating and inspiring new physicians to address
	health disparities.
2007	School of Pharmacy establishes the Medications Outcomes Center.
2007	Graduate Division establishes joint UCSF/Fresno State Doctorate in Physical Therapy (DPT).
2007	School of Dentistry is the #1 recipient among schools of dentistry of NIH
2007	funding for the 16th consecutive year.
2007	•
2007	School of Nursing celebrates its centennial anniversary.
2008	UCSF breaks ground on new building at Parnassus to house Institute for Re-
	generation Medicine, to be home for 25 stem cell and regeneration medicine
	researchers.
2008	School of Medicine establishes new academic Department of Emergency Medicine.
2008	Graduate Division establishes Master's of Science in Global Health Sciences.
2008	School of Pharmacy establishes satellite clinical teaching programs in North
	Bay.
2008	School of Pharmacy and School of Medicine establish a joint department:
	Bioengineering and Therapeutic Sciences.
	Disensineering and Therapeane Sciences.

Leadership

UCSF Chancellors:

• J. Michael Bishop (1998-present)

Deans (Dentistry):

- Charles N. Bertolami (1995-2007)
- John Featherstone, Interim (2007-present)

Deans (Graduate Division)

- C. Clifford Attkisson, Ph.D., Interim (1991-1992); Dean and Associate Vice Chancellor of Student Academic Affairs (1992-2005)
- Patricia Calarco, Ph.D., Interim (2005-2007); Dean (2007-present)

Deans (Medicine):

- Haile Debas (1993-2003)
- David Kessler (2003-2007)
- Samuel Hawgood, Interim (2007-present)

Deans (Nursing):

• Kathleen Dracup (2000-present)

Deans (Pharmacy):

Mary Anne Koda-Kimble (1998-present).

Directors (Medical Center)

- William B. Kerr (1977-2000)
- Mark R. Laret (2001-Present)

About This History

The UCSF History website is a collaboration of the UCSF Library and Center for Knowledge Management and the UCSF Department of Anthropology, History, and Social Medicine.

Funding for the project was provided by the Office of the Executive Vice Chancellor and Provost, A. Eugene Washington.

The cooperation and support of the UCSF Schools of Dentistry, Medicine, Nursing, and Pharmacy, the Graduate Division, and the UCSF Medical Center was vital to the success of the project.

Acknowledgements and Credits

Website editorial board

- Dorothy Porter, Ph.D., Chair UCSF School of Medicine, Department of Anthropology, History, and Social Medicine
- Troy E. Daniels, DDS, MS UCSF School of Dentistry
- Marilyn Flood, Ph.D., RN UCSF School of Nursing
- Robert L. Day, Pharm. D. UCSF School of Pharmacy
- Karen Nelson, MA UCSF Graduate Division
- Kathleen Balestreri UCSF Medical Center

Website content

- Nancy Rockafellar, PhD Author, Story 1868-1959, Biographies, Special Topics
- Brian Dolan, PhD Author, Story 1959--; editor, 1868-1959
- Joseph LaDou, M.D. Author, Special Topics

Archival Photos

Courtesy of UCSF Library

UCSF Library staff

- Lisa Mix, Manager, Archives & Special Collections
- Leslie Kleinberg, Website Project Manager
- Josue Hurtado, Assistant Archivist
- Julia Kochi, Director, Digital Library and Collections

We are grateful to the following UCSF Library staff for their support of the project:

- Karen Butter, University Librarian
- Sadie Honey, Web Services Manager
- Kathleen Cameron, Manager, Digital Content Development
- Renaud Waldura, Manager, Applications Group

Web design

• Shaun Webb

RESEARCH

This section contains research-related data from the following sources:

- NIH rankings NIH website
- Extramural Awards by Type C&G Year End Summaries
- Extramural Awards Trends Budget Overview class
- NSF rankings NSF website
- PI Statistics To be developed

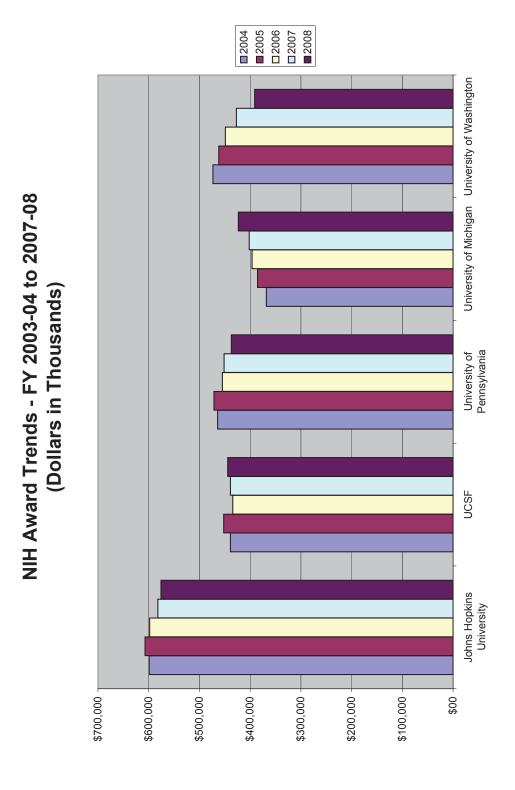
Chapter Contents

NIH Awards Ranked by 2008 Dollars	215
NIH Award Trends - FY 2003-04 to FY 2007-08	216
Extramural Awards by Type	217
UCSF Awards 1999-2008	219
UCSF Federal Awards 1999-2008	220
UCSF Awards FY 1999 - 2008	221
UCSF Proposals FY 1999-2008	221
UCSF Awards by Sponsor 2007-2008	222
UCSF Federal Awards 2007-2008	223
UCSF Awards by School 2007-2008	224
UCSF Awards 2002 - 2008	225
Extramural Award Trends	226
National Science Foundation Survey	227
R&D Expenditures at Universities and Colleges: FY 2007	227
Non-Federal Financed R&D Expenditures at Universities and Colleges	228
R&D Expenditures in the Life Sciences at Universities and Colleges	229

Total Federally Financed R&D Expend. in the Medical Sciences at Univ. and Colleges	230
Total and Federally Financed R&D Expend. in Chemistry at Universities and Colleges	231

NIH Awards Ranked by 2008 Dollars FY 2003-04 to FY 2007-08 (Dollars in Thousands)

Rank	Institution	2003-04	2004-05	2005-06	2006-07	2007-08
1	Johns Hopkins University	\$599,151	\$607,223	\$598,052	\$581,979	\$575,877
2	UCSF	\$438,779	\$452,165	\$434,287	\$438,999	\$444,294
3	University of Pennsylvania	\$464,077	\$471,350	\$454,730	\$451,454	\$437,107
4	University of Michigan	\$368,176	\$385,607	\$396,323	\$401,960	\$423,237
5	University of Washington	\$473,432	\$462,022	\$448,903	\$427,118	\$391,172
6	Washington University	\$388,308	\$394,788	\$377,940	\$374,061	\$379,201
7	University of Pittsburgh	\$360,635	\$385,680	\$376,752	\$386,162	\$377,393
8	Yale University	\$323,614	\$336,743	\$338,665	\$360,561	\$360,039
9	Duke University	\$343,825	\$391,196	\$430,785	\$385,692	\$358,351
10	UCLA	\$361,593	\$385,788	\$388,359	\$373,202	\$355,436



Research RESULTS	XL#	1,273	83	14	41	40	20	61	386	10	88	2,016	XL#	28	9	113	70	6	52	19	17	35	352	2,368
ICSF Office of Sponsored Research Date: 10/31/2008 - FINAL RESULTS	#Awds	953	22	12	33	20	1	99	351	6	92	1,576	#Awds	56	4	73	41	∞	47	19	16	32	266	1,842
Source: UCSF Office of Sponsored Research Date: 10/31/2008 - FINAL RESULTS	F&A Costs	108,509,316.00	3,774,708.00	593,481.00	2,656,780.00	13,508,003.00	859,741.00	335,821.00	11,929,426.00	207,467.00	0.00	142,374,743.00	F&A Costs	1,111,539.00	100,133.00	3,104,998.00	3,481,473.00	31,300.00	00:0	00:00	122,075.00	0.00	7,951,518.00	150,326,261.00
	Direct Costs	333,254,544.00	37,023,646.00	3,508,153.00	7,718,408.00	30,788,821.00	2,532,420.00	4,908,414.00	31,977,801.00	521,637.00	3,528,480.00	455,762,324.00	Direct Costs	13,810,413.00	971,331.00	33,560,627.00	26,580,073.00	377,771.00	4,213,502.00	2,450,566.55	999,227.00	1,381,922.00	84,345,432.55	540,107,756.55
icisco	Total Dollars	441,763,860.00	40,798,354.00	4,101,634.00	10,375,188.00	44,296,824.00	3,392,161.00	5,244,235.00	43,907,227.00	729,104.00	3,528,480.00	598,137,067.00	Total Dollars	14,921,952.00	1,071,464.00	36,665,625.00	30,061,546.00	409,071.00	4,213,502.00	2,450,566.55	1,121,302.00	1,381,922.00	92,296,950.55	690,434,017.55
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO EXTRAMURAL AWARDS BY TYPE 07/01/2007 - 06/30/2008 (All Awards) ALL CAMPUS UNITS	FEDERAL SOURCES	NIH Grants	Other DHHS Grants	NSF grants	Other Federal Grants	NIH Contracts	Other DHHS Contracts	Other Federal Contracts	Subcontracts (excluding SBIR/STTR)	Subcontracts(SBIR/STTR)	Fellowships(All Federal Sources)	Subtotal, Federal Sources	OTHER PUBLIC SOURCES	City/County of San Francisco	Other Bay Area Public Agencies	California Dept Health Services	Other California Public Agencies	Other Public Agencies	UC Programs(except IUCRP)	UC Discovery portion of IUCRP	Subcontracts(all above prime sources)	Fellowships(all above sources)	Subtotal, Other Public Sources	Subtotal, Public Sources

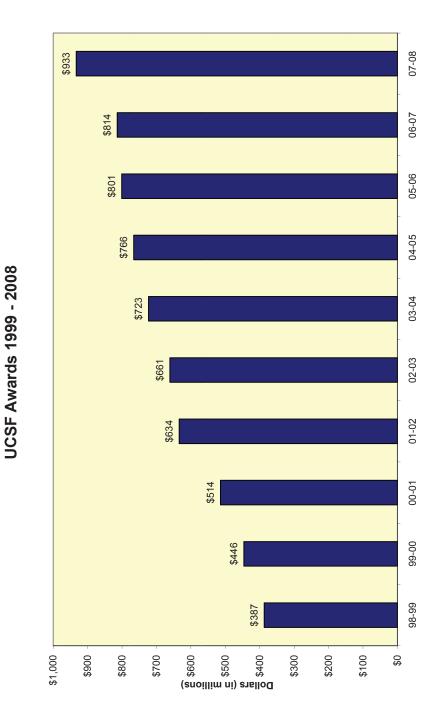
Note: Awards are selected for inclusion based on the budget period start da Results include actions processed through 4:00 PM on 10/31/2008.

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO EXTRAMURAL AWARDS BY TYPE 07/01/2007 - 06/30/2008 (All Awards) ALL CAMPUS UNITS	ACISCO		Source: UCSF Office of Sponsored Research Date: 10/31/2008 - FINAL RESULTS	CSF Office of Sponsored Research Date: 10/31/2008 - FINAL RESULTS	Research RESULTS
PRIVATE NON-PROFIT SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
Grants	118,602,799.00	111,240,664.00	7,362,135.00	559	613
Contracts	6,309,243.00	5,460,891.00	848,352.00	38	20
Subcontracts	5,114,347.00	4,683,911.00	430,436.00	54	61
Fellowships	8,898,803.00	8,898,803.00	0.00	197	225
Subtotal, Private, Non-Profit Sources	138,925,192.00	130,284,269.00	8,640,923.00	848	949
PRIVATE FOR-PROFIT SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
Grants	2,438,305.00	2,156,990.00	281,315.00	4	14
Contracts	98,870,151.65	81,622,218.54	17,247,933.11	392	430
Subcontracts	906,952.00	739,367.00	167,585.00	12	13
Fellowships	1,140,862.00	1,140,862.00	0.00	21	22
Subtotal, Private, For-Profit Sources	103,356,270.65	85,659,437.54	17,696,833.11	439	479
Subtotal, Private Sources	242,281,462.65	215,943,706.54	26,337,756.11	1,287	1,428
Miscellaneous Agreement Types	Total Dollars	Direct Costs	F&A Costs	#Awds	*L#
Advance Awards	0.00	0.00	0.00	152	152
Extensions	0.00	0.00	0.00	909	529
MTAs(Incoming),URCs	0.00	00.0	0.00	869	707
OTHER agreements	649,572.00	616,872.00	32,700.00	25	28
Subtotal, Misc Agreement Types	649,572.00	616,872.00	32,700.00	1,381	1,416
CUMULATIVE TOTAL	933,365,052.20	756,668,335.09	176,696,717.11	4,510	5,212

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 4:00 PM on 10/31/2008.

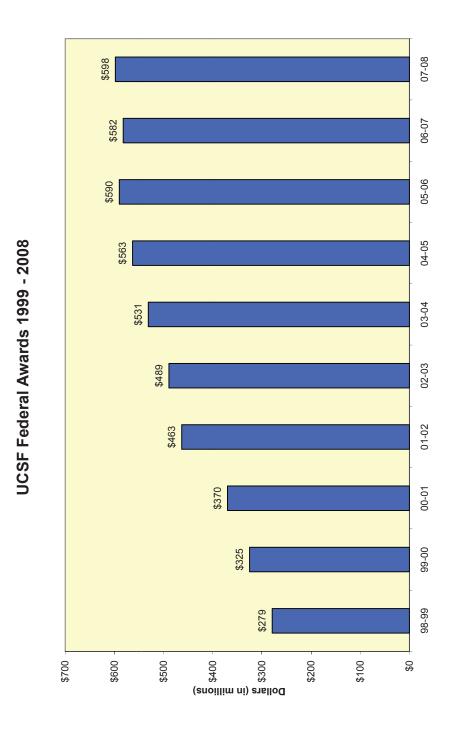
November 17, 2008

Source: UCSF Office of Sponsored Research



November 17, 2008

Source: UCSF Office of Sponsored Research



UCSF Awards FY 1999 - 2008

with % change since prior year (dollars in millions)

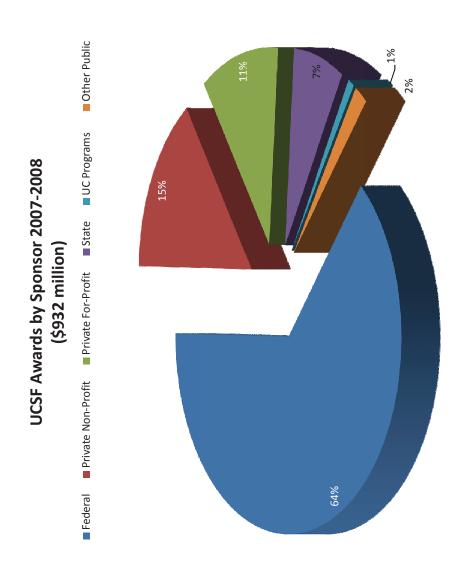
	F&A	%	Direct	%	Total	%		%
	Costs	Change	Costs	Change	Awards	Change	Count*	Change
FY 98-99	\$74		\$313		\$387		2,247	
FY 99-00	\$82	11%	\$364	16%	\$446	15.2%	2,622	17%
FY 00-01	\$95	16%	\$419	15%	\$514	15.2%	2,754	5%
FY 01-02	\$119	25%	\$515	23%	\$634	23.3%	3,036	10%
FY 02-03	\$131	10%	\$530	3%	\$661	4.3%	3,131	3%
FY 03-04	\$143	9%	\$580	9%	\$723	9.4%	3,274	5%
FY 04-05	\$148	3%	\$618	7%	\$766	5.9%	3,385	3%
FY 05-06	\$156	5%	\$645	4%	\$801	4.6%	2,934	-13%
FY 06-07	\$155	-1%	\$659	2%	\$814	1.6%	2,943	0%
FY 07-08	\$176	14%	\$757	15%	\$933	14.6%	3,129	6%

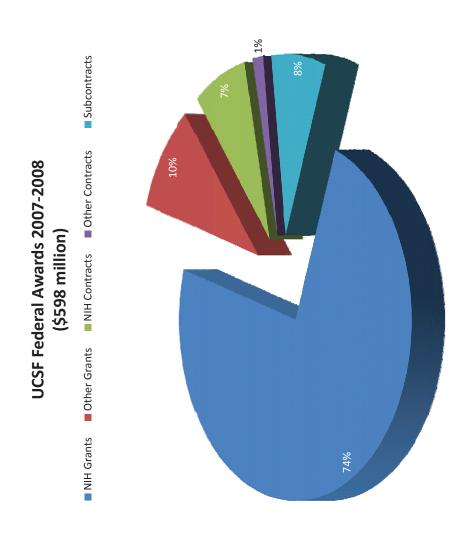
^{*} Change in accumulation method at FY05-06 from a count of award modifications to a count of unique awards

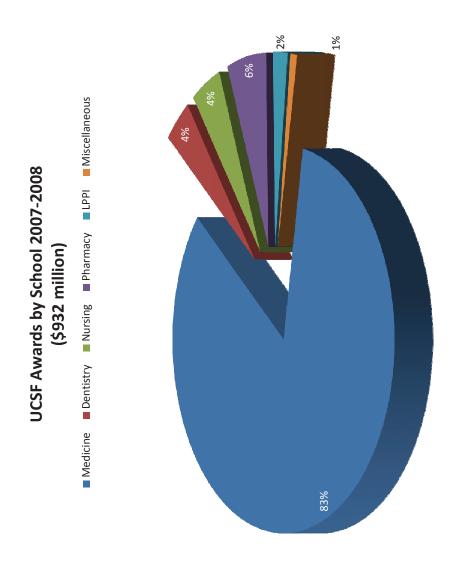
UCSF Proposals FY 1999 - 2008

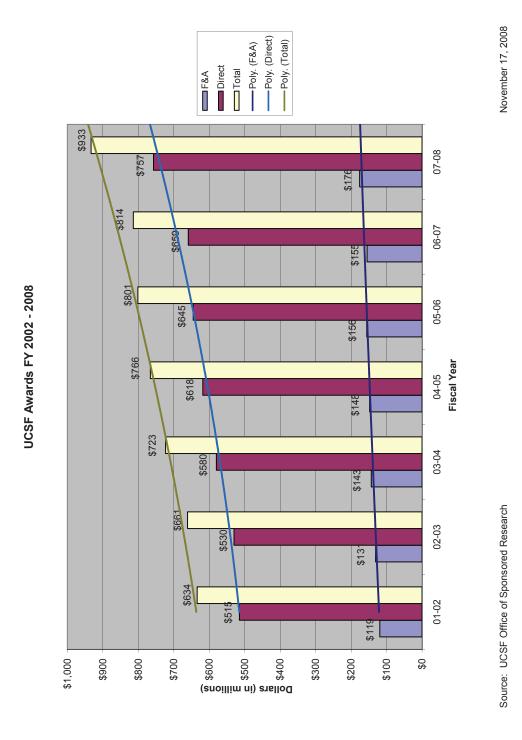
with % change since prior year (dollars in millions)

	F&A	%	Direct	%	Total	%		%
	Costs	Change	Costs	Change	Req'd	Change	Count	Change
FY 98-99	\$104		\$446		\$550		3,141	
FY 99-00	\$112	8%	\$476	7%	\$588	6.9%	3,273	4%
FY 00-01	\$125	12%	\$526	11%	\$651	10.7%	3,132	-4%
FY 01-02	\$151	21%	\$649	23%	\$800	22.9%	3,469	11%
FY 02-03	\$154	2%	\$594	-8%	\$748	-6.5%	3,624	4%
FY 03-04	\$179	16%	\$688	16%	\$867	15.9%	3,927	8%
FY 04-05	\$209	17%	\$801	16%	\$1,010	16.5%	4,230	8%
FY 05-06	\$236	13%	\$899	12%	\$1,135	12.4%	4,460	5%
FY 06-07	\$239	1%	\$889	-1%	\$1,128	-0.6%	4,866	9%
FY 07-08	\$240	0%	\$928	4%	\$1,168	3.5%	4,829	-1%





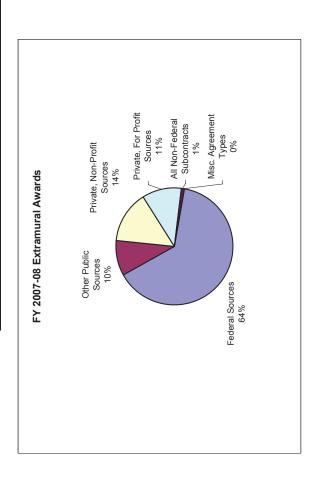




University of California, San Francisco Extramural Award Trends (Dollars in Millions)

Total Funds Awarded by Fiscal Year

Source of Awards	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08
Federal Sources (Grants, Contracts & Subcontracts)	\$370.4		,	\$530.6				\$598.1
Other Public Sources (State, City, et.)	\$49.6			\$62.4		\$67.6	\$71.3	\$92.3
Private, Non-Profit Sources	\$54.8			\$83.3				\$133.8
Private, For Profit Sources	\$33.3			\$41.0				\$102.4
All Non-Federal Subcontracts	\$6.1			\$5.5				\$6.0
Miscellaneous Agreement Types	\$0.0	\$0.0		\$0.0	\$0.0			
Total by Fiscal Year	ır: \$514.2	\$634.7	,	\$722.8		\$791.1	\$807.5	\$932.7



National Science Foundation Survey
Table 29: R&D Expenditures at Universities and Colleges,
Ranked by FY 2007 R&D Expenditures: FY 2000-07
(Dollars in thousands)

Rank Institution	2000	2001	2002	2003	2004	2005	2006	2007
1 Johns Hopkins Univ	\$901,156	\$999,246	\$1,140,235 \$	\$1,244,132	40	\$1,443,792	\$1,443,792 \$1,499,977	\$1,554,103
2 UCSF	\$443,013	\$524,975	\$596,965	\$671,443		\$754,444	\$796,149	
3 Univ. of WI Madision	\$554,361	\$604,143	\$662,101	\$717,044		\$798,099	\$831,895	\$840,672
4 UCLA	\$530,826	\$693,801	\$787,598	\$849,357		\$785,625	\$811,493	\$823,083
5 Univ. of Michigan all campuses	\$551,556	\$600,523	\$673,724	\$780,054		\$808,877	\$800,488	\$808,731
6 UC San Diego	\$518,559	\$556,533	\$585,008	\$646,508	\$708,690	\$721,035	\$754,766	\$798,896
7 Duke University	\$356,625	\$375,133	\$441,533	\$520,191		\$630,752	\$657,080	\$781,843
8 University of Washington	\$529,342	\$589,626	\$627,273	\$684,814		\$707,519	\$778,148	\$756,787
9 Ohio State Univ. all campuses	\$361,399	\$390,652	\$432,387	\$496,438		\$608,923	\$652,329	\$720,206
10 Stanford University	\$457,822	\$482 906	\$538 474	\$603 227		\$714 897	\$679 196	\$687.511

Table 31: Nonfederally Financed R&D expenditures at Universities and Colleges, Ranked by FY 2007 Expenditures: FY 2000-07 National Science Foundation Survey

(Dollars in thousands)

Rank Institution	2000	2001	2002	2003	2004	2005	2006	2007
1 Ohio State Univ. all campuses	\$229,180	\$229,560	\$254,504	\$297,950	\$233,413	\$314,870	\$336,415	\$406,964
2 UCSF	\$194,135	\$247,486	\$269,572	\$299,746	\$309,377	\$315,456	\$331,489	\$375,438
3 University of Wisconsin Madision	\$275,732	\$300,134	\$317,098	\$320,813	\$329,452	\$320,517	\$340,085	\$371,596
4 University of Florida	\$193,318	\$212,471	\$219,208	\$234,776	\$225,248	\$299,035	\$317,169	\$352,016
5 UC Davis	\$223,049	\$277,459	\$280,009	\$273,818	\$289,820	\$306,975	\$324,812	\$343,514
6 UCLA	\$256,664	\$380,943	\$420,836	\$428,183	\$311,424	\$315,736	\$327,620	\$334,237
7 UC San Diego	\$192,522	\$213,257	\$225,625	\$246,408	\$243,061	\$257,089	\$290,959	\$323,188
8 Duke University	\$152,445	\$157,024	\$180,177	\$213,327	\$172,975	\$254,184	\$242,661	\$322,721
9 Texas A&M University	\$247,629	\$257,659	\$273,193	\$279,116	\$283,104	\$266,812	\$286,713	\$315,525
10 Univ. of TX M.D. Anderson Cancer Ctr.	\$100,324	\$118,693	\$144,512	\$192,300	\$202,505	\$222,827	\$275,668	\$306,031

Table 50: R&D Expenditures in the Life Sciences at Universities and Colleges, Ranked by All FY 2007 Life Sciences: FY 2004-07 and by Subfield for FY 2007 (Dollars in thousands) **National Science Foundation Survey**

						2007		
								Life
				All Life	Agricultural	Biological	Medical	Sciences
Rank Institution	2004	2005	2006	Sciences	Sciences	Sciences	Sciences	Nec
1 UCSF	\$698,712	\$728,403	\$770,485	\$820,239	\$0	\$28,606	\$791,633	\$0
2 Johns Hopkins Univ.	\$619,835	\$674,083	\$702,207	\$692,380	\$0	\$192,686	\$470,397	\$29,297
3 Duke University	\$427,955	\$528,719	\$553,834	\$669,354		\$106,088	\$559,803	\$3,463
4 UCLA	\$562,755	\$585,436	\$609,514		\$0	\$20,469	\$591,779	\$0
5 Univ. of Wisconsin Madison	\$473,733	\$488,831	\$508,034	\$541,332		\$185,569	\$307,521	\$5,329
6 Univ. of Pennsylvania	\$480,121	\$528,225	\$546,624				\$333,479	\$15,701
7 Washington Univ. St. Louis	\$443,901	\$477,021	\$490,846				\$315,077	\$5,151
8 University of Washington	\$481,620	\$485,173	\$541,524		\$13,479		\$405,409	\$9,715
9 Univ. of Pittsburgh all campuses	\$396,405	\$449,147	\$458,627				\$459,250	\$12,433
10 Univ of Michigan all campuses	\$441 340	\$102 105	\$181 21E		¢0 000	4118 180	\$275 750	676 502

Table 54: Total and Federally Financed R&D Expenditures in the Medical Sciences at Universities and Colleges, Ranked by FY 2007 Total: FY 2004-07 **National Science Foundation Survey** (Dollars in thousands)

		Tota	al			Federally	financed	
Rank Institution	2004	2005	2006	2007	2004	2002	2006	2007
1 UCSF	\$655,164	\$684,829	\$726,412	\$791,633	\$363,563	\$386,327	\$409,402	\$430,118
2 Johns Hopkins Univ.	\$542,745	\$563,613	\$588,366	\$591,779	\$314,885	\$332,692	\$348,376	\$352,191
3 Duke University	\$355,060	\$449,006	\$445,961	\$559,803	\$219,195	\$242,207	\$254,542	\$290,692
4 UCLA	\$430,141	\$468,404	\$482,051	\$470,397	\$350,909	\$380,345	\$383,671	\$372,297
5 Univ. of Wisconsin Madison	\$372,068	\$424,482	\$431,979	\$459,260	\$316,980	\$341,308	\$344,632	\$363,436
6 Univ. of Pennsylvania	\$297,330	\$329,104	\$367,030	\$406,734	\$193,365	\$216,561	\$235,268	\$246,444
7 Washington Univ. St. Louis	\$374,135	\$380,970	\$425,425	\$405,409	\$328,194	\$327,365	\$356,361	\$335,062
8 University of Washington	\$352,967	\$369,032	\$367,077	\$386,323	\$278,738	\$294,503	\$293,745	\$305,272
9 Univ. of Pittsburgh all campuses	\$296,842	\$330,178	\$345,668	\$333,479	\$219,636	\$237,837	\$243,855	\$229,575
10 Univ. of Michigan all campuses	\$261,722	\$284,068	\$303,602	\$315,077	\$190,661	\$209,301	\$221,654	\$232,679

Table 58: Total and Federally Financed R&D Expenditures in the Chemistry at Universities and Colleges, Ranked by FY 2007 Total: FY 2004-07 **National Science Foundation Survey** (Dollars in thousands)

		Tot	al			Federally	financed	
Rank Institution	2004	2005	2006	2007	2004	2005	2006	2007
1 CA Institute of Technology	\$22,968	\$29,563	\$34,322	\$35,420	\$19,685	\$25,171	\$28,662	\$28,822
2 Harvard University	\$22,135	\$26,572	\$33,943	\$29,029	\$19,617	\$24,109	\$31,683	\$25,629
3 UC Berkeley	\$25,984	\$25,666	\$27,315	\$28,283	\$19,988	\$19,200	\$19,891	\$19,561
4 Univ. of IL Urbana-Champaign	\$21,217	\$22,603	\$25,034	\$27,981	\$14,295	\$15,694	\$16,496	\$19,674
5 TX A&M University	\$19,475	\$21,739	\$22,448	\$23,651	\$8,652	\$11,642	\$10,098	\$10,219
6 GA Inst. of Tech. all campuses	\$14,528	\$17,930	\$22,837	\$23,356	\$8,500	\$10,201	\$10,360	\$11,260
7 UCSF	\$29,609	\$26,041	\$25,664	\$22,601	\$22,215	\$19,621	\$19,962	\$15,957
8 UC San Diego	\$19,638	\$23,028	\$21,789	\$22,599	\$14,648	\$18,133	\$17,451	\$19,701
9 UCLA	\$20,453	\$18,377	\$18,381	\$22,325	\$15,453	\$14,666	\$13,491	\$17,123
10 Univ of TX Austin	\$24 154	\$25.818	424 247	\$21.782	£16 136	£16 523	\$15 163	\$14 173

FINANCIAL DATA

This section contains information from the UCSF Financial Schedules.

Chapter Contents

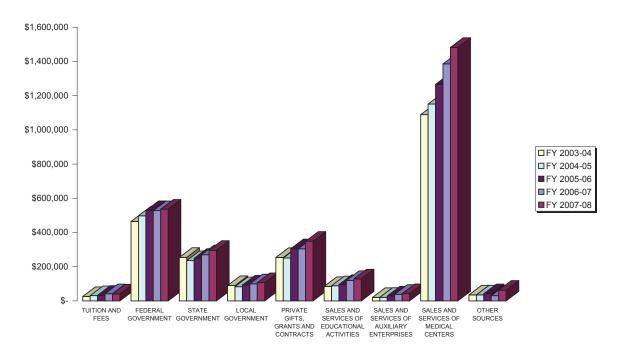
Current Funds Receipts Trended	234
5-Year Comparison of Current Fund Receipts	235
Current Funds Expenditures by Uniform Classification Category Trended	236
5-Year Comparison of Current Funds Expenditures by Uniform Classification Category	237
Financial Schedule 8A - Current Funds Receipts	238
Financial Schedule 8B - Current Funds Expenditures by Uniform Classification Category	239
Financial Schedule 8C - Current Funds Expenditures by Department	245
Financial Schedule 8D - Current Funds Expenditures by Fund Source	254
Financial Schedule 8E - Current Fund Expenditures by School and Source	259

SCHEDULE 8A CURRENT FUNDS RECEIPTS (Dollars in Thousands)

	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08
TUITION AND FEES	\$25,633	\$31,107	\$32,879	\$41,895	\$40,898
FEDERAL GOVERNMENT	\$464,176	\$497,737	\$527,983	\$527,670	\$536,330
STATE GOVERNMENT	\$254,498	\$235,593	\$249,244	\$270,157	\$295,635
LOCAL GOVERNMENT	\$89,885	\$83,015	\$92,640	\$99,974	\$106,920
PRIVATE GIFTS, GRANTS AND CONTRACTS	\$253,973	\$250,950	\$304,817	\$304,571	\$348,668
SALES AND SERVICES OF EDUCATIONAL ACTIVITIES	\$84,797	\$88,658	\$95,657	\$119,232	\$128,565
SALES AND SERVICES OF AUXILIARY ENTERPRISES	\$20,150	\$20,917	\$28,915	\$38,580	\$42,714
SALES AND SERVICES OF MEDICAL CENTERS	\$1,088,735	\$1,150,773	\$1,265,854	\$1,385,385	\$1,481,761
OTHER SOURCES	\$35,382	\$35,395	\$42,151	\$30,762	\$62,584
TOTAL:	\$2,317,229	\$2,394,145	\$2,640,140	\$2,818,226	\$3,044,076

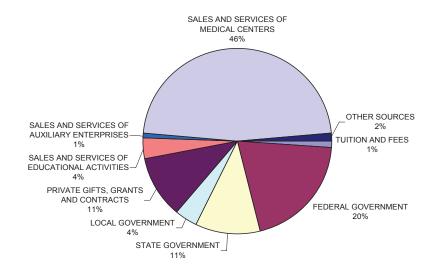
Source: UCSF Controller's Office

Current Funds Receipts FY 2003-04 to FY 2007-08

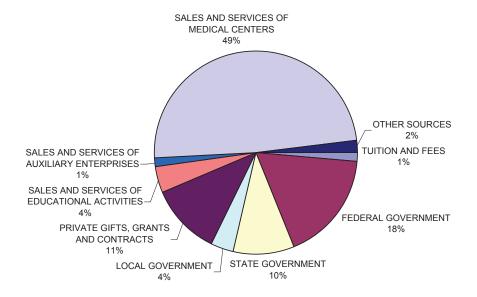


5-Year Comparison of Current Fund Receipts

FY 2003-04



FY 2007-08

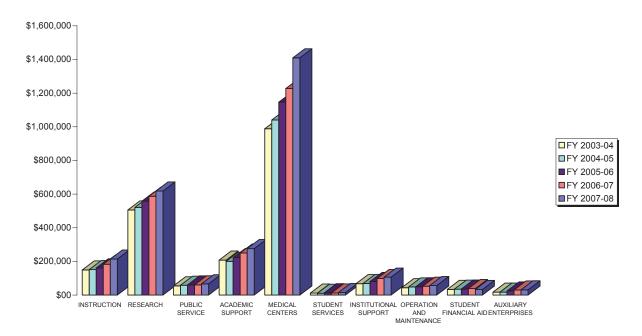


SCHEDULE 8-B
CURRENT FUNDS EXPENDITURES BY UNIFORM CLASSIFICATION CATEGORY
(Dollars in Thousands)

ſ	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08
INSTRUCTION	\$149,238	\$151,494	\$161,572	\$183,135	\$213,984
RESEARCH	\$505,727	\$521,108	\$558,149	\$587,376	\$618,250
PUBLIC SERVICE	\$54,723	\$58,268	\$60,399	\$60,746	\$66,898
ACADEMIC SUPPORT	\$207,755	\$200,512	\$222,798	\$249,864	\$276,168
MEDICAL CENTERS	\$988,310	\$1,040,844	\$1,146,488	\$1,227,486	\$1,409,687
STUDENT SERVICES	\$11,743	\$10,465	\$13,707	\$12,458	\$15,054
INSTITUTIONAL SUPPORT	\$67,782	\$68,976	\$80,918	\$98,094	\$106,473
OPERATION AND MAINTENANCE	\$43,613	\$48,467	\$49,095	\$52,673	\$56,452
STUDENT FINANCIAL AID	\$33,521	\$35,002	\$35,408	\$38,758	\$33,165
AUXILIARY ENTERPRISES	\$17,384	\$17,476	\$24,253	\$29,958	\$31,215
TOTAL:	\$2,079,796	\$2,152,612	\$2,352,788	\$2,540,548	\$2,827,346

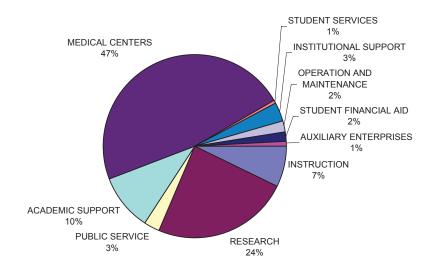
Source: UCSF Controller's Office

Current Funds Expenditures by Uniform Classification Category FY 2003-04 to FY 2007-08

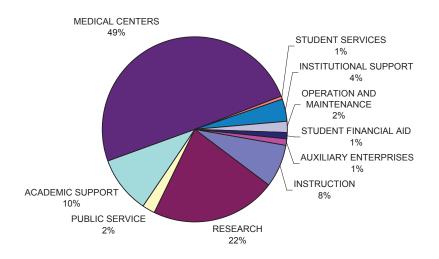


5-Year Comparison of Current Expenditures by Uniform Classification Category

FY 2003-04



FY 2007-08



FY 2007-08 SCHEDULE 8-A CURRENT FUNDS RECEIPTS (Dollars in Thousands)

		Total		Unres	stricted		Re	stricted
			G	eneral	De	esignated		
TUITION AND FEES Regular session	\$	59,147	\$	2,671	\$	56,476	\$	
Summer session	Ф	1,825	Φ	2,071	Ф	1,825	Φ	_
University extension and continuing education		-				-		-
Subtotal		60,973		2,671		58,302		-
Scholarship Allowance		(20,075)				(20,075)		-
Total		40,898		2,671		38,227		-
FEDERAL GOVERNMENT								
Appropriations		472 120		-		100.700		264.412
Grants Contracts		473,120 63,210		-		108,708 11,290		364,412 51,920
Total		536,330				119,998		416,332
	-	230,230			-	117,770		110,552
STATE GOVERNMENT Appropriations		231,272		231,272				_
Contracts		64,363		-		5,435		58,928
Total		295,635		231,272		5,435		58,928
LOCAL GOVERNMENT		106,920		_		1,767		105,153
PRIVATE GIFTS, GRANTS AND CONTRACTS		348,668				28,387		320,281
SALES AND SERVICES OF EDUCATIONAL ACTIVITIES		128,565		-		128,565		_

FY 2007-08 SCHEDULE 8-A CURRENT FUNDS RECEIPTS (Dollars in Thousands)

	Total	Unres	stricted	Restricted
		General	Designated	
SALES AND SERVICES OF AUXILIARY ENTERPRISES				
Intercollegiate athletics	-	-	-	-
Parking operations	11,536	-	11,536	-
Residence and dining halls	12,527	-	12,527	-
Student union and bookstore	18,078	-	18,078	-
Other	574		574	
Subtotal	42,714		42,714	
Scholarship Allowance				
Total	42,714		42,714	
SALES AND SERVICES OF MEDICAL CENTERS	1,481,761		1,481,761	
OTHER SOURCES				
Service enterprises	4,086	-	4,086	-
Other	58,498	18	58,480	
Subtotal	62,584	18	62,566	
Scholarship Allowance				
Total	62,584	18	62,566	
Total Current Funds Receipts	\$ 3,044,076	\$ 233,961	\$ 1,909,420	\$ 900,694

FY 2007-08 SCHEDULE 8-B CURRENT FUNDS EXPENDITURES BY UNIFORM CLASSIFICATION CATEGORY (Dollars in Thousands)

			Current Funds			Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
INSTRUCTION							
GENERAL ACADEMIC							
Health professions							
Medicine	\$ 152,171	\$ 61,278	\$ 35,844	\$ 55,049	\$ 296,181	\$ 60,181	\$ 204,191
Dentistry	22,296	12,329	9,204	763	15,710	6,631	45
Nursing	15,567	8,479	3,581	3,506	11,370	4,196	2.100
Pharmacy NeuroPysch	15,517	8,440	5,567	1,510	12,670	5,036	2,189
Interdisciplinary studies	847	(201)	945	102	63	9,718	8.935
Employee Benefits	286	286	743	102	-	286	0,933
Compensated absences accrual	2,625	280	2,166	179	2,487	137	_
•							
Total	209,308	90,892	57,307	61,109	338,481	86,186	215,358
SUMMER SESSION	456		456			456	
EDUCATIONAL FEE EXPENSE PRORATION	6,386	(18,232)	24,618			6,386	
Subtotal	216,150	72,660	82,381	61,109	338,481	93,027	215,358
ELIMINATED CAPITAL							
EXPENDITURES	(2,166)	(22)	(1,389)	(754)		(2,166)	
Total Instruction	213,984	72,638	80,992	60,355	338,481	90,862	215,358
RESEARCH							
INSTITUTES AND RESEARCH CENTERS							
Health professions	107.660	2.502	2.060	102.025	44.424	61.610	1 200
Medicine Other	107,668 6,046	2,583	2,060 1,176	103,025 4,870	44,424	64,642	1,399
Compensated absences accrual	1,806	136	206	1,465	3,492 1,715	2,554 91	
Total	115,520	2,719	3,441	109,360	49,631	67,288	1,399
INDIVIDUAL OR PROJECT RESEARCH							
Health professions							
Medicine	432,789	20,636	5,725	406,428	214,281	218,780	272
Dentistry	22,633	61	(125)	22,697	10,624	12,013	3
Nursing	14,983	13	(162)	15,133	9,620	5,364	- 220
Pharmacy Other	28,111 19.041	411 55	2,161 225	25,539	15,017 9,965	13,422 9,501	329 426
Other Employee Benefits	19,041	55 14	225	18,760	9,965	9,501 14	426
Interdisciplinary studies	2,511	422	4	2,086	1,428	1,083	-
Total	520,083	21,613	7,827	490,643	260,935	260,178	1,030
		,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Subtotal	635,602	24,331	11,269	600,002	310,566	327,465	2,429

FY 2007-08 SCHEDULE 8-B CURRENT FUNDS EXPENDITURES BY UNIFORM CLASSIFICATION CATEGORY (Dollars in Thousands)

		(Dollars	in Thousand	ds)			
	_		Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
ELIMINATED CAPITAL EXPENDITURES	(14,533)	(36)	(1,458)	(13,040)		(14,533)	
Total Research	587,376	23,919	6,231	557,226	296,019	294,355	2,998
PUBLIC SERVICE							
COMMUNITY SERVICE Arts and lectures Community service projects Work study program- contracting agencies	88 5		49 - 69	39 5 27	32 4 39	55 1 58	-
Other Employee Benefits Compensated absences accrual	60,308 0 271	1,099 0 24	854 - (124)	58,356 - 370	35,671 - 257	24,638 0 14	1 - -
Subtotal	60,769	1,123	848	58,797	36,003	24,766	1
ELIMINATED CAPITAL EXPENDITURES	(23)			(23)		(23)	-
Total Public Services	60,746	1,123	848	58,774	36,003	24,743	1
ACADEMIC SUPPORT							
LIBRARIES	7,334	5,538	1,138	659	3,581	4,056	302
AUDIO VISUAL SERVICES	311	271	40		764	16	469
COMPUTING SUPPORT	452	376		75	163	288	_
COMPENSATED ABSENCES ACCRUAL	1,659	51	457	1,152	1,576	84	-
EMPLOYEE BENEFITS	46	46				46	-
EDUCATIONAL FEE EXPENSE PRORATION	<u>-</u>	(1,024)	1,024				-
ANCILLARY SUPPORT Dental clinics Neuropsychiatric institute Medical laboratories Vivarium Other	9,535 24,882 6,164 458 171,155	570 11,897 220 - 1,524	8,567 11,906 5,945 225 89,570	398 1,079 - 233 80,061	3,772 17,381 2,343 6,950 115,721	5,763 7,611 4,356 29,651 75,679	111 535 36,143 20,246
Total	212,194	14,211	116,212	81,771	146,167	123,061	57,034
ACADEMIC ADMINISTRATION	31,312	12,244	9,604	9,463	20,494	12,639	1,820
Subtotal	253,309	31,713	128,476	93,120	172,745	140,189	59,625

FY 2007-08 SCHEDULE 8-B CURRENT FUNDS EXPENDITURES BY UNIFORM CLASSIFICATION CATEGORY (Dollars in Thousands)

	_		Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
ELIMINATED CAPITAL EXPENDITURES	(2,215)	(488)	(1,664)	(64)		(2,215)	-
Total Academic Support	276,168	30,400	146,967	98,801	189,607	136,688	50,127
MEDICAL CENTERS	1,447,707	9,276	1,436,105	2,326	563,961	950,113	66,367
ELIMINATED CAPITAL EXPENDITURES	(38,020)		(38,020)	<u> </u>		(38,020)	
Total Medical Centers	1,409,687	9,276	1,398,085	2,326	563,961	912,093	66,367
STUDENT SERVICES							
ADMINISTRATION Deans of students and vice chancellor-student affairs	1,496_	1,128	331	37	825_	1,287	616
SOCIAL AND CULTURAL ACTIVITIES Cultural programs Housing service Other social services Public ceremonies Benefits Recreational programs	258 10 1,167 16 9 229	- 142 6 9	199 10 789 0	59 - 237 10 -	100 - 610 10 - 163	158 10 558 6 9	- - - - -
Total	1,689	156	1,227	306	883	806	_
FINANCIAL AID ADMINISTRATION	1,271	1,049	220	2	848	423	-
STUDENT ADMISSIONS AND RECORDS Admissions Registrar	(2) 2,235	1,825	(2) 410	<u>-</u>	2,057	(2) 754	- 576
Total	2,233	1,825	408		2,057	752	576
COMPENSATED ABSENCES ACCRUAL	63	49	15	<u> </u>	60	3	-
EDUCATIONAL FEE EXPENSE PRORATION		(4,795)	4,795				-
STUDENT HEALTH SERVICES	8,338	588	7,750	0	1,890	6,446	(2)
Subtotal	15,090	0	14,745	345	6,563	9,717	1,190
ELIMINATED CAPITAL EXPENDITURES	(36)		(36)			(36)	
Total Student Services	15,054	0	14,709	345	6,563	9,681	1,190

FY 2007-08 SCHEDULE 8-B CURRENT FUNDS EXPENDITURES BY UNIFORM CLASSIFICATION CATEGORY

(Dollars in Thousands)

	_		Current Funds			Distribution	
	Total	Unres	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
INSTITUTIONAL SUPPORT							
EXECUTIVE MANAGEMENT							
Chancellors and vice-chancellors	10,856	8,097	2,426	333	8,043	3,937	1,124
Academic senate secretariat	254	254	2.072	-	177 4,911	76 2,323	296
Planning and budgeting	6,947	4,875	2,072		4,911	2,323	286
Total	18,056	13,226	4,498	333	13,131	6,336	1,411
FISCAL OPERATIONS							
Accounting	14,759	12,946	1,813	_	9,207	6,288	735
Auditing-internal and external	127	125	2	_	-	127	_
Bad debt write-off	64	-	64	-	-	64	-
Cashiers	-	-	-	-	-	-	-
Office of research affairs	7,340	6,848	444	48	5,029	2,434	123
Total	22,290	19,919	2,323	48	14,236	8,913	858
GENERAL ADMINISTRATION SERVICES							
Computer Centers	2 222	2.740	-	-	2.562	2.602	2 02 4
Environmental health and safety	3,222	2,740	482	-	2,563	2,692	2,034
Information technology services	21,897	16,191	5,705	-	14,898	10,516	3,518
Personnel Other	5,710	4,400 705	1,307 (944)	3 109	11,300 3,444	2,369 4,868	7,959
Other	(130)	703	(944)	109	3,444	4,808	8,441
Total	30,699	24,037	6,551	112	32,206	20,445	21,951
LOGISTICAL SERVICES							
Capital projects management	598	-	598	-	2,468	4,727	6,596
Communications	(2,805)	-	(2,805)	-	587	4,575	7,968
Transportation services	5,079	-	5,079	-	3,154	5,726	3,801
Mailing division	298	493	(195)	-	1,160	2,848	3,709
Materiel management	3,237	1,547	1,690	-	2,929	2,576	2,268
Police	6,919	5,378	1,426	115	6,222	2,218	1,521
Reprographics	276	-	276		1,468	2,284	3,476
Total	13,603	7,418	6,070	115	17,987	24,954	29,338
COMMUNITY RELATIONS							
Development	14,921	346	14,301	274	9,041	6,892	1,012
Public information	1,004	967	37	-	1,050	449	495
Publications	(12)	200	(212)		583	558	1,153
Total	15,914	1,513	14,127	274	10,674	7,899	2,659
EMPLOYEE BENEFITS	107	106	1		-	107	
COMPENSATED ABSENCES ACCRUAL	792	219	573		744	48	

FY 2007-08 SCHEDULE 8-B CURRENT FUNDS EXPENDITURES BY UNIFORM CLASSIFICATION CATEGORY

(Dollars in Thousands)

	_		Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
EDUCATIONAL FEE EXPENSE							
PRORATION		(13,421)	13,421				
Subtotal	101,462	53,017	47,563	881	88,978	68,701	56,218
ELIMINATED CAPITAL EXPENDITURES	(3,368)	(1,028)	(2,340)			(3,368)	
Total Institutional Support	98,094	51,990	45,223	881	88,978	65,334	56,218
OPERATION AND MAINTENANCE							
OF PLANT							
Administration	1,777	2,424	(647)	-	2,995	(97)	1,120
Building maintenance, major	20.065	15 175			2.522	10.455	2.624
repairs and alterations	20,966	15,175	5,770	21	3,532	19,466	2,031
Grounds maintenance	956	404	553	-	306	916	265
Janitorial service	8,212	3,984	4,228	-	2,212	6,424	424
Plant service	(2,890)		(2,890)	-	3,960	(1,544)	5,307
Refuse disposal	1,434	605	829	-	-	1,691	257
Utilities	22,495	20,081	2,415	-	-	33,396	10,900
Compensated absences accrual	171	276	(105)	-	146	25	-
Educational fee expense proration		(9,177)	9,177				
Subtotal	53,122	33,771	19,330	21_	13,150	60,277	20,305
ELIMINATED CAPITAL							
EXPENDITURES	(449)	(7)	(441)			(449)	-
Total Operation and Maintenance							
of Plant	52,673	33,764	18,889	21	13,150	59,828	20,305
STUDENT FINANCIAL AIL	54,612	648	13,829	40,136		54,613	1
Scholarship Allowance	(15,855)		(15,855)			(15,855)	
Total Student Financial Aid	38,758	648	(2,026)	40,136		38,758	1
AUXILIARY ENTERPRISES							
Apartments	1,841		1,841	_	609	1.232	_
Bookstores	3,360		3,360		696	3,115	451
Residence halls	2,383	_	2,383	_	616	1,767	431
Parking	4,597	-	4,597	-	2,261	3,667	1,331
Compensated absences accrual	97	0	97	-	92	5,007	1,551
Other	17,769	67	17,674	28	10,159	15,559	7,948
Other	17,709	07	17,074	28	10,139	13,339	7,948
Subtotal	30,047	67	29,952	28	14,433	25,345	9,731
ELIMINIATED CADITAL							
ELIMINATED CAPITAL	(00)		(00)			(00)	
EXPENDITURES	(89)		(89)			(89)	
Total Auxiliary Enterprises	29,958	67	29,862	28	14,433	25,256	9,731

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

	Total												
									aries and		Other		ess:
			Unres			Re	estricted		Vages	Exp	enditures	Trai	nsfers
		G	eneral	De	signated								
SCHOOL OF DENTISTRY													
INSTRUCTION													
Educational services	3,965,274		500		3,463		2		1,458		2,507		-
Growth and development	\$ 2,777	\$	1,380	\$	1,151	\$	246	\$	2,105	\$	672	\$	-
Oral surgery	2,094		1,067		894		133		1,510		585		-
Public health and hygiene	71		-		-		71		54		17		-
Restorative dentistry	8,658		6,147		2,376		135		6,875		1,783		(0)
Stomatology	4,508		3,280		1,053		175		3,708		800		. .
Inter-school services	222		(45)		267		-		-		267		45
Total	22,296		12,329		9,204	_	763		15,710		6,631		45
RESEARCH													
Dentistry	22,633		61		(125)		22,697		10,624		12,013		3
PUBLIC SERVICE		-	-	_									
Dental hygiene	4,575		-		(12)		4,587		1,438		3,137		(0)
ACADEMIC SUPPORT		-											
Dean's office	14,304		3,602		6,569		4,133		6,050		7,954		(300)
Dentistry clinic	10,477		570		9,500		407		3,962		6,515		(0)
Total	24,781		4,172		16,069		4,540		10,012		14,469		(300)
Total School of Dentistry	74,286		16,562		25,136		32,588		37,784		36,250		(252)
SCHOOL OF MEDICINE								-		_			
INSTRUCTION													
Academic services	3,231		23		551		2,658		1,733		1,498		_
Area Health Education Center	38				-		38		-,,		38		_
Anatomy	4,727		3,011		810		906		3,569		1,158		_
Anesthesia	4,564		1,688		2,148		727		28,807		643		24,886
Anthropology	972		639		235		99		768		206		2
Biochemistry and biophysics	7,787		3,775		1,362		2,649		4,918		2,869		(0)
Bioengineering	327		257		(15)		85		241		86		-
Dermatology	2,798		1,328		837		633		6,255		1,892		5,349
Educational services	11,904		474		6,987		4,443		11,887		17		-
Epidemiology and international health	4,676		1,498		1,628		1,551		3,090		1,586		-
Family and community medicine	12,773		1,579		2,671		8,524		8,519		4,332		78
Genetics	1,723		518		687		519		1,235		488		(0)
Cancer Institute	1,788		-		213		1,575		1,105		682		-
Hooper Foundation	195		-		64 901		130		58		137 636		-
Cardiovascular Institute Hormone Laboratory	1,686 335		-		62		784 273		1,050 158		176		-
Institute for health policy studies	1,357		50		1.113		193		994		363		

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds			Distribution	
					Salaries and	Other	Less:
	Total	Unres	tricted	Restricted	Wages	Expenditures	Transfers
		General	Designated				
aboratory medicine	2,942	1,521	664	756	5,394	(1,611)	84
Malpractice insurance	2,246	1,573	673	-	-	2,246	
Medical education program-Fresno	21,088	3,529	16,975	583	14,523	6,565	
Medical ethics	63	45	17	-	55	8	
Medicine	24,462	9,978	5,460	9,023	50,132	4,466	30,13
Metobolic Unit	443	-	443	-	217	226	
Aicrobiology and immunology	2,973	1,639	829	505	2,092	931	5
Neurological surgery	214	767	(991)	439	8,991	998	9,77
Neurology	2,683	1,515	(1,282)	2,451	5,361	1,546	4,22
Obstetrics and gynecology	8,292	2,646	4,469	1,176	12,762	4,878	9,34
Opthalmology	2,371	1,384	551	436	4,334	1,320	3,28
Orthopaedic surgery	3,393	1,199	1,887	308	9,817	2,234	8,65
Otolaryngology	1,237	1,177	(189)	249	4,265	1,277	4,30
Pathology	(2,483)	2,954	(5,842)	405	15,321	3,929	21,73
Pediatrics	8,005	3,598	2,574	1,833	22,198	1,923	16,11
Pharmacology	2,994	1,620	508	866	1,929	1,066	,
Physical therapy	1,095	355	722	18	707	692	30
Physiology	4,387	2,508	900	979	3,211	1,176	
Program in biological studies	(634)	2,500	(634)	-	5,211	(634)	
Psychiatry	4,351	2,001	873	1,477	8,494	(1,487)	2.65
Radiation oncology	680	560	15	105	8,366	680	8,36
Radiology	6,722	2,507	3,383	832	24,810	8,839	26,92
Resident salary	(16,789)	3,041	(20,659)	829	(20,492)	3,703	20,72
Surgery	8,289	3,354	3,172	1,763	29,866	(599)	20.97
Jrology	1,242	930	(890)	1,202	5,428	1,452	5,63
nter-school services	(497)	(497)	(070)	1,202	3,420	39	53
ntra-school services	1,523	(3,466)	1,961	3,028	4,014	(2,490)	
Total	152,171	61,278	35,844	55,049	296,181	60,181	204,19
ESEARCH							
Dean's office	15,522	37	553	14,932	5,345	10.178	
Anatomy	9,267	49	10	9,208	4,819	4,444	
Anaesthesia	9,272	6	341	8,926	4,703	4,569	,
Anthropology	168	61	1	106	63	105	
Biochemistry and biophysics	14,944	45	379	14,521	7,566	7,527	14
Cancer institute	16,483	567	745	15,171	9,373	7,110	1-
Cardiovascular institute	21,002	493	365	20,145	11,894	9,108	
Dermatology	4,971	303	5	4,663	3,422	1,549	
Epidemiology and international health	17,921	505	(141)	18,062	9,622	8,299	
Samily and community medicine	2,660	1	29	2,630	1,381	1,279	
General clinical research campus	153	51	29	2,030	1,361	1,279	
General clinical research centerSFGH	(57)	31	(0)	(57)	(16)	(41)	
Genetics	4,221	3	223	3,995	2,340	1,882	
ns Neurodegenerative Disease	10,545	10	(588)	11,123	4,823	7,010	1,28
nstitute for health policy studies	3,675	282	(18)	3,411	1,844	1,831	1,20
DELICITE FOR HEALTH DUTIES STRUCES	3,073	202	(10)	3,411	1,044	1,001	

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds			Distribution	
	T 4 1		1	D. C. L.	Salaries and	Other	Less:
	Total		tricted	Restricted	Wages	Expenditures	Transfers
		General	Designated				
Hormone laboratory	40,260	676	1,350	38,234	11,085	29,287	112
Laboratory medicine	6,718	2	35	6,682	3,187	3,531	-
Medical education	911	-	-	911	509	402	-
History of Health Science	-	-	-	-	-	-	-
Medicine	127,389	1,815	562	125,012	70,306	57,106	23
Metabolic unit	3,481	179	44	3,258	1,561	1,920	-
Microbiology and immunology	11,203	68	73	11,062	5,204	6,093	94
Neurological surgery	18,207	389	(529)	18,346	9,606	8,596	(5
Neurology	48,110	16,153	247	31,710	15,504	32,602	(3
Obstetrics and gynecology	45,747	135	1,315	44,297	16,082	29,660	(5
Ophthalmology	6,611	19	85	6,507	3,539	3,072	-
Orthopaedic surgery	3,618	-	782	2,835	1,809	1,809	_
Otolaryngology	2,613	_	178	2,434	1,336	1,276	_
Pathology	9,291	8	70	9,212	4,610	4,680	(1
Pediatrics	17,708	18	69	17,620	9,400	8,310	2
Pharmacology	7,514	151	116	7,247	3,681	3,833	_
Physical Therepy	315	-	128	186	89	225	_
Physiology	8,444	50	159	8,236	5,089	3,355	0
	1,907	30	33			865	U
Psychiatry	,	-	40	1,874	1,042		-
Radiation oncology	1,503	-	40	1,463	945	558	-
Radiobiology laboratory	0	- 0.62	-	0	-	0	-
Radiology	19,351	963	404	17,984	11,927	7,444	21
Surgery	20,041	58	221	19,761	10,785	9,256	-
Urology	5,662	0	324	5,338	3,066	2,596	
Total	540,457	23,219	7,785	509,453	258,705	283,422	1,671
PUBLIC SERVICE							
AIDS clinical care	6,310	-	1	6,309	2,709	3,601	-
Area health education center	2,116	445	0	1,671	430	1,686	-
Family medicine training		-	-	_	-	, -	_
Family planning	552	-	317	235	306	246	_
Podiatric Medicine	15	_	_	15	12	3	_
Institute for health policy studies	2,271	_	15	2,256	1,627	644	_
Other	28,381		915	27,466	19,948	8,432	
Total	39,645	445	1,248	37,952	25,032	14,613	
ACADEMIC SUPPORT							
Dean's office	15,866	4,524	10,388	955	10,746	5,904	784
Audio Clinic	-	-	-	_	-	_	_
Cytogenetics laboratory	_	_	_	_	_	_	_
Dialysis center	192	_	192	_	103	88	_
Endorcrinolgy lab OBGYN	3	_	3	_	103	3	
Endocrinology lab PEDIATRICS	132	-	132	_	69	63	
Histocompatibility laboratory	7,479	-	7.479	-	2,336	5.142	_
Kaposi sarcoma clinic	2,785	_	36	2.749	2,330	3,142 866	93
Kaposi saicoma cimic	2,785	-	30	2,749	2,011	800	93

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

	_		Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Mental health service for deaf	141	_	141	_	51	90	-
Occupational health center	2.587	1,103	42	1,442	2.116	475	5
Organ procurement	484	· -	484	_	307	177	-
Orthopaedic appliance facilities	3,555	_	3,555	_	1,164	2,390	-
Professional service operations	48,093	4	43,271	4,818	29,423	28,534	9,864
Radiology computer services	0	-	0	_	· -	0	_
Radiology body scanner	-	-	-	_	-	-	_
SFGH-Operation	50,630	7	8,035	42,588	36,995	14,589	954
SFGH-Professional Services	51,487	40	21,739	29,708	37,663	13,836	12
Other	20,149	246	12,740	7,163	14,984	16,465	11,301
Total	203,582	5,924	108,236	89,423	137,970	88,623	23,011
Total School of Medicine	935,855	90,865	153,113	691,877	717,888	446,840	228,873
SCHOOL OF NURSING							
INSTRUCTION							
Educational service	2,505	137	2,253	115	1.646	859	
Family health care	3,069	2,079	150	840	2,381	688	_
Institute for health and aging	505	443	(104)	167	158	347	(0
Mental health care and community	4,194	2,052	638	1,505	3,053	1,139	(2
Physiological nursing	3,890	2,672	508	710	3,041	848	(2
Social and behaviorial science	1,402	1,096	138	168	1,090	314	2
Intra-school services	1,402	1,090	- 138	- 100	1,090	- 314	
Total	15,567	8,479	3,581	3,506	11,370	4,196	(0
DEGE A DOM	,	,	,	ŕ	,	,	
RESEARCH	2 442	0	2	2 422	1 424	1.000	
Family health nursing	2,442	8	2	2,433	1,434	1,009	-
Institute for health and aging	4,340	-	0 18	4,340	2,929	1,411	-
Mental health and community	1,901	5		1,883	1,111	790	-
Physiological nursing Social and behavioral science	4,380 2,107	3	5	4,370	2,758	1,622 720	-
Other	(187)		(187)	2,107	1,387	(187)	
Total	14,983	13	(162)	15,133	9,620	5,364	
PUBLIC SERVICE							
Diabetic Center	9,975	-	-	9,975	5,986	3,989	-
Total	9,975	-	-	9,975	5,986	3,989	-
ACADEMIC SUPPORT							
Dean's office	7,150	3,838	2,118	1,195	4,145	3,020	15
Occupational health center	1,124	482	590	52	909	216	-
Total	8,274,403	4,320	2,708	1,247	5,054	3,236	15

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds		. <u></u>	Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
	 .	General	Designated				
	•						
Total School of Nursing	48,799	12,812	6,127	29,860	32,030	16,785	15
SCHOOL OF PHARMACY							
INSTRUCTION							
Clinical pharmacy	5,182	3,279	939	964	5,650	1,511	1,979
Educational Services	3,191	1,307	1,700	183	1,721	1,511	41
Pharmacy department	2,947	1,486	1,223	238	2,261	685	-
Pharmaceutical chemistry	3,891	2,248	1,548	95	3,037	854	-
Inter-school services	306	120	156	30		475	168
Total	15,517	8,440	5,567	1,510	12,670	5,036	2,189
RESEARCH							
Dean's office	502	-	248	255	100	440	37
Clinical pharmacy	4,225	1	122	4,102	2,685	1,539	-
Pharmaceutical chemistry	12,799	203	978	11,617	6,835	6,256	292
Pharmacy department	10,585	206	814	9,565	5,397	5,188	(0)
Total	28,111	411	2,161	25,539	15,017	13,422	329
ACADEMIC SUPPORT							
Dean's office	1,483	1,148	204	130	1,361	355	233
Special Drug Study	432	-	432	-	83	349	-
Clinical Pharmacy	2,287	80	2,208	-	1,540	2,145	1,398
Drug Product-home therapy							
Total	4,202	1,228	2,844	130	2,984	2,850	1,631
PUBLIC SERVICES							
Pharmacy Public Services	10,013	-	(24)	10,037	7,272	2,741	-
Total School of Pharmacy	57,843	10,079	10,548	37,216	37,942	24,049	4,148
SUMMER SESSION							
INSTRUCTION	456		456			456	
CAMPUS-WIDE PROGRAMS							
INSTRUCTION							
Educational services	770	_	770	_	63	9,642	8,935
Miscellaneous short courses	(7)	_	(7)	_	-	(7)	0,755
Langley Porter Neuropsych	(/) -	_	-	_	_	(7) -	_
QB3 Institute	_	-	_	-	-	_	-
Instructional equipment	84	(201)	182	102	_	84	_

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Educational fee expense proration	6,386	(18,232)	24,618	_	-	6,386	_
Compensated absences accrual	2,625	280	2,166	179	2,487	137	-
Employee Benefits	286	286				286	-
Total	10,143	(17,867)	27,729	281	2,550	16,528	8,935
RESEARCH							
Faculty fellowships and special							
grants	2,413	362	4	2,047	944	1,469	-
LPNI	19,112	55	225	18,831	9,973	9,564	426
Proctor foundation	4,495	-	696	3,799	2,680	1,815	-
QB3 Institute	1,505	-	480	1,025	825	679	-
Travel expense	-	-	-	-	-	-	-
Other	74	60	-	14	463	(388)	-
Compensated absences accrual	1,806	136	206	1,465	1,715	91	-
Employee Benefits	14	14				14	-
Total	29,418	628	1,610	27,180	16,600	13,244	426
PUBLIC SERVICE							
Compensated absences accrual	779	7	(18)	790	740	39	-
Arts and lectures	98	-	57	41	31	67	-
Community work study programs	19	-	(16)	35	49	(31)	-
Employee Benefits	1	1	-	-	-	1	-
Other	-	-	-	-	-	-	-
Student outreach programs	1,803	690	100	1,013	413	1,390	-
Total	2,700	697	124	1,879	1,233	1,466	-
ACADEMIC SUPPORT							
OTM	-	-	-	-	-	-	-
Other	10	-	(1)	11	-	10	-
Animal care facililty	(941)	-	(1,350)	409	7,122	17,033	25,096
Computer center - instruction	369	280	-	89	170	199	-
Graduate division	1,288	850	436	1	782	506	-
LPNI	26,073	12,149	12,759	1,165	18,386	7,712	25
Libraries	7,414	5,926	962	526	4,056	3,750	393
Proctor FDN Organized Activities	-	-	-	-	-	-	-
QB3 Institute	-	- (2.0.45)		-	-	-	-
Instr \$ Resr Support Services	832	(2,947)	3,778	-	731	357	256
Educational fee expense proration	2.405	(1,207)	1,207	1 22 4	2.260	105	-
Compensated absences accrual Employee Benefits	2,485 14	178 14	983	1,324	2,360 (20)	125 34	-
Total	37,543	15,244	18,774	3,525	33,588	29,726	25,770
Total Campus-wide Programs	79,804	(1,298)	48,236	32,865	53,971	60,964	35,131
MEDICAL CENTERS	1,447,707	9,276	1,436,105	2,326	563,961	950.113	66,367

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
STUDENT SERVICES							
Student Outreach Programs	_	-	-	-	-	_	-
Dean of students	1,496	574	885	37	825	670	-
Dentistry testing program	(2)	-	(2)	-	-	(2)	-
Financial aid	1,271	1,049	220	2	848	423	-
Public ceremonies	16	6	0	10	10	6	
Registrar's office	2,235	1,825	410	-	2,057	754	576
Student activities - other	1,425	142	988	295	710	715	
Student activities - recreation	229		229		163	66	
Budget reduction Offset		(4,795)	4,795	_	-	-	
Student health services	8,338	588	7,750	0	1,890	6,446	(2
Student housing services	10	-	10	-	1,070	10	(2
Compensated absences accrual	63	49	15	_	60	3	
Educational fee expense proration	-	555	(555)	_	-	616	616
Employee Benefits	9	9	(333)	-	_	9	010
• •	15,000		14745	245	(50)	0.717	1 100
Total Student Services	15,090	0	14,745	345	6,563	9,717	1,190
INSTITUTIONAL SUPPORT							
Chancellor's office	2,386	1,468	759	159	1,338	1,047	-
Vice-chancellor-academic affairs	2,851	1,793	1,058	-	1,654	1,197	
Vice-chancellor-administration	1,701	1,066	634	1	1,074	627	
Vice-chancellor-advance & planning	1,527	1,428	95	5	1,187	595	255
Vice-chancellor-research	478	540	(233)	171	1,113	(560)	75
Academic senate committees	178	178		-	112	67	
Accounting office	6,762	10,106	(3,345)	-	8,022	(427)	833
Administration/Finance	9	_	9	-	346	(337)	
Administrative Computing	22,388	16,523	5,865	-	18,161	8,156	3,929
Affirmative action office	789	847	(58)	_	995	264	470
Alumni affairs	3,644	_	2,675	968	2,224	1,484	64
Audit services	1,195	1,194	1	_	1,197	393	395
Audit-internal and external	160	135	25	_	-	160	
Addressing/Mailing Services	199	509	(310)	_	1,090	2,873	3,765
Reprographics	95	-	95	_	1,667	2,547	4,119
Communications	(1,957)	_	(1,957)	_	579	5,207	7,742
Transportation services	5,481	_	5,481	_	3,450	6,254	4,224
Campus Risk	877	-	877	-	682	195	7,224
Cashier	0//	-	-	-	062	193	
Clerical pool	251	-	251	-	6,767	1,308	7,823
Financial systems implementation	3,947	1.345	2.602	-	1.189	2,950	193
ENS Network Services	3,947	1,343	2,002	_	1,189	2,930	193
	0 122	7.001	202	_	- ACT	2.027	282
Office of research affairs	8,123	7,801	302	19	5,467	2,937	2

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

Employee Benefits Environmental Health & Safety Financial Planning & Benefits Development Office Information technology services Institutional relations Kaiser awards Labor relations Labor relations Coffice of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations	556 14 133 179 113 447 225 16 005 226 441) 668 225 556 112 667)	Unrestri General 125 3,187 591 0 1,046 - 2,440 1,576 (174) 672 5,179 901 6,303	105	Restricted	Salaries and Wages 474 (12) 2,967 724 9,005 1,027 1,010 14 805 3,330 827 980	Other Expenditures 182 127 3,147 355 7,350 420 811 2 1,641 2,810 4,070	Less: Transfers 2,381 2,341 497 41 2,414
Employee Benefits Environmental Health & Safety Financial Planning & Benefits Development Office Information technology services Institutional relations Kaiser awards Labor relations Xaiser awards Labor relations Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	556 14 133 179 113 447 225 16 005 226 441) 668 225 556 112 667)	125 3,187 591 0 1,046 	656 (11) 547 488 13,574 1,447 6 (35) 2,150 (3,503) (105) 3,047	439 - 272 16 - - 36	(12) 2,967 724 9,005 1,027 1,010 14 805 3,330 827	127 3,147 355 7,350 420 811 2 1,641 2,810	2,341
Employee Benefits Environmental Health & Safety Financial Planning & Benefits Development Office Information technology services Institutional relations Kaiser awards Labor relations Xaiser awards Labor relations Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	14 (33) (79) (13) (47) (25) (16) (05) (26) (41) (68) (25) (56) (12) (67)	3,187 591 - 0 1,046 2,440 1,576 (174) 672 5,179 901	(11) 547 488 13,574 1,447 6 (35) 2,150 (3,503) (105) 3,047	439 - 272 16 - - 36	(12) 2,967 724 9,005 1,027 1,010 14 805 3,330 827	127 3,147 355 7,350 420 811 2 1,641 2,810	2,341
Environmental Health & Safety Financial Planning & Benefits Development Office Information technology services Institutional relations Labor relations Labor relations Materiel management Miscellaneous Office of Legal affairs Planning and budget Personnel Police Police Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	33 79 113 47 25 16 005 26 441) 68 25 56 112 667)	3,187 591 - 0 1,046 2,440 1,576 (174) 672 5,179 901	547 488 13,574 1,447 6 (35) 2,150 (3,503) (105) 3,047	439 - 272 16 - - 36	2,967 724 9,005 1,027 1,010 14 805 3,330 827	3,147 355 7,350 420 811 2 1,641 2,810	2,341
Financial Planning & Benefits Development Office Information technology services Institutional relations Institutional relations I Labor relations Labor relations Materiel management Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	779 113 447 225 116 005 226 441) 668 225 556 112	591 - 0 1,046 - 2,440 1,576 (174) 672 5,179 901	488 13,574 1,447 6 - (35) 2,150 (3,503) (105) 3,047	439 - 272 16 - - 36	724 9,005 1,027 1,010 14 805 3,330 827	355 7,350 420 811 2 1,641 2,810	2,341
Financial Planning & Benefits Development Office Information technology services Institutional relations Labor relations Materiel management Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	113 447 225 16 005 226 441) 668 225 556 112	0 1,046 - 2,440 1,576 (174) 672 5,179 901	13,574 1,447 6 - (35) 2,150 (3,503) (105) 3,047	439 - 272 16 - - 36	724 9,005 1,027 1,010 14 805 3,330 827	7,350 420 811 2 1,641 2,810	2,341
Development Office 14, Information technology services 1, Institutional relations 1, Kaiser awards Labor relations 2, Materiel management 3, Miscellaneous (3,6) Office of Legal affairs Planning and budget 8, Personnel 1, Police 8, Project Management Services (6) Project Management Services 2, Public information 2 Public service programs 2, Publication office 2 Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	113 447 225 16 005 226 441) 668 225 556 112	0 1,046 - 2,440 1,576 (174) 672 5,179 901	1,447 6 - (35) 2,150 (3,503) (105) 3,047	272 16 - 36	1,027 1,010 14 805 3,330 827	420 811 2 1,641 2,810	497 - 41
Information technology services Institutional relations Institutional Institutions Institutional Ins	47 225 16 005 (26 (41) (68 (25) (56 (12)	1,046 2,440 1,576 (174) 672 5,179 901	1,447 6 - (35) 2,150 (3,503) (105) 3,047	272 16 - 36	1,027 1,010 14 805 3,330 827	420 811 2 1,641 2,810	497 - 41
Institutional relations Kaiser awards Labor relations Adteriel management Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	25 16 005 226 (441) 668 (25) (56) (12)	1,046 2,440 1,576 (174) 672 5,179 901	6 (35) 2,150 (3,503) (105) 3,047	16 - - 36	1,010 14 805 3,330 827	811 2 1,641 2,810	41
Kaiser awards Labor relations Aderiel management Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	16 05 (26 (41) (68 (25 (56 (12 (67)	2,440 1,576 (174) 672 5,179 901	(35) 2,150 (3,503) (105) 3,047	16 - - 36	14 805 3,330 827	2 1,641 2,810	41
Labor relations Materiel management Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	05 (26 (41) (68 (25 (56 (112 (67)	1,576 (174) 672 5,179 901	2,150 (3,503) (105) 3,047	36	805 3,330 827	1,641 2,810	
Materiel management 3, Miscellaneous (3, Office of Legal affairs Planning and budget 8, Personnel 1, Police 8, Project Management Services (5 Public information 2 Public service programs 2, Publication office 8, Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	26 (41) (68 25 (56 (12 (67)	1,576 (174) 672 5,179 901	2,150 (3,503) (105) 3,047	36	3,330 827	2,810	
Miscellaneous Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	(41) (68) (25) (56) (12) (67)	(174) 672 5,179 901	(3,503) (105) 3,047	36	827	,	2,414
Office of Legal affairs Planning and budget Personnel Police Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	668 225 566 012 667)	672 5,179 901	(105) 3,047				8,538
Planning and budget 8,7 Personnel 1,5 Police 8,0 Project Management Services (2 Public information 2,7 Public service programs 2,7 Publication office 3 Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	25 56 12 667)	5,179 901	3,047	-		243	656
Personnel 1,5 Police 8,6 Project Management Services (2 Public information 2,5 Public service programs 2,5 Publication office 3 Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	56 12 667)	901	,	_			
Police 8,0 Project Management Services (3 Public information 2 Public service programs 2,3 Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	12 (67)		64 /		5,460	3,398	633
Project Management Services Public information Public service programs Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	67)	6,303	1 (00	8	2,424	(523)	346
Public information Public service programs Public service programs 2,3 Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections			1,689	20	6,930	2,371	1,290
Public service programs 2,3 Publication office 3 Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections			(567)	-	3,209	3,897	7,673
Publication office Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	34	234	-	-	111	122	-
Royer awards Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections		1,348	932	75	1,378	1,239	262
Satellite campus operations Compensated absences accrual Educational fee expense proration Bad debt & collections	25	200	124	-	530	708	914
Compensated absences accrual Educational fee expense proration Bad debt & collections	51	-	-	51	47	4	-
Educational fee expense proration Bad debt & collections	18	(1,200)	1,318	-	77	114	73
Bad debt & collections	78	103	375	-	499	(21)	-
	-	(14,841)	14,841	-	-	-	-
Total Institutional Support 107,3	(1)	<u> </u>	(1)			(1)	
	10	52,625	52,445	2,241	100,132	69,405	62,226
OPERATION AND MAINTENANCE OF PHYSICAL PLANT							
Administration 3,3	91	2,584	807	-	4,289	3,410	4,308
Building maintenance 17,8	84	12,168	5,716	-	1,771	17,396	1,283
Elevators	39	395	444	-	-	1,343	505
Ground maintenance 1,1	20	399	721	_	343	1,124	347
House maintenance-Chancellor	21	_	_	21	_	21	_
Janitorial service 8.5	20	4,000	4,519	_	1,993	7,099	572
Network Maintenance 5,7		3,440	2,305	_	1,875	4,382	512
Plant service (6.1		-	(6,174)	_	5,843	(7,085)	4.932
(-)	98	606	692	_	5,015	1,554	256
Steam 1,2	_	-	0,2	_	_	1,551	250
Educational fee expense proration	_	(8,116)	8,116	_	_	- -	
Utilities 23.8	83	21,882	2,001	-	-	35,636	11,753
	.58	258	2,001	-	-	258	11,/33
3 1	.58 19	238 19	-	-	-	238 19	-
Employee Benefits Compensated absences accrual	17	(284)	417	_	160	(28)	-

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

	_		Current Funds			Distribution	
	Total	Unrest	ricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
	-	General	Designated	_			
Total Operation and Maintenance of Physical Plant	56,936	37,350	19,565	21	16,273	65,130	24,468
STUDENT FINANCIAL AID	53,239	288	14,999	37,952		53,239	(0)
Scholarship Allowance	(20,075)	-	(20,075)			(20,075)	
Total Student Financial Aid	33,165	288	(5,075)	37,952		33,164	(0)
AUXILIARY ENTERPRISES							
RESIDENCE AND DINING HALLS Millberry Union Aldea San Miguel	3,219 1,046	- -	3,219 1,046	- -	807 241	2,412 805	- -
Total	4,265		4,265		1,048	3,217	
OTHER Child care center Parking operations Millberry Union University residence program Compensated absences accrual	874 4,571 20,523 1,022 65	69 - - - 1	805 4,571 20,506 1,022 64	(0) - 16 -	478 2,594 11,241 371 61	396 3,441 18,555 650 3	1,464 9,273
Total	27,054	69	26,968	16	14,746	23,045	10,738
Total Auxiliary Enterprises	31,318	69	31,232	16	15,794	26,262	10,738
Subtotal	2,888,569	228,628	1,792,632	867,309	1,582,338	1,739,133	432,902
Eliminated Capital Expenditures	(61,223)	(1,877)	(43,481)	(15,865)		(61,223)	
Total Current Funds Expenditures	\$ 2,827,346	226,752	1,749,151	851,443	1,582,338	1,677,911	432,902

SCHEDULE 8D - FY 2007-08 CURRENT FUNDS EXPENDITURES BY FUND SOURCE (Dollars in Thousands)

				Current	Funds			Distr	ibution				
		Total		Total		restricted	Restric	ted	llaries and Wages		Other enditures	Less	: Transfers
GENERAL FUNDS													
Instruction	\$	72,638	\$	72,638	\$	-	\$ 80,120	\$	(6,732)	\$	750		
Research		23,591		23,591		-	6,206		17,385		-		
Public service		1,142		1,142		-	496		646		-		
Academic support		30,400		30,400		-	22,732		7,708		40		
Medical centers		9,276		9,276		-	· -		9,276		-		
Student services		(0)		(0)		-	3,228		(3,178)		51		
Institutional support		52,266		52,266		-	45,617		8,781		2,132		
Operation and maintenance of plant		37,081		37,081		-	7,094		30,384		396		
Student financial aid		288		288		-	_		288		-		
Auxiliary enterprises		69		69		-	 57		12				
Total		226,752		226,752			 165,550		64,570		3,369		
TUITION AND FEES													
Instruction		51,743		51,743		-	10,508		41,234		0		
Research		(7)		(7)		-	23		(30)		-		
Public service		29		29		-	4		24		-		
Academic support		4,735		4,735		-	642		4,092		-		
Medical centers		-		-		-	-		-		-		
Student services		7,845		7,845		-	2,461		5,949		565		
Institutional support		14,860		14,860		-	9		14,851		-		
Operation and maintenance of plant		8,116		8,116		-	-		8,116		-		
Student financial aid		10,611		10,611		-	-		10,611		-		
Auxiliary enterprises		8		8		-	 		8		-		
Total		97,939		97,939		_	13,648		84,857		565		

SCHEDULE 8D - FY 2007-08 CURRENT FUNDS EXPENDITURES BY FUND SOURCE (Dollars in Thousands)

		Current	Funds		Distribution	
_	Total	Unrestricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
FEDERAL GOVERNMENT						
Appropriations						
Research	_	-	-	-	-	-
Public service	_	-	-	_	-	_
Academic support	-			_	-	. <u> </u>
Total				-	-	
Grants						
Instruction	9,228	-	9,228	5,626	3,601	(0)
Research	307,276	-	307,276	156,006	151,247	(23)
Public service	10,418	-	10,418	4,225	6,193	`-
Academic support	4,896	-	4,896	3,155	1,740	(0)
Medical centers	_	-	-	· -	_	-
Student services	2	-	2	2	-	-
Institutional support	1	-	1	1	-	-
Operation and maintenance of plant	1	-	1	-	1	-
Student financial aid	20,402	-	20,402	-	20,402	-
Auxiliary enterprises						
Total	352,224		352,224	169,016	183,185	(23)
<u>Contracts</u>						
Instruction	8,172	-	8,172	7,125	1,047	-
Research	43,147	-	43,147	16,918	26,229	(0)
Public Service	677	-	677	362	316	-
Academic support	980	-	980	451	529	-
Medical centers	-	-	-	-	-	-
Student services	-	-	-	-	-	-
Institutional support	-	-	-	-	-	-
Operation and maintenance of plant	-	-	-	-	-	-
Student financial aid	3		3		3	
Total	52,980		52,980	24,856	28,123	(0)
Total Federal Government	405,204	_	405,204	193,873	211,308	(24)

SCHEDULE 8D - FY 2007-08 CURRENT FUNDS EXPENDITURES BY FUND SOURCE (Dollars in Thousands)

		Current	Funds		Distribution	
_	Total	Unrestricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
SPECIAL STATE APPROPRI-						
ATIONS AND CONTRACTS						
Instruction	5,877	-	5,877	3,577	2,301	-
Research	21,736	-	21,736	14,186	7,550	(0)
Public service	20,461	-	20,461	13,646	6,816	-
Medical centers	-	-	-	-	-	-
Student services	-	-	-	-	-	-
Academic support	118	-	118	23	95	-
Institutional support	(0)	-	(0)	-	(0)	-
Operation and maintenance of plant	-	-	-	-	-	-
Student financial aid	1,202	-	1,202	-	1,202	-
Auxiliary enterprises					-	
Total _	49,394		49,394	31,431	17,963	(0)
LOCAL GOVERNMENT						
Instruction	70	_	70	69	1	_
Research	2,467	-	2,467	1,871	596	(0)
Public service	22,893	-	22,893	16,982	5,911	-
Academic support	79,272	-	79,272	61,735	17,537	-
Medical centers	-	-	_	-	-	-
Student services	-	-	-	-	-	-
Institutional support	-	-	-	-	-	-
Operation and maintenance of plant	-	-	-	-	-	-
Student financial aid	93	-	93	-	93	-
Auxiliary enterprises					-	
Total	104,795		104,795	80,657	24,138	(0)
PRIVATE GIFTS, GRANTS AND						
CONTRACTS						
Instruction	25,580	-	25,580	15,815	9,764	(1)
Research	193,163	-	193,163	99,914	93,246	(2)
Public service	9,928	-	9,928	4,999	4,929	(0)
Academic support	11,829	-	11,829	4,998	6,831	-
Medical centers	1,562	-	1,562	452	1,110	-
Student services	264	-	264	17	246	-
Institutional support	1,922	-	1,922	100	1,822	-
Operation and maintenance of plant	-	-	-	-	-	-
Student financial aid	11,626	-	11,626	-	11,626	-
Auxiliary enterprises	16		16	-	16	
Total	255,889	-	255,889	126,296	129,590	(3)

SCHEDULE 8D - FY 2007-08 CURRENT FUNDS EXPENDITURES BY FUND SOURCE (Dollars in Thousands)

		Current F	unds	Distribution				
-	Total	Unrestricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers		
ENDOWMENT AND								
SIMILAR FUNDS								
Instruction	25,828	14,400	11,428	14,334	11,494	(0)		
Research	19,650	2,483	17,167	9,818	9,833	2		
Public service	135	82	52	1	133	-		
Academic support	3,121	1,416	1,706	1,548	1,544	(30)		
Medical centers	785	21	764	157	627	-		
Student services	80	1	80	1	80	-		
Institutional support	1,361	1,042	318	61	1,300	-		
Operation and maintenance of plant	21	-	21	-	21	-		
Student financial aid	4,660	34	4,626	-	4,660	-		
Auxiliary enterprises	<u> </u>	<u> </u>		<u> </u>	-			
Total	55,641	19,479	36,161	25,920	29,692	(29)		
SALES AND SERVICES OF								
EDUCATIONAL ACTIVITIES								
Instruction	12,610	12,610	-	197,711	20,553	205,654		
Research	5,001	5,001	-	4,348	2,300	1,648		
Public service	127	127	-	58	70	-		
Academic support	121,429	121,429	-	77,552	75,053	31,176		
Medical centers	-	-	-	-	-	-		
Student services	125	125	-	4	120	-		
Institutional support	(132)	(132)	-	1,335	566	2,033		
Auxiliary enterprises	(1)	(1)	-	(1)	(0)	-		
Operation and maintenance of plant	-	-	-	-	-	-		
Student financial aid	3,161	3,161		-	3,161	(0)		
Total	142,319	142,319	-	281,007	101,823	240,510		
SALES AND SERVICES OF								
AUXILIARY ENTERPRISES								
Instruction	(9)	(9)	-	(8)	(0)	-		
Academic support	-	-	-	-	-	-		
Student services	-	-	-	-	-	-		
Institutional support	96	96	-	814	1,541	2,258		
Operation and maintenance of plant	-	-	-	-	-	-		
Student financial aid	-	-	-	-	-	-		
Auxiliary enterprises	27,777	27,777		15,215	15,782	3,219		

SCHEDULE 8D - FY 2007-08 CURRENT FUNDS EXPENDITURES BY FUND SOURCE (Dollars in Thousands)

		Current 1	Funds	Distribution					
	Total	Unrestricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers			
SALES AND SERVICES OF									
MEDICAL CENTERS Medical centers	1,397,660	1,397,660	-	563,351	900,675	66,367			
OTHER SOURCES						•			
Instruction	2,393	2,393	_	3,605	7,744	8,956			
Research	1,975	1,975	_	1,274	1,506	805			
Public service	1,086	1,086	_	188	899	-			
Academic support	19,288	19,288	_	16,767	21,461	18,941			
Medical centers	401	401	_		401				
Student services	7,057	7,057	_	829	6,801	574			
Institutional support	37,394	37,394	_	50,248	38,821	51,675			
Operation and maintenance of plant	13,183	13,183	_	9,179	28,075	24,071			
Student financial aid	(18,880)	(18,880)	_	-	(18,880)	-			
Auxiliary enterprises	3,906	3,906		366	11,058	7,518			
Total	67,803	67,803		82,458	97,886	112,541			
RESERVES									
Instruction	(145)	(145)	-	-	(145)	-			
Research	252	252	-	-	252	-			
Public service	1	1	-	-	1	-			
Academic support	100	100	-	4	96	-			
Medical centers	3	3	-	-	3	-			
Student services	(318)	(318)	-	21	(339)	-			
Institutional support	(1,295)	(1,295)	-	1,947	887	4,128			
Operation and maintenance of plant	(1,951)	(1,951)	-	-	(1,951)	-			
Student financial aid	-	-	-	-	-	-			
Auxiliary enterprises	(562)	(562)		156	(718)	0			
Total	(3,914)	(3,914)		2,127	(1,913)	4,128			
Total Current Funds Expenditures	\$ 2,827,346	\$ 1,975,903	\$ 851,443	\$ 1,582,338	\$ 1,677,911	\$ 432,902			

SCHEDULE 8E - FY 2007-08 CURRENT FUND EXPENDITURES BY SCHOOL AND SOURCE (Dollars in Thousands)

	hool of entistry		chool of ledicine		chool of Nursing		chool of narmacy	Medical Center	angley Porter	Other	Total
	 Cittistiy	10	rearenie	1	vursnig	11	iaiiiacy	Center	1 Office	Outer	Total
General Funds	\$ 16,562	\$	90,865	\$	12,812	\$	10,079	\$ 9,276	\$ 12,204	\$ 74,953	\$ 226,752
Tuition and Fees	8,012		14,864		2,758		4,140			68,164	\$ 97,939
Federal Government Grants	12,363		275,285		12,305		20,767	-	13,078	18,426	\$ 352,224
Federal Government Contracts	1,981		49,389		-		594	-	1,125	(110)	\$ 52,980
Special State Appropriations & Contracts	1,055		26,739		11,477		7,283		917	1,922	\$ 49,394
Local Government	227		104,066		68		1		6	427	104,795
Private Gifts, Grants and Contracts	16,666		209,887		5,330		8,454	1,562	4,763	9,227	\$ 255,889
Endowment Income	943		42,064		1,329		1,535	785	617	8,368	\$ 55,641
Sales & Services Educational Activities	14,187		111,795		909		756		12,473	2,200	\$ 142,319
Sales & Services of Auxiliary			-							27,865	\$ 27,865
Sales & Services Medical Centers			-					1,397,660			\$ 1,397,660
Other Sources	2,205		11,050		1,811		4,012	401	2	48,322	\$ 67,803
Reserves	 84		(149)				220	3		(4,072)	\$ (3,914)
Total	\$ 74,286	\$	935,855	\$	48,799	\$	57,843	\$ 1,409,687	\$ 45,184	\$ 255,692	\$ 2,827,346

CAMPUS SITES

This section contains from the following sources:

- Campus Planning
- Public Affairs
- CPFM

Chapter Contents

Overview	262
UCSF Leased Facilities	267
UCSF Total Acreage	268
State of California Map	269
San Francisco City Map	270
Parnassus Campus Map	271
Mission Bay Map	272
Mt. Zion Campus Map	273
Total UCSF Assignable Square Footage by Site	274
Total Assignable Square Footage by Function	275
Total Assignable Square Footage by Campus Unit	276
Distribution of Assignable Square Footage by Unit and Site	277
Change in the Distribution of Assignable Square Feet by Function within Schools	278

The University of California has outgrown its home on Mount Sutro, and the number of satellite locations UCSF operates throughout the immediate San Francisco area is growing. Today, more than one-third of the campus's faculty and staff spend their working hours far from the infamous fog and wind of the 107-acre Parnassus Heights campus. These facilities are linked via the University's shuttle system, a free service to all employees.

Parnassus Heights, Parnassus Avenue. Located here are: the Ambulatory Care Center, Moffitt and Long Hospitals, Langley Porter Psychiatric Institute, the Schools of Dentistry, Medicine, Nursing and Pharmacy, many of the campus's central administrative offices, including that of the Chancellor, the Campus Library, Millberry Union, Aldea Student Housing, and other student housing facilities, and the Central Utilities Plant. Currently the campus has an average daily population of 16,000 staff, student, faculty and visitors.

Mission Bay. The 43-acre Mission Bay campus will contain 2.65 million gross square feet (gsf) of program space at full buildout. Development of the campus will occur in phases over the next 15 years, and will contain approximately 20 buildings at full buildout. Approximately half of the program space will be for research uses, and the balance of the space will include instruction, academic support, campus administration, campus community uses, housing and space for logistical operations. At least 8 acres of publicly-accessible open space will be located on the campus. 2.2 acres are set aside for the San Francisco Unified School District as a public school site. The site will contain structured parking to accommodate an estimated 4,200 parking spaces at buildout. Implementation of the parking structures will be phased throughout campus development according to parking demand. As of 2008, the campus had a population of 3,500 staff, student, faculty and visitors but an estimated 9,100 persons are expected to be employed at the Mission Bay campus at full buildout.

Mount Zion, 1600 Divisadero Street. In 1990, UCSF integrated with Mount Zion Medical Center. Patient care, teaching and research programs are located at UCSF/Mt. Zion. In-patient care services at Mt. Zion focus on the UCSF Cancer Center, ambulatory surgery, an urgent care center, and outpatient clinical services.

San Francisco General Hospital, 1001 Potrero Avenue. UCSF celebrated its 100th anniversary with SFGH in 1990. More than 1,000 UCSF faculty and staff members and residents provide all the medical care at "the General," which is, however, owned and operated by the City and County of San Francisco. The Schools of Dentistry, Medicine, Nursing and Pharmacy use the hospital for teaching and for clinical and basic research.

Veterans Administration Medical Center, 4150 Clement Street. UCSF has an affiliation agreement with the VA Medical Center, which employs approximately 270 UCSF faculty and staff

members involved with patient care and academic research.

Laurel Heights, 3333 California Street. This terraced, multi-storied low rise building currently houses approximately 1200 employees in the Schools of Medicine and Pharmacy, the Center for Health and Community, University Advancement and Planning, Administration & Finance, Academic Affairs and other administrative units. Although primarily used for office functions, a limited number of wet-laboratory functions also exist in the building. The building contains a Conference Center, used regularly by the Regents during the academic year, and by campus and community groups

Mission Center Building (MCB), 1855 Folsom Street. This six story converted warehouse is used by the School of Medicine and various campus administration units such as Accounting, Mail and Reprographics, for offices and laboratories. Some Medical Center units such as Hospital Accounting and Clinical Enterprise Systems occupy space in the building. Several non-UCSF tenants also occupy the building, with a total of nearly 1,100 occupants.

Buchanan Street Dental Clinic, 100 Buchanan Street. The School of Dentistry's Clinics at Parnassus Heights and Buchanan Clinic are the largest providers of dental care to MediCal and economically disadvantaged patients in the Bay Area. Many of those patients are treated at the two-story Buchanan Clinic by UCSF's faculty members and students.

Harrison Street, 3130 Harrison Street. The employees of the Facilities Management Department work in this three-story renovated facility in the Mission District.

Hunters Point, 830 Palou Street. UCSF's Animal Care Facility is located in two single-story buildings. About a dozen staff members work here.

China Basin Landing, 185 Berry Street. UCSF has clinical labs and the Diagnostic Imaging Center at this site located right across the street from AT & T Park. This building houses approximately 400 staff.

44 Montgomery Street. This is the location of the Development Office. Several separate departments, including Annual Giving and School Programs, Major Gifts, Corporate and Foundation Relations, Planned Giving and the UCSF Foundation, are housed here. About 125 employees occupy offices in this 43-story building in the Financial District.

50 Beale Street. This building houses the Center for AIDS Prevention Studies.

Oyster Point, 612 Forbes Boulevard, South San Francisco. This warehouse houses the activities

of the Materiel Management Department and the campus storehouse, including 20 staff.

Fresno. UCSF established a regional medical education program in Fresno in 1975 to provide training for doctors and other health care professionals in the central San Joaquin Valley. Primary care and specialties in undergraduate, graduate and post-graduate levels are there. In 2005, with its 30th anniversary year commemoration, the UCSF Fresno Medical Education Program celebrated the grand opening of its new Medical Education and Research Center (MERC). Roughly 190 hospital-based faculty, 297 local faculty, and 190 residents are associated with the Fresno site. Since its inception, UCSF Fresno has graduated approximately 60 physicians every year, totaling more than 2,000 to date. UCSF Fresno faculty and medical residents also care for the overwhelming majority of the area's underserved populations. In addition, UCSF Fresno educates about 200 medical students each year as well as provides academic preparation programs for middle- and high-school students interested in the health professions.

Other Leased Space. Two satellite clinics should be noted: the Lakeside Senior Medical Clinic on Ocean Avenue, and the family practice and pediatrics center at Lakeshore Plaza.

Upcoming Projects.

Hellen Diller Family Cancer Research Building (17C)

This new 162,000 gross square foot (gsf) laboratory building will serve research needs of the Cancer Center, with participation from the departments of Surgery, Neurosurgery, Neurology, Otolaryngology, Radiation Oncology, Dermatology, and Urology. The estimated cost of this project is \$128.6 million and the currently anticipated date of occupancy is April 2009.

Cardiovascular Research Building (17 A/B)

This new 200,000 gsf laboratory building would be constructed for the Cardiovascular Research Institute and house eight specialized research groups, an animal care facility, and associated administrative and support functions. The estimated cost of this 236,000 gsf facility is \$150 million and the target date of completion is 2010.

Neurosciences Research Building (19A Phase 1)

This new 91,250 gsf laboratory building would support research needs of interdisciplinary programs in the Neurosciences. The estimated cost of this project is \$67.1 million and the anticipated date of completion is to be determined.

Mission Bay Utilities and Distribution Phases 2 and 3

These two utility infrastructure projects would construct a new central utility plant with cogen-

eration and an underground utility distribution system at Mission Bay. Phase 2 would complete construction of an underground utility distribution loop, while Phase 3 would construct the central utility plant and connect it to the distribution loop. The estimated costs of Phase 2 and Phase 3 would be respectively \$26.3 million and \$80.6 million and anticipated completion is projected beyond FY 2012-13.

654 Minnesota Renovation and Build-out

This 65,000 gsf existing University-owned facility located near Mission Bay will soon be renovated to house Capital Projects and Facilities Management (CPFM), the Information Technology Services (ITS) Data Center, the School of Medicine Dean's Office Information Services Unit (ISU), and administrative staff from the Department of Pediatrics. The estimated cost of this project is about \$17 million and the anticipated completion must occur before July 2008.

Mission Bay Hospital

This new 869,000 gsf hospital complex will include a 183 bed children's hospital with urgent/ emergency care and special ambulatory facilities; a 70 bed adult hospital for cancer patients; a women's hospital for cancer care, specialty care and select outpatient services, plus a 36 bed birth center; and an energy center, helipad, parking and support services. The hospital will be located on a 14.5-acre parcel adjacent to the Mission Bay campus. The first phase of the Mission Bay hospital project is estimated to cost approximately \$1.575 billion with an anticipated completion date of late 2013 or early 2014.

Cole Hall Renovation

This 3,700 assigned square foot (asf) project remodeled and substantially improved the appearance and functioning of Cole Hall, a 408-seat auditorium on the first floor of the Medical Sciences Building and the largest classroom at UCSF. This project was completed in the fall of 2007 at a cost of approximately \$3.2 million..

Moffitt/Long Hospital's 13th Floor Acute Care Unit Remodel and Moffitt-13 Intensive Care Unit Remodel

This 32,000 asf renovation of Moffitt/Long Hospitals's 13th Floor will create a 32-bed acute care nursing unit (ACU) and a 16-bed intensive care nursing unit (ICU), adding 48 new beds and expanding the existing count of 526 beds to 574 beds. The estimated cost of these projects is \$36.2 million and the anticipated completion is planned for 2007-08.

Parnassus Child Care Center

This proposed child care facility for 80 children will consist of a large residential-scaled building and several separated outdoor play yards that will be located at the west end of the Parnassus campus adjacent to a residential neighborhood. The estimated cost of this project is \$3.4 million

and the target date of occupancy is fall 2008.

Institute for Regeneration Medicine (Stem Cell) Research Building

This proposed new 80,000 gsf building would be constructed at Parnassus to accommodate the research activities of 15-20 principal investigators in the Institute for Regeneration medicine and would consist of laboratory bench areas, lab support, academic and administrative offices, an auditorium and meeting space, and building logistical support. The estimated cost for this project is \$105 million and the anticipated date of occupancy is yet to be determined.

Osher Center for Integrative Medicine Building

This new multi-story 48,000 gsf building will include functional areas for clinical practice, lifestyle intervention programs, administrative and academic offices, and desktop research space. The estimated cost for this project is almost \$42 million and the currently estimated date of occupancy is 2009.

UCSF Leased Facilities

Property Address	Sqr. Ft.	Property Address	Sqr. Ft.
50 Beale Street	57,401	1294 Ninth Avenue	2,250
185 Berry Street	231,578	3313 North Hillard	3,888
CPMC Davies Campus	8,700	2501 Ocean Avenue	3,000
1635 Divisadero Street	14,063	44 Page Street	3,866
3180 Eighteenth Street	12,175	350 Parnassus	46,380
4122-4124 Eighteenth Street	2,858	2211 Post Street	5,321
250 Executive Park Blvd.	42,438	2233 Post Street	11,301
555 Florida Street	6,744	2352 Post Street	2,100
2585 Freeport Road	4,431	2330 Post Street (Land)	49,400
2186 Geary Blvd.	3,122	625 Potrero Avenue	3,600
3330 Geary Blvd.	6,456	Riverview Garden Apartments	13,008
3360 Geary Blvd.	19,270	SFGH	82,260
333 Gellert	2,097	1515 Scott Street	3,825
17 Hannington Road, Short Tower	104	Seventeenth & Folsom Street	55,510
2300 Harrison Street	65,494	1318-20 Seventh Avenue	2,800
815 Hyde Street	5,500	1320 Seventh Avenue	3,600
405 Irving Street	1,800	1569 Sloat Boulevard	9,376
432-A Irving Street	1,240	1300 So. Eliseo	1,360
296-298 Lawrence, So. SF	7,420	515 Spruce Street	4,403
2727 Mariposa	12,000	1388 Sutter Street	6,076
1930 Market Street	14,800	2380 Sutter Street	10,321
939 Market Street	17,500	350 Thirtieth Street, Oakland	950
964 Market Street	5,558	510 Treat Street	2,850
270 Masonic Avenue	753	3130 Twentieth Street	49,664
44 Montgomery	29,720	2 Upper Ragsdale	1,848
4800 Montgomery	11,440	1647 Valencia	3,521
2400 Moorpark Avenue	302	3924 Williams Road	2,153
260 Newhall Street	2,400	2123 Ygnacio Valley Road	3,261
Subtotal	: 587,364	Subtotal	387,892

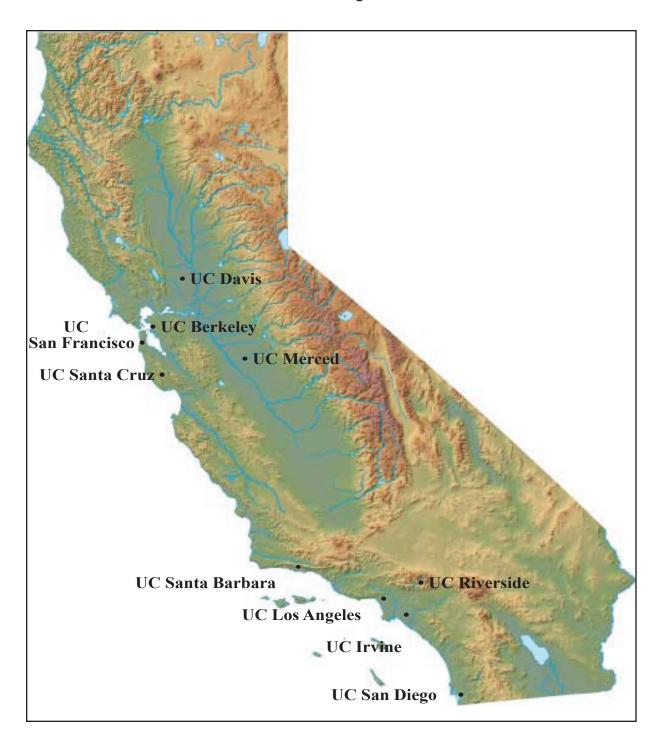
Grand Total: 975,256

UCSF Total Acreage

Location	Acreage
Parnassus Heights*	46.0
Mount Zion	6.9
Laurel Heights	10.8
Mission Center	3.1
Hunters Point	3.8
Oyster Point	5.7
Mission Bay	42.7
654 Minnesota	0.9
Fresno MERC	3.2
Total UCSF Acreage	123.1

^{*} Excludes 61 acres in Mt. Sutro Open Space Reserve

UC Campuses

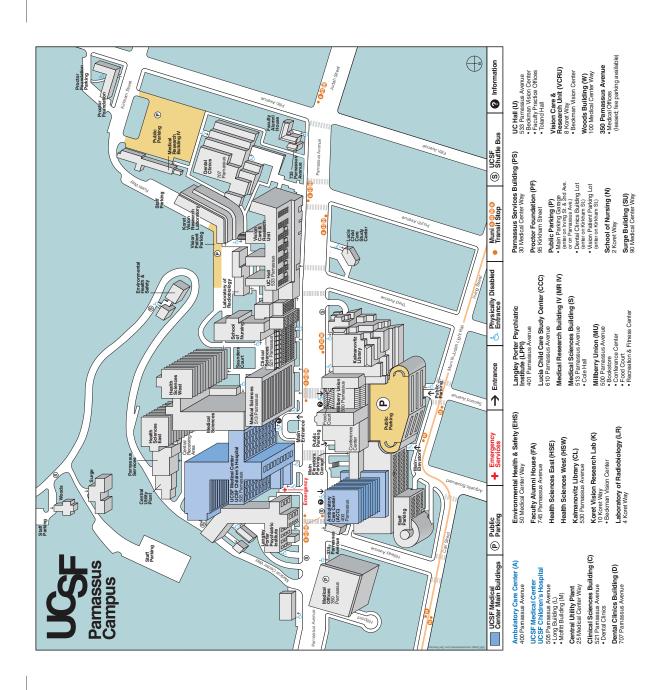


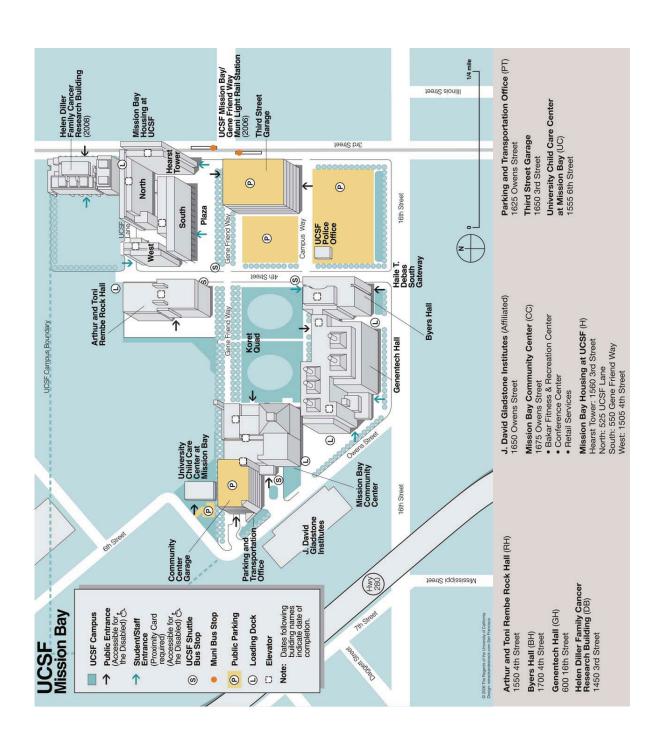


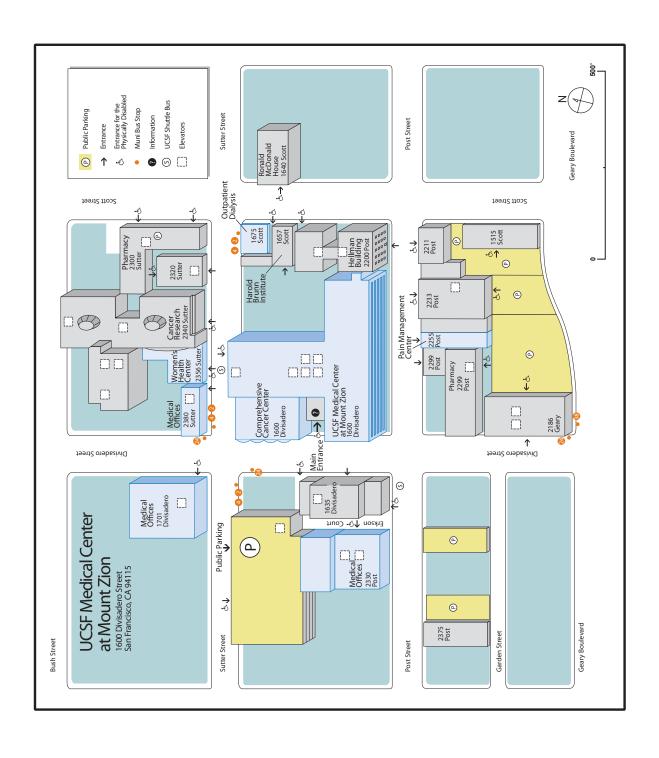
- 1 Parnassus Campus 505 Parnassus Avenue
- 2 Mission Bay Campus 1675 Owens Street
- 3 Mount Zion Campus 1600 Divisadero Street
- 4 Laurel Heights Campus 3333 California Street
- 5 Buchanan Dental Clinic 100 Buchanan Street
- 6 Mission Center Building 1855 Folsom Street
- 7 Harrison Street Building 3130 20th Street
- 8 San Francisco General Hospital (Affiliation) 1001 Potrero Avenue
- 9 Minnesota Street Building 654 Minnesota Street
- 10 Hunters Point Facility
- 11 San Francisco Executive Park 250 Executive Park Boulevard
- 12 Veterans Affairs Medical Center (Affiliation) 4150 Clement Street
- 4150 Clement Street

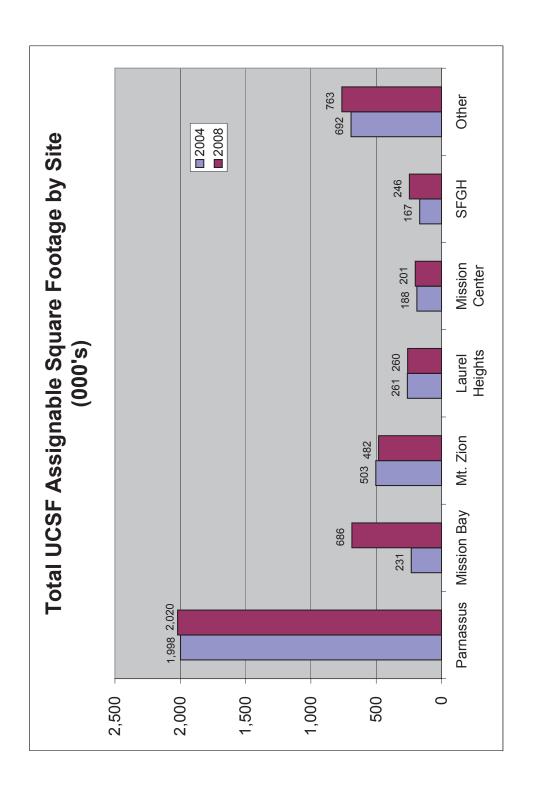
 13 China Basin Building
 185 Berry Street

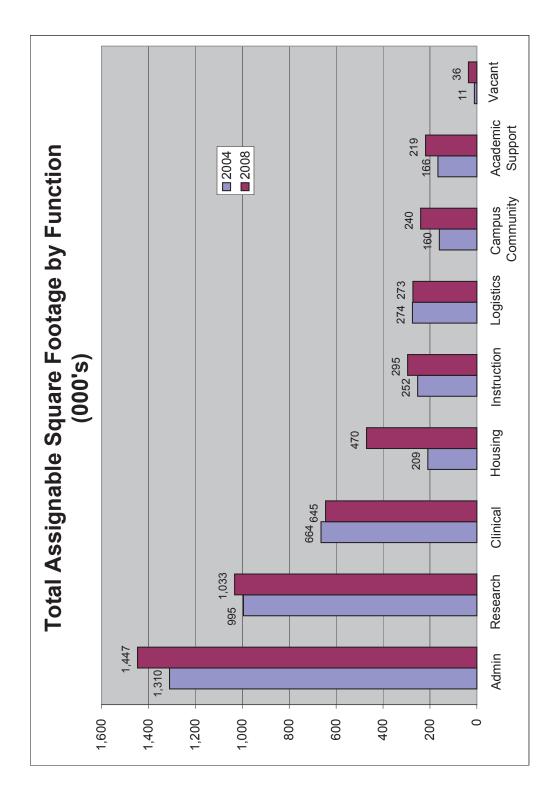
Oyster Point Facility 612 Forbes Boulevard (not shown) South San Francisco

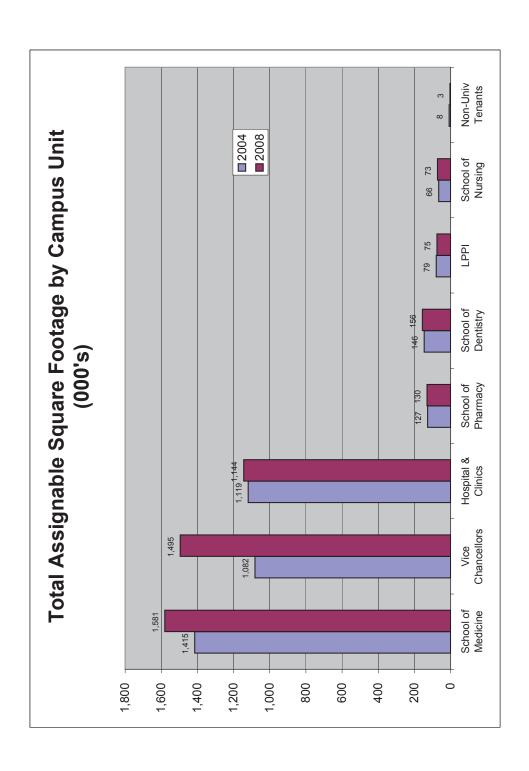


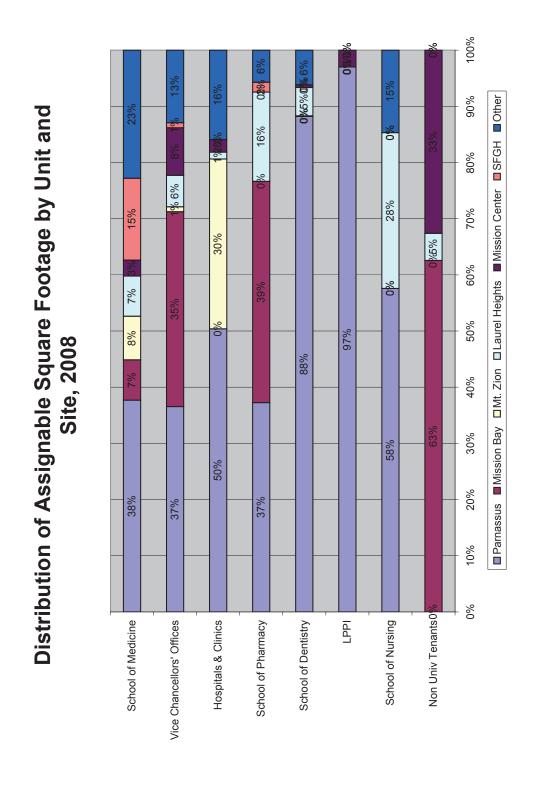












Pharmacy 2008 28% 10% **Change in the Distribution of Assignable Square Feet** Pharmacy 26% 2004 29% 11% Nursing 2008 36% 26% 32% by Function within Schools ■Research ■Clinical □ Instruction □All Other Nursing 2004 33% 23% 34% Medicine 2008 52% 35% Medicine 38% 20% 2004 10% Dentistry 2008 22% 18% 26% Dentistry 28% 2004 23% 18% 100% %06 %08 %02 %09 20% 40% 30% 20% 10% %0

University of California, San Francisco Institutional Profile - FY 2007-08 Service & Outreach

SERVICE & OUTREACH

This section contains a summary of Service & Outreach that is described on the Community website: http://www.ucsf.edu/community/

UCSF is devoted to public service and is very much a part of the San Francisco and Bay Area communities. Through its patient care and research, reliance on neighborhood businesses, campus activities — including lectures and programs for the general public — and outreach efforts, UCSF's reach and impact stretch far into the community.

Chapter Contents

Departments & Services	280
Resources	282
Health Care Information & Services	288
Education and Outreach Programs for the Community	292
Arts and Recreation	294
News & Events	295

University of California, San Francisco Institutional Profile - FY 2007-08 Service & Outreach

DEPARTMENTS AND SERVICES

- Campus Life Services
- Capital Projects & Facilities Management
- Community & Governmental Relations
- Human Resources
- Parking & Transportation
- Police Department

<u>Campus Life Services</u> - http://www.cas.ucsf.edu/cls/

Campus Life Services offers the following services:

- Arts & Events
- Child & Elder Care
- Conference Services
- Distribution & Storage
- Documents, Media & Mail
- Fitness & Recreation
- Housing Services
- Retail
- Transportation Services

See the Campus Life Services website or the section for the Senior Vice Chancellor of Finance and Administration or more detail.

Capital Projects & Facilities Management - http://www.fm.ucsf.edu/

CPFM is made up of the following divisions:

- Capital Programs
- Facilities Operations
- Resource Planning & Management

See website or Senior Vice Chancellor of Administration and Finance section for more detail.

<u>Community & Government Relations</u> - http://ucsfcgr.ucsf.edu/

UCSF Community & Governmental Relations works with our neighbors to develop creative, mutually beneficial solutions that address the inherently complex relationship between UCSF

and the wonderfully diverse city, of which it is a part.

The mission of Community Relations is to form community partnerships and communicate campus plans and activities in a proactive and forthright manner, as well as to present community feedback to campus decision makers.

The mission of Governmental Relations is to assist the University in obtaining adequate public funding and to advocate for public policy that supports the University's teaching, patient care, research, and public service programs.

<u>Human Resources</u> - http://ucsfhr.ucsf.edu/

The Human Resources website offers a searchable databases of UCSF's open career positions along with temporary employment opportunities.

<u>Parking and Transportation</u> - http://www.campuslifeservices.ucsf.edu/transportation/

UCSF has on-site parking available at most locations and offers free shuttle service between all major campus sites.

Police Department - http://www.police.ucsf.edu/

The UCSF Police Department strives to provide a crime free and safe environment through strategic policing, integrity, respect, and strong community partnerships. **It** works in partnership with our community to enhance the safety and quality of life at UCSF through:

- Crime prevention and suppression.
- Victim support and assistance.
- Infrastructure protection.
- Community education and awareness.
- Emergency preparedness.
- Traffic Safety.

RESOURCES

- Center for Gender Equity
- Child & Elder Care
- Community Partnerships Program
- Disability Access Guide
- Disability Information and Resources
- Housing Office
- Guide for Industry
- LGBT Resources
- Major Campus Sites
- Mission Bay
- Work-Life Resource Center

Center for Gender Equity - http://www.ucsf.edu/cge/

The Center for Gender Equity (CGE) is comprised of three core components:

- Women and Gender Resources
- Sexual and Relationship Violence Resources
- Lesbian, Gay, Bisexual and Transgender Resources

CGE provides advocacy, education and support services to both women and men of UCSF and the greater San Francisco community in each of these three areas. The Center draws upon the rich array of identities, experiences, perspectives and knowledge represented within UCSF, to strengthen its approach to engaging and supporting the community in its pursuit of excellence.

<u>Child and Elder Care</u> - http://www.campuslifeservices.ucsf.edu/childcare/

Since 1978, UCSF has been a reliable and consistent source of quality child care for staff, faculty and students. Dedicated caregivers, innovative programs and a diverse approach create a nurturing, safe and inspiring environment for your child.

<u>Community Partnerships Program</u> - http://www.sf.ucsf.edu/

The University Community Partnerships Program (UCPP) was established by Executive Vice Chancellor Eugene Washington in the spring of 2006 to coordinate the many existing partnerships between UCSF-affiliated individuals/groups and San Francisco-based community organizations and support new partnerships.

Our Mission

To build collaborative relationships between UCSF and the community, promoting civic engagement, fostering community health and well-being and enhancing the environment for education, research, employment and patient care at UCSF. The UCPP serves as a bridge between UCSF and the community, emphasizing partnerships that value and respect the assets and diversity of both.

Activities

To accomplish this mission, the UCPP focuses its activities in the following major areas:

- Service Learning programs, which promote socially responsive, community based educational experiences for UCSF students and residents, and support faculty development in this area.
- Educational Outreach to the community, including partnerships with local school districts to improve K-12 science education, collaborations in high school and college "pipeline" programs to increase opportunities for disadvantaged students to pursue careers in the health professions and scientific research, and other types of outreach programs,
- Economic and Employment Development, targeting economically disadvantaged communities and building partnerships with local businesses, job training programs, and other agencies to ensure employment and business opportunities that will improve the economic and civic environment in these neighborhoods,
- Community Based Research and Evaluation, emphasizing participatory models that
 engage and empower community members and community based organizations as
 partners in research activities.

In addition, we share with and encourage our researchers and community leaders to follow the principles of partnerships that will allow them to achieve their full potential as partners

UCPP is modeled after some of the most progressive academic-community partnership programs in the country. UCSF's initiative is poised to become the leader in partnership innovation thanks to the decision- and policy-making power of its council of campus and community leaders .

With UCPP's guidance and support, UCSF brings new meaning to what it means to be a public institution—one that truly serves the vibrant community of San Francisco.

Principles of Partnership

The Makings of a Model Partnership

The University Community Partnership Program is dedicated to helping every campus-community partnership be highly successful and reach its full potential. To do this, we encourage all partners to adhere to the following principles of partnership.

- Partners have agreed upon mission, values, goals, and measurable outcomes for the partnership.
- The relationship between partners is characterized by mutual trust, respect, genuineness, and commitment.
- The partnership builds upon identified strengths and assets, but also addresses areas that need improvement.
- The partnership balances power among partners and enables resources among partners to be shared.
- There is clear, open and accessible communication between partners, making it an ongoing priority to listen to each need, develop a common language, and validate/clarify the meaning of terms.
- Roles, norms, and processes for the partnership are established with the input and agreement of all partners.
- There is feedback to, among, and from all stakeholders in the partnership, with the goal of continuously improving the partnership and its outcomes.
- Partners share the credit for the partnership's accomplishments.
- Partnerships take time to develop and evolve over time.
- Partners embrace the art of evaluation, documenting whenever possible their process and measuring their interventions to create transparency, accountability, and replicability.
- Partners plan together the dissemination of research findings into translatable and practical applications with the community.

Educational Outreach

UCSF has a long history of reaching out to the citizens of San Francisco. Whether it is partnering with schools to improve science education or partnering with health clinics to teach the elderly

how to better manage chronic disease, UCSF faculty, staff and students have brought health information to the people of San Francisco, making a difference in their lives.

UCPP builds upon that solid foundation, working to enhance and expand those efforts by:

- serving as a clearinghouse for the health, science and education resources that UCSF has to offer the community
- determining the community's educational needs and helping to meet them

Service Learning

Meeting UCSF's vision for community partnerships includes meeting its primary goal of educating the next generation of doctors, nurses, dentists, pharmacists and other health professionals. Service-learning combines community service with explicit learning objectives, preparation to meet those objectives and reflection on the learning experience. It is an important part of meeting UCSF's educational goals.

UCPP is dedicated to the core principles and values behind service-learning in the health professions.

A well-designed curriculum in service-learning

- is developed, implemented and evaluated in collaboration with the community
- responds to concerns identified by the community
- attempts to balance the service that is provided and the learning that takes place
- enhances learning by allowing the application of skills to real world situations
- provides opportunity for critical reflection

Students engaged in service-learning

- provide direct community service
- learn about the context in which the service is provided
- reflect on their roles as health professionals and as citizens

UCPP provides resources, training and support to those looking to include service-learning components in their community partnerships, as well as enhance and enrich existing service learning programs.

Community Based Research

The University Community Partnerships Program is committed to promoting a different model of research—one which empowers community members and community based organizations as active collaborators with UCSF researchers to bring the best of science to bear on real life health challenges. The UCPP believes that community members should be active participants in the pursuit of science, working alongside UCSF researchers to identify topics of mutual concern and to collaborate in the design, implementation and dissemination of research studies.

These types of collaborations:

- 1. enrich the relevance and validity of scientific research by identifying important new areas of scientific inquiry
- 2. recruit study participants who are more representative of the nation's diverse population
- 3. enhance the application of research evidence to improve the public's health

The UCPP Research and Evaluation ACI is closely linked with the Community Engagement Program (CEP) of the UCSF Clinical & Translational Science Institute (CTSI). The CTSI is a major new NIH funded initiative to transform clinical research, including support for more community based research and greater community application of clinical research evidence.

Economic Development Initiative

Since its inception in late 2000, the Economic Development Initiative, formerly known as Community Partnerships Program, has forged new and innovative partnerships with community-based organizations and businesses in the neighborhoods adjoining our still evolving Mission Bay campus. These partnerships demonstrate a new way of working with community in a manner that is inclusive, participatory, and builds on the strengths and assets of our newest neighbors, as well as the university. The Economic Development Initiative works with over 10 UCSF departments and 25 community-based organizations to implement its workforce and business development programs.

<u>Disability Access Guide</u> - http://access.ucsf.edu/

Disability Information and Resources - http://www.ucsf.edu/resources/disability.html

<u>Housing Office</u> - http://www.campuslifeservices.ucsf.edu/hous

Housing Services offers a variety of programs. We are a customer driven organization, providing quality housing and related services to students, post-docs, residents/clinical fellows and faculty.

<u>Guide for Industry</u> - Website: http://corporate.ucsf.edu/

With over 15,000 faculty and staff, 4,000 graduate students, and more than 1,000 postdoctoral fellows, UCSF is ranked among the top five centers in the US for health sciences research and education

UCSF offers decades of experience partnering with industry to secure and grow vertical and horizontal market share.

UCSF discoveries and scientists have launched over 60 start-ups – including Genentech and Chiron – and UCSF leads all UC campuses in licensing revenues. We engage with external partners in nearly 200 clinical trials and 100 research collaborations annually.

<u>LGBT Resources</u> - http://www.ucsf.edu/cge/lgbtr/

Lesbian, Gay, Bisexual, Transgender, Intersex Resources (LGBTIR) reflects and advances the University of California's commitment to equity, diversity, and cultural competence in education, employment, research, and health care. You're warmly invited to contact us about LGBTIR's programs and services, which include:

Workshops,

trainings, panels, lectures, conferences, and more

Information,

referrals, and informal advising and support

Networking

and mentoring opportunities

Advocacy

for inclusion of LGBTI people and concerns in all UC programs and services

Listservs

for UC's LGBTI communities, LGBTI parents, and LGBTI staff

Newsletter

featuring LGBTI-related news from UC and beyond

Library

specializing in LGBTI health issues

Work-Life Resource Center - http://www.ucsf.edu/wrklife/

The UCSF Work-Life Resource Center envisions a diverse campus community where the quality of life at work is enhanced, enriched, and sustained for all members. The WLRC promotes collaborative strategies that foster supportive work and learning environments.

HEALTH CARE INFORMATION & SERVICES

- Cancer Resource Center
- Community Consortium (HIV)
- Dentistry Clinics
- HealthWorks at Mount Zion
- Homeless Dental Clinic
- HIV InSite
- Institute for Health and Aging
- National Center of Excellence in Women's Health
- UCSF Clinical Trials
- UCSF Medical Center

<u>Cancer Resource Center</u> - http://cancer.ucsf.edu/crc/

The Cancer Resource Center supports wellness and the healing process by providing patients and their loved ones with information, emotional support, and community resources. The CRC maintains a multimedia library, provides access to specialized health databases, and offers research assistance. We host diverse support groups and classes, and direct people to other community resources. All CRC programs are free.

<u>Community Consortium (HIV)</u> - http://www.communityconsortium.org/index.html

The Community Consortium is an association of health care providers who care for the majority of people living with HIV in the San Francisco Bay Area. Our mission is to improve the quality of primary medical care for people with HIV/AIDS in our community.

Dentistry Clinics - http://dentistry.ucsf.edu/patients/directory.html

Directory of Clinics

- Buchanan Dental Center
- Center for Craniofacial Anomolies
- Faculty Group Practice
- Faculty Prosthodontic Group
- Oral and Maxillofacial Surgery at UCSF
- UCSF Maxillofacial Surgery at San Francisco General Hospital
- UCSF Center for Orofacial Pain
- Oral Surgery at Buchanan Dental Clinic
- UCSF Orofacial Center
- Orthodontic Practice
- Parnassus Student Dental Clinics
- Pediatric Dentistry
- Oral Medicine/Oral AIDS Center/Sjögren's Syndrome Clinic

<u>HealthWorks at Mt. Zion</u> - http://mountzion.ucsfmedicalcenter.org/healthworks/index.asp

HealthWorks for Women, the first hospital-based comprehensive women's health center in San Francisco, opened at Mount Zion in 1986. Located on the first floor of the hospital building, services included a women's health library with a range of books, periodicals, audio and video tapes, freely available. Closed shortly after the UCSF - Mount Zion merger in 1990, the revival of HealthWorks is made possible by a generous donation from a former patient, Margaret Carter, and now serves as a resource for all patients and visitors to Mount Zion.

Homeless Dental Clinic - http://www.ucsf.edu/hdc/

A collaboration between faculty, residents, students, and volunteers, Tom Waddell Health Center / UCSF Community Health Clinic has been working to improve the health of homeless San Franciscans for over a decade.

The philosophy of the Dental Clinic is to motivate patients to seek healthcare and to prevent dental disease through education and preventive dentistry. The Dental Clinic is guided by three mutually supportive sets of aspirations:

....For the clients

To provide oral health education, referrals, and treatment. To make a positive impact on the lives of the homeless people.

....For the students

To create a setting in which students can learn, teach, and practice clinical skills. To cultivate sensitivity and comfort in interactions with the underserved population.

.....For the Community

To use the Dental Clinic as a forum for education and health care service. To promote advocacy for the needs of this population.

Ultimately, we hope this experience will broaden our vision and make us more able and compassionate health care providers for any population we choose to serve.

HIV InSite - http://hivinsite.ucsf.edu/

Comprehensive, up-to-date information on HIV/AIDS treatment, prevention, and policy from the University of California, San Francisco School of Medicine.

Institute for Health and Aging - http://nurseweb.ucsf.edu/iha/

Our Mission - to optimize the health and aging of individuals, communities, and society through research, education and public service in the social and behavioral sciences.

The number and proportion of older Americans is growing rapidly and continues to accelerate with the aging of the "baby boomers." This demographic trend, combined with concurrent increases in the prevalence of chronic illness, the need for long-term care, and the impact of a changing and financially constrained health care system, underscore the critical need for research that investigates cost effective health care services delivery, outcomes, accountability, access to services, and quality of care. Coupled with increasing state government responsibility for health and long-term care, these trends have necessitated the integration of research into practice applications in real-world settings. The Institute for Health & Aging responds directly to these challenges nationally.

National Center of Excellence in Women's Health - http://www.ucsf.edu/coe/

Now entering its tenth year, the only nationally-designated Center of Excellence (CoE) of its kind in Northern California is an established health service provider and resource for and partner with the community in tackling current topics in women's health. The last decade has seen major

advances in women's health, and the UCSF CoE has played a key role in this process leading innovations in clinical practice, development of new knowledge, and in professional and community education. We were one of the original six institutions given the 'Center of Excellence' honor by the US Department of Health and Human Services Office on Women's Health, and there are now 23 Centers across the country.

Our Model of Women's Health:

The UCSF National Center of Excellence in Women's Health (CoE) has developed a new model to transform the traditional Academic Medical Center from a fragmented set of activities into a dynamic and multi-disciplinary health care system focused on the needs of all women.

The model includes five components:

- integrated clinical care to provide seamless health care services to women
- research focused on women's health issues to better understand women's health needs
- professional education to better educate tomorrow's women's health care providers
- leadership activities to encourage women interested in this field
- community outreach to expand services and the reach of the program beyond the walls of the university setting.

Clinical Trials - http://medschool.ucsf.edu/clinical trials/

UCSF's expertise with clinical trials includes researchers in the following departments and centers:

- AIDS Clinical Trials Group at SFGH Center
- Asthma Clinical Research Center
- Cardiology Research
- Cardiovascular Research Institute (CVRI)
- Center for AIDS Prevention Studies (CAPS)
- Center of Excellence in Women's Health
- Comprehensive Cancer Center
- Cryptosporidium parvum Genome Demonstration Project
- Drug Dependence Research Center
- Fetal Treatment Center
- Gladstone Institute for Cardiovascular Disease
- HIV InSite Clinical Trials
- Immune Tolerance Network

- Immunogenetics and Transplantation
- Laboratory for Radiological Informatics
- Lipid Clinic
- Magnetic Resonance Science Center
- Multiple Sclerosis Genetics Group
- UCSF Pain Management Center

<u>UCSF Medical Center</u> - http://www.ucsfhealth.org/

UCSF Medical Center is one of the top 10 hospitals in the nation and a leader in the medical innovations that have improved and saved lives. Explore ucsfhealth.org to learn more about our services and doctors.

EDUCATION AND OUTREACH PROGRAMS FOR THE COMMUNITY

- Osher Lifelong Learning Institute
- UCSF Mini Medical School
- Science & Health Education Partnership

Osher Lifelong Learning Institute

Osher Lifelong Learning Institute at UCSF presents Mini Medical School for the public, beginning in October

UCSF Mini Medical School

UCSF Mini Medical School is a public education course focusing on the theme "Bringing Science to Life: the Promise of Modern Medicine." Designed for people who want to know more about the science behind the news and the intricate workings of the human body, it includes lectures on health and science topics and special visits to clinical units and research labs at UCSF. The course is structured to approximate some of the core learning that health science students experience in their first two years of study.

The UCSF Mini Medical School is designed to provide members of the community the opportunity to see and hear what goes on every day in UCSF's classrooms and research labs with lectures from the same faculty who are on the front lines and special elective classes that take you behind the scenes. Mini Med addresses issues of accelerating public interest in the science behind the health headlines, in the role of the consumer in health care decision making, and in helping to shape health policy.

Science and Health Education Partnership

The Science & Health Education Partnership (SEP) is a collaboration between the University of California, San Francisco and the San Francisco Unified School District. Scientists and educators from both organizations work in partnership to support quality science education for K-12 students.

SEP, founded in 1987 and currently housed in the Department of Biochemistry & Biophysics, is nationally recognized as a model partnership between a university and a local public school system. Since 1989, SEP has been awarded nearly \$9-million in competitive federal, private, and state awards. SEP is currently funded by the Howard Hughes Medical Institute, by a NIH-Science Education Partnership Award (SEPA) from the National Center for Research Resources (NCRR), the Bechtel Foundation, the UCSF Chancellor's Office, the UCSF School of Medicine, and the California Science Project.

SEP's mission is to promote partnership between scientists and educators in support of high quality science education for K-12 students. To this end, SEP develops and implements programs with the following goals: 1) to support teaching and learning among teachers, students, and scientists; 2) to promote an understanding of science as a creative discipline, a process, and a body of integrated concepts; 3) to contribute to a deeper understanding of partnership; and 4) to provide models and strategies for other institutions interested in fostering partnerships between scientific and education communities.

For SEP, the primary meaning of the term partnership is mutual teaching and learning among partners. As a result, SEP functions as a teaching and learning community in which all participants are encouraged to simultaneously take on the roles of student, teacher, and scientist. As students, we are learning and discovering; as teachers, we are making instructional decisions, implementing pedagogical strategies, and assessing learning; and, as scientists, we are incorporating prior knowledge and generating new knowledge through the course of inquiry. This mutual inquiry into science education through partnership incorporates shared decision-making, continual development of the organization along with the individual, and leadership and expertise arising out of the community of teachers, scientists, and students. SEP continues to evolve by building and applying a foundation of knowledge about successful approaches to professional development and scientist-teacher partnership.

Each year, SEP coordinates the efforts of over 300 UCSF participants who contribute approximately 10,000 hours of service with over 400 SFUSD teachers and their students, representing 80-90 percent of the District's K-12 schools.

ARTS AND RECREATION

- Cole Hall Cinema
- Millberry Fitness & Recreation Center
- Outdoor Programs
- Performing Arts Clubs
- Rec Sports

<u>Cole Hall Cinema</u> - http://www.campuslifeservices.ucsf.edu/artsevents/calendar/cinema/

The latest movies from spectacles, anime, dramas, documentaries and more - Cole Hall Cinema has been the movie theater of choice for the campus community for over 40 years. Where else can you see first-run movies and classics for less than what you'd pay for lunch?

Millberry Fitness & Recreation - http://www.cas.ucsf.edu/mps/membership/

Millberry Recreation and Fitness Center offers modern facilities, the latest exercise equipment, an indoor swimming pool and personal service from a knowledgeable staff. Located at UCSF's Parnassus Campus, the fitness center provides a convenient and comfortable workout atmosphere for the university community.

Outdoor Programs - http://www.outdoors.ucsf.edu/

Outdoor Programs creates rejuvenating outdoor experiences for students, staff and families in UCSF and local community. Whether it's paddling the shores of Mission Bay, hiking through Yosemite, or enjoying a day on the beach, we make it easy to take advantage of the fun opportunities right outside your back door.

<u>Performing Arts Clubs</u> - http://www.campuslifeservices.ucsf.edu/artsevents/calendar/clubs.php

- Visual Arts Club
- Ballroom & Latin Dance Club
- Gospel Choir at UCSF
- Symphony Parnassus
- Parnassus Players
- Vocal Chords
- Piano Committee
- Poets on Parnassus
- Brass Ensemble at UCSF
- Jazz Ensemble

Booster Shot

Rec Sports - http://www.recsports.ucsf.edu/

There's something for everyone at UCSF Recreational Sports. The program offers leagues, dropin sports, clubs, and clinics for UCSF students, staff, and community.

NEWS & EVENTS

- Campus Events Calendar
- UCSF Today
- UCSF News Office
- UCSF Magazine
- UC Newswire
- Synapse

Campus Events Calendar - http://calendar.ucsf.edu/

<u>UCSF Today</u> - http://pub.ucsf.edu/today/cache/index.html

<u>UCSF News Office</u> - http://pub.ucsf.edu/newsservices/

A division of the UCSF Department of Public Affairs, News Services handles news and media relations for all programs affiliated with the UCSF Campus, UCSF Medical Center and UCSF Children's Hospital. This responsibility includes writing and distributing news releases, responding to inquiries from journalists, identifying faculty experts for interviews, maintaining communication with journalists at the local, regional, and international level, developing strategic communications plans and tracking media coverage about UCSF.

UCSF Magazine - http://pub.ucsf.edu/magazine/about/

First published in 1978, UCSF Magazine features stories that showcase the programs, people and discoveries that breathe life into the UCSF mission (research, public service, teaching, patient care) and that demonstrate the breadth and significance of our health sciences campus, as well as its impact upon society. It is produced semi-annually in the fall and spring by the UCSF department of Public Affairs.

<u>UC Newswire</u> - http://ucnewswire.org/ucnw.cfm

Synapse - http://www.ucsf.edu/synapse/

Synapse is the UCSF student-run weekly newspaper with offices in Millberry Union 123W. The paper appears on Thursdays during the academic year and monthly during the summer. Synapse is also published weekly online.

Thousands of copies of Synapse are read weekly on campuses at Parnassus and Mission Bay, as well as sites at Mission Center, Mt. Zion, and Laurel Heights. Synapse is one of the primary news sources for the rapidly developing UCSF community. All UCSF students, faculty and staff members are invited to contribute. Announcements and letters should be submitted six days before publication and can be either e-mailed, faxed, sent or dropped-off at the Synapse office. All material submitted, including letters, is subject to editing.

ALUMNI & DEVELOPMENT

This section contains general information about Development and Alumni Relations - UCSF Foundation along with year end status reports.

Chapter Contents

Background Information	298
Preliminary Fund-Raising Report	300
UCSF Private Support Report	301
Five Year Comparison - Year-to-Date	302
Regents' Endowment Funds Income Trends	304
UCSF Foundation Fund Growth Trends	305

DEVELOPMENT AND ALUMNI RELATIONS - UCSF FOUNDATION

 Associate Vice Chancellor James W. Asp II

Senior Management Staff

- Corporate and Foundation Relations Jeff Ellis, Senior Director
- Development and Alumni Services
 Linda E. Williams, Executive Director
- Financial Services and Administration Mike Irwin, Executive Director
- Planned Giving Dan Riley, Director
- Website http://www.ucsf.edu/support/

The UCSF Foundation was established in 1982 as a 501(c)(3) nonprofit public benefit corporation to promote the welfare of the University of California, San Francisco by raising funds to meet critical needs, sponsoring educational programs and involving friends and supporters in the work of the University.

The UCSF Foundation comprises approximately 100 members—all distinguished leaders from the community, the University or the alumni body—who elect a board of directors that serves as the Foundation's governing body. This board oversees the Foundation's operations through several committees: advocacy, finance, foundation relations, investment, trusts, membership development and support groups.

The UCSF Foundation's daily operations are carried out by the Office of University Development and Alumni Relations. Because only 13 percent of the University's operating budget comes from state sources, UCSF has grown increasingly dependent on the Foundation to cultivate private support.

Ranked among the top health sciences institutions in the world, UCSF is positioned to translate fundamental advances in the biomedical and quantitative sciences into new knowledge, cures and treatments. But diminishing state funding, aging facilities and the realities of health-care economics all challenge its ability to fulfill this promise.

Without significant private support, UCSF will remain static in a rapidly changing world. With the resources generated by private giving, UCSF will be able to remain at the forefront of medical innovation and continue in its mission of improving human health.

UCSF unresult of california surfranciaco				30-Jun-2008 INAL FUND-RAISING REF (Dollars in thousands)	30-Jun-2008 FINAL FUND-RAISING REPORT (Dollars in thousands)	 	
				,	,		
		FY 2007-2008	8		FY 2006-2007	2	
Month	Count Goal	Number Of Donors Goal	Amount Goal	Count Goal	Number Of Donors Goal	Amount Goal	Soal
	37,500	27,800	\$ 275,000	35,000	25,900	\$ 23	230,000
	7	7001		7000	0777	€	77.0
July	1,966	1,782		2,231	2,146	.,	8,041
August	1,321	1,132	\$ 25,359	1,658	1,371	\$	4,768
September	1,833	1,597	\$ 25,176	1,506	1,296	\$ 3	34,911
October	2,525	2,136	\$ 37,744	3,248	2,890	\$ 2	25,202
November	2,895	2,248	\$ 24,473	4,299	3,563	\$ 2	26,420
December	609'2	5,049	\$ 63,681	7,033	3,846	\$	32,244
January	2,806	3,998	\$ 29,199	2,276	3,321	\$ 2	24,656
February	2,154	1,333	\$ 27,099	2,210	1,421	\$ 1	15,042
March	2,735	2,205	\$ 36,545	1,622	1,023	\$	19,324
April	3,764	2,592	\$ 14,745	3,573	2,197	\$	13,778
May	2,694	1,620	\$ 24,786	3,017	1,847	\$	18,147
June	2,555	747	\$ 33,731	3,147	1,722	\$ 2	29,411
YEAR TOTAL	34,857	26,439	\$ 366,068	35,820	26,643	\$ 25	251,945
% OF GOAL	93.0%	95.1%	133.1%	102.3%	102.9%		109.5%
Gifts - Alumni	6,398		\$ 2,827	5,882		\$	2,687
Gifts - Other	27,858		\$ 200,306	29,363		\$ 15	152,000
Total Gifts	34,256		\$ 203,133	35,245		\$ 15	154,686
Private Grants	601		\$ 162,935	575		6 \$	97,259
		007.00					-, 0,
YEAR TOTAL	34,857	26,439	\$ 366,068	35,820	26,643	\$ 25	251,945

Final Private Support Report -- FY2007-08

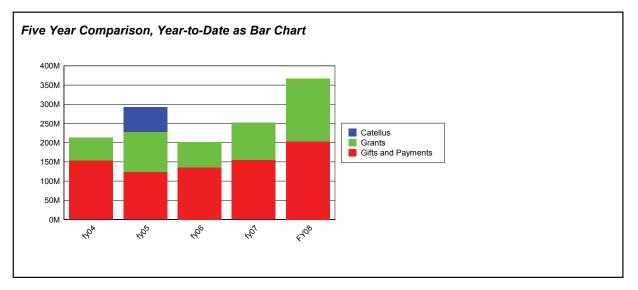
Thursday, July 3, 2008

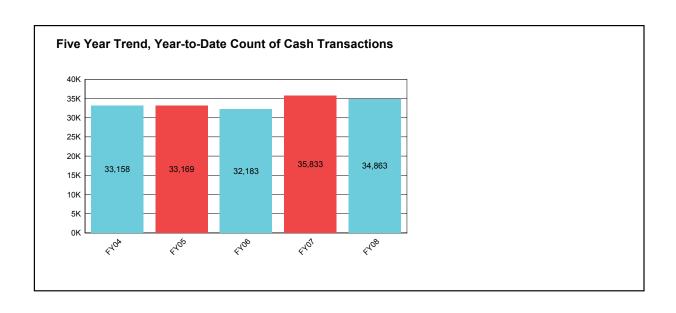
All totals are for cash or equivalent, except for pledges where indicated. Deferred gifts are reported at present value.

		UCSF			
	Regents	Foundation	Total	FY07	Difference
Source of Gifts					
Alumni	88,713	2,738,184	2,826,896	2,686,561	140,335
Foundation Directors/Members	1,500	1,012,203	1,013,703	454,123	559,580
Other Individuals	32,738,037	40,121,645	72,859,682	65,151,785	7,707,898
Campus Organizations	528,773	473,312	1,002,085	4,272,601	(3,270,516
Corporations	12,196,500	9,982,044	22,178,545	23,231,897	(1,053,352
Foundations	130,544,076	95,871,368	226,415,444	133,534,987	92,880,457
Other Sources	38,652,238	1,119,424	39,771,663	22,613,388	17,158,275
Total	214,749,837	151,318,180	366,068,018	251,945,341	114,122,676
Purpose of Gifts					
•					
Research	71,292,369	22,655,747	93,948,116	62,566,620	31,381,496
Student Support	11,586,398	3,770,052	15,356,449	12,697,340	2,659,109
Instruction	1,453,467	1,120,150	2,573,618	3,033,684	(460,066)
Campus Improvement	5,299,305	36,126,186	41,425,492	46,154,852	(4,729,360)
Department Support	104,002,542	50,220,442	154,222,984	112,014,056	42,208,928
Unrestricted	1,775,546	3,742,292	5,517,838	4,374,756	1,143,082
Other	19,340,210	33,683,311	53,023,521	11,104,035	41,919,486
Total	214,749,837	151,318,180	366,068,018	251,945,341	114,122,676
Breakdown by School					
Chancellor's Office	7,776,664	37,324,748	45,101,412	56,340,674	(11,239,262)
Dentistry	15,934,792	1,681,071	17,615,863	9,950,300	7,665,563
Graduate Division	680,143	3,100	683,243	1,731,328	(1,048,084)
Medical Center	1,087,551	3,806,627	4,894,178	2,544,221	2,349,957
Medicine	184,905,233	105,522,866	290,428,098	170,029,732	120,398,366
Nursing	1,646,889	1,181,714	2,828,602	3,563,553	(734,951)
Pharmacy	2,718,566	1,798,055	4,516,621	7,785,534	(3,268,913)
Total	214,749,837	151,318,180	366,068,018	251,945,341	114,122,676
Breakdown by Gift Type					
Cash	212,961,893	132,935,883	345,897,776	231,666,812	114,230,965
Securities	1,225,952	17,240,426	18,466,378	18,939,761	(473,383)
Real Property	0	1,141,872	1,141,872	1,076,998	64,873
Non-Monetary	561,992	0	561,992	261,771	300,221
Total	214,749,837	151,318,180	366,068,018	251,945,341	114,122,676

Breakdown by Transaction Typ	e (Non-binding Pled	ges Excluded fron	n Total)		
	Regents	Foundation	Total	FY07	Difference
Payments	4,701,213	68,208,265	72,909,477	49,402,376	23,507,101
Outright Gifts and Grants	210,048,625	83,109,915	293,158,540	202,542,965	90,615,575
Cash Total	214,749,837	151,318,180	366,068,018	251,945,341	114,122,676
New Pledges	2,709,919	145,203,430	147,913,349	116,317,006	31,596,343

Five Year Comparison,	Year-to-Date				
	<u>FY04</u>	<u>FY05</u>	<u>FY06</u>	<u>FY07</u>	<u>FY08</u>
Private Grants	59,628,821	104,307,774	65,668,000	97,259,124	162,934,677
Gifts and Payments	154,367,959	123,991,348	135,538,363	154,686,217	203,133,341
Catellus	0	64,633,260	0	0	0
Total	213,996,780	292,932,382	201,206,363	251,945,341	366,068,018





4 2 %

UNIVERSITY OF CALIFORNIA SAN FRANCISCC REGENTS' ENDOWMENT FUNDS INCOME TRENDS (Dollars in Millions)

	FY 1998-99	FY 1999-00	FY 2000-01	FY 1998-99 FY 1999-00 FY 2000-01 FY 2001-02 FY 2002-03 FY 2003-04 FY 2004-05 FY 2005-06 FY 2006-0	FY 2002-03	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-0
Number of Endowment									
Income Funds	461	471	478	481	499	514	525	540	22
Principal Amount									
@ Market Value	\$ 583.61	\$ 651.82	\$ 610.40	\$ 583.61 \$ 651.82 \$ 610.40 \$ 542.66 \$ 563.41 \$ 654.05 \$ 709.20 \$ 769.59 \$ 890.74	\$ 563.41	\$ 654.05	\$ 709.20	\$ 769.59	\$ 890.74
Income Earned ⁽¹⁾	\$ 20.95	\$ 23.78	\$ 27.03	20.95 \$ 23.78 \$ 27.03 \$ 28.07 \$ 28.05 \$ 29.38 \$ 29.73 \$ 30.53 \$ 32.22	\$ 28.05	\$ 29.38	\$ 29.73	\$ 30.53	\$ 32.22
% Change in Income	13.86%	13.51%	13.66%	%88.8	%90.0-	4.73%	1.19%	7:69%	5.52%

51

(1) Income earned as of the fiscal close for the specific fiscal year. Income typically transferred to the campus in August and recorded in the campus G/L in the next fiscal year.

Source: University of California Financial Reports & Endowment Funds Annual Report

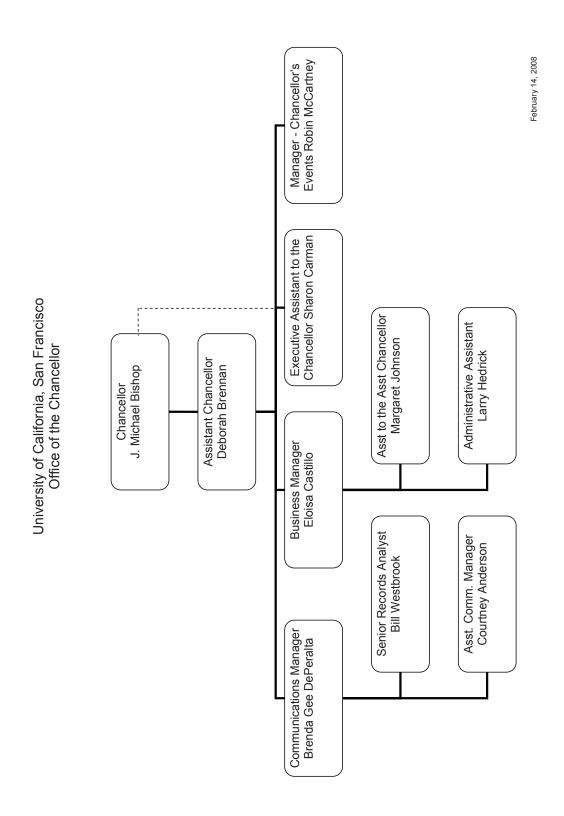
J:\Budget Classes\06-07 Budget Overview\07-08 Endowment Trends.x\s 2/23/2009

UCSF FOUNDATION FUND GROWTH TRENDS (Dollars in Thousands)

					And in contrast of the last of	The second secon			
	FY 1998-99	FY 1999-00	FY 2000-01	FY 1998-99 FY 1999-00 FY 2000-01 FY 2001-02 FY 2002-03 FY 2003-04 FY 2004-05 FY 2005-06 FY 2006-07	FY 2002-03	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-07
Current Funds	\$ 69,333	\$ 87,539	\$ 180,634	\$ 69,333 \$ 87,539 \$ 180,634 \$ 177,063 \$ 195,015 \$ 240,515 \$ 236,961 \$ 202,163 \$ 231,663	\$ 195,015	\$ 240,515	\$ 236,961	\$ 202,163	\$ 231,663
@ Market Value		*							
Endowment Funds		\$ 216,222	\$ 229,734	\$ 165,770 \$ 216,222 \$ 229,734 \$ 219,705 \$ 248,509 \$ 298,920 \$ 338,475 \$ 380,902 \$ 465,591	\$ 248,509	\$ 298,920	\$ 338,475	\$ 380,902	\$ 465,591
@ Market Value									
Total Funds	\$ 235,103	\$ 235,103 \$ 303,761	\$ 410,368	\$ 396,768	\$ 443,524	\$ 539,435	\$ 575,436	\$ 583,065 \$ 697,254	\$ 697,254
@ Market Value							,		
Percent Change in	22.25%	29.20%	35.10%	-3.31%	11.78%	21.62%	6.67%	1.33%	19.58%
Fund Balances									***************************************
							·		

Source: UCSF Foundation Statements

CHANCELLOR'S OFFICE



CHANCELLOR'S OFFICE

J. Michael Bishop, M.D. Chancellor

John Michael Bishop was born in York, Pennsylvania in 1936 and spent his childhood in a rural area on the west bank of the Susquehanna River. During the summer months of his high school years, Dr. Robert Kough, his family physician, aroused his interest in the life of a physician and the fundamentals of human biology.

He entered Gettysburg College intent on preparing for medical school, where he met Kathryn Ione Putman, the woman who would become his wife. After graduating with a major in chemistry, Bishop accepted an offer to attend Harvard Medical School. At Harvard, he discovered that the path to an academic career in the biomedical sciences lay through research, not through teaching. During this period, he became a practiced pathologist, got married, and developed a passion for molecular biology.

Upon graduation, Bishop received clinical training as a house physician at the Massachusetts General Hospital. Years later, the hospital awarded him the prestigious Warren Triennial Prize.

Following clinical training, Bishop was trained in fundamental research as a postdoctoral fellow in the Research Associate Training Program at the National Institutes of Health (NIH) in Bethesda, MD. While at the NIH, he studied the replication of the poliovirus and conducted his first publishable research. Midway through his postdoctoral training, Bishop moved to Hamburg, Germany to continue his training for one year before accepting a position at UCSF in February, 1968

After moving to San Francisco, he continued his work on poliovirus and researched retroviral replication, eventually joining forces with Harold Varmus in late 1970 to study how Rous Sarcoma Virus transforms cells to neoplastic growth. Their collaboration would eventually lead to the discovery of retroviral oncogenes which resulted in their Nobel Prize in Physiology or Medicine for 1989.

Chancellor Bishop began his career at UCSF as an Assistant Professor of Microbiology and Immunology and is now a Professor in the same department and in the Department of Biochemistry and Biophysics. He serves as Director of the G. W. Hooper Research Foundation. He became the eighth Chancellor of UCSF on July 1, 1998.

Source: Autobiography of J. Michael Bishop, M.D.

About the Office of the Chancellor

The functions of the Immediate Office of the Chancellor include:

Administrative and Professional Support for the Chancellor - provide administrative and professional support for the Chancellor: facilitate appropriate input and follow-up on executive decisions required of the Chancellor and senior administrators; maintain and coordinate the Chancellor's calendar, and travel arrangements; manage the Chancellor's residence; work with the Campus Events Office to plan events and special programs for the Chancellor and his spouse; coordinate Chancellor-related visitor arrangements; research, edit, and write Chancellor's correspondence, manuscripts, reports, and other written materials.

Campus Liaison with the Office of the President, Regents, External Agencies, and Internal Offices - serve as liaison to the Office of the President and Secretary to the Regents; provide coordination and preparation for Regents' and Council of Chancellors' meetings; handle inquiries from city, state, and federal offices; facilitate complaint resolution; special handling/follow-up of requests for physician referrals and other special requests; coordinate among Vice Chancellors' offices; liaison with the Development Office on Chancellor's activities and involvement; provide logistical support for the campus Emergency Operations Committee for designated campus emergencies.

Manage the Chancellor's Administrative Records System - serve as office of record for Chancellor's correspondence; coordinate the Chancellor's incoming and outgoing mail; ensure resolution of actions assigned to senior campus administrators; develop, implement, and maintain correspondence document imaging/workflow system for senior campus leadership. Please see Chancellor's Office correspondence guidelines.

Chancellor's Committees - prepare appointments and staff Chancellor's committees and boards.

Information Management - develop, maintain, and update websites for the Office of the Chancellor, including UCSF Administrative Policies and UCSF Delegations of Authority; coordinate campus Public Records Act requests; serve as office of record for campus and University policies; serve as office of record on campus Delegations of Authority mandated by the Office of the President; maintain campus Records Disposition Schedule Manual.

FORMER CHANCELLORS

Haile T. Debas, M.D. Chancellor 1997-1998

Haile T. Debas, M.D., currently Director of Global Health Sciences, served as the seventh chancellor of UCSF. An internationally renowned surgeon, scientist, and teacher, Dr. Debas agreed to accept the appointment for a period of one year. Serving as both chancellor and dean, he played a key role in all of the major initiatives of the campus, including the development of UCSF Stanford Health Care, a new major site for biomedical research at Mission Bay, and the development of the UCSF Comprehensive Cancer Center. During his tenure, UCSF became one of the country's leading centers for transplant surgery, the training of young surgeons, and basic and clinical research in surgery.

Dr. Debas served as chair of the UCSF Department of Surgery from 1987 until his appointment as dean in 1993. Dr. Debas' other major initiatives include the development of the UCSF AIDS Research Institute, a redesign of the UCSF Human Genetics Program, and important changes in the medical school curriculum.

Joseph B. Martin, M.D., Ph.D. Chancellor 1993-1997

Joseph B. Martin, M.D., Ph.D. served as UCSF's sixth chancellor. Dr. Martin played a major role in the creation of UCSF Stanford Health Care and in the planning of the Mission Bay campus. He was successful in gaining critical community support for UCSF. Through his clear vision and guidance, he helped assure the university's place in the twenty-first century. Dr. Martin received the UCSF Medal in 1998 for his outstanding achievements.

Before his appointment as chancellor, Dr. Martin served as Dean of the School of Medicine at UCSF from 1989-1993. Dr. Martin is credited with recruiting a number of distinguished physicians and scientists to UCSF. He held an appointment as Professor of Neurology and is internationally recognized for his work in the fields of neuroscience and neurology. His research focuses on the use of molecular genetics to better understand the causes of neurological diseases.

Julius R. Krevans, M.D. Chancellor 1982-1993

Julius R. Krevans, M.D., was the fifth chancellor of UCSF. During his tenure, UCSF experienced many achievements. In 1989, UCSF applauded its first Nobel Prize winners, J. Michael

Bishop and Harold Varmus. UCSF also played a critical role in spawning the biotechnology industry during these years. Under Dr. Krevans' leadership, UCSF attracted many women and minority students to careers in health sciences.

Before his appointment as chancellor, Dr. Krevans served as Dean of the School of Medicine at UCSF from 1971-1982. He was also active on the boards and committees of numerous national foundations, government agencies, and organizations including the National Academy of Science's Institute of Medicine and the American Board of Internal Medicine. He served as the chair of the Association of American Medical Colleges from 1980-81, helping to develop public policy for this organization. He was also a director of the Clinical Scholar program, a director of both the James Picker and Bank America-Giannini Foundation, and a member of the Association of American Physicians.

Francis A. Sooy, M.D. Chancellor 1972-1982

Francis A. Sooy, M.D., served as UCSF's fourth chancellor. During his tenure, UCSF gained recognition locally and nationally as a premier health sciences campus and became one of the most successful research universities in the country. The new School of Dentistry building, the new Long Hospital, and the modernized Moffitt Hospital projects were completed. Sooy recruited outstanding physicians and researchers for some of the top campus positions, including three new deans. In addition, UCSF was able to turn around its relationship with the surrounding community from outright hostility in some quarters to pride and participation in UCSF.

Dr. Sooy spent 50 years of his life associated with the University of California - from his undergraduate years at Berkeley in 1933, to his graduation in the top 10% of his medical school class at UCSF in 1941, to becoming chair of the Department of Otolaryngology in 1967, and to his tenure as chancellor. He was also head of the statewide Academic Senate from 1969-1970. After his service as chancellor, Dr. Sooy returned to private practice and teaching responsibilities at UCSF.

Philip R. Lee, M.D. Chancellor 1969-1972

Philip R. Lee, M.D., UCSF's third chancellor, led the campus during a time of political and social turmoil. Dr. Lee's understanding of social forces and his close relationship to students and staff allowed UCSF to continue its commitment to academic excellence and affirmative action. He has been especially noted for his efforts to stimulate minority recruitment and enrollment. Dr. Lee retired his chancellorship to create the UCSF Institute for Health Policy Studies, the first

of its kind in the United States. While at UCSF, Dr. Lee served as Professor of Social Medicine at the UCSF School of Medicine, and as Co-Director of the Institute of Health and Aging at the School of Nursing.

As one of the nation's foremost authorities in the study of equal access to health care, Dr. Lee was a frequent adviser to federal health policy makers. He served as the first president of the Health Commission for the City and County of San Francisco, having been appointed by Mayor Feinstein to head the commission at its founding in 1985. In 1986, he was appointed chair of the Physicians Payment Review Commission established by the U.S. Congress. Dr. Lee, Professor Emeritus of Social Medicine, currently serves as Special Assistant to the Dean of the School of Medicine. Dr. Lee, a national figure before he came to UCSF, served as the first U.S. Assistant Secretary for Health and Scientific Affairs, Department of Health, Education, and Welfare.

Willard C. Fleming, D.D.S. Chancellor 1966-1969

Williard C. Fleming, D.D.S., served as UCSF's second chancellor. Already past retirement age, Dr. Fleming agreed to take the post until a younger successor could be found. At the time, he was the only university chancellor in the nation who was a dentist. He was responsible for establishing the first formal affirmative action program for the campus, making UCSF a national leader in equal access to education in the health professions. He worked to improve dental education and was active in trying to solve manpower problems in dentistry, particularly in the recruitment of minority students and in the development of programs with new social mechanisms to extend medical and dental care to "all the people."

Dr. Fleming's remarkable contributions to UCSF spanned more than 50 years. A national figure in dental education and always in the vanguard of new thinking, he was President of the American Association of Dental Schools and the American College of Dentists, and held honorary degrees from the University of Toronto, the University of Southern California, and the University of California. Much of Dr. Fleming's research and teaching was in the field of periodontology, the study of gum tissue disease. He served 26 years as the dean of the School of Dentistry and held virtually every senior administrative post on the campus during his tenure at UCSF. Before becoming chancellor, he served as the university's first vice provost.

Dr. Fleming was devoted to students and was one of the prime movers in the 1920s to develop long-range planning for a student activity center on campus, which opened in 1958 as the Guy S. Millberry Union. His commitment to rigorous professional standards is evidenced by the wording in the terms of the UCSF Scholarship Fund established in his honor, which gives the highest priority to the student who exhibits "concerns for the welfare of others." He considered this

quality as the most important attribute of every professional person.

John B. De C.M. Saunders, M.D. Chancellor 1964-1966

John B. De C. M. Saunders, M.D., served as UCSF's first chancellor. Associated with UCSF for 60 years, Dr. Saunders was instrumental in raising a prominent local institution to a world-renowned medical center. In 1931, he came to UCSF as an anatomy professor and then chair of the department from 1938-1956. He also served as chair of the History of the Health Sciences department from 1942-1975, dean of the School of Medicine from 1956-63, University Librarian from 1943-1971, and the first UCSF provost from 1958-1964, before his appointment as chancel-lor. He continued teaching and advising after the chancellorship.

Dr. Saunders was a member of the San Francisco Medical Society for 52 years, and served on many of its committees and on the California Medical Association (CMA) Scientific Board. He was a CMA delegate for 18 years, during his tenure as dean and chancellor.

Dr. Saunders authored more than 120 scientific publications on anatomy, surgery, orthopaedics, and medical history, most notably works on Andreas Vesalius and the classic 1952 "Leonardo da Vinci, on the Human Body."

Dr. Saunders won numerous awards for research on a wide range of problems. His work included studies in embryology on the structure of development of bones, the physiology of muscles and the mechanics of movement, and participation in the development of new surgical procedures, especially in orthopaedic and general surgery.

FY 2007-08 Headcount as of 4/3/08 CHANCELLOR'S IMMEDIATE OFFICE

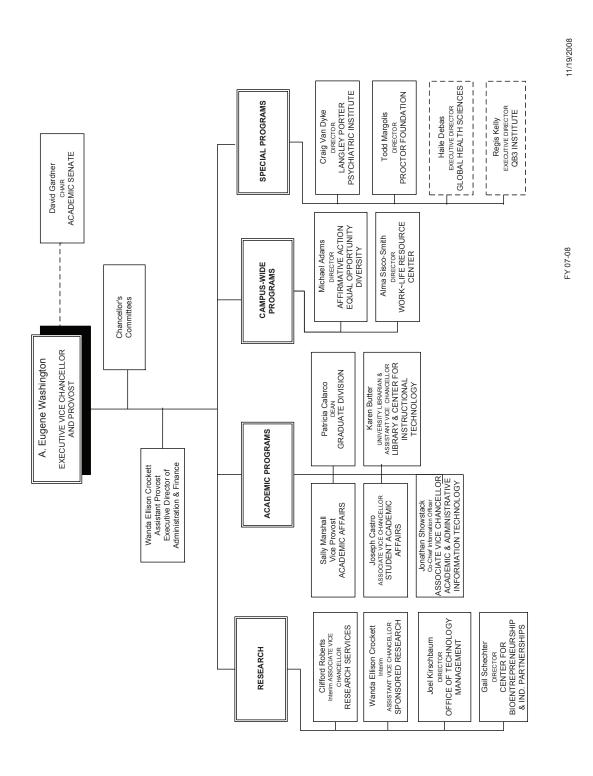
	St	taff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
CHANCELLOR'S IMMEDIATE OFFICE	10				10
OFFICE OF LEGAL AFFAIRS	7				7
Total	17	0	0	0	17

Source: UCSF Human Resources

EXECUTIVE VICE CHANCELLOR AND PROVOST

Chapter Contents

Organizational Chart	318
Executive Vice Chancellor and Provost	319
Academic Geriatric Research Center (AGRC)	323
Academic Senate	325
Affirmative Action/Equal Opportunity/Diversity	327
Associate Vice Chancellor-Student Academic Affairs	329
Center for Bioentrepreneurship & Industry Partnerships (CBE)	335
Graduate Division	338
Langley Porter Psychiatric Institute	343
Library	349
Office of Research, Associate Vice Chancellor	352
Office of Research, Assistant Vice Chancellor	359
Office of Technology Management	363
Proctor Foundation	366
Work-Life Resource Center	373



EXECUTIVE VICE CHANCELLOR AND PROVOST

- Executive Vice Chancellor and Provost, Washington, A. Eugene, 2004 present
- Executive Director/Assistant Provost: Wanda Ellison Crockett, MPA
- Website -under construction

Dr. Eugene Washington is currently Executive Vice Chancellor and Provost as well as Professor of Gynecology, Epidemiology, and Health Policy in the School of Medicine at UCSF. He co-founded UCSF's Medical Effectiveness Research Center for Diverse Populations in 1993 and served as director from its establishment through July 2005. He was Chair of the Department of Obstetrics, Gynecology, and Reproductive Sciences from 1996 to 2004. In his role as the UCSF Executive Vice Chancellor and Provost, Dr. Washington oversees UCSF's research enterprise and serves as the chief academic officer for the University's faculty.

A 1976 graduate of the UCSF School of Medicine, Dr. Washington also received an MPH degree from the UC Berkeley School of Public Health, and an MSc degree from the Harvard School of Public Health. He completed residencies in preventive medicine at Harvard University and in gynecology and obstetrics at Stanford University, and was a health policy scholar at UCSF's Institute for Health Policy Studies. Dr. Washington was elected to the Institute of Medicine of the National Academy of Sciences in 1997.

Past Executive Vice Chancellors

Regis Kelly, 10/01 - 1/04

Zach Hall, 3/98 - 10/01

Source: Executive Vice Chancellor and Provost, 8/26/2008.

Sponsored Project Expenditures & Indirect Cost Recovery FY 2006-07 EXECUTIVE VICE CHANCELLOR

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$19,471,622	\$12,155,690	\$4,688,944	38.57%
State Special & Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$387,256	\$354,993	\$68,720	19.36%
Private Contracts & Grants	\$3,467,123	\$2,769,211	\$292,617	10.57%
Total:	\$23,326,001	\$15,279,894	\$5,050,281	33.05%

FY 2007-08 Headcount as of 4/3/08 EXECUTIVE VICE CHANCELLOR

	St	aff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
EXECUTIVE VICE CHANCELLOR	16				16
ACADEMIC SENATE	5				5
AFFIRMATIVE ACTION	9	1			10
ASSC VC-STUDENT ACAD AFFAIRS	80	12		2	94
ASSOC VC RESEARCH	251	7	1	1	260
GRADUATE DIVISION	8	1		22	31
LIBRARY	48	15	11	2	76
LPPI: INSTR & RESEARCH	168	47	88	66	369
CENTER FOR BIOENTREPRENEURSHIP	1				1
ASSISTANT VC SPONSORED RESEARCH	34				34
OFFICE TECHNOLOGY MANAGEMENT	11	1			12
PROCTOR FOUNDATION	11	10	7	9	37
UCSF GLOBAL HEALTH SCIENCES	10	2			12
QB3 INSTITUTE	5				5
WORK-LIFE RESOURCE CENTER	5				5
Total	662	96	107	102	967

Source: UCSF Human Resources

ACADEMIC AFFAIRS

- Vice Provost Marshall, Sally, PhD.
- Business Officer Leathers, Cynthia Lynch
- Website http://academicaffairs.ucsf.edu/

The Office of Academic Affairs and Faculty Development and Advancement facilitates the recruitment, mentoring, and retention of the highest-caliber diverse faculty. It provides leadership, training, and guidance in the development and implementation of policies and procedures relating to academic affairs. It is committed to improving the work life and academic environment for faculty to support innovative and collaborative approaches for education, health care and research at UCSF. The Office of Academic Affairs and Faculty Development and Advancement is responsible for implementing recommendations from the Chancellor's Council on Faculty Life (CCFL). CCFL programs include: Faculty Information and Welcoming Week, new faculty biographies posted on the UCSF website, UCSF-Coro faculty leadership collaborative, faculty mentoring program, a faculty development program and a faculty enrichment program

Source: Executive Vice Chancellor, 9/12/2008.

Permanently Budgeted FTEs ACADEMIC AFFAIRS

	FY 2003-04	-04	FY 2004-05	-02	FY 2005-06	90-	FY 2006-07	20-9	FY 2007-08	2-08
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic	Staff
SR VICE CHANCELLOR-ACADEMIC AFFAIRS		10.00		10.00		14.20		13.00		
EXECUTIVE VICE CHANCELLOR & PROVOST										13.00
Total:		0.00 10.00	00:00	0.00 10.00	0.00 14.20	14.20		0.00 13.00	00.00	13.00

Source: UCSF Budget & Resource Management

ACADEMIC GERIATRIC RESEARCH CENTER (AGRC)

- Director, Landefeld, Seth, M.D.
- Business Officer Molina, Sylvia E.
- Website http://agrc.ucsf.edu/index.html

Our mission is to address the unique health care needs of the rapidly growing population of older adults in California:

- by providing geriatric education to health care providers
- by advancing public education and research in geriatrics

Overview

The UCSF Academic Geriatric Resource Center came into being in 1985 as part of a statewide initiative to enhance geriatric education in the health professions. California State Assembly Bill 2614, which was enacted into law the previous year, established the Academic Geriatric Resource Program (AGRP) to fund academic geriatric resource programs at the six health science campuses of the University of California. Each of the six campuses developed an Academic Geriatric Resource Center (AGRC) to plan, implement, facilitate, and coordinate activities in support of the following:

Goals:

- 1. To promote geriatric education for students in the health professions at the undergraduate, graduate, and post-graduate levels
- 2. To develop multidisciplinary, community-based clinical education experiences in geriatrics that span the continuum of health care for older adults
- 3. To provide public education and continuing education programs on the processes of aging and on other topics related to the enhancement of health and health care among older adults
- 4. To support research on health care practices in long-term care settings

Programs

The UCSF AGRC administers several aging education and research initiatives on the UCSF campus. New and ongoing AGRC-funded programs are identified and implemented in consultation and collaboration with AGRC faculty and committees. Many courses and programs which were

Source: Academic Geriatric Research Center (AGRC) website, 6/20/2008

initiated through the AGRC over the past twenty years have now been institutionalized, enabling AGRC faculty and staff to focus on three core elements during the current funding period.

AGRC Initiatives for 2003-2006:

1) Expanding the AGRC's capacity to support aging education and research in geriatrics at UCSF

This AGRC initiative supports educational programs for UCSF students and faculty and the community, including UCSF Geriatrics Grand Rounds and the continued development and updating of the UCSF AGRC Online Curriculum . The AGRC is also a co-sponsor of the community education programs of the UCSF Osher Lifelong Learning Institute (OLLI). The AGRC hosts several OLLI courses throughout the year on health-focused issues of interest to the public, where attendees can learn from and ask questions of experts about their concerns related to such topics.

2) Interdisciplinary Faculty Development: The Geriatrics Faculty Scholars Program

This interdisciplinary faculty development program in geriatrics is designed to increase geriatrics knowledge and clinical care skills for faculty in institutions of higher education throughout Northern California. The Geriatrics Faculty Scholars Program is a joint initiative of the UCSF AGRC and the Northern California Geriatric Education Center (NorCal GEC), a consortium based at UCSF.

More information about the Geriatrics Faculty Scholars program can be found at the NorCal GEC website.

3) Interdisciplinary Team Training (ITT) Course in Geriatrics

This is a six-week geriatric ITT experience for UCSF dental, medical, nursing, pharmacy, and physical therapy students based in UCSF Housecalls, a home-based primary care service for homebound elders in San Francisco. The course gives students an overview of discipline-specific geriatric content, emphasizing the importance of the interdisciplinary team approach to providing quality care for older adults. Students also participate in interdisciplinary home visits to elders in San Francisco where they learn some of the assessment tools and simple treatment interventions used by each of the five disciplines represented in the course. They are also exposed to the unique challenges and opportunities of providing care at home.

Source: Academic Geriatric Research Center (AGRC) website, 6/20/2008

ACADEMIC SENATE

- Chair Gardner, David
- Business Officer Maimon, Tamara
- Website http://www.ucsf.edu/senate/indexmain.html

The Academic Senate is the voice of the faculty in the University of California. It represents the Faculty in the "shared governance" of UC. This responsibility is delegated by the Regents and shared with the University administration, both at the campus level and systemwide. The University of California Academic Senate is one of the most highly developed and influential faculty governments in any university. It is the one organization through which the faculty, as a whole or on any of the campuses, can express its views on an issue.

Source: Academic Senate website, 6/20/2008

FY 2007-08 Headcount as of 4/3/08 ACADEMIC SENATE

Academic Full Time Part Time	aff Part Time

Source: UCSF Human Resources

Permanently Budgeted FTEs ACADEMIC SENATE

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff	Staff
ACADEMIC SENATE COMMITTEES		2.30		2.30		2.30		2.30		2.30
ASC-GRANT ADMINISTRATION		2.70		2.70		2.70		2.90		2.90
Total:	00.00	5.00	00'0	5.00	00.00	5.00	00.00	5.20	00.00	5.20

Source: UCSF Budget & Resource Management

AFFIRMATIVE ACTION/EQUAL OPPORTUNITY/DIVERSITY

- Director– Adams, Michael B.
- Business Officer Castillo, Eloisa
- Website http://www.aaeo.ucsf.edu/about.htm

The Office of Affirmative Action/Equal Opportunity/Diversity exists to foster and insure equal opportunity for all persons involved with UCSF, and to promote diversity through specific affirmative actions. Its activities help to create an environment in which each individual's contribution is valued and everyone can succeed. The Office of Affirmative Action/Equal Opportunity/ Diversity is designed to be a resource to the entire campus.

While an affirmative action plan is required by federal regulations, UCSF views affirmative action as an important part of managing its human resources and enriching the diversity of the campus community. Different approaches, experiences, ideas, and perspectives are not only welcome, but are actively sought. It is the goal of the Office of AA/EO/D to support the implementation of diversity at all levels of the campus community.

Source: Affirmative Action/Equal Opportunity/Diversity website, 6/20/2008

FY 2007-08 Headcount as of 4/3/08 AFFIRMATIVE ACTION

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
	•			7
S)	_			10

Source: UCSF Human Resources

Permanently Budgeted FTEs AFFIRMATIVE ACTION

	FY 2003-04	40	FY 2004-05		FY 2005-06	90-	FY 2006-07	-05	FY 2007-08	-08
ent Budget Account Title	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
IATIVE ACTION OFFICE		12.93		13.84		13.80		13.79		13.19
IATIVE ACTION-DIVERSITY TRNG		1.52		1.50		1.50		1.50		1.50
Total:		0.00 14.45		0.00 15.34		0.00 15.30		0.00 15.29	00.00	0.00 14.69
		1				1				l

UCSF Budget & Resource Management

University of California, San Francisco Institutional Profile - FY 2007-08

School/Department Profiles - Executive Vice Chancellor

ASSOCIATE VICE CHANCELLOR-STUDENT ACADEMIC AFFAIRS

- Associate Vice Chancellor Student Academic Affiars Castro, Joseph
- Business Officer Vacant
- Website http://saa49.ucsf.edu/welcomeplusmap.htm

The Associate Vice Chancellor of Student Academic Affairs contains the following:

- Center of Science Education & Opportunity
- Disabled Students Services
- Institutional Research
- Instructional & Research Technology Services (IRTS)
- Office of Admissions and Registrar (OAR)
- Office of Career and Professional Development
- Office of Student Life
- Other Student Resources
- Services to International Students & Scholars (SISS)
- Student Financial Services
- Student Health Services
- Student Information Systems

Center for Science Education and Opportunity

The UCSF Center for Science & Education Opportunity (CSEO) was founded in 1999 to encourage students from the San Francisco Bay Area to pursue a college education. The CSEO coordinates programs that help students explore academic interests, prepare academically for college, learn how to apply to and finance college, and decide which colleges best fit their academic goals.

Disabled Student Services

Academic support services are designed to provide equal access to all students. To be eligible for services, students must provide appropriate documentation. Each service must be approved by the OSL Executive Director and is generally tailored to the individual need of each student. Services and programs include:

- The Learning Disabilities Program
- Mobility Assistance
- Deaf and Hard of Hearing Program
- Test Arrangements
- Notetaking

- Transcription
- Voice Activated Computing
- Library Research Assistance
- Reader

Institutional Research

The Office of Institutional Research provides the following information:

- Detailed demographic reports
- Historical student data trends
- Enrollment projections

Instructional & Research Technology Services (IRTS)

IRTS provides media support for faculty, researchers, students, and staff at UCSF in many ways. Our Classroom Support group provides audio-visual services. Educational Television records, edits, and distributes programming from a variety of sources, including satellite, tape, or live video feeds of many campus events. Our Electronics and Engineering staff can repair all types of biomedical devices and can do custom design and fabrication of specialized equipment. The Photography and Graphics Imaging staff can design your graphics, process film, image slides, and give your presentation that professional look and feel. Videoconferencing Services can connect UCSF facilities to many remote sites for real-time, two-way audio and video for meetings, classes and seminars.

Office of Admissions and Registrar

The mission of the Office of Admissions and Registrar (OAR) is to provide comprehensive services that support student admissions, registration, records, and courses of instruction. In addition, the OAR is responsible for classroom support and the scheduling of general assignment space. Through our interactions with students, campus administrators, and faculty, OAR strives to provide excellence in service and customer satisfaction.

Office of Career & Professional Development (OCPD)

The Office of Career & Professional Development (OCPD) is here to help prepare UCSF students and scholars for careers rich in scholarship, leadership and discovery.

The OCPD provides programs, services, individual assistance and web and print resources designed to enhance the academic, professional and career development of UCSF students and

post-graduate trainees.

Office of Student Life

The Office of Student Life (OSL) is responsible for a range of student services, programs and resources at UCSF. The OSL staff is committed to providing quality services that appropriately support UCSF student needs and interests in an efficient, responsive and friendly manner.

Programs and Services include:

- · Associated Students, UCSF
- Graduate Students' Association
- Registered Campus Organizations
- Funding for Campus Life
- Student Activity Center
- Services for Students with Disabilities
- Student Legal Resources
- Synapse
- Office of Career and Professional Development
- Informal Counseling and Referral

Other Student Resources

Other Student Resources include:

- Graduate Division
- Summer Research Opportunities
- Programs for Student & Research Abroad

Services to International Students and Scholars (SISS)

SISS supports international discovery, learning, and engagement in the health sciences by providing regulatory and transitional services for the UCSF community. By bridging diverse peoples and cultures, SISS promotes respect and understanding through intercultural exchange, communication, and programs.

Student Financial Services

Student Financial Services include grants, scholarships, loans, student employment, and other forms of financial aid.

Student Health Services

Appointments with physicians and nurse practitioners are available for registered UCSF students, eligible scholars, researchers, and dependents. UCSF students may obtain primary care services from the Mission Bay Clinic or Parnassus Clinic.

Student Information Systems

This organization develops and administers the information systems for student academic affairs.

ASSOCIATE VICE CHANCELLOR - STUDENT ACADEMIC AFFAIRS FY 2007-08 Headcount as of 4/3/08

Academic Grand	ull Time Part Time Total	2 94
Staff	Part Time Fı	12
St	Full Time	08

Source: UCSF Human Resources

Permanently Budgeted FTEs ASSOCIATE VICE CHANCELLOR - STUDENT ACADEMIC AFFAIRS

	FY 2003-04	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08
nent Budget Account Title	Academic Staff				
3 VC-STUDENT ACADEMIC AFFAIRS	4.00	3.95	3.95	4.95	0.35
IUNICABLE DISEASE PREVENTION PR	0.13 3.99	0.13 3.99	0.13 4.49	0.13 3.99	0.00 2.75
CIAL AID OFFICE	12.63	12.63	12.63	12.63	12.63
DMINISTRATION	3.38	3.06	3.06	2.36	2.36
CASSROOM SUPPORT	06.9	6.50	6.50	7.20	5.29
EDUC TELEVISION	1.50	4.60	4.60	4.60	0.00
:LECTRONICS	3.30	3.30	3.30	3.30	3.30
3RAPHICS IMAGING	1.30	2.00	2.00	2.00	2.00
HOTOGRAPHY	1.30	1.30	1.30	1.30	1.30
E OF STUDENT LIFE		3.05	3.05	3.05	3.75
E OF THE REGISTRAR & ADMISSION	10.00	10.00	10.00	10.00	10.00
ENT ACADEMIC PROGRAMS	3.00				
ENT ACTIVITY CENTER		3.55	3.55	3.55	3.55
ENT CNTRD OUTREACH PROGRN/MATCH	1.50	1.50	1.50	1.50	1.50
ENT EMPLOYMENT/CAREER COUNSELNG	1.80	2.00	2.00	2.00	2.00
ENT ENRICHMENT CENTER	3.03				
ENT HEALTH SERVICE	10.31	10.31	10.31	14.01	15.11
ENT INFORMATION SYSTEMS (SIS)	4.00	4.00	00'9	4.00	4.00
ENT PUBLICATION-SYNAPSE	2.31	2.05	2.05	1.85	1.85
ENT RELATIONS	3.05				
TO INTERNATL STUDENTS/SCHOLARS	11.15	11.15	11.15	11.15	11.15
Total:	0.13 88.45	0.13 88.94	0.13 91.44	0.13 93.44	0.00 82.89

:: UCSF Budget & Resource Management

University of California, San Francisco Institutional Profile - FY 2007-08

School/Department Profiles - Executive Vice Chancellor

CENTER FOR BIOENTREPRENEURSHIP & INDUSTRY PARTNER-SHIPS

- Director Schechter, Gail
- Business Officer Murphy, Suzanne
- Website http://corporate.ucsf.edu/

The UCSF Center for BioEntrepreneurship offers programs and resources to develop the next generation of entrepreneurs and leaders in the life science industry. CBE weaves the UCSF community into the broader Bay Area community of life science innovators and entrepreneurs, company executives, investors, attorneys, and other professionals to help successfully translate discoveries from the laboratory to commercialization for the benefit of the institution and society.

CBE Mission Statement

Our Mission is to:

- Enable UCSF faculty and trainees to build commercial and public value from their research discoveries,
- Develop the next generation of leaders of the life science and healthcare industry.

CBE achieves this mission and enables UCSF faculty and trainee success by:

- **Inspiring** scientists to innovate.
- **Training** scientists in the business of life sciences.
- **Building Teams** with cross-disciplinary expertise to commercialize discoveries.
- **Providing Access** to mentors and other resources.

About CBE

UC San Francisco's CBE offers a broad spectrum of programs empowering life scientists with the skills necessary to build commercial value from their inventions, and to become leaders in the life science industry. Programs are crafted to directly address the needs of life scientists, clinicians, and trainees. Broadly, CBE offers:

- Academic courses on issues key to forming and running a life science business
- Seminars, including the Scientist to CEO speaker series
- Informal discussions with entrepreneurs and other professionals
- Mentoring for UCSF entrepreneurs
- Reference materials on the life science industry and starting a company
- Access to additional resources for entrepreneurs

Source: Center for Bioentrepreneurship website, 6/20/2008

CBE is a cross-campus initiative whose programs are open to faculty, students, fellows, and staff from all four schools at UC San Francisco. Approximately 700 people participated in CBE programs in the last academic year and we anticipate continued growth in the coming years as CBE programs and resources expand.

CBE was launched in 2002 after pilot programs brought hundreds of interested faculty, students and fellows to learn more about entrepreneurship.

CBE COURSES AND SEMINARS

CBE brings industry leaders to UCSF to inspire innovation, mentor, and teach entrepreneurship and business skills to our life scientists and clinicians. CBE offers academic courses as well as seminars and symposia.

The result is novel curricula geared to advanced life scientists and healthcare professionals.

CBE can help UCSF trainees access additional related courses at other campuses.

Seminars. CBE hosts a variety of seminars, both formal and informal. CBE's high-profile **Scientist to CEO** speaker series brings to UCSF some of the leaders of the life science industry who started their careers as successful researchers. They share insights gained from their wide ranging experiences in academia and leadership positions in industry. CBE hosts **Scientist to CEO** three times each year, with one speaker in each of the Fall, Winter and Spring quarters. The location alternates between Parnassus and Mission Bay campuses.

CBE Presents encompasses single-session events, including panel discussions and networking events with UCSF alumni. These programs take place on an on-demand basis.

RESOURCES FOR THE ENTREPRENEUR

CBE is dedicated to providing UCSF faculty and trainees with resources to help build value from research results for clinical use and societal benefit. We assist UCSF scientists aiming to launch their own companies, as well as those who wish to find other entrepreneurs to help commercialize inventions.

CBE works with a range of industry leaders who support UCSF scientists as, for example, mentors, investors, and facility providers. CBE also houses reading and video materials that can help entrepreneurs gather industry data, and learn how to write a business plan. CBE offers additional resources for business planning, and has assembled useful links to related UC guidelines.

Source: Center for Bioentrepreneurship website, 6/20/2008

FY 2007-08 Headcount as of 4/3/08 CENTER FOR BIOENTREPRENEURSHIP (CBE)

		_
Grand	Total	,
Academic	Part Time	
Acad	Part Time Full Time Part Time	
aff	Part Time	
Staff	Full Time	1

Source: UCSF Human Resources

Permanently Budgeted FTEs CENTER FOR BIOENTREPRENEURSHIP (CBE)

Permanent Budget Account Title Academic Staff Academic <		FY 2003-04	04	FY 2004-05	95	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	98
PRENEURSHIP 1.00 1.00 1.00 1.00 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Permanent Budget Account Title	Academic	Staff								
RSRCH DEVLOP	CENTER FOR BIOENTREPRENEURSHIP										1.00
0.00 1.00 0.00 1.00 0.00 1.00 0.00	OFFICE OF INDUSTRY & RSRCH DEVLOP		1.00		1.00		1.00		1.00		
	Total:	00.00		0.00		0.00	1.00	00'0	1.00		0.00 0.00

Source: UCSF Budget & Resource Management

GRADUATE DIVISION

- Dean Calarco, Patricia
- Assistant Dean, Academic Affairs Nelson, Karen
- Assistant Dean, Postdoctoral Scholars and Research Des Jarlais, Christine
- Website http://graduate.ucsf.edu/

The UCSF Graduate Division encompasses all graduate academic degree programs and all graduate students in the four schools. The Dean of Graduate Studies, Patricia Calarco, has the responsibility for the administration of graduate degree programs and is the institutional official responsible for the administration of Division affairs in accordance with academic policies established by the Academic Senate and the Graduate Council. The office of the Dean of Graduate Studies also has administrative responsibility for the appointment of postdoctoral scholars, the academic review of graduate programs, and dispute resolution involving graduate students and postdoctoral scholars. The Graduate Division Office is located in MU-200 West Millberry Union, and includes Offices of Student Academic Progression, Student Financial Support, Dean, and Assistant Dean of Graduate Academic Affairs. The Assistant Dean of Postdoctoral Affairs and Outreach is located at the William Rutter Community Center at Mission Bay, Suite 310. The entire Graduate Division will also move to this location in the spring of 2009.

Mission Statement

The primary mission of the Graduate Division is to serve UCSF by supporting and improving its graduate programs while enhancing the educational experience of graduate students and postdoctoral scholars. The quality of graduate education is also enhanced by our goals of increased fund raising, increased local and national visibility of our graduate programs, and improved academic and private sector job opportunities for graduates and postdoctoral scholars. The quality of UCSF graduate programs is inextricably linked to the reputation and endeavors of its research faculty. Thus, by specific efforts to improve the research enterprise we serve a broader function in improving the national visibility of the campus and enhancing our recruitment of top students. This is facilitated by intensive external program reviews, financial support of students and by centralizing much of the recruitment of disadvantaged students for the graduate programs. In the inter-disciplinary world of modern science, the Graduate Division also fosters the development of selected new graduate programs, and manages program growth in areas of state and national need, resulting in concomitant growth in faculty FTE. Another important function in determining the success of our graduate and postdoctoral training programs involves careful monitoring of several measures, such as the fairness of access, the time to degree, the near and long-term placement of graduates. Other measures contributing to success include the climate a student encounters at UCSF, opportunities for teaching, and opportunities for academic enrichment, e.g.,

preparing for a qualifying exam, writing a dissertation or grant, and improving job readiness skills. The Graduate Division is the administrative home for admission, student financial support, progression and advancement of graduate students, and, as well, has responsibility for the appointment of postdoctoral scholars and the development of campus policies affecting them. In support of its administrative functions, the Graduate Division strives to streamline the necessary procedures mandated by the University of California and the Western Association of Schools and Colleges, our accrediting body. Where possible paper flow is minimized, information and forms are handled on line, and web and email access are used for communication and monitoring of requirements. The Dean of the Graduate Division shares overall responsibility for graduate academic matters and postdoctoral scholar appointments with the Graduate Council, a standing committee of the San Francisco Division of the Academic Senate. The Graduate Council helps to set policies and standards for admission to graduate status, establishes policies related to graduate degrees, approves changes in degree requirements, and approves all graduate degree programs. The Graduate Division also pursues a number of joint goals with our Alumni Association, such as increasing job opportunities and broadening development efforts.

The following summary describes of the functions of the Graduate Division.

Graduate Admission

The Graduate Division develops and maintains the graduate student on-line applications, processes applications, ensures that University and Academic Senate policies are followed, and advises and provides information to prospective students regarding UCSF graduate programs and campus admission requirements.

Academic Progression and Student Records

Student petitions, requests for leaves of absence, applications for admission to qualifying examination and advancement to candidacy are reviewed and approved. Student academic progression is monitored; thesis and dissertations are reviewed and accepted for Library archiving; and, completion of degree requirements is certified.

Fellowships and Student Support Programs

University, extramural, and endowment fellowships are managed and awarded in collaboration with the Graduate Council Committee on Fellowships. Oversight of Graduate Research Assistants (GSRs), Teaching Assistants (TAs), and other student academic titles; Research Awards and Student Travel Funds are managed and awarded Efforts to increase funds for student support include grant writing, fundraising, and other development activities.

Outreach and Recruitment

The Graduate Division develops and implements programs designed to enroll, retain, and graduate a diverse student body. The Division also develops programs to increase diversity at the post-doctors level.. Initiatives include the Summer Research Training Programs, UC LEADS (Leadership Excellence through Advanced Degrees), the NSF AGEP Program, the NIGMS Initiative for Maximizing Student Diversity, and the NIGMS Scholars in Science Postdoctoral Fellowship program.

Postdoctoral Appointment and Records

The Graduate Division administers policies and programs regarding postdoc appointments and provides information to prospective and current postdoctoral scholars. Additional information is located on the Postdoctoral Scholars web page.

Student and Postdoctoral Scholar Events

The Graduate Division coordinates an annual commencement, new student and postdoctoral scholar orientations, and also works with the Graduate Students' Association (GSA) and the Postdoctoral Scholar Association (PSA) in sponsoring a number of events. These include the Practice of Science Seminar, Biotech Industry Day, Career Fairs, New Student Faire, and student recruitment activities.

Discrimination Against Graduate Students on the Basis of Marital Status, Parental Status, or Childbearing Intent

It is the policy of the Graduate Division, the Graduate Council, and the University of California* that it is inappropriate for a faculty member to inquire about students' marital status, parental status, or intent to have children. A faculty member may not use such information as a factor when deciding to act as a thesis advisor or research supervisor for a particular student. Nor may such information be used in decisions affecting student progress including, but not limited to, project selection, meeting participation, choice of research setting, advancement to candidacy, or award of degree. Faculty members and students who observe or personally encounter such discrimination are encouraged, when feasible, to undertake collegial efforts to address the situation. Assistance can be sought or reports can be made through: Office of the Graduate Dean 476-2310 The Office of Affirmative Action/Equal Opportunity/Diversity 476-5752 Office of Sexual Harassment Prevention & Resolution 476-5186 Faculty and Staff Assistance 476-8279 Dean's Office: School of Dentistry 476-1323 School of Medicine 476-2342 School of Nursing 476-4544 School of Pharmacy 476-1225 Graduate Students' Association 476-2233

Guidelines to Promote Ethical Conduct in Research

The Graduate Division is committed to creating and maintaining an environment that promotes the conduct of research in a manner that conforms to the highest ethical principles and that leads to scientific advances of the highest quality. Regulations concerning the ethical implications of both animal and human subjects research can be found through the Office of Research http://www.research.ucsf.edu/. The following link summarizes Graduate Division policy concerning ethical conduct in research: http://policies.ucsf.edu/100/10029.htm

The Graduate Council

The Graduate Council is a standing committee of the San Francisco Division of the Academic Senate. The Council has overall responsibility for graduate academic matters and postdoctoral scholar appointments and processes. Twelve members of the faculty, selected to reflect the departments and groups that offer graduate degrees, are appointed by the Senate to serve on the Council. The Dean of Graduate Studies is a voting exofficio member. An officer chosen by the Graduate Student Association (GSA), a representative of the Postdoctoral Scholar Association, and the Graduate Division Assistant Deans serve as non-voting members. The council meets regularly to discuss matters which affect graduate education, set policy concerning academic and postdoctoral affairs, and participate with the Graduate Division in the academic review of graduate degree programs.. The Graduate Council sets policies and standards for admission to graduate status; establishes policies related to graduate degrees; approves changes in degree requirements; establishes procedural rules; and approves all graduate degree programs in accordance with the regulations of the Academic Senate. Its Sub-committee on Fellowships reviews faculty recommendations for University fellowships and makes recommendations to the Dean concerning awards.

FY 2007-08 Headcount as of 4/3/08 GRADUATE DIVISION

Staff Academic Grand	Part Time Full Time Part Time Total	8
Staff	Full Time Part Time	80

Source: UCSF Human Resources

Permanently Budgeted FTEs GRADUATE DIVISION

	FY 2003-04	94	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic	Staff	Academic	Staff	Staff Academic Staff Academic Staff Academic	Staff	Academic	Staff
GRADUATE DIVUCLEADS PROGRAM		0.25		0.25		0.25		0.25		0.25
GRADUATE DIVISION	1.00	6.00	1.00	5.66	1.00	5.66	1.00	5.66		99.9
Total:	1.00	6.25	1.00	5.91	1.00	5.91	1.00	5.91	0.00	6.91

Source: UCSF Budget & Resource Management

LANGLEY PORTER PSYCHIATRIC INSTITUTE

- Director– Van Dyke, Craig
- Business Officer Caffey, Marie
- Website -http://psych.ucsf.edu/

Overview

San Francisco's first psychiatric hospital and training center, Langley Porter Psychiatric Institute (LPPI) was founded in 1942 as part of the State mental hospital system, under the Department of Mental Hygiene; in 1973 LPPI was transferred to the University of California. LPPI is among the nation's foremost resources for comprehensive and compassionate patient care, research and education in the field of mental health. The complexity and diversity of LPPI and the Department of Psychiatry are unique on campus: no other unit combines a department within a school, an organized research unit (LPPI), and a free-standing licensed hospital (LPPH&C); and the Chair reports to both the Dean (Department) and the Executive Vice Chancellor (LPPI and LPPH&C).

Research

LPPI has been a world leader in research for over half a century. Its many investigators explore psychological, biological, and social processes as they may affect the cause, diagnosis, and treatment of mental disorders as well as those that promote health, coping capacity, and life satisfaction. Operating in one of the premier biomedical research institutions in the world, researchers have compiled a deep and distinguished record of achievement. LPPI has a significant number of world-class psychiatrists/molecular biologists pursuing investigations into the cellular and sub-cellular events that lead to both mental health and mental illness, and is widely acknowledged as a leader in basic science research.

Clinical Services

Mission Statement

The mission of Langley Porter Psychiatric Hospital and Clinics (LPPH&C) is to provide the highest quality care, grounded in education and refined by research.

Since 1942, Langley Porter Psychiatric Hospital and Clinics has provided compassionate and effective psychiatric care for thousands of adults, adolescents and children. LPPH&C provides advanced and caring psychiatric treatment services through inpatient, partial hospitalization, and

Source: LPPI, 9/22/2008

outpatient programs for a wide range of conditions including depression, anxiety, attention deficit disorder, and many others. The Adult Inpatient Program is a 22-bed acute psychiatric service, using a biopsychosocial approach in the treatment of adults 18 years and older who suffer from severe behavioral and emotional disturbances. Emphasis is on the assessment and stabilization of illness exacerbations with referral to appropriate subacute services following discharge. The average hospital stay is approximately eight days. The clinics provide a broad range of outpatient consultation, evaluation and treatment interventions for emotional, psychological, and cognitive problems of adults. All patients receive an initial assessment and an individualized treatment plan. LPPH&C offers a range of time-limited and open-ended individual and group psychotherapy and ongoing medication management as part of an individual's treatment plan. The Children's Center at Langley Porter facilitates transformations for the children and adolescents of Northern California and beyond who come to us with a broad range of mental disorders and behavioral disturbances. Superb clinical care, influential research, and top-ranked education are the foundations of UCSF's national leadership in child psychiatry.

Education

LPPI is nationally recognized for its many outstanding training programs in medical student education; residency in general adult psychiatry; clinical fellowships in child and adolescent psychiatry, forensic psychiatry, and geriatric psychiatry; psychology fellowships in clinical psychology, clinical services research, health psychology, and community academic research training; research fellowships; and continuing medical education.

FY 2007-08 Headcount as of 4/3/08 LPPI

St	aff	Acad	lemic	Grand
Full Time	Part Time	Full Time	Part Time	Total
168	47	88	66	369

Source: UCSF Human Resources

Source: LPPI, 9/22/2008

Permanently Budgeted FTEs LPPI

Cliff # 2000 Clot O \$200 Cliff	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	-08
	Acadellic	Otall	Academic	Otall	ı	Otall	Academic .	Otall	Academic	Otall
AL SERVICES DIRECTOR		2.00		2.00		2.00		2.00		2.00
IATE ACADEMIC PROGRAMS DIRECTOR		1.50		2.00		2.00		2.00		2.00
ID LAB	1.00	1.32	1.00	1.32	1.00	1.32	1.00	1.32	1.00	1.32
ILT INPATIENT PSYCHIATRY	3.00	1.61	3.00		3.00		3.00			
LZHEIMER CLINIC		1.00		1.00		1.00		1.00	3.00	1.00
DMINISTRATION	0.43		0.43		0.43		0.43			0.43
DULT PARTIAL HOSPITALIZATION	0.80	4.40	0.80	4.40	0.80	5.10	0.80	4.40	0.80	4.40
DULT PSY INPT SERVICE	1.52	13.40	1.52	13.40	1.52	13.40	1.52	13.40	1.52	13.40
USINESS OFFICE		00.9		00.9		8.00		00.9		00.9
:ENTRAL ADMISSIONS		8.85		8.85		8.85		8.85		8.85
HILD & ADOL INPT SER NURSING		8.50		8.50		8.50		8.50	1.52	13.40
HILD & ADOLESCENT I-P SER	0.85	4.38	0.85	4.38	0.85	4.38	0.85	4.38	0.85	4.38
HILD PSYCHIATRIC CLINIC	0.42	4.77	0.42	4.77	0.42	4.77	0.42	4.77	0.42	4.77
		3.80		3.80		3.80		3.80		3.80
IIETARY SERVICES		6.30		6.30		6.30		6.30		6.30
INANCE		4.00		4.00		4.00		4.00		4.00
IOSPITAL INFO MGMT (HIMS)										5.25
IOUSE STAFF ADMIN		0.25		0.25		0.25		0.25		0.25
IOUSEKEEPING		7.00		7.00		7.00		7.00		7.00
(EDICAL RECORDS		5.25		5.25		5.25		5.25		
'HARMACY (NON-REVENUE)		2.70		2.70		2.70		2.70		2.70
ICU INPT SER-NURSING		31.07		31.07		31.07		31.07		31.07
'SYCHIATRIC CLINICS	2.54	4.75	2.54	4.75	2.54	10.35	2.54	4.75	2.54	4.75
'URCHASING & STORES		1.31		1.31		1.31		1.31		1.31
UALITY ASSURANCE & IMPROVEMNT		3.80		3.80		5.10		3.80		3.80
EHAB THERAPY ADMIN 6PATH1		1.55		1.55		1.55		1.55		1.55
OCIAL WORK SERVICES		0.75		0.75		0.75		0.75		0.75
HILD PARTIAL HOSPITALIZATION	0.32	1.62	0.32	1.62	0.32	1.62	0.32	1.62	0.32	1.62
VTAKE AND REFERRALS	0.05	5.00	0.05	5.00	0.05	5.00	0.05	5.00	0.05	5.00
ILT INPATIENT PSYCHIATRY										
LZHEIMEK CLINIC										
CONT DESK		1.00		0.25		0.25		0.25		0
JASING ADMINISTRATION	7	2.00	6	2.00	,	2.00	6	2.00		2.00
	90	700	00.1	60	00.1	70	00.1	70		1.00
FVAH		00.1		0.30		1 00		1.00		1.00
OMENCARE CLINIC	0.40	38	0.40	2 2 2 2 2	0.40	38	0.40	38	0.40	1 38
EUROGENETICS LAB	1.00	-	1.00	9	1.00	2	1.00	-	1.00	2
	_	="							_	

UCSF Budget & Resource Management

(Continued)

345

Permanently Budgeted FTEs LPPI

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	EY 2006-07	-07	EV 2007-08	80-
nt Budget Account Title	Academic	Staff								
FF RECORDS SECTION		7.75		8.00		8.00		8.00		8.00
OL/YOUNG ADULT INPATIENT SVC	2.00		2.00		2.00		2.00		2.00	
LAB	2.00	1.00	2.00	1.00	2.00	1.00	2.00	1.00	2.00	
LDING MAINTENANCE		3.00		3.00		3.00		3.00		3.00
ITER ON DEAFNESS		1.37		1.37		1.37		1.37		1.37
LDREN'S INPATIENT SERVICE	3.85		3.00		3.00		3.00		3.00	
LDREN'S SERVICE (OPD)	3.00	1.10	2.00	1.10	2.00	1.10	2.00	1.10	2.00	09.0
:ARING ACCOUNT	0.35	8.56		8.56		8.56		8.56		8.56
NSULT/BRIEF INTERVENTION CLN	1.65	3.41	1.65	3.41	1.65	3.41	1.65	3.41	1.65	3.41
NSULTATION LIAISON SERV	1.00	0.50	1.00		1.00		1.00		1.00	
/IRONMENTAL H & S		0.85		0.85		0.85		0.85		0.85
ANCIAL SERVICES		09.9		09.9		6.65		6.65		8.65
VERAL ADMINISTRATION		2.00		1.00		1.00		1.00		2.00
ALTH PSYCHOLOGY	2.00		2.00		2.00		2.00		2.00	
MAN DEVELOPMENT	2.00		2.00		2.00		2.00		2.00	
TITUTE DIRECTOR	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
NAGEMENT INFORMATION SYSTE		6.82		10.43		10.43		9.43		9.43
TERIAL SERVICES		1.75		1.75		1.75		1.75		
D DIRECTOR IN-PATIENT SVCS	1.00		1.00		1.00		1.00		1.00	
DICAL POST GRAD EDUCATION	1.00	9.02	1.00	9.55	1.00	9.52	1.00	9.52	1.00	11.10
DICAL STUDENT EDUCATION	2.00	2.00	1.00	2.00	1.00	2.00	1.00	2.00	1.00	2.00
TPATIENT DEPT	4.50	0.75	4.50	0.75	4.50	0.75	4.50	0.75	4.50	0.65
SVASIVE DEV DISORDER CLINIC	1.00	1.15	1.00	1.15	1.00	1.15	1.00	1.15	1.00	1.15
JF EDUCATION-PROG DIR	1.00	0.25	1.00	0.25	1.00		1.00		1.00	
JGRAMS & SERVICES						0.04		0.04		0.04
CHIATRIC CARE CLINIC	1.44	4.18	1.44	4.18	1.44	4.18	1.44	4.18	1.44	4.18
CHOLOGICAL ASSESSMENT SVC		3.95		3.95		3.95		3.95		3.95
/CHOLOGY ADMINISTRATION	1.00	1.50	1.00	1.50	1.00	1.75	1.00	1.75	1.00	1.00
SEARCH		1.08		1.08		1.08		1.08		1.08
EARCH GENERAL SERVICES		2.20		2.20		2.20		2.20		2.20
SEARCH-ADMINISTRATION	1.00	3.00	1.00	2.00	1.00	2.00	1.00	3.00	1.00	3.00
SEARCH-AGNEWS	2.00		2.00		2.00		2.00		2.00	
SEARCH-SONOMA	2.60	0.80	2.00	0.80	2.00	0.80	2.00	0.80	2.00	0.50
TE SUPPORTED RESEARCH			5.00		5.00		2.00		5.00	
Total:	42.39	75.62	38.59	77.48	38.59	77.57	38.59	77.57	38.59	77.72

UCSF Budget & Resource Management

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO EXTRAMURAL AWARDS BY TYPE 07/01/2007 - 06/30/2008 (All Awards) LPPI: INSTR & RESEARCH FEDERAL SOURCES	Total Dollars Direct Costs		Source: UCSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS F&A Costs #Awds #Tx	Sponsored R 08 - FINAL RI #Awds	ssearch:SULTS
NIH Grants 1	15,364,838.00 11,711,236.00		3,653,602.00	42	53
Other Federal Grants	440,304.00 349,448.00		90,856.00	_	7
IH Contracts	900,463.00 414,213.00		486,250.00	_	_
	228,931.00 214,606.00		14,325.00	9	9
	377,916.00 256,902.00		121,014.00	2	5
	100,000.00 64,742.00		35,258.00	_	_
	187,458.00 187,458.00	.00	0.00	2	5
17	17,599,910.00 13,198,605.00		4,401,305.00	61	73
J	Total Dollars Direct Costs		F&A Costs	#Awds	XL#
	728,373.00 728,373.00	00.	0.00	2	7
	124,518.00 124,518.00	.00	0.00	ო	က
	852,891.00 852,891.00	00:	0.00	œ	10
18,	18,452,801.00 14,051,496.00		4,401,305.00	69	83

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 7:00 PM on 11/4/2008.

Total Dollars Direct Costs
233,571.00 1,082,431.00
Total Dollars 448,752.00
448,752.00
1,531,183.00
Total Dollars
19,983,984.00

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 7:00 PM on 11/4/2008.

LIBRARY

- University Librarian and Assistant Vice Chancellor Butter, Karen
- Business Officer Warren, Margaret
- Website http://www.library.ucsf.edu/

Mission Statement

The mission of the UCSF Library and Center for Knowledge Management is to advance science, foster excellence in teaching and learning, and promote health through the collection, development, organization, and dissemination of the world's health sciences knowledge base.

One of the preeminent health sciences libraries in the world, the UCSF Library serves not only as a repository for health sciences information, but also as a center for development of electronic information resources and the hub of instructional computing on the UCSF campus.

COLLECTION

The Library acquires and maintains a collection of materials necessary to support the research, patient care, education, and community service programs at UCSF. With over 820,000 volumes and more than 4,000 journals in print and digital formats, the Library's collection covers the spectrum of the health sciences disciplines.

GALEN

GALEN, the digital library of UCSF, provides the campus community with integrated access to health sciences information and Library services. The website provides access to more than 70 selected databases and over 6,000 online journals in a wide variety of subject areas. The GALEN acronym was first used by the Library in the early 1990s and stands for General Access Library Electronic Network.

The current version of GALEN was released in March 2003. The website was designed by Hot Studio in collaboration with Library staff and with input from the UCSF community. GALEN runs on Zope and the Apache web server.

CENTER FOR KNOWLEDGE MANAGEMENT

The Center for Knowledge Management (CKM) is an innovative division of the Library that concentrates resources and expertise for the development of digital knowledge bases, electronic

Source: Library website, 6/20/2008

tools, and the sophisticated computing and communications infrastructure required for the Library.

EDUCATIONAL RESOURCES

The Interactive Learning Centers (ILCs) and the Center for Instructional Technology (CIT) provide instructional technology support for academic programs. The ILCs maintain computer labs and classrooms to provide general computing support for the UCSF curricula.

The CIT was established in 2001 to promote the effective use of multimedia and computer-based resources in the UCSF curricula. The CIT supports a web-based course management environment used by all UCSF schools for delivering curricular content. Through the CIT, academic units have access to staff and multimedia resources to support technology-based initiatives within the UCSF curricula.

EDUCATION AND REFERENCE SERVICES

Education and reference librarians provide consulting services and instruction to support education, research, and clinical care at UCSF. In addition to general classes, the Library collaborates with academic programs to deliver curriculum-integrated instruction to students.

Librarians are also available to locate print and online resources and to perform searches using a variety of databases.

ARCHIVES & SPECIAL COLLECTIONS

Archives and Special Collections preserves and maintains unique materials to support research and teaching in the history of the health sciences. These materials include the UCSF Archives, the East Asian Collection, and contemporary collecting projects such as the AIDS History Project and the Biotechnology Archives.

Tobacco control, another strong special collections area, is represented on GALEN by the Tobacco Control Archives. The Library also maintains the Legacy Tobacco Documents Library and the British American Tobacco Documents Archive, separate web resources.

SPONSORED PROJECTS IN THE LIBRARY

The Library is engaged with partners throughout the university, the campus, and the health sciences community to collect, preserve, and provide access to unique materials of scholarly interest.

Source: Library website, 6/20/2008

FY 2007-08 Headcount as of 4/3/08 LIBRARY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
48	15	11	2	76

Source: UCSF Human Resources

Permanently Budgeted FTEs LIBRARY

		FY 2003-04	94	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	-08
ent Budget Account Title		Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
RECHNOLOGY 1 FOR INSTRUCTECHNOLOGY		1.00		1.00		1.00		1.00		1.00	
Y/CKM		10.12 71.48	71.48		10.12 71.48		10.12 76.52		10.12 74.36	10.12 74.36	74.36
Y-INSTRUCTIONAL COMPUTING			4.75		4.75		4.75		4.75		4.75
	Total:	11.12 76.23	76.23	11.12 76.23	76.23	11.12	81.27	11.12 81.27 11.12 79.11	79.11	11.12 79.11	79.11

UCSF Budget & Resource Management

OFFICE OF RESEARCH, ASSOCIATE VICE CHANCELLOR

- Interim Associate Vice Chancellor Roberts, Clifford
- Business Officer Murphy, Suzanne
- Website http://www.research.ucsf.edu/

Mission Statement

To promote research and improve health by:

- Providing high quality services to investigators
- Fostering new research initiatives
- Translating discoveries into public benefit

The Office of Research provides resources and services including the following:

- Cell Culture Facility
- Human Research Protection Program
- Institutional Animal Care and Use Committee
- Laboratory Animal Resource Center
- Office of Environmental Health and Safety
- Technical Committees
- UCSF Stem Cell Research
- Clinical and Translational Science Institute (CTSI)
- Compliance Program

UCSF Cell Culture Facility

The UCSF Cell Culture Facility is a centralized resource to investigators, providing cells & tissue cultures, both primary and continuous cell lines. The facility maintain an extensive cryogenic "Cell Bank" repository. Resale products, tissue culture service and cell banking are available at both the Parnassus campus and the Mission Bay campus.

Human Research Protection Program

The Human Research Protection Program (HRPP) of the University of California, San Francisco in partnership with the research community, is responsible for ensuring the ethical and equitable treatment of all human research subjects in studies being conducted at UCSF and its affiliates and partners and/or being conducted by UCSF faculty regardless of site of activity. The HRPP is also responsible for ensuring compliance with federal regulations, state laws and University polices as well as national standards for research involving human participants.

Source: Office of Research website, 6/23/2008

The HRPP creates a full circle of protection for research subjects and researchers by providing education and training, the Committee review process and post-approval monitoring and outside audits.

UCSF Institutional Animal Care and Use Committee

The University has established policies on the use of animal subjects to promote their humane care and use in research and instruction and to ensure institutional compliance with all applicable federal and state laws and regulations and University policies governing the use of animals.

The IACUC oversees all UCSF research and instruction that involves vertebrate animals, in order to ensure that the highest ethical and animal welfare standards are met.

Laboratory Animal Resource Center (LARC)

The Laboratory Animal Resource Center (LARC) of the University of California, San Francisco is administratively part of the Office of Research Services in the Research unit of the university. Currently the attending veterinarian is Dr. Clifford Roberts, and the Institutional Official is Executive Vice Chancellor A. Eugene Washington, M.D., M.Sc.

LARC's mission is to:

- Provide quality care for all animals used at the University of California, San Francisco.
- Assist the faculty in their mission of quality research with respect to the use of laboratory animals.
- Act as a resource center for the faculty on all issues relating to laboratory animals.
- Assist the University to meet its goal of humane treatment of laboratory animals.

We will fulfill our Mission in a time and cost effective manner by developing and implementing high quality veterinary care.

Office of Environmental Health and Safety

Mission

- To protect the health and safety of UCSF staff, faculty, students, patients and visitors.
- To ensure that the physical environment of the campus is a safe and healthy workplace.

Goals and Focus

To promote a safe research & patient care environment without limiting academic freedom; our primary focus is:

- Training of UCSF employees.
- Development and implementation of proper health and safety procedures.
- Environmental and personnel monitoring to verify effectiveness of its programs.
- Maintaining regulatory / administratively required records.
- Development and maintenance of an effective emergency response program.

Technical Committees

Technical Committees are Campus Committees that are mandated by regulatory, and policy requirements. Some of these regulatory agencies mandate that approval by a duly appointed Committee be granted before any research project using radioactive materials, or certain biological agents, can be initiated. These agencies include the Food and Drug Administration (FDA), Nuclear Regulatory Commission (NRC), California Department of Health Services - Radiologic Health Branch, National Institute of Health (NIH) Guidelines for Research Involving Recombinant DNA Molecules, all which are encompassed in the appropriate University Policies and Manuals.

The Technical Committees are as follows:

- Biological Safety Committee (BSC)
- Chemical and Environmental Safety Committee (CESC)
- Radiation Safety Committee (RSC)
- Radioactive Drug Research Committee (RDRC)

UCSF Stem Cell Research

The guidelines on the Office of Research web site will assist UCSF faculty who intend to conduct research using human stem cells to comply with multiple State and Federal guidelines, regulations, statutory restrictions, and UCSF policies.

Clinical and Translational Science Institute (CTSI)

The Clinical & Translational Science Institute (CTSI) at UCSF is one of the first 12 academic institutions selected to be part of the NIH's national clinical & translational science consortium. The consortium has a charter to transform clinical and translational research to ensure that the best health solutions get to patients as quickly as possible. At UCSF, CTSI is a cross-campus institute, with scientist leaders at its helm.

School/Department Profiles - Executive Vice Chancellor

The four major goals of the institute are

- To enhance, support, and integrate existing training programs, thereby increasing the number and quality of programs and providing trainees from diverse disciplines with the knowledge, skills, and motivation to make significant contributions to clinical and translational research.
- To enhance, support, and integrate existing infrastructure, thereby implementing changes required to foster the design and conduct of a diverse spectrum of high quality, original clinical investigation and translational research.
- To enhance career development of faculty and trainees involved in clinical investigation and translational research by providing mentoring, providing opportunities to catalyze original research, and changing the academic culture to appropriately reward original, multidisciplinary, collaborative work.
- To create a "virtual home" for clinical and translational researchers, thereby nurturing communication, encouraging collaboration, fostering original ideas, and catalyzing the successful conduct of clinical investigation and translational research.

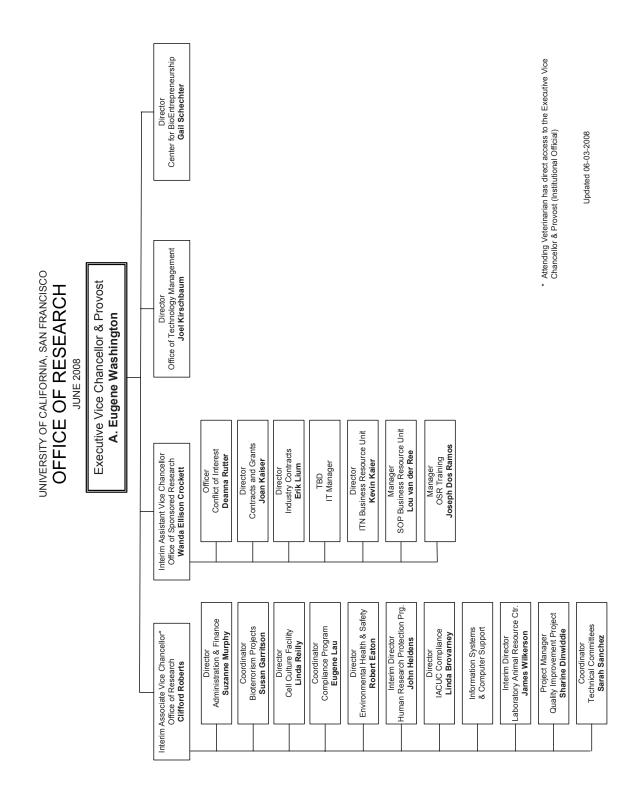
Compliance Program

UCSF is committed to the highest ethical and legal standards. Our core values of integrity, excellence, accountability and respect foster a culture of responsibility and conscience in our science and scholarship. The University is subject to a myriad of laws, regulations or other binding agreements both challenging and complex. Oversight of these activities is provided by the Chancellor's Steering Committee for UCSF Comprehensive Compliance and Internal Controls.

The compliance program at UCSF is a dynamic matrix of activity that integrates and coordinates the significant requirements with which we must comply. Because multiple operational units are responsible for the overall effort to manage potential risk, we designed this site to help you find the regulatory or policy-mandated offices responsible. You can find information here on major initiatives and links to related offices.

The goals of the UCSF Compliance and Controls initiative are to:

- Ensure that a comprehensive institutional perspective is always present
- Develop assessment tools for existing departmental programs
- Coordinate the development of new, or emerging compliance issues
- Carry out specific compliance and controls support activities



FY 2007-08 Headcount as of 4/3/08 ASSOCIATE VICE CHANCELLOR - RESEARCH

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
251	7	1	1	260

Source: UCSF Human Resources

Permanently Budgeted FTEs ASSOCIATE VICE CHANCELLOR - RESEARCH

	FY 2003-04	3-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	-08
nent Budget Account Title	Academic Staff	Staff	Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff
- CARE FACILITY-ADMINISTRATION	4.67	4.67 134.86	4.50	4.50 134.86						
VC RESEARCH						6.75		6.75		6.75
ESEARCH SERVICES		5.75		5.75						
ULTURE - ADMINISTRATION		17.20		17.20		18.34		17.20		17.20
TTEE ON HUMAN RESEARCH						20.62		21.15		21.15
JANCE		6.30		6.30						
DMINISTRATION						21.96		18.85		21.50
1AZARDOUS MATERIALS MANAGEMENT						5.95		5.95		4.36
CHEMICAL WASTE		5.95		5.95						
) HLTH SFTY-CAMPUS GROUP		10.88		10.88		15.86		10.88		9.82
) HLTH SFTY-INDUSTRIAL HYGIENE						0.02				
DNMENTAL HEALTH & SFTY		15.10		15.92						
VIMAL CARE & USE COMMITTEE						6.30		6.30		6.30
DMINISTRATION					4.50	134.86	4.50	134.86	00.00	45.90
HANCELLOR RESEARCH				4.00						
Total:	4.67	4.67 196.04	4.50	200.86	4.50	230.66	4.50	4.50 221.94	00'0	0.00 132.98

UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 ASSOCIATE VC - RESEARCH

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$72,500	\$72,500	\$0	0.00%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	(\$172)	(\$172)	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$108	\$108	\$0	0.00%
Total:	\$72,436	\$72,436	\$0	0.00%

Source: UCSF Budget & Resource Management

• Interim Assistant Vice Chancellor - Ellison-Crockett, Wanda

OFFICE OF RESEARCH, ASSISTANT VICE CHANCELLOR

- Business Officer Murphy, Suzanne
- Website http://www.research.ucsf.edu/osr/index.asp

The Office of Sponsored Research is comprised of the following units; select any of the following for more detail on the services provided by these units:

- Industry Contracts Division
- Contracts and Grants Division
- Conflict of Interest Advisory Committee
- OSR Training

Contracts and Grants Division

Mission Statement

To promote research, instruction, public service and other sponsored activities by providing high quality administrative services to faculty and staff.

We provide a variety of services to the campus community related to obtaining and managing extramural sponsored research, training, clinical trial and public service projects awarded by a variety of federal, state, local government and non-profit sponsors.

The functions of C&G include the following:

- Providing information on funding opportunities
- Proposal and budget development guidance
- Proposal review, sign-off, and transmission
- Grant and contract negotiation and acceptance
- Subcontract preparation guidance
- Post-award guidance
- Award close-out
- Policy development and coordination
- Research activity and associated reports
- Training for campus personnel
- Special projects

Industry Contracts Division

The Industry Contracts Division reviews, negotiates and approves all industry research contracts and grants between UCSF researchers and biotechnology and pharmaceutical companies, including, but not limited to, clinical trial agreements, sponsored research agreements, collaboration agreements, material transfer agreements (both incoming and outgoing), UC discovery grants, and confidentiality agreements.

Conflict of Interest Advisory Committee

Federal regulations, state laws and University policies related to research conflicts of interest recognize that faculty may have financial interests in sponsors of their research and/or in entities with business interests closely related to their research. The term "conflict of interest in research" refers to situations in which financial or other personal considerations may compromise, or have the appearance of compromising, an investigator's professional judgment in conducting or reporting research.

Federal regulations, state laws, and University policies require that faculty members submit financial disclosure forms at the time that a proposal is submitted for funding. In those cases in which a financial interest and possible conflict of interest are disclosed, the laws provide for the review of each situation by an impartial review committee. At UCSF, that committee is the Chancellor's Conflict of Interest Advisory Committee (COIAC).

OSR Training

The Office of Sponsored Research (OSR) Training unit is committed to providing quality training to the UCSF community in a blended learning approach.

Curriculum in Sponsored Research Administration

Instruction in sponsored research administration consists of online courses and job aids, as well as scheduled in-person learning opportunities.

- Pre-award and Electronic Sponsored Research Administration
- Human and Animal Research Subjects
- Post-award Administration
- Environmental Health and Safety
- In the works...
 - * Research Administration: Kick Start (online mini-curriculum)
 - * Certificate programs in Sponsored Research Administration

Pre-award and Electronic Sponsored Research Administration

- Finding Grants and Funding Sources
- Grants.gov (Cayuse)
- Grants.gov (PureEdge)
- Introduction to Sponsored Research (WebCT)
- UCSF Budget Overview
- Proposal Express (WebCT)
- Research Administration: Kick Start (under development)
- Research Administration System (RAS): Preaward (WebCT)

FY 2007-08 Headcount as of 4/3/08 OFFICE OF SPONSORED RESEARCH

St	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
34				34

Source: UCSF Human Resources

Permanently Budgeted FTEs
OFFICE OF SPONSORED RESEARCH

	FY 2003-04	FY 2004-05	1-05	FY 2005-06	90	FY 2006-07	20	FY 2007-08	90
nent Budget Account Title	Academic Staff	iff Academic Staff	Staff	Academic Staff		Academic Staff	Staff	Academic Staff	Staff
SAL CONTRACTS UNIT	8.00	00	8.00						
/ITTEE ON HUMAN RESEARCH	17.62	32	20.62						
E OF RESEARCH ADMINSTRATION	21.00	00	22.00						
NIMO									3.17
<u> </u>									2.00
CONTRACTS & GRANTS DIVISION					22.00		22.00		14.42
NDUSTRY CONTRACTS DIVISION					8.00		8.00		8.00
									2.00
RESEARCH ADMINISTRATION PROJECT					0.75		0.75		0.75
RAINING									0.41
:D & COMPLIANCE ACT PROG(RECAP)									
CH AFFAIRS-RESEARCH ADMIN PROJ	0.75	22	0.75						
Total:	0.00 47.37		0.00 51.37	00.00	0.00 30.75	0.00 30.75	30.75	00'0	0.00 30.75

3: UCSF Budget & Resource Management

OFFICE OF TECHNOLOGY MANAGEMENT

- Director Kirschbaum, Joel
- Patent Prosecution and Business Manager Nakashima, Susan
- Website http://www.otm.ucsf.edu/index.asp

The UCSF Office of Technology Management (OTM) is responsible for managing the intellectual property (e.g. patentable inventions, software, research materials, etc.) created by UCSF employees. It was established in 1996 with the mission of "Promoting the transfer of UCSF's life science & medical technologies for public use and benefit, while generating income to support campus research and education".

The responsibility for managing technology of the nine University of California campuses originally rested with the UC Systemwide Office of Technology Transfer (OTT) until a process of decentralization to campus control was begun in 1990. Initially, the UC Office of the President agreed that, as of July 1, 1996, UCSF would assume responsibility for managing the majority of UCSF technologies disclosed after that date. This technology transfer decentralization process, now completed as of FY07-08, now gives UCSF's OTM responsibility for managing all UCSF inventions, past, present and future.

UCSF in 1995 had the largest gross royalty revenues of any single university in the world, over \$42 million. It accounted for 76% of the total combined income of the nine UC campuses. Currently, approximately 200 new technology disclosures per annum, or over three per week, are generated from research and scholarship at UCSF. The OTM presently manages an invention portfolio comprising over 1,400 active inventions, 755 United States patents, 356 active technology licenses. Since its inception in July, 1996, the OTM has helped launch over three dozen start-up companies to commercialize UCSF technologies.

UC patent policy requires that technologies conceived or developed by its employees be disclosed on a timely basis to the technology transfer office. Title to the technologies is assigned to the university as per state labor code. The OTM will receive these disclosures, evaluate the disclosed technology for commercial potential, obtain patent or other intellectual property protection when appropriate, diligently market and seek to license the technology to industry, negotiate, draft and manage resulting license agreements, and distribute net license revenues to inventors, within UCSF, and to other institutions in the case of inventions UCSF researchers make in collaboration with their colleagues at other institutions.

An item of technology may be an invention for which a patent is sought or a writing for which a copyright is obtained. Patents and copyrights give their owners the right to exclude, which

Source: Office of Technology Management website, 6/23/2008

we can term here an intangible right. In other cases, the item of technology may be a tangible product such as a biological organism or a computer disk with embedded data. In some instances both tangible and intangible rights will be included in a license grant to a company. In all cases, the process begins with a technology disclosure to OTM for evaluation.

Source: Office of Technology Management website, 6/23/2008

FY 2007-08 Headcount as of 4/3/08 OFFICE OF TECHNOLOGY MANAGEMENT

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
11	1			12

Source: UCSF Human Resources

Permanently Budgeted FTEs
OFFICE OF TECHNOLOGY MANAGEMENT

	r	FY 2003-04	04	FY 2004-05	92	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	90
Permanent Budget Account Title	_	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
OFFICE OF TECHNOLOGY MANAGEMENT	_		6.50		6.50		6.50		6.50		6.50
101	Total:	0.00	6.50	00'0	6.50	00'0	6.50	00'0	6.50	0.00	6.50

Source: UCSF Budget & Resource Management

PROCTOR FOUNDATION

- Director Margolis, Todd
- Business Officer Stewart, Linda
- Website http://www.ucsf.edu/proctor/

Established in 1947, The Francis I. Proctor Foundation for Research in Ophthalmology is an internationally renowned, privately endowed Organized Research Unit at the University of California, San Francisco Medical Center. The Foundation is dedicated to research and training in infectious and inflammatory ocular diseases, and the application of this research to the prevention of blindness worldwide. It is recognized as the pre-eminent center in the world for this discipline.

The activities of the Foundation include Fellowship Training, Faculty Research, Medical Group Practice, Clinical Diagnostic Laboratory, and International Research and Training.

The Foundation is supported by endowments, research grants, private donations, and clinical practice income. It is administratively and functionally distinct from the Department of Ophthalmology at UCSF

History

The Francis I. Proctor Foundation for Research in Ophthalmology was established in 1947 in San Francisco through the joint action of Mrs. Francis I. Proctor of Santa Fe, New Mexico, and the Regents of the University of California. Mrs. Proctor intended the Foundation to be a memorial to her husband, Francis I. Proctor, MD, who died in 1936.

Born in Boston in 1864, Francis Proctor pursued his undergraduate and medical studies at Harvard University where he received his medical degree in 1892. After completing his ophthalmology training in Germany, Dr. Proctor returned to Boston, entered the practice of ophthalmology, and took part in the educational activities of the Massachusetts Eye and Ear Infirmary. In 1927 he retired to Santa Fe, New Mexico. There he and Mrs. Proctor developed an interest in health problems of Native Americans among whom blinding trachoma was then widespread. His deep interest in Native American eye health led to his appointment to the Bureau of Indian Affairs as consultant on trachoma, and he served in this capacity to the end of his life.

Because the infectious cause of trachoma was not firmly established, Dr. Proctor pursued research efforts to find the causative agent and encouraged young investigators working on the problem. Among this group of young physician scientists was Phillips Thygeson, MD, then in

postgraduate studies at the University of Colorado. In 1934, Dr. Proctor helped Dr. Thygeson organize a trachoma research laboratory at Fort Apache, Arizona. There, with Dr. Thygeson, he participated in research that established the cause of trachoma as a filterable agent, identical with the Halberstaedter-Prowazek elementary body. Dr. Proctor remained actively involved in experimental work on trachoma until his death.

In his will, Dr. Proctor left a portion of his estate to support research on trachoma and other eye diseases. A committee appointed by Mrs. Proctor recommended that the income from Dr. Proctor's estate be distributed to universities in the form of grants-in-aid for ophthalmic research. During World War II, unallocated income from the estate accumulated and Mrs. Proctor consulted Dr. Thygeson, then in the Army Air Corps, about the best use of the funds. He and Mrs. Proctor agreed on the establishment of a memorial research laboratory at a West Coast university.

Negotiations with the University of California Regents led to the establishment of the Francis I. Proctor Foundation for Research in Ophthalmology at the University's Medical Center in San Francisco. Since its inception, the Proctor Foundation has grown from a single laboratory room with a small part-time staff to a research organization comprising more than 16,000 square feet of laboratory and office space with a faculty and staff of more than 50 people. Acquisition of the initial laboratory space was made possible by a donation from Mr. and Mrs. Berthold Guggenhime. This manner of acquiring space by purchase has been a key factor in ensuring the Proctor Foundation's continuing autonomy.

Mrs. Proctor made many other gifts to the University, including one in 1953 for the construction of a medical office building for patient care by Foundation faculty practitioners. The Proctor Foundation Building at 95 Kirkham Street was constructed in 1953-1955 on property adjacent to the UCSF campus. The first floor of the building is devoted to clinical space for outpatient care. The lower floor houses the new Kimura Ocular Immunology Laboratory.

In 1958, Mrs. Proctor and Mr. Forrest Davidson made generous gifts which were matched by the US Public Health Service to purchase laboratory space on the third floor of the UCSF Medical Sciences Building. This new laboratory became the World Health Organization Collaborating Centre for the Prevention of Blindness and Trachoma. The Centre is now a leading laboratory for research on the molecular biology and immunology of Chlamydia and on the epidemiology of trachoma and other chlamydial infections.

Two additions were made to the Proctor Foundation building at 95 Kirkham Street in 1965. A third floor laboratory was constructed on top of the existing building, and an east wing was added. The additional space now houses the clinical microbiological laboratory, the cytochemistry laboratories, and the Harry Hind Library as well as faculty and administrative offices. The

School/Department Profiles - Executive Vice Chancellor

east wing houses the Ralph and Sophie Heintz Laboratory, a state-of-the-art herpesvirus research laboratory.

The Foundation was directed from 1947 until 1959 by Michael J. Hogan, MD. In 1959, he was succeeded by Phillips Thygeson, MD, who held the position until 1970. The third director, G. Richard O'Connor, MD, served from 1970 to 1984, and he was succeeded by Chandler Dawson, MD, in July 1984. John P. Whitcher, MD, MPH, was appointed Interim Director in August 1995. Todd P. Margolis, MD, PhD, has held the position of Director since 1999, with Richard S. Stephens, PhD, MSPH, as the Associate Director.

The organization of the Proctor Foundation was stipulated in the agreement between the founder, Mrs. Proctor, and the Regents of the University of California. This plan calls for the Director of the Foundation to be responsible to a Board of Governors which consists of the Chancellor of UCSF, the Chairman of the Department of Ophthalmology, and an Independent Governor (originally Mrs. Proctor's representative). The current Board of Governors is comprised of J. Michael Bishop, MD, Chancellor, UCSF (represented by Vice Chancellor Eugene Washington, MD, MSc); Creig Hoyt, MD, Chair, Department of Ophthalmology; and, John P. Whitcher, MD, MPH, Independent Governor.

Research

The research interests of the Foundation focus on the prevention, pathogenesis and treatment of infectious and inflammatory eye disease.

Specific research areas include:

- Establishment of Latent Infection with Herpes Simplex Virus
- The AIRE Gene and Inflammatory Eye Disease
- Molecular Diagnostics
- Predicting and Improving Clinical Outcomes in Corneal Ulcer Patients
- New Treatments for Patients with Ocular Inflammation
- SNOMED
- Epidemiology of Uveitis
- Clinical Trials
- Ocular Infectious Disease
- Corneal and Refractive Surgery
- Molecular Mechanisms of Squamous Metaplasia in Dry Eye
- Novel Drug Therapies to Alleviate Mucus Hypersecretion in
- Cystic Fibrosis
- Smoke-Induced Lung Cancer: Role of EGFR, MUC1 and Catenins

School/Department Profiles - Executive Vice Chancellor

- Autoimmune Mechanisms in a New Spontaneous Model of
- Sjögren's syndrome
- Molecular and Cellular Mechanisms in Inflammatory Angiogenesis
- The Sjögren's Syndrome Clinic at UCSF, and the Sjögren's International Collaborative Clinical Alliance (SICCA)
- Clinical Research Studies in Southeast Asia
 - Corneal Ulceration in Southeast Asia: The Epidemiology, Diagnosis and Treatment of Corneal Ulcers. The WHO/SEAR Corneal Ulcer Study Group
 - Prevention of Corneal Ulceration in Southeast Asia: Studies in Bhutan, Myanmar, and South India.
 - Future Studies Defining the Epidemiology, Prevention and Treatment of Corneal Ulcers in South East Asia

Patient Care

The Proctor Medical Group is world famous for the expert eye care that they provide. For over 45 years they have been leaders in the medical and surgical management of red eyes (external diseases), corneal diseases and uveitis (inflammation inside the eye). They are particularly well known for the diagnosis and management of inflammatory eye problems that occur in association with diseases affecting other organ systems.

Specific interests of the Medical Group physicians are dry eye, AIDS-related eye diseases, diseases caused by Chlamydia, herpes simples virus and herpes zoster, corneal ulcers, allergic eye disease, iritis and retinitis.

Fellowship Program

The Proctor Foundation offers Clinical Fellowship Training, available to U. S. citizens and permanent U. S. residents only, and Research Fellowship Training

Clinical Fellowship Training:

The Proctor Foundation offers two distinct clinical fellowship training programs: Cornea/external disease fellowship

We conduct a one year clinical fellowship program offering comprehensive training in all aspects of corneal and external diseases, corneal transplantation, refractive surgery, and uveitis. A second year, focusing primarily on research, may be available when appropriate. Ongoing research programs include clinical trials, epidemiologic projects, and laboratory-based studies in infec-

School/Department Profiles - Executive Vice Chancellor

tious and inflammatory ocular disease, refractive procedures, and corneal endothelial cell transplantation. Opportunities exist for field research in developing countries, AIDS-related research, and training in advanced surgical techniques. To obtain application please go to www.ucsf.edu/proctor. Click on Fellowship/Fellows and then Application Procedures.

Uveitis fellowship

We also offer a one year uveitis fellowship, which provides clinical training in all aspects of uveitis, as well as time set aside for either clinical or laboratory research. A second year, focusing more on research, may be available when appropriate. Ongoing research programs include clinical trials, epidemiologic projects, and laboratory-based studies in infectious and inflammatory ocular disease. To obtain application please go to: www.ucsf.edu/proctor. Click on Fellowship/Fellows and then Application Procedures.

Seminars, and educational activities associated with fellowship training include:

- All fellows are expected to participate in one or more research projects, to be carried out with Proctor Foundation faculty members.
- Participation in the Cornea Clinic and Uveitis Clinic and weekly Cornea Conferences provides clinical training in a setting that stimulates discussion of pathophysiologic and microbiologic aspects of specific disease entities. The Cornea Clinic is directed by Dr. Lietman with the assistance of Drs. Margolis, McLeod, Whitcher, Strauss, Acharya, and Holsclaw. The Uveitis Clinic is directed by Dr. Acharya; Dr. Wong also conducts a Uveitis Clinic involving the fellows.
- On Wednesday mornings, all Proctor Fellows and Ophthalmology Residents attend Kodachrome Conference, a didactic session where slides of unknowns are discussed by Drs. Whitcher, Lietman, Margolis, Strauss and Acharya. During the year, there is comprehensive coverage of cornea and external disease pathology.
- Fellows prepare and present a one-hour seminar on a specific topic in cornea and external diseases during the year. Fellows also present individual cases discussions at the Department of Ophthalmology Grand Rounds several times a year.
- Fellows participate in weekly one-hour seminars on corneal disease which includes detailed discussion of degenerations, dystrophies, infectious and inflammatory diseases, cancers and corneal surgical procedures. Journal clubs are also conducted during the year.
- All fellows are also provided instruction by Laboratory Specialist Vicky Cevallos in the Ocular Microbiology Laboratory where they acquire the essential skills for identifying bacterial isolates in culture, cytological diagnosis of ocular inflammations, and the appropriate use of diagnostic kits for specific pathogens.
- Fellows have clinical rotations with Dr. Margolis, Dr. Lietman, Dr. Acharya and Dr. Wong at the Proctor Foundation; Dr. Hwang, Dr. McLeod and Dr. Abbott at the Beck-

man Vision Center; and Dr. Holsclaw and Dr. Gritz at the Northern California Kaiser Foundation Hospitals. The clinical and surgical experience in these rotations provides extensive exposure to all aspects cornea, external disease, anterior segment surgery, new refractive surgeries, and uveitis.

Research Fellowship Training:

Research fellows participate in didactic sessions, research projects, and observe our clinical approach to the management of patients with ocular infectious and inflammatory eye disease. However, they cannot have direct responsibility for clinical care nor perform surgical procedures. The primary responsibilities for research fellows will be to design and execute well constructed projects. They may also attend organized teaching sessions as described in the Clinical Fellowship Training section. The research training program may include exposure to clinical activities at the Proctor Foundation without direct patient care responsibilities. These activities include cornea and refractive surgery, external disease and uveitis clinics, as well as specialty clinics for Sjögren's syndrome, and AIDS-related ocular disease. Clinical and research faculty involved in research fellowship training at the Proctor Foundation are Drs. Richard Abbott, Thomas Lietman, David Gritz, Douglas Holsclaw, David Hwang, Todd Margolis, Stephen McLeod, , John Whitcher, Nisha Acharya and Nancy McNamara.

FY 2007-08 Headcount as of 4/3/08 PROCTOR FOUNDATION

St	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
11	10	7	6	37

Source: UCSF Human Resources

Permanently Budgeted FTEs PROCTOR FOUNDATION

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	8
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic	Staff	Academic	Staff	Staff Academic Staff Academic	Staff	Academic	Staff
PROCTOR FOUNDATION		7.10		7.10		7.10		7.10		7.10
PROCTOR FOUNDATION CLINICAL SUPPORT		0.50		0.50		0.50		0.50		0.50
PROCTOR FOUNDATION FACULTY SUPPORT	2.46	0.25	2.00	0.25	2.00	0.25	2.00	0.25	2.00	0.25
PROCTOR FOUNDATION FELLOWSHIP TRNG	3.00	0.50		0.50	3.00	0.50	3.00	0.50		0.50
Total:	5.46	8.35	2.00	8.35	2.00	8.35	2.00	8.35	2.00	8.35

Source: UCSF Budget & Resource Management

School/Department Profiles - Executive Vice Chancellor

WORK-LIFE RESOURCE CENTER

- Director Sisco-Smith, Alma
- Business Officer Williams, Charleane
- Website http://www.ucsf.edu/worklife/

The UCSF Work-Life Resource Center envisions a diverse campus community where the quality of life at work is enhanced, enriched, and sustained for all members. To that end, the Center serves as a clearinghouse for ideas and issues pertaining to worklife, and engages in and supports related research to achieve organizational excellence. The WLRC promotes collaborative strategies that foster supportive work and learning environments.

Principles of Community for UCSF

The San Francisco campus of the University of California is dedicated to learning and teaching in the health sciences. Members of the campus community are a composite of many races, creeds, and social affiliations. Individuals are encouraged to work collaboratively with mutual respect and with forbearance in the spirit of these principles:

- We value individuality and unique talents and affirm creativity and collaborative work
- We recognize and value diversity and celebrate our differences
- We affirm the commitment to the highest standards of civility and decency towards all persons
- We affirm the individual right of public expression and the right to state differences within the bounds of courtesy, sensitivity, and respect
- We affirm and respect inclusiveness and reject acts of discrimination
- We affirm the commitment to community service
- We expect individual efforts that work in accordance with these principles to enhance the quality of life for all

UCSF Code of Ethics

The citizens of California entrust the University of California, San Francisco with the responsibility for providing high-quality teaching, health care and research, and for assuring that the highest standards of ethical conduct and integrity are practiced in meeting these responsibilities. The professional conduct of each member of the campus community is expected to be consistent with and fully comply with these principles. All members of the campus community are expected to engage in the following:

• **Trustworthy conduct** - including dependability, loyalty, and honesty in communications and actions.

School/Department Profiles - Executive Vice Chancellor

- **Respectful behavior** treating everyone with civility, courtesy, tolerance and acceptance, and recognizing the worth, dignity and unique characteristics of each individual.
- Accountability taking personal responsibility for one's actions and decisions.
- Fair and just actions utilizing equitable processes in decision making.
- **Compassion** caring for others, both within and apart from the UCSF community, and providing the highest quality service to patients and humanity.
- Good citizenship striving to make the UCSF community function well now and in the future.
- **Responsible management** including prudent use of University resources in a fiscally responsible manner.

UCSF Code of Conduct

The UCSF Campus Code of Conduct articulates the values and ethical practices collectively prized by the UCSF campus community. It expresses the campus commitment to teaching, patient care, research, and business operations based on the highest ethical principles. In addition, it declares the expectation that all members of the campus community will exercise integrity and highly ethical conduct when making their contribution to the organization.

There are several campus compliance programs in various stages of development that supplement this Code of Conduct. There are also many UCSF policies and applicable federal and state laws and regulations to which we must also adhere. This document is intended to highlight some key issues. Please refer directly to the individual policies, laws, and compliance programs for more information.

Problem Resolution Center

Mediation: The Low Risk Approach to Conflict Management

Recognizing that each individual has a personal interest in and share of responsibility for resolving conflict, UCSF encourages the use of a conflict resolution process known as mediation.

Mission

The mission of the Campus Mediation Program (CMP) is to provide a voluntary, confidential, safe and neutral process for staff, administrators, faculty and students. The Program is supplemental to the university's existing formal grievance and complaint procedures. It emphasizes open communication, active listening and creative problem solving and is facilitated by neutral and trained mediators. Individuals who participate in CMP do so voluntarily. Agreements

entered into by individuals are protected by confidentiality in accordance with California dispute resolution law and codes.

Goals

The goals of the Campus Mediation Program are to:

- Expand conflict resolution alternatives available to the UCSF community administrators, faculty, staff and students;
- Foster an understanding of individual differences while providing support for the diverse constituents of the UCSF community;
- Develop a network of skilled and effective mediators that assist in solving conflicts at UCSF:
- Assist other UCSF conflict resolution resources or efforts.

The Campus Mediation Program supports the value placed on early intervention of conflicts and differences, and can accommodate interpersonal, intergroup, and intragroup conflicts.

Office of Sexual Harassment Prevention & Resolution

The Office of Sexual Harassment Prevention & Resolution was established on the UCSF campus in 1993. Our desire is to create a community in which all persons who participate in University programs and activities can work together in an atmosphere free of all forms of harassment, exploitation, or intimidation, including sexual.

The mission of the Office is to educate the campus community on prevention and resolution of sexual harassment and to provide timely, neutral, thorough and fair services, handling sexual harassment complaints in accordance with University policy, governing laws and regulations. In addition, we investigate and mediate complaints, coordinate the training of campus sexual harassment advisors, and serve as a resource for questions about sexual harassment issues. You may contact us at (415) 476-5186.

Supportive Work Environment

Our Mission

We develop, implement, and monitor strategies, programs, and activities designed to create a more supportive work environment at UCSF, through collaborative efforts with other departments and units.

Our Vision

Our vision is to be the catalyst of change in the UCSF culture, whereby the supportive work environment ideal itself becomes inherent to the culture, negating the need for a dedicated unit to facilitate, support, and drive it.

FY 2007-08 Headcount as of 4/3/08 WORK-LIFE RESOURCE CENTER

Grand	Total	5
Academic	Part Time	
Acad	Full Time	
Staff	Part Time	
St	Full Time	2

Source: UCSF Human Resources

Permanently Budgeted FTES WORK-LIFE RESOURCE CENTER

	FY 2003-04	4	FY 2004-05	05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	88
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic	Staff	Academic	Staff
AVC ADMIN-PROBLEM RESOLUTION CENTER		1.45		1.45		1.45		1.45		1.45
S&SHR-SEX HARASSMENT & PREVENT PROG		0.95		0.95		0.95		1.00		1.00
SUPPORTIVE WORK ENVIRONMENT		1.45		1.45		1.45		1.45		1.45
WORK LIFE RESOURCE CENTER		2.90		2.90		2.90		3.00		3.00
Total:	0.00	6.75	0.00	0.00 6.75	0.00	6.75	00.00	06.9	0.00	06.9

Source: UCSF Budget & Resource Management

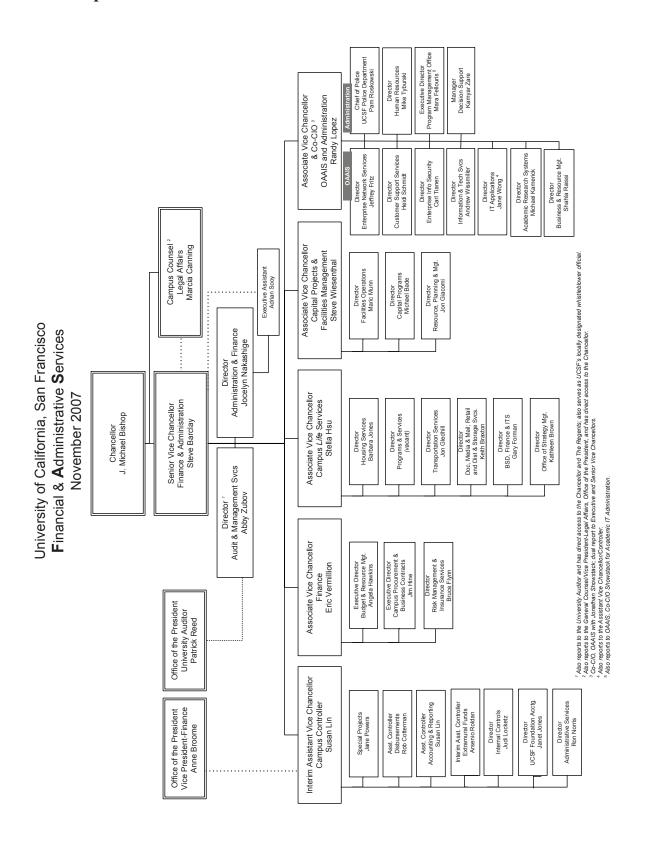
School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

SENIOR VICE CHANCELLOR OF FINANCE & ADMINISTRATION

Chapter Contents

Organizational Chart	380
Senior Vice Chancellor of Finance and Administration	381
Audit Management Services	383
Associate Vice Chancellor - Budget/Finance	385
Budget and Resource Management	386
Campus Procurement and Business Contracts	390
Controller's Office	392
Risk Management Services	399
Campus Life Services (CLS)	401
Campus Projects and Facilities Management (CPFM)	407
Office of the Associate Vice Chancellor - Administration	410
Office of Academic and Administrative Information Systems (OAAIS)	411
New Business Architecture Program Management Office (NBA PMO)	416
Campus Police	417
Campus Human Resources	421
Financial Services Department (AVCA)	423

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration



School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

SENIOR VICE CHANCELLOR OF FINANCE AND ADMINISTRATION

- Senior Vice Chancellor Barclay, Steve
- Website http://www.ucsf.edu/fas/

Customer Service Initiative

OUR MISSION: Provide strategic and operational support services that advance UCSF's mission, safeguard University assets and assure public trust.

OUR VISION & VALUES: We strive to be a high performing team providing superior services helping to make UCSF the institution of choice for discovery, working and learning.

Departments:

- Audit Management Services
- Associate Vice Chancellor Budget/Finance
- Campus Life Services (CLS)
- Campus Projects and Facilities Management (CPFM)
- Office of the Associate Vice Chancellor Administration

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

FY 2007-08 Headcount as of 4/3/08 VC-FINANCE & ADMINISTRATION

	St	aff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
VC-ADMINISTRATION & FINANCE	10				10
ASST VC-FACILITIES MGMT	305	5	1		311
ASST VICE CHANC-BUDGET/FINANCE	59	5			64
AUDIT	12				12
AVC-ADMINISTRATION	187	6			193
CAMPUS LIFE SERVICES	416	26			442
CONTROLLER	117	1			118
OAAIS	199	1			200
Total	1,305	44	1	0	1,350

Source: UCSF Human Resources

Sponsored Project Expenditures & Indirect Cost Recovery FY 2006-07 VICE CHANCELLOR OF FINANCE AND ADMINISTRATION

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$388,511	\$361,541	\$59,942	16.58%
State Special & Contracts	\$0	\$0	\$0	0.00%
Local Government	\$7,156	\$7,156	\$334	4.66%
Private Clinical Trials	\$0	\$0.00	\$0.00	0.00%
Private Contracts & Grants	\$0	\$0.00	\$0.00	0.00%
Total:	\$395,667	\$368,697	\$60,276	16.35%

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

AUDIT MANAGEMENT SERVICES

- Director Zubov, Abby
- Website -http://oaais.ucsf.edu/audit/home.html/

Our mission is to assist the university community in the discharge of their oversight, management and operating responsibilities by:

- Performing independent objective audits,
- Conducting investigations,
- Coordinating external reviews, and
- Providing advisory services

We work closely with Senior Leadership and business functional managers within the schools of Medicine, Dentistry, Nursing and Pharmacy and the Medical Center to improve the effectiveness of control, and governance processes.

Source: Audit Management Services, 9/26/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

FY 2007-08 Headcount as of 4/3/08 AUDIT MANAGEMENT SERVICES

Grand	Total	12
	't Time	
Academic	Full Time Part Time	
	me Full	
Staff	ull Time Part Time	2
	Full Time	

Source: UCSF Human Resources

Permanently Budgeted FTEs AUDIT MANAGEMENT SERVICES

	FY 2002-03	-03	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	-08
ant Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff
NOISIA		11.03		11.03		12.03		13.00		13.00		13.11
Total:	0.00	0.00 11.03	00'0	0.00 11.03		0.00 12.03	00.00	0.00 13.00	00'0	0.00 13.00	00.00	0.00 13.11

UCSF Budget & Resource Management

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

ASSOCIATE VICE CHANCELLOR - BUDGET/FINANCE

- Associate Vice Chancellor Vermillion, Eric
- Website http://finance2.ucsf.edu/

The Office of the Associate Vice Chancellor - Finance is responsible for resource planning and management, decision support analysis, purchasing and business contracting for goods and services, risk management and insurance services for the campus.

The following organizations report to the Office of the Associate Vice Chancellor:

- Budget and Resource Management
- Campus Procurement and Business Contracts
- Controller's Office
- Risk Management Services

Source: Finance website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Budget and Resource Management

- Executive Director Hawkins, Angela
- Website http://www.finance2.ucsf.edu/budres/budres.html

The mission of the Budget and Resource Management is to:

- Manage and coordinate budget process and costing policies as resource stewards;
- Provide education for campus administration and staff, other campuses and appropriate agencies at the state and federal level;
- Analyze policy and business plans, acting as an information clearing house;
- Provide resource planning and management for the campus.

We do this for any stakeholder who supports the mission of the University of California.

Budget and Resource Management consists of 4 units:

- Budget Operations
- Institutional Analysis, Costing Policy, and Recharge Operations
- Capital Budget
- Resource Planning

Budget Operations

Chancellor's Resources Management

- Coordinate the annual campus budget planning and review process
- Implement Office of the President allocations to the Campus and Chancellor's allocations to Campus control points

Operating Budget Management

• Review and approve general ledger transactions (both budget and financial) on permanently budgeted fund as part of the monthly general ledger cycle

Reporting and analysis

- Prepare and/or coordinate completion of a number of routine and adhoc budget reports:
 - Annual staffing Reconciliation
 - UCSF Annual Budget Projections
 - Faculty Recruitment and Retention Expenditures
 - Self-supporting Degree Program Proposals and Annual Financial Reports
 - patent Income Reporting and Allocation to Schools

Source: Budget & Resource Management website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

- Various Self-Insurance Programs including Workers' Compensation, General Auto and Employee Liability(GAEL), Malpractice
- Development Office Financing

Permanent Budget Management

- Manage the Permanent Budget System insuring that all transactions to this multiyear, base budget are performed accurately and reflected as such in all reports
- Ensure that all quarterly and fiscal closing reporting requirements to the Office of the President are fulfilled

Gifts and Endowment Funds Management

- Coordinating requests to the Office of the President to establish and/or modify endowment funds
- Process and distribute annual endowment income to appropriate Campus funds Resource Administration & Recharge Operations

Institutional Analysis and Costing Policy

- Financial management of the Chancellor's central resources.
- Financial planning for the Chancellor's discretionary and General Fund resources.
- Maintain and implement the Chancellor's Financial plan.
- Directs and conducts resource related policy analysis.
- Develop and effectively recommend institutional resource priorities.
- Directs and conducts campus costing policy development and indirect Cost Rate setting process
- Provide critical, policy-level analysis on a wide range of budget, financial and other resource planning and allocation issues.
- Determines planning strategies to pursue new resources for the campus. Coordinate restructuring strategies for existing campus financial resources.
- Coordinate planning of centrally managed provisions and capital programs consistent with institutional resource priorities.
- Provide resource management and planning support as critical financial management issues are identified and needs defined.
- Oversee and provide direct support for special analytical studies and presentations, as they are defined by the chancellor and the Vice Chancellor Administration.
- Identify significant campus resource and management policy trends and prepare reports and recommendations.
- Advising campus constituencies on asset and management issues.

Source: Budget & Resource Management website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Recharge Operations

Campus Recharge Activities

- Review and approve campus recharge operations, including Medical Center recharges
- Assure compliance and provide interpretation of applicable laws, regulations and policies

Campus Resource Planning and Review

- Provide analytical support for program planning at UCSF
- Prepare allocation letters to campus control points for the Chancellor

Mission Bay Operating Budget

- Prepare and distribute the annual Mission Bay Operating Budget Resource Call
- Analyze resource requests and prepare aggregate Mission Bay operating budget request for the Chancellor and Executive Budget committee

Regent's Budget Tables

• Prepare and submit annual Regent's Budget Tables to OP for annual Regent's budget preparation

New Program, Policy and Business Plan Analysis

- Analyze proposed laws/regulations/policies and recommend campus actions and response
- Analyze proposed initiatives and business plans and recommend actions to maximize aggregate campus utility

Fiscal Close and Opening Activity

- Update fiscal close guidelines
- Prepare fiscal close budget and financial journals to balance the State General Fund, chancellor's funds and other Budget Office managed funds
- Review and approve carry forward requests
- Reconcile the State General Fund for final close

Training and Technical Assistance

Provide recharge related training, technical assistance and support to all campus units

Source: Budget & Resource Management website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Capital Budget

Primary Responsibilities

- Administration of UCSF State and Non-State Capital Improvement Program
- Coordination with the Office of the President and Treasurer's Office for the Capital Budget, Operation and Maintenance of Plant (OMP), and Deferred Maintenance and Facility Renewal Program administration
- Liaison with Capital Projects and Facilities Management (CP & FM) on budget integrity and project tracking
- Management of the Mission Bay Capital Budget
- Oversight of the campus capitalization process
- Responsibility for campus submittal of new OMP workload requests
- Coordination, oversight and funding allocation for the Deferred Maintenance and Facility Renewal Program
- Coordination and analysis of campus' external financing needs, including the preparation and review of The Regents' Meetings Finance Agenda items
- Development and maintenance of the debt capacity model for assessing the campus' ability to service external debt
- Development of financial models for projecting and assessing long-term financial viability of proposed capital initiatives
- Responsibility for monitoring budgetary policy related to the Green Building and Clean Energy Standards

Resource Planning

Resource Planning responsibilities include the following:

- Financial Management of Chancellor's Central Resources
- Maintain & Implement the Chancellor's Financial Plan
- Financial Management of Chancellor's STIP Earnings
- Decision Support Analysis on Campus Resources
- Mission Bay Business Plan Preparation
- Chancellor's Accounts Monitoring
- Guidelines for Funds Received from Extramural Funds
- Balanced Scorecard Support

Source: Budget & Resource Management website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Campus Procurement and Business Contracts

- Acting Director Bidwell, Davidson
- website http://cpbc.ucsf.edu//

Mission / Vision

"To Serve and Protect"

To **Serve** by delivering best value business and procurement contracts, transactions, and advice.

To **Protect** by ensuring highest level of compliance with UC policy and applicable local, State and Federal laws and regulations

CPBC: Enabling the business of UCSF

Campus Procurements (CP)

- Provide procurement services that will support the academic and research mission
- Provide guidance and procurement process tools to campus departments and central administration units
- Ensure controls in the procurement process and maintain the highest level of compliance with UC policy and applicable local, State and Federal laws and regulations.

Business Contracts (BC)

In support of campus faculty, student and staff clients and to ensure compliance with Regental policy and consistency with the University's mission of teaching, research and public service, the Business Contracts Unit:

- Provides sound business advice on specialized business structures and relationships to meet clients' business objectives
- Drafts, negotiates and manages non-research business agreements
- Assist in maximizing client resources while minimizing undue risk exposure to the University

Strategic Sourcing (SS)

A systematic process to reduce the total cost of purchased products and services by fully leverag-Source: CPBC website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

ing the University's combined purchasing power, without compromising quality or service

- Represent UCSF at UC system level to ensure campus needs are included in systemwide sourcing agreements
- Serve as campus advocate for systemwide agreements, implement end user adoption of agreements and monitor campus compliance
- Survey campus community end users for unique campus needs
- Educate campus community of suppliers products and ordering processes

Source: CPBC website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Controller's Office

- Assistant Vice Chancellor, Campus Controller Hamilton, Cecilia, CPA
- Website http://acctg.ucsf.edu/

The Controller's Office consists of the following:

- AVC Controller
- Accounting and Reporting
 - Capital Accounting
 - Cash & Controls
 - Financial Reporting
 - General Accounting
 - Student Accounts
- Administrative Services
- Disbursements
 - Accounts Payable
 - Payroll
- Extramural Funds
- Financial & Administrative Systems
- Gift & Foundation Accounting
- Internal Controls

AVC Controller

Assistant Vice Chancellor and Controller Cecilia Hamilton began working at UCSF in June 2008. Previously she was the Associate Vice-President for Finance at The George Washington University for almost a decade. She also spent 20 years as a partner at a large Washington DC area public accounting firm (Snyder, Cohn, Collyer & Hamilton & Associates). She holds a Masters of Science in Accounting from Georgetown University and is a Certified Public Accountant.

As Assistant Vice Chancellor and Controller, Cecilia is responsible for executing the Controller's Office mission of providing effective accounting services to ensure compliance with institutional policies, applicable laws and regulations, and safeguarding University assets. Through innovative use of resources and collaboration with internal and external customers and stakeholders, the Controller's Office strives to meet unit, department, and campus-wide business goals. Cecilia's stewardship is guided by the Controller's Office vision "to strive to provide the highest quality and accountability in fiscal support services within the UC system."

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Please feel free to contact her directly at the number above or her Executive Coordinator, Giovanni Vassallo at 476-4167.

Accounting & Reporting

Mission

The Accounting and Reporting unit provides timely and accurate financial reporting and accounting services to UCOP; UCSF senior management; Federal, State and Local agencies; school and departments for compliance and strategic financial management.

Vision

The Accounting and Reporting unit strives to deliver cost effective, reliable, and consistent accounting information which our customers trust by empowering staff and providing professional developmental opportunities.

Capital Accounting

Capital Accounting consists of Capital Projects and Capital Asset Management. Capital Accounting performs the accounting and reporting functions for equipment, plant, and capital projects under the custody and control of the Regents of the University of California at UCSF.

The specific functions managed within this section are:

CAPITAL PROJECTS & PLANT ACCOUNTING: Responsible for functions related to capital projects; reporting and accounting for land, buildings & structures; and debt service. Capital projects are identified by NCA 900000 through 999999 and fund numbers 03000 through 00999. Includes: construction liens, stop notices, escrow, retention, invoices.

CAPITAL ASSET MANAGEMENT (CAM): Responsible to enact and enforce the policies and procedures for the management and control of materiel (hereafter defined as inventorial equipment) owned by or in the custody of or control of the University of California at San Francisco (UCSF). CAMs responsibilities include inventory and accounting of capital leases, custody code setup, physical inventory, equipment invoice payments, inventory tagging, and reporting

Cash & Controls

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Financial Reporting

Financial Reporting includes:

- Financial Reporting Training
- Year-End Close Activities

General Accounting

The General Accounting Section is responsible for the General Ledger, Account Fund Profile systems, auditing, reporting and management of cash and the recording for the campus. For the General Ledger and Account Fund Profile systems, General Accounting is responsible for four basic areas:

- Quality Control
- Enhancement
- Scheduling
- Report Generation & Distribution

Key Processes in these four areas involve both direct and indirect services to the campus community:

- Training and assistance in interpreting and implementing both University guidelines and sound accounting practices.
- Financial reporting and trend analysis
- Audit of data for input into systems to ensure compliance with University policy and procedures

In the Cash Area, General Accounting is responsible for accounting for cashiering capacities throughout the campus. This includes the recording of all cash transactions in General Ledger, audits of cashiering stations, Bank reconciliations and reporting.

Student Accounts

The Student Accounts Section is responsible for:

- Collection of Student Loans
- Disbursement of all financial aid checks to students
- Audit of promissory notes against the ledger
- Reconciliation and distribution of registration fee income
- Stipends for fellowships and training grants
- Housing loan and employee emergency loan payments
- Operation of the Accounting Satellite Office on campus

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Service Units

DISBURSEMENTS UNIT prepares promissory notes and processes check requests for student and employee emergency loans, conducts exit interviews for graduating or withdrawing students, bills and collects short term student loans and refunds due from students.

COLLECTIONS UNIT collects on all long-term student loans, monitors the performance of our billing service and collection agencies, and ensures UCSF compliance with all governmental and systemwide policies and procedures.

STIPENDS UNIT audits appointment forms for pre-doctoral and post-doctoral fellow, produces monthly checks, withholds taxes when required, and processes student fee offsets per department request.

STUDENT ENROLLMENT/REGISTRATION UNIT is responsible for providing the Budget Office with enrollment statistics and the timely distribution and recording of registration fee income.

ACCOUNTING OFFICE SATELLITE provides all the departments, students, and vendors campus access for Accounting services such as document exchange and check pick-up.

Administrative Services

Mission

The Administrative Services unit provides the necessary strategic and administrative support for the Controller's Office operational staff so that they may provide accurate, timely, and compliant accounting services to the campus community.

The major responsibilities of this unit include:

- Human Resources
- Finance
- Facilities
- Central Reception
- Departmental Purchasing

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Disbursements

Mission

The mission of the Disbursement Accounting Unit (Accounts Payable Travel and Payroll Services) of the Controller's Office within UCSF is to provide timely and accurate payments to employees, vendors, students and travelers. Furthermore, this unit is responsible for compliance with institutional policies, applicable laws and regulations, the safeguarding of University Assets, and transmitting of supported financial data to the general ledger. Lastly, Disbursement Accounting must work closely with its customers to provide timely answers, comprehensive training and effective service levels.

Vision

We strive to provide the highest quality, accountability, and efficiency in payment services within the UC System for our customers and stakeholders.

Accounts Payable

The Accounts Payable Unit within the Controller's Office is responsible for all campus vendor, employee reimbursement and non-Payroll payments. We strive to ensure accuracy, timeliness and adherence to University policies. We work closely with all our customers (vendors, department, and employees) to obtain all necessary documents to support our financial transactions.

Major responsibilities of the Accounts Payable functions include:

- Vendor Payments
- Check Requests
- Employee travel reimbursement
- Customer Service
- Electronic Fund Transfer (EFT) and FX Wire/drafts
- Ensuring compliance with University policy and procedure.

Payroll

The Payroll Division is responsible for providing a variety of services to the campus community in the area of general payroll management. It serves as a collection point for input and process-

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

ing of salaried and non- salaried appointments and related staff benefit programs.

The key functions of this division are:

- Production, timeliness and propriety of payments to employees
- Distribution of funds deducted from employees' pay to federal and state tax agencies, insurance companies, etc.
- Filing returns to satisfy federal and state agency reporting requirements
- Employment records management

Extramural Funds

Mission

Provide direct accounting services for sponsored project funds, ensuring compliance with federal, state and local government, sponsor and University of California regulations and policies.

Vision

To be recognized and respected by our customers and peer academic institutions as one of the top extramural funds management organizations in the country.

Financial & Administrative Systems

Our Mission

Provide outrageous customer services by being the systems functional experts in collaboration with UCSF user community through the use of technology to achieve operational efficiency, financials and compliance objectives.

Gift & Foundation Accounting

The University of California San Francisco Foundation was incorporated in of May of 1982 for the purpose of encouraging private giving to the University of California, San Francisco (UCSF).

The Foundation Office is located at: 44 Montgomery Street, Suite 2200, San Francisco, CA 94143-0208.

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Internal Controls

The Internal Controls and Accountability Unit promotes the development and performance of effective internal controls over UCSF's business operations. The Unit facilitates control self-assessment (CSA) workshops and Internal Controls surveys, which are management tools designed to assist work teams to be more effective in achieving their objectives and managing their key business risks. In addition, the Unit provides training in ethics and internal controls as well as reviews policies and procedures for control efficacy.

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Risk Management Services

- Interim Director Flynn, Bruce
- Website https://www.rmis.ucsf.edu/

Mission Statement

Risk Management and Insurance Services strives to protect the assets and interests of UCSF staff and programs through assessment of loss exposures, focused prevention efforts and efficient management of insurance and self-insurance policies.

Business and Risk Management Services include the following:

Risk Management Services

- Enterprise Risk Management
- Litigation Management
- Training Resources
- Certificate of Insurance Management
- Consulting & Loss Prevention
- Travel Safety Management

Insurance Services

- Automobile Self-Insurance
- General Liability Self-Insurance
- Property Self-Insurance
- Specialty Insurance
- Special Event Insurance

Source: Risk Management and Insurance Services website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

FY 2007-08 Headcount as of 4/3/08 FINANCE

Grand	Total	64
Academic	Part Time	
Acac	Full Time	
Staff	Part Time	5
St	Full Time	29

Source: UCSF Human Resources

Permanently Budgeted FTEs ASSISTANT VICE CHANCELLOR - BUDGET/FINANCE

	FY 2003-04	04	FY 2004-05	2	FY 2005-06	l	FY 2006-07		FY 2007-08	90.
Permanent Budget Account Title	Academic Staff		Academic Staff		Academic Staff		Academic Staff		Academic	Staff
ACCOUNTING-OPERATIONS										97.20
ACCOUNTING-OPERATIONS-SPA										18.90
AVC - BUDGET AND FINANCE		2.00		5.00	4)	5.00		4.40		4.40
BBS, ADMIN & RISK MGMT SVCS		7.00								00.9
CAMPUS BUDGET & RESOURCE MGMT		22.60		23.60	23	23.60		26.60		26.60
CAMPUS FORMS UNIT		1.00								
CAMPUS PROCUREMENT/BUS CONTRACTS				27.29	32	32.29		27.50		27.50
CAMPUS STORAGE OPERATION		11.00		1.00						
MATERIAL MANAGEMENT-PURCHASING		19.29								
MATERIEL MGMT-DISTRIBUTION		5.40								
MATERIEL MGT-ADMINISTRATION		00.9								
MAT'L MGMT-CAMPUS STORES		4.66								
RISK MANAGEMENT SERVICES				4.00	4)	2.00		5.00		00.9
Total:	0.00	78.95	0.00	68.09	0.00	62.89	0.00	63.50	0.00	70.50

Source: UCSF Budget & Resource Management

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

CAMPUS LIFE SERVICES (CLS)

- Associate Vice Chancellor Hsu, Stella
- Website http://www.cas.ucsf.edu/cls/

Campus Life Services offers the following services:

- Arts & Events
- Child & Elder Care
- Conference Services
- Distribution & Storage
- Documents, Media & Mail
- Fitness & Recreation
- Housing Services
- Retail
- Transportation Services

Arts & Events

Our mission is to strengthen the bonds that make us a strong UCSF community, through recognition and celebration for everyone at UCSF. Arts & Events Services provide arts and social programs intended to help everyone on campus strike a balance between work or study and play.

Child & Elder Care

Since 1978, UCSF has been a reliable and consistent source of quality child care for staff, faculty and students. Dedicated caregivers, innovative programs and a diverse approach create a nurturing, safe and inspiring environment for your child.

Conference Services

Conference services are offered at Millberry Union, the Laurel Heights Campus, and the Mission Bay Campus.

Distribution & Storage

Distribution & Storage, located at Oyster Point in South San Francisco, is institutionally owned and operated; we are a division of Campus Life Services.

Source: Campus Life Services website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Distribution and Storage Services Include:

- Receiving of incoming shipments of scientific supplies, large equipment and office furniture for UCSF. Inspection of shipments for damage or shortages, and follow up with freight claims as needed.
- Re-delivery of inbound shipments to all UCSF campus locations within the city of San Francisco. Our primary distribution hub is located on the Parnassus campus in the Medical Center loading dock area.
- Processing of orders & delivery of compressed medical & industrial gases and scientific alcohol for the University.
- Installation of new and/or used office furniture.
- Management of a secure full-service storage warehouse for any University property such as files, records, equipment, furniture, etc.
- Processing the sale of surplus goods & property, including vehicles, within University compliance policy for liquidation of assets.

Documents, Media & Mail

Our Mission is to provide innovative and cost effective services and products to match the needs of UCSF faculty, students and staff, thereby enabling the University to better fulfill its mission of "advancing health worldwide."TM

In keeping with this mission, Documents, Media & Mail holds the UCSF community at the center of its efforts. Confidence and trust in our services is our number-one priority. We have a long track record of providing high quality service at a reasonable price. We understand your deadlines, budget constraints and, most of all, your lack of spare time.

Let our experts at UCSF Documents, Media & Mail be your print, copy, media, and mail partners and watch how your job suddenly seems a little easier.

Fitness & Recreation

Fitness & Recreation Services include:

- Rec Sports
- Fitness & Recreation
- Outdoor Programs

Source: Campus Life Services website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Housing

Housing Services provides quality university housing and related services to students, post-docs, residents/clinical fellows and faculty. at both the Parnassus and Mission Bay campuses.

Retail

Retail Services

Retail Services provides on-campus dining, shopping, and banking services to the faculty, staff, and students at UCSF. Our goal is to bring value, convenience, and variety to the UCSF community and enhance the quality of life on campus.

We currently manage the leases of approximately 17 commercial tenants and the many vending machines at five campus locations. We are also responsible for quality control, lease compliance, strategic and long-term planning, site and opportunity development, and vendor customer service standards.

A portion of every dollar you spend at a campus vendor helps fund activities, programs, and entertainment to improve your quality of life at UCSF. Proceeds support Empact! events, Outdoors Unlimited trips and classes, and much more. Patronize a campus vendor today and help make UCSF a better place for you to work and play.

University Stores

University stores include the following:

- University Store on Parnassus
- University Store at Mission Bay
- University Express
- Technology Store

Transportation

Transportation services include the following:

- Parking (Public, Permit, & Bicycle)
- UCSF Shuttle Bus Services
- Rideshare

Source: Campus Life Services website, 6/24/2008

University of California, San Francisco Institutional Profile - FY 2007-08 School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

FY 2007-08 Headcount as of 4/3/08 CAMPUS LIFE SERVICES

St	aff	Acad	demic	Grand
Full Time	Part Time	Full Time	Part Time	Total
416	26			442

Source: UCSF Human Resources

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Permanently Budgeted FTEs CAMPUS LIFE SERVICES

	FY 2003-04	FY 2004-05	FY 2005-06	90-9	FY 2006-07	-07	FY 2007-08	90-
Permanent Budget Account Title	Academic Staff	Academic Staff	Aca	Staff	Academic	Staff	Academic	Staff
ADDRESSING SERVICES								2.40
ALDEA HSEHD SERV MAINT & REPAIR								2.65
AUX ENTERPRISES ADMINISTRATION								3.00
AUX ENTERPRISES DISTRIBUTION								00.9
AUX ENTERPRISES STORAGE & SURPLUS								7.00
AUX ENTERPRISES STORES								3.00
CAMPUS SHUTTLE SERVICES								48.23
CAS ADMINISTRATION								4.41
CAS INFORMATION SYSTEMS UNIT								4.00
CHILD CARE CENTER								10.80
CHILD/ELDERLY CARE R&R SERVICE								1.00
CLS-VENDOR SERVICE								2.22
FED MU FITNESS & REC								2.29
ITS STORE								5.00
LAUREL HEIGHTS MANAGEMENT								3.68
MAIL DISTRIBUTION								22.05
MBAY CHILD CARE CENTER OPERATING								8.29
MCB PARKING								0.50
MPS ARTS & PERFORMANCE								0.42
MPS CUSTODIAL								8.70
MPS- EMPACT ARTS & PERFORMANCE								0.76
MPS STUDENT RECREATION								2.96
MPS-EMPACT ADMIN								4.55
MPS-EMPACT TICKETS								0.75
MPS-MARKETING ACTIVITIES								3.50
MPS-REC FACILITY/OPERATIONS								1.00
MPS-REC-OPERATIONS MGMT								0.53
MU BOOKSTORE								19.44
MU CENTRAL DESK/GAME ROOM								2.50
MU CUSTOMER SERVICE								8.44
MU FIT PROG ADMIN								1.95
MU FIT PROG AQUATICS								5.05

Source: UCSF Budget & Resource Management

Continued

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Permanently Budgeted FTEs CAMPUS LIFE SERVICES

	FY 2003-04	-04	FY 2004-05	FY 2005-06	FY 2	FY 2006-07	FY 2007-08	80-
Permanent Budget Account Title	Academic	Staff	Academic Staff	Academic	Staff Academic	ic Staff	Academic	Staff
MU FIT PROG GROUP FITNESS CORE								98.0
MU FIT PROG GROUP FITNESS REG								0.00
MU FIT PROG MASSAGE								2.74
MU FIT PROG OUTDOORS PROGRAMS								2.00
MU FIT PROG REC SPORTS								1.18
MU FIT PROG UCSF DAY CAMP								0.80
MU FIT PROG YOUTH & FAMILY								0.31
MU MEMBERSHIPS								4.54
MU OPERATION MANAGEMENT								4.93
MU PERSONAL TRAINING								1.58
MU PLAZA STORE OPERATION EXPENSES								29.9
OUTGOING U.S. MAIL								5.45
PARKING ENFORCEMENT			00.9		00.9	00.9		2.20
PARKING OPERATIONS-LAUREL HEIGHTS		0.50	0.50		06.0	0.50		0.50
PARKING OPER-CURRENT		38.56	44.11		44.11	44.11		44.11
PARKING OPS-MISSION BAY				2	2.00			0.00
PARKING-MT ZION CANCER CENTER		0.25						
POOLCAR OPERATIONS		0.45						
PR YR MU FITNESS & REC						3.50		3.50
REMOTE PARKING LOT		1.25	0.50		0.50	0.50		0.50
REPRO/MAIL ADMIN OVERHEAD-EXPENSE		8.10						
REPRO-PRODUCTION		12.00	26.45		35.53	26.45		26.45
REPRO-QUICK COPY CENTER-CAMPUS		7.00						
RMBS ADMINISTRATION			2.00		2.00	5.00		5.00
STUDENT HOUSING SERVICE		1.00	0.70		0.70	0.70		0.70
TRANSPORTATION SERVICES		2.85	3.90		3.90	3.90		3.90
TURK STREET STUDENT HOUSING		4.29	3.10		3.10			
UNIVERSITY RESIDENCE PROGRAM		6.31	5.95		5.95	5.92		
VANPOOL PROGRAM		1.25	1.50		2.90	1.50		1.50
Total:	0.00	83.81	0.00 97.7	.1 0.00 110.59		0.00 98.11	0.00	88.36

Source: UCSF Budget & Resource Management

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

CAMPUS PROJECTS AND FACILITIES MANAGEMENT (CPFM)

- Associate Vice Chancellor & Campus Architect Wiesenthal, Steven M.
- Website http://www.fm.ucsf.edu/

Capital Programs and Facilities Management (CPFM) works to design, build, and maintain buildings for the UCSF campus at its many locations including Parnassus Heights, Laurel Heights, and Mission Bay.

CPFM has a staff of skilled craftspersons to handle a variety of tasks. In our managed buildings, CPFM team members include carpenters, electricians, HVAC techs, locksmiths, laborers, stationary engineers, and plumbers to handle day-to-day tasks. Supplementing our crafts teams is our custodial and grounds teams that help maintain an environment that we can all take pride in.

In addition, CPFM project managers develop and manage a wide range of projects including laboratory refurbishments, building upgrades, and new construction, including all the new Mission Bay buildings.

Our Mission

We design, build, operate, and maintain UCSF facilities in support of its research, teaching, health care, and community service mission.

Our Vision

We create and support the highest quality environment for UCSF, balancing the needs of today with sustainability for the future. We strive to make every interaction respectful and professional, to make our responses effective and efficient, and to be leaders in customer service.

Capital Programs & Facilities Management is responsible for the operation and maintenance of all UCSF facilities as well as the management of campus renovation and construction projects. The department consists of three primary divisions.

Capital Programs

Includes architectural design and engineering, renovation/construction project administration and management, relocation services and space inventory database.

Facilities Management

Includes campus utilities, building maintenance, engineering services, landscaping, custodial and

Source: CPFM Website

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

locks/security services, as well as various aspects of environmental sustainability such as energy efficiency, refuse and recycling, and fire and life safety services. FM also includes a Customer Service Center (formerly the Work Management Center) to receive and process all job requests coming to CPFM.

Resource Planning & Management

Supports Facilities Management and Capital Programs with accounting, contracts management, information systems, purchasing and human resources. RPM is responsible for the department's resource and financial management.

Source: CPFM Website

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

FY 2007-08 Headcount as of 4/3/08 CAMPUS PROJECTS AND FACILITIES MANAGEMENT (CPFM)

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
305	5	1		311

Source: UCSF Human Resources

Permanently Budgeted FTEs CAMPUS PROJECTS AND FACILITIES MANAGEMENT (CPFM)

		FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	90
Permanent Budget Account Title		Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic	Staff
BLDG MAINTENANCE			22.17		22.17		22.17		22.17		22.17
CUSTODIAL OPERATIONS			58.00		58.00		58.00		58.00		49.90
FAC OPER DIVISION OH							2.00				0.00
FACILITIES MGMT-SPACE MGMT UNIT			3.00		3.00		3.00		3.00		3.00
GEN & ADM EXPENSES			30.50		30.50		30.50		30.50		32.26
LANDSCAPE SVC CORE			4.80		3.70		3.70		3.70		3.70
	Total:	0.00	0.00 118.47	0.00	0.00 117.37	0.00 119.37	119.37	0.00	0.00 117.37	0.00 111.03	111.03

Source: UCSF Budget & Resource Management

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

OFFICE OF THE ASSOCIATE VICE CHANCELLOR - ADMINISTRATION

- Randy Lopez, Associate Vice Chancellor
- Website http://www.avcadmin.ucsf.edu/

The Associate Vice Chancellor of Administration oversees the following departments:

- Office of Academic and Administration Information Systems (OAAIS)
- New Business Architecture Program Management Office (NBA PMO)
- Campus Police, Campus Human Resources
- Financial Services Department (AVCA)

While serving a diverse set of clients and interests, the mission of the Associate Vice Chancellor-Administration departments is to provide effective and efficient administrative services that support the success and safety of UCSF's people and processes. Our vision is to catalyze innovation and success across campus administration through the services we provide and the examples we set.

Source: AVC Administration website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Office of Academic and Administrative Information Systems (OAAIS)

- Randy Lopez, Associate Vice Chancellor, Co-CIO
- Jonathan Showstack, Assistant Vice Chancellor, Co-CIO
- Website http://oaais.ucsf.edu/OAAIS/home.html

Mission

Provide leadership in enterprise-wide state-of-the-art information technology through innovative solutions, cost-effective services, and quality support.

OAAIS services consists of 8 subdivisions;

- Academic Information Systems (AIS)
- Academic Research Systems (ARS)
- Application Services
- Business & Resource Management (BRM).
- Customer Support Services (CSS)
- Enterprise Information Security (EIS)
- Enterprise Network Services (ENS)
- Information Technology Services (ITS)

Academic Research Systems (ARS)

The mission of the office of Academic Research Systems (ARS) is to serve the needs of the UCSF research community by providing an integrated repository of clinical and life sciences data and by providing a centralized, secure, professionally managed infrastructure for the storage and management of research data.

Primary Services

- Integrated data repository
- Secure data environment
- Clinical data reporting
- Honest broker service
- Server hosting
- Active involvement in CTSA Informatics Steering Committee
- Active involvement in Governance Structures for Academic Computing

Director, Michael Kamerick

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Application Services

Application Services supports, develops, and integrates enterprise-wide administrative and financial systems that are used by UCSF academic departments and central offices.

.

The Application Services team is comprised of both functional and technical teams. The functional teams work with business users on requirements and conduct functional analysis, design and testing. The technical teams conduct technical analysis, design, coding and unit testing. Applications supported include:

- Account/Fund Profile (AFP) and Department (DEP) Systems
- Budget System Local (BSL)
- Effort Reporting System (ERS)
- Online Payroll/Personnel System (OLPPS)
- PeopleSoft Financials (General Ledger, Journals, Asset Management)
- PeopleSoft Purchasing (Accounts Payable, Procurement, P2P)
- PeopleSoft Research Administration System (RAS)
- PeopleSoft Security
- Residents & Fellows System (RFS)
- Student Financial Aid (SFA)
- WebLinks Functional Support

Business and Resource Management (BRM)

Mission Statement

The Office of Academic and Administrative Information Systems (OAAIS) Business & Resource Management unit provides essential business services, support and guidance internal to OAAIS in its mission to provide UCSF with core enterprise-wide administrative systems and a vital communications network.

BRM Functional Units:

- Billing Services
- Facilities, Space Planning and Emergency Services
- Finance and Accounting
- Human Resources
- Purchasing/Accounts Payable

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Customer Support Services (CSS)

CSS develops, integrates, and supports customer-focused initiatives and services that advance UCSF's technology environment.

Services

- Customer Support
- Email
- Remote Access (VPN)
- Email Mailing Lists (listserv)
- Directories
- Licensed Software
- Voice Services
- Administrative Applications
- Information Security

Enterprise Information Security (EIS)

Mission

The Enterprise Information Security Office is dedicated to providing superior information security services to all members of the UCSF community to ensure the confidentiality, integrity and availability of UCSF electronic information and resources. We respect the diversity of values and perspectives prevalent in an academic institution and the necessity for the freedom of expression. Therefore, every effort will be made to institute necessary information security measures while promoting an open learning environment.

Vision

- Monitor and proactively protect the UCSF Intranet.
- Provide a variety of information security options to protect resources on the UCSF Intranet from disruption, modification, and disclosure.
- Provide information security awareness and education programs for all members of the UCSF community, including faculty, staff and students.
- Develop and publish guidelines for the secure configuration of servers and workstations.
- Provide an emergency response team to address information security incidents.
- Establish a distributed security environment that reduces the risk of information security incidents.
- Provide the technology to allow the receiver of a digital message to be confident of the identity of the sender.

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Enterprise Network Services (ENS)

What is ENS?

Enterprise Network Services is a department within OAAIS, under the leadership of Randy Lopez, Associate Vice Chancellor.

What we do:

Under the leadership of Jeff Fritz Director, ENS supports academic, research and administrative activities across the UCSF campus by:

- Coordinating analysis and evaluation of emergent network technologies
- Designing voice and data services to address current and future needs
- Installing voice and data connectivity to meet departmental operational needs
- Managing day-to-day operation of the campus voice and data network
- Monitoring and proactively protecting the campus network
- Supporting customers successful use of campus network resources

Services:

- Customer Support
- Email
- Remote Access (VPN)
- Email Mailing Lists (listserv)
- Directories
- Licensed Software
- Phone and Voice Services
- Administrative Applications
- Network Services
- Information Security

Information Technology Services (ITS)

Information Technology Services (ITS) develops, integrates, and maintains core enterprise-wide administrative systems owned by central administrative departments and used by the UCSF campus departments.

- Access/Change Management Services
- Data Center Services
- Identity and Directory Services

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

- Infrastructure Services
- Production Services
- Reporting Services
- System Services

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

New Business Architecture Program Management Office (NBA PMO)

• Mara Fellouris, Director

Leadership and oversight of UCSF's NBA PMO, leading a broad array of business process improvements to balance and integrate process changes, people, and information systems through a focused, collaborative effort across the entire campus. Includes implementation of UCSF LINK, covering core financial and research administration processes.

What is UCSF Link?

UCSF has embarked on a multi-year initiative that will dramatically improve our operations in the areas of research administration, financial management, and information technology infrastructure. UCSF Link co-sponsored by the Vice Chancellor of Administration & Finance, Steve Barclay, and the Executive Vice Chancellor, Gene Washington, and endorsed by the Chancellor's Cabinet. This UCSF-wide initiative will involve academic departments, laboratories, and central administration. While this is a campus-wide initiative, its primary focus is to better support academic units by providing them with streamlined processes and new information systems with increased functionality and data capabilities.

How was this project developed?

The components of this project were developed within the Chancellor's Information Technology Governance structure through an extensive UCSF-wide planning process conducted by the Administrative Systems Advisory Committee (ASAC), chaired at that time by Chuck Smukler, Assistant Dean of Administration in the School of Medicine, and Angela Hawkins, then Associate Dean in the School of Pharmacy. The Executive Budget Committee, which includes the leadership of the Academic Senate, recommended ASAC's proposal to the Chancellor for approval. The ASAC proposal was approved by the Chancellor in July 2002.

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Campus Police

- Pamela Roskowski, Chief of Police\
- Website http://police.ucsf.edu/

Mission Statement

Our mission is to enhance the safety and quality of life at UCSF by working in partnership with the community to promote public safety and crime prevention through education and enforcement; to maintain public order while preserving the legal rights of all individuals; to provide effective, efficient and courteous service; and to reduce the impact of crime. This mission is accomplished through effective:

- Crime prevention and suppression.
- Victim support and assistance.
- Infrastructure protection.
- Community education and awareness.
- Emergency preparedness.
- Traffic Safety.

This mission embraces the Police Department's primary objective of maintaining a safe environment that is free of crime and disorder, enforcing the law in a fair and impartial manner, recognizing both statutory and judicial limitations of police authority and the constitutional rights of all persons.

Values

The principles upon which we base our policing are:

Service

We value the privilege to provide effective, efficient and equitable service. We respect the members of our community, the importance of a combined crime prevention alliance and the opportunity to provide a united policing effort.

Ethics

We value honesty and integrity, and will demonstrate these values in all of our actions. We are accountable for maintaining the public's trust with the highest ethical standards and adherence to department policy, as well as, local, state and federal law. As police

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

officers entrusted with the authority to maintain the public peace, our values will not be compromised.

Professionalism

We value commitment, responsibility and clear direction. We achieve the essence of professionalism through teamwork, creativity and continual self-improvement.

Diversity

We value our differences and acknowledge that our unique backgrounds bring strength to our organization and community. We strive to reflect the community we serve and respect the skills, knowledge and abilities of one another.

Vision

The UCSF Police Department strives to provide a crime free and safe environment through strategic policing, integrity, respect, and strong community partnerships. We willingly accept this responsibility and hold ourselves accountable for its accomplishment.

From this vision statement, the Police Department adopted its crime prevention motto, "Together for a safe and crime free campus", which is used to promote community participation and commitment to the police-community partnership.

The UCSF Police Department has 45 sworn officers and 80 security and civilian staff working in one of six sub-divisions under the leadership of the Chief of Police/Director of Public Safety. The Department is organized as follows:

- Field Services Division
- Information Services Division
- Security Services Division
- Professional Standards Unit
- Homeland Security and Emergency Management Unit
- Business Services Unit

The UCSF Police Department is a service-oriented organization charged with providing the very best public safety services to the campus community using a collaborative community-policing model and philosophy. Police patrol services are provided 24 hours-per day, everyday at all San Francisco and San Mateo County sites. All sworn officers have full police powers statewide,

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

with primary jurisdiction on property owned, operated, or controlled by UCSF and are responsible for all related aspects of law enforcement services and criminal investigation. UCSF Police Officers are responsible for the detection and suppression of all criminal activities related to the UCSF campus in California.

Department Services & Organization

Field Services Division

The Field Services Division operates from two sub-stations located at the Parnassus and Mission Bay Campuses and is responsible for uniformed patrol, traffic enforcement and investigation, response to dispatched calls for service, preliminary criminal case investigation, special event management and specialized field operations.

Information Services Division

The Information Services Division includes the 911 Emergency Communications Center (ECC), which plays a vital role in providing quality services to the Campus and law enforcement affiliates in the community and provides a full range of services including dispatching police, answering 911 calls originating from UCSF facilities, monitoring fire and intrusion alarms. The ECC is the focal point of all police field communication and links the University with other emergency public agencies. The Investigations Unit conducts investigations on all reported major crimes. They also maintain investigative liaisons with other law enforcement agencies and develop crime analysis information to assist in effective patrol operations and to better inform the community of crime matters. The Investigations Unit manages a myriad of criminal cases each year ranging from sexual assault and robbery to embezzlement and fraud. IT Support, Property and Evidence Management and Fleet Management are also responsibilities of this Division. Professional Standards Unit

Security Services Division

The Security Services Division provides on-site security protection services at designated sites, manages the WeID Access Control Program, conducts security surveys and new development plan review, coordinates approval of new security devices with the Capital Projects and Facilities Management organization, manages the LiveScan Fingerprinting and Security Clearance process, and troubleshoots security issues on behalf of the UCSF enterprise.

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Professional Standards Division

The Professional Standards Division maintains the UCSF Police Department's accreditation by performing compliance reviews of all C.A.L.E.A. standards and is responsible for conducting internal affairs investigations, background investigations and coordinating the UCSF Police Department's public outreach through effective community crime prevention and crime analysis. It promotes and maintains safety awareness and community outreach programs, while also developing and coordinating a variety of activities designed to meet the safety needs of the entire campus community. Presentations and special workshops on all aspects of personal safety, prevention of workplace violence, rape/assault prevention and related law enforcement topics are scheduled on a regular basis for all campus members and at new employee and student orientations.

Homeland Security and Emergency Management Unit

The Homeland Security and Emergency Management Unit exists to assist the campus community by implementing and coordinating programs and procedures for emergency planning, mitigation, unusual occurrence response and recovery; emergency information dissemination, and training appropriate campus personnel in emergency response and recovery activities. Given the vulnerability of the Bay Area and the UCSF community to any number of catastrophic natural and man-made disasters, emergency planning is of vital importance and considered a priority by the Chancellor.

Business Services Unit

The Business Services Unit performs the primary support services for the organization including personnel recruitment, training, benefits coordination, workers' compensation coordination, public reception, finance, purchasing, and facilities maintenance.

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Campus Human Resources

- Mike Tyburski, Director
- Website http://ucsfhr.ucsf.edu/

UCSF Human Resources provides quality HR services to attract, develop, motivate and retain a diverse workforce within a supportive work environment. We do this with an emphasis on customer service based on consultation and communication with the campus community.

Campus Human Resources activities include:

- Benefits & Financial Planning
- Development and Training
- Labor and Employee Relations
- Staffing and Compensation
- Disability Management
- Faculty and Staff Assistance Program (FSAP)
- UCSF Temporary Employment Program

Benefits and Financial Planning

Benefits & Financial Planning administers the employee retirement and health and welfare programs for faculty and staff paid through the San Francisco campus, and conveys UCSF benefits interests and priorities to the Office of the President.

Development and Training

Development and Training maximizes the performance of UCSF employees and business units. We provide training and consultation in employee skill development and organizational systems improvement. As a team of committed members of the UCSF community, we have a holistic sense of the UCSF environment, making us uniquely qualified to provide these services.

Labor and Employee Relations

Labor and Employee Relations provides comprehensive professional services in the areas of Employee Relations and Labor Relations to a wide variety of campus clients. HR's Client Services Center provides each campus department with a dedicated team of HR professionals crosstrained in all aspects of human resources.

Source: Human Resources website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Staffing and Compensation

Compensation programs at UCSF serve as the catalyst for organizational performance by defining pay, rewards and incentives. Staffing and compensation professionals provide services related to classification, recruitment, short- and long-term employment, outreach strategies, organizational analysis and operational needs.

Disability Management

Disability Management efforts are dedicated to reducing the human and fiscal cost of workplace disability to UCSF. This is accomplished by:

- Providing education and early intervention services to prevent or minimize the effects of disability in the workplace,
- Facilitating early identification, referral, and treatment for disability and/or injuries at work,
- Assisting employees with disabilities in overcoming disability-related restrictions or limitations,
- Implementing UC policy and/or contract provisions regarding return to work, reasonable accommodation, and medical separation,
- Consulting with management, Human Resources, and other University staff regarding workplace disability issues.

Faculty and Staff Assistance Program (FSAP)

The Faculty & Staff Assistance Program (FSAP) provides confidential assessment, counseling, crisis intervention and referral services to faculty, staff, and healthcare professionals of the campus community. We provide consultation and organizational counseling interventions with skill and compassion that honors the dignity of all.

UCSF Temporary Employment Program

Temporary workers play an important role at University of California, San Francisco by providing administrative and technical support services to our various departments at a number of Bay Area locations.

The Temporary Employment Program (TEP) provides immediate clerical and technical support services to UCSF Departments and various off-campus locations. Temporary Employment is also a viable recruitment source of candidates for casual and career vacancies.

Source: Human Resources website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

Financial Services Department (AVCA)

- Norah Soughayer, Director
- Website http://avcadmin.ucsf.edu/index.php/avcadmin/article/financial-services/

The Financial Services Department (AVCA) provides a broad and comprehensive scope of quality financial services for the departments reporting to the Associate Vice Chancellor of Administration. The Financial Services Department (AVCA) performs the following services with an emphasis on customer service to aid our clients in achieving their programmatic goals:

- Financial Management (reporting, budgeting, and analysis);
- Accounting (A/P, A/R, Payroll, Major Purchasing, and Compliance);
- Training in Financial and Accounting processes, procedures, and systems; and,
- Business Operations Support (facilities management and supply ordering).

The Financial Services Department (AVCA) independently manages the finances and accounting for all departments and activities under the Associate Vice Chancellor of Administration, including:

- NBA/Project Management Office (UCSF Link, AuthN/AuthZ, Planning, "Quick Wins");
- Human Resources (HR Administration, Benefits & Financial Planning, Faculty & Staff Assistance Program, Client Services Center, Temporary Employment Program, Advertising, Employee Rehabilitation Services, Worker's Compensation Services, Development & Training, Organizational Development,
- Business & Information Technology Services);
- Police & Public Safety (Police Department, Emergency Preparedness, Security Services);
- UCSF Retirees' Association; and,
- The Office of the Associate Vice Chancellor of Administration.

Source: Financial Services Department (AVCA) website, 6/24/2008

School/Dept. Profiles - Senior Vice Chancellor of Finance and Admininistration

FY 2007-08 Headcount as of 4/3/08 ASSOCIATE VICE CHANCELLOR - ADMINISTRATION

Part Time	Staff	ıff	Acac	Academic	Grand
	Full Time	Part Time	Full Time Part Time	Part Time	Total
	187	9			193

Source: UCSF Human Resources

Permanently Budgeted FTEs ASSOCIATE VICE CHANCELLOR - ADMINISTRATION

	FY 2003-04	-04	FY 2004-05		FY 2005-06	r	FY 2006-07	_	FY 2007-08	90-
Permanent Budget Account Title	Academic Staff	Staff	Academic Staff		Academic Staff		Academic Staff	Staff	Academic	Staff
BENEFITS COUNSELING		09.9		09.9		09.9		09.9		09.9
CLIENT SVCS CENTER (LABOR RELATION)		26.75	2	26.75	26	26.75		26.75		26.75
DISABLITY MGMT SVCS (RISK MGMT)		3.90		3.90		3.90		3.90		3.90
EMPLOYEE REHABILITATION SERVICE		1.50		1.50		1.50		1.50		1.50
FACULTY & STAFF ASSISTANCE PROGRAM		5.43		5.43	-	5.43		5.43		5.43
PERS-BUSINESS INFORMATION TECH SVCS					_	0.15		0.15		0.15
PERS-D&T-ORGANIZATIONAL DEVELOPMENT		1.00		1.00		1.00		1.00		1.00
PERSONNEL-DEVELOPMENT & TRAINING		4.39		3.34		3.34		3.34		3.34
POLICE ADMINISTRATION		57.57	9	33.25	9	34.61		65.61		68.56
POLICE-EMERGENCY PREPAREDNESS		1.00		1.00		1.00		1.00		1.00
RESIDENTS-FELLOWS INSURANCE		1.75		1.75		1.75		1.75		1.75
SECURITY GUARD SERVICES		0.82		3.20	12	25.35		2.07		2.07
TEMP EMPLOYMENT PRGM(CLERICAL POOL)		7.00		7.00		7.00		7.00		7.00
Total:	00'0	0.00 117.71	0.00 124.72	4.72	0.00 24	248.38	0.00 126.10	26.10	00.00	129.05

Source: UCSF Budget & Resource Management

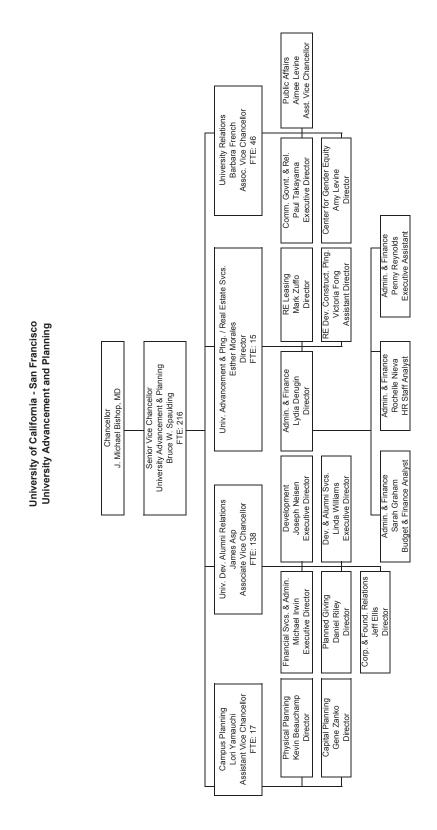
School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

VICE CHANCELLOR OF UNIVERSITY ADVANCEMENT AND PLANNING

Chapter Contents

Organizational Chart	426
Vice Chancellor of University Advancement and Planning	427
Campus Planning	429
Development and Alumni Relations - UCSF Foundation	431
Real Estate Services	434
University Relations	437

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning



School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

VICE CHANCELLOR OF UNIV. ADVANCEMENT AND PLANNING

Vice Chancellor

Bruce Spaulding

UCSF can be best characterized as a health sciences graduate school, a multi-sited medical center, and a biomedical research institute. The campus has over 21,000 employees, making it the largest employer in San Francisco other than the City and County of San Francisco. UCSF is currently engaged in building out a new 57 acre campus at Mission Bay including 2.65 million square feet of research and support space and 1.78 million square feet of clinical research space, including a 289-bed Women's, Children's and Cancer Hospital.

Sr. Vice Chancellor Spaulding is responsible for the coordination and administration of all campus-wide activities related to the growth and development of the University and all campus external relations. Departments overseen include: Real Estate Services, Campus long and short-term Planning (including environmental assessment), Community and Government Relations, Public Affairs, Development (fundraising), Alumni Affairs, News Services and Communications, and the Center for Gender Equity.

Bruce Spaulding has spent half of his working career, eighteen years, at UCSF as its Vice Chancellor. During the prior 17 years, he worked in local government in four states. He served as the Chief Executive (County Manager) for both Fresno County, California and Clark County (Las Vegas), Nevada. Both counties operated large county hospitals.

He holds Masters Degrees in Urban Affairs (MA) and Public Administration (MPA), and has full certification from the American Institute of Certified Planners. While in local government, he served as President of the National Association of County Administrators, based in Washington, DC.

Departments:

- UCSF Campus Planning
- Development and Alumni Relations/UCSF Foundation
- UCSF Real Estate Services
- University Relations/Public Affairs
- Community and Government Relations
- Center for Gender Equity

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

Sponsored Project Expenditures & Indirect Cost Recovery FY 2006-07 VICE CHANCELLOR OF UNIV. ADVANCEMENT & PLANNING

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$1,077	\$1,077	\$0	0.00%
State Special & Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$3,804	\$3,804	\$569	14.95%
Total:	\$4,881	\$4,881	\$569	11.66%

FY 2007-08 Headcount as of 4/3/08 VC-UNIV ADVANCEMENT & PLANNING

	St	taff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
VC-UNIV ADVANCEMENT & PLANNING	9				9
CAMPUS PLANNING	14				14
DEVELOPMENT	133	1			134
REAL ESTATE SERVICES	10				10
UNIVERSITY RELATIONS	38	2			40
Total	204	3	0	0	207

Source: UCSF Human Resources

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

CAMPUS PLANNING

- Assistant Vice Chancellor Yamauchi, Lori
- Website http://campusplanning.ucsf.edu/

What We Do

Campus Planning provides professional planning services that guide the physical development of the campus and assists in strategic development and improvements of buildings and space to support UCSF's mission of research, teaching, health care, and public service.

Major Responsibilities

Physical Planning

The Physical Planning unit is responsible for overseeing land use planning for all UCSF campus sites, including Parnassus Heights, Mount Zion and Mission Bay, and site selection for major new construction projects and campus expansion. Included within the unit's broad scope of responsibility is master planning, landscape planning, signage, maintenance of the campus' Long Range Development Plan, and oversight of planning studies related to land use and design guidelines set forth in the Long Range Development Plan. The Physical Planning unit also prepares required environmental documentation for construction and major renovation projects to ensure compliance with the California Environmental Quality Act (CEQA).

Capital Planning

The Capital Planning Unit is responsible for defining projects for inclusion in annual and five-year capital plans for both State-funded and non-State funded Capital Improvement Programs (CIP). Working with project managers from Capital Projects & Facilities Management (CPFM) and analysts from Budget and Resource Management (BRM), capital planners help formulate projects, define scope through programming, and develop funding plans. A major role includes preparing planning documentation required for project approvals by the Chancellor, the Office of the President (UCOP), the Regents, and various State agencies. Capital Planning also coordinates project compliance with the California Environmental Quality Act (CEQA) and ensures projects are consistent with UCSF's long range development plan (LRDP). Finally it assists the Chancellor by analyzing space requests, formalizing changes in space allocation, and developing policies for facilities and space.

Source: Campus Planning website, 6/25/2008

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

FY 2007-08 Headcount as of 4/3/08 CAMPUS PLANNING

Grand	Total	14
Academic	Part Time	
Acac	Full Time	
Staff	Part Time	
Sta	Full Time	14

Source: UCSF Human Resources

Permanently Budgeted FTEs CAMPUS PLANNING

	FY 2003-04		FY 2004-05	05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	08
Permanent Budget Account Title Academic Staff Academi	emic Sta	aff /	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
CAMPUS PLANNING	15.	15.00		15.00		15.00		16.00		16.00
Total:	0.00 15.00	00	00.00	0.00 15.00		0.00 15.00		0.00 16.00	0.00 16.00	16.00

Source: UCSF Budget & Resource Management

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

DEVELOPMENT AND ALUMNI RELATIONS - UCSF FOUNDATION

 Associate Vice Chancellor James W. Asp II

Senior Management Staff

- Corporate and Foundation Relations Jeff Ellis, Senior Director
- Development and Alumni Services
 Linda E. Williams, Executive Director
- Financial Services and Administration Mike Irwin, Executive Director
- Planned Giving Dan Riley, Director
- Website http://www.ucsf.edu/support/

The UCSF Foundation was established in 1982 as a 501(c)(3) nonprofit public benefit corporation to promote the welfare of the University of California, San Francisco by raising funds to meet critical needs, sponsoring educational programs and involving friends and supporters in the work of the University.

The UCSF Foundation comprises approximately 100 members—all distinguished leaders from the community, the University or the alumni body—who elect a board of directors that serves as the Foundation's governing body. This board oversees the Foundation's operations through several committees: advocacy, finance, foundation relations, investment, trusts, membership development and support groups.

The UCSF Foundation's daily operations are carried out by the Office of University Development and Alumni Relations. Because only 13 percent of the University's operating budget comes from state sources, UCSF has grown increasingly dependent on the Foundation to cultivate private support.

Source: Development website, 6/25/2008

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

Ranked among the top health sciences institutions in the world, UCSF is positioned to translate fundamental advances in the biomedical and quantitative sciences into new knowledge, cures and treatments. But diminishing state funding, aging facilities and the realities of health-care economics all challenge its ability to fulfill this promise.

Without significant private support, UCSF will remain static in a rapidly changing world. With the resources generated by private giving, UCSF will be able to remain at the forefront of medical innovation and continue in its mission of improving human health.

Source: Development website, 6/25/2008

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

FY 2007-08 Headcount as of 4/3/08 DEVELOPMENT

Š	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time Part Time	Part Time	Total
133	1			132

Source: UCSF Human Resources

Permanently Budgeted FTEs DEVELOPMENT

	FY 2003-04	-04	FY 2004-05 FY 2005-06	-05	FY 2005	90	FY 2006-07		FY 2007-08	
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	ff Acader	nic St	aff
ALUMNI AFFAIRS		9.00		9.00		25.00	25.00	01	25.	25.00
CORPORATION AND FOUNDATION						3.00	3.00	0	ю.	3.00
DEV OFFC-DEVELOPMENT		49.00		49.00		29.00	29.00	0	29.	29.00
DEVELOPMENT ADMINISTRATION		30.00		30.00		28.00	28.00	0	28.	00
DIRECTOR OF DEVELOPMENT						3.00	3.00	0	ю.	3.00
FACULTY-ALUMNI HOUSE		0.65		0.65		0.65	0.65	22	0	0.65
PLANNED GIVING		5.00		2.00		5.00	2.00	0	5.	5.00
Total		0.00 93.65	00.00	0.00 93.65	0.00	0.00 93.65	0.00 93.65		0.00 93.65	65

Source: UCSF Budget & Resource Management

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

REAL ESTATE SERVICES

- Director Morales, Esther E.
- Website http://realestate.ucsf.edu/whatwedo.html

Real Estate Services is a Unit within University Advancement and Planning and is responsible for all UCSF campus real estate activities, including acquisition and disposition of space. The Unit provides asset management services for approximately 7.0 million square feet of owned and leased property for the campus. This includes over 1.2 million square feet of leased office, laboratory, medical, clinic, and residential space. Real Estate Services represents the Regents and enters into all real property agreements on behalf of the UCSF campus.

Areas of Responsibility

- Regents representation, as both tenant and landlord, for over 1.2 million square feet of space. Lease negotiation, execution and administration. Establishment of campus protocol and assurance of compliance with contract terms.
- Mission Bay off-site campus development opportunities, and lease strategies for non-UC tenants on new Mission Bay campus site. Lease strategies for vendor tenants at other campus sites.
- UCSF Foundation Real Estate Committee staffing and support.
- Housing development strategies to meet campus long range housing objectives.
- Due diligence real estate analysis for all potential new sites. Responsible for campus compliance with Office of the President, Regents, and State policies regarding financial analyses of transactions, seismic evaluation of leased facilities, Health and Safety code compliance, Phase I environmental assessments, long range development plan compliance, and campus policies and procedures.
- Contract management and administration for leases and other contract agreements involving facilities use issues (lease analysis for acquired medical practices, licenses, affiliations, easements, and the like).
- Tenant improvements negotiations, project management, budget review, contracts.
- Campus leasing policies, practices, and procedures taking into consideration long range development plans, community relations issues, financial feasibility, and sound business practices.

Services Provided to UCSF

• Real Estate Services, including Tenant and Landlord representation and negotiations, market surveys, site evaluation and selection.

Source: Real Estate Services website, 6/25/2008

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

- Asset Services, including lease and contract management and administration (lease database, contract forms, reports, accounting, property tax filing, contract audits, exercise options, terminations and renewals, contract compliance).
- Project Management Services, including negotiations for lease space alterations, selection of architects and contractors, tenant improvements construction management, contract compliance for cost allocations between tenant and landlord.
- Property Management Services, including landlord tenant liaison and relocation assistance to leased space.

Source: Real Estate Services website, 6/25/2008

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

FY 2007-08 Headcount as of 4/3/08 REAL ESTATE SERVICES

St	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
10				10

Source: UCSF Human Resources

Permanently Budgeted FTES REAL ESTATE SERVICES

		FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	90
Permanent Budget Account Title		Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
REAL ESTATE/CONTRACT SVCS			2.67		2.67		2.67		2.67		2.67
	Total:	00.00	2.67	0.00	2.67	00.00	2.67	00.00	5.67	00.00	2.67
	•										

Source: UCSF Budget & Resource Management

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

UNIVERSITY RELATIONS

• Associate Vice Chancellor - French, Barbara

University Relations includes the following organizations:

- Public Affairs
- Community and Government Relations
- Center for Gender Equity
- Lesbian, Gay, Bisexual & Transgender (LGBT) Resource Center

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

UCSF Public Affairs

The UCSF Public Affairs department is positioned at the center of university life. Its purpose is to:

- promote, project, and explain UCSF to internal and external audiences;
- inform the general public as well as the scientific and medical communities nationally and locally of UCSF's achievements in teaching, research, patient care and community service:
- inform the general public about the issues confronting the campus; and to help create a favorable atmosphere as the campus seeks support from the public and private sectors.

It does so with teams who specialize in web and internal communications, media relations, marketing and public relations and publications, both print and online.

UCSF NEWS SERVICES

UCSF News Services serves as the news, public information and media relations office for the UCSF campus, UCSF Medical Center, UCSF Children's Hospital, and Langley Porter Psychiatric Hospital.

Under UC policy, UCSF has a responsibility as a public institution to share its knowledge and expertise and to cooperate with the news media. News Services oversees this responsibility.

The mission of News Services is to present news accurately about UCSF clinical, research, educational and community outreach programs with the public via the media, and to work with the news media to achieve fair and accurate reporting about UCSF. This includes writing and distributing news releases, providing information and responding to inquiries from journalists, identifying faculty experts for interviews, maintaining communication with journalists at the local, regional, national, and international level, and developing and implementing strategic communications.

News Services follows the media guide of the California Healthcare Association.

The News Services office is accessible 24 hours per day, weekends and holidays by calling

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

415/476-2557. After regular business hours (8 a.m.-5 p.m.), a news staff person is on call and available to handle inquiries and other situations that involve communication to the media and the public.

WEB COMMUNICATIONS

The Web Communications unit is responsible for updating and maintaining UCSF's homepage (www.ucsf.edu), Advancing Health Worldwide, Science Café and other websites.

Working wit the Internal Communications unit, the web communication team is also responsible for managing, directing and displaying content, including podcasts and video stories, for the UCSF Strategic Plan website, Nurturing Diversity website, UCSF Budget website and UCSF Today, the website designed to serve the campus community.

INTERNAL COMMUNICATIONS

The Internal Communications unit serves the communicators for the campus community, covering news, issues and events specifically targeted for faculty, staff, students and trainees. The Internal Communications is responsible for communicating the budget, data security, emergency communications and progress made on the strategic plan and diversity initiatives.

The Internal Communications produces:

- Newsbreak, a campus print publication that focuses on a single theme or campus priority and is distributed to the campus community as well as others and
- FYI... UCSF in the News, a email summary of the external news media and internal coverage of news and issues that impact UCSF.

Working with the Web Communications team, the Internal Communications unit also directs the regular flow of content and ongoing development of the UCSF Strategic Plan website, Nurturing Diversity website, UCSF Budget website and UCSF Today.

CREATIVE SERVICES

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

Creative Services is a unit that functions as a recharge agency where designers, editors, web specialists and publications writers work on projects for campus clients as well as University Relations. The recharge agency logs more than 200 individual assignments, from the creation of websites to high-profile newsletters, displays, exhibits, magazines, annual reports and promotional materials. Creative Services also maintains close ties to a network of outside vendors, ranging from photographers to web specialists, who are hired as freelancers on projects as required.

Creative Services provides:

- Free consultations and estimates
- Print and web editorial: reporting, writing, editing (both line copy editing and conceptual); podcasting, spot photography and videography
- Print and web planning: strategy, distribution, content analysis, information architecture
- Print and web design: conceptualization, creation, production, programming and coding, template development

Creative Services also serves as the champions and experts of the UCSF graphic identity system, which is developed, expanded, maintained and enforced with the help of University Relations as directed in pertinent sections of UCSF's Administrative and Policy Guide, and in cooperation with Documents, Media & Mail, part of Campus Life Services. Creative Services is also responsible for developing, maintaining and promulgating the new Editorial & Style Guide that standardizes usages.

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

STRATEGIC COMMUNICATIONS

Community and Governmental Relations (CGR)

• Website - http://ucsfcgr.ucsf.edu/about.html

Mission

Community and Governmental Relations (CGR) is UCSF's most direct link to our neighbors, community groups, and government officials. The staff of CGR are committed to fostering a spirit of honest communication, mutual understanding and creative collaboration with the people whose neighborhoods and concerns we share.

Challenge and Opportunity

UCSF Community & Governmental Relations works with our neighbors, community-based organizations, and government officials to develop creative, mutually beneficial solutions that address the inherently complex relationship between UCSF and our wonderfully diverse city.

The mission of Community Relations is to form partnerships and communicate campus plans and activities in a proactive and forthright manner to neighbors and neighborhood organizations, as well as to present community feedback to campus decision makers.

The mission of Governmental Relations is to assist the University in obtaining adequate public funding and to advocate for public policy that supports the University's teaching, patient care, research, and public service programs.

The mission of the University Community Partnerships Program is to build collaborative relationships between UCSF and the community, promoting civic engagement, fostering community health and well-being and enhancing the environment for education, research, employment and patient care at UCSF. The University Community Partnerships Program serves as a bridge between UCSF and the community, emphasizing partnerships that value and respect the assets and diversity of both.

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

Center for Gender Equity

Website - http://web.ucsf.edu/cge/

CGE provides advocacy, education and support services to both women and men of UCSF and the greater San Francisco community in the areas of women and gender resources and sexual and relationship violence. The Center draws upon the rich array of identities, experiences, perspectives and knowledge represented within UCSF, to strengthen its approach to engaging and supporting the community in its pursuit of excellence.

Overview

Beginning over 29 years ago as the Rape Prevention Education Program, then the Women's Resource Center and now the Center for Gender Equity (CGE), this versatile campus unit has become an integral part of UCSF's teaching, research, patient care and public service mission. In this role, the Center seeks to create programs and initiate policies that sustain an inclusive and equitable campus community.

CGE has evolved to both accommodate and anticipate the changing needs of the UCSF community, as well as changes in the broader social context, with respect to what constitutes meaningful gender analysis and which tools are most effective in addressing persistent inequities.

The programs, services and resources provided under are informed by over five decades of collective professional training and experience. Staff areas of expertise include:

- adult education
- group process and facilitation
- program planning
- public policy
- community outreach
- social and cultural studies
- public health

The Center for Gender Equity's goals include:

• Promoting an understanding of the role of gender and sexuality in our lives and our

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

society

- Supporting equity and achievement for women as they pursue their intellectual, professional, and personal goals.
- Enhancing the quality of women's and men's lives by providing services that address the myriad of diverse backgrounds and experiences of all people.
- Serving as a liaison for women and men to existing campus and community services.
- Providing outreach to the Bay Area community.
- Participating in the formulation and review of policies, procedures and programs relating to gender equity.

Women and Gender

Gender is a variable that has dramatic impact on power dynamics and communication patterns. In recent years, the growing body of rigorous research, in combination with less formal studies and popular surveys on gender issues, has built a compelling case for acknowledging the pervasive and damaging nature of gender bias in academic and business settings. A great need remains to build and maintain the infrastructure that will make gender equity both attainable and sustainable. The Center for Gender Equity has taken the lead in facilitating this process at UCSF, providing the knowledge base and staff support to move forward with this challenging work.

Through a variety of approaches, including individual, small and large group, and policy-oriented efforts, CGE helps to increase the visibility of and response to the importance of gender balance in creating equal access, expanded opportunities and meaningful teaching, working and learning partnerships for the students, faculty, postdoctoral fellows and the broader community we serve.

Sexual & Relationship Violence

The Center for Gender Equity is committed to providing the resources and support required to address sexual and relationship violence affecting our campus community members, including students, faculty, staff and postdoctoral scholars. Educational materials, referrals, training sessions and consultation (on-line, telephone and in-person for individuals and groups) are all available upon request. To more learn about these, and other available resources, please contact the Assistant Director of the Center for Gender Equity at ssanchez@genderquity.ucsf.edu

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

Lesbian, Gay, Bisexual and Transgender (LGBT) Resource Center

• Website - http://lgbt.usf.edu

Since 1998, the LGBT Center has provided a wealth of programs and services to the UCSF community and beyond. For over a decade, the Center has lived out UCSF's strategic plan by nurturing diversity, creating a supportive work environment, and promoting high-quality patient care. In addition, as the only LGBT office in a health setting, and one of the first LGBT offices in higher education, the LGBT Center has also been a powerful voice for LGBT equality in health, employment, and education nationwide.

The Center's programs and services include:

- Training: customized lectures and workshops for students, staff, and faculty
- **Consulting**: confidential advising about LGBT-related concerns in the class-room and workplace
- **Events**: diverse programs for the full UCSF campus community, including workshops, lectures, performances, and conferences
- **Networking**, mentoring & awareness-raising: a listsery, online "Out List," and Visibility Project featuring LGBT members of the UCSF community
- **Information & research**: a comprehensive website featuring up-to-date information about LGBT health and workplace issues
- **Support & advocacy**: individualized support and seasoned advocacy around a variety of LGBT concerns

School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

FY 2007-08 Headcount as of 4/3/08 UNIVERSITY RELATIONS

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
00	C			0.0
30	7			4

Source: UCSF Human Resources

Permanently Budgeted FTEs UNIVERSITY RELATIONS

	FY 2003-04	3-04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	FY	FY 2007-08	
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	ff Acade	mic St	aff
CAMPUS TOURS		0.25		0.25		0.25	0.3	0.25	9	-0.25
CENTER FOR GENDER EQUITY		4.00		3.00		3.00	3.00	0	ю.	3.00
COMMUNICATION MATERIALS						6.70	6.70	0	4	4.95
COMMUNITY RELATIONS		7.85		7.60		7.60	8.10	0	ω.	8.10
GLBTI PROGRAMS				1.00		1.00	1.0	0	←.	1.00
INSTITUTIONAL COMMUNICATIONS		5.60		5.60						
NEWS SERVICE DEPARTMENT		15.20		15.20		15.20	14.95	35	13.	13.85
PUBLIC AFFAIRS ADMINISTRATION		5.40		5.40		5.40	4.40	요	5.	5.05
PUBLICATION OFFICE		9.50		9.40		9.40	9.40	요	6	9.40
VC-UAP UNIVERSITY RELATIONS							2.00	0	2	2.00
WEB COMMUNICATIONS		1.10		1.10						
) <u> </u>	Fotal: 0.00	0.00 48.90	00.00	0.00 48.55	0.00 48.55	48.55	0.00 49.80		0.00 47.10	.10

Source: UCSF Budget & Resource Management

University of California, San Francisco Institutional Profile - FY 2007-08 School/Dept. Profiles - Vice Chancellor of Univ. Advancement and Planning

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 UNIVERSITY RELATIONS

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)		OH % MTDC
Federal	\$19,044	\$18,403	\$4,785	26.00%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$9,187	\$9,187	\$1,309	14.25%
Total:	\$28,231	\$27,590	\$6,094	22.09%

Source: UCSF Budget & Resource Management

University of California, San Francisco Institutional Profile - FY 2007-08 School/Department Profiles

SCHOOL/DEPARTMENT PROFILES

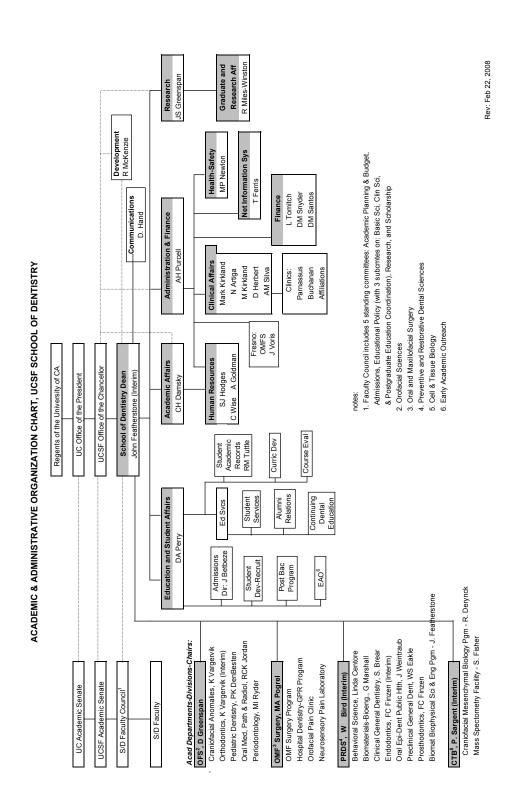
This section contains profiles for each School, Department, and ORU based on information obtained from the following sources:

- Control Point/ORU web sites
- Department web sites
- UCSF Strategic Planning Strategic Planning Environmental Assessment (prepared by consulting firm AMC Strategies)
- Contracts & Grants Year-End Summaries
- NIH rankings
- Sponsored Project Expenditures and Indirect Cost Recovery (Big Sheets)
- UCSF Financial Schedules
- Ad Hoc/Data Warehouse queries
- Permanent Budget queries
- Employee Database (EDB) queries run by Human Resources to calculate headcount as of April 1, 2008 based on the following criteria:
 - Employee Status = Active
 - Current Appointment and Distribution
 - Appt Type = Career or Academic
 - Academics With Salary

SCHOOL OF DENTISTRY

Chapter Contents

Organizational Chart	450
Overview	451
Cell and Tissue Biology	463
Oral and Maxillofacial Surgery	467
Orofacial Sciences	472
Preventive and Restorative Dental Sciences	477



SCHOOL OF DENTISTRY

School Leadership

John D. B. Featherstone, MSc, PhD Dean

John Featherstone, MSc, PhD, is Professor of Preventive and Restorative Dental Sciences at the University of California, San Francisco (UCSF) and Dean of the School of Dentistry. He earned his M.Sc. in physical chemistry from the University of Manchester (UK) and a Ph.D. in chemistry from the University of Wellington (New Zealand). His research over the past 34 years has covered several aspects of cariology (study of tooth decay) including fluoride mechanisms of action, caries risk assessment, de- and remineralization of the teeth, apatite chemistry, salivary dysfunction, caries (tooth decay) prevention, and laser effects on dental hard tissues with emphasis on caries prevention and early caries removal. He is currently active in implementing caries management by risk assessment in several dental schools across the nation.

He has won numerous national and international awards, including the International Association for Dental Research distinguished scientist award for research in dental caries (2000), the Zsolnai Prize from the European Caries Research Organization (2002) for his lifelong contributions to caries research, the "Ericsson Prize in Preventive Dentistry" by the Swedish Patent Fund (2002) and the Norton Ross Award for excellence in clinical research from the American Dental Association (2007).

He has published over 200 manuscripts and book chapters. He is the principal investigator on one National Institutes of Health RO1 grant and co-investigator on five other NIH grants.

Alexis H. Purcell, BS

Associate Dean, Administration and Finance

John S. Greenspan, BDS, PhD, FRCPath, PDSRCS, ScD (hc) Associate Dean for Research

Caroline Damsky, PhD

Associate Dean for Academic Affairs

Dorothy A. Perry, RDH, PhD, MS

Associate Dean for Education and Admissions

Mark Kirkland, DDS Associate Dean for Clinical Affairs

Nelson Artiga-Diaz, DDS, MPH Assistant Dean for Community Clinics

Mark Kirkland, DDS Director, International Dentist Program

Mission Statement/Overview

The UCSF School of Dentistry seeks to improve public health through excellence in teaching, research, patient care, and public service in the dental and craniofacial sciences. We foster an inspired environment where individuals identify themselves as scholars and realize their scholarship through service as clinicians, educators, and scientists.

The School of Dentistry has a long and distinguished history as an institution dedicated to dental education. Established in 1881, it was the first dental institution to be founded west of the Mississippi River. Today, the UCSF School of Dentistry provides the opportunity for dental students to become outstanding clinicians, scientists, educators, and leaders for a new generation of professionals. It is one of two dental schools in the UC system and one of six in California.

Departments

Cell and Tissue Biology (CTB), Peter Sargent, PhD, Interim Chair – The Department has active research programs in several areas, including cell and developmental biology, tissue remodeling and repair, genesis and progression of head and neck cancers, and molecular pathogenesis. The Department of Cell and Tissue Biology is the administrative home for the UCSF campuswide Program in Craniofacial and Mesenchymal Biology, which focuses on basic and translational research related to cellular and morphogenetic processes underlying development. Faculty in the Department teach in the Biomedical Sciences course sequence in the DDS pre-Doctoral program, with a focus on human anatomy and embryology, head and neck anatomy, histology, and neuroscience. Faculty members also teach in a number of courses given by graduate program, including the Biomedical Sciences Graduate Program and Oral and Craniofacial Sciences Graduate Program.

Oral and Maxillofacial Surgery (OMFS), M. Anthony Pogrel, DDS, MD, FACS, FRCS, Chair – OMFS teaches both didactic and clinical courses in the predoctoral dental curriculum and offers instruction in medical emergencies. Basic research in the department includes inves-

tigations of the mechanisms of bone growth and replacement, the use of lasers and mechanisms of pain, and studies of treatment and outcomes of implant, orthognathic, TMJ, and reconstructive surgery.

Orofacial Sciences (OFS), Deborah Greenspan, BDS, DSc, Chair - The Department of Orofacial Sciences is a department in the School of Dentistry the role of which is teaching and practicing the diagnosis and treatment of localized and systemic oral diseases and developmental conditions, and advancing knowledge about them. Several clinical disciplines comprise this Department including Craniofacial Anomalies, Oral Medicine, Oral Pathology, Oral Radiology, Orthodontics, Pediatric Dentistry and Periodontology. Cross-disciplinary clinical, teaching and research activities characterize this Department, which benefits from strong interactions within the Dental School, other campus Schools and the Medical Center. Educational activities are broad, providing both predoctoral and postdoctoral students alike with a strong basis of knowledge and clinical experience.

Research in the Department covers a broad spectrum of basic, translational and clinical sciences that complement the clinical activities of the Department. These include extramurally funded studies of oral mucosal and salivary gland diseases, including those common in people with HIV infection (conducted through the Oral AIDS Center), oral cancer, xerostomia, Sjögren's Syndrome (the Sjögren's International Collaborative Clinical Alliance), and new methods for diagnosing and treating periodontal diseases. In addition, clinical research studies assess the effect of orthodontic treatment on the form and function of the craniofacial complex, new approaches to imaging, the interrelationships of the neuromuscular systems on muscle function and bone growth, and seek to understand the variations in outcome of interdisciplinary treatment of patients with craniofacial anomalies. Studies of enamel and dentin formation are key to new initiatives for tissue engineering of tooth structures, as well as for understanding dental pathologies such as fluorosis and amelogenesis imperfecta.

Patient treatment services provide the highest level of patient care focusing on the latest and most effective treatment methods. The Oral Medicine Clinical Center (formerly known as the Stomatology Clinical Center) specializes in the diagnosis and treatment of oral soft tissue and salivary gland diseases and serves as the basis for predoctoral student education. The Oral Pathology Diagnostic Laboratory, one of the largest in Northern California, offers world-class tissue diagnostic services for dental and medical practitioners. Orthodontics provides state-of-the-art care for children and adults with dental malocclusions. Pediatric Dentistry provides primary and tertiary care for dental diseases and prevention for infants and children. Periodontology focuses on the diagnosis and management of the various periodontal conditions and provides treatment with osseo-integrated implants. The Center for Craniofacial Anomalies provides multidisciplinary consultation and comprehensive treatment of children with various birth defects.

Postgraduate programs in Orthodontics, Pediatric Dentistry, Periodontology and Oral Medicine complete the department's instructional activities. Most students in these training programs are concurrently enrolled in an MS degree program in Oral and Craniofacial Sciences. Additional training leading to the PhD in Oral and Craniofacial Sciences is also available.

Preventive and Restorative Dental Sciences (PRDS), William Bird, DDS, DrPH, Interim Chair –PRDS conducts multidisciplinary instruction, research, and patient care programs through its six divisions: behavioral sciences, professionalism and ethics, biomaterials science and bioengineering, general dentistry, endodontics, oral epidemiology and dental public health, and prosthodontics. Preclinical and clinical educational programs operate within the laboratories and clinics of the dental facilities on campus and through the school's satellite facilities, including the community clinics at Buchanan Street. The comprehensive care teaching philosophy is central to instruction and successful preparation of graduating dentists. Research in the department spans the spectrum from basic to translational to clinical research. Areas of emphasis include the application of the analytical techniques of materials science to the characterization of dental hard tissues and restorative materials; characterization and testing of dental materials; the effects of restorative procedures on the dental pulp; basic research into that organ's biology; psychological aspects of temporomandibular joint disorders; preventive, diagnostic, and therapeutic laser applications in dentistry; caries risk assessment; and caries prevention and management, and a variety of studies on dental implants as well as studies on educational evaluation and teaching methodologies. Research in oral epidemiology, public health, and behavioral science includes a spectrum of ongoing projects on the epidemiology of oral diseases and the delivery of dental care. Faculty in the department have ongoing studies in patient and population-based research, including clinical trials and other types of clinical research. Ongoing studies also include the research into the use of smokeless tobacco products by professional baseball players, and the development of community-based tobacco prevention and cessation interventions. Faculty are working with dental insurers to develop new, nonsurgical approaches and insurance products that will emphasize preventive measures to prevent, treat, and manage dental caries that will emphasize preventive measures and nonsurgical procedures. The School's NIH-funded Center to Address Disparities in Children's Oral Health is housed with in PRDS and is one of only five such centers in the US and the only one in California. It has recently been funded by NIH for \$24 million over seven years.

About the School

Dental Education and Training Programs:

The School admits 88 students annually to the four year Doctor of Dental Surgery (DDS) program. We also have an international program in which 48 dentists from other countries spend two full years culminating also in a DDS. The School offers postgraduate programs in several dental specialty areas: dental public health, endodontics, oral and maxillofacial surgery, oral pathology, oral medicine, orthodontics, pediatric dentistry, periodontics, and prosthodontics. It also offers a general practice residency and a certificate in oral medicine.

The School of Dentistry is committed to educating future leaders of the dental profession, including the next generation of dental scholars and faculty members. It offers PhD and Master's degree programs in Oral and Craniofacial Sciences (OCS), a combined DDS-MS program, a combined DDS-PhD program, and a combined PhD-dental specialty-training program. A concurrent-DDS/MBA program with San Francisco University is also offered.

The School's comprehensive curriculum in general dentistry, oral health specialties and research gives students enormous opportunities both during their pursuit of the DDS degree and beyond. Over the past twelve years, the School of Dentistry has undergone significant changes. In the area of curriculum reform, new interdepartmental courses were developed around five themes that emphasize and reinforce the integration of basic sciences and clinical sciences in dental education. This was the culmination of a multi-year effort to better prepare students to provide patient care.

Currently the School of Dentistry faculty consists of 85 full-time and 93 part-time for a total of 101.25 FTE or 178 paid Faculty. The School of Dentistry possesses four Distinguished Professorships and five Endowed Chairs.

Patient Care Services and Revenue:

The clinical enterprise, which includes 14 clinics at three sites across San Francisco, provides more than 121,000 patient visits per year. The School of Dentistry operates its own teaching clinics. Each of the clinical specialties runs its own clinic and there are several sites for faculty practice. Oral surgery and pediatric dentistry are also active participants in the Medical Center.

Community clinic sites and affiliations number 26. At any one point in time, there are students at

14 of these sites on a regular basis, with 60 days of community based dental education for each of the DDS students. These sites are community clinics, family care clinics, community centers, etc that provide medical and dental care to the underserved. During these rotations in these community safety net clinics over the past five-year period, 62,780 patients were treated, and an equivalent of \$6.5 million in care provided to the underserved of California.

Research Activities:

The UCSF School of Dentistry has a preeminent dental research enterprise. For the past seventeen years, it has ranked 1st in NIH funding among US Dental Schools. For the fiscal year 2006-2007, the school received 90 awards for a total of \$34 million.

The School of Dentistry's research program has a distinguished record in the areas of Biomaterials & Bioengineering and mesenchymal biology. It has a long-standing Oral Cancer Research Center (OCRC), and a world-renown Oral AIDS Center. A pioneer in AIDS research, the School recently celebrated its 20th anniversary as the repository of the San Francisco AIDS Specimen Bank. The School is also the administrative home of the Center for the Health Professions. The School's NIH-funded Center to Address Disparities in Children's Oral Health (CAN DO) is one of only five such centers in the US and the only one in California. The CAN DO Center aims to understand, prevent and reduce oral health disparities in young children, with a primary focus on preventing early childhood caries.

UCSF's multidisciplinary Center for Craniofacial Anomalies is housed within and administered by the School of Dentistry's Department of Orofacial Sciences. This Center provides comprehensive treatment of patients by an interdisciplinary, inter-school team of plastic and oral-maxill-ofacial surgeons, dental specialists, geneticists and social workers. Allied with this clinical Center is the School's new Center for Craniofacial and Mesenchymal Biology. This Program focuses on basic and translational research related to cellular and morphogenetic processes underlying development and provides a wealth of opportunities for interaction with the UCSF Campus-wide Developmental & Stem Cell Biology Program, with research campus-wide in tissue engineering and biomaterials. Numerous other research activities are centered in the school as listed under the department descriptions above.

The School is committed to promoting broadly based research programs with the goal of improving methods for understanding, preventing, treating, and curing oral and craniofacial facial diseases and disorders.

Key Initiatives and Activities for 2008-2009

• Commence construction of a major upgrade and modernization of the pre-clinical

simulation laboratory. This facility will bring state of the art equipment to the education of our students prior to carrying out procedures on patients. A successful major fundraising effort has enabled us to program the construction for mid 2009..

- Installation of digital radiography in all of our clinics within the School of Dentistry.
 This will bring us into line with modern technology that links directly with our electronic record system.
- Upgrade of the entrance and patient reception areas of the Dental Clinics building at 707 Parnassus Ave. This is part of our major effort to provide patients with an excellent experience in a quality environment, starting with patient registration and ending with patient care and recall.
- Preparation of a new Strategic Plan for the School of Dentistry aligned with the UCSF campus strategic plan.
- Commence renovation of research space for new initiatives in craniofacial biology.
- Commence renovation of dual use space for clinical research and expanded pediatric dentistry service.

Financial Schedule 8E - FY 2007-08 Current Fund Expenditures by Source SCHOOL OF DENTISTRY

	Total
General Funds	\$16,562,094
Tuition and Fees	\$8,012,450
Federal Government Grants	\$12,363,022
Federal Government Contracts	\$1,981,178
Special State Appropriations & Contracts	\$1,055,467
Local Government	\$226,937
Private Gifts, Grants and Contracts	\$16,666,005
Endowment Income	\$942,589
Sales & Services Educational Activities	\$14,187,058
Sales & Services of Auxiliary	\$0
Sales & Services Medical Centers	\$0
Other Sources	\$2,205,156
Reserves	\$83,810
Total	\$74,285,765

Source: UCSF Controller's Office

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds						Distribution						
		Total Unro		Unrestricted				Restricted		Salaries and Wages		Other Expenditures		Less: Transfers	
				General Designated											
SCHOOL OF DENTISTRY															
INSTRUCTION															
Educational services	\$	3,965	\$	500	\$	3,463	\$	2	\$	1,458	\$	2,507	\$	-	
Growth and development		2,777		1,380		1,151		246		2,105		672		-	
Oral surgery		2,094		1,067		894		133		1,510		585		-	
Public health and hygiene		71		-		-		71		54		17		-	
Restorative dentistry		8,658		6,147		2,376		135		6,875		1,783		(0)	
Stomatology		4,508		3,280		1,053		175		3,708		800		-	
Inter-school services		222		(45)		267				-		267		45	
Total		22,296		12,329		9,204	9,204		763		15,710		6,631		45
RESEARCH															
Dentistry		22,633		61		(125)		22,697		10,624		12,013		3	
PUBLIC SERVICE															
Dental hygiene		4,575				(12)		4,587		1,438		3,137		(0)	
ACADEMIC SUPPORT															
Dean's office		14,304		3,602		6,569		4,133		6,050		7,954		(300)	
Dentistry clinic		10,477		570		9,500		407		3,962		6,515		(0)	
Total		24,781		4,172		16,069		4,540		10,012		14,469		(300)	
Total School of Dentistry		74,286		16,562		25,136		32,588		37,784		36,250		(252)	

Source: UCSF Controller's Office

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO EXTRAMURAL AWARDS BY TYPE 07/01/2007 - 06/30/2008 (All Awards) SCHOOL OF DENTISTRY	CISCO		Source: UCSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	CSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	Research
FEDERAL SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	*L*
NIH Grants	15,567,580.00	11,112,734.00	4,454,846.00	44	09
NIH Contracts	1,000,000.00	700,500.00	299,500.00	_	က
Subcontracts (excluding SBIR/STTR)	939,671.00	676,156.00	263,515.00	7	7
Subtotal, Federal Sources	17,507,251.00	12,489,390.00	5,017,861.00	52	70
OTHER PUBLIC SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
California Dept Health Services	544,529.00	501,944.00	42,585.00	4	2
Other Public Agencies	10,120.00	8,800.00	1,320.00	-	-
UC Programs(except IUCRP)	300,304.00	300,304.00	0.00	7	7
Subtotal, Other Public Sources	854,953.00	811,048.00	43,905.00	7	80
Subtotal, Public Sources	18,362,204.00	13,300,438.00	5,061,766.00	29	78

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 7:00 PM on 11/4/2008.

Dir. 16,7	F&A Costs 974,956.00 19,779.00 0.00 994,735.00 F&A Costs	#Awds 28 28 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	# TX 32 32 43 6
- μ	974,956.00 19,779.00 0.00 994,735.00 F&A Costs	28 1 34 #Awds	32 9 9
2 16,72 Direc	19,779.00 0.00 994,735.00 F&A Costs	34 34 4Awds	- ω σ
16,7 Dir	0.00 994,735.00 F&A Costs	3.4 #Awds	9 6
	994,735.00 F&A Costs	34 #Awds	39
	F&A Costs	#Awds	3
		C	XL#
240,200.00	68,848.00	٥	9
248,286.00 179,438.00	68,848.00	9	9
17,967,623.00 16,904,040.00	1,063,583.00	40	45
Total Dollars Direct Costs	F&A Costs	#Awds	XL#
0.00	0.00	7	2
0.00	0.00	24	25
0.00 0.00	00:00	19	19
0.00	00.00	45	46
36,329,827.00 30,204,478.00	6,125,349.00	144	169
6.00 6.00 13.00 0.00 0.00 0.00 7.00	179,438.00 179,438.00 16,904,040.00 Direct Costs 0.00 0.00 0.00 0.00	68,84 1,063,58 F&A Co	F&A Costs #Aw 68,848.00 68,848.00 1,063,583.00 0.00 0.00 0.00 0.00 0.00 0.00

Note: Awards are selected for inclusion based on the budget period start data Results include actions processed through 7:00 PM on 11/4/2008

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 SCHOOL OF DENTISTRY

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$15,030,781	\$11,764,373	\$5,728,712	48.70%
CIRM	\$357,861	\$357,861	\$191,814	53.60%
Other State Contracts	\$381,529	\$381,529	\$32,799	8.60%
Local Government	\$226,937	\$226,937	\$0	0.00%
Private Clinical Trials	\$336,265	\$336,265	\$57,663	17.15%
Private Contracts & Grants	\$14,634,911	\$9,221,445	\$1,171,936	12.71%
Total:	\$30,968,285	\$22,288,410	\$7,182,923	32.23%

Source: UCSF Budget & Resource Management

FY 2007-08 Headcount as of 4/3/08 SCHOOL OF DENTISTRY

	St	aff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
DEAN'S OFC: SCH OF DENTISTRY	30			13	43
DENTAL CLINICS	57	9		1	67
DENT-ORAL & MAX SURGERY	25	5	15	16	61
DEPT OF CELL & TISSUE BIOLOGY	15	4	40	24	83
DEPT OF OROFACIAL SCIENCES	45	10	9	60	124
S/D DEAN-CNTR FOR HEALTH PROF	25	3		1	29
S/D-PREVEN & RESTOR DNTL SCI	50	21	7	90	168
Total	247	52	71	205	575

Source: UCSF Human Resources

DEPARTMENT OF CELL AND TISSUE BIOLOGY

- Interim Chair Sargent, Peter, PhD.
- Business Officer Mott, Stephanie
- Website http://www.ucsf.edu/ctb/

The Department of Cell and Tissue Biology (CTB) in the UCSF School of Dentistry has active research programs in cell and developmental biology, tissue remodeling and repair, genesis and progression of head and neck cancers, and molecular pathogenesis.

The Department of Cell and Tissue Biology is the administrative home for the new UCSF campus-wide Program in Craniofacial and Mesenchymal Biology (CMB). This Program focuses on basic and translational research related to cellular and morphogenetic processes underlying development. These include cell migration and proliferation, signaling mechanisms underlying formation of mesenchymal tissues, the role of epithelial-mesenchymal interactions in tissue formation, and the properties and differentiation potential of mesenchymal stem cells. These areas of focus provide strong opportunities for interaction with the UCSF Campus-wide Developmental & Stem Cell Biology Program, the UCSF Institute for Regeneration Medicine, with campus-wide research programs in tissue engineering and biomaterials, and with the Craniofacial Anomalies Center in the School of Dentistry.

The Department was one of the founders of the UCSF campus-wide Program in Microbial Pathogenesis. Research within the department related to this area currently focuses on bacterial adherence mechanisms, oral candidiasis, and viral infections in the placenta and immune protection. The Department of Cell and Tissue Biology has collaborated with the department of Preventive and Restorative Dental Sciences and the Microbial Pathogenesis Program to recruit in the important area of biofilms research.

Faculty in Department of Cell and Tissue Biology teach in the Biomedical Sciences course sequence in the DDS pre-Doctoral program, with a focus on human anatomy and embryology, head and neck anatomy, histology, and neuroscience. Cell and Tissue Biology faculty members also teach in a number of courses given by graduate programs, including the Biomedical Sciences Graduate Program and Oral and Craniofacial Sciences Graduate Program.

The Department of Cell and Tissue Biology anticipates actively recruiting new faculty in the area of Developmental and Molecular Biology related to the CMB Program and in the Microbial Pathogenesis Program.

Source: Department of Cell and Tissue Biology, 8/21/2008

FY 2007-08 Headcount as of 4/3/08 CELL & TISSUE BIOLOGY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
15	4	40	24	83

Source: UCSF Human Resources

Permanently Budgeted FTEs CELL AND TISSUE BIOLOGY

	77	ŀ	77.	*	2000	5	2000	1	7 2000	٥
	FT 2003-04		FT 2004-05"		FT 2003-06	٥٩	FT 2006-07	>	FT 2007-08	٥
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	taff /	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
DENT-GROWTH & DEVELOPMENT LABS			13.00	3.58	13.00	3.58	15.00	3.58	15.00	3.58
Total:	0.00 0.00	00	13.00 3.58	3.58	13.00 3.58	3.58	15.00	3.58	15.00	3.58

*New department in FY 2004-05

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 CELL AND TISSUE BIOLOGY

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$3,989,735	\$2,965,640	\$1,555,672	52.46%
CIRM	\$357,861	\$357,861	\$191,814	53.60%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,112,474	\$975,977	\$329,829	33.79%
Total:	\$5,460,071	\$4,299,478	\$2,077,315	48.32%

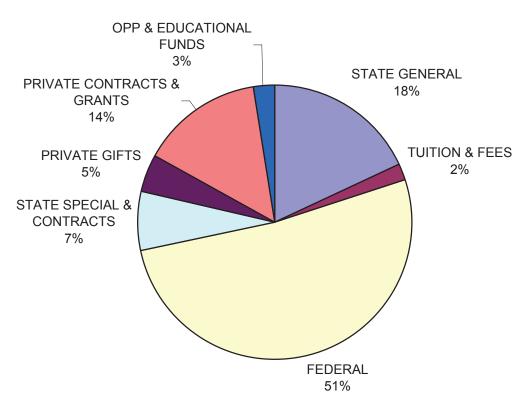
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source CELL AND TISSUE BIOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05* Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$0	\$1,600,426	\$1,624,649	\$1,480,875	\$1,399,820	0.0%
TUITION & FEES	\$0	\$194,844	\$71,743	\$171,925	\$140,612	0.0%
FEDERAL	\$0	\$2,134,035	\$1,779,116	\$2,310,022	\$3,989,735	0.0%
STATE SPECIAL & CONTRACTS	\$0	\$382,775	\$182,895	\$185,398	\$536,365	0.0%
PRIVATE GIFTS	\$0	\$356,020	\$334,279	\$884,629	\$357,586	0.0%
PRIVATE CLINICAL TRIALS	\$0	(\$833)	(\$1,016)	\$0	\$0	0.0%
PRIVATE CONTRACTS & GRANTS	\$0	\$482,209	\$1,560,692	\$1,167,184	\$1,112,474	0.0%
ENDOWMENT FUNDS	\$0	\$107,674	\$80,144	\$53,753	\$21,678	0.0%
OPP & EDUCATIONAL FUNDS	\$0	\$0	\$356,708	\$267,307	\$193,395	0.0%
S&S -EDUCTATIONAL ACTIVIT	\$0	\$138,006	\$560,394	\$433,559	\$289,237	0.0%
OTHER SOURCES	\$0	\$2,522	(\$967)	(\$6,018)	\$71,137	0.0%
Total:	\$0	\$5,397,678	\$6,548,638	\$6,948,634	\$8,112,040	0.0%

*New department in FY 2004-05

Expenditures by Fund Source Cell and Tissue Biology FY 2007-08



DEPARTMENT OF ORAL AND MAXILLOFACIAL SURGERY

- Chair Pogrel, M. Anthony, BDS, MB
- Business Officer Guerra, Maria
- Website http://www.omfs.ucsf.edu/

Oral and Maxillofacial Surgery is that specialty which combines surgical training with dental expertise for the treatment of diseases, injuries, tumors and deformities of the face and jaws. This encompasses:

- Dentoalveolar surgery (impacted and buried teeth, cysts, etc)
- Dental implants
- Facial fractures
- Management of facial disfigurements
- Management of cleft lip and palate
- Management of deformities of the face and jaws
- Management of tumors, including salivary gland tumors and maxillofacial cancer

The Department of Oral Maxillofacial Surgery (OMFS) teaches both theoretical and clinical courses in the predoctoral dental curriculum and offers instruction in medical emergencies in the dental hygiene and predoctoral dental programs.

Basic research in the department include investigations of the mechanisms of bone growth and replacement, the use of lasers and mechanisms of pain, and studies of treatment and outcomes of implant, orthognathic, TMJ, and reconstructive surgery.

The department provides clinical care in oral and maxillofacial surgery to ambulatory patients at the Dental Clinics Building, the postgraduate OMFS Clinic at Moffitt Hospital, and the oral and maxillofacial surgery clinic at San Francisco General Hospital. Treatment for hospitalized patients is provided at Moffitt/Long Hospital, San Francisco General Hospital, UCSF/Mount Zion, and Veterans Affairs Medical Center.

The department also provides elective courses in oral and maxillofacial surgery at San Francisco General Hospital and implant clerkships where students learn to assist with surgical procedures. Other externships allow dental students to spend from two to six weeks at other dental schools around the country.

Source: School of Dentistry website, 6/25/2008

The department's postgraduate residency program leads to certification in OMFS with an MD degree. A PhD is also offered to suitable applicants. Please write to the program director for specific information on postgraduate programs in oral and maxillofacial surgery.

Source: School of Dentistry website, 6/25/2008

FY 2007-08 Headcount as of 4/3/08 ORAL & MAXILLOFACIAL SURGERY

Grand	Total	61
Academic	Part Time	16
Acac	Full Time	15
Staff	Part Time Full Time Part Time	5
St	Full Time	25

Source: UCSF Human Resources

Permanently Budgeted FTEs ORAL AND MAXILLOFACIAL SURGERY

	FY 2003-04	94	FY 2004-05	05	FY 2005-06	9	FY 2006-07		FY 2007-08	98
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic \$	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	taff	Academic	Staff
DENT-ORAL SURG	9.50	1.84	9.50	1.84	6.50	1.84	9.50 1.	1.84	9.50	1.84
Total:	9.50	1.84	9.50	1.84	6.50	1.84	9.50 1.	.84	9.50	1.84

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 ORAL AND MAXILLOFACIAL SURGERY

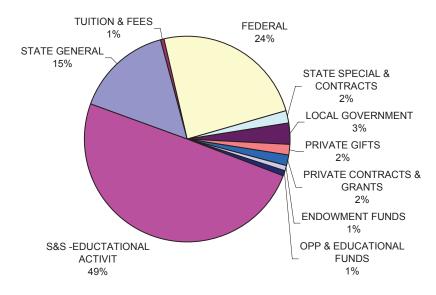
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$1,698,149	\$1,477,620	\$746,920	50.55%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$226,937	\$226,937	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$124,975.71	\$81,139.71	\$5,688.43	7.01%
Total:	\$2,050,062	\$1,785,697	\$752,608	42.15%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source ORAL AND MAXILLOFACIAL SURGERY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,009,519	\$1,015,155	\$988,703	\$1,023,047	\$1,067,302	5.7%
TUITION & FEES	\$67,084	\$75,424	\$78,064	\$57,705	\$54,766	-18.4%
FEDERAL	\$1,596,379	\$1,579,967	\$1,350,956	\$1,228,817	\$1,698,149	6.4%
STATE SPECIAL & CONTRACTS	\$33,861	\$93,604	\$89,772	\$183,726	\$137,574	306.3%
LOCAL GOVERNMENT	\$176,275	\$159,692	\$193,265	\$217,207	\$226,937	28.7%
PRIVATE GIFTS	\$244,602	\$139,560	\$63,608	\$164,146	\$115,158	-52.9%
PRIVATE CLINICAL TRIALS	\$0	\$0	\$0	\$8,945	\$0	0.0%
PRIVATE CONTRACTS & GRANTS	\$34,112	(\$6,119)	\$3,139	\$99,999	\$124,976	266.4%
ENDOWMENT FUNDS	\$42,686	\$51,408	\$32,683	\$84,511	\$51,747	21.2%
OPP & EDUCATIONAL FUNDS	\$27,854	\$117,064	\$93,107	\$104,626	\$62,116	123.0%
S&S -EDUCTATIONAL ACTIVIT	\$2,878,199	\$3,189,930	\$3,588,515	\$3,331,356	\$3,491,348	21.3%
OTHER SOURCES	\$27,568	\$26,263	\$26,237	\$26,227	\$8,278	-70.0%
Total:	\$6,138,140	\$6,441,947	\$6,508,051	\$6,530,311	\$7,038,351	14.7%

Expenditures by Fund Source ORAL AND MAXILLOFACIAL SURGERY FY 2007-08



Source: Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures ORAL AND MAXILLOFACIAL SURGERY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted Designated	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
Instruction	2,094	1,067	894	133	1,510	585	
Total	2,094	1,067	894	133	1,510	585	

DEPARTMENT OF OROFACIAL SCIENCES

- Interim Chair Greenspan, Deborah, BDS, DSc
- Business Officer Borland, Judy

The Department of Orofacial Sciences is a new and exciting academic and clinical enterprise, the role of which is teaching and practicing the diagnosis and treatment of localized and systemic oral diseases and developmental conditions, and advancing knowledge about them. Several clinical disciplines comprise this Department including Craniofacial Anomalies, Oral Medicine, Oral Pathology, Oral Radiology, Orthodontics, Pediatric Dentistry and Periodontology. Cross-disciplinary clinical, teaching and research activities characterize this Department, which benefits from strong interactions within the Dental School, other campus Schools and the Medical Center. Educational activities are broad, providing both predoctoral and postdoctoral students alike with a strong basis of knowledge and clinical experience.

Research in the Department covers a broad spectrum of basic, translational and clinical sciences that complement the clinical activities of the Department. These include extramurally funded studies of oral mucosal and salivary gland diseases, including those common in people with HIV infection (conducted through the Oral AIDS Center), oral cancer, xerostomia, Sjögren's Syndrome (the Sjögren's International Collaborative Clinical Alliance), and new methods for diagnosing and treating periodontal diseases. In addition, clinical research studies assess the effect of orthodontic treatment on the form and function of the craniofacial complex, new approaches to imaging, the interrelationships of the neuromuscular systems on muscle function and bone growth, and seek to understand the variations in outcome of interdisciplinary treatment of patients with craniofacial anomalies. Studies of enamel and dentin formation are key to new initiatives for tissue engineering of tooth structures, as well as for understanding dental pathologies such as fluorosis and amelogenesis imperfecta.

Patient treatment services provide the highest level of patient care focusing on the latest and most effective treatment methods. The Oral Medicine Clinical Center (formerly known as the Stomatology Clinical Center) specializes in the diagnosis and treatment of oral soft tissue and salivary gland diseases and serves as the basis for predoctoral student education. The Oral Pathology Diagnostic Laboratory, one of the largest in Northern California, offers world-class tissue diagnostic services for dental and medical practitioners. Orthodontics provides state-of-the-art care for children and adults with dental malocclusions. Pediatric Dentistry provides primary and tertiary care for dental diseases and prevention for infants and children. Periodontology focuses on the diagnosis and management of the various periodontal conditions and provides treatment with osseo-integrated implants. The Center for Craniofacial Anomalies provides multidisciplinary consultation and comprehensive treatment of children with various birth defects.

Source: School of Dentistry website, 6/25/2008

Postgraduate programs in Orthodontics, Pediatric Dentistry, Periodontology and Oral Medicine complete the department's instructional activities. Most students in these training programs are concurrently enrolled in an MS degree program in Oral and Craniofacial Sciences. Additional training leading to the PhD in Oral and Craniofacial Sciences is also available.

Source: School of Dentistry website, 6/25/2008

FY 2007-08 Headcount as of 4/3/08 OROFACIAL SCIENCES

Grand	Total	124
9		09
Academic	Part T	6
Ac	Full Time Part Time	
aff	Part Time	10
Staff	Full Time	45

Source: UCSF Human Resources

Permanently Budgeted FTEs OROFACIAL SCIENCES

	FY 2003-04	FY 2003-04 FY 2004-05*	FY 2005-06	FY 2006-07	FY 2007-08
Permanent Budget Account Title	Academic Staff	Academic Staf	Academic Staf	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Academic Staff
DENT-ORTHODONTIC CLINIC		0.22 1.29	0.22	0.22	
DENT-STOMATLOGY-SALES/SVC ACTIVITY		0.01 1.40	0.01 1.40		
DENT-STOMATOLGY ADMINISTATION		0.07 0.80	0.07 1.26		
S/D DEPT OF OROFACIAL SCIENCES				28.00 6.43	28.00 6.43
S/D DEPT OF STOMATOLOGY		29.00 6.43	29.00 6.43		
S/D OFS ADMINISTATION				0.88 1.56	0.81 1.53
S/D OFS-SALES & SERVICE ACTIVITY				0.12 1.50	
S/D STOMATOLOGY		0.58	0.58		0.12 1.50
Total:	0.00 0.00	29.30 10.50	29.30 9.67	29.22 9.49	28.93 9.46

*New Department in FY 2004-05

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 OROFACIAL SCIENCES

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$4,571,678	\$3,799,242	\$1,817,116	47.83%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$139,576	\$139,576	\$34,843	24.96%
Private Contracts & Grants	\$448,859	\$372,749	\$121,916	32.71%
Total:	\$5,160,112	\$4,311,567	\$1,973,874	45.78%

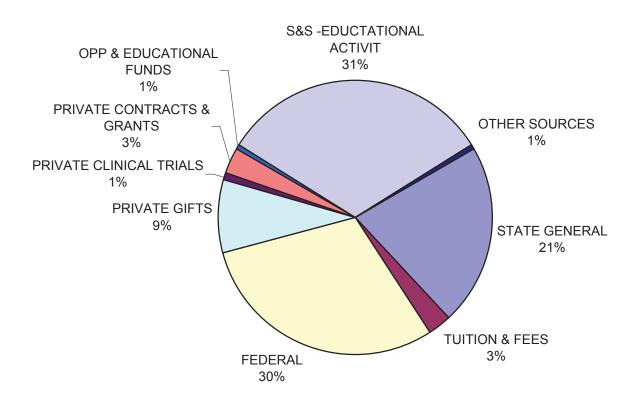
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source OROFACIAL SCIENCES

Fund Source	FY 2003-04 Year 1	FY 2004-05* Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$0	\$3,118,149	\$3,200,410	\$3,254,654	\$3,279,890	0.0%
TUITION & FEES	\$0	\$6,356	\$655,811	\$194,593	\$419,262	0.0%
FEDERAL	\$0	\$6,018,815	\$5,076,583	\$5,145,127	\$4,571,678	0.0%
STATE SPECIAL & CONTRACTS	\$0	\$93,241	\$88,532	\$0	\$0	0.0%
LOCAL GOVERNMENT	\$0	\$190,252	\$113,365	\$0	\$0	0.0%
PRIVATE GIFTS	\$0	\$568,741	\$752,573	\$579,548	\$1,315,193	0.0%
PRIVATE CLINICAL TRIALS	\$0	\$65,436	\$130,254	\$122,385	\$139,576	0.0%
PRIVATE CONTRACTS & GRANTS	\$0	\$573,710	(\$158,340)	\$334,655	\$448,859	0.0%
ENDOWMENT FUNDS	\$0	\$5,413	\$14,724	\$126,220	\$72,423	0.0%
OPP & EDUCATIONAL FUNDS	\$0	\$638,508	\$157,291	\$98,389	\$108,552	0.0%
S&S -EDUCTATIONAL ACTIVIT	\$0	\$4,850,788	\$4,319,661	\$4,832,254	\$4,889,538	0.0%
OTHER SOURCES	\$0	(\$32,593)	(\$96,501)	\$27,129	\$103,682	0.0%
Total:	\$0	\$16,096,817	\$14,254,363	\$14,714,954	\$15,348,653	0.0%

*New department in FY 2004-05

Expenditures by Fund Source Orofacial Sciences FY 2007-08



DEPARTMENT OF PREVENTIVE AND RESTORATIVE DENTAL SCIENCES

- Interim Chair Bird, William F., DDS, DrPH
- Business Officer Schultz, Susan

The Department of Preventive and Restorative Dental Sciences (PRDS) is the largest department in the School of Dentistry. The Department is comprised of six divisions including Behavioral Sciences, Professionalism and Ethics; Biomaterials and Bioengineering; General Dentistry (with Patient Care and Patient Simulation sections); Endodontics, Oral Epidemiology and Dental Public Health; and Prosthodontics. Preclinical and clinical educational programs operate within the laboratories and clinics of the dental facilities on campus and through the school's satellite facilities, including the community clinic at 100 Buchanan Street. The department offers accredited three-year residency programs in prosthodontics and endodontics and an accredited one or two year residency in Dental Public Health. In addition, the department offers postgraduate education in dental public health and epidemiology, in conjunction with the School of Public Health at UC Berkeley as part of the Dentist Scientist Award Program for dentists interested in combining specialty training with a PhD in epidemiology.

In the predoctoral dental curriculum, the division of behavioral science teaches integrated Cultural Competency courses spread throughout the four-year curriculum. This core curriculum includes clinical care and current issues in dentistry, behavioral sciences, and ethics. The Department is responsible for the pre-clinical and clinical teaching for the DDS and IDP pre-docs for thereof the schools five streams (Restorative Dental Sciences, Patient Centered Care and Scientific Methods) and has the largest responsibility for the didactic and clinical teaching (over 60%) of all the departments in the School.

Research in the department spans the spectrum from basic to translational to clinical research. Areas of emphasis include, the application of the analytical techniques of materials science to the characterization of dental hard tissues and hard tissue cellular matrix and restorative materials; characterization and testing of dental materials; the effects of restorative procedures on the dental pulp; basic research into that organ's biology; psychological aspects of temporomandibular joint disorders; preventive, diagnostic, and laser research for modifying the enamel to be more resistant to dental caries and therapeutic laser applications in dentistry; caries risk assessment; and caries prevention and management.

Research in oral epidemiology, public health, and behavioral science includes a spectrum of

Source: Department of Preventive and Restorative Dental Sciences, 10/2/2008

ongoing projects on the epidemiology of oral diseases and the delivery of dental care. Faculty in the department have ongoing studies in patient and population-based research, including clinical trials and other types of clinical research. One epidemiologic study is examining how dental diseases run in families. A series of studies in the behavioral sciences is investigating the effect of dentists' attitudes toward domestic violence and health care professionals' barriers to providing preventive care in a managed care environment. Ongoing studies also include the research into the use of smokeless tobacco products by professional baseball players, and the development of community-based tobacco prevention and cessation interventions. Faculty are working with dental insurers to develop new, nonsurgical approaches and insurance products that will emphasize preventive measures to prevent, treat, and manage dental caries that will emphasize preventive measures and nonsurgical procedures.

Source: Department of Preventive and Restorative Dental Sciences, 10/2/2008

FY 2007-08 Headcount as of 4/3/08 PREVENTIVE & RESTORATIVE DENTAL SCIENCES

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
50	21	7	90	168

Source: UCSF Human Resources

Permanently Budgeted FTEs
PREVENTIVE AND RESTORATIVE DENTAL SCIENCES

	FY 2003-04		FY 2004-05	2	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	-08
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff Academic Staff Academic	aff Ac	cademic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
DENT RES-RESTORATIVE DENT	0.1	0.10		0.10		0.10				
DENT-ORG ACT-RESTORATIVE	1.05	35		1.05		1.05		1.05		1.05
DENT-REST-GRAD PROS			0.03	1.05	0.03	1.05	0.03	1.05	0.03	1.05
S/D-PREVEN & RESTOR DENTAL SCIENCES			45.00	10.37	42.89	10.37	42.89	10.37	42.89	10.37
Total:	0.00 1.15	15	45.03 12.57	12.57	42.92 11.42	11.42		42.92 11.42		42.92 11.42

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PREVENTIVE AND RESTORATIVE DENTAL SCIENCES

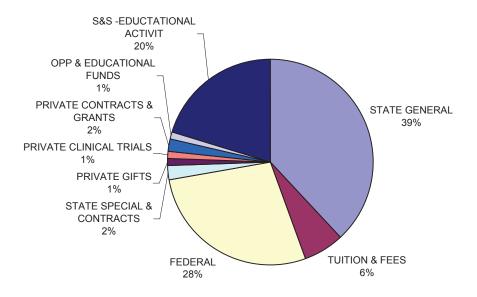
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$4,477,193	\$3,339,729	\$1,585,859	47.48%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$381,529	\$381,529	\$32,799	8.60%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$196,690	\$196,690	\$22,820	11.60%
Private Contracts & Grants	\$309,210	\$310,450	\$108,018	34.79%
Total:	\$5,364,622	\$4,228,398	\$1,749,495	41.37%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PREVENTIVE AND RESTORATIVE DENTAL SCIENCES

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$5,315,849	\$5,066,379	\$5,415,160	\$5,560,884	\$6,146,633	15.6%
TUITION & FEES	\$287,951	\$639,754	\$175,244	\$388,940	\$1,002,849	248.3%
FEDERAL	\$4,492,486	\$4,784,084	\$4,539,132	\$4,829,122	\$4,477,193	-0.3%
STATE SPECIAL & CONTRACTS	\$486,814	\$313,564	\$445,375	\$445,939	\$381,529	-21.6%
LOCAL GOVERNMENT	\$18,830	\$30,722	\$19,383	(\$13,983)	\$0	-100.0%
PRIVATE GIFTS	\$122,999	\$104,286	\$120,148	\$241,298	\$164,632	33.8%
PRIVATE CLINICAL TRIALS	\$28,630	\$110,197	\$83,148	\$145,697	\$196,690	587.0%
PRIVATE CONTRACTS & GRANTS	\$41	\$9,421	\$96,978	\$205,338	\$309,210	750774.1%
ENDOWMENT FUNDS	\$0	\$28,403	(\$253)	\$14,148	\$47,888	0.0%
OPP & EDUCATIONAL FUNDS	\$66,635	\$171,138	\$206,139	\$193,079	\$139,688	109.6%
S&S -EDUCTATIONAL ACTIVIT	\$2,030,766	\$2,210,347	\$3,695,010	\$4,064,601	\$3,287,380	61.9%
OTHER SOURCES	\$107,235	\$84,062	\$8,103	(\$25,103)	\$9,112	-91.5%
RESERVES	\$1,271	\$0	\$1,768	\$0	\$0	-100.0%
Total:	\$12,959,508	\$13,552,357	\$14,805,336	\$16,049,961	\$16,162,804	24.7%

Expenditures by Fund Source Preventive and Restorative Dental Sciences FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PREVENTIVE AND RESTORATIVE DENTAL SCIENCES (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	8,658	6,147	2,376	135	6,875	1,783	(0)
Total	8,658	6,147	2,376	135	6,875	1,783	(0)

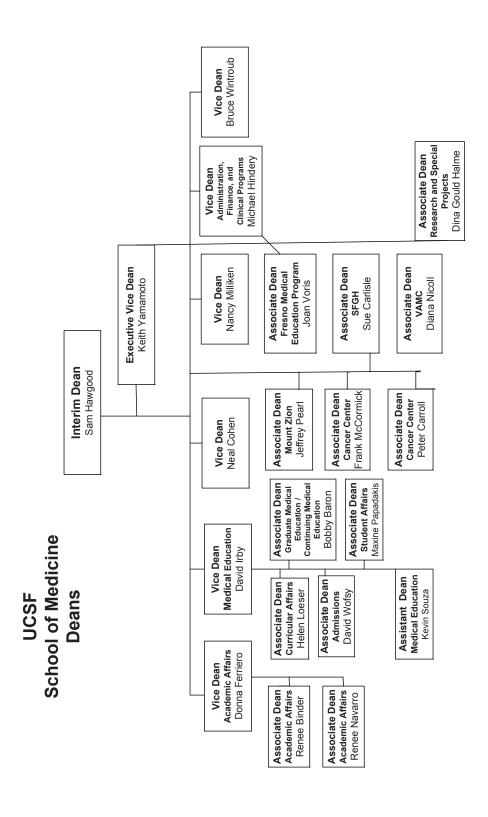
SCHOOL OF MEDICINE

Chapter Contents

Organizational Chart	486
Overview	487
Basic Science Departments	502
Anatomy	503
Anthropology, History and Social Medicine	508
Biochemistry and Biophysics	516
Cellular and Molecular Pharmacology	527
Epidemiology and Biostatistics	533
Microbiology and Immunology	539
Physiology	544
Clinical Departments	550
Anesthesia and Perioperative Care	551
Dermatology	557
Emergency Medicine	563
Family and Community Medicine	567
Laboratory Medicine	574
Medicine	578
Neurological Surgery	596
Neurology	602
Obstetrics, Gynecology and Reproductive Sciences	608

Ophthalmology	616
Orthopaedic Surgery	624
Otolaryngology	630
Pathology	639
Pediatrics	646
Physical Therapy and Rehabilitation Science	654
Psychiatry	659
Radiation Oncology	667
Radiology	675
Surgery	681
Urology	688
Interdisciplinary Centers and Programs	695
AIDS Research Institute	696
Cancer Center	700
Center for Health and Community	707
Center for Tobacco Control Research and Education	709
Diabetes Center	711
Institute for Regenerative Medicine	717
Osher Center for Integrative Medicine	718
Wheeler Center for the Neurobiology of Addiction	720
Organized Research Units	722
Cancer Research Institute	723
Cardiovascular Research Institute	727
Center for Reproductive Sciences	732

Hooper Foundation	733
Institute for Global Health	737
Institute for Health Policy Studies	742
Institute for Neurodegenerative Diseases	748



SCHOOL OF MEDICINE

Leadership

Interim Dean

Samuel Hawgood, MB, BS

Samuel Hawgood, chair of the UCSF Department of Pediatrics, currently serves as interim dean at the UCSF School of Medicine. Dr. Hawgood is physician in chief of UCSF Children's Hospital and a senior staff member of the Cardiovascular Research Institute.

Dr. Hawgood graduated from the University of Queensland in Australia with first class honors. He completed his pediatric training at the Royal Children's Hospital in Brisbane, Australia, and his neonatal fellowship at the Queen Victoria Hospital in Melbourne, Australia, and at UCSF.

- * Basic Science Departments
 - Anatomy
 - Anthropology, History and Social Medicine
 - Biochemistry & Biophysics
 - Cellular & Molecular Pharmacology
 - Epidemiology and Biostatistics
 - Microbiology and Immunology
 - Physiology
- * Clinical Departments
 - Anesthesia and Perioperative Care
 - Dermatology
 - Emergency Medicine
 - Family and Community Medicine
 - Laboratory Medicine
 - Medicine
 - Neurological Surgery
 - Neurology
 - Obstetrics, Gynecology and Reproductive Sciences
 - Ophthalmology
 - Orthopaedic Surgery
 - Otolaryngology
 - Pathology
 - Pediatrics
 - Physical Therapy and Rehabilitation Science
 - Psychiatry

University of California, San Francisco Institutional Profile - FY 2007-08

School/Department Profiles - School of Medicine

- Radiation Oncology
- Radiology
- Surgery
- Urology
- * Interdisciplinary Centers and Programs
 - AIDS Research Institute
 - Cancer Center
 - Center for Health and Community
 - Center for Tobacco Control Research and Education
 - Diabetes Center
 - Institute for Regenerative Medicine
 - Osher Center for Integrative Medicine
 - Wheeler Center for the Neurobiology of Addiction
- * Organized Research Units
 - Cancer Research Institute
 - Cardiovascular Research Institute
 - Center for Reproductive Sciences
 - Hooper Foundation
 - Institute for Global Health
 - Institute for Health Policy Studies
 - Institute for Neurodegenerative Diseases

About the School

Consistently ranked among the nation's top medical schools, the UCSF School of Medicine earns its greatest distinction from its outstanding faculty - including at present two of UCSF's three Nobel laureates, 60 Institute of Medicine members, 49 American Academy of Arts and Sciences members, 31 National Academy of Sciences members, and 16 Howard Hughes Medical Institute investigators.

The school is comprised of 26 academic departments, 9 organized research units, and 8 interdisciplinary research centers at seven major sites throughout San Francisco and in Fresno.

The UCSF School of Medicine is one of five medical schools in the University of California system, but it is the only one that — along with schools of dentistry, nursing and pharmacy — occupies a campus dedicated exclusively to the science and teaching of health care.

U.S News & World Report ranks the school in the top 10 both for its research training and its primary care training – one of only three universities in the country to do so, and the only one in

California. UCSF ranks fifth in the quality of its research training and sixth in its primary care training.

The medical school also ranks among the top 10 in all of its clinical specialties and its science specialty programs.

Mission

The UCSF School of Medicine strives to advance human health through a fourfold mission of education, research, patient care and public service.

History

Founded in 1864 as Toland Medical College, the school became part of the University of California in 1873. In 1898, the school moved to its present Parnassus Heights campus, on land donated by San Francisco mayor Adolph Sutro. The first UC hospital opened here in 1907, growing into Moffitt-Long Hospitals and Children's Hospital. These facilities, together with Mount Zion Hospital, now comprise the UCSF Medical Center. UCSF faculty have also treated patients and trained students at San Francisco General Hospital since the school's founding 143 years ago.

Facts & Figures 2008

Highlights

- Founded as Toland Medical College in 1864
- Affiliated with University of California in 1873
- Occupying seven major sites in San Francisco and Fresno with:
 - 26 academic departments
 - 9 organized research units
 - 8 interdisciplinary research centers
- Ranked by US News & World Report* fifth overall in quality of research training and sixth nationally in quality of primary care training
- Consistently ranked among top US medical schools by NIH dollars awarded
- Ranked first for active patents in UC system
- Ranks among the top 10 in seven of eight medical school specialty programs, including first in AIDS medicine, second in women's health, and third in internal medicine*.

*Source: US News & World Report Best Graduate Schools 2009

Recent Accomplishments & Innovations

2008: The pioneering Pathways to Discovery program offers students in-depth training for careers of inquiry, discovery and innovation in five crucial areas.

2007: The Program in Medical Education for the Urban Underserved (PRIME-US) expands medical school enrollment to educate and inspire new physicians to address health disparities.

2006: UCSF Institute for Regeneration Medicine launched, comprising the existing Program in Developmental and Stem Cell Biology and the Program in Craniofacial and Mesenchymal Biology.

2004: The Institute for Human Genetics established.

2003: Genentech Hall opens the 43-acre Mission Bay campus, one of the most advanced health sciences centers in the world, now with three research buildings and a 160,000 sq. ft. community center.

2002: National Center of Excellence in Women's Health opens a dedicated 8-story Women's Health Center.

2001: New medical school curriculum and the Academy of Medical Educators are instituted. Both are now national models for medical education and for faculty development.

1999: Cancer Center designated by the National Cancer Institute as Comprehensive Cancer Center, the first in Northern California.

1997: Nobel Prize awarded for the discovery of prions.

Faculty & Staff*	
Faculty*	
• Full Time	1,839
• Part Time	80
• Volunteer	3,118
Staff*	
 Non-Faculty Academics 	704
 Staff employees 	4,914
Scientific Society Memberships*	
 American Academy of Arts & Sciences 	50
 Howard Hughes Medical Investigators 	16
 Institute of Medicine 	60
 National Academy of Sciences 	32
Research Indicators*	
 NIH Dollars (in millions) 	\$396
 NIH Grants 	828
• Active Patents, U.S.	755
• Active Patents, foreign	1,008
Total Operating Budget (in millions)*	\$1,372
 Tuition and Fees 	13.7 - 1%
 State Appropriations 	96.0 - 7%
 Extramural Grants and Contracts 	535.1 - 39%
Practice Plan	370.5 - 27%
 Gifts & Endowments 	96.0 - 7%
 Hospital Agreements 	82.3 - 6%
 SFGH Affiliation Contract 	82.3 - 6%
 Sales and Services 	54.9 - 4%
• Other	41.2 - 3.%

Student Composition*

School of Medicine Admissions*	
 Applications Received 	6,233
 Interviews Granted 	529
• Students Accepted	251
2007 Entering M.D. Students*	147
 Total M.D. Students 	594
 Ph.D./M.S. Students 	680
 Mean Undergraduate GPA 	3.73
 Mean MCAT Score (Biology) 	11.4
 Underrepresented Minorities 	35%
• Women	59%
 California Residents 	80%
Tuition & Fees*	
 California Residents 	\$23,438
 Out-Of-State Residents 	\$35,683
GME & Postdocs*	
 Residents 	754
 Clinical Fellows 	442
 Postdoctoral Scholars 	1,100
CME Students*	
 Live Course Students 	14,357
 Grand Rounds Students 	3,572
 Home Study Students 	9,255
Facilities (at 9 sites)*	
 Educational Space 	58,855 ASF.
 Research Space 	937,800 ASF

Affiliated Hospitals & Training Sites*

UCSF Medical Center (Moffitt-Long, Children's & Mount Zion Hospitals)*

- Licensed beds 706
- Annual ambulatory care visits 695,640

San Francisco General Hospital*

- Licensed beds 686
- Annual ambulatory care visits 506,000

San Francisco VA Medical Center*

- Licensed beds 124
- Annual ambulatory care visits 382,619

Langley Porter Psychiatric Institute*

- Licenses beds 67
- Annual ambulatory care visits 30,000

Fresno Medical Education Program*

• Multiple sites

Alumni & Development

- Total Alumni 7,301
- Alumni Association Membership 3.290
- Alumni Gifts (cash) \$2,243,476
- Total Gifts (cash) \$170,029,732
- Endowment (Market Value) \$1,063,166,321

Financial Schedule 8E - FY 2007-08 Current Fund Expenditures by Source SCHOOL OF MEDICINE

	Total
General Funds	\$90,865,379
Tuition and Fees	\$14,864,093
Federal Government Grants	\$275,284,745
Federal Government Contracts	\$49,389,053
Special State Appropriations & Contracts	\$26,739,384
Local Government	\$104,066,014
Private Gifts, Grants and Contracts	\$209,886,963
Endowment Income	\$42,064,423
Sales & Services Educational Activities	\$111,794,516
Sales & Services of Auxiliary	\$0
Sales & Services Medical Centers	\$0
Other Sources	\$11,049,785
Reserves	(\$149,337)
Total	\$935,855,019

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

	_	Current Funds			Distribution		
	Total	Unrestricted		Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated			· <u> </u>	
SCHOOL OF MEDICINE	•						
INSTRUCTION							
Academic services	3,231	23	551	2,658	1,733	1,498	_
Area Health Education Center	38		-	38	-,,,,,,	38	_
Anatomy	4.727	3.011	810	906	3,569	1.158	_
Anesthesia	4,564	1,688	2,148	727	28,807	643	24,886
Anthropology	972	639	235	99	768	206	2
Biochemistry and biophysics	7,787	3,775	1,362	2,649	4,918	2.869	(0)
Bioengineering	327	257	(15)	85	241	86	-
Dermatology	2,798	1,328	837	633	6,255	1,892	5,349
Educational services	11,904	474	6,987	4,443	11,887	17	-
Epidemiology and international health	4,676	1,498	1,628	1,551	3,090	1,586	_
Family and community medicine	12,773	1,579	2,671	8,524	8,519	4,332	78
Genetics	1,723	518	687	519	1,235	488	(0)
Cancer Institute	1.788	_	213	1.575	1.105	682	-
Hooper Foundation	195	_	64	130	58	137	_
Cardiovascular Institute	1.686	_	901	784	1.050	636	_
Hormone Laboratory	335	_	62	273	158	176	_
Institute for health policy studies	1,357	50	1.113	193	994	363	_
Laboratory medicine	2,942	1,521	664	756	5,394	(1,611)	841
Malpractice insurance	2,246	1,573	673	_	-	2,246	_
Medical education program-Fresno	21,088	3,529	16.975	583	14,523	6,565	_
Medical ethics	63	45	17	-	55	8	_
Medicine	24,462	9,978	5,460	9,023	50,132	4,466	30,137
Metobolic Unit	443	- ,- ,- ,-	443	-,	217	226	-
Microbiology and immunology	2.973	1.639	829	505	2.092	931	50
Neurological surgery	214	767	(991)	439	8,991	998	9.776
Neurology	2,683	1,515	(1,282)	2,451	5,361	1.546	4,223
Obstetrics and gynecology	8,292	2.646	4,469	1.176	12,762	4.878	9.348
Opthalmology	2,371	1,384	551	436	4,334	1,320	3,284
Orthopaedic surgery	3,393	1,199	1,887	308	9,817	2,234	8,658
Otolaryngology	1,237	1,177	(189)	249	4,265	1,277	4,305
Pathology	(2,483)	2,954	(5,842)	405	15,321	3,929	21,732
Pediatrics	8,005	3,598	2,574	1,833	22,198	1,923	16,117
Pharmacology	2,994	1,620	508	866	1,929	1,066	-
Physical therapy	1,095	355	722	18	707	692	304
Physiology	4,387	2,508	900	979	3,211	1,176	-
Program in biological studies	(634)	_,	(634)		-,	(634)	_
Psychiatry	4,351	2,001	873	1,477	8,494	(1,487)	2.655
Radiation oncology	680	560	15	105	8.366	680	8,365
Radiology	6,722	2,507	3,383	832	24,810	8,839	26,927
Resident salary	(16,789)	3,041	(20,659)	829	(20,492)	3,703	,
Surgery	8,289	3,354	3,172	1,763	29,866	(599)	20,978
Urology	1,242	930	(890)	1,202	5,428	1,452	5,638
Inter-school services	(497)	(497)	(570)	-,232	5,120	39	537
Intra-school services	1,523	(3,466)	1,961	3,028	4,014	(2,490)	-
Total	152,171	61,278	35,844	55,049	296,181	60,181	204,191

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

	Total	Current Funds			Distribution		
		Unrestricted		Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
	Total	General	Designated	Restricted	wages	Experienteres	Transicis
SCHOOL OF MEDICINE							
RESEARCH							
Dean's office	15,522	37	553	14,932	5,345	10,178	0
Anatomy	9,267	49	10	9,208	4,819	4,444	(3)
Anaesthesia	9,272	6	341	8,926	4,703	4,569	-
Anthropology	168	61	1	106	63	105	-
Biochemistry and biophysics	14,944	45	379	14,521	7,566	7,527	148
Cancer institute	16,483	567	745	15,171	9,373	7,110	(0)
Cardiovascular institute	21,002	493	365	20,145	11,894	9,108	
Dermatology	4,971	303	5	4,663	3,422	1,549	_
Epidemiology and international health	17,921	_	(141)	18,062	9,622	8,299	_
Family and community medicine	2,660	1	29	2,630	1,381	1,279	(0)
General clinical research campus	153	51	2	101	130	24	-
General clinical research centerSFGH	(57)	-	(0)	(57)	(16)	(41)	_
Genetics	4,221	3	223	3,995	2,340	1,882	_
Ins Neurodegenerative Disease	10,545	10	(588)	11,123	4,823	7,010	1,288
Institute for health policy studies	3.675	282	(18)	3,411	1.844	1.831	1,200
Hooper foundation	3,108	629	172	2,307	1,035	2,072	(1)
Hormone laboratory	40,260	676	1,350	38,234	11,085	29,287	112
Laboratory medicine	6,718	2	35	6,682	3,187	3,531	112
Medical education	911	_	-	911	509	402	-
History of Health Science	911	-	-	911	309	402	
Medicine	127,389	1.015	562	125,012	70,306	57,106	23
	,	1,815					
Metabolic unit	3,481	179	44	3,258	1,561	1,920	-
Microbiology and immunology	11,203	68	73	11,062	5,204	6,093	94
Neurological surgery	18,207	389	(529)	18,346	9,606	8,596	(5)
Neurology	48,110	16,153	247	31,710	15,504	32,602	(3)
Obstetrics and gynecology	45,747	135	1,315	44,297	16,082	29,660	(5)
Ophthalmology	6,611	19	85	6,507	3,539	3,072	-
Orthopaedic surgery	3,618	-	782	2,835	1,809	1,809	-
Otolaryngology	2,613	-	178	2,434	1,336	1,276	-
Pathology	9,291	8	70	9,212	4,610	4,680	(1)
Pediatrics	17,708	18	69	17,620	9,400	8,310	2
Pharmacology	7,514	151	116	7,247	3,681	3,833	-
Physical Therepy	315	-	128	186	89	225	-
Physiology	8,444	50	159	8,236	5,089	3,355	0
Psychiatry	1,907	-	33	1,874	1,042	865	-
Radiation oncology	1,503	-	40	1,463	945	558	-
Radiobiology laboratory	0	-	-	0	-	0	-
Radiology	19,351	963	404	17,984	11,927	7,444	21
Surgery	20,041	58	221	19,761	10,785	9,256	-
Urology	5,662	0	324	5,338	3,066	2,596	-
Total	540,457	23,219	7,785	509,453	258,705	283,422	1,671

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
SCHOOL OF MEDICINE							
PUBLIC SERVICE							
AIDS clinical care	6,310	-	1	6,309	2,709	3,601	-
Area health education center	2,116	445	0	1,671	430	1,686	-
Family medicine training	-	-	-	-	-	-	-
Family planning	552	-	317	235	306	246	-
Podiatric Medicine	15	-	-	15	12	3	-
Institute for health policy studies	2,271	-	15	2,256	1,627	644	-
Other	28,381	-	915	27,466	19,948	8,432	-
Total	39,645	445	1,248	37,952	25,032	14,613	-
ACADEMIC SUPPORT							
Dean's office	15,866	4,524	10,388	955	10,746	5,904	784
Audio Clinic	-	_	-	_	-	-	-
Cytogenetics laboratory	-	_	-	-	-	-	-
Dialysis center	192	-	192	_	103	88	-
Endorcrinolgy lab OBGYN	3	-	3	_	-	3	-
Endocrinology lab PEDIATRICS	132	_	132	-	69	63	-
Histocompatibility laboratory	7,479	-	7,479	-	2,336	5,142	-
Kaposi sarcoma clinic	2,785	_	36	2,749	2,011	866	93
Mental health service for deaf	141	-	141	-	51	90	-
Occupational health center	2,587	1,103	42	1,442	2,116	475	5
Organ procurement	484	-	484	-	307	177	-
Orthopaedic appliance facilities	3,555	-	3,555	-	1,164	2,390	-
Professional service operations	48,093	4	43,271	4,818	29,423	28,534	9,864
Radiology computer services	0	-	0	-	-	0	-
Radiology body scanner	-	-	-	-	-	-	-
SFGH-Operation	50,630	7	8,035	42,588	36,995	14,589	954
SFGH-Professional Services	51,487	40	21,739	29,708	37,663	13,836	12
Other	20,149	246	12,740	7,163	14,984	16,465	11,301
Total	203,582	5,924	108,236	89,423	137,970	88,623	23,011
Total School of Medicine	935,855	90,865	153,113	691,877	717,888	446,840	228,873

Source: UCSF Controller's Office

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	Source: UCSF Office of Sp
EXTRAMURAL AWARDS BY TYPE	Date: 11/5/2008
07/01/2007 - 06/30/2008 (All Awards)	
SCHOOL OF MEDICINE	

SCHOOL OF MEDICINE					
FEDERAL SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
NIH Grants	368,479,235.00	279,435,154.00	89,044,081.00	782	1,049
Other DHHS Grants	34,040,840.00	30,883,265.00	3,157,575.00	44	70
NSF grants	1,011,879.00	697,847.00	314,032.00	ις	7
Other Federal Grants	7,694,073.00	5,624,594.00	2,069,479.00	24	30
NIH Contracts	41,860,266.00	29,241,211.00	12,619,055.00	17	35
Other DHHS Contracts	3,342,161.00	2,494,826.00	847,335.00	10	18
Other Federal Contracts	4,936,950.00	4,615,454.00	321,496.00	48	53
Subcontracts (excluding SBIR/STTR)	38,129,243.00	27,686,123.00	10,443,120.00	301	332
Subcontracts(SBIR/STTR)	545,602.00	390,624.00	154,978.00	7	80
Fellowships(All Federal Sources)	2,953,779.00	2,953,779.00	00:00	28	99
Subtotal, Federal Sources	502,994,028.00	384,022,877.00	118,971,151.00	1,296	1,668
OTHER PUBLIC SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
City/County of San Francisco	14,861,952.00	13,755,770.00	1,106,182.00	24	25
Other Bay Area Public Agencies	1,071,464.00	971,331.00	100,133.00	4	9
California Dept Health Services	20,564,841.00	18,589,772.00	1,975,069.00	36	51
Other California Public Agencies	19,627,142.00	16,459,267.00	3,167,875.00	29	20
Other Public Agencies	91,923.00	90,423.00	1,500.00	က	4
UC Programs(except IUCRP)	2,431,900.00	2,431,900.00	0.00	32	37
UC Discovery portion of IUCRP	2,219,233.00	2,219,233.00	0.00	15	15
Subcontracts(all above prime sources)	1,098,412.00	982,796.00	115,616.00	41	15
Fellowships(all above sources)	1,172,620.00	1,172,620.00	0.00	27	30
Subtotal, Other Public Sources	63,139,487.00	56,673,112.00	6,466,375.00	184	233
Subtotal, Public Sources	566,133,515.00	440,695,989.00	125,437,526.00	1,480	1,901

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 7:00 PM on 11/4/2008.

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO EXTRAMURAL AWARDS BY TYPE 07/01/2007 - 06/30/2008 (All Awards) SCHOOL OF MEDICINE		Ø	Source: UCSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	CSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	Research
PRIVATE NON-PROFIT SOURCES Total I	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
Grants 90,05i	90,050,941.00	84,722,927.00	5,328,014.00	478	527
Contracts 5,21	5,211,027.00	4,602,949.00	608,078.00	34	46
Subcontracts 3,891	3,898,548.00	3,615,405.00	283,143.00	46	53
Fellowships 8,09	8,091,544.00	8,091,544.00	0.00	179	203
Subtotal, Private, Non-Profit Sources		101,032,825.00	6,219,235.00	737	829
PRIVATE FOR-PROFIT SOURCES Total I	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
Grants 2,42	2,424,782.00	2,146,257.00	278,525.00	13	13
Contracts 96,38:	96,382,050.33	79,752,618.54	16,629,431.79	366	404
Subcontracts 85:	853,024.00	698,493.00	154,531.00	7	12
Fellowships 1,14	1,140,862.00	1,140,862.00	0.00	21	22
Subtotal, Private, For-Profit Sources 100,800,718.33		83,738,230.54	17,062,487.79	411	451
Subtotal, Private Sources 208,052,778.33		184,771,055.54	23,281,722.79	1,148	1,280
Miscellaneous Agreement Types Total I	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
Advance Awards	0.00	0.00	0.00	115	115
Extensions	0.00	0.00	0.00	406	423
MTAs(Incoming), URCs	0.00	0.00	0.00	909	614
OTHER agreements 9:	92,700.00	60,000.00	32,700.00	21	24
Subtotal, Misc Agreement Types	92,700.00	60,000.00	32,700.00	1,147	1,176
CUMULATIVE TOTAL 774,278,993.33		625,527,044.54	148,751,948.79	3,775	4,357

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 7:00 PM on 1114/2008.

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 SCHOOL OF MEDICINE

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$339,486,860	\$251,306,223	\$97,057,621	38.62%
CIRM	\$2,907,940	\$2,417,188	\$1,138,892	47.12%
Other State Contracts	\$21,953,311	\$20,784,307	\$2,925,134	14.07%
Local Government	\$104,159,101	\$102,687,524	\$1,757,603	1.71%
Private Clinical Trials	\$14,444,296	\$11,720,062	\$3,791,349	32.35%
Private Contracts & Grants	\$129,107,156	\$106,881,447	\$20,303,058	19.00%
Total:	\$482,951,508	\$388,915,304	\$106,670,599	27.43%

FY 2007-08 Headcount as of 4/3/08 SCHOOL OF MEDICINE

	St	aff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
ANATOMY	46	8	54	28	136
ANESTHESIA/PERIOPERATIVE CARE	97	30	52	109	288
ASSOCIATE DEAN - SFGH	81	14		16	111
BIOCHEMISTRY & BIOPHYSICS	71	10	98	73	252
CANCER CENTER	61	5	8	4	78
CANCER RESEARCH INSTITUTE	15	1	28	14	58
CARDIOVASCULAR RESEARCH INST	83	10	45	23	161
CELLULAR & MOLECULAR PHARMACOL	30	5	42	33	110
DEAN'S OFC: SCH OF MEDICINE	98	11	1	25	135
DEAN'S OFFICE AFFILIATES	298	36	213	17	564
DERMATOLOGY	20	2	34	32	88
EPIDEMIOLOGY & BIOSTATISTICS	64	18	29	46	157
HIST OF HLTH SCI	3			13	16
HOOPER FOUNDATION	6	2	12		20
INST FOR HLTH POLICY STUDIES	37	12	8	12	69
INST FOR NEURODEGENERATIVE DIS	44	3	10	3	60
LABORATORY MEDICINE	164	29	31	32	256
MEDICINE	665	173	350	582	1,770
MICROBIOLOGY AND IMMUNOLOGY	39	5	44	26	114
NEUROLOGICAL SURGERY	74	8	58	55	195
NEUROLOGY	144	23	96	102	365
OB/GYN & REPRODUCTIVE SCIENCES	185	55	52	84	376
OPHTHALMOLOGY	39	9	33	30	111
ORTHOPAEDIC SURGERY	51	13	48	45	157
OTOLARYNGOLOGY	16	5	26	24	71
PATHOLOGY	70	5	66	60	201
PEDIATRICS	151	54	134	175	514
PHYSICAL THERAPY & REHAB SCI.	7	1		11	19
PHYSIOLOGY	30	3	68	44	145
PSYCHIATRY	227	93	2	107	429
RADIATION ONCOLOGY	20	5	26	31	82
RADIOLOGY	157	20	125	167	469
S/M EPI/BIO INST GLOBAL HEALTH	24	7	7	3	41
S/M MEDICAL EDUCATION PROGRAM	15	2			17
S/M-DIABETES CENTER	106	3	38	25	172
S/M-FCM-DEPARTMENT	68	29	12	52	161
SURGERY	180	18	119	110	427
UROLOGY	33	8	33	26	100
Total	3,519	735	2,002	2,239	8,495

Source: UCSF Human Resources

BASIC SCIENCE DEPARTMENTS

DEPARTMENT OF ANATOMY

- Chair Basbaum, Allan I., Ph.D.
- Business Officer Millett, Margaret
- Website http://anatomy.ucsf.edu

Administrative Mission Statement

To provide responsive administrative and technical services, in a collegial environment, in support of teaching and research so as to ensure quality, compliance and effectiveness.

The Department of Anatomy is comprised of 20 faculty members with primary full-time appointments, 16 jointly appointed faculty, and about 250 postdoctoral fellows and students engaged in research covering questions in cell and developmental biology and neurobiology, many of which are relevant to cancer, on both the Parnassus Heights and Mission Bay campuses. The faculty include members of the National Academy of Sciences, the Institute of Medicine, the American Academy of Arts and Sciences, and the Royal Society. The faculty is committed to graduate education and is the administrative home of the Program in Developmental Biology, the Biomedical Sciences graduate program and the Willed Body Program. The Department is actively committed to creating and maintaining a stimulating, collaborative, educational environment within UCSF.

Source: Department of Anatomy, 2007

FY 2007-08 Headcount as of 4/3/08 ANATOMY

Full Time Part Time Full Time Part Time Total 46 8 54 28 136	St	Staff	Acad	Academic	Grand
8 54 28	Full Time	-	Full Time	Part Time	Total
	46		54		136

Source: UCSF Human Resources

Permanently Budgeted FTEs ANATOMY

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
GENERAL FUNDS	23.50	23.50 19.84	23.50	23.50 18.84						
ANAT-AUTOCLAVE FACILITY 9MAN01		0.13		0.10						
ANAT-GLASS WASH/DRY FACILITY 9MAN05		0.07		0.07						
ANATOMY-FAX MACHINE RECHARGE 9MAN03										
ANATOMY-PHOTO LAB 4MAN02		0.27		0.27						
ANATOMY-WILLED BODY PRGM 6MAN01	0.52	2.65	0.55	3.28						
ANATOMY-XEROX COPIER RECHRGE 6MAN04		0.20		0.20						
ANAT-RADIOGRAPHIC FILM PROCS 5MAN02		0.10		0.10						
HSW 1320 XEROX COPIER RECHG 6MAN02										
MED SCH-ANATOMY					24.05	24.05 21.66	24.20	24.20 22.35	24.37 22.27	22.27
MED SCH-CURATOR						0.50		0.50		0.50
Total:		24.02 23.26	24.05 22.86	22.86		24.05 22.16		24.20 22.85	24.37 22.77	22.77

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 ANATOMY

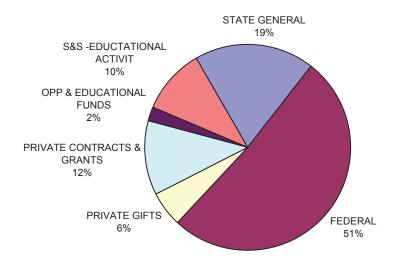
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$8,466,155	\$6,883,755	\$3,496,299	50.79%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,901,595	\$1,710,462	\$588,245	34.39%
Total:	\$10,367,750	\$8,594,218	\$4,084,544	47.53%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source ANATOMY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$2,856,208	\$2,804,208	\$2,629,395	\$2,769,297	\$3,085,138	8.0%
TUITION & FEES	(\$4,321)	(\$5,416)	(\$6,036)	\$12,572	\$6,295	-245.7%
FEDERAL	\$8,977,999	\$9,625,930	\$9,937,452	\$9,258,858	\$8,466,155	-5.7%
STATE SPECIAL & CONTRACTS	\$80,167	\$99,780	\$100,685	\$88,008	\$60,946	-24.0%
PRIVATE GIFTS	\$574,066	\$610,206	\$432,110	\$312,546	\$908,366	58.2%
PRIVATE CONTRACTS & GRANTS	\$1,447,716	\$1,033,685	\$670,321	\$1,329,466	\$1,901,595	31.4%
ENDOWMENT FUNDS	\$50,920	\$21,607	\$32,904	\$67,406	\$55,738	9.5%
OPP & EDUCATIONAL FUNDS	\$227,562	\$148,942	\$175,984	\$556,310	\$365,860	60.8%
S&S -EDUCTATIONAL ACTIVIT	\$1,174,876	\$1,540,412	\$1,574,775	\$2,296,457	\$1,705,980	45.2%
OTHER SOURCES	(\$3,538)	(\$20,782)	(\$15,149)	(\$37,320)	(\$5,820)	64.5%
Total:	\$15,381,656	\$15,858,573	\$15,532,441	\$16,653,600	\$16,550,254	7.6%

Expenditures by Fund Source Anatomy FY 2007-08



Source: UCSF Budget & Resource

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures ANATOMY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
- -		General	Designated				
Instruction	4,727	3,011	810	906	3,569	1,158	-
Research	9,267	49	10	9,208	4,819	4,444	(3)
Total	13,993	3,060	820	10,114	8,388	5,602	(3)

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

ANATOMY

	Number	Amount
Research Grants	46	\$18,149,414
Training Grants	2	\$781,194
Fellowships	1	\$47,713
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	49	\$18,978,321

^{*}Not reported

DEPARTMENT OF ANTHROPOLOGY, HISTORY AND SOCIAL MEDICINE

- Chair Porter, Dorothy E. Ph.D
- Business Officer Hayes, Daniel J.
- Website http://dahsm.medschool.ucsf.edu/

This interdisciplinary department in the School of Medicine provides non-biomedical social science and humanities perspectives on health, illness, and disease. The Department runs three teaching and research programs, two in coordination with the University of California, Berkeley:

- Medical Anthropology
 (PhD program with the Department of Anthropology's Program in Critical Studies in Medicine, Science, and the Body)
- History of Health Sciences (PhD program and MA for Professionals program)
- Social Medicine
 (Developing an area of instruction in Medical Humanities through a multi-campus UC Medical Humanities Consortium. A master's degree in "Science & Technology Studies in Medicine" is currently under development)

In addition, the Department is home to the Center for Humanities and Health Sciences designed to foster intellectual interaction between students and faculty throughout the department, the four schools within UCSF, other UC Campuses, and other institutions.

The Department draws on many resources in the Bay Area for research, teaching, and collaborative projects. Many of our faculty have joint appointments with other academic units at UCSF and UC Berkeley. Particularly strong relations are enjoyed with UC Berkeley's Department of History (and the Office for History of Science and Technology), the Department of Anthropology, and UCSF's Institute for Health and Aging, Institute for Health Policy Studies, and the Department of Social and Behavioral Sciences.

Program in Medical Anthropology

The Mission

Medical Anthropology increases our understanding of health-related beliefs and behaviors of all kinds, from the precise products of science to the silent rituals of culturally scripted healing. An-

thropological research on social and cultural processes in the arena of health have both theoretical and practical utility addressing many of the central quandaries of the human condition: from social suffering and institutional inequality to chronic pain, warfare, and everyday violence. The Medical Anthropology Program at UCSF has three primary missions:

- To conduct original critical research that builds the knowledge base of medical anthropology.
- To train new generations of medical anthropologists for careers in research and education
- To prepare medical and other health professional students for the complexities of clinical practice and for effective scientific engagement in an increasingly diverse and internationally linked world.

We aim to contribute useful and critical anthropological knowledge for the promotion of human wellness, the relief of suffering, and the treatment of disease, through research and training in collaboration with other health professionals and social and behavioral scientists. In a global era of rapid social change, anthropological knowledge can help health professionals meet the urgent practical and moral challenges of the 21st century.

What is Medical Anthropology?

Over the years, a growing need has developed for interdisciplinary training which relates socio-cultural systems and patterns of human variation to physical and mental health problems. Within the last quarter century, the rapid pace of social change - migration, urbanization and technological advances in medicine - has created new problems in the provision of health care to large sectors of the population. These changes have seemingly promised a better quality of medical care, yet, in fact, socio-economic, ethnic, age, gender, and other inequalities in health care delivery continue. It is becoming widely recognized now that ethnic and class differences, among others, affect both access to health services and relationships with the medical establishment. With this realization has come an urgent need for research, training and program planning and evaluation relating socio-cultural factors to the control of disease and the maintenance of health. As a sub-discipline of anthropology -- the study of both socio-cultural and physical aspects of humans and human groups -- medical anthropology is in an unparalleled position to make positive contributions toward the understanding and resolution of many of these problems.

There are presently about 1700 members of the Society for Medical Anthropology, a sub-unit of the American Anthropological Association, and the interest and concern in research and instruction in this field are increasing daily. Despite the rapid growth of the field, and the increasing recognition of its importance, few institutions of higher learning are equipped to offer a full range of instruction and research opportunities in medical anthropology, and fewer still are able

to provide such opportunities within both medical and community settings.

Foundations of the Joint Program

Taking cognizance of these needs and of the rich resources and facilities available on both the San Francisco and Berkeley campuses, the Regents of the University of California authorized these campuses to offer a joint PhD degree in Medical Anthropology. The primary objective of this joint degree program is to produce sophisticated and well-rounded medical anthropologists, fully equipped to handle both theoretical and applied problems in health care and community settings, as well as in academia.

Emphasis in the UCSF Program is on providing students with the concepts and skills requisite for careers in health research, teaching and public service. Through work in both institutional and community settings, students are trained to identify and analyze both the formal and informal aspects of health care systems, and to understand the relationships between the socio-cultural and biomedical dimensions of health and illness beliefs and behavior. This training is coupled with the more traditional, theoretical approaches gained in formal course work -- theoretical training which enables students to place their practical knowledge into broader cross-cultural contexts and frameworks.

The program described here provides specialized training leading to the PhD in Medical Anthropology. It emphasizes the integration of interdisciplinary academic programs, supervised trainee field work in medical settings, community-based research, and workshops in field research methods and data analysis.

Recently, the field of anthropology has clearly distinguished between its socio-cultural and physical sub-fields. With the application of anthropology to health problems, however, the sub-disciplines, along with the medical sciences, find common intellectual ground in both theory and practice. This joint approach is reflected in the present Program, which presents a broadly-based training for our students.

Program in History of Health Sciences

Mission

This graduate program trains students to examine the history of health sciences (medicine, nursing, pharmacy, public health, alternative healing, and biomedical research) from a variety of critical approaches. Doctoral students are prepared to undertake a wide variety of professional careers in academia, industry, government, and communications. For those who choose academic research and teaching in the field, this program lays the foundation for them to create and

interpret new knowledge as scholars and to share and disseminate their knowledge of the field as educators. Those who choose other career paths learn to incorporate historical perspectives into their understanding and practice of their respective fields, as do students enrolled in the master's program for professionals and medical students who take elective courses in the program. The physical and intellectual location of this history program within one of the nation's leading medical schools affords the opportunity to advance the historical analysis and understanding of biomedical sciences, clinical practices, and health policies.

Degree Programs

History of Health Sciences offers two degree programs. The doctorate program leads to the PhD. Students may also pursue a doctorate in History of Health Sciences jointly with a degree in Medicine, leading to a combined MD-PhD. Candidates for the joint degree must apply separately to the Program in History of Health Sciences and to the School of Medicine . The terminal master's degree leading to the MA is offered to individuals who already hold an advanced degree in medicine, science, or other professional field (e.g., public health, nursing, pharmacy) or who are enrolled in a program leading to such a degree.

History of the History Program

The History of Health Sciences has been a part of the UCSF campus since 1930 when the Regents of the University of California established a Department of History and Bibliography. Following Johns Hopkins University's initiative, it was the second one to be established in the United States. In 1965, the Special Collections function was transferred to the library, and the department was renamed the History of Health Sciences, which was intended to represent the complete spectrum of activities within the four disciplines of the UCSF health sciences campus. Concurrent with this change, the Graduate Division approved a program of study that led to the MA and PhD degrees in the field. UCSF's Department of History of Health Sciences is the only campus in the UC system and on the west coast to offer advanced degrees in the subject. The program suspended its teaching operations in the late 1990s after the tragic premature death of one of its faculty members. The program was successfully re-opened in 2005, with master's, doctoral, and postdoctoral students contributing to the vitality of the humanities at UCSF.

Program in Social Medicine

Social Medicine is a field of interdisciplinary academic investigation that examines the many ways that health, disease, and the practices of medicine, the bio-medical sciences and implementation of medical technologies are affected by societal forces.

Medicine is itself social by virtue of its intimate engagement with diverse populations, where the doctor/patient relationship is mediated through social conventions determined by cultural beliefs, community advocacy, family relations and individual attitudes. But the way the medical profes-

sion evolves and its judgments and practices understood are also implicated in diverse social dynamics, from how the media translate expert knowledge for wider public consumption, to the political and commercial interests that regulate and foster bio-medical research and the development of medical technology. Scholarship in Social Medicine provides insight to the creation and legacy of these social relations.

The field of Social Medicine has thrived on interdisciplinarity and collaborative investigation which integrates the conceptual frameworks and methodologies of the humanities, the social sciences, clinical and population research. It provides philosophical and critical reflexivity about bio-medical and public health enterprises, the knowledge and practices on which they are based, and the impact of those phenomena on social, political, economic and historical transformation. Its practitioners are humanists, social scientists, clinical and population scientists from specialties such as medical anthropology, history, sociology, cultural studies, psychiatry, health economics, clinical research and the public health sciences.

At UCSF, the division of Social Medicine in the Department of Anthropology, History & Social Medicine aims to facilitate the "meeting of minds" among humanists, social scientists, clinicians and other health care professionals. Working together, projects are designed to advance our understanding of bio-medical science, clinical practice, biotechnology, and bio-entrepreneurship as products of culture which in turn impact upon the management of health in post-modern societies and in global social and economic systems.

We see twenty-first-century Social Medicine as engaged with new frontiers in medicine, public health, the life sciences, biotechnology and bio-entrepreneurship where "the social" arena is located in spaces around the clinic, laboratory, patent office and executive boardrooms. Research here investigates the social relations of bio-medicine and public health that motivate the movement of knowledge and practice from "bench to bedside to the community," and its practitioners from "scientist to CEO."

One area of active investigation in Social Medicine at UCSF is the impact of medical technologies on clinical skills and decision making, and its effect on patient management —particularly revolving around "internet interventions" and the "digital revolution" in disease diagnosis. We explore these areas in light of newly emerging collaborations between university and corporate research and development, and the promotion of the culture of bio-entrepreneurship.

A master's degree in "Science & Technology Studies in Medicine" is currently under development within the division of Social Medicine to provide students with the intellectual and analytic resources to recognize and respond to key social, cultural, and ethical issues in contemporary medicine, biotechnology and bio-entrepreneurship.

FY 2007-08 Headcount as of 4/3/08 ANTHROPOLOGY, HISTORY & SOCIAL MEDICINE

Full Time Part Time Full Time Part Time Total	St	Staff	Acac	Academic	Grand
13	Full Time	-	ᆮ		Total
13					
	3			13	16

Source: UCSF Human Resources

Permanently Budgeted FTEs ANTHROPOLOGY, HISTORY AND SOCIAL MEDICINE

	FY 2003-04	90	FY 2004-05	35	FY 2005-06	90	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff
MS-DAHSM-HISTORY OF MED	2.00	2.00 2.33	2.00 1.83	1.83	2.00 2.83	2.83	2.00	2.00 1.83	2.00	2.00 1.83
MS-DAHSM-MED ANTHROPOLOGY	2.00	2.00 2.05	2.00	1.85	2.00	1.85	2.00	1.85	2.00	2.00 1.85
S/M SOCIAL MEDICINE							1.00		1.00	
Total:	4.00 4.38	4.38	4.00 3.68	3.68		4.00 4.68	5.00	5.00 3.68	5.00 3.68	3.68

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 ANTHROPOLOGY, HISTORY AND SOCIAL MEDICINE

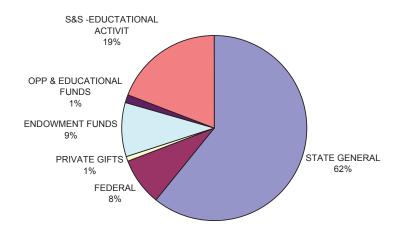
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)		OH % MTDC
Federal	\$94,443	\$74,887	\$32,218	43.02%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$0	\$0	\$2,593	0.00%
Total:	\$94,443	\$74,887	\$34,811	46.48%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source ANTHROPOLOGY, HISTORY AND SOCIAL MEDICINE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$574,108	\$605,208	\$657,325	\$773,714	\$696,918	21.4%
FEDERAL	\$627,672	\$617,181	\$589,029	\$378,760	\$94,443	-85.0%
STATE SPECIAL & CONTRACTS	\$0	\$8,377	\$4,464	\$0	\$0	0.0%
PRIVATE GIFTS	\$82,830	\$97,619	\$57,863	\$30,872	\$12,150	-85.3%
PRIVATE CONTRACTS & GRANTS	\$91,022	\$25,627	\$6,443	\$17,368	\$0	-100.0%
ENDOWMENT FUNDS	\$58,033	\$81,602	\$69,982	\$121,880	\$107,821	85.8%
OPP & EDUCATIONAL FUNDS	\$66,710	\$24,440	\$26,491	\$23,001	\$16,226	-75.7%
S&S -EDUCTATIONAL ACTIVIT	\$135,697	\$302,562	\$299,558	\$243,137	\$218,342	60.9%
OTHER SOURCES	\$0	\$0	\$0	(\$1,773)	\$940	0.0%
Total:	\$1,636,072	\$1,762,615	\$1,711,156	\$1,586,959	\$1,146,840	-29.9%

Expenditures by Fund Type Anthropology, History and Social Medicine FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures ANTHROPOLOGY, HISTORY AND SOCIAL MEDICINE (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
-		General	Designated				
Instruction	972	639	235	99	768	206	2
Research	168	61	11	106	63	105	
Total	1,140	700	236	205	831	311	2

DEPARTMENT OF BIOCHEMISTRY AND BIOPHYSICS

The Biochemistry and Biophysics department is comprised of 28 faculty members and about 200 students and postdoctoral fellows investigating a range of biological problems encompassing biochemistry, genetics, structural biology, and cell biology. The faculty is committed to graduate education and is actively engaged in shaping the collaborative environment that makes UCSF a special place.

Departmental Executive Committee

- Chair Walter, Peter, Ph.D.
- · Vice-Chairs Davis, Grae, PhD, DeRisi, Joseph, PhD
- Department Director Kniery, Penny
- Website http://biochemistry.ucsf.edu/

Graduate Programs

In order to provide students with the greatest flexibility in choosing a course of study, the biochemistry and molecular biology, cell biology, genetics and developmental biology programs have a joint admissions process called the Tetrad. Students interested in any of these programs apply to all four programs together, are accepted into all four initially, then commit to a particular program at the end of their first year of study. There are currently 101 faculty affiliated with the four Tetrad programs.

The Tetrad programs are part of the Program in Biological Sciences (PIBS). PIBS is a confederation of faculty and students whose purpose is to provide opportunities for graduate training, foster collegiality among different disciplines, and facilitate development of new research activities that span traditional department boundaries.

The Biochemistry and Molecular Biology Program

The Biochemistry and Molecular Biology Program (BMB) is a member of the Tetrad consortium within PIBS. The BMB faculty members are drawn from three of the four Schools of UCSF, and from eight Departments (Anatomy, Biochemistry and Biophysics, Cellular and Molecular Pharmacology, Microbiology and Immunology, Pathology, Pharmaceutical Chemistry, Physiology, and Stomatology). Research within BMB employs biochemical and molecular approaches to approach a broad range of problems, from neoplasia to protein targeting, from enzyme catalysis to cell motility, from yeast genetics and genomics to x-ray crystallography, from transcriptional regulation to neurodevelopment. As with other Tetrad and PIBS programs, BMB researchers

are highly interactive and collaborative. Indeed, a guiding principle of the program is to instill understanding and appreciation of the interactiveness and interrelatedness of diverse research approaches and experimental systems.

The Cell Biology Program

Collaborations among the cell biology laboratories and with other scientists at UCSF help create a fertile environment for pursuing answers to questions of cellular structure, function and development. The faculty of the Cell Biology Program is drawn from the Departments of Anatomy, Biochemistry and Biophysics, Cellular and Molecular Pharmacology, Medicine, Microbiology, Pathology, and Physiology. The participant research groups share an interest in understanding the structure, function and differentiation of cells and tissues. They employ a wide variety of approaches, instruments and techniques that characterize modern biology: cell culture, chemistry, electrophysiology, genetics, molecular biology, and ultrastructure.

The Developmental Biology Program

The interdepartmental and interdisciplinary Program in Developmental Biology was created in response to the need for trained investigators who can apply the techniques of modern molecular biology, genetics, cell biology, and immunology, in conjunction with the methods of classical experimental embryology, to solving the questions of how embryonic development and differentiation are achieved. Program faculty are drawn from the following departments: Anatomy; Biochemistry & Biophysics; Microbiology; Neurological Surgery; Neurology; Obstetrics, Gynecology & Reproductive Sciences; Opthalmology; Pediatrics; Pharmacology; Physiology; Psychiatry; and the Reproductive Endocrinology Center. The participating research groups share an interest in understanding the basic mechanisms of embryonic development and differentiation. Studies of organisms as diverse as nematodes, fruit flies, frogs, chickens, zebrafish and mice are conducted using the wide variety of approaches, instruments, and techniques of modern biological research.

The Genetics Program

The Genetics Program offers an interdisciplinary and interdepartmental program for the Ph.D. degree and trains graduate students to conduct research and prepare for careers in modern molecular, developmental, and medical genetics. This program combines the related interests and research efforts in genetics of both basic science and clinical faculty. The genetics group includes faculty of the Departments of Anatomy, Biochemistry and Biophysics, Cellular and Molecular Pharmacology, Medicine, Microbiology and Immunology, Pediatrics, and Psychiatry. The faculty are engaged in diverse research issues studying gene expression, differentiation

and development, chromosome structure and mechanics, structure of the human genome, human biochemical genetics, radiation genetics, and cytogenetics. They study an equally diverse group of organisms, including tumor viruses, bacteria, yeast, fruit flies, nematodes, mice, and humans.

<u>Integrative Program in Complex Biological Systems</u>

A comprehensive track within the Integrative Program in Quantitative Biology for training students in the understanding and engineering of complex biological systems from the molecular and cellular levels to the whole organism. To meet the vast challenges ahead, the Complex Biological Systems track proposes to depart significantly from a traditional curriculum. Students within this track will develop novel approaches to solve the critical sociology and language problems associated with training scientists to be simultaneously conversant in the languages of biology, mathematics, physics and engineering. Ten new faculty members have been recruited to UCSF to expand expertise in critical quantitative areas and to build an entirely new curriculum focused on the observation, modeling, manipulation and design of complex biological systems.

Core Facilities

Center for Advanced Technology

The Center for Advanced Technology is a collection of instrumentation dedicated to serving the research needs of the UCSF and QB3 communities. The primary focus is on instrumentation for high-throughput experimental biology, but the CAT is also interested in any instrumentation too large or complex to be maintained by a single laboratory. Through partnerships with other UCSF groups and core facilities, the CAT is able to provide access to additional instrumentation, such as a Biacore T100 and 1000 instrument available via the Macromolecular Structure Group (MSG). In addition, the CAT has formed partnerships with companies interested in loaning equipment. These alliances provide our researchers with cutting edge equipment. In exchange, these companies' equipment is vetted by the highly talented researchers that utilize our facilities.

Nikon Imaging Center

The Nikon Imaging Center at QB3/UCSF (NIC@QB3) is a core facility for light microscopy developed by the UCSF Cardiovascular Research Center, the School of Medicine, and QB3 in partnership with Nikon Instruments Inc. and Technical Instruments. The NIC@QB3's corporate partners include Applied Scientific Instrumentation, In Vivo Scientific, Molecular Devices, Prior Scientific, Roper Scientific, Solamere Technology Group, and Sutter Instrument. The mission of the NIC@QB3 is to:

- Stimulate innovation in biological research by providing investigators access to cutting edge microscopy resources with a particular emphasis on developing novel imaging solutions to systems biology challenges.
- Promote cross-discipline collaborations by providing an exciting intellectual commons centered on light microscopy.
- Provide courses, individual instruction, and consulting on advanced light microscopy techniques.
- Promote collaborations with biopharmaceutical companies.
- Provide training for performing genomic and proteomic experiments.
- Provide training in the bioinformatics required for interpretation of genomic and proteomic experiments.
- Manage the use and sharing of the related equipment.

Community Service

The Science & Health Education Partnership (SEP)

SEP is a collaboration between the University of California, San Francisco and the San Francisco Unified School District. Scientists and educators from both organizations work in partnership to support quality science education for K-12 students. Founded in 1987, SEP is nationally recognized as a model partnership between a university and a local public school system. Since 1989 SEP has been awarded nearly \$9 million in competitive federal, private, and state funds. Current funding is provided by the Howard Hughes Medical Institute, an NIH Science Education Partnership Award (SEPA) from the National Center for Research Resources, the Bechtel Foundation, the UCSF Chancellor's Office, the UCSF School of Medicine, and the California Science Project.

SEP's mission is to promote partnership between scientists and educators in support of high quality science education for K-12 students. To this end, SEP develops and implements programs with the following goals: 1) to support teaching and learning among teachers, students, and scientists; 2) to promote an understanding of science as a creative discipline, a process, and a body of integrated concepts; 3) to contribute to a deeper understanding of partnership; and 4) to provide models and strategies for other institutions interested in fostering partnerships between scientific and education communities. SEP functions as a teaching and learning community in which all participants are encouraged to simultaneously take on the roles of student, teacher, and scientist. SEP continues to evolve by building and applying a foundation of knowledge about successful approaches to professional development and scientist-teacher partnership. Each year, SEP coordinates the efforts of over 300 UCSF participants who contribute approximately 10,000

hours of service with over 400 SFUSD teachers and their students, representing 80-90 percent of the District's K-12 schools.

Research Centers

The Center for Structures of Membrane Proteins

The Center for Structures of Membrane Proteins (CSMP) provides atomic structure determination for membrane proteins including both bacterial and human membrane proteins. Human membrane proteins encode the targets for ~40% of all therapeutic drugs in use today, despite the lack of understanding of the mechanisms and atomic interactions of any one of these. Many of the human protein structures sought have therapeutic importance. Therefore the structures will provide an atomic level template for drug design and discovery.

The goal of the CSMP is to express, purify and determine the structures of representative members of membrane protein classes. Where classes of membrane proteins are represented in prokaryotes, it is likely that structures for a homolog will be determined first for prokaryotic or archaeal members. Many human proteins have no good homologs in prokaryotes or archaea. These include psychopharmaceutical receptors that are targets for neuro-psychopharmaceutical drugs, the re uptake pumps that are currently targets for the new anti-depressants, the ~1500 GPCRs in the human genome that include numerous key drug targets today. Nearly 30% of all eukaryotic proteins are membrane proteins, and these include protein targets for over 40% of all drugs in use today. In most cases the particular membrane protein targets of today's drugs are not yet determined, primarily because preparation of membrane proteins in structurally homogeneous and functionally active state as well as subsequent structure determination have been extremely challenging. CSMP supports an integrated program, with interdependent subprojects, and core facilities that provide for routine processes, including protein purification, characterization, x-ray diffraction at the Advanced Light Source in Berkeley at beamlines 5.0.2, and 8.3.1, and structure determination by electron microscopy and NMR. Bioinformatics contributes to the construction of a target list of representative proteins whose structures are to be determined and leverages the experimentally determined structures by structurally and functionally characterizing many more related protein sequences.

The HIV Accessory and Regulatory Complex (HARC Center) is an interdisciplinary research center aimed at creating a comprehensive structural picture of interactions between HIV viral proteins and intracellular host molecules at early stages in the viral lifecycle. High-resolution structures of such complexes offer the potential for novel targeted drug design strategies in the treatment of AIDS.

Virus-host complexes play essential roles in HIV infection and propagation. Host T cells are initially targeted by the binding of viral proteins to cell surface receptors, and once internalized, the virus depends upon a different set of interactions with intracellular host proteins for the successful production, packaging and release of new viral particles. The HARC Center is specifically focused upon five HIV proteins that perform essential regulatory and accessory functions at this stage: Integrase, Tat, Rev, Vif and Nef. Integrase coordinates with host proteins to integrate a DNA copy of the viral genome into the host genome, while Tat and Rev recruit cellular proteins to enhance the production and nuclear export of viral mRNAs. Vif is a component of an assembly that tags host defense proteins for destruction, while Nef interacts with a variety of proteins to remodel cell architecture and alter signaling, enhancing viral replication overall. The Center aims to provide a detailed structural picture of these HIV-host interactions, which will illuminate how recognition occurs and how it might be disrupted to the detriment of the virus. In addition, by comparing structures of proteins bound to multiple partners, or in different states of assembly, we can begin to understand how allosteric changes may modulate host protein function and assembly, and how this is affected by the binding of viral proteins, again with the downstream goal of therapeutic intervention.

The Center is comprised of researchers from nine different laboratories at UCSF and Berkeley, and is one of three Research Centers launched in 2007 by the National Institute of General Medical Sciences (NIGMS) and National Institute of Allergy and Infectious Diseases (NIAID), with the goal of gaining a deeper understanding of the structural biology of HIV. Members of the HARC Center provide expertise within a comprehensive range of biochemical, molecular biological and structural methods, including mass spectroscopy, x-ray crystallography, NMR and cryo-electron microscopy. Two Technology Cores provide services to the projects and innovation of essential methods. In conjunction with its research activities, the Center makes new methodologies, tools and databases available to the research community at large, and is active in creating new collaborations with outside investigators, including those carrying out associated R21/R33 projects.

The Membrane Protein Expression Center

The Membrane Protein Expression Center (MPEC) develops and applies the latest innovative methods that yield structurally and functionally intact membrane proteins for subsequent drug development, structural, and functional characterization. Membrane proteins mediate many cellular processes, yet despite their importance, little is understood about the basic mechanisms by which they work. The MPEC focuses especially on eukaryotic membrane proteins since they provide many major drug target proteins. Our approach focuses on expression, purification and functional reconstitution of each membrane protein according to its importance for pharmacological or biological purposes. The scarcity of pure protein from natural or recombinant sources

is the primary barrier to routine biochemical use of eukaryotic membrane proteins. To overcome this limitation, we are developing novel expression methods. This is facilitated in the development phase by co-investigators Drs Robert Stroud, Peter Walter, David Julius, Robert Edwards, Daniel Minor, Ronald Kaback, James Van Etten, and Shimon Schuldiner, who are each experts in membrane protein biology. Assays carried out at the MPEC establish stability, structural monodispersity, and oligomeric homogeneity as a key part of the purification and characterization. Developing a means to produce large quantities of pure, functional eukaryotic membrane proteins will have a major impact on the future of medicine as it will advance our understanding of the basic biochemistry behind transmembrane signaling and transport mechanisms that underlie processes like neurotransmission, cardiovascular regulation, and hormonal signaling, as well as promote the development of new drugs to treat dysfunctions in these systems.

FY 2007-08 Headcount as of 4/3/08 BIOCHEMISTRY AND BIOPHYSICS

St	Staff	Acac	Academic	Grand
Full Time	Part Time Full Time	Full Time	Part Time	Total
71	10	98	73	252

Source: UCSF Human Resources

Permanently Budgeted FTEs BIOCHEMISTRY AND BIOPHYSICS

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	80 90
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff
MED SCH-GENETICS	2.00	2.00 1.38	2.00	1.00	2.00 1.00	1.00	2.00 1.00	1.00		3.00
MED SCHOOL-GENETICS		1.21		1.21						
MS BIOCHEMISTRY & BIOPHYSICS	23.50 16.03	16.03	23.50	23.50 14.19	23.50	23.50 14.11	23.50 14.09	14.09	23.50 14.04	14.04
NEUROBIO/CELL BIOLOGY		0.45		1.00		1.00		1.00		1.00
ORG ACT-BIOCHEMISTRY/BIOPHYSICS	1.11	2.29	1.11	2.19	06.0	2.22	0.80	2.18	0.92	2.51
S/M-BIOPHYSICS		0.40		0.43		0.43		0.43		0.43
Total:	26.61 21.76	21.76		26.61 20.02		26.40 18.76	26.30 18.70	18.70	24.42 20.98	20.98

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 BIOCHEMISTRY AND BIOPHYSICS

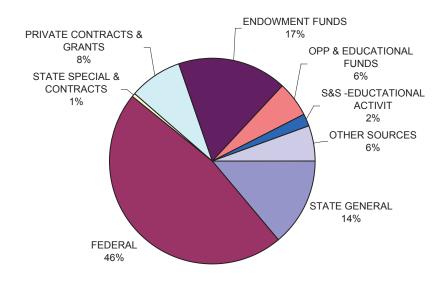
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$14,297,028	\$11,205,231	\$5,882,149	52.5%
CIRM	\$155,378	\$155,378	\$83,283	53.6%
Other State Contracts	\$99	\$99	\$8	8.0%
Local Government	\$59	\$59	\$17	29.1%
Private Clinical Trials	\$0	\$0	\$0	0.0%
Private Contracts & Grants	\$5,260,256	\$4,194,000	\$384,859	9.2%
Total:	\$19,712,820	\$15,554,768	\$6,350,316	40.8%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source BIOCHEMISTRY AND BIOPHYSICS

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$3,016,996	\$3,309,641	\$3,562,959	\$3,684,192	\$4,253,654	41.0%
FEDERAL	\$12,878,971	\$13,568,950	\$15,402,847	\$15,542,462	\$14,297,028	11.0%
STATE SPECIAL & CONTRACTS	\$83,058	\$85,293	\$297,075	\$119,418	\$198,513	139.0%
LOCAL GOVERNMENT	\$0	\$0	\$0	\$0	\$59	0.0%
PRIVATE GIFTS	\$1,607,637	\$1,610,909	\$1,690,281	\$1,969,686	\$2,519,387	56.7%
PRIVATE CONTRACTS & GRANTS	\$4,343,264	\$3,872,362	\$4,204,991	\$4,573,761	\$5,260,256	21.1%
ENDOWMENT FUNDS	\$2,075,242	\$1,800,728	\$1,618,329	\$2,953,635	\$1,748,891	-15.7%
OPP & EDUCATIONAL FUNDS	\$357,408	\$415,412	\$415,736	\$503,974	\$569,472	59.3%
S&S -EDUCTATIONAL ACTIVIT	\$1,406,005	\$1,011,780	\$1,342,711	\$1,740,171	\$1,709,993	21.6%
OTHER SOURCES	(\$74,962)	\$286,633	\$283,057	\$322,332	\$347,425	-563.5%
Total:	\$25,693,619	\$25,961,709	\$28,817,987	\$31,409,630	\$30,904,679	20.3%

Expenditures by Fund Source Biochemistry and Biophysics FY 2007-08



Source: UCSF Budget & Resource

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures BIOCHEMISTRY AND BIOPHYSICS (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
-		General	Designated				
Instruction	7,787	3,775	1,362	2,649	4,918	2,869	(0)
Research	14,944	45	379	14,521	7,566	7,527	148
Total	22,731	3,820	1,741	17,170	12,484	10,396	148

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

BIOCHEMISTRY AND BIOPHYSICS

	Number	Amount
Research Grants	37	\$20,471,677
Training Grants	1	\$712,630
Fellowships	6	\$257,799
Other Awards	0	\$0
R&D Contracts*	0	\$0
Tot	al: 44	\$21,442,106

^{*}Not reported

DEPARTMENT OF CELLULAR AND MOLECULAR PHARMACOLOGY

- Chair Vale, Ronald D, Ph.D.
- Business Officer Berg, Sharon M.
- Website http://cmp.ucsf.edu/

The Department of Cellular and Molecular Pharmacology (CMP) within the UCSF School of Medicine pursues two related academic goals: [1] to discover new knowledge through innovative research on chemical and biological phenomena; [2] to transmit knowledge to students (graduate students, postdoctoral colleagues, and students and fellows in medicine, pharmacy and dentistry) at the conceptual and empirical levels

Research in CMP spans a broad range of studies. Included are analyses of the mechanisms and biological consequences of the interactions of drugs and other small molecule ligands with receptors, channels, and cellular organelles, hormonal and sensory signal transduction, cytoskeleton-based intracellular motility, cell movement and migration, synaptic transmission and plasticity, protein design and structure prediction, protein folding, structure and function, and RNA-protein interactions. Experimental approaches include genetics, chemistry and crystallography; experimental systems stretch from yeast to human.

CMP is the administrative home to the graduate education program in Chemistry and Chemical Biology. Other graduate studies with Department faculty are carried out within two consortium programs, Biomedical Sciences (BMS) and the Program in Biological Sciences (PIBS); inquiries should be directed to those programs. Inquiries regarding postdoctoral research in CMP should be addressed to individual faculty members. For other information, search this Web Site or contact the CMP administrative staff.

Chemistry and Chemical Biology Graduate Program

The Dept. of Cellular and Molecular Pharmacology is the administrative home to the Ph.D. program in Chemistry and Chemical Biology (CCB) which provides students with a broad and rigorous training in molecular thermodynamics, bioorganic chemistry, computational chemistry and structural biology. The program is distinctive in its orientation toward the study of molecules in living systems. It is further distinguished by providing integrated training in the sciences related to chemical biology: integrating both with respect to the levels of structure (atomic, molecular, cellular) and with respect to the traditional disciplines of chemistry and biology in the setting of a health science campus. The training objectives for students of the program are met through course work, laboratory rotations, and activities of the program such as journal clubs and research presentations and through thesis research in a specific laboratory. 48 Faculty are mem-

Source: Cellular and Molecular Pharmacology 8/26/2008

bers of the program, so students have many choices for laboratories to conduct their Ph.D. thesis work.

CCB is a member of both the Program in Biological Sciences (PIBS) and the Program in Quantitative Biology (PQB), providing students with access to exceptional faculty and resources for biological research. CCB together with the Biophysics Graduate Program sponsors a joint seminar series entitled ""Linking Physics & Chemistry to Biology" which meets once a week throughout the school year. The CCB program is jointly administered by the Depts. of Cellular & Molecular Pharmacology and Pharmaceutical Chemistry.

Source: Cellular and Molecular Pharmacology website, 6/25/2008

FY 2007-08 Headcount as of 4/3/08 CELLULAR AND MOLECULAR PHARMACOLOGY

St	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
30	5	42	33	110

Source: UCSF Human Resources

Permanently Budgeted FTEs CELLULAR AND MOLECULAR PHARMACOLOGY

	FY 2003-04	40	FY 2004-	05	FY 2005	90-	FY 2004-05 FY 2005-06 FY 2006-07	-07	FY 2007-08	-08
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
MED RES-PHARMACOLOGY		3.02		3.02		3.02		3.02		3.02
MED SCH-PHARMACOLOGY	14.00	5.63	14.00 8	5.13	14.00	5.13	14.00	5.13	15.50	5.13
PHARMACOLOGY TOXICOLOGY LAB		0.15		0.09		3.10		3.10		2.44
Total:	14.00 8.80	8.80	14.00 8.24	8.24	14.00 11.25	11.25	14.00 11.25	11.25	15.50 10.59	10.59

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 CELLULAR AND MOLECULAR PHARMACOLOGY

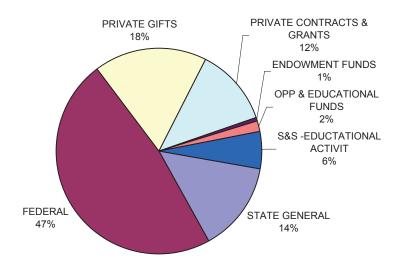
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)		OH % MTDC
Federal	\$5,985,084	\$4,971,097	\$2,444,403	49.17%
CIRM	\$0	\$0	\$0	0.00%
State Special & Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,517,180	\$867,092	\$198,567	22.90%
Total:	\$7,502,264	\$5,838,190	\$2,642,970	45.27%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source CELLULAR AND MOLECULAR PHARMACOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,434,812	\$1,392,976	\$1,545,581	\$1,629,358	\$1,770,925	23.4%
TUITION & FEES	\$0	\$0	\$0	\$0	\$15	0.0%
FEDERAL	\$5,907,581	\$4,957,898	\$5,344,980	\$5,540,845	\$5,985,084	1.3%
STATE SPECIAL & CONTRACTS	\$13,478	\$11,686	\$19,546	\$25,290	\$0	-100.0%
PRIVATE GIFTS	\$818,050	\$1,410,006	\$1,575,254	\$3,491,764	\$2,213,472	170.6%
PRIVATE CONTRACTS & GRANTS	\$1,519,654	\$1,378,599	\$1,167,734	\$1,459,898	\$1,517,180	-0.2%
ENDOWMENT FUNDS	\$79,291	\$37,126	\$20,962	\$256,700	\$89,630	13.0%
OPP & EDUCATIONAL FUNDS	\$166,863	\$178,355	\$152,499	\$192,095	\$197,918	18.6%
S&S -EDUCTATIONAL ACTIVIT	\$479,163	\$861,524	\$764,219	\$488,063	\$733,380	53.1%
OTHER SOURCES	(\$7,102)	\$2,837	(\$80,553)	\$214,418	\$5,737	-180.8%
Total:	\$10,411,789	\$10,231,008	\$10,510,223	\$13,298,431	\$12,513,340	20.2%

Expenditures by Fund Source Cellular and Molecular Pharmacology FY 2007-08



Source: Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures CELLULAR AND MOLECULAR PHARMACOLOGY (Dollars in Thousands)

		Current Funds		Distribution			
	Total	Unre General	stricted Designated	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
Instruction	2,994	1,620	508	866	1,929	1,066	-
Research	7,514	151	116	7,247	3,681	3,833	-
Total	10,509	1,771	624	8,114	5,610	4,899	_

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

CELLULAR AND MOLECULAR PHARMACOLOGY

	Number	Amount
Research Grants	65	\$30,896,484
Training Grants	4	\$1,370,397
Fellowships	11	\$481,135
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	80	\$32,748,016

^{*}Not reported

DEPARTMENT OF EPIDEMIOLOGY AND BIOSTATISTICS

- Joint Chair Hiatt, Robert, MD, PhD
- Joint Chair Risch, Neil, PhD.
- Business Officer Mead, Sally A.
- Website http://www.epibiostat.ucsf.edu/

Mission Statement

- The educational mission of the Department is to train students, fellows and faculty in methods for studying disease etiology and prevention in general populations, for evaluating diagnostic tests and treatment efficacy in clinical settings, and for using evidence-based approaches in clinical practice.
- The scientific mission is to do outstanding clinical and population-based research in these areas, often in collaboration with other departments and institutions, and to guide use of the findings in clinical practice and public health policies.

Organization

The Department has five Divisions that oversee teaching and other academic activities, and manage faculty appointments and promotions.

- The Division of Biostatistics Dr McCulloch, Head) oversees biostatistical teaching and consultation. Faculty in this Division carry out research on statistical methods, and collaborate with investigators in other UCSF departments in the areas of study design and data analysis, and in bioinformatics..
- The Division of Cancer Epidemiology (Dr. Holly, Head) provides training in cancer and molecular epidemiology. Faculty in this Division also conduct research in collaboration with the UCSF Comprehensive Cancer Center Population Sciences Division (Dr Hiatt, Director). Dr Green directs the Cancer Center's research in Social and Behavioral Sciences, and Dr Witte is Co-Leader of the Center's Cancer Genetics program. Dr Witte is also Associate Director of the Institute for Human Genetics.
- The Division of Clinical Epidemiology (Dr Newman, Head) focuses on teaching the methods of evidence-based medicine and clinical research through the Training in Clinical Research (TICR) program. The Division is also home to Clinical and Translational Sciences Training (CTST), which coordinates training in clinical and translational research for students, residents, fellows and junior faculty in all UCSF Schools

Source: Epidemiology and Biostatistics website, 7/3/2008

and Departments.

- The Division of Clinical Trials and Multicenter Studies ((Dr Black, Head) leads methodologic advances in approaches to designing, coordinating, analyzing, and disseminating the results of clinical investigations, and participates in the activities of the San Francisco Coordinating Center.
- The Division of Preventive Medicine and Public Health (Dr Rutherford, Head) leads teaching of topics ranging from preventive medicine to public health and managed care. Faculty in this Division carry out most of the Department's research on AIDS and infectious disease and on international health.

The Department also has programs that serve as support groups for specified academic pursuits, and it has three centers and a consulting unit.

- The Institute for Human Genetics (Dr Risch, Director; Dr Witte, Associate Director) serves as a focal point for campus-wide activities in human genetics and has faculty members spanning three schools; Medicine, Nursing and Pharmacy.
- The Program in International Health (Dr Novotny, Head) supports UCSF courses, the Global Health Area of Concentration Program and multi-university discussion groups that address the global burden of disease and global approaches to health improvement. Dr. Novotny also directs the Office of International Programs in the School of Medicine, which coordinates opportunities for medical students to work internationally.
- The Biostatistics Research Program (Dr Neuhaus, Head) promotes intellectual exchange and collaboration on the design and analysis of studies involving longitudinal, cluster, and survival data. The Program convenes seminars, discussions of work in progress and a journal club, it promotes grant development in the area of biostatistical methodology, and it sponsors visiting scholars..
- The Center for Bioinformatics and Molecular Biostatistics (CBMB) (Dr Segal, Head) develops data analytic methods required to make sense of the large data volumes generated by the emerging techniques of molecular biology. The center forms partnerships with other campus groups to carry out research in this area; recruits fellows and junior faculty and helps to retrain interested existing faculty, and contributes to cam-

Source: Epidemiology and Biostatistics website, 7/3/2008

pus-wide bioinformatics teaching.

• The San Francisco Coordinating Center is a collaborative enterprise that draws on scientists at UCSF and CPMC to design and manage multi-center clinical trials and longitudinal studies of health, aging, osteoporosis, and cardiovascular disease. Teams are responsible for scientific design and direction, data collection and management, data analysis and publications, and quality control components of complex multi-center studies.

Source: Epidemiology and Biostatistics website, 7/3/2008

FY 2007-08 Headcount as of 4/3/08 EPIDEMIOLOGY AND BIOSTATISTICS

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
64	18	29	46	157

Source: UCSF Human Resources

Permanently Budgeted FTEs EPIDEMIOLOGY AND BIOSTATISTICS

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff	Staff	Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff
BIOSTATISTICS-EPIDEMIOLOGY				8.58		8.58		8.58		8.58
EPID/BIOSTAT-PREVENT MED RESID PROG	1.00	0.14								
EPID/BIOSTATS-PREVENTION SCIENCES	0.01	11.40		11.90	•	19.18		8.35		5.81
EPIDEMIOLOGY & BIOSTATISTICS		8.79								
MS-EPIDEMIOLOGY & BIOSTATISTICS	6.43	7.00	6.43	7.00	6.43	7.12	6.43	7.00	6.43	7.00
ORG ACT-EPIDEMIOLOGY & BIOSTAT	1.40	8.05	1.40	9.36	1.37	19.02	1.37	7.94	1.37	8.31
PMR-EPIDEMIOLOGY			1.00	0.14	1.00	0.14	1.00	0.14	1.00	0.14
PROG RELATED COSTS-MASTERS CLIN EPI	1.18	1.18 0.70	1.18	0.70	2.22	1.58	2.22	1.58	1.40	1.58
Total:		10.02 36.08	10.01	10.01 37.68	11.02 55.62	55.62	11.02	11.02 33.59	10.20 31.42	31.42

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 EPIDEMIOLOGY AND BIOSTATISTICS

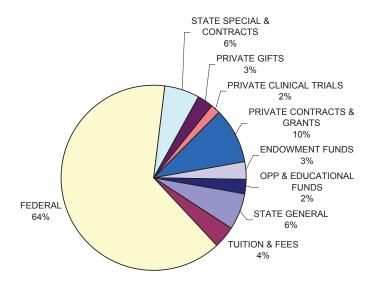
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$14,816,928	\$10,839,420	\$2,383,791	21.99%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$1,378,265	\$1,371,536	\$230,174	16.78%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$373,716	\$333,444	\$85,958	25.78%
Private Contracts & Grants	\$2,246,057	\$2,038,762	\$468,895	23.00%
Total:	\$18,814,967	\$14,583,162	\$3,168,818	21.73%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source EPIDEMIOLOGY AND BIOSTATISTICS

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,250,095	\$1,319,748	\$1,454,209	\$1,445,085	\$1,497,650	19.8%
TUITION & FEES	\$277,456	\$583,377	\$701,078	\$674,315	\$867,213	212.6%
FEDERAL	\$11,023,845	\$10,008,501	\$11,429,057	\$14,654,011	\$14,816,928	34.4%
STATE SPECIAL & CONTRACTS	\$1,616,972	\$1,483,527	\$1,736,519	\$1,346,334	\$1,378,206	-14.8%
LOCAL GOVERNMENT	\$33,146	\$16,610	\$34,910	(\$10,131)	\$0	-100.0%
PRIVATE GIFTS	\$404,678	\$529,916	\$358,954	\$656,248	\$654,858	61.8%
PRIVATE CLINICAL TRIALS	\$1,149,727	\$383,249	\$844,191	\$796,882	\$373,716	-67.5%
PRIVATE CONTRACTS & GRANTS	\$3,691,808	\$3,549,474	\$2,764,645	\$2,935,347	\$2,246,057	-39.2%
ENDOWMENT FUNDS	\$72,767	\$55,554	\$522,334	\$769,162	\$731,666	905.5%
OPP & EDUCATIONAL FUNDS	\$482,732	\$453,725	\$220,494	\$615,664	\$557,042	15.4%
S&S -EDUCTATIONAL ACTIVIT	\$1,375,470	\$803,369	\$222,081	\$839,635	\$59,826	-95.7%
OTHER SOURCES	\$331,664	\$215,993	\$518,093	\$209,266	(\$614)	-100.2%
RESERVES	\$352,852	\$0	\$133,894	\$0	\$31,570	-91.1%
Total:	\$22,063,212	\$19,403,042	\$20,940,459	\$24,931,819	\$23,214,119	5.2%
	•					

Expenditures by Fund Source Epidemiology and Biostatistics FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures EPIDEMIOLOGY AND BIOSTATISTICS (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
·		General	Designated				
Instruction	4,676	1,498	1,628	1,551	3,090	1,586	-
Research	17,921	-	(141)	18,062	9,622	8,299	
Total	22,597	1,498	1,487	19,613	12,712	9,885	

Source: UCSF Controller's Office

DEPARTMENT OF MICROBIOLOGY AND IMMUNOLOGY

- Chair Defranco, Anthony L, Ph.D.
- Business Officer Kure, Larisa D.
- Website http://www.ucsf.edu/micro/

Message from the Chair, Dr. Anthony DeFranco:

The Department of Microbiology and Immunology is one of five "wet bench research" basic science departments within the School of Medicine. It has 17 full-time primary faculty members, including 1989 Nobel Prize winner, J. Michael Bishop, who is also UCSF's Chancellor, and Frank McCormick, director of the UCSF comprehensive cancer center. The department's missions include: scientific research in areas related to infectious disease, immunology, and cancer; teaching microbiology and immunology to professional students in Medicine, Pharmacy, and Dentistry; graduate education leading to the Ph.D. degree in the Biomedical Sciences (BMS) and "Tetrad" graduate programs; and advanced research training of postdoctoral fellows. Individuals interested in doing graduate work in immunology, microbiology, virology, parasitology, or cancer research at UCSF should apply to one or more of these graduate programs. Individuals interested in postdoctoral opportunities within the department should contact the faculty directly.

The research laboratories of the department are located at both of the main UCSF campuses, Parnassus Heights and Mission Bay and their activities span a wide range of modern biomedical science. Further information can be found in the links to each faculty member listed. There are also many UCSF faculty members who have a joint appointment with the department, reflecting close ties to either the research of teaching missions of the department; these individuals are also listed with links to further information.

The department serves as the administrative home for the Immunology graduate program, which is closely affiliated with the Biomedical Sciences (BMS) graduate program, and also for the Microbial Pathogenesis program, which is closely affiliated with both the BMS and Tetrad graduate programs. Both of these programs draw upon faculty from many departments at UCSF and have a rich diversity of intellectual activities, which are open to members of the UCSF community.

Source: Microbiology and Immunology website, 6/25/2008

FY 2007-08 Headcount as of 4/3/08 MICROBIOLOGY AND IMMUNOLOGY

Staff Acar Part Time Full Time
me st

Source: UCSF Human Resources

Permanently Budgeted FTEs MICROBIOLOGY AND IMMUNOLOGY

		FY 2003-04		FY 2004-05	90	FY 2005-06	90	FY 2006-	20	FY 2006-07 FY 2007-08	80
Permanent Budget Account Title		Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
MICROBIOLOGY DNA SEQUENCER			0.50								
MR-MICROBIOLOGY & IMMNUNOLOGY			0.48		0.48		0.20		0.35		0.25
MS-MICROBIOLOGY & IMMUNOLOGY		13.92 7.93	7.93	13.92	13.92 6.93	13.92 6.93	6.93	13.92 6.93	6.93	13.92 6.93	6.93
	Total:	13.92	13.92 8.91	13.92	13.92 7.41	13.92 7.13	7.13	13.92 7.28	7.28	13.92 7.18	7.18

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 MICROBIOLOGY AND IMMUNOLOGY

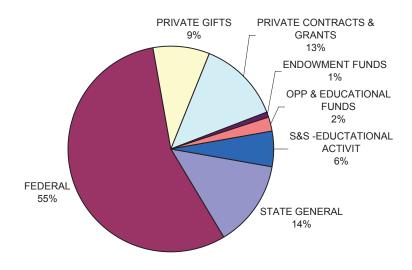
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$7,036,471	\$6,145,420	\$3,158,206	51.39%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,661,727	\$1,161,512	\$205,025	17.65%
Total:	\$8,698,198	\$7,306,932	\$3,363,231	46.03%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source MICROBIOLOGY AND IMMUNOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,760,637	\$1,486,212	\$1,568,078	\$1,697,414	\$1,706,904	-3.1%
FEDERAL	\$4,489,564	\$6,324,007	\$6,753,642	\$6,830,550	\$7,036,471	56.7%
STATE SPECIAL & CONTRACTS	(\$179)	\$200	\$36,106	\$23,694	\$0	-100.0%
PRIVATE GIFTS	\$561,227	\$601,084	\$862,751	\$616,120	\$1,101,005	96.2%
PRIVATE CONTRACTS & GRANTS	\$1,866,728	\$1,705,010	\$1,646,549	\$1,466,308	\$1,661,727	-11.0%
ENDOWMENT FUNDS	\$77,969	\$98,262	\$29,429	\$106,385	\$99,415	27.5%
OPP & EDUCATIONAL FUNDS	\$143,115	\$176,290	\$227,212	\$254,224	\$276,197	93.0%
S&S -EDUCTATIONAL ACTIVIT	\$782,402	\$296,733	\$514,403	\$435,369	\$705,284	-9.9%
OTHER SOURCES	\$774	(\$31,710)	\$6,156	\$60,783	(\$55,297)	-7247.9%
RESERVES	\$0	\$0	\$10,379	\$5,769	\$0	0.0%
Total:	\$9,682,237	\$10,656,088	\$11,654,704	\$11,496,615	\$12,531,707	29.4%

Expenditures by Fund Source Microbiology and Immunology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures MICROBIOLOGY AND IMMUNOLOGY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	2,973	1,639	829	505	2,092	931	50
Research	11,203	68	73	11,062	5,204	6,093	94
Total	14,176	1,707	902	11,567	7,296	7,024	144

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

MICROBIOLOGY AND IMMUNOLOGY

	Number	Amount
Research Grants	18	\$7,537,035
Training Grants	0	\$0
Fellowships	3	\$160,788
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	21	\$7,697,823

^{*}Not reported

DEPARTMENT OF PHYSIOLOGY

- Chair Julius, David J.
- Business Officer Sall, Susan Kay
- Website http://keck.ucsf.edu/physio/

Overview

UCSF's Department of Physiology discovers and promotes knowledge of how the human body functions through an understanding of cells, organs, and systems. Through the combined efforts of faculty, students, and staff, we strive to maintain a scientific community that fosters excellence in teaching and research, and which will train the next generation of scientists.

Research Centers

Department of Physiology faculty direct and/or participate in a number of leading research centers both on and off the UCSF campus. Among these research centers are:

- The W.M. Keck Foundation Center for Integrative Neuroscience
- The Sloan-Swartz Center for Theoretical Neurobiology
- The Gladstone Institute of Neurological Disease
- The Gallo Research Center
- The Wheeler Center for the Neurobiology of Addiction

Graduate Program

Graduate education by Department of Physiology faculty is carried out through their participation in interdepartmental graduate programs. The major graduate program in which Physiology faculty teach is in the Program in Biological Sciences (PIBS).

Program in Biological Sciences (PIBS

UCSF offers a rich variety of research opportunities in the biological sciences encompassing multiple different disciplines and departments. The graduate faculty at UCSF created the Herbert W. Boyer Program in Biological Sciences (PIBS) in order to give students access to the broadest possible range of research and to encourage interactions among faculty and students in different disciplines.

PIBS has allowed the creation of interdisciplinary graduate curricula rather than limiting students

Source: Physiology website, 6/27/2008

to studies in conventional departments. PIBS currently consists of five distinct programs offering the Ph.D. degree: Biophysics, Immunology, Neuroscience, Chemistry and Chemical Biology, and the Tetrad program composed of Biochemistry and Molecular Biology, Cell Biology, Developmental Biology, and Genetics; and one post graduate program - Molecular Medicine.

While the five Ph.D. programs differ in their emphasis and degree requirements, students admitted to any PIBS program can enroll in course work, attend retreats and carry out their thesis studies in any of the 150 labs affiliated with PIBS. Prospective students interested in PIBS should go to the links describing the individual graduate programs to determine which programs best fits their background and research interests.

Neuroscience Graduate Program

The Department of Physiology administers the Neuroscience Graduate Program (which is one of the PIBS programs). The Neuroscience Graduate Program admits applicants for the Fall quarter only. For information on the application process and deadline and to download application materials, please visit: http://www.ucsf.edu/neurosc/neuro_admissions.html

Non-degree postdoctoral programs are also available for individuals who wish to obtain specialized research training in one of the fields of physiology represented by the Department.

Biomedical Sciences (BMS) Graduate Program

The Biomedical Sciences (BMS) Graduate Program trains students studying for the PhD degree.

The unique curriculum of the BMS program is designed to provide students with a wide range of opportunities for their development as biomedical researchers. In the first year of the program, students take courses, present in journal club, complete three laboratory rotations, and select a thesis laboratory. In the second year, students begin research in their thesis laboratories, take additional courses, present in journal club, serve as teaching assistants, and take their qualifying examinations. In later years students primarily focus on their thesis research and dissertation, although they may opt to take additional elective courses or participate in a wide range of other activities. Details of the academic program are given below.

Chemistry and Chemical Biology (CCB) Graduate Progam

The Ph.D. program in Chemistry and Chemical Biology provides a background in modern chemistry that includes molecular thermodynamics, bioorganic chemistry, computational chemistry, structural biology and cell biology. The interdisciplinary study of molecules in living systems at a health science campus helps to integrate the traditional disciplines of chemistry and biology.

Source: Physiology website, 6/27/2008

FY 2007-08 Headcount as of 4/3/08 PHYSIOLOGY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
30	3	68	44	145

Source: UCSF Human Resources

Permanently Budgeted FTEs PHYSIOLOGY

	FY 2003-04	-04	FY 2004-05	05		90	FY 2005-06 FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff
MB019B GLASSWARE FACILITY RECHG						0.10		0.10		0.10
MED SCH-PHYSIOLOGY	20.83	8.90	21.20 8.80	8.80	21.20 10.80	10.80	21.20	6.80	21.20	8.80
MED-PHYSIO-ENDOCRINOLOGY	0.50	0.93	1.00	0.93	1.00	0.93	1.00	0.93	1.00	0.93
MS-NEUROSCIENCE	3.00	2.35	3.00	2.35	3.00	2.35	3.00	2.35	3.00	2.35
ORG ACTIVITY-PHYSIOLOGY		0.10		0.10		0.10		0.10		0.10
Total:	24.33	24.33 12.28	25.20 12.18	12.18	25.20 14.28	14.28	25.20 10.28	10.28	25.20 12.28	12.28

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PHYSIOLOGY

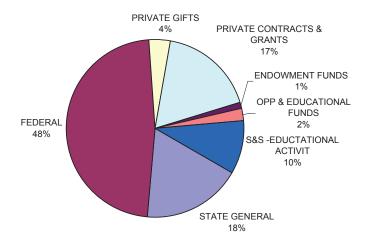
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$6,855,333	\$5,656,508	\$2,873,129	50.79%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$2,488,832	\$2,057,138	\$371,779	18.07%
Total:	\$9,344,165	\$7,713,646	\$3,244,908	42.07%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PHYSIOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$2,225,545	\$2,269,203	\$2,079,650	\$2,101,913	\$2,592,629	16.5%
TUITION & FEES	\$0	\$0	\$0	\$0	\$5,000	0.0%
FEDERAL	\$7,927,204	\$7,450,364	\$8,292,963	\$7,878,895	\$6,855,333	-13.5%
STATE SPECIAL & CONTRACTS	\$0	\$4,948	\$0	\$0	(\$881)	0.0%
PRIVATE GIFTS	\$896,725	\$451,384	\$607,180	\$660,487	\$596,546	-33.5%
PRIVATE CONTRACTS & GRANTS	\$1,574,716	\$1,666,719	\$1,698,446	\$2,003,834	\$2,488,832	58.0%
ENDOWMENT FUNDS	\$112,944	\$138,307	\$38,266	\$222,439	\$159,693	41.4%
OPP & EDUCATIONAL FUNDS	\$225,781	\$232,665	\$246,503	\$300,534	\$346,360	53.4%
S&S -EDUCTATIONAL ACTIVIT	\$1,103,966	\$638,010	\$305,917	\$1,171,652	\$1,395,993	26.5%
OTHER SOURCES	\$2,010	\$1,046	\$6,222	(\$8,532)	(\$68,532)	-3509.7%
RESERVES	\$1,571	\$0	\$0	\$13,260	\$0	-100.0%
Total:	\$14,070,461	\$12,852,646	\$13,275,146	\$14,344,482	\$14,370,973	2.1%

Expenditures by Fund Source Physiology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PHYSIOLOGY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
-		General	Designated				
Instruction	4,387	2,508	900	979	3,211	1,176	-
Research	8,444	50	159	8,236	5,089	3,355	0
Total	12,831	2,558	1,058	9,215	8,300	4,531	0

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

PHYSIOLOGY

	Number	Amount
Research Grants	22	\$10,257,345
Training Grants	1	\$473,277
Fellowships	8	\$410,858
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total	31	\$11,141,480

^{*}Not Reported

CLINICAL DEPARTMENTS

DEPARTMENT OF ANESTHESIA AND PERIOPERATIVE CARE

- Chair Miller, Ronald D., M.D.
- Business Officer O'Halloran, Marge
- Website http://www.anesthesia.ucsf.edu/external/index.html

Mission Statement

Excellence in all aspects of anesthesia, pain management, and perioperative care.

History of the Department

Prior to 1900, anesthesia was supervised and taught by faculty surgeons at both didactic and clinical levels. During the 1920s and 1930s, hospital-employed physicians provided anesthesia as a service function. Even at this early time, Dr. Chauncey Leake was performing pioneer investigative work on anesthetic agents in the Department of Pharmacology, and elective courses in clinical anesthesia were offered to medical students.

In 1940, the first faculty appointment in anesthesia was awarded, and in 1941, a Division of Anesthesia was created in the Department of Surgery. A formal residency program also was introduced at this time. The faculty consisted of 4 members, and there were 10 residency positions. The department provided anesthesia for operative procedures, consulting occasionally for intensive care and obstetric anesthesia. Research activity was minimal.

In 1958, Dr. Stuart C. Cullen became the first chairman of the new Department of Anesthesia and Perioperative Care. Dr. Cullen and his faculty developed a larger, more active residency program offering more broadly based clinical activity, including obstetric anesthesia, Intensive Care Unit, and anesthesia training at San Francisco General Hospital. In addition, undergraduate medical school student teaching began, and an active, productive research unit was developed. In June of 1966, Dr. Cullen left the chairmanship to become the Dean of the School of Medicine.

Dr. William K. Hamilton became chairman in 1967, and the department's growth continued. An anesthesia unit was established at the Veterans Administration Hospital and the Department assumed responsibility for the intensive care unit at San Francisco General Hospital. Anesthesia faculty began to participate in providing care on the pediatric and newborn intensive care units at the University Hospital. The research base was also broadened in both quality and depth. In 1983, Dr. Hamilton was appointed Vice Dean and Associate Dean for Postdoctoral and Clinical Affairs, and in 1984, Dr. Ronald D. Miller succeeded him as Professor and Chairman.

Source: Anesthesia and Perioperative Care website, 7/27/2008

Currently, the Department of Anesthesia and Perioperative Care has over 100 faculty, 72 residents in clinical training, and 15 research-trainees and fellows. In addition to the University Hospital, very active units of the department exist at San Francisco General Hospital Medical Center, the Veterans Affairs Medical Center, and UCSF/Mount Zion Medical Center. Many members of the department have joint appointments in basic sciences and other clinical departments.

Our faculty have a major influence on our specialty both nationally and internationally, including NIH study sections, NIH funding, FDA and Editorial Boards.

Many of the graduates of our program hold full-time academic university positions. A number of our graduates have been or currently are chairmen of academic departments of anesthesia. The majority of our graduates have become prominent clinicians in private practice, many of whom assume leadership roles in their hospital, community, state, and/or national organizations. Clearly, the success of our graduates over the last 50 years, confirms the commitment our Department has to its residency.

Source: Anesthesia and Perioperative Care website, 7/27/2008

FY 2007-08 Headcount as of 4/3/08 ANESTHESIA AND PERIOPERATIVE CARE

Caree	Career Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
97	30	52	109	288

Source: UCSF Human Resources

Permanently Budgeted FTEs ANESTHESIA AND PERIOPERATIVE CARE

	FY 2003-04	4	FY 2004-05	2	FY 2005-	90	FY 2006-	20	FY 2005-06 FY 2006-07 FY 2007-08	80
Permanent Budget Account Title Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Academic \$	Staff	Academic \$	Staff	Academic	Staff	Academic	Staff	Academic	Staff
MED SCH-ANAESTHESIA	12.00 2.17	2.17	12.00 1.00	1.00	12.00 1.00	1.00	12.00 1.00	1.00	12.00 1.00	1.00
ORG ACT-ANESTHESIA		0.11		0.05		0.19		0.03		0.03
Total:	12.00 2.28	2.28	12.00 1.05	1.05	12.00 1.19	1.19	12.00 1.03	1.03	12.00 1.03	1.03

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 ANESTHESIA AND PERIOPERATIVE CARE

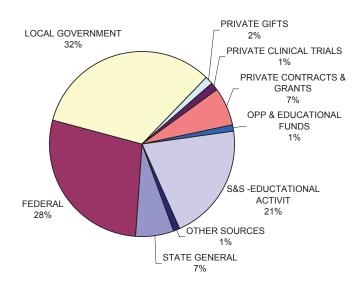
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$7,146,561	\$5,396,234	\$2,333,581	43.24%
CIRM	\$35,355	\$35,355	\$18,950	53.60%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$8,430,384	\$8,430,384	\$0	0.00%
Private Clinical Trials	\$330,174	\$330,043	\$109,990	33.33%
Private Contracts & Grants	\$1,687,543	\$1,590,216	\$344,711	21.68%
Total:	\$17,630,018	\$15,782,232	\$2,807,232	17.79%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source ANESTHESIA AND PERIOPERATIVE CARE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,418,167	\$1,401,843	\$1,552,723	\$1,526,173	\$1,694,068	19.5%
TUITION & FEES	\$248,990	\$336,760	\$273,480	\$337,107	\$72,989	-70.7%
FEDERAL	\$6,390,191	\$7,677,046	\$7,002,764	\$7,100,587	\$7,146,561	11.8%
STATE SPECIAL & CONTRACTS	\$195,676	\$877	(\$877)	\$0	\$35,355	-81.9%
LOCAL GOVERNMENT	\$5,663,040	\$5,696,894	\$6,441,667	\$7,458,888	\$8,430,384	48.9%
PRIVATE GIFTS	\$263,568	\$252,722	\$581,329	\$653,228	\$383,436	45.5%
PRIVATE CLINICAL TRIALS	\$128,972	\$405,712	\$301,379	\$656,264	\$330,174	156.0%
PRIVATE CONTRACTS & GRANTS	\$475,277	\$485,502	\$680,186	\$1,262,314	\$1,687,543	255.1%
ENDOWMENT FUNDS	\$101,986	\$75,405	\$98,271	\$142,483	\$82,842	-18.8%
OPP & EDUCATIONAL FUNDS	\$131,095	\$173,295	\$219,201	\$234,161	\$255,697	95.0%
S&S -EDUCTATIONAL ACTIVIT	\$507,136	\$3,488,690	\$2,401,654	\$2,832,278	\$5,261,182	937.4%
OTHER SOURCES	\$334,660	\$221,739	\$150,417	\$114,566	\$295,416	-11.7%
RESERVES	\$2,768	\$0	\$0	\$0	\$0	-100.0%
Total:	\$15,861,525	\$20,216,486	\$19,702,195	\$22,318,049	\$25,675,648	61.9%

Expenditures by Fund Source Anesthesia and Perioperative Care FY 2007-08



Source: UCSF Budget & Resource

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures ANESTHESIA AND PERIOPERATIVE CARE (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
-		General	Designated				
Instruction	4,564	1,688	2,148	727	28,807	643	24,886
Research	9,272	6	341	8,926	4,703	4,569	
Total	13,836	1,694	2,489	9,653	33,510	5,212	24,886

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

ANESTHESIA AND PERIOPERATIVE CARE

	Number	Amount
Research Grants	16	\$6,722,029
Training Grants	1	\$178,762
Fellowships	0	\$0
Other Awards	0	\$0
R&D Contracts*	0	\$0
Tot	al: 17	\$6,900,791

^{*}Not reported

DEPARTMENT OF DERMATOLOGY

- Chair Wintroub, Bruce U. M.D.
- Business Officer Kenaani, Mounira
- Website http://www.dermatology.ucsf.edu/

Mission Statement

The mission of the Department is to be a world leader in the care of skin and patients with skin diseases through outstanding clinical service, education and training, and research.

Faculty in the Department work at a variety of locations within the UCSF system as well as at the affiliated San Francisco General Hospital and the San Francisco VA Medical Center. The Department is based at the Mount Zion campus and offers a wide range of specialty services in medical, pediatric, surgical and cosmetic dermatology. Patient care is also offered at UCSF's Parnassus campus.

Our physicians and staff provide a full range of diagnostic dermatopathology services. Our goal is to deliver quality, appropriate care to patients referred by dermatologists and physicians in all medical specialties.

Patient Care

Patient services are offered in the following areas:

- General Dermatology
- Pediatric Dermatology
- Melanoma/Pigmented Lesions
- Skin Cancer
- Specialty Practices
 - Autoimmune
 - Cutaneous T Cell Lymphoma
 - Environmental and Occupational Dermatology
 - Hair and Nail Disorders
 - HIV Dermatology
 - Organ Transplant/High Risk Skin Cancer Clinic
 - Psoriasis Day Care Center
 - Ulcer/Wound Care
 - Vascular Anomalies Conference

Source: Dermatology website, 7/27/2008

Research

Research in the UCSF Department of Dermatology reflects the wide range of faculty interests and expertise. Programs address key problems in skin biology and disease at the levels of the basic and clinical sciences, as well as health services and public policy. Research is conducted at a number of locations within UCSF and at the affiliated VA Medical Center and San Francisco General Hospital.

Education

The UCSF Department of Dermatology is a leader in the education of medical students, fellows, residents and practicing dermatologists.

Residency Program

The three-year training track focuses on developing strong clinical skills in the diagnosis and management of dermatologic disease. Residents rotate through clinical sites with very diverse patient populations and see an equally diverse range of skin disease. Residents' clinical curriculum provides in-depth exposure and instruction in multiple dermatologic subspecialties, including: dermatologic surgery, pediatric dermatology, dermatopathology, etc. Clinical training is coupled with a comprehensive daily didactic lecture series delivered by our highly recognized faculty. These curricula take full advantage of the rich clinical and basic science resources that UCSF has to offer, and are designed to produce an outstanding foundation of training for residents by the completion of the program.

Research Fellowships

- Clinical Hair Research
- HIV Dermatology
- Melanoma/Cutaneous Oncology
- Psoriasis

Post-Residency Fellowships

- Clinical Hair Research
- Dermatopathology
- Mohs Surgery
- Pediatric Dermatology

Source: Dermatology website, 7/27/2008

FY 2007-08 Headcount as of 4/3/08 DERMATOLOGY

St	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time Part Time	Part Time	Total
20	2	34	28	38
Ì				

Source: UCSF Human Resources

Permanently Budgeted FTEs DERMATOLOGY

	FY 2003-04	04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
MED SCH-DERMATOLOGY	4.00 3.81	3.81	4.00	3.44	4.00	3.44	4.00	4.00 3.44	4.00	3.44
MR-DERMATOLOGY-PSORIASIS	0.50	0.50 5.63	0.50	5.63	0.50 5.63	5.63	0.50	5.63	0.50	5.63
Total:	4.50	9.44	4.50	4.50 9.07	4.50 9.07	9.07	4.50	9.07	4.50	9.07

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 DERMATOLOGY

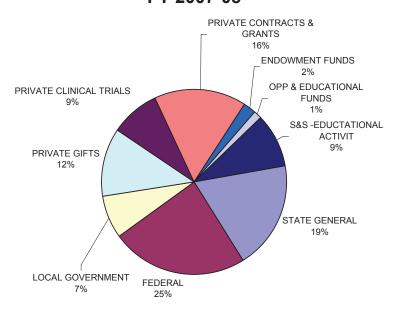
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$2,045,580	\$1,849,629	\$645,555	34.90%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$6,738	\$6,738	\$1,685	25.00%
Local Government	\$643,088	\$643,088	\$0	0.00%
Private Clinical Trials	\$740,624	\$730,788	\$180,354	24.68%
Private Contracts & Grants	\$1,378,593	\$1,378,345	\$358,343	26.00%
Total:	\$4,814,624	\$4,608,588	\$1,185,937	25.73%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source DERMATOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,686,738	\$1,276,990	\$1,263,037	\$1,589,736	\$1,630,695	-3.3%
FEDERAL	\$2,289,309	\$2,304,509	\$2,628,882	\$2,353,499	\$2,045,580	-10.6%
STATE SPECIAL & CONTRACTS	\$0	\$0	\$0	\$118,355	\$6,738	0.0%
LOCAL GOVERNMENT	\$248,705	\$263,091	\$278,536	\$351,266	\$643,088	158.6%
PRIVATE GIFTS	\$917,768	\$919,966	\$893,952	\$866,179	\$1,038,970	13.2%
PRIVATE CLINICAL TRIALS	\$413,653	\$586,355	\$156,994	\$669,630	\$740,624	79.0%
PRIVATE CONTRACTS & GRANTS	\$1,278,472	\$809,428	\$1,306,874	\$1,254,859	\$1,378,593	7.8%
ENDOWMENT FUNDS	\$229,766	\$368,642	\$274,468	\$226,288	\$208,374	-9.3%
OPP & EDUCATIONAL FUNDS	\$78,560	\$84,563	\$71,281	\$98,702	\$118,365	50.7%
S&S -EDUCTATIONAL ACTIVIT	\$370,019	\$1,537,849	\$1,425,430	(\$526,218)	\$804,407	117.4%
OTHER SOURCES	\$8,522	(\$92,925)	\$12,545	(\$227)	\$23,923	180.7%
Total:	\$7,521,512	\$8,058,467	\$8,311,999	\$7,002,067	\$8,639,358	14.9%
		_				

Expenditures by Fund Type Dermatology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures DERMATOLOGY (Dollars in Thousands)

			Current Fund	ls	Distribution			
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers	
·		General	Designated					
Instruction	2,798	1,328	837	633	6,255	1,892	5,349	
Research	4,971	303	5	4,663	3,422	1,549	_	
Total	7,769	1,631	843	5,296	9,677	3,441	5,349	

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

DERMATOLOGY

	Number	Amount
Research Grants	5	\$1,270,382
Training Grants	1	\$205,417
Fellowships	0	\$0
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	6	\$1,475,799

^{*}Not reported

DEPARTMENT OF EMERGENCY MEDICINE

- Chair Callaham, Michael A. M.D.
- Business Officer Massey, Carol E.
- Website http://emergency.ucsf.edu/dschool.ucsf.edu/

Our Mission

Welcome to the Department of Emergency Medicine at University of California, San Francisco. UCSF is among the leading academic health sciences institutions in the world, highly respected for the quality and scope of scientific activities, educational programs and patient care. The Department of Emergency Medicine is committed to delivering quality patient care, educating physicians in accordance with high professional standards, and generating knowledge from research that will alleviate suffering through the prevention and treatment of disease.

Education

The Department of Emergency Medicine is committed to the education of medical students, residents, and fellows. The UCSF-SFGH joint residency program, a four-year program, began in June 2008 with its first class of 12 residents. Our affiliated residency at UCSF-Fresno is a four-year program as well that has been training residents since 1974. Medical students, and residents from other specialties also rotate through our clinical departments. Faculty in the Department of Medicine are recognized as excellent clinical and bedside teachers, and are also actively involved in School of Medicine curriculum, serving as preceptors and mentors for students. A number of faculty are nationally recognized educators and members of the Academy of Educators at UCSF.

Research

UCSF's diverse intellectual and technological resources are the conduit for building a nationally recognized research program in Emergency Medicine. With our unique patient interface, ideal for translational research, we are in an unparalleled position to collaborate with colleagues in other academic departments and to produce research that shapes both clinical care and public policy. Our faculty have a wide range of research interests and welcome collaborations with established researchers as well as inquires from interested students and residents seeking research mentors.

Source: Department of Emergency Medicine website, 10/21/08

Patient Care

It is the mission of the Department of Emergency Medicine to serve our patients and to provide the highest level of medical care available. Emergency Medicine provides a dedicated team of physicians, nurses and other healthcare professionals to provide an extraordinary level of knowledge, skill and compassion to every patient we serve. All of our attending physicians are board certified in emergency medicine, and have a passion for what they do and are dedicated to caring for our patients. Our Emergency Departments are affiliated with the University of California, San Francisco School of Medicine and Medical Center, and are located on two different campuses: Moffitt-Long Hospital and San Francisco General Hospital. Faculty are present in the department 24 hours a day, 7 days a week, supervising care and providing bedside and didactic teaching.

Moffitt-Long completed a major renovation and is now a state of the art facility. Approximately 40,000 patients are treated here each year. We provide care for patients regardless of race, religion, or ability to pay. Our team of experts includes board certified emergency medicine specialists, who are trained to treat a wide array of urgent medical conditions. These range from the most complex problems, such as heart attacks, stroke, surgical complications, high risk obstetrics to more minor situations, including ankle sprains and lacerations. When medically necessary, medical specialists from all disciplines are available for consultations and treatment. We are a pediatrics receiving hospital and pediatricians are available 24 hours a day and are involved in the care of all children who visit the Emergency Department. In addition, the department's experienced nursing staff has specific training in emergency and critical care. Our faculty physicians have access to a full spectrum of diagnostic capabilities, including cardiac catheterization lab, stroke center, 64-slice CT scanner, digital radiology monitoring and bedside ultrasound, for the evaluation and emergent treatment of patients.

San Francisco General Hospital Emergency Department is the only Level-One Trauma Center for the City and County of San Francisco and northern San Mateo. The annual census is approximately 58,000, and the Emergency Department serves as a point of entry and triage for critically injured patients of all ages, in addition to a wide range of non-traumatic complaints for a predominantly underserved, urban population.

Source: Department of Emergency Medicine website, 10/21/08

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 EMERGENCY MEDICINE

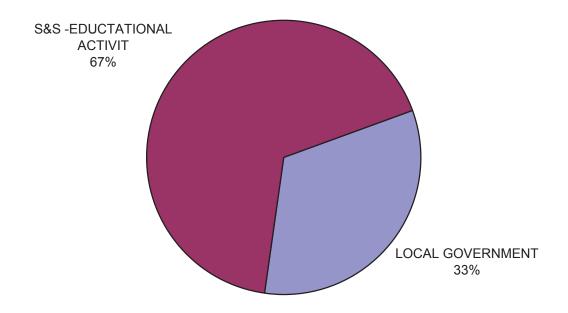
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$0	\$0	\$0	0.00%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$3,660,492	\$3,660,492	(\$80)	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$11,417	\$11,417	\$0	0.00%
Total:	\$3,671,909	\$3,671,909	(\$80)	0.00%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source EMERGENCY MEDICINE

Fund Source		FY 2007-08 Year 1
STATE GENERAL		\$7,202
TUITION & FEES		\$24,521
STATE SPECIAL & CONTRACTS		\$0
LOCAL GOVERNMENT		\$3,660,492
PRIVATE GIFTS		\$11,666
PRIVATE CONTRACTS & GRANTS		\$11,417
ENDOWMENT FUNDS		\$1,868
OPP & EDUCATIONAL FUNDS		\$2,389
S&S -EDUCTATIONAL ACTIVIT		\$7,511,014
OTHER SOURCES		\$2,388
	Total:	\$11,232,957

Expenditures by Fund Source Emergency Medicine FY 2007-08



DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE

- Chair Grumbach, Kevin, M.D.
- Business Officer Mozesson, Judith
- Website http://www.familymedicine.medschool.ucsf.edu/

Mission Statement

Our department's mission is to educate students and residents in family medicine with an emphasis on meeting the needs of the economically disadvantaged and the medically underserved; to advance knowledge in family and community medicine; and develop methods of primary care that are effective, efficient, and accessible to all people.

Education

The Department of Family and Community Medicine plays a leading role in a full continuum of educational programs at UCSF.

- Our faculty ensures that every UCSF medical student is taught fundamental generalist clinical skills and patient-centered primary care.
- We emphasize preparation of culturally competent family physicians to meet the needs
 of underserved communities through a family practice residency training program at
 San Francisco General Hospital and three other affiliated family practice residencies in
 Northern California.
- We are training the next generation of academic leaders in family and community medicine through family medicine postdoctoral research and faculty development fellowships.
- We provide continuing medical education courses and other educational support to practicing physicians and health professionals.

Research

The Department of Family and Community Medicine is internationally recognized for our pioneering research programs in primary care and community health. Many of our research activities are multidisciplinary involving faculty members from other departments in the UCSF School of Medicine as well as Nursing, Dentistry and Pharmacy and the UC Berkeley School of Public Health.

Source: Family and Community Medicine website, 7/27/2008

We receive over \$15 million annually in research grants funding a wide array of research programs, including:

- Evaluations of innovative tools to improve the quality of care in primary care practice.
- Studies to elucidate and reduce health disparities associated with race, ethnicity and social class.
- Research on family dynamics and patient-physician communication in chronic illness.
- Research on health workforce diversity and policies to address the maldistribution of physicians, nurses and other health professionals.

Patient Care

Family and Community Medicine faculty take care of the primary care needs of patients of all ages. Many of our faculty deliver babies. Faculty see patients at the following locations in San Francisco:.

- UCSF Family Medicine Center at Lakeshore 1569 Sloat Blvd., Suite 314
- UCSF Senior Medical Center at Lakeside (Practice limited to Geriatrics)
 2501 Ocean Avenue
- Family Health Center San Francisco General Hospital 995 Potrero Ave., Bldg 80

Community Service

Community is an integral part of the Department of Family and Community Medicine. Our philosophy of education and research emphasizes community engagement and public service. Our Department plays a leadership role in:

- Directing national and global programs to assist community providers to develop greater expertise in HIV care;
- Providing technical assistance to government agencies, community based organizations, and foundations;

Source: Family and Community Medicine website, 7/27/2008

- Organizing a UCSF Community Partnership Resource Center to promote collaborative activities with underserved neighborhoods in San Francisco; and
- Developing innovative training models in Community Oriented Primary Care (COPC).
 - * Action Plan Project
 - * Community Partnership Resource Center
 - * San Francisco Hepatitis B Collaborative
 - * AIDS Education & Training Center (AIDS ETC)
 - * Correctional Medicine Consultation Network (CMCN)
 - * National HIV/AIDS Clinicians' Consultation Center

Source: Family and Community Medicine website, 7/27/2008

FY 2007-08 Headcount as of 4/3/08 FAMILY AND COMMUNITY MEDICINE

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
89	29	12	52	161

Source: UCSF Human Resources

Permanently Budgeted FTEs FAMILY AND COMMUNITY MEDICINE

	FY 2003-04	04	FY 2004-05	90	FY 2005-06	90	FY 2006-07	07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff
MED SCH-FAMILY & COMMUNITY MEDICINE	00.6	9.00 8.53	9.00	8.01	00.6	6.91	00.6	92'9	9.00 6.61	6.61
ORG ACT-FAMILY & COMMUNITY MEDICINE		0.15		(0.15)						0.15
PROF SERV-FAM & COMM MED-SFGH		0.15		0.15		0.15		0.15		0.15
Total:	8.83	8.83	9.00 8.01	8.01	9.00 7.06	90.7		9.00 6.91	9.00 6.91	6.91

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 FAMILY AND COMMUNITY MEDICINE

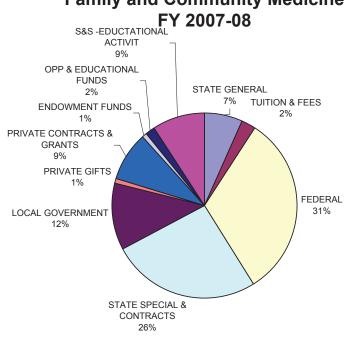
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$7,639,394	\$4,583,982	\$768,981	16.78%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$6,131,135	\$5,540,699	\$1,158,445	20.91%
Local Government	\$2,753,431	\$2,744,264	\$4,927	0.18%
Private Contracts & Grants	\$2,072,031	\$1,899,292	\$200,734	10.57%
Total:	\$18,595,991	\$14,768,238	\$2,133,087	14.44%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source FAMILY AND COMMUNITY MEDICINE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,450,095	\$1,325,825	\$1,455,788	\$1,509,580	\$1,581,418	9.1%
TUITION & FEES	\$399,455	\$347,428	\$343,742	\$425,493	\$569,316	42.5%
FEDERAL	\$7,797,911	\$8,266,062	\$8,322,353	\$7,600,620	\$7,639,394	-2.0%
STATE SPECIAL & CONTRACTS	\$1,273,029	\$1,239,603	\$2,309,924	\$4,149,300	\$6,211,346	387.9%
LOCAL GOVERNMENT	\$1,609,980	\$1,889,295	\$1,522,666	\$2,193,234	\$2,753,431	71.0%
PRIVATE GIFTS	\$54,952	\$19,697	\$49,494	\$162,476	\$205,783	274.5%
PRIVATE CONTRACTS & GRANTS	\$1,898,152	\$2,063,413	\$2,011,053	\$1,868,052	\$2,072,031	9.2%
ENDOWMENT FUNDS	\$2,349	\$4,907	\$20,419	\$49,326	\$161,214	6762.2%
OPP & EDUCATIONAL FUNDS	\$403,490	\$407,228	\$456,920	\$433,276	\$412,727	2.3%
S&S -EDUCTATIONAL ACTIVIT	\$2,145,448	\$1,819,148	\$1,791,707	\$1,624,755	\$2,173,569	1.3%
OTHER SOURCES	(\$50,810)	(\$11,235)	\$5,891	\$1,729	\$60	-100.1%
Total:	\$16,984,051	\$17,371,370	\$18,289,957	\$20,017,841	\$23,780,290	40.0%

Expenditures by Fund Type Family and Community Medicine



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures FAMILY AND COMMUNITY MEDICINE (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
-		General	Designated				
Instruction	12,773	1,579	2,671	8,524	8,519	4,332	78
Research	2,660	1	29	2,630	1,381	1,279	(0)
Total	15,433	1,580	2,700	11,154	9,900	5,612	78

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

FAMILY AND COMMUNITY MEDICINE

	Number	Amount
Research Grants	4	\$1,104,739
Training Grants	0	\$0
Fellowships	0	\$0
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	4	\$1,104,739

^{*}Not reported

DEPARTMENT OF LABORATORY MEDICINE

- Chair Lowell, Clifford A., M.D., Ph.D.
- Business Officer Hang, Tony Huoi
- Website http://labmed.ucsf.edu/

The Department of Laboratory Medicine at the University of California at San Francisco is dedicated to clinical service, research and teaching.

The Department of Laboratory Medicine oversees the Clinical Laboratories at the Moffit-Long, Mt. Zion, San Francisco VA and San Francisco General Hospital & Trauma Center. The Clinical Laboratories perform a large menu of diagnostic laboratory analyses in hematology, immunology, microbiology, transfusion medicine, genetics, metabolism, toxicology, cytogenetics, and chemistry. Each hospital is served by a Clinical Laboratory at their site, with an additional a large central Laboratory is located at the UCSF China Basin facility.

The Department has over 50 faculty engaged in biomedical research. The research interests of the faculty include hematology/ thrombopoiesis, sexually-transmitted diseases, transfusion related disease, immunology/AIDS, neurovirology, cancer genetics and cytogenetics, molecular mechanisms of hypertension, metabolism and obesity. Research faculty within the Department are located at the four affiliated hospitals, Blood Center of Pacific, Lawrence Berkeley Laboratories, as well as at the China Basin facility. Each faculty research group is staffed by students, post-doctoral research fellows and technical staff, with most of the faculty participating in the major research Programs at UCSF.

The major Teaching mission of the Department is directed to residents in the combined, ACGME accredited, Anatomic and Clinical Pathology Program run jointly with the Department of Pathology. Each year 12-15 residents rotate through the different sections of the Clinical Laboratories at the various hospitals and gain hands-on experience in interpretation and utilization of diagnostic tests. Laboratory Medicine also offers one-year Clinical Laboratory Specialist Training Programs in Clinical Chemistry, Immunology, Hematology, Immunohematology, Cytogenetics, Molecular Diagnostics, Phlebotomy, and Microbiology. Course work will prepare students to independently perform a wide array of laboratory tests in their chosen specialty. Using the newest methodologies and state of the art automated analyzers, graduates of the programs will provide the test results used in the detection, diagnosis and treatment of human diseases. Additionally, faculty in Laboratory Medicine are actively involved in teaching with the School of Medicine as well as graduate (PhD) level teaching in the basic science programs.

Source: Department of Laboratory Medicine, 9/12/2008

FY 2007-08 Headcount as of 4/3/08 LABORATORY MEDICINE

Š	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
164	29	31	32	256

Source: UCSF Human Resources

Permanently Budgeted FTEs LABORATORY MEDICINE

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	-08
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff
CLINICAL LABS SFGH										8.56
MED SCH-LABORATORY MEDICINE	8.50	8.50 10.17	8.50	9.23	8.50	9.23	8.50	9.23	8.50	9.23
S/M LAB MEDICINE		1.00		1.00		1.00				
Total:	8.50 11.17	11.17	8.50	8.50 10.23		8.50 10.23	8.50	8.50 9.23	8.50	9.23

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 LABORATORY MEDICINE

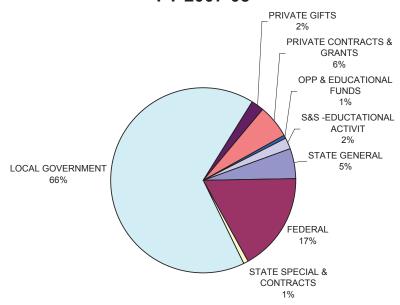
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$4,892,960	\$3,426,322	\$1,578,028	46.06%
CIRM	\$168,929	\$163,097	\$87,420	53.60%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$18,802,713	\$18,720,721	\$0	0.00%
Private Clinical Trials	\$68,548	\$68,475	\$27,010	39.45%
Private Contracts & Grants	\$1,656,500	\$1,576,882	\$444,085	28.16%
Total:	\$25,589,650	\$23,955,498	\$2,136,544	8.92%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source LABORATORY MEDICINE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,396,558	\$1,624,233	\$1,353,448	\$1,390,845	\$1,522,865	9.0%
FEDERAL	\$7,051,996	\$5,846,930	\$5,318,049	\$5,490,646	\$4,892,960	-30.6%
STATE SPECIAL & CONTRACTS	\$22	\$20,987	\$84,348	(\$6,687)	\$168,929	775872.4%
LOCAL GOVERNMENT	\$0	\$0	\$0	\$0	\$18,802,713	0.0%
PRIVATE GIFTS	\$675,701	\$455,688	\$364,074	\$586,398	\$608,199	-10.0%
PRIVATE CLINICAL TRIALS	(\$13,541)	\$51,709	\$53,547	\$327,048	\$68,548	-606.2%
PRIVATE CONTRACTS & GRANTS	\$1,434,225	\$737,690	\$944,793	\$1,363,590	\$1,656,500	15.5%
ENDOWMENT FUNDS	\$99,686	\$96,888	\$113,505	\$147,288	\$23,278	-76.6%
OPP & EDUCATIONAL FUNDS	\$221,053	\$188,274	\$197,423	\$204,459	\$193,099	-12.6%
S&S -EDUCTATIONAL ACTIVIT	\$257,191	\$299,346	(\$299,328)	(\$407,720)	\$540,173	110.0%
OTHER SOURCES	\$75,672	\$85,280	(\$34,805)	\$11,127	\$10,326	-86.4%
Tota	I: \$11,198,563	\$9,407,024	\$8,095,056	\$9,106,994	\$28,487,589	154.4%

Expenditures by Fund Source Laboratory Medicine FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures LABORATORY MEDICINE (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	2,942	1,521	664	756	5,394	(1,611)	841
Research	6,718	2	35	6,682	3,187	3,531	
Total	9,660	1,523	698	7,438	8,581	1,920	841

Source: UCSF Controller's Office

DEPARTMENT OF MEDICINE

- Chair King, Talmadge E. M.D.
- Business Officer Chrisman, Maye
- Website http://medicine.ucsf.edu/index.html

The Department of Medicine is divided into 19 divisions:

- Allergy/Immunology
- Cardiology
- Clinical Pharmacology
- Endocrinology, Metabolism and Osteoporosis
- Experimental Medicine
- Gastroenterology
- General Internal Medicine
- Geriatrics
- Hematology/Oncology
- Hospital Medicine
- Infectious Diseases
- Lung Biology Center
- Medical Genetics
- Nephrology
- Occupational and Environmental Health
- Positive Health
- Prevention Science
- Pulmonary and Critical Care
- Rheumatology

Division of Allergy Immunology

Website: http://medicine.ucsf.edu/divisions/allergy/

The Allergy/Immunology Division, based at the UCSF Medical Center at Parnassus, provides clinical care, offers training, and conducts research on disorders of the immune system in children and adults, whether those of exaggerated or misdirected immune responses (egs., anaphylaxis, asthma) or of insufficient immune function (eg, common variable immunodeficiency).

The Allergy/Immunology Practice provides outpatient consultative and continuous care, and inpatient consultative care, for the full range of allergic diseases, including asthma, allergic rhinitis, sinusitis, and dermatitis, for food allergies, urticaria, and anaphylaxis, and also for non-HIV disorders of immunodeficiency (common variable immunodeficiency, hypgammaglobulinemia, etc). The combined Ches/Allergy outpatient practice offers a full range of diagnostic and treatment services for allergic diseases, including skin testing, desensitization programs, nasopharyngoscopy, spirometry, and measurement of exhaled nitric oxide.

Division of Cardiology

Website: http://medicine.ucsf.edu/divisions/cardiology/

There are three separate Divisions of Cardiology, based at the UCSF Medical Center at Parnassus, the San Francisco General Hospital Medical Center, and the San Francisco VA Medical Center. The Cardiology Division of the Department of Medicine is an integral part of the UCSF Medical Center HEART AND VASCULAR CENTER, which is dedicated to the diagnosis and treatment, and eradication of heart and vascular disease through research. Despite declining death rates, heart and vascular disease is still the number one cause of death in industrialized nations.

The UCSF Cardiology Faculty Practice is using today's most sophisticated tools to diagnose heart and vascular disease in people who may be at high-risk, such as those with a family history of heart disease, high blood pressure, high cholesterol or those nearing middle age and worried about a lifestyle that has been harsh on the heart.

Screening in the UCSF Cardiology Faculty Practice consists of laboratory tests to measure the amounts of fats and cholesterol in the blood, and a combination of non-surgical imaging technologies that provide physicians a window into the heart. Also, the full range of heart disease prevention and treatment are available from drug therapy to invasive procedures and surgery.

Subspecialty sections of the Cardiology Division include electrophysiology (heart rhythm), heart failure/transplantation, pulmonary hypertension/lung transplantation, echocardiography, stress testing (ECG, nuclear, ultrasound) and advanced cardiac imaging (MRI and CT scan).

Clinical Services

Clinical services include the outpatient Cardiology Faculty Practice, Cardiac Electrophysiology Service, inpatient Cardiology Service, inpatient Cardiology Consultations, Interventional Cardiology, and the Heart Failure/Transplantation Service.

Research

Cardiology faculty are involved in a wide range of basic (laboratory) and clinical (patient) research. UCSF's strength over the years has been the investigation of new therapies for heart disease, such as catheter ablation of heart rhythm disturbances. More recently, we have begun to study the application of stem cells to the treatment of heart disease.

Clinical Pharmacology & Experimental Therapeutics

Website: http://medicine.ucsf.edu/divisions/clinpharm//

The Division of Clinical Pharmacology & Experimental Therapeutics in the Department of Medicine, located at the San Francisco General Hospital campus, is an interdepartmental unit that engages in numerous research projects relating to smoking and health issues. Under the leadership of Dr. Neal Benowitz MD, an expert on smoking and health, and in particular the human pharmacology of nicotine. The division conducts research projects that focus on the study of human pharmacology of nicotine, with an emphasis on nicotine addiction. Among the issues currently being explored and studied include (1) the role of nicotine in controlling cigarette smoking and the use of other forms of tobacco; (2) the pathways and genetics of nicotine metabolism and pharmacological activity of nicotine breakdown substances; (3) phamacogenetics of nicotine addiction treatment; (4) racial/ethnic differences in nicotine pharmacology and addiction; (5) assessement of exposure to tobacco smoke in smokers and people exposed to secondhand smoke; (6) nicotine based tobacco regulation interventions; and (7) studies of exposure to smoke constituents from Hookah smoking and other novel smoking products; The division also does research on drugs of abuse such as gamma hydroxybutyric acid (GHB) and dextromethorphan.

In addition, the Division of Clinical Pharmacology & Experimental Therapeutics also commits to teaching and patient care. The Clinical Pharmacology Service at SFGH serves both adult and pediatric patients. The major discharge/treatment diagnoses for Clinical Pharmacology services at SFGH include overdose from prescribed medications, herbal treatments, or substances of abuse, accidental poisoning from ingestion of toxic substances, toxic reactions to prescribed medications and poisoning from spider, insect or snake bites. The service also provides consultation on drug interaction and safety and the use and interpretation of levels of drugs in blood to guide optimal medical therapies.

The Division's teaching activities include the Therapeutics Course (Med 140.22), which is open for enrollment to 4th year medical students every October. This is one-month elective course held every year involves participation from approximately 30 faculty members, many from SFGH. Furthermore, the Postdoctoral Training Program, co-sponsored by the Departments of Medicine-SFGH and Biopharmaceutical Sciences, includes training in Clinical Pharmacology and Experimental Therapeutics, Medical Toxicology (ACGME accredited) and combined 3-year fellowship program with Occupational & Environmental Medicine.

Division of Endocrinology, Metabolism and Osteoporosis

Website: http://medicine.ucsf.edu/divisions/endocrine/

Endocrinology is the study of hormones and the treatment of hormone based diseases. The endocrine glands produce chemicals called hormones. These hormones are released into the blood stream and then have their action by stimulating other organs in the body. The major endocrine glands are the thyroid, pancreas, adrenal and pituitary. The hormones from these glands regulate growth, metabolism, blood pressure, reproduction as well as many other necessary functions.

For over 50 years, the Divisions of Endocrinology – at UCSF Medical Center at Parnassus, the San Francisco General Hospital Medical Center, and the San Francisco VA Medical Center – have been international leaders in both clinical endocrinology and basic endocrine research.

Our goals remain simple. We bring the questions and unknowns from our patient's bedside to the research laboratory, to not only help improve our understanding of disease process, but to bring about new therapeutic modalities. We then bring the advances of the laboratory back to our patients.

Members of our divisions are world recognized and distinguished in their research and treatment of diabetes, osteoporosis, adrenal disease, thyroid disease and pituitary disease.

Division of Experimental Medicine

Website: http://medicine.ucsf.edu/divisions/experimental/

The mission of the Division of Experimental Medicine, based at the San Francisco General Hospital Medical Center, is to understand the human immune system so that lifesaving therapies and vaccines can be developed to protect against chronic infectious diseases of global importance, such as HIV/AIDS; and to establish a training environment that fosters patient-oriented research, both here and abroad.

Division of Gastroenterology

Website: http://medicine.ucsf.edu/divisions/gi/

The Department of Medicine's Gastroenterology Divisions – based at the UCSF Medical Center at Parnassus, the San Francisco General Hospital Medical Center, and the San Francisco VA Medical Center – includes 35 full-time faculty, 12 trainees, and 30 administrative and research staff at four different UCSF teaching hospitals. The Division is dedicated to the highest standards of clinical care and teaching, as well as to research leading to new approaches to the prevention, diagnosis, and treatment of gastrointestinal disease.

The Division of Gastroenterology specializes in the following:

- Diseases of the Liver and Biliary System
- Liver Transplantation
- Inflammatory Bowel Disease
- Cancer of the colon and Esophagus
- Obesity, Diabetes and the Liver Disease of Obesity
- Bowel Mobility Disorders

Division of General Internal Medicine

Website: http://medicine.ucsf.edu/divisions/gim/

The Division of General Internal Medicine is located and managed decentrally at three campuses of the University of California, San Francisco: the UCSF Medical Center at Parnassus, the San Francisco General Hospital Medical Center, and the San Francisco VA Medical Center. Each site has its own uniqueness but all excel in the delivery of high quality, culturally sensitive and linguistically appropriate primary and preventive health care; conducting innovative, population-based and epidemiological research; and training the best doctors of the future.

Clinical Studies

The Division of General Internal Medicine has a long history of clinical research by both our own investigators and non-DGIM investigators recruiting from our practice. Currently, in General Medical Practice (located on the main campus at UCSF) we follow approximately 18,000 patients who make approximately 40,200 annual patient visits. These patients are seen by 21 faculty physicians, 30 primary care resident physicians, 28 categorical resident physicians, and 5 nurse practitioners.

Residency Program

The UCSF Primary Care/General Internal Medicine Residency is a three-year program designed to train internists in both ambulatory and hospital care. As a part of the Department of Medicine Residency Program at the University of California, San Francisco (UCSF), it combines intensive in-hospital training with structured training in ambulatory medicine in a general internal medicine group practice, in internal medicine subspecialties, and in non-internal medicine specialties essential to the practicing general internist. The primary care residency is fully integrated with the Department of Medicine's other internal medicine residency programs. The primary care residents and the general internal medicine faculty participate in all Department of Medicine teaching and service activities.

Division of Geriatrics

Website: http://medicine.ucsf.edu/divisions/geriatrics/

Our Mission

To improve the care of older persons through teaching, discovery, and the care of patients.

Our Vision

To transform the lives of older persons worldwide.

Who We Are

We are 50 faculty, fellows, and staff whose work is grounded in deep commitment to and respect for older persons, especially those who are ill or frail. We are a young, vital Division that values integrity, excellence, and preeminence in all we do. We work in the community and on virtually every UCSF campus – Parnassus, San Francisco VAMC, San Francisco General Hospital, Laurel Heights, Mission Bay, China Basin, and Lakeside Senior Medical Center.

Our Work

As doctors, we care for patients in their homes and in hospitals, clinics, and long-term care settings. As teachers, we teach medical students, resident physicians, physicians in practice, and other learners, and we train the next generation of leaders of geriatric medicine. As scientists, we seek to understand the causes and outcomes of illness in older persons, and to improve their health and well-being.

Divisions of Hematology/Oncology

Website: http://medicine.ucsf.edu/hemonc/

The faculty of the Divisions of Hematology and Medical Oncology – managed separately at the UCSF Medical Center at Parnassus, the San Francisco General Hospital Medical Center, and

the San Francisco VA Medical Center – are dedicated to being leaders in the field of healthcare. Our faculty conduct over 10,000 patient visits and consults a year in five areas of specialization at four sites. Our standards for patient care are high and we strive to exceed those standards by understanding the fundamental importance of continuing the medical education of our faculty, utilizing the most up-to-date equipment and techniques, and pursuing vigorously high quality assurance standards through patient feedback and self-assessment.

Our Divisions excel in the pursuit of cutting-edge research in both basic science and clinical research science. In addition to extensive clinical research opportunities provided by our close relationship with the UCSF Comprehensive Cancer Center (the only one of its kind on the west coast), we have extensive support from the National Institute of Health and the National Cancer Institute. Our faculty are investigators on four Spore grants, prestigious national awards.

We have a developed an exceptional educational program for our faculty and our fellows, both research and clinical. There is no clinical fellowship program like ours in the country. We offer a comprehensive curriculum that includes thorough didactic and practical training. We provide mentorship and advisement from the first day of fellowship. We maintain forums for feedback from our trainees that we are consistently evaluating and incorporating into our program. We offer specific and consistent guidance and support around research and professional development. We understand the exceptional potential of our trainees and work to create opportunities to propel the physician scientist to national prominence.

Our faculty are committed to serving as a resource for our community. We incorporate community outreach in our strategic goals for the Divisions. Our ultimate goal is to not only change the face of Cancer and Blood Disorders around the world but to change individual lives.

Divisions of Hospital Medicine

Website: http://medicine.ucsf.edu/divisions/hospmed/

The Divisions of Hospital Medicine – located at the UCSF Medical Center at Parnassus and the San Francisco General Hospital Medical Center – are national leaders in clinical care, education, and research. Hospitalists care for inpatients on the general medicine service at the UCSF and SFGH Medical Centers, as well as on the general medical consult service and the palliative care service. In addition to their clinical work, the Divisions of Hospital Medicine focus on excellence in teaching, research, and systems improvement.

The divisions have achieved a remarkable number of "firsts" in hospital medicine:

• Coined the term hospitalist (in a 1996 article by Robert Wachter, MD, and Lee Goldman, MD in the New England Journal of Medicine)

University of California, San Francisco Institutional Profile - FY 2007-08

School/Department Profiles - School of Medicine

- Published the first peer-reviewed paper on hospitalists' positive impact on clinical care in JAMA
- Hosted the first hospital medicine CME course in 1997; the course remains the nation's most popular and is now in its 10th year.
- Edit the field's main textbook, Hospital Medicine
- Established the nation's first hospital medicine fellowship
- Established one of the most highly respected inpatient palliative care services in the United States, now the site of a national palliative care leadership center
- Edit the major case-based series on End of Life care in the United States, Perspectives of Care at the Close of Life, in JAMA
- Edit the first case-based series on medical errors ("Quality Grand Rounds" in the Annals of Internal Medicine), the popular journal on medical errors, AHRQ WebM&M and the federal medical errors portal, AHRQ Patient Safety Network, and wrote the bestselling book on medical errors, Internal Bleeding: The Truth Behind Americas Terrifying Epidemic of Medical Mistakes
- Helped found the Society of Hospital Medicine; two of the society's first eight presidents (Drs. Wachter and Pantilat) are from UCSF, and two members of the group have received the society's Young Investigator Award (Drs. Auerbach and Shojania)

Over the past few years, articles describing the program have appeared in virtually every major medical publication, along with the New York Times, the LA Times, and the Washington Post.

Mission Statement

- 1. To provide the highest quality inpatient care, and to do so efficiently
- 2. To redefine and improve the standard of inpatient care
- 3. To excel as educators in conveying the principles of evidence based inpatient medicine to students, residents, colleagues, and patients, and transmitting the excitement, gratification, and humanism of hospital medicine
- 4. To remain academic leaders in hospital medicine, helping bring new knowledge and insight into quality improvement, patient safety, end of life care, evidence-based medicine, and clinical research

Division of Infectious Diseases

Website: http://medicine.ucsf.edu/divisions/id/

The Division of Infectious Diseases at UCSF is an academic division in the Department of Medicine with both a clinical and research focus. We exist over 3 sites (UCSF Medical Center, San Francisco General Hospital, and the San Francisco Veterans Affairs Medical Center) and have affiliations with institutions including the San Francisco Department of Public Health, UC

Berkeley's School of Public Health and the Training in Malaria Research in Uganda Program. We offer a rigorous fellowship program with Clinical Research and Basic Science Research tracts dedicated to producing physician-scientists of an exceptional caliber. We have a top-notch research community within the division, with extensive NIH and private foundation support. We have several patient care in-patient and out-patient outlets with services including UCSF's Positive Health Practice and the Women's Interagency HIV Study.

Mission Statement

Our mission is to maintain the high standard of excellence associated with UCSF by delivering outstanding patient care, developing cutting edge research and providing some of the best Infectious Diseases training in the world.

Lung Biology Center

Website: http://medicine.ucsf.edu/divisions/lbc//

The Lung Biology Center (LBC) is a research division in the Department of Medicine at the University of California, San Francisco. It's mission is to study important questions about diseases of the lung and airways through cellular and molecular biology. The division has facilities and faculty at the Mission Bay Campus and the San Francisco General Hospital Medical Center campus.

Division of Medical Genetics

Website: http://medicine.ucsf.edu/divisions/medgen/

The Division of Medical Genetics, based at the UCSF Medical Center at Parnassus, was created in 2004 to serve as a focus within the Department of Medicine for clinical care, scholarly research, and genetics education.

In the realm of clinical care, the Division provides an adult genetics inpatient consultation service as well as partnering with the Pediatric Genetics service in providing outpatient care and counseling to adults with rare, complex genetic disorders in themselves or their families. In addition, the Division's founding vision is to form strong partnerships with various subspecialties of internal medicine in order to develop specialized genetics-oriented clinics managed jointly by medical genetics and the subspecialty physicians. Such a partnership is beginning already in cardiovascular disorders with the launch of the Program in Cardiovascular Genetics within the UCSF Heart and Vascular Center that will focus on familial cardiomyopathies, familial arrhythmias, Marfan syndrome, and adults with corrected congenital heart defects. A similar partnership will begin soon with the highly successful and well-established Cancer Risk Program in

the UCSF Cancer Center. Plans for joint clinical activities with the Memory and Aging Center, focusing on hereditary dementias, are also under development.

Scholarly research is a key component of the Division's activities. Research interests of the primary and adjunct members of the Division range from molecular and cellular biological studies of genetic disease to gene discovery to genetic epidemiology and clinical research. The Division is tightly integrated into the new UCSF Institute for Human Genetics.

Education in genetics is the third, important component of the Division's mission. Members of the Division partner with the Pediatric and Reproductive Genetics Divisions in training Genetics Residents and Fellows in the UCSF-Stanford Joint Fellowship, serve as faculty on the NIH-funded Genetics Training Grant, and have a primary role in teaching genetics in the medical school curriculum. Members of the Division are also heavily involved in graduate education in the genetics track of the Biomedical Sciences Graduate Program.

Division of Nephrology

Website: http://medicine.ucsf.edu/divisions/nephrology//

The Division of Nephrology at the University of California-San Francisco has a long and distinguished history. Over the past four decades, the UCSF has been a major source of leaders and investigators in nephrology at academic centers throughout the United States. Prior faculty members have included Drs. Robert Alpern, Allen Arieff, Barry Brenner, Martin Cogan, Laurence Earley, Isidore Edelman, Floyd Rector, Jr., Robert Schrier, and David Warnock.

Our mission today continues to be expanding the frontiers of basic and clinical investigation in nephrology, training the next generation of academic nephrology leaders and providing the highest level of patient care.

Current faculty members are based at the UCSF Medical Center at Parnassus, San Francisco General Hospital and the San Francisco VA Medical Center. They include winners of the American Society of Nephrology Young Investigators Award (Stephen Gluck, Alan Verkman) and the Belding Schribner Award (Curtis Morris, Anthony Sebastian); multiple members of the American Society for Clinical Investigation or Association of American Physicians (Glenn Chertow, Steve Gluck, Harlan Ives, David Lovett, Curtis Morris, Anthony Sebastian, Alan Verkman), and the current President of the American Society of Transplantation (Flavio Vincenti).

Available mentors include numerous physician-scientists in the Nephrology Division who hold R01-level grants in basic science (Stephen Gluck, Michael Humphreys, David Lovett, David Pearce, Alan Verkman) or clinical research (Chi-yuan Hsu, Kirsten Johansen, Curtis Morris). Active basic research programs focus on the molecular and cell biology of vacuolar H-ATPase,

regulation of sodium balance, regulation of epithelial ion transport, mechanisms of water transport in renal epithelia and pathology of renal matrix metabolism. Patient-oriented and clinical research projects include the impact of intensity of dialytic therapy on patient outcomes, epidemiology of chronic kidney disease, acute renal failure and end-stage renal disease and mechanisms of salt-sensitive hypertension. Numerous UCSF faculty members in the Departments of Anatomy, Biochemistry and Biophysics, Epidemiology and Biostatistics as well as the Division of General Internal Medicine are also active members of our fellowship training program.

Our training program includes tracks for both clinician-educators as well as physician-scientists. In the past 10 years, among the 50 physician-scientist trainees who graduated, 32 (64%) now hold United States or Canadian university faculty positions. Fifteen graduates have gone on to become principal investigators of K08/K23, their equivalent (e.g. VA Career Development) or higher (e.g. R01, P01) awards.

We also take great pride in the excellence of our clinical programs. UCSF Medical Center has performed more kidney transplants than any other institution in the world (over 8,000 since 1964). Members of the Division are active participants in several NIH-sponsored clinical trials of dialysis therapy, both for acute renal failure and for end-stage renal diseases, thus bringing cutting edge theapuetic interventions to the bedside.

Division of Occupational and Environmental Medicine

Website: http://medicine.ucsf.edu/divisions/oem/

The Divisions of Occupational and Environmental Medicine – at the University of California San Francisco Medical Center at Parnassus and the San Francisco VA Medical Center – provides clinical services, consultation to industry and labor, conducts basic and applied research in occupational and environmental health, and trains health specialists in medicine, nursing, ergonomics, and industrial hygiene. The Division is a component of the Center for Occupational and Environmental Health (COEH), along with programs at the University of California Berkeley and Davis.

Positive Health

Website: http://medicine.ucsf.edu/divisions/php/

From the first reports of the epidemic over 20 years ago, the UCSF Positive Health Program (PHP) at San Francisco General Hospital has led the world in defining best practices of clinical care in HIV/AIDS medicine.

PHP is an interdisciplinary, 501(c)3 non-profit organization providing specialized primary care to thousands of people in San Francisco living with HIV.

Every day in Building 80 on the San Francisco General Hospital, PHP serves hundreds of primary care patients and dozens of clinical trials volunteers. Primary care is provided on the sixth floor-Ward 86-and services include HIV clinical care, psychosocial support services and specialized programs to support healthy living.

The Positive Health Program has a major presence in the developing world training local providers and leading global research. PHP's faculty is among the most cited in scientific publications and conducts work in all major areas of HIV science.

PHP also produces CME-accredited education programs including a weekly HIV Grand Rounds lecture series and the annual Medical Management of AIDS conference now in its seventeenth year.

All of PHP's staff commits to focusing first on patient wellbeing and to working towards a collective mission "to explore, learn, teach, heal and comfort."

Division of Preventions Science

Website: http://medicine.ucsf.edu/divisions/caps/

The mission of the Division of Preventions Science (formerly the Center for AIDS Prevention Studies, or CAPS), based in the UCSF Medical Center at Parnassus and our administrative offices at 50 Beale Street, is to conduct domestic and international research to prevent the acquisition of HIV and to optimize health outcomes among HIV-infected individuals.

The Center for AIDS Prevention Studies (CAPS) was established in 1986 to:

- Conduct local, national, and international interdisciplinary research on methods to prevent HIV infection and its consequences.
- Stimulate collaboration among academic researchers, public health professionals, and community-based organizations.
- Train new scientists to conduct AIDS prevention research.
- Disseminate knowledge, skills, and effective research and prevention models.
- Contribute to policy development related to the HIV epidemic at local, state, national, and international levels
- Analyze and resolve ethical issues related to HIV research, prevention, and care.
- Collaborate with scientists from developing countries to conduct AIDS prevention research.

Divisions of Pulmonary and Critical Care Medicine

Website: http://medicine.ucsf.edu/divisions/pulmonary/

The Pulmonary Division at UCSF has a long history of contribution to the care of patients with lung disease, of innovative research, and of training academic pulmonologists. The Division was developed in concert with the organization of the Cardiovascular Research Institute at UCSF by Julius Comroe in 1958. Dr Comroe, aside from developing and establishing much of modern pulmonary function testing, succeeded in attracting a cadre of strong scientists to UCSF, including John Severinghaus, John Clements, John Murray, and many others who subsequently contributed much to Pulmonary Medicine as it is known and practiced today. Clinical and research training have been an integral part of the Division and the CVRI since its earliest days. John Murray directed one of the earliest NIH training grants in pulmonary medicine beginning in 1966. Julius Comroe subsequently led this program into the 1970s while John Murray established a Pulmonary Section at the San Francisco General Hospital. Jay Nadel assumed the role as Director of the Research Training Grant in 1977 and continues now in this role. Since its inception the Research Training Program at UCSF has been continually funded by the National Institute of Health. Nearly a quarter of all academic pulmonologists in the United States have trained at UCSF.

The mission of the Pulmonary Division today is to continue to provide comprehensive medical care for the community, to develop innovative research aimed at elucidating basic mechanisms of disease, and to translate its research activities into both new clinical initiatives and a rich training environment for the next generation of academic physician scientists. Although the Pulmonary Division has one overall mission, it is inherently multi-dimensional. The Division is comprised of three hospital sites, each of which emphasize different aspects of care for patients with lung disease. The Division is also intricately linked to the Cardiovascular Research Institute and the Immunology Program on the Parnassus campus and the Lung Biology Center on the San Francisco General Hospital campus. The 42 Division faculty have diverse interests and expertise. This Web site highlights these important elements of the Division and hopefully facilitates communication and information access for patients, practicing physicians, scientists, and trainees interested in a career in pulmonary medicine.

Divisions of Rheumatology

http://medicine.ucsf.edu/divisions/rheum/

The missions of the Divisions of Rheumatology at UCSF are to provide outstanding cutting edge clinical care, to advance the discipline through clinical and basic research, and to train the next generation of academic rheumatologists. Our programs are located at three campuses of UCSF: the Parnassus Heights campus, the location of the Moffitt-Long Hospital; the Fort Miley Veterans Administration Center in the outer Richmond district; and the San Francisco General Hospital in the Mission District. Although physically separated, the programs are highly integrated and interactive.

The clinical programs at all three sites provide comprehensive and consultative clinical care to patients with rheumatologic diseases in the outpatient and inpatient settings. We provide care to patients with a wide spectrum illnesses that characterize the rheumatologic diseases such as rheumatoid arthritis, systemic lupus erythematosus and the vasculitides. Our clinical services provide and have helped develop cutting edge new therapies.

The research programs span the spectrum of the most fundamental research questions that underlie the pathogenesis of rheumatologic diseases to research involving clinical trials of new therapies as well as studies of health care delivery systems. We now have unprecedented opportunities in basic research and in the availability of new therapeutics to address questions related to rheumatologic diseases. As a consequence we are experiencing a large expansion of our research programs. These comprehensive research programs are being funded by a wide range of sources including the National Institutes of Health, the Arthritis Foundation, the Howard Hughes Medical Institute, philanthropic efforts and industry. Philanthropic support of research efforts and educational programs is coordinated by The Rosalind Russell Medical Research Center for Arthritis which was established and sited at UCSF by an act of Congress.

The educational programs of the division involve teaching activities in the medical school, graduate school, internship and residency programs and at the subspecialty fellowship level. We actively participate in continuing medical educational programs for physicians in practice. Our highly regarded subspecialty training program in rheumatology aims to produce outstanding scientists and physicians in the subspecialty of rheumatology.

FY 2007-08 Headcount as of 4/3/08 MEDICINE

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
999	173	350	585	1770

Source: UCSF Human Resources

Permanently Budgeted FTEs MEDICINE

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	80.
Permanent Budget Account Title	Academic Staff	Staff	Academic	Staff						
LUNG BIOLOGY CENTER-RECHARGE	0.10	5.15	0.10	5.15	0.03	3.81	0.03	3.81	0:30	0.49
MED RES-SPECIAL-METABOLIC	1.00		1.00		1.00		1.00			1.00
MED SCH-MEDICINE-GENERAL	45.16	26.58	44.66	22.27	44.66	22.27	44.66	22.27	44.66	22.27
MED SCH-MEDICINE-SFGH		12.50		12.02		13.32		12.02		12.02
MR-MED-ONCOLOGY-CRI		1.45		1.45		1.45				1.45
MR-MED-SPECIAL-CRI	0.50		0.50		0.50					
MR-MEDICINE-GENERAL		09.0		09.0		09.0		09.0		09.0
MR-MEDICINE-SFGH		0.09		0.09		0.09		0.09		0.09
MR-MED-ONCOLOGY-CRI								1.45		1.45
MR-MED-SPECIAL-CRI							0.50		0.50	
ORG ACCT/MED	0.05	6.32	0.05	6.34	0.02	17.05	0.02	15.78	0.02	17.53
ORG ACT-DEPT MED-SFGH	0.30	11.08	0.30	11.12	0.40	9.75	0.40	10.25	1.50	10.00
ORG ACT-MED S F G HOSPITAL-GENERAL	0.35	4.74	0.34	4.68	0.32	3.90	0.32	3.82	0.31	5.50
PRO FEE-MED-SFGH-ERGONOMICS PROGRAM		1.41		1.10		1.15		1.15	0.20	2.80
S/M OCCUPATIONAL HEALTH CENTER	8.20	4.08	8.20	4.08	8.10	4.01	8.10	4.01	8.10	4.01
SFGH AIDS CLINIC		0.13		0.13		0.20		0.28		0.08
Total:	55.66 74.13	74.13	55.15	69.03	55.03	77.60	22.03	75.53	69.39	79.29

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 MEDICINE

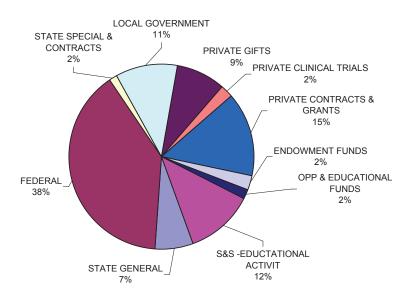
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$71,657,955	\$57,287,055	\$19,829,524	34.61%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$1,919,931	\$1,617,280	\$291,420	18.02%
Local Government	\$19,640,145	\$19,063,183	\$404,826	2.12%
Private Clinical Trials	\$3,862,835	\$3,516,989	\$1,184,196	33.67%
Private Contracts & Grants	\$27,310,696	\$25,160,760	\$5,086,151	20.21%
Total:	\$124,391,562	\$106,645,267	\$26,796,116	25.13%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source MEDICINE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$11,720,640	\$11,158,383	\$11,775,659	\$11,516,960	\$12,281,481	4.8%
TUITION & FEES	\$3,006,940	\$1,785,256	\$292,117	(\$55,712)	\$530,593	-82.4%
FEDERAL	\$72,619,924	\$78,774,688	\$79,779,228	\$76,285,248	\$71,657,955	-1.3%
STATE SPECIAL & CONTRACTS	\$4,202,044	\$3,219,113	\$2,411,117	\$2,698,663	\$2,904,063	-30.9%
LOCAL GOVERNMENT	\$17,075,698	\$15,679,392	\$16,238,327	\$18,134,427	\$19,640,145	15.0%
PRIVATE GIFTS	\$11,195,832	\$9,496,698	\$13,576,685	\$13,716,887	\$15,559,021	39.0%
PRIVATE CLINICAL TRIALS	\$2,321,446	\$3,785,608	\$3,220,792	\$4,636,558	\$3,862,835	66.4%
PRIVATE CONTRACTS & GRANTS	\$18,368,110	\$20,033,628	\$22,955,587	\$25,764,887	\$27,310,696	48.7%
ENDOWMENT FUNDS	\$3,068,085	\$3,565,562	\$5,552,992	\$4,641,543	\$4,329,114	41.1%
OPP & EDUCATIONAL FUNDS	\$1,851,102	\$3,115,887	\$2,947,442	\$3,116,727	\$3,144,079	69.8%
S&S -EDUCTATIONAL ACTIVIT	\$5,550,672	\$13,835,756	\$5,391,677	\$9,465,758	\$21,664,097	290.3%
OTHER SOURCES	\$613,477	(\$3,999,562)	(\$1,255,671)	\$439,663	\$500,032	-18.5%
RESERVES	\$10,323	(\$22,101)	\$28,873	(\$53,000)	(\$8,286)	-180.3%
Total:	\$151,604,293	\$160,428,307	\$162,914,824	\$170,308,610	\$183,375,825	21.0%
					<u>'</u>	

Expenditures by Fund Source Medicine FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08
Current Funds Expenditures
MEDICINE
(Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	24,462	9,978	5,460	9,023	50,132	4,466	30,137
Research	127,389	1,815	562	125,012	70,306	57,106	23
Total	151,851	11,794	6,022	134,035	120,438	61,573	30,160

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

MEDICINE

		Number	Amount
Research Grants		302	\$152,488,693
Training Grants		19	\$7,392,323
Fellowships		11	\$549,147
Other Awards		1	\$141,717
R&D Contracts*		0	\$0
Te	otal:	333	\$160,571,880

^{*}Not reported

DEPARTMENT OF NEUROLOGICAL SURGERY

- Chair Berger, Mitchel S, M.D.
- Business Officer Garrity, Elizabeth J.
- Website http://neurosurgery.medschool.ucsf.edu/

Patient Care

UCSF's Neurosurgery service ranked in the top five of U.S. News and World Report's 2007 roster of the best neurosurgery services in the United States, and the UCSF Medical Center was ranked among the top ten hospitals. Our integrated array of clinical programs provides the full range of adult and pediatric neurological surgery specialty services, including treatment planning, surgery, auxiliary therapies, and rehabilitation. Clinical specialties for each clinical program are as follows:

- Brain Tumor Center at UCSF
- Brain Tumor Surgery Program for Adults
- Central Nervous System Injury
- Cerebrovascular Disorders
- Clinical Neuro-Oncology
- Epilepsy Surgery Program
- Radiosurgery Program
- Movement Disorders and Parkinson's
- Nerve Injury Program
- Neurospinal Disorders
- Pain Management
- Pediatric Neurological Surgery Program
- California Center for Pituitary Disorders at UCSF
- Subservices

Neurosurgery Research

Neurological Surgery Research Centers at UCSF

Clinician researchers, basic scientists, clinical trialists, research specialists, postdoctoral fellows, and an administrative staff all support research efforts in the Department of Neurological Surgery. Communication and collaborations among researchers and clinical faculty in the research centers provide a productive environment for research trainees. A large body of publications results from these research efforts each year.

Source: Neurological Surgery 9/25/2008

Current funding for research in the Department totals approximately \$7,000,000 per year. Most research is funded by grants from the National Institutes of Health (NIH). Other funding resources include private agencies, such as the American Cancer Society, and gifts and endowments from our patients, their families, and friends.

Neurological surgery research includes:

- Brain Tumor Research Center (BTRC) At the forefront of brain tumor research since 1972, the Brain Tumor Research Center (BTRC) is an integrally related program of basic science and clinical research investigating brain tumor biology and therapy, including radiation injury and repair, drug resistance, neuro-oncology, developmental neurobiology, and gene therapy.
- **Brain and Spinal Injury Center (BASIC)** Injury of the central nervous system has devastating consequences, both to the individual and to society, but progress is being made in the diagnosis and treatment of brain and spinal cord injury. The mission of the Brain and Spinal Injury Center (BASIC) is to promote collaborative basic and clinical studies on injuries to the brain and spinal cord.
- Cerebrovascular Research Cerebrovascular research in the department is concerned
 with ischemia and functional recovery, as well as the pathophysiology of arteriovenous
 malformations.
- Epilepsy Research Epilepsy research in the Department of Neurological Surgery is centered on experimental surgical treatments and basic neurobiology studies. The overall goal of our research program is to elucidate basic mechanisms through which a normal brain becomes "epileptic" and to develop novel treatment options, based on this information, for patients suffering with epilepsy.
- Movement Disorders Research Movement disorders research in the department
 includes experimental surgical treatments, gene therapy for Parkinson's disease, neurotransplantation strategies for Parkinson's disease, associated intraoperative neuroimaging techniques, basal ganglia physiology in movement disorders, and neurophysiological correlates for movement disorders.
- Pain Research Pain research in the department includes projects on cortical modulation of pain behavior, modeling fibromyalgia and associated pain in rats, and central nervous system (CNS)-modulated peripheral inflammation.
- **Pediatric Clinical Research** Current research projects focus on pediatric neurological and neurosurgical disorders, including pediatric brain tumors, congenital hydrocephalus, and fetal repair of myelomeningocele.

Source: Neurological Surgery 9/25/2008

FY 2007-08 Headcount as of 4/3/08 NEUROLOGICAL SURGERY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
74	8	58	52	195

Source: UCSF Human Resources

Permanently Budgeted FTEs NEUROLOGICAL SURGERY

	FY 2003-04	FY 2004-05 FY 2005-06 FY 2006-07	FY 2005-06	FY 2006-07	FY 2007-08	8
Permanent Budget Account Title	Academic Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Academic Staff	Academic Staff	Academic S	staff
MED SCH-NEUROSURGERY	5.00 3.43	2.00 3.30	5.00 3.30	5.00 3.30	2.00 3.30	3.30
ORG ACTONEUROSURGERY BIOSTATISTICS			0.25 2.21			
S/M DEPT OF NEUROLOGICAL SURGERY		0.01 0.10	0.01 0.10	0.01 0.10	0.01 0.10	0.10
Total:	5.00 3.43	5.01 3.40	5.26 5.61	5.01 3.40	5.01 3.40	3.40

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 NEUROLOGICAL SURGERY

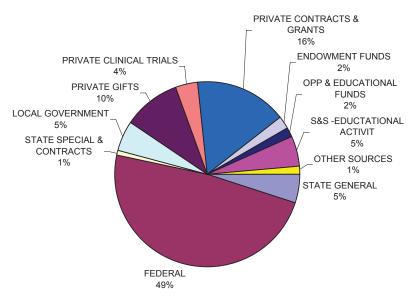
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$11,360,264	\$9,810,256	\$4,247,167	43.29%
CIRM	\$73,979	\$73,979	\$39,653	53.60%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$1,240,729	\$1,240,729	\$0	0.00%
Private Clinical Trials	\$894,943	\$954,200	\$247,502	25.94%
Private Contracts & Grants	\$3,765,846	\$3,655,509	\$903,342	24.71%
Total:	\$17,335,761	\$15,734,672	\$5,437,663	34.56%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source NEUROLOGICAL SURGERY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,064,074	\$953,739	\$920,581	\$1,099,998	\$1,155,857	8.6%
TUITION & FEES	\$0	\$0	\$10,000	\$0	\$0	0.0%
FEDERAL	\$6,227,737	\$8,299,182	\$8,676,616	\$8,913,487	\$11,360,264	82.4%
STATE SPECIAL & CONTRACTS	\$38,886	\$10,726	\$0	\$80,314	\$160,036	311.6%
LOCAL GOVERNMENT	\$809,655	\$981,415	\$1,056,954	\$1,158,753	\$1,240,729	53.2%
PRIVATE GIFTS	\$2,657,350	\$2,247,812	\$2,260,162	\$1,945,269	\$2,403,016	-9.6%
PRIVATE CLINICAL TRIALS	(\$15,402)	\$439,613	\$806,479	\$1,125,571	\$894,943	-5910.5%
PRIVATE CONTRACTS & GRANTS	\$2,816,786	\$3,250,521	\$3,292,792	\$2,462,078	\$3,765,846	33.7%
ENDOWMENT FUNDS	\$798,109	\$1,305,168	\$603,693	\$591,307	\$502,419	-37.0%
OPP & EDUCATIONAL FUNDS	\$230,481	\$256,812	\$387,010	\$408,846	\$430,361	86.7%
S&S -EDUCTATIONAL ACTIVIT	(\$94,976)	(\$716,607)	(\$525,701)	(\$717,339)	(\$1,227,368)	1192.3%
OTHER SOURCES	\$111,015	\$5,699	\$27,574	(\$99,645)	(\$314,666)	-383.4%
RESERVES	\$0	\$977	\$0	\$5,261	\$0	0.0%
Total:	\$14,643,714	\$17,035,056	\$17,516,159	\$16,973,899	\$20,371,437	39.1%
		·				

Expenditures by Fund Type Neurological Surgery FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures NEUROLOGICAL SURGERY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	214	767	(991)	439	8,991	998	9,776
Research	18,207	389	(529)	18,346	9,606	8,596	(5)
Total	18,421	1,156	(1,520)	18,785	18,597	9,595	9,771

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

NEUROLOGICAL SURGERY

	Number	Amount
Research Grants	22	\$12,451,781
Training Grants	0	\$0
Fellowships	5	\$253,558
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	27	\$12,705,339

^{*}Not reported

DEPARTMENT OF NEUROLOGY

- Chair Hauser, Stephen L. M.D.
- Business Officer Czech, Jane
- Website http://www.ucsf.edu/brain/

A Word From the Chair

Future generations will look back on this time as the beginning of a golden age of neurology, a time when the exact molecular causes responsible for age-old neurologic disorders were first described. Revolutionary advances have changed our understanding of both common and unusual nervous system disorders - including dementia, stroke, multiple sclerosis, motor system disease, muscular dystrophy and cancer, to name but a few - and already have produced wonderful new opportunities to effectively diagnose and treat patients. The Department of Neurology at UCSF is proud of its tradition as a leading academic center dedicated to excellence in patient care, education and research. The Department's excellence is shaped by the clinical and research faculty who provide great breadth in understanding of most neurological conditions, and by the excellence and diversity of our medical residency and postgraduate training programs. For the past several years, the Department has been at or near the top of all departments of neurology nationwide as a recipient of biomedical funding from the National Institutes of Health, and one of our faculty - Dr. Stanley Prusiner - in 1997 became the first American neurologist to receive the Nobel Prize in Medicine or Physiology.

To expand further its range of scientific focus, the Department is affiliated with several not-for-profit organizations. Among them are the Ernest Gallo Clinic and Research Center, the Gladstone Institute of Neurological Disease, and the Sandler Neurogenetics Center. In 1998, the Department and Ernest Gallo Clinic and Research Center embarked on a major state-funded medical research project to find the cause or causes of alcohol addiction and substance abuse. The Gladstone Institute, directed by Dr. Lennart Mucke, conducts a world-renowned research program into Alzheimer's disease in coordination with the Department's own Alzheimer's disease center. And the Sandler Neurogenetics Center, established in 1998, was organized to create a multi-disciplinary genetics effort among clinicians, physician-scientists, and basic neurologists to stimulate interactions and support state-of-the-art approaches into the causes, prevention and treatment of human nervous system disorders.

Stephen L. Hauser, M.D. Robert A. Fishman Distinguished Professor and Chair

Source: Neurology website, 6/30/2008

The Department of Neurology consists of the following units and affiliated organizations:

- ALS Center
- Brain Development Research Program
- Center for Cerebrovascular Research
- Epilepsy Center
- Ernest Gallo Clinic and Research Center
- Gladstone Institute of Neurological Disease
- Memory and Aging Center
- Multiple Sclerosis Center
- Multiple Sclerosis Genetics Group
- Neurogenetics
- Neurocritical Care and Stroke Program
- Neurological Fitness Unit
- Pain Clinical Research Center
- Parkinson's Diseases Center
- Pediatric MS Center
- Wheeler Center for the Neurobiology of Addiction
- San Francisco General Hospital
- San Francisco Veterans Administration Hospital

Source: Neurology website, 6/30/2008

FY 2007-08 Headcount as of 4/3/08 NEUROLOGY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
144	23	96	102	365

Source: UCSF Human Resources

Permanently Budgeted FTEs NEUROLOGY

	FY 2003-	40	FY 2004-	05	FY 2003-04 FY 2004-05 FY 2005-06 FY 2006-07	9	FY 2006-	07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff
MED SCH-NEUROLOGY	10.00	4.74	10.00	4.00	10.00 4.74 10.00 4.00 10.00 4.00	4.00	10.00 4.00	4.00	10.00 4.00	4.00
NEUROLOGY SSG RECHARGES								0.01		0.01
ORG ACT-NEUROLOGY							1.20 1.	1.20	1.20	1.20
PROF SERV MEMORY DISORDERS						0.10		0.10		0.10
Total:	10.00	4.74	10.00	4.00	Total: 10.00 4.74 10.00 4.00 10.00 4.10	4.10	11.20 5.31	5.31	11.20 5.31	5.31

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 NEUROLOGY

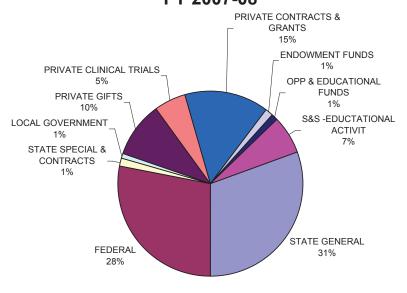
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$16,102,602	\$11,391,899	\$3,976,274	34.90%
CIRM	\$201,214	\$201,214	\$107,203	53.28%
Other State Contracts	\$619,971	\$611,353	\$49,598	8.11%
Local Government	\$554,760	\$554,760	\$0	0.00%
Private Clinical Trials	\$3,148,975	\$2,506,284	\$666,661	26.60%
Private Contracts & Grants	\$8,445,932	\$8,010,428	\$855,376	10.68%
Total:	\$29,073,454	\$23,275,938	\$5,655,112	24.30%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source NEUROLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$18,185,460	\$17,320,004	\$19,418,397	\$18,645,669	\$17,667,526	-2.8%
FEDERAL	\$10,323,518	\$11,853,307	\$14,180,130	\$15,392,519	\$16,102,602	56.0%
STATE SPECIAL & CONTRACTS	\$434,851	\$517,075	\$636,425	\$693,440	\$821,185	88.8%
LOCAL GOVERNMENT	\$425,217	\$403,134	\$393,483	\$432,285	\$554,760	30.5%
PRIVATE GIFTS	\$2,953,554	\$4,031,937	\$3,749,456	\$4,747,194	\$5,554,884	88.1%
PRIVATE CLINICAL TRIALS	\$1,223,602	\$2,239,202	\$2,498,837	\$2,687,502	\$3,148,975	157.4%
PRIVATE CONTRACTS & GRANTS	\$4,828,410	\$5,415,061	\$6,810,967	\$9,802,576	\$8,445,932	74.9%
ENDOWMENT FUNDS	\$732,127	\$1,112,354	\$898,599	\$1,371,816	\$856,867	17.0%
OPP & EDUCATIONAL FUNDS	\$273,839	\$468,501	\$467,132	\$547,454	\$674,544	146.3%
S&S -EDUCTATIONAL ACTIVIT	\$1,219,773	\$1,809,844	\$1,675,914	\$2,160,544	\$3,816,199	212.9%
OTHER SOURCES	\$933	\$61	(\$50,948)	(\$7,827)	(\$170,343)	-18352.1%
RESERVES	\$0	\$11,927	\$0	\$8,053	\$0	0.0%
Total:	\$40,601,284	\$45,182,406	\$50,678,393	\$56,481,227	\$57,473,130	41.6%
		·			•	

Expenditures by Fund Source Neurology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures NEUROLOGY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	2,683	1,515	(1,282)	2,451	5,361	1,546	4,223
Research	48,110	16,153	247	31,710	15,504	32,602	(3)
Total	50,793	17,668	(1,035)	34,160	20,865	34,148	4,220

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

NEUROLOGY

	Number	Amount
Research Grants	56	\$30,868,139
Training Grants	1	\$190,106
Fellowships	2	\$79,961
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	59	\$31,138,206

^{*}Not reported

DEPARTMENT OF OBSTETRICS, GYNECOLOGY AND REPRODUCTIVE SCIENCES

- Chair Giudice, Linda C, M.D.
- Business Officer Horning, Dixie D..
- Website http://obgyn.medschool.ucsf.edu/

Mission Statement

To Promote Health and Prevent Disease in Women by:

- Educating health care providers and investigators
- Conducting research to advance knowledge
- Providing quality health care services

Divisions Overview

There are five divisions within the Department:

- 1. Division at San Francisco General Hospital. The mission of the Division at San Francisco General Hospital is to improve the health of all women by eliminating financial, linguistic and cultural barriers to care and to provide high quality, evidenced-based, cost-effective health care to women in the context of training and research. Obstetrician-gynecologists and midwives at SFGH provide the full range of clinical care to a remarkably diverse population of women visiting the hospital, and the New Generation Health Center (for teens), The Women's Options Center (for family planning and pregnancy termination), Mission Neighborhood Health Center (for prenatal and well-woman care) and Excelsior Clinic (for midwifery care). At SFGH's Women's Health Center, Division faculty provide specialized care in endocrinology, gynecologic cancer, high-risk pregnancy and continuity care for a broad spectrum of ethnically diverse women. Research by Division faculty explores multiple areas with major projects underway in family planning and reproductive tract infections. Director: Philip D. Darney, MD, MSc
- 2. Division of General Gynecology. The Division of General Gynecology focuses on the gynecologic care of women throughout the life span. Its faculty include experts in pediatric and adolescent gynecology, family planning, dysplasia, uterine myomata, menopausal issues, urinary incontinence, pelvic organ prolapse and gynecologic surgery. Faculty research interests are focused on the epidemiology of urinary incontinence and abnormal cervical cytology, as well as the assessment of technologies such as the Pap

smear, of patient preferences for treatment options in noncancerous uterine conditions and prenatal diagnosis, and of effective treatments for urinary incontinence. The division is responsible for the core curriculum in gynecology for UCSF medical students based at the UCSF/Parnassus and UCSF/Mount Zion sites and for training in gynecology for UCSF residents rotating through those sites. Director: Elena Gates, MD

- 3. Division of Gynecologic Oncology. This division focuses on cancers of the reproductive tract. Faculty are experts in the prevention and management of precancerous abnormalities (such as dysplasia and hyperplasia) and cancer involving the vulva, vagina and cervix, uterus, fallopian tube and ovary. The Division provides clinical training for students, residents and clinical fellows in these areas through its multidisciplinary practices in the UCSF Comprehensive Cancer Center and surgical and inpatient care of women at UCSF's Moffitt-Long and Mount Zion Hospitals. Faculty are engaged in research investigating the pathogenesis, detection and treatment of cervical, ovarian and endometrial cancer. Director: John Chan, MD
- 4. Division of Perinatal Medicine and Genetics. The Division of Perinatal Medicine and Genetics provides a full line of direct clinical and consultation services to patients and physicians in all aspects of maternal care and fetal disorders. The perinatologists in this division offer expert consultations for all maternal complications, including maternal heart disease, neurologic disorders, immunologic disorders, gastrointestinal and genitourinary disorders, as well as for fetal conditions such as multiple gestations, Rh and other alloimmunization, fetal growth disorders, and all types of fetal anomalies. Division faculty direct and manage the Birth Center (site for labor and delivery and the inpatient antepartum unit), which serves as a central place in the Department for teaching obstetrics to students, residents and clinical fellows. Faculty research involves biologic and clinical investigations addressing a broad range of topics across the disciplines of maternal-fetal medicine and genetics. Director: Vacant
- 5. Division of Reproductive Endocrinology and Infertility. This division provides expertise in infertility care and assisted reproduction, reproductive endocrinology and surgery, reproductive urology, andrology, genetics and psychology. Education activities in the Division emphasize a basic understanding of the menstrual cycle and the interaction between the hypothalamus, the pituitary and the ovary with the aim of providing trainees with a greater understanding and better management of many areas of reproductive endocrinology, including abnormal uterine bleeding, amenorrhea, contraception, hirsutism, infertility, menopause and osteoporosis. Division research encompasses a broad scope of basic, translational and clinical investigations. Director: Marcelle Cedars, MD

Department-Based Research Centers and Programs

- Center for Reproductive Sciences
- Bixby Center for Reproductive Health
- Women's Health Resource Center
- Medical Effectiveness Research Center for Diverse Populations
- Program on Reproductive Health and the Environment (PRHE)
- Women's Health Clinical Research Center (WHCRC)

Patient Services

Hospital Sites

Department faculty provide clinical services to women at several UCSF campuses, including SFGH, San Francisco's Veteran's Administration Hospital, UCSF/Parnassus and UCSF/Mount Zion, as well as ancillary offices in Daly City, downtown San Francisco, Salinas, Santa Rosa and elsewhere. Each of these sites assists in providing the highest quality health care to women in the San Francisco Bay Area.

Patient services include the following:

- Obstetrics
- Gynecology
- Women's Continence Center
- UCSF Comprehensive Fibroid Center
- Reproductive Endocrinology & Infertility
- Gynecologic Oncology
- SFGH Midwifery Program
- Teen Health Services
- New Generation Health Center
- Women's Options Center at SFGH

Education and Training

Medical Students

- Research Opportunities
- CRH Internship

Graduate Student Education

- Biomedical Sciences Program (BMS)
- Program in Biological Sciences

Nurse-Midwifery Education

Residency Program

Fellowship Programs

- Clinical Fellowships
- Post-Doctoral Fellowships

Training Support

Continuing Medical Education

FY 2007-08 Headcount as of 4/3/08 OBSTETRICS, GYNECOLOGY AND REPRODUCTIVE SCIENCES

St	Staff	Aca	Academic	Grand
nii iime	Part I Ime	rull IIme	Part IIme	lotal
185	55	52	84	376

Source: UCSF Human Resources

Permanently Budgeted FTEs
OBSTETRICS, GYNECOLOGY AND REPRODUCTIVE SCIENCES

	FY 2003-04	4	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	90-
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff	staff	Academic	Staff	Academic	Staff	Academic Staff	Staff	Academic Staff	Staff
MED SCH-OBSTETRICS & GYNECOLOGY	14.00 11.87	1.87	14.00 10.64	10.64	14.00	14.00 13.44		14.00 10.64	14.00	14.00 10.64
OB/GYN-ACADEMIC SUPPORT	0	0.10		0.10		0.10		0.10		0.10
OBGYN-ORGANIZED ACTIVITY	0	0.10		0.10		0.16		0.16		0.16
ORG ACT-OB/GYN & REPRODUCTIVE SCI	0.64	4.72	0.64	4.10	0.64	4.08	0.64	4.08	09.0	3.56
ORG ACT-OBS-GYN-ENDOCRINE LAB	0	0.05								
ORG ACT-SFGH OBGYN-PROF & TECH SVC	0	0.10		0.40		0.40		0.40		0.25
REPRODUCTIVE ENDOCRINE CENTER	1.50 (0.68	1.50	0.68	1.50	0.68	1.50	1.50 0.68	1.50	0.68
Total:	16.14 17.62	7.62	16.14 16.02	16.02	16.14	16.14 18.86		16.14 16.06	16.10 15.39	15.39

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 OBSTETRICS, GYNECOLOGY AND REPRODUCTIVE SCIENCES

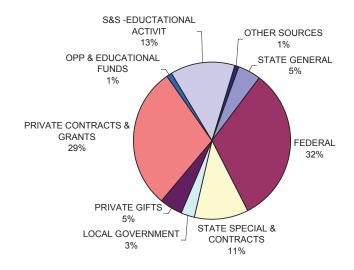
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$19,290,421	\$8,004,148	\$2,419,310	30.23%
CIRM	\$271,768	\$247,880	\$143,798	58.01%
Other State Contracts	\$6,345,854	\$6,335,762	\$601,500	9.49%
Local Government	\$1,641,842	\$1,634,038	(\$752)	-0.05%
Private Clinical Trials	\$231,507	\$203,110	\$42,287	20.82%
Private Contracts & Grants	\$17,413,214	\$10,887,102	\$897,945	8.25%
Total:	\$45,194,607	\$27,312,041	\$4,104,087	15.03%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source OBSTETRICS, GYNECOLOGY AND REPRODUCTIVE SCIENCES

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$2,190,023	\$2,203,909	\$2,456,297	\$2,610,322	\$2,784,910	27.2%
TUITION & FEES	\$129,748	\$43,808	\$60,640	\$257,364	\$35,293	-72.8%
FEDERAL	\$12,876,347	\$14,913,182	\$16,523,525	\$16,394,545	\$19,290,421	49.8%
STATE SPECIAL & CONTRACTS	\$4,464,205	\$5,480,387	\$5,901,254	\$5,954,996	\$6,651,079	49.0%
LOCAL GOVERNMENT	\$1,450,415	\$1,534,973	\$1,514,709	\$1,510,712	\$1,641,842	13.2%
PRIVATE GIFTS	\$1,455,600	\$964,729	\$1,609,326	\$2,224,405	\$2,829,688	94.4%
PRIVATE CLINICAL TRIALS	\$321,408	\$232,853	\$296,975	\$284,728	\$231,507	-28.0%
PRIVATE CONTRACTS & GRANTS	\$13,207,668	\$16,831,147	\$18,030,801	\$17,326,137	\$17,413,214	31.8%
ENDOWMENT FUNDS	\$97,969	\$91,827	\$70,647	\$57,939	\$13,444	-86.3%
OPP & EDUCATIONAL FUNDS	\$368,274	\$434,353	\$546,662	\$737,017	\$730,962	98.5%
S&S -EDUCTATIONAL ACTIVIT	\$3,487,004	\$6,047,850	\$6,498,606	\$5,622,966	\$7,939,396	127.7%
OTHER SOURCES	\$147,906	\$536,618	\$395,546	\$493,993	\$547,822	270.4%
RESERVES	\$8,531	\$0	\$0	\$0	\$0	-100.0%
Total:	\$40,205,097	\$49,315,636	\$53,904,985	\$53,475,125	\$60,109,579	49.5%

Expenditures by Fund Source Obstetrics, Gynecology and Reproductive Sciences FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures OBSTETRICS, GYNECOLOGY AND REPRODUCTIVE SCIENCES (Dollars in Thousands)

			Current Fund	s		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	8,292	2,646	4,469	1,176	12,762	4,878	9,348
Research	45,747	135	1,315	44,297	16,082	29,660	(5)
Total	54,039	2,781	5,784	45,473	28,843	34,538	9,343

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

OBSTETRICS, GYNECOLOGY AND REPRODUCTIVE SCIENCES

	Number	Amount
Research Grants	18	\$17,724,153
Training Grants	2	\$263,988
Fellowships	0	\$0
Other Awards	1	\$141,717
R&D Contracts*	0	\$0
Total:	21	\$18,129,858

^{*}Not reported

DEPARTMENT OF OPHTHALMOLOGY

- Chair McLeod, Stephen D., M.D.
- Business Officer Hicks, Diana Lynn
- Website http://ucsfeye.net/

Overview

Ophthalmology became established as a department separate from Otolaryngology in 1912 at the University of California San Francisco. Since that time the Department of Ophthalmology has grown steadily and today includes the clinical facilities of three major hospitals.

The Department of Ophthalmology is organized around faculty members with subspecialty skills and expertise. The department combines one of the nation's leading vision research programs with outstanding clinical care. The research and multicenter clinical facilities of the Department of Ophthalmology comprise the Beckman Vision Center.

The Beckman Vision Center includes the Koret Vision Research Laboratory Building and the Vision Care and Research Unit (VCRU).

The **Koret Vision Research Laboratory** houses one of the most active vision science programs in the country, with extensive support from the National Eye Institute of the NIH as well as from private benefactors.

The Vision Care and Research Unit (VCRU) is an outpatient facility designed for the management of complicated cases as well as clinical research.

The Beckman Vision Center also includes the Ambulatory Care Center on Parnassus Avenue and Departments of Ophthalmology at the San Francisco General Hospital (Chief, Dr. Bennie Jeng) and the Fort Miley Veterans Medical Center (Chief, Dr. Ayman Naseri).

The Department trains five residents per year in a three year residency program, and provides instruction in Ophthalmology to medical students. Postgraduate programs of clinical fellowship training are available in cornea, external disease and refractive surgery, glaucoma, neuro-ophthalmology, ocular oncology, ophthalmic plastic surgery, uveitis and vitroretinal surgery.

The establishment of The Beckman Vision Center and the building of the Koret Vision Research Laboratory is the achievement of That Man May See, Inc., a foundation dedicated to vision re-

search	and	care.
--------	-----	-------

Research

The Koret Vision Research Laboratory

The Koret Foundation's contribution of \$2.4 million was the corner stone for building the Koret Vision Research Laboratory, which is recognized internationally as a center for innovative research. More information on the research of individual faculty members can be found on the faculty web pages.

The Koret Vision Research Laboratory has over 40,000 sq. ft. of space devoted to research laboratories, including an electron microscopy facility with two transmission electron microscopes and one scanning electron microscope. The Koret labs are dedicated to the areas of glaucoma, corneal disease, cellular pharmacology, ocular oncology, amblyopia, visual development, retinal physiology, ophthalmic genetics, corneal transplantation, retinal growth factors, retinitis pigmentosa and macular degeneration. Special facilities include the Mazzocco Microsurgical Laboratory, the Livingston conference room, the Caygill Library, and the Hogan eye pathology laboratory.

Innovative research programs include studies of the mechanism and potential new treatments for glaucoma; evaluation of new diagnostic and therapeutic modalities for ocular tumors; investigations of the basic mechanisms of vision, including the molecular biology and cell biology of visual process; and an effort to understand and overcome prevalent blinding diseases that are currently incurable, such as macular degeneration and other inherited and acquired retinal degenerations.

There are over 20 funded research grants in the Department of Ophthalmology, a CORE Research Center Grant, and a total federal funding for vision science in the institution which is the third largest in the United States.

Patient Care

The Department of Ophthalmology offers patient care services in the following areas:

- General Services
- AIDS
- Cataract

- Cornea and External Disease
- Diagnostic Laboratories
- Glaucoma
- Macula/Retina/Vitreous
- Neuro-Ophthalmology
- Ocular Oncology
- Pediatric Ophthalmology
- Plastic and Reconstructive Surgery
- Refractive Surgery
- Uveitus
- VISION Optical Dispensary

Leadership In Eyecare Service and Technology

The Vision Correction Center at the University of California, San Francisco is a leading center for diagnosis, treatment and research in refractive surgery technology including laser-assisted insitu keratomileusis (LASIK). Ophthalmologists from all over the country have come to UCSF for their training in excimer laser surgery.

Education

Residency Program

The Department of Ophthalmology at the University of California, San Francisco has an integrated residency program, which utilizes the clinical facilities of three major hospitals. These institutions are the University of California Medical Center, the Veterans Administration Hospital and San Francisco General Hospital.

We train five residents per year in each of three residency years. The principal objective of our program is to train outstanding ophthalmologists who have strong backgrounds in basic and clinical ophthalmic science and who are capable of entering any future career pathway in the vision science field including ophthalmic practice, and/or ophthalmic teaching and research. It is our intention to provide this training through a combination of formal teaching sessions throughout residency, exposure to appropriate clinical cases at all levels, and ongoing close relationships between residents and an outstanding faculty. The programmatic areas covered in our residency

are ophthalmic basic science, ophthalmic pathology, orbital and adnexal diseases, plastic and reconstructive surgery, conjunctival and corneal diseases and surgery including refractive surgery, ocular microbiology, uveitis, diseases and surgery of the lens, glaucoma and glaucoma surgery, vitreoretinal diseases, pediatric ophthalmology and strabismus, neuro-ophthalmology, ocular oncology, and ocular emergency care and trauma. We attempt to teach critical, inquisitive, and innovative thinking, and we provide research opportunities to all residents.

FY 2007-08 Headcount as of 4/3/08 OPHTHALMOLOGY

Grand	Total	111
Academic	Part Time	30
Acad	Full Time	33
Staff	Part Time	6
St	Full Time	39

Source: UCSF Human Resources

Permanently Budgeted FTEs OPHTHALMOLOGY

	FY 2003-0	4	FY 2004-0	2	FY 2003-04 FY 2004-05 FY 2005-06 FY 2006-07 FY 2007-08		FY 2006-(22	FY 2007-	80
Permanent Budget Account Title	Academic	Staff	Academic §	staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	taff	Academic	Staff	Academic	Staff
MED RES-OPHTHALMOLOGY					0	0.70				
MED SCH-OPHTHALMOLOGY	7.00 7.69	69.7	7.00 7.06	90.	7.00 7.06	90:	7.00 7.06	7.06	7.00 7.06	7.06
OPHTHAL-DEPT COPIER		0.05	0	0.05	0	0.01		0.01		0.01
SERV-OPTHAL-EXCIMER LASER SURG		0.29								
Total:	7.00 8.03	8.03	7.00 7.11	7.11	7.70 7.77	.77	7.00 7.07	7.07	7.00 7.07	7.07

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 OPTHALMOLOGY

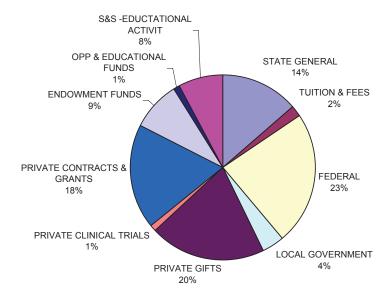
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$2,416,590	\$2,309,114	\$1,132,916	49.06%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$396,602	\$396,602	\$0	0.00%
Private Clinical Trials	\$131,598	\$47,578	\$41,634	87.51%
Private Contracts & Grants	\$1,886,599	\$1,411,293	\$144,550	10.24%
Total:	\$4,831,389	\$4,164,587	\$1,319,101	31.67%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source OPHTHALMOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,192,509	\$1,273,773	\$1,168,523	\$1,251,472	\$1,402,772	17.6%
TUITION & FEES	\$188,758	\$132,171	\$229,957	\$170,623	\$178,440	-5.5%
FEDERAL	\$2,467,592	\$2,111,838	\$2,018,145	\$2,727,347	\$2,416,590	-2.1%
LOCAL GOVERNMENT	\$319,151	\$364,263	\$354,330	\$358,043	\$396,602	24.3%
PRIVATE GIFTS	\$1,223,285	\$2,357,701	\$2,528,727	\$2,268,128	\$2,054,259	67.9%
PRIVATE CLINICAL TRIALS	\$88,016	\$51,657	\$62,274	\$78,395	\$131,598	49.5%
PRIVATE CONTRACTS & GRANTS	\$506,865	\$976,377	\$1,004,481	\$1,176,218	\$1,886,599	272.2%
ENDOWMENT FUNDS	\$401,630	\$667,147	\$520,884	\$682,758	\$873,113	117.4%
OPP & EDUCATIONAL FUNDS	\$61,767	\$82,378	\$76,149	\$84,311	\$108,049	74.9%
S&S -EDUCTATIONAL ACTIVIT	\$429,375	\$680,908	\$1,058,460	\$1,122,425	\$799,001	86.1%
OTHER SOURCES	\$34,022	\$6,546	\$5,378	(\$130)	(\$651)	-101.9%
Total:	\$6,912,970	\$8,704,758	\$9,027,309	\$9,919,591	\$10,246,373	48.2%

Expenditures by Fund Type Ophthalmology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures OPHTHALMOLOGY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	2,371	1,384	551	436	4,334	1,320	3,284
Research	6,611	19	85	6,507	3,539	3,072	
Total	8,982	1,403	636	6,943	7,874	4,392	3,284

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

OPHTHALMOLOGY

	Number	Amount
Research Grants	12	\$3,970,197
Training Grants	1	\$142,686
Fellowships	0	\$0
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	13	\$4,112,883

^{*}Not reported

DEPARTMENT OF ORTHOPAEDIC SURGERY

- Chair Vail. Thomas P., M.D.
- Business Officer Capra, Richard Eugene
- Website http://orthosurg.ucsf.edu/

Mission Statement

The Orthopaedic Surgery Department will use an interdisciplinary team of physicians, nurses, and other health care professionals to assess and provide care for orthopaedic needs, utilizing patient care for the provision of education and training to the residents. Our goal is to be a center of excellence for the hospital.

Employees and physicians work together to create excellence in physician training and development, improved outcomes and quality of life for patients in the Bay Area and beyond, and the highest level of customer service - from community education and point of entry, to discharge and continuum of care.

In providing these services, the Orthopaedic Surgery Department serves the public with seven primary goals:

- To develop skilled, dedicated and compassionate physicians with excellence in all aspects of academic and direct care training.
- To ensure high quality customer service to patients at every level of contact.
- To provide the highest level of orthopaedic surgery and care possible, as our public trust.
- To provide continuity of care, guiding the patient to needed geriatric, psychiatric, nutritional, concomitant disease, etc. treatment as needed.
- To ensure that the primary care provider and other health care professionals receive adequate information to incorporate the orthopaedic care plan into the patient's overall plan of care.
- To make the patient or primary caregiver an active part of the healing team, so that she or he is an informed, committed partner in the healing mission.
- To provide employees with opportunities for growth, participation and the opportunity to make a vital contribution to the organization.

Research Laboratories

- Bioengineering Research Laboratory
- Hand/Microvascular Surgery
- Molecular Biology

Source: Orthopaedic Surgery website

- Orthopaedic Oncology
- SFVAMC Laboratory

Patient Care

The department of Orthopaedic Surgery offers the following clinical services/specialties:

- Arthritis Clinic
- Arthroplasty/Joint Replacement
- Foot and Ankle
- Hand/Upper Extremity
- Orthopaedic Oncology
- Orthotics and Prosthetics
- Pediatrics
- Shoulder and Elbow
- Spine Center
- Sports Medicine
- Trauma/Problem Fracture

Education

Fellowships

- Arthroplasty
- Hand
- Spine
- Sports
- Trauma

Source: Orthopaedic Surgery website

FY 2007-08 Headcount as of 4/3/08 ORTHOPAEDIC SURGERY

St	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
51	13	48	45	157

Source: UCSF Human Resources

Permanently Budgeted FTES ORTHOPAEDIC SURGERY

	FY 2003-04	40	FY 2004-05	-05	FY 2005-06	9	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff
MED SCH-ORTHOPAEDIC SURGERY	9.00	6.45	9.00	5.91	00.6	5.91	9.00	5.91	9.00	5.91
Total:	9.00	6.45	00.6	5.91	00.6	5.91	9.00	5.91	00.6	5.91

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 ORTHOPAEDIC SURGERY

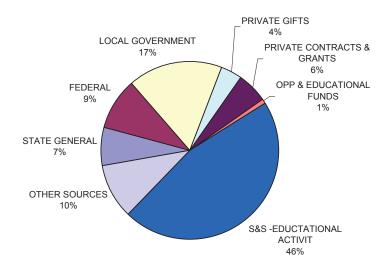
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$1,607,002	\$1,478,709	\$666,132	45.05%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$2,894,459	\$2,894,459	\$0	0.00%
Private Clinical Trials	\$117,319	\$99,833	\$25,650	25.69%
Private Contracts & Grants	\$954,496	\$926,062	\$223,556	24.14%
Total:	\$5,573,276	\$5,399,064	\$915,338	16.95%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source ORTHOPAEDIC SURGERY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,264,052	\$1,196,838	\$1,270,223	\$1,127,046	\$1,199,070	-5.1%
TUITION & FEES	\$0	\$39,084	\$177	\$0	\$928	0.0%
FEDERAL	\$775,553	\$1,006,658	\$1,095,543	\$1,312,005	\$1,607,002	107.2%
STATE SPECIAL & CONTRACTS	\$0	\$0	\$0	\$0	\$0	0.0%
LOCAL GOVERNMENT	\$1,489,773	\$1,792,400	\$2,734,699	\$2,804,056	\$2,894,459	94.3%
PRIVATE GIFTS	\$775,346	\$704,304	\$710,428	\$524,450	\$680,319	-12.3%
PRIVATE CLINICAL TRIALS	\$31,159	\$107,211	\$127,620	\$90,710	\$117,319	276.5%
PRIVATE CONTRACTS & GRANTS	\$360,482	\$356,451	\$566,261	\$1,047,988	\$954,496	164.8%
ENDOWMENT FUNDS	\$318,276	\$198,471	\$71,052	\$98,571	\$129,384	-59.3%
OPP & EDUCATIONAL FUNDS	\$43,848	\$32,086	\$42,799	\$47,945	\$98,993	125.8%
S&S -EDUCTATIONAL ACTIVIT	\$5,675,708	\$6,018,150	\$5,223,179	\$6,430,563	\$7,878,744	38.8%
OTHER SOURCES	\$1,188,030	\$887,123	\$1,027,048	\$1,203,355	\$1,675,956	41.1%
RESERVES	\$0	\$0	\$3,175	\$0	\$0	0.0%
Total:	\$11,922,228	\$12,338,778	\$12,872,203	\$14,686,689	\$17,236,671	44.6%

Expenditures by Fund Source Orthopaedic Surgery FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures ORTHOPAEDIC SURGERY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	3,393	1,199	1,887	308	9,817	2,234	8,658
Research	3,618	-	782	2,835	1,809	1,809	
Total	7,011	1,199	2,669	3,143	11,626	4,043	8,658

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

ORTHOPAEDIC SURGERY

	Number	Amount
Research Grants	4	\$1,200,770
Training Grants	0	\$0
Fellowships	1	\$55,642
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	5	\$1,256,412

^{*}Not reported

DEPARTMENT OF OTOLARYNGOLOGY

- Chair Eisele, David W. M.D.
- Business Officer Samii, Deborah Z.
- Website http://otolaryngology.ucsf.edu/

Mission Statement

- To provide the highest quality care and service for all patients in the prevention, diagnosis, and treatment of disorders of the head and neck.
- To provide international leadership in the education of medical students, physicians, and medical scientists in the application of medical knowledge for disorders of the head and neck.
- To conduct the highest quality biomedical research education for medical students, physicians, and medical scientists.
- To attract and support physicians, scientists, and other health care professionals of the highest character and greatest skills.
- To provide educational resources and opportunities for patients, family members, and community physicians.
- To promote the highest quality medical care and enhance the community.

The Department of Otolaryngology – Head and Neck Surgery at the University of California, San Francisco combines superior resident and medical student training with the highest quality of patient care. Beyond our offices, clinics, and laboratories within the 107-acre UCSF Parnassus campus above Golden Gate Park, our Department reaches into the Moffitt Long Hospital, the Ambulatory Care Center, the Medical Center at Mount Zion, and shares UCSF's partnerships with San Francisco General Hospital and the San Francisco Veterans Affairs Medical Center.

Under the leadership of our Chairman, David W. Eisele, MD, the Department of Otolaryngology – Head and Neck Surgery's expertise encompasses all aspects of the field of Otolaryngology – Head and Neck Surgery including head and neck surgical oncology, laryngology, rhinology, otology, neurotology, skull base surgery, pediatric otolaryngology, and facial plastic surgery. In addition, we provide innovative technologies and options for communication and swallowing disorders, voice disorders, and sleep disorders. The Department prides itself on being a vital resource for the medical community by providing state-of-the-art care for patients.

We offer an outstanding five-year residency training program, whereby, housestaff are mentored and guided by our internationally recognized clinical and research faculty. Third year medical students from all over the U.S. and Canada are invited to participate in our clerkships. Addition-

ally, our Department offers fellowship training in head and neck oncological surgery.

Medical research scientists in our esteemed research laboratories are among the most sought after geneticists and physiologists in the world. From development of the cochlear implant to defining mechanisms underlying the origins of functional brain illnesses and disabilities, advances in research at the Coleman Memorial Laboratory, the Epstein Laboratory, and the Center for Clinical Research In Otolaryngology, are transforming head and neck challenges into treatment possibilities.

Research

The Department has an active research program in both clinical and basic sciences of hearing and publishes 40-50 articles in scientific journals annually. The research laboratories are currently staffed by six faculty members and approximately 35 pre- and postdoctoral fellows and visiting professors.

The principal research and development laboratories are the Coleman Memorial Laboratory (Directors: Michael M. Merzenich, PhD and Christoph E. Schreiner, PhD, MD) housed within the W. M. Keck Center for Integrative Neurosciences, the Epstein Otoneurological Laboratory (Director: Patricia A. Leake, PhD) and Center for Clinical Research in Otolaryngology (Director: Dr. Andrew Goldberg).

The researchers in these laboratories focus on wide-ranging aspects of normal and pathologic hearing. The common goal is to understand the structures and processes involved in the sensation of sounds in order to devise better treatments for the hard-of-hearing. Areas of research include the coding of sound in the normal auditory systems of animals and humans; effects of hearing-loss and deafness on the function of the auditory nervous system; reorganization of the auditory system in development, learning, and following injury; use of electrical stimulation with cochlear implants in restoration of hearing; improvement of electronic hearing aids; treatment of tinnitus; genetic causes of hearing impairment; use of genetic methods in the treatment of hearing loss.

Other areas of research encompass a wide array of subjects in the areas of balance-, voice-, and swallowing-disorders, as well as, the oncology of the head and neck.

Patient Care

The Department of Otolaryngology – Head and Neck Surgery is dedicated to providing superior treatment and preventative medicine. With innovative technology and the highest caliber

health care professionals, we are committed to the ideal that optimal care is both specialized and integrated. Offering a range of up-to-the-minute services provides our patients with the best in diagnosis and management of head and neck disorders.

Head and Neck Surgery at the UCSF Comprehensive Cancer Center

The Division of Head and Neck Surgery provides extensive head and neck surgery services and comprehensive care for cancer patients and their families, through the UCSF Comprehensive Cancer Center at Mt. Zion. The division specializes in head and neck surgical oncology, treatments for salivary gland and thyroid neoplasms, voice restoration, and anterior-anterolateral cranial base surgery.

UCSF Voice Center

The University of California San Francisco (UCSF) Voice and Swallowing Center is a multidisciplinary center designed to serve patients with voice and swallowing disorders. The mission of the Center is to provide state-of-the-art care for patients, develop technology for the diagnosis and management of patients with disorders of the upper airway, participate in research for our improvement in the understanding of voice and swallowing disorders and develop educational programs for residents and fellows interested in the diagnosis and management of patients with voice and swallowing disorders.

Otology, Neurotology, & Skull Base Surgery

The Division of Otology, Neurotology, and Skull Base Surgery provides care for tumors of the skull base, anterior and middle cranial base and adjacent sinuses, diseases of the ear and related structures. This includes hearing loss, vertigo & balance problems, as well as infections, injuries, tumors, and other ear conditions. The Division specializes in posterior and lateral cranial base surgery, and cochlear implantation.

UCSF Sinus Center

The UCSF Sinus Center provides care for diseases of the sinuses, nose and related structures. This includes sinus infection, tumors of the nose and sinuses, nasal obstruction and allergy. The Sinus Center specializes in minimally invasive endoscopic approaches for treatment of disorders of the nose and sinuses.

The Sinus Center emphasizes a comprehensive multi-disciplinary approach, using the appropriate specialist to provide complete care.

Facial Plastic and Reconstructive Surgery

We offer care and service for patients with congenital and traumatic deformities, surgical defects of the face and neck in addition to cosmetic surgery of these areas.

Pediatric Otolaryngology

Our pediatric otolaryngologists provide care for a variety of ear, nose and throat disorders in children. These include chronic tonsillitis, obstructive sleep apneachronic, ear disease, hearing loss, chronic rhinosinusitis, congenital, benign and malignant masses of the head and neck, and airway disorders including laryngomalacia, vocal cord abnormalities, and obstructive sleep apnea.

In the near future, the program will include a dedicated Comprehensive Airway Clinic that will centralize the services of pediatric otolaryngology and pediatric pulmonology. Patients with airway problems (and their families) will benefit from the convenience and efficiency of being evaluated and treated for a complex problem in one clinic setting.

General Otolaryngology Faculty Practice

The Division of General Otolaryngology provides care for diseases of the nose, sinus, and throat. The division specializes in endoscopic sinus surgery, rhinology, laryngology, dysphagia, and snoring and obstructive sleep apnea.

UCSF Swallowing Center

The Swallowing Center at UCSF provides a multidisciplinary approach to evaluation and treatment of patients with swallowing disorders. Assessment includes use of fluoroscopy, endoscopy, and ultrasound to determine the nature of the problem and to guide treatment. Laryngology specialists consider surgical options while speech pathologists with expertise in dysphagia guide patients through behavioral and dietary management. Patients are referred to gastroenterology, neurology, and pulmonary medicine as needed. Patients with difficulty swallowing are welcome to contact the Swallowing Disorders Center for an appointment.

UCSF Salivary Gland Center

Dr. Eisele, Professor and Chairman of the Department of Otolaryngology – Head and Neck Surgery and Director of the Division of Head and Neck Surgery at UCSF has a special clinical interest in salivary gland disorders and their surgical and medical management.

As program director for the Head and Neck Cancer Program at UCSF, Dr. Eisele directs comprehensive care for patients with salivary gland cancers. He has trained numerous residents and fellows in innovative surgical techniques and he has helped to introduce minimally invasive diagnostic and treatment methods to the United States. He has lectured both nationally and internationally on salivary gland disorders.

Audiological Services

The UCSF Audiology Clinic works closely with a variety of medical departments to provide state-of-the-art audiologic testing for individuals of all ages. Comprehensive evaluation and treatment is provided for hearing loss, hyperacusis, tinnitus and dizziness, vertigo and balance-related disorders.

Cochlear Implant Center

Cochlear implants are designed to provide useful hearing to adults and children with significant hearing loss who are unable to receive benefit from hearing aids.

OHNS Division of Sleep Surgery

The Division of Sleep Surgery in the Department of Otolaryngology—Head and Neck Surgery specializes in the evaluation and surgical treatment of patients with sleep-disordered breathing—including snoring, upper airway resistance syndrome, and obstructive sleep apnea.

Education and Training

Residency Program

The Department of Otolaryngology – Head and Neck Surgery offers a comprehensive five-year residency training program, which covers the breadth of Otolaryngology – Head and Neck Surgery in wide array of clinical settings. The Department has outstanding clinical programs in Head and Neck Oncological Surgery, Neurotology, Skull Base Surgery, Pediatric Otolaryngology, Facial Plastic and Reconstructive Surgery, Laryngology, Rhinology, Sleep Apnea Medicine and Surgery, Dysphagia, and Audiology.Fellowships

In addition to gaining extensive surgical experience, Fellows in the Department of Otolaryngology – Head and Neck Surgery have a wide range of teaching and research responsibilities. Fellows join our department's faculty as clinical instructors and participate in educating otolaryngology residents in both inpatient and outpatient settings.

FY 2007-08 Headcount as of 4/3/08 OTOLARYNGOLOGY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time Part Time	Part Time	Total
16	5	26	24	71

Source: UCSF Human Resources

Permanently Budgeted FTEs OTOLARYNGOLOGY

		FY 2003-04	40	FY 2004-05	05	FY 2005-06	90	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title		Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
MED SCH-OTOLARYNGOLOGY		7.00	7.00 5.92	7.00	5.36	7.00	7.00 5.36		7.00 5.36	7.00	5.36
	Total:	7.00	5.92	7.00	7.00 5.36	7.00	7.00 5.36	7.00	5.36	7.00	5.36

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 OTOLARYNGOLOGY

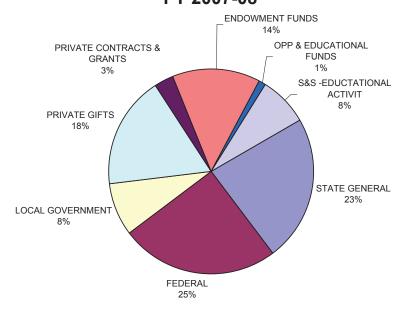
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$1,286,841	\$1,206,862	\$567,251	47.00%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$430,317	\$430,317	\$0	0.00%
Private Clinical Trials	\$10,166	\$10,166	\$2,187	21.51%
Private Contracts & Grants	\$151,960	\$67,099	\$15,593	23.24%
Total:	\$1,879,284	\$1,714,444	\$585,031	34.12%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source OTOLARYNGOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,230,958	\$1,066,567	\$1,087,746	\$1,354,475	\$1,176,595	-4.4%
FEDERAL	\$1,672,684	\$1,611,310	\$1,348,824	\$983,991	\$1,286,841	-23.1%
STATE SPECIAL & CONTRACTS	\$365,645	\$373,194	(\$487)	\$0	\$0	-100.0%
LOCAL GOVERNMENT	\$416,928	\$409,271	\$407,285	\$429,479	\$430,317	3.2%
PRIVATE GIFTS	\$407,194	\$796,140	\$877,861	\$855,347	\$916,215	125.0%
PRIVATE CLINICAL TRIALS	\$17,838	(\$15)	\$0	\$26	\$10,166	-43.0%
PRIVATE CONTRACTS & GRANTS	\$235,043	\$143,814	\$153,302	\$85,919	\$151,960	-35.3%
ENDOWMENT FUNDS	\$249,008	\$217,662	\$207,456	\$316,444	\$712,787	186.3%
OPP & EDUCATIONAL FUNDS	\$56,506	\$59,015	\$49,625	\$50,165	\$56,193	-0.6%
S&S -EDUCTATIONAL ACTIVIT	\$1,146,515	\$2,108,806	\$544,671	(\$232,273)	\$401,431	-65.0%
OTHER SOURCES	\$0	\$0	\$0	\$3,164	\$13,345	0.0%
RESERVES	\$0	\$0	\$325	\$0	\$0	0.0%
Total:	\$5,798,318	\$6,785,764	\$4,676,609	\$3,846,738	\$5,155,850	-11.1%

Expenditures by Fund Source Otolaryngology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures OTOLARYNGOLOGY (Dollars in Thousands)

		Current Funds		ls	Distribution			
	Total	Unre General	stricted Designated	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers	
Instruction	1,237	1,177	(189)	249	4,265	1,277	4,305	
Research	2,613		178	2,434	1,336	1,276		
Total	3,849	1,177	(10)	2,683	5,601	2,553	4,305	

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

OTOLARYNGOLOGY

	Number	Amount
Research Grants	2	\$568,132
Training Grants	0	\$0
Fellowships	1	\$34,794
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	3	\$602,926

^{*}Not reported

DEPARTMENT OF PATHOLOGY

- Chair Abbas, Abul K.
- Business Officer Bunker, Mary F.
- Website http://pathology.ucsf.edu

The Department of Pathology at the University of California, San Francisco, aims to achieve the highest standards in patient care, research, and education. The Department provides diagnostic pathology services in a wide variety of areas, with the most modern available technologies and highly trained subspecialists who are recognized nationally and internationally for their expertise.

The Department's research programs are diverse, and interface with a wealth of basic and translational research programs that are a hallmark of UCSF.

Our educational programs include the Pathology Residency training program, subspecialty fellowships in Cytopathology, Dermatopathology, Neuropathology, Surgical Pathology, Gastrointestinal and Liver Pathology, and Transplant Pathology, and a post-sophomore fellowship program for medical students, as well as active roles in the graduate, medical, allied health, and MD/PhD programs of UCSF.

The Department's operations are housed at several sites including the principal site at Parnassus Heights, the home of the UCSF School of Medicine and Moffitt-Long Hospitals; the Mt. Zion campus, home of the UCSF Comprehensive Cancer Center; San Francisco General Hospital & Trauma Center, the Veterans Administration Medical Center; and most recently, the new UCSF research campus at Mission Bay.

Research Programs

The Department of Pathology has numerous vibrant research programs and strives to be a leader among academic Pathology departments in both basic and clinical research. The research activities of the Department interface closely with numerous research programs at UCSF, including those at the Comprehensive Cancer Center. Our research faculty are members of the two large graduate programs at UCSF: the Program in Biological Sciences and the Biomedical Sciences Program. Well over one hundred postdoctoral research fellows and graduate students are being trained in the laboratories in the Department.

In addition, investigators in the Department are involved in a large number of translational research projects on diverse topics, including: breast tumors; liver, kidney and gastrointestinal

Source: Pathology website, 6/30/2008

diseases; transplantation; lymphoid neoplasms. Information about the research activities of individual faculty members may be found in their biographical sketches.

Although our research activities span a wide range of interests, many of our large, independently funded research groups fall into the following major thematic areas:

- Infection and Immunity
- Cancer
- Neuropathology
- Inflammation and Tissue Injury

Clinical Services

The departments of Pathology and Laboratory Medicine offer the following clinical services:

- Autopsy
- Cellular Therapy: BMT Laboratory
- Chemistry
- Cytopathology
- Dermatopathology
- Hematology & Hematopathology
- Immunology
- Microbiology
- Molecular & Cytogenetic Testing
- Neuropathology
- Oral Pathology
- Renal Pathology/Electron Microscopy
- Surgical Pathology
- Transfusion Medicine & Blood Banking

Education

Residency Program, Departments of Pathology and Lab Medicine

Training is offered in straight anatomic pathology (AP), straight clinical pathology (CP), and combined AP/CP.

Training is provided through a combination of clinical activities, didactic lectures, and teaching conferences.

Residents in the combined training program receive two years of training in anatomic pathology and two years of training in clinical pathology. Although the minimum current requirement for Source: Pathology website, 6/30/2008

AP/CP Board certification is eighteen months of general anatomic pathology and clinical pathology (plus one additional year), our program traditionally provides training in blocks of one year, with the opportunity, usually, to switch between anatomic pathology and clinical pathology at the end of each academic year. Our goal is to provide basic training in the practice of pathology with opportunities for subspecialty training and in-depth research for those who intend to pursue an academic career. Elective rotation time in each year can be used for training in either anatomic or clinical pathology.

Source: Pathology website, 6/30/2008

FY 2007-08 Headcount as of 4/3/08 PATHOLOGY

St	Staff	Acad	Academic	Grand
Full Time Part Time	Part Time	Full Time Part Time	Part Time	Total
i				
70	5	66	9	20,

Source: UCSF Human Resources

Permanently Budgeted FTEs PATHOLOGY

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	90
Permanent Budget Account Title Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
MED SCH-PATHOLOGY	17.70 20.01	20.01	17.70 18.62	18.62	17.70 18.62	18.62	17.70 18.62	18.62	0.50	0.50 18.62
MS/PATH-FORENSIC PATH & MED		1.00		1.00		1.00		1.00		1.00
ORG ACT-PATHOLOGY	0.50	6.13	0.50	0.50 4.91	0.50	2.00	0.50	0.50 1.96	0.50	2.05
Total:	18.20 27.14	27.14	18.20 24.53	24.53	18.20 21.62	21.62	18.20 21.58	21.58	1.00 21.67	21.67

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PATHOLOGY

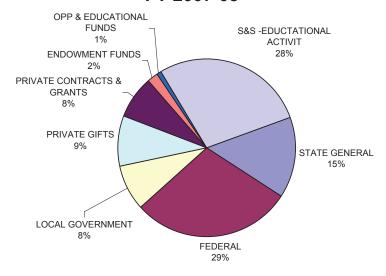
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$5,903,853	\$4,963,655	\$2,178,881	43.90%
CIRM	\$94,856	\$94,856	\$50,843	53.60%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$1,697,706	\$1,631,003	\$0	0.00%
Private Clinical Trials	\$177	\$177	\$52	29.10%
Private Contracts & Grants	\$1,565,966	\$1,398,838	\$233,762	16.71%
Total:	\$9,262,558	\$8,088,529	\$2,463,538	30.46%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PATHOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$2,910,754	\$2,587,950	\$2,683,397	\$2,788,961	\$2,962,060	1.8%
FEDERAL	\$3,346,319	\$3,401,089	\$4,431,310	\$5,142,834	\$5,903,853	76.4%
STATE SPECIAL & CONTRACTS	\$257,769	\$254,013	\$101,492	\$92,476	\$94,856	-63.2%
LOCAL GOVERNMENT	\$1,491,015	\$1,468,166	\$1,494,728	\$1,614,388	\$1,697,706	13.9%
PRIVATE GIFTS	\$1,213,125	\$1,287,280	\$1,330,572	\$1,894,635	\$1,831,701	51.0%
PRIVATE CLINICAL TRIALS	(\$3,132)	\$22,051	\$0	\$0	\$177	-105.7%
PRIVATE CONTRACTS & GRANTS	\$357,645	\$643,884	\$680,565	\$480,726	\$1,565,966	337.9%
ENDOWMENT FUNDS	\$21,645	\$55,483	\$90,680	\$224,430	\$413,289	1809.4%
OPP & EDUCATIONAL FUNDS	\$106,111	\$108,611	\$115,681	\$187,166	\$163,200	53.8%
S&S -EDUCTATIONAL ACTIVIT	(\$4,338,150)	(\$3,916,326)	(\$5,293,411)	(\$5,449,139)	(\$5,651,920)	30.3%
OTHER SOURCES	\$66,372	(\$128,659)	\$16,481	\$9,501	(\$7,147)	-110.8%
Total:	\$5,429,472	\$5,783,542	\$5,651,495	\$6,985,977	\$8,973,742	65.3%

Expenditures by Fund Type Pathology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PATHOLOGY (Dollars in Thousands)

			Current Fund	s		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	(2,483)	2,954	(5,842)	405	15,321	3,929	21,732
Research	9,291	8	70	9,212	4,610	4,680	(1)
Total	6,808	2,962	(5,771)	9,617	19,931	8,609	21,732

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

PATHOLOGY

	Number	Amount
Research Grants	22	\$13,690,057
Training Grants	1	\$281,870
Fellowships	2	\$75,711
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	25	\$14,047,638

^{*}Not reported

DEPARTMENT OF PEDIATRICS

- Chair Hawgood, Samuel
- Business Officer Jew, Jacqueline
- Website http://www.pediatrics.medschool.ucsf.edu/

The Department of Pediatrics at UCSF is committed to excellence in research, education and the clinical care of infants, children and young adults. We are particularly proud of our faculty, many of whom have received national and international recognition for their accomplishments in each of these areas. Faculty who have been elected to leadership roles in professional societies, serve as editors of major pediatric texts or journals, and are the recipients of millions of dollars annually in extramural research funding attest to the excellence of our faculty.

We are proud to demonstrate a substantial commitment to education, reflected in our highly acclaimed student, resident and fellowship programs.

Being leaders in combating the illnesses that afflict millions of children, our scientific and academic activities in our Department encompass a wide range of basic and clinical areas and include all of the major pediatric specialties as well as rehabilitation, bone marrow transplantation and health policy.

Helping and treating families, our Department offers a wide range of comprehensive patient care services for the diagnosis and treatment of inpatients and outpatients, from birth to adulthood, with general pediatric and subspecialty problems.

Adolescent Medicine

The Division of Adolescent Medicine at the University of California, San Francisco is dedicated to improving the health and well-being of adolescents. Using interdisciplinary approaches, we aim to: provide exemplary clinical care; advance knowledge through leading-edge research; translate, synthesize and disseminate state-of-the-art knowledge in clinical practice, research, and health care policy to the broader community; and train the next generation of leaders in adolescent health.

Pediatric Bone Marrow Transplant

More than 600 transplants have been performed for children at UCSF Children's Hospital since the Bone Marrow Transplant Program was established in 1982. That year, we performed the first partially matched bone marrow transplant on the West Coast using bone marrow from a parent

for a child with a severe immunodeficiency disease. Today, we are a leader in special treatment options for children with primary immunodeficiency diseases, marrow failure syndromes, genetic diseases, cancers and other life-threatening illnesses.

Cardiology

The Division of Pediatric Cardiology at UCSF strives to give future cardiologists a unique and comprehensive education, to provide exemplary services for the diagnosis and treatment of our patients, and to conduct innovative research. We serve patients and train fellows through our Pediatric Heart Center, an integrated center of excellence which optimizes patient care and fosters innovation and creativity of faculty and staff from multiple disciplines.

Critical Care

The Division of Pediatric Critical Care at UCSF strives to provide high quality clinical care for critically ill infants and children in a multi-disciplinary setting with state-of-the art equipment. The Division is committed to providing an excellent educational environment and the fellowship program has a long history of graduating exceptionally well-trained pediatric intensivists, many of whom have successfully pursued an academic career. In addition, our faculty is involved in a variety of research endeavors aimed at advancing knowledge of diseases and treatment options pertinent to pediatric critical care. The ongoing financial support from extramural research funding is testimony to the excellence of our faculty.

Endocrinology

The Division of Pediatric Endocrinology in the Department of Pediatrics at the University of California, San Francisco offers a wide variety of training opportunities, research programs and clinical services. The Division includes eight faculty members, each of whom is involved in a variety of research and clinical endeavors.

Gastroenterology, Hepatology, and Nutrition

The Division of Pediatric Gastroenterology, Hepatology, and Nutrition is dedicated to providing excellent clinical care in the context of a training and research institution. We integrate state of the art medical care and innovative treatment regimens. We are also diligent in our quest to learn about the causes of disease, determining improved and optimal treatment regimens, and understanding the course of disease throughout childhood and adolescence.

General Pediatrics

The Division of General Pediatrics at the University of California, San Francisco is dedicated to providing excellent clinical care, training the next generation of pediatricians, advancing our knowledge of how to improve the health of children, and improving the health of our community. Over 90 faculty, staff and fellows are committed to this mission, as part of UCSF Children's Hospital.

Hematology/Oncology

The Children's Cancer and Blood Disease Program of the UCSF School of Medicine is an international leader in the treatment and research of pediatric cancers and hematologic disorders. We are home to the UCSF's Brain Tumor Center and the regional pediatric Hemophilia Treatment Center, and we are part of one of the nation's ten comprehensive Sickle Cell Centers.

Medical Genetics

The Division of Medical Genetics is dedicated to providing exceptional clinical diagnostic services, medical management, genetic counseling, resources and referrals for pediatric and adult patients who have, or are at risk to have, a genetic condition or birth defect.

Neonatology

The Division of Neonatology at UCSF is committed to innovation of clinical practice and excellence in patient care that has distinguished the program since its inception by Drs. Bill Tooley and Roderic Phibbs more than 40 years ago. The William H. Tooley Intensive Care Unit was established at UCSF in 1964 to create a highly specialized clinical environment to tackle the problem of respiratory distress syndrome, then the predominant cause of neonatal mortality in the developed world. Four decades of basic and translational research and continuous refinement of our multi-disciplinary approach to clinical care has had a dramatic impact on the survival of premature infants here, within the region we serve, and around the world.

Rehabilitation

The Pediatric Rehabilitation Service provides comprehensive multidisciplinary rehabilitation care for children ages birth through 21 years. Our goal is to maximize the abilities of each child while minimizing the effects of their impairments. This is accomplished through effective rehabilitation of the highest quality provided in a family-centered environment. Depending upon the nature of the impairment and the needs of the child; treatment takes place in diversified settings

and uses the various skills of rehabilitation professionals to promote the highest level of functioning possible for the child. The Pediatric Rehabilitation Team is committed to helping each individual reach full functional independence in self care, mobility, communication, cognition, and socialization.

Fellowship Training Programs

UCSF currently has 78 fellows in the pediatrics department, focusing on either laboratory-based research -- through the Molecular Medicine Program -- or clinical research or epidemiology -- through the Oracle program. The Department of Pediatrics also has received a generous gift earmarked for fellowship training that is being used to fund and augment support to fellows.

Fellows' College

A unique three year program tailored specifically to the professional development needs of ACGME and other academic fellows in the Department of Pediatrics. Working with subspecialty faculty, School of Medicine and University educational resources, Fellows' College is designed to enhance fellowship subspecialty training program experiences with additional guidance and mentorship essential to prepare the fellows to maximize their educational, research and individual professional potential. The overall goal is to assist the fellows in making a successful transition from fellowship to early academic faculty positions as physician-scientists and academic clinician educators in their subspecialties.

Residency Training Program

The UCSF pediatric residency program is one of the most sought-after in the United States. Numbers tell the story. Each year the program typically receives over 600 applications for the 28 first-year positions available. Such competition is a tribute to the keen problem-solving and doctor-patient-parent communication skills that are the department's cornerstones. The goal, of course, is to train pediatricians by weaving them into the care of patients at UCSF's renowned Children's Hospital and other hospital sites. But training pediatricians is not the same as teaching them. That requires imparting a deeper understanding of their role as healers and disease experts and engenders a give-and-take style of learning that encourages everyone to be a peak performer – and to enjoy their work at the same time.

FY 2007-08 Headcount as of 4/3/08 PEDIATRICS

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
151	54	134	175	514

Source: UCSF Human Resources

Permanently Budgeted FTEs PEDIATRICS

	FY 2003-04	90	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	07	FY 2007-08	88
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff
FLOURESCENTLY LABELED DNA		0.05		0.05						
MED SCH-PEDIATRICS	21.66	14.82	21.66	13.47	21.66 13.47	13.47	21.66	13.47	21.66	13.47
ORG ACT-BEHAVIOR & DEVELOP PEDS		0.15		0.15		0.15		0.15		0.15
ORG ACT-PEDIATRICS		0.10		0.10		0.15		0.15		0.15
Total:	21.66 15.12	15.12	21.66 13.77	13.77	21.66 13.77	13.77	21.66 13.77	13.77	21.66 13.77	13.77

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PEDIATRICS

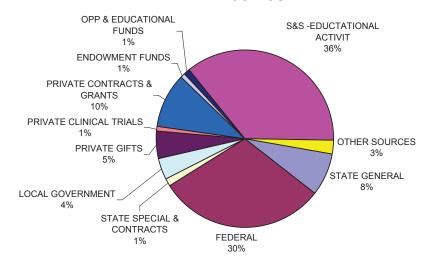
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$14,091,670	\$9,462,005	\$3,251,132	34.36%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$274,860	\$274,860	\$20,326	7.40%
Local Government	\$1,805,475	\$1,805,475	\$13,379	0.74%
Private Clinical Trials	\$452,798	\$356,175	\$110,255	30.96%
Private Contracts & Grants	\$4,554,866	\$4,186,989	\$1,003,096	23.96%
Total:	\$21,179,670	\$16,085,504	\$4,398,187	27.34%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PEDIATRICS

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$3,332,540	\$3,730,443	\$3,256,212	\$3,561,859	\$3,615,805	8.5%
TUITION & FEES	\$199,157	\$73,645	\$94,896	\$5,945	\$2,447	-98.8%
FEDERAL	\$15,442,719	\$13,511,448	\$16,657,064	\$12,333,021	\$14,091,670	-8.7%
STATE SPECIAL & CONTRACTS	\$304,017	\$255,680	\$466,390	\$500,357	\$659,322	116.9%
LOCAL GOVERNMENT	\$1,514,513	\$1,590,555	\$1,549,209	\$1,546,930	\$1,805,475	19.2%
PRIVATE GIFTS	\$788,596	\$1,155,588	\$1,729,104	\$2,083,182	\$2,246,615	184.9%
PRIVATE CLINICAL TRIALS	\$565,882	\$265,910	\$657,054	\$374,898	\$452,798	-20.0%
PRIVATE CONTRACTS & GRANTS	\$4,161,102	\$3,131,555	\$3,997,546	\$5,356,990	\$4,554,866	9.5%
ENDOWMENT FUNDS	\$487,429	\$1,575,146	\$1,040,854	\$871,833	\$416,696	-14.5%
OPP & EDUCATIONAL FUNDS	\$446,182	\$438,825	\$416,846	\$531,305	\$572,170	28.2%
S&S -EDUCTATIONAL ACTIVIT	\$9,245,361	\$8,598,395	\$6,370,532	\$8,145,605	\$16,634,493	79.9%
OTHER SOURCES	\$40,337	(\$3,825)	\$28,947	(\$13,048)	\$1,175,647	2814.6%
RESERVES	\$0	\$0	\$0	\$797	\$3,517	0.0%
Total:	\$36,527,836	\$34,323,364	\$36,264,655	\$35,299,676	\$46,231,522	26.6%

Expenditures by Fund Type Pediatrics FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PEDIATRICS (Dollars in Thousands)

			Current Fund	S		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	8,005	3,598	2,574	1,833	22,198	1,923	16,117
Research	17,708	18	69	17,620	9,400	8,310	2
Total	25,712	3,616	2,643	19,453	31,599	10,233	16,119

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

PEDIATRICS

	Number	Amount
Research Grants	48	\$13,744,085
Training Grants	6	\$1,089,551
Fellowships	0	\$0
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	54	\$14,833,636

^{*}Not reported

DEPARTMENT OF PHYSICAL THERAPY AND REHABILITATION SCIENCE

- Chair –Topp, Kimberly.
- Business Officer Lambert, Mary
- Website http://ptrehab.medschool.ucsf.edu/

Mission Statement

The Mission of the UCSF Department of Physical Therapy and Rehabilitation Science is to educate scholarly, socially sensitive clinicians, educators and researchers in physical therapy and rehabilitation science who will lead the profession of physical therapy into the next century. The graduates will be prepared to practice independently or as part of a team within an environment of health care that is not only patient focused, but directed towards building the scientific base of clinical practice, the quality, accessibility, availability, and efficiency. The mission of this Department is to develop dynamic, creative, efficient, sensitive educational opportunities for entry and graduate level students in physical therapy, contribute to the scientific evidence base of physical therapy practice, provide high quality efficient rehabilitation services to clients, and assume an active role in the development of the physical therapy profession within the community at UCSF and SFSU, California and across the United States.

Overview

The UCSF Department of Physical Therapy and Rehabilitation Science is located in the School of Medicine, with graduate degrees supported by the Graduate Division. The Department faculty provide patient care through a Faculty Practice located at two different sites. The Department offers three graduate degrees in physical therapy in partnership with San Francisco State University (SFSU): the UCSF/SFSU Entry level Master of Science-Doctorate in Physical Therapy (MS-DPT), the Post Professional DPT (PostProfDPT) for recent graduates, and the post professional Doctorate in Physical Therapy Science (DPTSc). The Department also supports faculty and student research in clinical and basic sciences

Patient Care

Rita Arriaga, PT, MS is the Director of Clinical Services for the Department. She oversees the inpatient services as well as the faculty practice. She also oversees the outpatient pediatric rehabilitation unit. Upon referral, we offer expert physical therapy consultations, evaluations and interventions to patients of all ages for musculoskeletal and neuromusculoskeletal problems impacting function. The faculty practice at UCSF includes approximately ten clinical faculty.

Source: Physical Therapy and Rehabilitation Science website, 7/1/2008

These faculty members are in our department within the School of Medicine. The majority of the faculty are certified specialists in orthopedics, neurology or geriatrics. Some of the faculty also are specialists working with patients with musculoskeletal injuries of the extremities, spine problems, chronic pain, hemophilia, injured athletes, injured workers, and patients with neurological insults and degenerative conditions. In addition, some of the faculty do ergonomic evaluations at the work site. The clinical faculty also collaborate in research studies. Faculty providers adhere to the Ethical Code and Standards of Practice of the American Physical Therapy Association and to UCSF Medical Staff bylaws. They also conform to the scope of practice and licensure laws and regulations for physical therapy practice in California.

Research

The Department strongly supports scientific inquiry and critical thinking within the curriculum and among the faculty. The faculty is involved in a variety of basic, clinical and translational research studies. There is a Movement Analysis Lab, a Gait Lab and an Anatomy Lab. Clinical and outcomes research also take place in the practice clinics. In addition, there is one basic science laboratory. Several studies are interdepartmental and collaborative, and take place in the Departments of Radiology and Anatomy. Students are integrated into faculty research programs.

Training

Graduate Programs in Physical Therapy

All of the Graduate Programs in Physical Therapy are jointly offered by the University of California, San Francisco and San Francisco State University. These graduate programs are not only integrated within the Graduate Divisions at UCSF and San Francisco State University, but the program is part of the School of Medicine at UCSF and part of the College of Health and Human Services at SFSU. Three different degree programs in physical therapy are offered:

- 1. Master of Science in Physical Therapy (MS-DPT)
- 2. Doctorate in Physical Therapy (Post Professional DPT)
- 3. Doctorate in Physical Therapy Science (DPTSc)

The academic programs in PT are designed to prepare leaders in physical therapy: leaders in community practice, teaching and research. We aim to excite individuals about lifelong learning and commitment to the patient, the community and the profession. Our program also fosters building sensitivity and caring while developing strong questioning and critical inquiry.

Source: Physical Therapy and Rehabilitation Science website, 7/1/2008

FY 2007-08 Headcount as of 4/3/08 PHYSICAL THERAPY AND REHABILITATION SCIENCE

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
7	1		11	19

Source: UCSF Human Resources

Permanently Budgeted FTEs PHYSICAL THERAPY AND REHABILITATION SCIENCE

	FY 2003-04	- 04	FY 2004-05	35	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
MED SCH-PHYSICAL THERAPY CURRIC	2.00	2.00 2.63	2.00 2.51	2.51	2.00 2.51	2.51	2.00 2.51	2.51	2.00	2.51
PHYS THERAPY SELF SUP ACAD PROGRAMS			1.00		1.41		1.41		1.63	0.87
Total:		2.00 2.63	3.00 2.51	2.51	3.41 2.51	2.51	3.41	2.51	3.63	3.38

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PHYSICAL THERAPY AND REHABILITATION SCIENCE

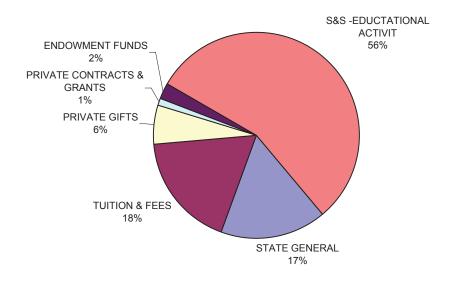
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$0	\$0	\$0	0.00%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$2,671	\$2,671	\$972	36.39%
Private Contracts & Grants	\$23,105	\$22,816	\$5,932	26.00%
Total:	\$25,776	\$25,486	\$6,904	27.09%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PHYSICAL THERAPY AND REHABILITATION SCIENCE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$505,724	\$445,070	\$357,148	\$402,550	\$355,229	-29.8%
TUITION & FEES	\$0	\$195,776	\$243,736	\$229,816	\$381,377	0.0%
FEDERAL	\$0	\$343	\$0	\$0	\$0	0.0%
PRIVATE GIFTS	\$2,810	\$16,180	\$44,260	\$113,984	\$130,373	4539.6%
PRIVATE CLINICAL TRIALS	\$0	\$0	\$0	\$0	\$2,671	0.0%
PRIVATE CONTRACTS & GRANTS	\$0	\$30,002	\$0	\$0	\$23,105	0.0%
ENDOWMENT FUNDS	\$34,344	\$25,500	\$5	\$9,578	\$48,663	41.7%
OPP & EDUCATIONAL FUNDS	\$4,938	\$0	\$881	\$1,975	\$24	-99.5%
S&S -EDUCTATIONAL ACTIVIT	\$96,089	\$324,315	\$416,458	\$646,212	\$1,179,506	1127.5%
Total:	\$643,906	\$1,037,186	\$1,062,487	\$1,404,114	\$2,120,950	229.4%

Expenditures by Fund Source Physical Therapy and Rehabilitation Science FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PHYSICAL THERAPY AND REHABILITATION SCIENCE (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
•		General	Designated				
Instruction	1,095	355	722	18	707	692	304
Research	315		128	186	89	225	
Total	1,410	355	850	205	797	917	304

Source: UCSF Controller's Office

DEPARTMENT OF PSYCHIATRY

- Interim Chair Binder, Renée, M.D.
- Business Officer Caffey, Marie
- Website http://psych.ucsf.edu/

Overview

The UCSF Department of Psychiatry is among the nation's foremost resources for comprehensive and compassionate patient care, research and education in the field of mental health. We are located at the major campuses including Parnassus, San Francisco General Hospital, San Francisco Veterans Affairs Medical Center, Mission Bay, Laurel Heights, and UCSF Fresno. Our distinguished faculty are integrally involved in state-of-the-art patient care, pioneering research, and excellence in professional training.

Clinical Services

<u>Langley Porter Psychiatric Institute (LPPI)</u>

Adult Inpatient Program. The Adult Inpatient Program at LPPI is a 22-bed acute psychiatric service. We use a biopsychosocial approach in the treatment of adults 18 years and older who suffer from severe behavioral and emotional disturbances. Emphasis is on the assessment and stabilization of illness exacerbations with referral to appropriate subacute services following discharge. The average hospital stay is approximately eight days. Complete diagnostic evaluations are performed as indicated by individual patient needs. The treatment program routinely offers individual, group, and milieu therapies, and family meetings are arranged as appropriate. Medication management and electroconvulsive therapy are available. Medical, psychological, spiritual, and other consultative services are also provided.

Partial Hospitalization Program. The Partial Hospitalization Program offers outpatient services for patients with mood and/or personality disorders in addition to other severe and persistent mental illnesses for an average period of 2-4 weeks. Services include a multi-disciplinary treatment team consisting of a psychiatrist, psychologist, nurse, clinical social workers, and rehabilitation therapists; comprehensive evaluation and individualized treatment planning; time-limited, intensive, dialectical behavioral therapy/psychodynamically-based group and individual psychotherapy; medication monitoring; and aftercare planning and referral.

Adult Outpatient Program. The Adult Psychiatry Clinic provides a broad range of outpatient consultation, evaluation and treatment interventions for emotional, psychological, and cogni-

tive problems of adults. All patients receive an initial assessment, and an individualized treatment plan is then developed by a clinician working collaboratively with the patient. Modalities include time-limited and open-ended individual and group psychotherapy, couples therapy, and ongoing medication management.

Child and Adolescent Services. The Children's Center at Langley Porter is a unique resource to families in the Bay Area and throughout Northern California. We provide assessment and treatment for children and adolescents who come to us with a broad range of mental disorders and behavioral disturbances. The Center strives to set the standard for excellent mental health care. Within that context, we offer clinical care in programs that also promote excellent training for the next generation of mental health providers and foster research to ensure continued improvements in care. We balance general expertise with areas of particular focus. Specialty clinics address major syndromes such as Attention-Deficit/Hyperactivity Disorder (ADHD), autism, adolescent depression, complex diagnoses, and Tourette's Disorder. Treatment options include individual and family psychotherapy, cognitive and behavioral therapies, medications, parent education, and group therapies, and we continue to introduce new treatment approaches as they emerge. We also offer expert clinical consultation to community care providers to support their efforts to care for especially complicated patients.

San Francisco General Hospital (SFGH)

SFGH is dedicated to providing services that integrate medical, psychiatric, and addiction treatment. SFGH is the largest provider of acute psychiatric care and the only San Francisco provider of psychiatric emergency care. The inpatient psychiatric units are culturally and ethnically focused. Clinical specialties include the evaluation and treatment of Asians, Latinos, African Americans, people with HIV or AIDS, and gay/lesbian/transgender patients experiencing acute mental illness. In addition, SFGH has an 11-bed unit dedicated to the care of forensic patients from the county jails of the City and County of San Francisco. SFGH also supports various outpatient mental health programs to provide clinical case management to victims of abuse and violence and to prevent future hospitalization. SFGH is involved in initiatives in collaboration with community programs focused on dual diagnosis disorders, expansion of substance abuse services in primary care clinics, increased access to addiction services, a mobile methadone van, office-based opiate treatment, and expansion of hospital-based methadone maintenance and stimulant treatment.

San Francisco Veterans Administration (SF-VA)

The Mental Health Service at the San Francisco VA Medical Center offers a full range of services to care for veterans with emotional problems. Our treatment programs are nationally recognized

for using the latest and most effective treatments available. Almost all of our staff are on the faculty of the University of California San Francisco School of Medicine. The staff work closely together to develop a treatment plan which meets the specific needs of each veteran we see. In order to make access to mental health care more convenient to veterans, we have mental health specialists located at VA community clinics in Santa Rosa, downtown San Francisco and Mare Island in Vallejo, in addition to the services we offer at the SF-VA Medical Center.

General Psychiatry Outpatient Services. Comprehensive services are offered for the full range of emotional problems people can experience. In addition to individual, group, medication, and family treatment approaches, we offer specialized programs which include the women's program, HIV program, and geriatrics program.

Substance Abuse Programs. Substance Abuse Programs offer treatment for people who have found that their use of alcohol or drugs has caused them significant distress or impairment with negative effects on family, personal relationships, health or work. Commonly abused substances include alcohol, cocaine, heroin, marijuana, methamphetamines, PCP, prescription medications, tranquilizers and tobacco. Our treatment programs are structured to care for people through all stages of recovery. Some of our specialized programs include the day hospital, anger management classes, and opiate replacement therapy.

Posttraumatic Stress Disorder Program. Posttraumatic Stress Disorder can develop after a person experiences or witnesses highly stressful and life threatening events. PTSD symptoms include nightmares, flashbacks and irritability. The PTSD program is a special program for veterans who have developed PTSD as a result of combat-related experiences or sexual abuse while in the military. Extensive treatment options include specialized group therapy, specific medication treatments, stress reduction training, and family therapy.

Psychological Services. The Neuropsychology and Psychological Assessment Program provides psychological assessment and neuropsychological evaluations. The Health Psychology Program offers services for people suffering from chronic medical conditions. Some of the services offered include biofeedback, pain management, smoking cessation, weight control, and stress_management.

Research

The UCSF Department of Psychiatry has been a world leader in research for over half a century. Its many investigators explore psychological, biological, and social processes as they may affect the cause, diagnosis, and treatment of mental disorders as well as those that promote health, coping capacity, and life satisfaction. Operating in one of the premier biomedical research

institutions in the world, researchers have compiled a deep and distinguished record of achievement. The Department has a significant number of world-class psychiatrists/molecular biologists pursuing investigations into the cellular and sub-cellular events that lead to both mental health and mental illness. It is widely acknowledged as one of the top-ranked departments in the country for basic science research. Research programs include the AIDS Health Project; California-Arizona Research Node, NIDA National Drug Abuse Treatment Clinical Trials Network; Center for Neurobiology and Psychiatry; Cheyette Laboratory; Child Trauma Research Project; UCSF Depression Center; Habit Abatement Clinic; K9 Behavioral Genetics; Latino Mental Health; Research Program Rubenstein Lab; Prodrome Assessment Research and Treatment Program; Program in Genetics and Epidemiology of Neuropsychiatry Symptoms; Rubenstein Laboratory; San Francisco Treatment Research Center; and von Zastrow Laboratory.

Education

The UCSF Department of Psychiatry is nationally recognized for its many outstanding training programs in medical student education, residency programs and clinical fellowships, research fellowships, and continuing medical education. The top-ranked General Adult Psychiatry Residency Training Program offers a four-year training opportunity across three main training sites at LPPI, SFGH and the SF-VAMC; includes the biological, psychological and socio-cultural aspects of psychiatry; and strives to prepare residents for successful careers emphasizing clinical practice, scholarship, teaching and research. There are residency programs and clinical and research fellowships in UCSF Fresno General Adult Psychiatry; Child and Adolescent Psychiatry; Child and Adolescent Services Multicultural Clinical Psychology; Clinical Psychology; Forensic Psychiatry; Geriatric Psychiatry; Affective Science; Clinical Services Research; Community Academic Research Training Alliance; Drug Abuse Treatment and Services Research; Health Psychology; Psychiatric Research/Neurosciences; SF-VAMC Clinical Psychology; and Continuing Education programs.

FY 2007-08 Headcount as of 4/3/08 PSYCHIATRY

St	Staff	Acac	Academic	Grand
Full Time	Full Time Part Time Full Time Part Time	Full Time	Part Time	Total
227	66	7	107	429

Source: UCSF Human Resources

Permanently Budgeted FTEs PSYCHIATRY

	FY 2003-04	94	FY 2004-05	35	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	90
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
MED SCH-PSYCHIATRY	21.67 16.23	16.23	21.67 15.23	15.23		21.67 15.18	20.67 15.18	15.18	20.67 15.68	15.68
PSY-MENTAL HEALTH SERV FOR DEAF		0.02		0.02						
S/M:PSYCH GRAD ACADEMIC EDUCATION		0.50		0.50		0.50		0.50		0.50
Total:	21.67 16.75	16.75	21.67 15.75	15.75		21.67 15.68	20.67 15.68	15.68	20.67 16.18	16.18

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PSYCHIATRY

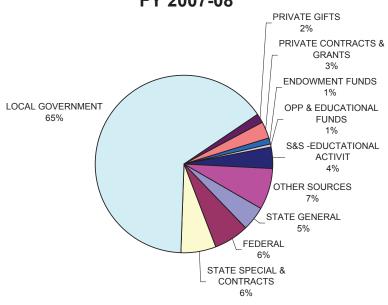
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$2,720,945	\$1,850,498	\$389,559	21.05%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$2,685,422	\$2,624,505	\$269,891	10.28%
Local Government	\$28,434,632	\$27,705,533	\$1,249,695	4.51%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,285,766	\$1,142,358	\$67,437	5.90%
Total:	\$35,126,766	\$33,322,894	\$1,976,581	5.93%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PSYCHIATRY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,849,117	\$1,724,594	\$1,716,463	\$1,621,093	\$2,001,400	8.2%
TUITION & FEES	\$0	\$0	\$0	\$0	\$0	0.0%
FEDERAL	\$2,199,430	\$1,797,608	\$1,959,262	\$2,863,649	\$2,720,945	23.7%
STATE SPECIAL & CONTRACTS	\$3,661,495	\$3,230,240	\$2,468,555	\$3,484,706	\$2,824,746	-22.9%
LOCAL GOVERNMENT	\$22,817,795	\$22,871,596	\$25,553,576	\$26,796,333	\$28,434,632	24.6%
PRIVATE GIFTS	\$1,108,187	\$1,047,056	\$772,506	\$1,093,300	\$780,918	-29.5%
PRIVATE CONTRACTS & GRANTS	\$1,425,889	\$1,512,517	\$1,648,074	\$1,474,848	\$1,285,766	-9.8%
ENDOWMENT FUNDS	\$534,590	\$463,721	\$530,695	\$688,627	\$474,144	-11.3%
OPP & EDUCATIONAL FUNDS	\$123,565	\$131,432	\$162,716	\$234,620	\$243,399	97.0%
S&S -EDUCTATIONAL ACTIVIT	\$1,654,313	\$1,573,741	\$1,527,870	\$1,195,716	\$1,755,113	6.1%
S&S -TEACHING HOSPITAL	\$0	\$0	\$0	\$0	\$0	0.0%
OTHER SOURCES	\$3,073,084	\$2,976,930	\$3,224,949	\$3,117,433	\$3,254,953	5.9%
RESERVES	\$23,589	\$0	\$0	\$0	\$1,482	-93.7%
Total:	\$38,471,054	\$37,329,435	\$39,564,666	\$42,570,326	\$43,777,498	13.8%

Expenditures by Fund Type Psychiatry FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PSYCHIATRY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre General	stricted Designated	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
Instruction	4,351	2,001	873	1,477	8,494	(1,487)	2,655
Research	1,907	-	33	1,874	1,042	865	
Total	6,258	2,001	906	3,350	9,536	(622)	2,655

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

PSYCHIATRY

	Number	Amount
Research Grants	33	\$10,458,659
Training Grants	0	\$0
Fellowships	6	\$260,564
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	39	\$10,719,223

^{*}Not reported

DEPARTMENT OF RADIATION ONCOLOGY

- Chair Roach, Mack III, M.D.
- Business Officer Lewis, Vickie
- Website http://www.ucsf.edu/radonc/

The Radiation Oncology team at UCSF is world-renowned for offering the highest level of evidence-based and innovative care for patients. This team of clinicians, physicists and basic researchers are intimately involved in pioneering ways to improve the outcomes of treatment by fostering advancements in the field of Radiotherapy. These efforts are centered around delivering the very best care for current and future patients, while training the radiotherapy care givers of tomorrow.

History

The Department of Radiation Oncology at UCSF is one of the oldest and most respected departments of its type in the world. The seeds for this department were planted nearly 70 years ago and since then it has evolved from a small research facility to international prominence. During this time, four faculty members have received the highest honor of our society, the American Society of Therapeutic Radiology and Oncology (ASTRO) Gold Medal. This department has made many very important contributions to the field of Radiation Oncology including some of the basic principles of interactions between radiation and drugs such as Therapeutic Gain Factor (TGF) and early trials combining chemotherapy with radiotherapy.

In 1928 Dr. Robert Stone was recruited to head a new Division of Radiology within the Surgery Department at UCSF. Dr. Stone was an early collaborator with the Lawrence brothers of Berkeley with whom he designed and built x-ray equipment. He was also the first from UCSF to be honored with the ASTRO Gold Medal and an early explorer into the use of neutron beams to treat cancer. Dr. Stone's successor, B. V. A. Low-Beers would be known for his exploration of radioisotope therapy and as a founding member of the International Club of Radiotherapists. Perhaps the department's greatest progress was made under the administration of J. Franz Buschke who was not only a pioneer of supervoltage radiotherapy but who, in accepting his appointment at UCSF, committed himself to developing a superior clinical radiation therapy treatment center and training program. It was during his tenure, in 1960, that the first dedicated radiation therapy trainees started at UCSF.

Upon Dr. Buschke's retirement in 1970, one of those first trainees, Dr. Theodore Phillips, became his replacement as Chief of Therapy. In 1974 Dr. Phillips saw Radiation Oncology become a Division of Radiology with a separate budget and then, in 1978, a separate department of the

medical school. Under Dr. Phillips the department grew substantially, acquiring a number of new modalities including three-dimensional conformal radiotherapy, radiosurgery, hyperthermia, and other treatment options. The new modalities enabled UCSF to offer treatments not available within the community and to advance the field through research. In 1998, Dr. Phillips stepped down as chair and became the Wun-Kon Fu Professor. Dr. William Wara assumed the position of Chair and, during his tenure, did much to expand the pediatrics capabilities within the department. Dr. Wara stepped down in 2005 and has been replaced by the current Chair, Dr. Mack Roach, III.

Patient Care

UCSF Radiation Oncology department offers a comprehensive approach to patient care with a wide range of therapy modalities implemented by a staff of noted physicians, physicists and dosemitrists.

Brachytherapy

Brachytherapy refers to a method of delivering radiation to tumors by placing radioactive sources either directly into the tumor or very close to it.

CyberKnife

The CyberKnife is a non-invasive radiosurgery system designed to perform precisely-targeted, high-dose treatment in one to five sessions to small regions anyplace in the body.

Gamma Knife

The Gamma Knife is a specialized machine for giving a single very high dose of highly-conformal radiation to small, well-circumscribed targets anyplace in the brain with the highest level of precision.

• Hyperthermia

Hyperthermia (heat treatment) at high temperatures can be used to kill cancer cells or, at lower levels of heating, to make cancer cells more susceptible to other treatments such as radiation and chemotherapy.

• Image-Guided Radiation Therapy

Most of the treatments delivered in our department use image-guided radiotherapy (IGRT) technologies, some of them developed by our UCSF scientists, to precisely aim and verify where radiation is delivered.

Intensity Modulated Radiotherapy

IMRT applies computer optimization technology to medicine, allowing computercontrolled radiation intensity variations across each treatment field to improve the conformity of radiation to complicated target regions and to improve sparing of normal

tissues.

Intra Operative Radiotherapy

Intra-operative radiation therapy (IORT) is the use of radiation therapy during a surgical procedure in order to deliver maximal radiation to a tumor while sparing adjacent normal structures.

Orthovoltage

Orthovoltage is x-ray treatment used for cancers that are very superficial in the body such as skin cancer.

Proton for Ocular Tumors

Proton therapy is an extremely precise form of radiation treatment that is UCSF's preferred method of radiation therapy for ocular melanoma.

Three Dimensional Conformal Therapy

Three-dimensional conformal radiation therapy (3D-CRT) allows shaping of radiation to a tumor in three-dimensions using non-coplanar radiation beams with computer treatment planning and computer-controlled treatment delivery.

• Treatment Planning

Radiation treatment planning is becoming increasingly sophisticated. Most treatment planning is based on computed tomography (CT) imaging of a patient in the treatment position, but this scan can be merged in the treatment planning computer with other imaging modalities such as magnetic resonance imaging and spectroscopy (MRI/MRS) or positron emission tomography (PET) to improve tumor delineation. Modern treatment planning also benefits from more accurate radiation dose calculation methods and computer optimization.

Research and Clinical Trials

From the brain to head and neck to prostate cancers, some of the most important clinical trials completed to date have been lead by investigators from UCSF. Numerous studies on central nervous system (CNS) tumors have addressed issues related to defining optimal drugs, radiation type (brachytherapy or radioactive seeds, radiosurgery, and radiation therapy), and the use of hyperthermia (heat). The largest randomized trial completed to-date involving head and neck cancer studying optimal fractionation schemes was designed and chaired by Dr. Karen Fu, (another ASTRO Gold Medal winner, from UCSF). The largest prostate cancer trial completed to date, evaluating the impact of radiation field on outcomes, was designed and chaired by another investigator from UCSF (Dr. Roach). As a leading research institution, UCSF fields numerous clinical trials in many areas at one time.

Education and Training

The Department of Radiation Oncology offers the following training opportunities:

- Medical Student Externships/Clerkships
- Residency Training Program
- Physics Residency Training Program
- Physics Postdoctoral Fellowships
- Clinical Fellowships
- Annual Postgraduate Course in Radiation Oncology

FY 2007-08 Headcount as of 4/3/08 RADIATION ONCOLOGY

c Grand	Part Time Total	31 82
Academic	Full Time Part	26
Staff	Part Time F	5
St	Full Time	20

Source: UCSF Human Resources

Permanently Budgeted FTEs RADIATION ONCOLOGY

	FY 2003-04	94	FY 2004-05	FY 2005-06	L	FY 2006-07	22	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	f Academic St	taff	Academic	Staff	Academic	Staff
MED SCH-RADIATION ONCOLOGY	4.00 1.39	1.39	4.00 1.25	4.0	0 1.25	4.00 1.25	1.25	4.00	1.25
Total:	4.00	1.39	4.00 1.25	5 4.00 1.25	.25	4.00	1.25	4.00	1.25

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 RADIATION ONCOLOGY

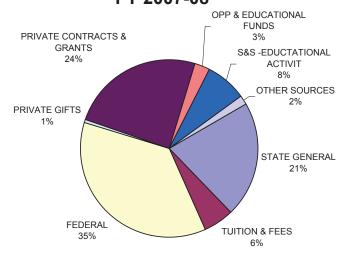
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$954,108	\$765,533	\$362,724	47.38%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	(\$8,743)	(\$9,689)	\$7,543	-77.85%
Private Contracts & Grants	\$640,819	\$625,958	\$177,758	28.40%
Total:	\$1,586,184	\$1,381,803	\$548,024	39.66%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source RADIATION ONCOLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$677,363	\$472,162	\$537,236	\$541,189	\$559,916	-17.3%
TUITION & FEES	\$478	\$5,462	\$42,023	(\$39,436)	\$146,491	30540.9%
FEDERAL	\$1,217,708	\$1,334,264	\$1,378,048	\$1,401,535	\$954,108	-21.6%
PRIVATE GIFTS	\$46,757	\$277,572	\$357,307	\$176,929	(\$20,699)	-144.3%
PRIVATE CLINICAL TRIALS	\$11,329	\$2,646	\$78,420	\$9,897	(\$8,743)	-177.2%
PRIVATE CONTRACTS & GRANTS	\$644,648	\$665,843	\$545,487	\$711,615	\$640,819	-0.6%
ENDOWMENT FUNDS	\$2,959	\$47,587	(\$8,300)	\$41,216	(\$3,502)	-218.4%
OPP & EDUCATIONAL FUNDS	\$46,154	\$90,135	\$118,796	\$66,027	\$72,242	56.5%
S&S -EDUCTATIONAL ACTIVIT	(\$1,562,843)	(\$135,909)	(\$367,091)	(\$1,050,147)	(\$202,780)	-87.0%
OTHER SOURCES	\$3,928	(\$10,296)	(\$7,000)	\$291	\$41,271	950.7%
RESERVES	\$0	\$0	\$39,811	\$0	\$0	0.0%
Total:	\$1,088,481	\$2,749,468	\$2,714,737	\$1,859,115	\$2,179,123	100.2%

Expenditures by Fund Source Radiation Oncology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures RADIATION ONCOLOGY (Dollars in Thousands)

		Current Funds Unrestricted		ls	Distribution		
	Total			Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	680	560	15	105	8,366	680	8,365
Research	1,503	-	40	1,463	945	558	
Total	2,183	560	56	1,568	9,311	1,238	8,365

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

RADIATION ONCOLOGY

	Number	Amount
Research Grants	49	\$14,945,398
Training Grants	2	\$845,971
Fellowships	1	\$38,368
Other Awards	0	\$0
R&D Contracts*	0	\$0
Tota	: 52	\$15,829,737

^{*}Not reported

DEPARTMENT OF RADIOLOGY AND BIOMEDICAL IMAGING

- Chair Arenson, Ronald L., M.D.
- Business Officer Garzio, Catherine
- Website http://www.radiology.ucsf.edu/

Radiology and Biomedical Imaging at the University of California, San Francisco combines trailblazing research, outstanding education, and clinical excellence in a leading academic health sciences institution. Our faculty includes some of the foremost names in diagnostic and interventional radiology today.

Our clinical programs, featuring sub-specialty expertise, span four hospitals: Moffitt / Long Hospitals, San Francisco General Hospital (SFGH), Mt. Zion Hospital, the San Francisco Veterans Affairs Hospital, as well as an outpatient facility at China Basin Landing. We offer the full spectrum of clinical applications and techniques on state-of-the-art equipment. With our five sites, we perform more than 500,000 procedures annually.

Our residency program is among the very best in the country, attracting the best and brightest medical students in the United States. All of our residents go on for sub-specialty fellowships, most often at UCSF. Many pursue academic careers. We are now emphasizing research experiences and training during the residency.

Our clinical and research fellowships, covering every major sub-specialty, are also outstanding. Different fellowship opportunities exist at each of our four sites, including a Clinical Instructor/Fellowship equivalent experience at SFGH geared toward those destined for private practice.

Our research efforts are flourishing with additional faculty and funded programs. The department has consistently been among the top institutions in the NIH rankings, and we are proud to be second in the country in NIH funding in 2007. Industrial collaborations provide us with unique opportunities to work with prototype equipment. These relationships also create close interactions with industrial scientists who work with our faculty and students while exploring new approaches to medical imaging.

The outpatient imaging center and research facility at China Basin Landing, adjacent to the Mission Bay campus, houses the Center for Molecular and Functional Imaging, including a 3T MR system, as well as clinical MR, CT and PET/CT. The Surbeck Laboratory for Advanced Imaging at QB3 offers 3T and 7T MRI and exceptional translational research programs. We expect these important facilities, together with UCSF Medical Center expansion to Mission Bay, to support even more growth in our prolific research program and will strengthen our reputation for leader-

Source: Radiology and Biomedical Imaging 8/19/2008

ship and vision in diagnostic imaging innovation as we enter a new era of molecular imaging.

The department of Radiology consists of the following sections:

- Abdominal Imaging
- Cardiac & Pulmonary Imaging
- Interventional Radiology
- Musculoskeletal
- Neuroradiology
- Neuro Interventional
- Nuclear Medicine
- Pediatric Radiology
- Ultrasound
- Women's Imaging

Research

The Department of Radiology and Biomedical Imaging is actively engaged in research that ranges from basic science to new technologies to clinical applications. In 2007, the Department (including VA Medical Center and UCSF laboratories) ranked 2nd in total NIH funding for diagnostic radiology departments.

In the past several years, the Department has expanded and added three important state-of-the art research facilities: The Center for Molecular and Functional Imaging at China Basin Landing, The Surbeck Laboratory for Advanced Imaging located at QB3: The California Institute for Biomedical Research in Mission Bay, and the Center for Imaging of Neurodegenerative Diseases at the San Francisco VA Medical Center.

Education

The Department of Radiology and Biomedical Imaging is renowned for its excellence in post-graduate education and training. Its programs in residency, fellowships, medical student education, and CME all rank among the nation's most prestigious advanced study programs in Radiology.

Source: Radiology and Biomedical Imaging 8/19/2008

The Diagnostic Radiology Residency Program at the University of California, San Francisco, is one of the largest and most diverse in the United States dedicated to training leaders in research, teaching, public service, and clinical care.

The Nuclear Medicine Residency Program within the Department of Radiology and Biomedical Imaging is unique in offering broad clinical training that includes molecular imaging, dedicated cross-sectional training, and extensive research opportunities.

The Department of Radiology Fellowship Program offers unparalleled training opportunities to those physicians who wish to expand their expertise in several of the radiology subspecialties: abdominal imaging, breast imaging, breast imaging and ultrasound, cross sectional imaging (CT, Ultrasound, MRI), diagnostic neuroradiology, musculoskeletal, pediatric, thoracic imaging, ultrasound, vascular interventional, women's imaging (ultrasound, mammography), interventional neuroradiology and a practicum in cross sectional radiology.

The Henry Goldberg Center for Advanced Imaging Education offers electives in Radiology to medical students through the UCSF School of Medicine's integrated curriculum. The Center teaches radiology and anatomy through the use of medical imaging.

Through the Joint Graduate Program in Bioengineering with UC Berkeley, the Department of Radiology faculty participate in graduate student education and offer significant opportunities for PhD candidates in Bioengineering to participate in research activities. More than half of the faculty in the Joint Graduate Program hold appointments in Radiology and Biomedical Imaging.

The Department of Radiology Postgraduate Education & CME Program has been established as one of the most respected CME programs in the United States since 1963. The UCSF Radiology CME program offers numerous destination courses presented by UCSF's world-renowned radiologists, as well as DVD series that has kept clinicians up-to-date in the field of radiology.

Source: Radiology and Biomedical Imaging 8/19/2008

FY 2007-08 Headcount as of 4/3/08 RADIOLOGY AND BIOMEDICAL IMAGING

Staff		Acac	Academic	Grand
Full Time Pa	Part Time	Full Time	Part Time	Total
157	20	125	167	469

Source: UCSF Human Resources

Permanently Budgeted FTEs RADIOLOGY AND BIOMEDICAL IMAGING

	FY 2003-04	-04	FY 2004-05	05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	-08
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic Staff	Staff	Academic Staff	Staff
GEN MED-BIOENGINEERING-UC BERK	1.00	1.00	1.00	1.00	2.00	1.00	2.00	1.00		2.00 1.00
MED RES-RADIOLOGY	0.76	1.15		0.86	0.27	0.86	0.27	0.86		
MED SCH RADIOLOGY DEPT PROGRAMS	13.83	9.14	13.83	8.04	13.83	8.04	13.83	8.04	13.83	8.03
ORG ACT-RADIOLOGY PROGRAMS	4.13	5.41	2.40	5.16	1.46		1.59	9.12	2.80	10.36
PROF SERV OP-RADIOLOGY	1.55	11.95	1.60	12.65		9.07	1.55	11.06	0.55	7.71
Total:	21.27 28.65	28.65	19.10 27.71	27.71	17.56 18.97	18.97	19.24	19.24 30.08	19.18 27.10	27.10

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 RADIOLOGY AND BIOMEDICAL IMAGING

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$12,170,688	\$10,121,710	\$3,496,389	34.54%
CIRM	\$95,954	\$94,129	\$19,191	20.39%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$4,814,844	\$4,814,389	\$1,214	0.03%
Private Clinical Trials	\$795,300	\$754,006	\$193,312	25.64%
Private Contracts & Grants	\$5,730,846	\$5,392,478	\$1,396,873	25.90%
Total:	\$23,607,632	\$21,176,712	\$5,106,978	24.12%

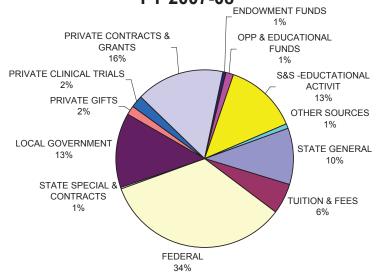
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source RADIOLOGY AND BIOMEDICAL IMAGING

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$3,183,390	\$3,058,451	\$3,372,364	\$3,278,822	\$3,726,960	17.1%
TUITION & FEES	\$1,688,795	\$1,762,633	\$1,827,016	\$1,876,153	\$1,974,420	16.9%
FEDERAL	\$7,474,445	\$8,372,253	\$9,638,944	\$10,461,484	\$12,170,688	62.8%
STATE SPECIAL & CONTRACTS	\$243,554	\$407,762	\$379,855	\$105,758	\$185,287	-23.9%
LOCAL GOVERNMENT	\$2,620,285	\$2,454,092	\$4,660,097	\$4,835,600	\$4,814,844	83.8%
PRIVATE GIFTS	\$451,678	\$553,075	\$1,110,523	\$831,215	\$642,157	42.2%
PRIVATE CLINICAL TRIALS	\$58,580	\$436,549	\$746,064	\$1,270,876	\$795,300	1257.6%
PRIVATE CONTRACTS & GRANTS	\$3,924,715	\$4,360,836	\$4,516,808	\$5,665,390	\$5,730,846	46.0%
ENDOWMENT FUNDS	\$173,763	\$136,523	\$161,721	\$177,826	\$216,847	24.8%
OPP & EDUCATIONAL FUNDS	\$278,991	\$230,674	\$320,324	\$442,227	\$525,640	88.4%
S&S -EDUCTATIONAL ACTIVIT	\$3,403,942	\$4,452,052	\$3,775,012	\$7,670,236	\$4,687,651	37.7%
OTHER SOURCES	\$1,517,997	\$831,682	\$740,859	\$264,485	\$345,868	-77.2%
RESERVES	\$0	\$2,926	\$0	\$0	\$1,462	0.0%
Total:	\$25,020,133	\$27,059,508	\$31,249,586	\$36,880,073	\$35,817,969	43.2%

Source: UCSF Budget & Resource Management

Expenditures by Fund Type Radiology and Biomedical Imaging FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures RADIOLOGY AND BIOMEDICAL IMAGING (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	6,722	2,507	3,383	832	24,810	8,839	26,927
Research	19,351	963	404	17,984	11,927	7,444	21
Total	26,072	3,470	3,787	18,816	36,737	16,283	26,948

Source: UCSF Controller's Office

School/Department Profiles - School of Medicine

DEPARTMENT OF SURGERY

- Chair Ascher, Nancy L., M.D., Ph.D
- Business Officer Schumm, Daniel
- Website http://www.surgery.ucsf.edu/index.html

Mission Statement

Our mission is threefold: to develop the next generation of leaders in surgery; to provide outstanding quality clinical care that is cost effective, yet compassionate; and to make significant advances in scientific knowledge and clinical practice through both basic and clinical research.

Specialty Divisions

- Cardiothoracic
- General Surgery
- Pediatric Cardiothoracic
- Pediatric Surgery
- Plastic & Reconstructive
- Transplant Surgery
- Trauma Surgery (SFGH)
- Vascular Surgery

Geographic Divisions

- UCSF/Parnassus
- UCSF/Mount Zion
- San Francisco General Hospital
- San Francisco Veterans Administration Medical Center

Research Laboratories

- Cardiac Biomechanics Lab
- Cardiothoracic Translational Research Lab
- Center for Bioengineering and Tissue Regeneration
- Center for the Neurobiology of Digestive Diseases
- Chuter Lab
- Colorectal Surgery Research Lab
- Endocrine Surgery Oncology Lab
- Gastrointestinal Surgery Research Lab
- Kang-Niemann Lab
- Lung Transplantation Lab

Source: Surgery website, 7/1/2008

- Pacific Vascular Research Lab
- Raffai Lab
- Sarkar Lab
- Schneider Lab
- Surgical Oncology Lab
- Surgical Research Lab (SRL)
- Thoracic Oncology Lab
- Wang Lab

Clinical Services

The Department of Surgery offers comprehensive general surgical services and subspecialty services, including vascular surgery, plastic surgery, cardiothoracic surgery, pediatric surgery, and transplant surgery. The UCSF/Mount Zion Surgery Division provides services in general, endocrine, breast, melanoma, and oncologic surgery. UCSF/Mount Zion is the site of the UCSF Comprehensive Cancer Center and focuses on providing comprehensive diagnostic and treatment options to patients with benign or malignant tumors.

Education and Training

Patient Education

Educating our patients and those who care for them is a continuous and essential component of the practice, demonstrated daily through such channels as our website, the distribution of instructional materials, and general contact with the patients and their families. We also strive to reach out to the public through community presentations and meetings, as well as participating in UCSF's Mini Medical School program - a public education course encompassing some of the core learning done in the first two years of health science studies.

Residency Education

We deeply value the importance of residency education as a key element to the training and development of our young surgeons. We supervise, mentor, and work directly with the residents of the General Surgery Residency Program in both a clinical and research capacity. For more details on the Residency Program itself, please visit the Department of Surgery's Education Office.

International Education

Our commitment to education has no boundaries as we frequently mentor and work with overseas visitors to the practice and laboratory ranging from students to full-time faculty.

Source: Surgery website, 7/1/2008

Global Health Education

We also support and are dedicated to improving health standards and reducing the burden of disease globally, specifically in the more vulnerable populations. For more information on the UCSF Surgery and Global Health Program, please visit www.globalpas.org. In addition, further information and programs can be found through UCSF Global Health Sciences.

Source: Surgery website, 7/1/2008

FY 2007-08 Headcount as of 4/3/08 SURGERY

St	Staff	Acac	Academic	Grand
Full Time	Full Time Part Time Full Time Part Time	Full Time	Part Time	Total
180	18	119	110	427

Source: UCSF Human Resources

Permanently Budgeted FTEs SURGERY

	FY 2003-04	4	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	80-
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
GENERAL FUNDS	17.50 18.60	8.60	17.50	17.50 17.39	17.50 17.39	17.39				
MED RES-SURGERY-GENERAL								2.00		2.00
MED SCH-SURGERY-GENERAL							17.50	13.07	17.50	17.39
MED SCH-SURGERY-GEN-SFGH								4.32		
SURGERY-ADMINISTRATION								0.03		
SURGERY-EXPER SURG SUITE (4MSUR1)		2.00		2.00		2.00				
SURGERY-XEROX COPIER RECHRG A00008		0.03		0.03		0.03				
SURG-IMMUN/TRANSP HLA TYPING Y00004	0.17 (0.47	0.17	0.47	0.17	0.47				
SURG-IMMUNE MONITOR-POST TRANSPLANT							0.17	0.17 0.47		0.17 0.47
Total:	17.67 21.10	1.10	17.67	17.67 19.89	17.67 19.89	19.89	17.50 19.42	19.42	17.50	17.50 19.39

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 SURGERY

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$10,302,513	\$7,756,126	\$2,995,865	38.63%
CIRM	\$270,670	\$254,296	\$136,303	53.60%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$2,726,784	\$2,726,784	\$9,662	0.35%
Private Clinical Trials	\$1,100,695	\$877,888	\$325,751	37.11%
Private Contracts & Grants	\$4,995,386	\$3,939,573	\$809,816	20.56%
Total:	\$19,396,049	\$15,554,668	\$4,277,396	27.50%

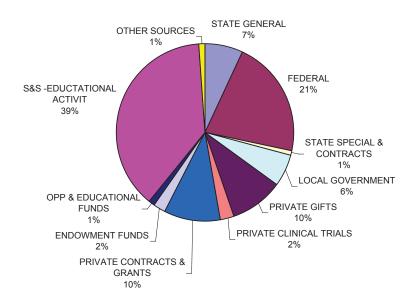
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source SURGERY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,450,095	\$1,325,825	\$1,455,788	\$3,396,010	\$3,412,601	135.3%
TUITION & FEES	\$399,455	\$347,428	\$343,742	\$151,410	\$152,790	-61.8%
FEDERAL	\$7,797,911	\$8,266,062	\$8,322,353	\$10,956,250	\$10,302,513	32.1%
STATE SPECIAL & CONTRACTS	\$1,273,029	\$1,239,603	\$2,309,924	\$98,836	\$371,857	-70.8%
LOCAL GOVERNMENT	\$1,609,980	\$1,889,295	\$1,522,666	\$2,624,061	\$2,726,784	69.4%
PRIVATE GIFTS	\$54,952	\$19,697	\$49,494	\$4,119,265	\$4,798,590	8632.3%
PRIVATE CLINICAL TRIALS	\$0	\$0	\$0	\$3,872,120	\$1,100,695	0.0%
PRIVATE CONTRACTS & GRANTS	\$1,898,152	\$2,063,413	\$2,011,053	\$5,065,622	\$4,995,386	163.2%
ENDOWMENT FUNDS	\$2,349	\$4,907	\$20,419	\$1,671,037	\$1,049,411	44569.3%
OPP & EDUCATIONAL FUNDS	\$403,490	\$407,228	\$456,920	\$394,563	\$499,301	23.7%
S&S -EDUCTATIONAL ACTIVIT	\$2,145,448	\$1,819,148	\$1,791,707	\$15,203,473	\$18,453,440	760.1%
OTHER SOURCES	(\$50,810)	(\$11,235)	\$5,891	(\$3,115,971)	(\$490,521)	865.4%
RESERVES	\$0	\$0	\$0	\$0	\$0	0.0%
Total:	\$16,984,051	\$17,371,370	\$18,289,957	\$44,436,676	\$47,372,848	178.9%

Source: UCSF Budget & Resource Management

Expenditures by Fund Source Surgery FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures SURGERY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	8,289	3,354	3,172	1,763	29,866	(599)	20,978
Research	20,041	58	221	19,761	10,785	9,256	
Total	28,329	3,413	3,393	21,524	40,651	8,657	20,978

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

SURGERY

	Number	Amount
Research Grants	24	\$9,071,155
Training Grants	2	\$323,420
Fellowships	2	\$99,054
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	28	\$9,493,629

^{*}Not reported

DEPARTMENT OF UROLOGY

- Chair Carroll, Peter R., M.D.
- Business Officer Perry, Patricia
- Website http://urology.ucsf.edu/

Mission Statement

The mission of the UCSF Department of Urology is:

- to provide compassionate, cost-effective, skillful and innovative care to all patients
- to ask relevant questions and answer them with scientific knowledge obtained through laboratory and clinical research
- to educate students, residents and fellows in the art and science of urology and thereby to train the future leaders in our field
- to recognize that the Department of Urology is a group of individuals working together, responsibly and ethically, to achieve its goals

Welcome From the Chair

The UCSF Department of Urology is committed to offering the best urologic care, the most productive and innovative research programs, and an outstanding educational program that trains the future leaders in the field. We are one of the most productive urology departments in the nation, concentrating our efforts on a wide variety of research and clinical care programs.

The last eleven years have been very important ones for the Department of Urology. The department has maintained and built on its commitments to research and training. Our research programs have grown and diversified. The continued commitment to clinical and laboratory research is reflected in our outstanding record of publications, grant support, and presentations at regional, national and international meetings.

Our residency program is one of the best in the country, attracting the finest applicants available. The department enjoys the strong support of the Medical Center, School of Medicine and patient advocates who have made resources available to support our academic activities. Members of the department have helped develop multidisciplinary research and patient care programs in key areas throughout the UCSF Campus.

We take seriously our mission to educate, to care and to discover. I am grateful to the faculty and staff, the housestaff, the leadership of UCSF and our patient advocates, who have allowed us to

Source: Urology website, 7/1/2008

achieve and maintain our status as a program of excellence.

History

The discipline of urology at UCSF began at San Francisco County Hospital in 1900. In 1915, Dr. Frank Hinman, Sr., son of a pioneer family, became the first Chair of the Division of Urology. An extraordinary surgeon, teacher and scientist, Dr. Hinman and his monumental book, The Principles and Practice of Urology, first published in 1937, are enduring symbols of the department's commitment to the art and science of urology. Dr. Hinman served as Chair until his retirement in 1950.

Dr. Donald Smith succeeded Dr. Hinman in 1951. His major clinical interests were fluid and electrolyte balance, renal physiology, reconstructive surgery (especially hypospadias repair), urinary tract infection, and pediatric urology. In 1957, he conceived and wrote the text, General Urology (now Smith's General Urology, in its 14th edition), whose concise, direct format has made it a classic for both undergraduate and practitioner. Dr. Smith trained 72 residents during his 25 year tenure as Chair, retiring in 1976.

Dr. Emil A. Tanagho assumed the Chair in 1976, after successfully negotiating departmental status for what had previously been a division of the Department of Surgery. Dr. Tanagho's goal was to maintain the excellence of the clinical training while introducing a strong academic program. To this end, he expanded the residency training program and recruited a complement of full-time faculty members to encompass the diverse subspecialties within the field of urology. During Dr. Tanagho's 20 year tenure as Chair, the Department of Urology contributed immensely to the urologic literature, its members publishing approximately 1000 articles in peer-reviewed journals.

In 1996, Dr. Peter Carroll succeeded Dr. Tanagho as department Chair. Under his tenure the department's research programs have grown and diversified. The department maintains a strong commitment to innovative and expert clinical care. Dr. Carroll continues to build on a distinguished legacy leading the UCSF Department of Urology into the future.

Clinics, Hospitals, and Research Facilities

Clinical, research, educational and administrative functions are housed at five UCSF locations and four affiliated hospitals. UCSF locations include: UCSF Parnassus, UCSF Mount Zion, San Francisco General Hospital, San Francisco and Veterans Affairs Medical Center. The three affiliated hospitals are: California Pacific Medical Center, Children's Hospital-Oakland, and Natividad Medical Center-Salinas.

Source: Urology website, 7/1/2008

Clinical and Research Programs

Faculty lead clinical and research programs in endourology, laparoscopy and urinary stone disease, male infertility and reproduction, neurourology, male erectile dysfunction, pediatric urology, trauma and reconstructive surgery, tissue regeneration, urology outcomes, and urologic oncology. The department's research funding has grown at an impressive rate over the last six years. Funding for clinical and basic research comes from external sources, including federal and state government, foundations and private gifts. A true partnership with patient advocates has aided in the growth of resources and provides a focus and urgency to our research and care missions.

Residency

Urology residents are selected for our program through the American Urological Association Matching Program, consistently matching our top choices. The training program covers all aspects of urologic practice. Each first-year resident is paired with a faculty member who guides the resident through his or her UCSF training. This relationship is designed to facilitate our training program's mission: to maintain a very competitive program which trains future leaders in urology, through the use of individualized clinical rotations and a year of focused laboratory research.

Fellowship

The Department of Urology has a robust set of clinical and postdoctoral fellowship programs which provides specialized training in specific areas of urology. The objective of the fellowship programs are to provide subspecialty training for the future academic leaders of urology. The fellowship programs are tied closely into departmental activities.

Source: Urology website, 7/1/2008

FY 2007-08 Headcount as of 4/3/08 UROLOGY

St	Staff	Acad	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
33	8	33	26	100

Source: UCSF Human Resources

Permanently Budgeted FTEs UROLOGY

-	03-04	FY 2003-04 FY 2004-05 FY 2005-06 FY 2006-07 FY 2007-08	- 2	FY 2005-	90	FY 2006-	-04	FY 2007-	80
Permanent Budget Account Title Academic	ic Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff
MED SCH-UROLOGY 4.00	4.00 4.80		4.34	4.00	4.34	4.00	4.34	4.00 4.34 4.00 4.34 4.00 4.34 4.00 4.34	4.34
Total: 4.00	4.00 4.80		4.00 4.34	4.00	4.00 4.34	Ì	4.00 4.34		4.00 4.34

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 UROLOGY

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$2,790,290	\$2,721,644	\$1,200,921	44.12%
CIRM	\$1,616	\$1,616	\$323	20.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$284,440	\$284,440	\$0	0.00%
Private Clinical Trials	\$5,039	\$3,888	\$9,198	236.55%
Private Contracts & Grants	\$1,172,679	\$1,065,439	\$307,686	28.88%
Total:	\$4,254,063	\$4,077,028	\$1,518,128	37.24%

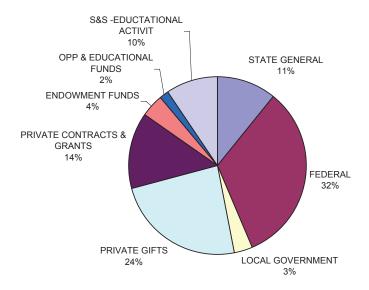
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source UROLOGY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$865,639	\$823,288	\$849,841	\$880,903	\$930,228	7.5%
TUITION & FEES	\$639	\$40,267	\$46,954	\$26,198	\$42,261	6513.7%
FEDERAL	\$1,099,799	\$1,815,591	\$2,724,069	\$2,250,642	\$2,790,290	153.7%
STATE SPECIAL & CONTRACTS	\$69,341	(\$1,792)	\$0	\$550	\$1,616	-97.7%
LOCAL GOVERNMENT	\$178,611	\$235,703	\$240,699	\$247,523	\$284,440	59.3%
PRIVATE GIFTS	\$686,657	\$764,996	\$858,502	\$1,226,386	\$2,028,559	195.4%
PRIVATE CLINICAL TRIALS	\$61,978	(\$710)	\$89,114	\$70,156	\$5,039	-91.9%
PRIVATE CONTRACTS & GRANTS	\$1,411,947	\$1,469,426	\$1,611,621	\$1,955,370	\$1,172,679	-16.9%
ENDOWMENT FUNDS	\$68,356	\$25,975	\$138,003	\$404,004	\$371,340	443.2%
OPP & EDUCATIONAL FUNDS	\$77,713	\$73,068	\$95,759	\$140,115	\$127,770	64.4%
S&S -EDUCTATIONAL ACTIVIT	(\$364,111)	(\$237,943)	\$371,378	(\$630,878)	\$811,162	-322.8%
OTHER SOURCES	\$1,998	\$2,647	\$5,761	\$423	\$8,343	317.5%
Total:	\$4,158,567	\$5,010,516	\$7,031,700	\$6,571,392	\$8,573,726	106.2%

Source: UCSF Budget & Resource Management

Expenditures by Fund Source Urology FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures UROLOGY (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	1,242	930	(890)	1,202	5,428	1,452	5,638
Research	5,662	0	324	5,338	3,066	2,596	
Total	6,904	930	(566)	6,540	8,494	4,048	5,638

Source: UCSF Controller's Office

NIH Awards - FY 2007-08

(Latest Year Available)

UROLOGY

[Number	Amount
Research Grants	9	\$3,871,496
Training Grants	1	\$120,619
Fellowships	1	\$51,278
Other Awards	0	\$0
R&D Contracts*	0	\$0
Total:	11	\$4,043,393

^{*}Not reported

INTERDISCIPLINARY CENTERS AND PROGRAMS

AIDS RESEARCH INSTITUTE

- Director Greenspan, John, BDS, PhD
- Business Officer Moreno, Mario
- Website http://ari.ucsf.edu/

Mission Statement

The AIDS Research Institute at UCSF is committed to fostering innovative and integrated science—basic, clinical, prevention, and policy research—to prevent, understand, treat, and someday cure HIV infection; rapid dissemination of our findings; and training new scientists to continue working toward our ultimate goal of ending the HIV/AIDS epidemic.

About the AIDS Research Institute at UCSF

The AIDS Research Institute (ARI) coordinates and integrates all AIDS research activities at the University of California, San Francisco. The ARI stimulates innovation and supports interdisciplinary collaboration aimed at all aspects of the epidemic domestically and around the world. Bringing together hundreds of scientists and more than 50 programs from throughout the university and affiliated labs and institutions, and working in close collaboration with affected communities, the ARI is one of the premier AIDS research entities in the world.

Executive Committee

- Nina Agabian, PhD
- Francesca Aweeka, PharmD
- Jason D. Barbour, PhD
- Susan Buchbinder, MD
- Michael Busch, MD, PhD
- Haile T. Debas, MD
- Jes W. Dilley, MD
- Ruth Greenblatt, MD
- Warner C. Greene, MD, PhD
- John S. Greenspan, BDS, PhD
- C. Bradley Hare, MD
- Diane V. Havlir, MD
- Frederick Hecht, MD
- Mallory Johnson, PhD
- Jay A. Levy, MD

School/Department Profiles - School of Medicine

- Joseph M. McCune, MD, PhD
- Stephen F. Morin, PhD
- Arthur Reingold, MD, MPH
- E. Michael Reyes, MD, MPH
- George W. Rutherford, MD
- Paul A. Volberding, MD
- Diane W. Wara, MD

Programs

Basic/Vaccine

- AIDS Biology Program
- AIDS Research Institute at UCSF Laboratory of Clinical Virology
- Blood Systems Research Institute
- Craik Laboratory
- Drug Research Unit at San Francisco General Hospital
- Gladstone Institute of Neurological Disease
- Gladstone Institute of Virology and Immunology
- HPV/Epithelial Tumor Virus Laboratory
- Laboratory for Molecular Pathogenesis
- Laboratory of Matija Peterlin
- Laboratory of Neurobiology/Neuroimmunology
- Laboratory of Raul Andino
- Laboratory of Tumor and AIDS Virus Research
- San Francisco Department of Public Health Vaccine Trials
- UCSF-GIVI Center for AIDS Research (CFAR)

Clinical Care & Research

- Adult AIDS Clinical Trials Group (AACTG)
- AIDS and Cancer Specimen Resource
- AIDS Biology Program
- AIDS Health Project
- AIDS Immunobiology Research Laboratory
- AIDS Research Institute at UCSF Laboratory of Clinical Virology
- AIDS Specimen Bank
- Bay Area Perinatal AIDS Center (BAPAC)
- Community Consortium
- Deaf AIDS Support Services, UC Center on Deafness
- Drug Research Unit at San Francisco General Hospital
- Family Treatment Fund
- Francis J. Curry National TB Center

School/Department Profiles - School of Medicine

- International Center of HIV/AIDS Research and Clinical Training in Nursing
- Oral AIDS Center
- Osher Center for Integrative Medicine
- Pediatric AIDS Clinical Trials Unit
- Positive Health Program at SFGH
- 360: The Positive Care Center at UCSF
- UCSF Nursing HIV/AIDS Center
- UCSF-GIVI Center for AIDS Research (CFAR)
- Veterans Affairs Medical Center HIV Clinical Research Program
- Women's HIV Interdisciplinary Network
- Women's HIV Program at UCSF
- Women's Interagency HIV Study (WIHS)

Prevention

Center for AIDS Prevention Studies (CAPS)

- Center for Health Improvement and Prevention Studies (CHIPS)
- Epidemiology and Prevention Interventions Center (EPI-Center)
- San Francisco Department of Public Health HIV Research Section
- Policy
- AIDS Policy Research Center

• Education & Training

- AIDS Action Network
- AIDS Clinical Training for International Organizations of Nurses (ACTION)
- AIDS Education and Training Centers National Evaluation Center
- AIDS Health Project
- ASPIRE (AIDS Services—Prevention, Interventions, Research, and Education)
- Center for AIDS Prevention Studies (CAPS)
 - CAPS/Fogarty International Traineeships in AIDS Prevention Studies
 - Collaborative HIV Prevention Research in Minority Communities Program
 - Traineeships in AIDS Prevention Studies (TAPS)
- Center for HIV Information (CHI)
 - HIV InSite
- Cochrane Collaborative Review Group on HIV Infection and AIDS
- FACES (Family AIDS Care and Educational Services)
- Fogarty International Center, UC Berkeley and UCSF
- Institute for Global Health
- International Center of HIV/AIDS Research and Clinical Training in Nursing
- International Training and Education Center on HIV (I-TECH)
- Japanese Physicians AIDS Training Program
- National HIV/AIDS Clinicians' Consultation Center (NCCC)

School/Department Profiles - School of Medicine

- Osher Center for Integrative Medicine
- Pacific AIDS Education and Training Center (PAETC)
- Positive Health Program Community Education Unit
- San Francisco Area (UCSF) AIDS Education and Training Center
- UCSF Global Health Sciences
- UCSF-GIVI Center for AIDS Research (CFAR)

International

- AIDS Clinical Training for International Organizations of Nurses (ACTION)
- ASPIRE (AIDS Services—Prevention, Interventions, Research, and Education)
- CAPS/Fogarty International Traineeships in AIDS Prevention Studies
- Center for HIV Information (CHI)
 - HIV InSite
- FACES (Family AIDS Care and Educational Services)
- Family Treatment Fund
- Fogarty International Center, UC Berkeley and UCSF
- Institute for Global Health
- International Center of HIV/AIDS Research and Clinical Training in Nursing
- International Training and Education Center on HIV (I-TECH)
- Japanese Physicians AIDS Training Program
- UCSF Global Health Sciences

Women & Children

- Bay Area Perinatal AIDS Center (BAPAC)
- Pediatric AIDS Clinical Trials Unit
- Positive Health Women's Services
- Women's HIV Interdisciplinary Network
- Women's HIV Program at UCSF

CANCER CENTER

- Chair McCormick, Frank, Ph.D.,FRS
- Business Officer Jacobsen, Lynda J.
- Website http://cancer.ucsf.edu/

Overview

The interdisciplinary UCSF Helen Diller Family Comprehensive Cancer Center combines efforts in basic science, patient care, clinical research, epidemiology, and the behavioral sciences, cutting across dozens of departments within the UCSF Schools of Medicine, Pharmacy, Nursing, and Dentistry. The Center's dual aims are to translate the discoveries and mechanistic insights of bench science into novel therapeutics and improved strategies for clinical care; and to reduce the cancer burden through population research that can lead to prevention, early detection, and quality-of-life improvement for those living with cancer.

The Center achieved status in December 1999 as an NCI-designated "comprehensive cancer center," the highest of three designations. In addition to undertaking novel laboratory-based and clinical research, as well as maintaining excellent clinical care programs, comprehensive cancer centers integrate prevention-and-control research into other activities so that they play an important leadership role in their communities and regions. Among the more than 60 NCI-designated cancer centers nationwide, UCSF in 2007 ranked sixth in the size of its NCI Cancer Center Support Grant (CCSG), and first among the 10 such centers located in California. In overall funding, in 2007 UCSF ranked eighth among all U.S. institutions in research support from the NCI.

In November 2007, the Center was renamed the "UCSF Helen Diller Family Comprehensive Cancer Center" in tribute to Bay Area resident Helen Diller and her family.

Research Enterprise and Core Facilities

The overarching goal of the UCSF-HDFCCC is to shepherd new approaches to cancer prevention, detection, and treatment into clinical and population settings, where they can be tested and evaluated. Multidisciplinary programs -- comprising lab scientists, clinical investigators, providers of patient care, epidemiologists, and sociobehavioral scientists -- facilitate this process by focusing research on relevant issues to patients and persons at risk of cancer. Collaboration across disciplines ensures that insights gained in the lab can move quickly and effectively to cancer patients' bedsides and to cancer prevention and control programs.

Many of the Center's research programs are organized around organ or disease sites, but other programs address overarching themes such as defects in cell cycle control, involvement of immunologic mechanisms, and global changes in gene copy number and chromosome arrangement.

In the CCSG renewal application of 2007, the Center organized itself around 11 multidisciplinary programs:

- Breast Oncology
- Cancer and Immunity
- Cancer Genetics
- Cell Cycling and Signaling
- Hematopoietic Malignancies
- Neurologic Oncology
- Pancreas Cancer
- Pediatric Malignancies
- Prostate Cancer
- Society, Diversity, and Disparities
- Tobacco Control

Additional programs, such as those in thoracic oncology, gynecologic oncology, GI and GU cancers other than pancreas and prostate, melanoma/cutaneous oncology, and others, are in developmental formation. The Center's programmatic breadth and depth are additionally exemplified by three NCI SPORE grants (Specialized Programs Of Research Excellence), which engage labbased and population scientists, clinical investigators, and advocates in focused areas of research. Current UCSF SPORE grants are for breast cancer, in operation since 1992; prostate cancer, since 2001; and brain cancer, awarded in 2002.

Research programs are supported by a variety of shared facilities and resources; those cores supported by the current NCI-CCSG include:

- Clinical Research Support Services
- Array
- Biostatistics
- Genome Analysis
- Immunohistochemistry and Molecular Pathology
- Informatics
- Laboratory for Cell Analysis (Cytometry)
- Mass Spectrometry
- Mouse Pathology
- Preclinical Therapeutics
- Tissue
- Transgenic/Targeted Mutagenesis

The Cancer Center has entered into an affiliation relationship with Lawrence Berkeley National Laboratory, which is intended to leverage unique strengths at both institutions and to address mutual interests in cancer research and technological discovery. The range of scientific interests represented by the affiliation encompasses areas within cancer biology, cancer therapy, computational biology, multi-scale imaging, technology, and genomics.

Clinical Care

The mission of the Center's clinical program is to provide comprehensive care through multidisciplinary collaboration and integrated services, to advance cancer therapies through clinical research, and to train future leaders in the treatment of patients with cancer. The collaborative approach to research and treatment is a hallmark of the program, enlisting the participation of surgeons, medical oncologists, radiation oncologists, pediatric oncologists, radiologists, and pathologists.

Highlights of the Center's comprehensive clinical program include:

- Translational research and innovative combined-modality trials for management of cancers of the prostate, breast, head and neck, colon, liver, lung, melanoma, and other solid tumors
- Premier bone marrow transplantation
- Advanced radiation therapy techniques including conformal radiotherapy, intraoperative radiotherapy, high-dose brachytherapy, intravascular brachytherapy, stereotactic radiotherapy, and radio-immunotherapy
- World-renowned neuro-oncology program providing innovative therapy for brain and spinal cord cancers
- Risk prevention/genetic screening
- Leaders in the treatment of pediatric malignancies

The annual number of new cancer diagnoses at UCSF has experienced pronounced growth in recent years. In 2006, a total of 5,505 new cancer cases were seen, as compared with 5,051 new cases in 2005 and 4,761 new cases in 2004.

Community Education; Professional Education and Training

The UCSF-HDFCCC sponsors a wide variety of programs and services in the areas of community outreach, education, and information dissemination, with many community outreach activities focused on cancer prevention and control. Other outreach activities include free support groups, workshops, and wellness programs; faculty collaborations with local public schools; sponsorship of community-based conferences and programs; and provision of community-based research studies that have outreach components.

Professional educational activities include programs geared to laboratory and population scientists, clinicians, and allied health professionals. An annual scientific symposium attracts nationally known cancer researchers; regular scientific seminars bring esteemed researchers to UCSF for discussion and collaboration; and CME conferences have an important impact on the health care community in California and nationally.

UCSF-HDFCCC members represent academic departments in all four UCSF schools, contributing to educational programs within each. Additionally, UCSF-HDFCCC members are strongly affiliated with the graduate degree programs (Biomedical Sciences; Biological Sciences; Biological and Medical Informatics; Chemistry and Chemical Biology; Biophysics; Bioengineering; and Pharmaceutical Sciences/Pharmacogenomics), many of which have cancer components.

Two other specialized training programs, the Minority Program in Cancer Control Research and the Comprehensive Minority Institution/Cancer Center Partnership (partnered with San Francisco State University) provide focused training and collaboration in furtherance of a mission to reach traditionally underrepresented populations.

FY 2007-08 Headcount as of 4/3/08 CANCER CENTER

Grand	Total	78
Academic	Part Time	4
Acac	Full Time	8
Staff	Part Time	5
St	Full Time	61

Source: UCSF Human Resources

Permanently Budgeted FTEs CANCER CENTER

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
ORG ACT-S/M MT ZION CANCER CENTER	8.32	8.32 19.33	4.92	4.92 18.34	3.51	3.51 13.57	4.35	4.35 15.45		7.20 14.01
Total:		8.32 19.33	4.92	4.92 18.34	3.51	3.51 13.57	4.35	4.35 15.45	7.20	14.01

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 CANCER CENTER

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$5,183,342	\$4,850,578	\$2,464,789	50.81%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$37,411	\$33,763	\$8,778	26.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$69,157	\$60,603	\$20,152	33.25%
Private Contracts & Grants	(\$281,876)	(\$283,504)	(\$136,725)	48.23%
Total:	\$5,008,033	\$4,661,440	\$2,356,994	50.56%

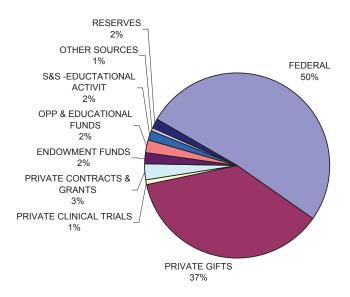
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source CANCER CENTER

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$11,673	\$26,125	\$31,251	\$0	\$786	-93.3%
TUITION & FEES	\$32,921	\$134	(\$33,251)	\$0	\$0	-100.0%
FEDERAL	\$6,850,602	\$6,663,259	\$6,865,259	\$5,594,079	\$5,183,342	-24.3%
STATE SPECIAL & CONTRACTS	\$0	\$0	\$37,648	\$94,677	\$38,520	0.0%
PRIVATE GIFTS	\$4,471,555	\$2,532,770	\$2,186,463	\$2,806,923	\$3,730,036	-16.6%
PRIVATE CLINICAL TRIALS	\$810,122	\$468,883	\$383,189	\$73,100	\$69,157	-91.5%
PRIVATE CONTRACTS & GRANTS	\$240,791	\$190,907	\$185,599	\$343,192	(\$281,876)	-217.1%
ENDOWMENT FUNDS	\$694,585	\$362,858	\$540,231	\$322,989	\$196,607	-71.7%
OPP & EDUCATIONAL FUNDS	\$393,729	\$453,850	\$449,120	\$517,366	\$233,052	-40.8%
S&S -EDUCTATIONAL ACTIVIT	(\$725,281)	\$78,298	\$215,061	\$139,547	\$170,450	-123.5%
OTHER SOURCES	\$82,873	(\$75,466)	(\$27,086)	\$329,954	(\$59,824)	-172.2%
RESERVES	\$0	\$0	\$0	\$0	(\$155,218)	0.0%
Total:	\$12,863,570	\$10,701,618	\$10,833,483	\$10,221,827	\$9,125,032	-29.1%

Source: UCSF Budget & Resource Management

Expenditures by Fund Source Cancer Center FY 2007-08



UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures CANCER CENTER* (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
•		General	Designated				
Instruction	1,788	-	213	1,575	1,105	682	-
Research	16,483	567	745	15,171	9,373	7,110	(0)
Total	18,270	567	958	16,746	10,478	7,792	(0)

*Includes Cancer Research Institute

CENTER FOR HEALTH AND COMMUNITY

- Director Adler, Nancy
- Website http://chc.medschool.ucsf.edu/

Mission Statement

Facilitate multidisciplinary research that will provide comprehensive understanding of problems of health, illness and health care.

Develop and test new strategies for research and interventions to promote health, prevent disease and facilitate recovery.

Provide integrated teaching of basic and applied aspects of social and behavioral sciences, epidemiology and health policy to students in all four professional schools.

Establish collaborative partnerships with community groups that enable the Center to fulfill its educational, research, and service priorities.

About the Center

The Center for Health and Community at UCSF (CHC) was established to assess the challenges of the changing health care delivery environment and identify policies and interventions that will maximize the beneficial impact of the changing health care delivery system.

The Center is comprised of programs and individual faculty from all UCSF Schools who have been at the cutting edge of health services and policy-related research for many years, and includes the basic social and behavioral scientists in epidemiology, health policy, anthropology, psychology, sociology, history, bioethics, economics, and clinical research.

Under the leadership of CHC, scientists, clinicians and policy analysts collaborate through multidisciplinary groups designed to promote comprehensive approaches to health problems, and to bridge the gap between medicine and social science. These collaborative activities offer new opportunities to delivery systems, community health, research, and population health perspectives that form the Center's academic vision. According to Dr. Nancy Adler, Director of the Center for Health and Community, there is "a good deal of research that shows us we cannot isolate physical diseases from our emotions, behaviors and experiences." More than half of premature deaths can be prevented through changes in behavior, environment, and lifestyle-a fact that has been largely ignored by traditional medicine. The Center places special research emphasis on the hu-

Source: Center for Health and Community website, 7/2/2008

man side of health care, on who the patient is rather than what disease the patient has.

The Center also plays a leading role in developing innovative curricula for both pre-clinical and clinical years that will promote an understanding of the contributions of non-biological factors to health, disease, and recovery. Drawing on its strong and diverse faculty from various schools and departments, CHC provides both pre- and postdoctoral students with professional tools to deal with social, psychological and cultural issues in the clinical setting and prepares students to work in a complex socio-political professional environment that crosses traditional boundaries. Through these and other activities, Center members are taking steps to improve care to individuals and communities, shape health care policy, and educate future health care providers.

Research

Under the leadership of the Center, scientists, clinicians and policy analysts collaborate through multidisciplinary work groups to research and promote comprehensive approaches to health problems. These groups reflect the Center's four areas of research interest: changes in the health care delivery system in California, community health indicators and partnerships, methodologies and measurement, and research and policy on key populations and health problem indicators.

Education

Center for Health and Community programs offer graduate degrees in social and behavioral sciences related to health as well as research training for post-doctoral scholars.

The Center also plays a leading role in developing innovative curricula for both pre-clinical and clinical years that will promote an understanding of the contributions of non-biological factors to health, disease, and recovery. Drawing on its strong and diverse faculty from various schools and departments, CHC provides both pre-and post-doctoral students with professional tools to deal with social, psychological and cultural issues in the clinical setting and prepares students to work in a complex socio-political professional environment that crosses traditional boundaries.

Source: Center for Health and Community website, 7/2/2008

CENTER FOR TOBACCO CONTROL RESEARCH AND EDUCATION

- Director –
- Website http://tobacco.ucsf.edu/

Tobacco Control at the University of California encompasses the work of 41 faculty members, their students, fellows and staff, who are committed to research, cessation, training and education designed each year. The Center acts as a focal point to facilitate this work, which extends from basic studies of nicotine pharmacology through the health effects of smoking and secondhand smoke to action-oriented policy interventions.

Research

The research of the Center spans a multitude of disciplines from policy and historical research to economics, and science. The work is designed to inform and improve the effectiveness of public health and clinical interventions to reduce tobacco use both nationally and internationally.

Current research includes the following:

Policy and Politics

Efforts by public health professionals to develop and implement smokefree and tobacco control policies, locally, nationally and internationally, and how the tobacco industry opposes these efforts.

Secondhand Smoke

The health effects of secondhand smoke on individuals, society and the environment.

Addiction and Cessation

The nature and severity of nicotine addiction, treatement strategies, and the health benefits of quitting.

Tobacco Effects

The short and long term effects of cigarette smoking and other forms of tobacco use on health.

Source: Center for Tobacco Control Research and Education, 7/2/2008

Marketing and Prevention

The tobacco industry's marketing tactics for selling cigarettes and other products to adults and children, as well as effective counter-marking public health campaigns.

Special Populations

Case studies, surveys and research showing how the tobacco industry markets their product to specfic groups.

International

The impact the tobacco industry is having outside the U.S. on globalizing the tobacco epidemic and strategies to mitigate this impact.

Education/Training

We offer diverse educational and research opportunities including postdoctoral fellowships, graduate research positions, advocacy training, and individualized documents training. Our work spans policy and historical research, economics, and science.

Source: Center for Tobacco Control Research and Education, 7/2/2008

DIABETES CENTER

- Chair Bluestone, Jeffrey A, Ph.D.
- Business Officer Hildebrand-Zanki, Susanne U
- Website http://diabetes.ucsf.edu/

The Diabetes Center at UCSF has one singular mission: to bring lasting improvements in quality of life to diabetes patients in the Western United States, both type 1 and type 2. This common goal unites the clinical, education and research arms of the Diabetes Center into a comprehensive program that is unique among diabetes facilities.

Research

UCSF's long-standing commitment to diabetes research has placed it squarely at forefront of diabetes research for decades, both type 1 and type 2. With a rich history of breakthrough discoveries, UCSF has attracted numerous world-leaders to its team of researchers.

The UCSF commitment to finding a cure for diabetes is stronger than ever. With expanding facilities and faculty, a new state-of-the-art Islet Transplantation Center and a renewed vision, the Diabetes Center team is charging headlong towards the day when a lasting cure for diabetes is within our grasp.

Much of our research focusses squarely on the development techniques, therapies and new tools that show promise of a day when diabetes is but a memory. A primary objective is to place the remaining pieces in the puzzle that is islet transplantation, developing new, inexhaustible sources of islet cells and thwarting the bodies natural rejection of by making immune tolerance a clinical reality. New therapeutics based upon natural products are also under investigation for type 2 diabetes, just one of many late-breaking therapies in clinical trials at the Diabetes Center.

In working towards a cure, we also imagine a day when diabetes simply never occurs, and so research aimed at preventing it's development, both type 1 and type 2, is another of our lofty goals. From identifying and analysing genes that predispose individuals to the disease, to early interventions that stop diabetes in its tracks, Diabetes Center researchers have made headlines around the world with their ground-breaking diabetes prevention research.

But for most people living with diabetes, a cure cannot come soon enough. The numerous and serious secondary complications that come with diabetes - vision, circulation, kidney, neurological and other - will not wait for a cure. That is why the Diabetes Center's extended network of experts in metabolism, opthalmology, nutrition, endocrinology, molecular and cell biology, hu-

Source: Diabetes Center 8/27/2008

man genetics, and a range of scientific disciplines continue their research to alleviate the pain and suffering that represents the real human cost of diabetes.

Education

The Diabetes Teaching Center

In essence, people with diabetes must act as their own health advocates. They must take meticulous care in the daily activities that most people take for granted, such as meal planning, exercise, and stress management. They must learn proper use and administration of medications and monitoring equipment. And, most importantly they must learn to recognize the symptoms of complications of their disease so that they may be prevented or treated in their early stages.

It is for this reason that UCSF has traditionally placed a great emphasis on the education of people with diabetes, in order to assist them in managing the extraordinary change in lifestyle that necessarily accompanies the disease.

The Diabetes Teaching Center's programs, established in 1978, are distinguished among self-management outreach programs in that they place an exquisite emphasis on individualized care - teaching patients how to recognize their own individual patterns of response to various effectors of their condition. The program enables patients to make more consistent and appropriate adjustments in their therapy and lifestyle.

What you will learn:

- how to understand diabetes mellitus: its types, its causes and effects and the goals of treatment
- effective ways of managing lifestyle changes: exercise, diet, meal planning, weight management and prevention of hypoglycemia (low blood sugar)
- how to manage insulin: principles of usage, modes of action, the best regimen of dose adjustments
- how to test blood glucose and ketones and develop testing skills, adjusting therapy based upon your test results
- how to use oral medications for diabetes treatment: reasons for use, types of medication, potential effects
- how to prevent and manage potential complications, both acute and chronic
- how to recognize the psychosocial issues: emotional adjustment to diabetes mellitus, the role of family and support groups specialized Classes:

Insulin pump classes, oral agent and insulin workshops are provided on a regular basis. Appoint-

Source: Diabetes Center 8/27/2008

ments can also be scheduled on an individual basis with the educators.

Clinical Care

Comprehensive, Preventative, Quality care.

The Diabetes Clinical Center at UCSF is dedicated to the comprehensive, cost-effective care of diabetes in adults and children, with an emphasis on patient education and the avoidance of complications of the disease. The program specializes in the use of proven measures to prevent severe diabetic complications, including optimal metabolic control, screening and treatment of foot disorders, diabetic retinopathy, incipient nephropathy, anti-hypertensive therapy and lipid-lowering therapy.

A model for the management of other chronic diseases, the clinical Center combines a number of unique and important methods to ensure the highest quality of care for all its patients.

For instance, diabetes in children comes with a number of unique concerns not generally associated with adult diabetes. At UCSF, children with diabetes are seen by a special pediatric team that is experienced in the management of the unique aspects of juvenile diabetes, and provide social, economic and emotional support for families. Patients of all ages and their families and caregivers are offered extensive training in diabetes management.

A key feature of the Diabetes Clinical Center is its close collaboration with UCSF diabetes researchers. With few distinct boundaries between clinical researchers and laboratory scientists, UCSF patients have access to late-breaking discoveries, new treatment options and new strategies for diagnosing and managing type 1 and type 2 diabetes. The clinical and research links are strengthened by the UCSF Islet and Cellular Transplant Center.

Source: Diabetes Center 8/27/2008

FY 2007-08 Headcount as of 4/3/08 DIABETES CENTER

St	Staff	Acac	Academic	Grand
Full Time	ull Time Part Time	Full Time	Part Time	Total
106	3	38	25	172

Source: UCSF Human Resources

Permanently Budgeted FTEs DIABETES CENTER

	FY 2003-04	04	FY 2004-05	05	FY 2005-06	90	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
DIABETES CENTER-MRU & HRI COMBINED	0.05	0.65	0.05	0.05 0.84	0.05	0.84	0.05	0.44	0.09	0.30
HORMONE RESEARCH LAB	2.00	2.20	2.00	2.20	2.00	6.10	2.00	2.85	2.00	
MR/METABOLIC RESEARCH	2.18	0.65	2.18	0.65	2.18	0.65	2.18		2.18	
Total:	4.23	3.50	4.23	4.23 3.69	4.23	4.23 7.59	4.23	4.23 3.29	4.78 3.15	3.15

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 DIABETES CENTER

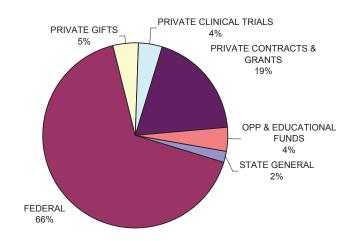
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$7,639,394	\$4,583,982	\$768,981	16.78%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$6,131,135	\$5,540,699	\$1,158,445	20.91%
Local Government	\$2,753,431	\$2,744,264	\$4,927	0.18%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$2,072,031	\$1,899,292	\$200,734	10.57%
Total:	\$18,595,991	\$14,768,238	\$2,133,087	14.44%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source DIABETES CENTER

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$635,352	\$649,586	\$632,426	\$708,610	\$854,946	34.6%
FEDERAL	\$25,031,419	\$28,835,197	\$30,894,325	\$32,588,151	\$29,292,105	17.0%
STATE SPECIAL & CONTRACTS	\$711	(\$503)	\$0	\$0	\$67,433	9383.4%
PRIVATE GIFTS	\$1,455,132	\$1,623,371	\$3,124,937	\$2,377,117	\$2,071,196	42.3%
PRIVATE CLINICAL TRIALS	(\$1,166)	\$2,635	\$208,318	(\$119,823)	\$1,781,052	-152910.5%
PRIVATE CONTRACTS & GRANTS	\$3,539,282	\$3,810,956	\$5,372,576	\$9,790,140	\$8,335,400	135.5%
ENDOWMENT FUNDS	\$37,211	\$93,583	\$3,731	\$60,270	\$33,238	-10.7%
OPP & EDUCATIONAL FUNDS	\$768,091	\$1,093,949	\$1,313,164	\$1,707,730	\$1,860,680	142.2%
S&S -EDUCTATIONAL ACTIVIT	\$1,003,304	\$491,087	(\$457,272)	\$315,369	\$53,552	-94.7%
OTHER SOURCES	\$36,543	(\$15,143)	\$1,865	(\$24,876)	\$63,406	73.5%
RESERVES	\$0	\$0	\$0	\$0	\$0	0.0%
Total:	\$32,505,879	\$36,584,720	\$41,094,070	\$47,402,687	\$44,413,007	36.6%

Expenditures by Fund Type Diabetes Center FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08
Current Funds Expenditures
DIABETES CENTER
(Dollars in Thousands)

		-	Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	335	-	- 62 273		158	176	-
Research	40,260	676	1,350	38,234	11,085	29,287	112
Public Service	9,975	-	-	9,975	5,986	3,989	
Total	50,570	676	1,412	48,482	17,229	33,453	112

Source: UCSF Controller's Office

INSTITUTE FOR REGENERATION MEDICINE

- Director– Kriegstein, Arnold
- Business Officer Sustaita, Gloria
- Website http://stemcellfacts.ucsf.edu/

Regenerating injured tissues and organs might sound like science fiction. But as we gain a greater understanding of how stem cells in our body change from their undifferentiated states to become specialized tissues, UCSF's Institute for Regeneration Medicine is at the threshold of developing cell-based approaches and therapies for various diseases that result from tissue injury or degeneration.

The UCSF Institute for Regeneration Medicine (IRM) combines the talents of molecular biologists, developmental and cell biologists, neurobiologists, immunologists and cancer researchers. Their efforts, organized around research areas, are aimed at gaining a better understanding of how defined types of tissues develop, and are directed toward cell-based approaches to the treatment of disease. These insights will shape and direct potential therapies, which will be tested and refined in UCSF-based clinical trials.

The IRM's organization is designed to foster collaborations derived from work on different organs and tissue systems. Accordingly, the laboratories and research efforts are organized along a series of pipelines, each focusing on a particular tissue or organ system, and including basic research as well as translational research directed toward clinical applications. A basic researcher and a clinician direct each pipeline.

Seven different pipelines, based on extensive research and clinical strength, have been developed:

- Hematopoeisis
- Musculoskeletal
- Neural
- Cardiovascular
- Pancreas/Diabetes and Liver
- Epithelial
- Reproductive

The IRM is also the home of UCSF's Human Embryonic Stem Cell Research Center and Program in Craniofacial and Mesenchymal Biology. The IRM is supervised by Dr. Arnold Kriegstein, Director, and Dr. Rik Derynck, Co-Director.

Source: Institute for Regeneration Medicine website, 7/2/2008

OSHER CENTER FOR INTEGRATIVE MEDICINE

Executive Committee

- Susan Folkman, PhD, Director
- Frederick (Rick) Hecht, MD, Director, Research
- Ellen Hughes, MD, Director, Education Programs
- Donald I. Abrams, MD, Director, Clinical Programs

Website - http://osher.ucsf.edu/

The Osher Center for Integrative Medicine came into being in 1997 because of the vision of UCSF School of Medicine Dean Emeritus Haile T. Debas, M.D., and the generous support of the Bernard Osher Foundation. Dr. Debas felt that UCSF, as one of the top-ranked biomedical research and teaching institutions in this country, needed to take the lead in researching complementary and alternative therapies and educating its doctors so they could help advise their patients, many of whom are seeking out these therapies.

The Osher Center operates as a campus-wide multidisciplinary program with a mission to transform the way medicine is practiced by conducting rigorous research on integrative approaches to health, educating students, health professionals and the community, and treating patients with compassionate care that addresses all aspects of health and wellness - physical, psychological, social and spiritual.

Mission Statement

Our mission is to transform the way medicine is practiced by conducting rigorous research on integrative approaches to health, educating students, health professionals and the community, and treating patients with compassionate care that addresses all aspects of health and wellness - physical, psychological, social and spiritual.

We are working to transform health care by conducting rigorous research on the medical outcomes of complementary and alternative healing practices; educating medical students, health professionals and the public about these practices; and creating new models of clinical care.

Research

A high priority of the Osher Center for Integrative Medicine is to conduct rigorous scientific research to determine the most effective treatments for patients that address all aspects of their

Source: Osher Center for Integrative Medicine website, 7/2/2008

health and wellness -- biological, psychological, social and spiritual. Through this research, the Osher Center will advance the evaluation of complementary, alternative, and integrative treatments and the integration of proven approaches into patient care. Our research aims not only to evaluate whether treatments work, but how they work.

An important focus of our research is mind-body therapies. We are the recipients of a Center of Excellence grant from the National Center for Complementary and Alternative Medicine of the National Institutes of Health. The Center of Excellence grant will investigate the effects of a meditation intervention (Mindfulness-Based Stress Reduction) in HIV infection, including the impact on disease course, neuroendocrine function, and the immune system. Other active areas of research include the health effects of Yoga, and Traditional Chinese Medicine/Acupuncture.

Clinical Services

The Clinical Practice at the Osher Center for Integrative Medicine offers a variety of individual treatments. The physicians are trained in both conventional and alternative therapies and can provide a professionally guided approach to your health care.

Individual treatments and services include:

- Acupuncture and Traditional Chinese Medicine
- Biofeedback
- Integrative Medicine Consultation
- Integrative Cancer Care
- Integrative Psychiatry & Psychotherapy
- Integrative Women's Health
- Manual Medicine/ Spinal Manipulation
- Personal Fitness Training
- Therapeutic Massage

Source: Osher Center for Integrative Medicine website, 7/2/2008

WHEELER CENTER FOR THE NEUROBIOLOGY OF ADDICTION

- Director Fields, Howard, MD, PhD
- Business Officer Veitch, Patricia
- Website http://pub.ucsf.edu/cnba/Center/index.php?p=/index.html

Mission Statement

The Wheeler Center for the Neurobiology of Addiction is a collaborative research program seeking biological answers to the human tragedy of drug addiction. Our scientists investigate how drugs of abuse change brain function and how these changes lead to addiction. Our goal is to develop a foundation of knowledge resulting in more effective treatment for addiction.

About the Wheeler Center

The Wheeler Center for the Neurobiology of Addiction has brought together scientists in genetics and in cell, molecular and systems neuroscience to explore and identify nervous system changes that lead to addiction.

The Center's members have made seminal contributions to our understanding of drug actions on the nerve cells that mediate reward and on the mechanisms of learning and memory -- phenomena that play key roles in the addictive process. The goal of the center is two fold. First, to bring to the study of addiction a broad scope of basic scientific inquiry and fresh insights that require collaboration across disciplinary boundaries. Second, to attract the brightest students and young investigators to the field of addiction research.

By so doing, Center researchers will accelerate the discovery process and advance knowledge through exploiting new technologies, whenever and wherever they emerge. For this reason, Wheeler Center funding provides grants to associated faculty with novel ideas or techniques. We provide seed money to nascent approaches with the hope of nurturing creativity. Given the aversion to risk taking among traditional funding sources and their emphasis on support for established projects and investigators, we believe that this approach can be catalytic.

With its innovative and collaborative research program, the Center for the Neurobiology of Addiction is exploring and identifying the genetic risk factors and the neural circuits, that enable drugs of abuse to take command of the brain. By so doing, Center researchers hope to find ways to strip these drugs of their addictive power and to find new avenues for treatment and prevention.

Source: Wheeler Center 8/19/2008

Center investigators looking at the genetic variations that influence learning and memory and the molecular targets of addicting drugs, hope to understand what happens to the molecular components of nerve cells when they are exposed to drugs of abuse.

Those analyzing the effects of addicting drugs on the specialized junctions between nerve cells (synapses), seek to explain what happens to synapses when addictive drugs reach the brain's pleasure centers, especially the dopaminergic reward circuitry.

Those concentrating on the neural circuits involved in addiction hope to reveal the connections between molecular changes in nerve cells and drug tolerance, drug-dependence, and drug self-administration.

Source: Wheeler Center 8/19/2008

ORGANIZED RESEARCH UNITS

CANCER RESEARCH INSTITUTE

- Director Frank McCormick, PhD, FRS
- Business Officer Jacobsen, Lynda J.
- Website http://cancer.ucsf.edu/research/cri.php

The UCSF Cancer Research Institute (CRI) serves as a hub for lab-based cancer research at the UCSF Helen Diller Family Comprehensive Cancer Center. Physically it encompasses two floors of the Center's UCSF/Mount Zion laboratory research building and additional space on the UCSF Parnassus campus.

The Cancer Research Institute was established by the University Regents in 1948 as an Organized Research Unit within the University of California system. Frank McCormick, PhD, FRS, has served since January 1997 as CRI Director, a position he holds in addition to his directorship of the overall UCSF Helen Diller Family Comprehensive Cancer Center. In 2007, 15 UCSF faculty members held academic appointments in the Cancer Research Institute.

Source: Cancer Research Institute, 10/2/2008

FY 2007-08 Headcount as of 4/3/08 CANCER RESEARCH INSTITUTE

S	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time Part Time	Part Time	Total
15	1	28	14	28

Source: UCSF Human Resources

Permanently Budgeted FTEs CANCER RESEARCH INSTITUTE

	FY 2003-04	04	FY 2004-05	05	FY 2005-06	90	FY 2006-07	20	FY 2007-08	90
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff
MR-CANCER RESEARCH INSTITUTE	1.56	1.51	1.56	.56 1.51	1.56	1.51	1.56	1.51	1.56	1.51
Total:	1.56	1.51	1.56	1.51	1.56	1.51	1.56	1.51	1.56	1.51

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 CANCER RESEARCH INSTITUTE

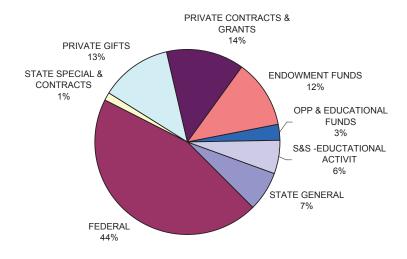
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$3,700,232	\$3,530,990	\$1,852,027	52.45%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$12,074	\$12,074	\$0	0.00%
Private Contracts & Grants	\$1,115,675	\$1,027,776	\$235,973	22.96%
Total:	\$4,827,981	\$4,570,841	\$2,088,000	45.68%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source CANCER RESEARCH INSTITUTE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$701,825	\$691,807	\$703,028	\$639,986	\$565,763	-19.4%
FEDERAL	\$4,602,956	\$5,071,428	\$6,391,309	\$5,379,162	\$3,700,232	-19.6%
STATE SPECIAL & CONTRACTS	\$61,634	\$21,468	\$43,402	\$34,820	\$96,656	56.8%
PRIVATE GIFTS	\$1,294,565	\$1,414,696	\$952,069	\$1,281,102	\$1,029,942	-20.4%
PRIVATE CLINICAL TRIALS	\$0	\$0	\$0	\$0	\$12,074	0.0%
PRIVATE CONTRACTS & GRANTS	\$2,081,891	\$1,668,834	\$1,878,208	\$1,629,096	\$1,115,675	-46.4%
ENDOWMENT FUNDS	\$735,500	\$833,730	\$428,428	\$621,511	\$972,483	32.2%
OPP & EDUCATIONAL FUNDS	\$0	\$0	\$0	\$0	\$235,896	0.0%
S&S -EDUCTATIONAL ACTIVIT	\$2,712	\$9,123	\$37,041	\$182,058	\$479,138	17565.8%
RESERVES	\$0	\$0	\$975	\$0	\$0	0.0%
Total:	\$9,481,083	\$9,711,087	\$10,434,461	\$9,767,735	\$8,207,859	-13.4%

Expenditures by Fund Source Cancer Research Institute FY 2007-08



UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures CANCER RESEARCH INSTITUTE* (Dollars in Thousands)

			Current Fund	ls		Distribution	
_	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	General Designated				
Instruction	1,788	-	213	1,575	1,105	682	-
Research	16,483	567	745	15,171	9,373	7,110	(0)
Total	18,270	567	958	16,746	10,478	7,792	(0)

*Includes Cancer Center

Source: UCSF Controller's Office

CARDIOVASCULAR RESEARCH INSTITUTE

- Chair Coughlin, Shaun R, M.D., Ph.D.
- Business Officer Gregg, Paulette
- Website http://www.cvri.ucsf.edu/

Mission Statement

The Cardiovascular Research Institute (CVRI) performs cutting edge research illuminating cardiovascular and pulmonary biology and disease and trains clinicians and scientists to become future leaders of these fields.

The CVRI provides a home for a wide spectrum of investigation ranging from the most basic science to disease-focused and patient-based research. It links faculty interested in cardiovascular biology and disease across UCSF programs, departments and campuses. The diversity of CVRI's faculty and its collaborative culture fosters a multidisciplinary approach to research problems and provides an important bridge between UCSF's outstanding clinical and basic science departments.

CVRI's multidisciplinary approach has produced major advances in cardiovascular science and medicine. For example, an effort to understand air-water interfaces and the biophysics of alveolar inflation led directly to a treatment for respiratory distress syndrome in premature infants, leading to a 50% drop in mortality from this disease in the U.S. and elsewhere -- the largest single effect on infant mortality in recent history.

Ongoing research by Institute faculty ranges from understanding how hormones regulate cellular behaviors to uncovering the detailed mechanisms by which blood clots; from understanding the genes that govern the formation of heart muscle cells to how genes determine an individual's risk for heart disease; and from how lung tissue is formed in the embryo to how it is remodeled by chronic disease. Currently, CVRI has nearly 100 core and associate faculty conducting research on the following opportunities for progress:

- Vascular biology and atherothrombosis
- Metabolism, obesity and metabolic diseases
- Developmental biology and congenital anomalies
- Pulmonary biology and disease
- Ion channels and arrhythmias
- Muscle biology and heart failure
- Prediction and prevention of cardiovascular disease

Source: Cardiovascular Research Institute 8/19/2008

Advanced technologies

The research training program of the Institute has played a central role in CVRI activities. Since 1958, over 2600 postdoctoral research fellows have trained in the CVRI and energized its research. The training program continues to flourish with approximately 100 current fellows and six National Institutes of Health-sponsored training grants. The CVRI's multidisciplinary research programs expose trainees to a wide spectrum of approaches and techniques and provide a broad perspective suitable for future leaders in cardiovascular science and medicine. Intensive mentored research experience is enriched by coursework created to prepare individuals for a career in academic biomedical science. Key to the success of the training program is the CVRI's encouragement of collaboration among scientists in different disciplines and the interactions among their trainees.

Looking forward, the CVRI plans to expand into a new cardiovascular research building on UCSF's Mission Bay campus. The new facility will bring faculty, staff, and trainees with complementary skill sets together in dedicated neighborhoods reflecting the research themes described above. Each neighborhood will include basic and physician-scientists and will leverage the extraordinary research community that has developed at Mission Bay. At the same time, there will be substantial investment in supporting and growing the hospital-based CVRI research programs that will remain on the Parnassus campus.

Given the CVRI's history of achievement, its robust training program, its critical mass of established investigators in pulmonary and cardiovascular research, and its close ties to some of the best basic science and clinical departments in the world, the CVRI is well positioned to make important new contributions to basic knowledge and clinical management of pulmonary and cardiovascular diseases. The morbidity and mortality from these diseases will continue to be major public health challenges, and we hope and expect that the Institute's contributions to advancing the prevention, diagnosis and treatment of these diseases will be as important in the next five decades as it has been in the last five.

Source: Cardiovascular Research Institute 8/19/2008

FY 2007-08 Headcount as of 4/3/08 CARDIOVASCULAR RESEARCH INSTITUTE (CVRI)

Caree	Career Staff	Acac	Academic me Part Time	Grand
				- 0.0
83	10	45	23	161

Source: UCSF Human Resources

Permanently Budgeted FTEs CARDIOVASCULAR RESEARCH INSTITUTE

	FY 2003-04	.04	FY 2004-05	FY 2005-06	FY 2006-07	FY 2007-08	
Permanent Budget Account Title	Academic	Staff	Academic Staf	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Academic Staff	Academic Sta	Ħ
CLIN PHYSIOLOGICAL SECT-CVRI	2.75		2.75	2.75	2.75	2.75	П
MR-INST CARDIOVASCULAR RES	2.20	4.33	2.20 4.24	2.20 4.24	2.20 4.24	2.20 4.24	4
PROF SERV OP-CVRI	0.02	0.02 0.50	0.02 0.50	0.40	0.20	0.20	0
Total:		4.97 4.83	4.97 4.74	4.95 4.64	4.95 4.44	4.95 4.44	4
							П

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 CARDIOVASCULAR RESEARCH INSTITUTE

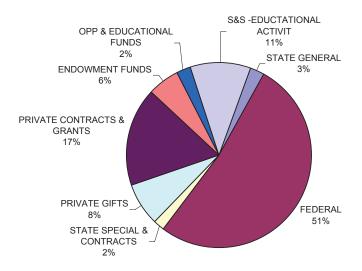
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$14,087,195	\$11,486,809	\$5,087,005	44.29%
CIRM	\$543,357	\$526,842	\$282,635	53.65%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$93,536	\$93,079	\$48,690	52.31%
Private Contracts & Grants	\$4,610,661	\$4,108,350	\$1,485,122	36.15%
Total:	\$19,334,749	\$16,215,080	\$6,903,452	42.57%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source CARDIOVASCULAR RESEARCH INSTITUTE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,132,374	\$1,031,718	\$684,007	\$835,521	\$705,712	-37.7%
TUITION & FEES	\$7,233	\$1,892	\$9	\$732	\$125	-98.3%
FEDERAL	\$16,605,996	\$15,158,904	\$14,952,780	\$15,887,509	\$14,087,195	-15.2%
STATE SPECIAL & CONTRACTS	\$225,399	\$233,811	\$76,689	\$56,424	\$541,154	140.1%
PRIVATE GIFTS	\$1,719,375	\$1,573,883	\$1,249,254	\$1,325,362	\$2,061,341	19.9%
PRIVATE CLINICAL TRIALS	\$43,805	\$55,660	\$48,844	\$155,741	\$93,536	113.5%
PRIVATE CONTRACTS & GRANTS	\$2,609,924	\$4,303,755	\$3,990,636	\$3,800,018	\$4,610,661	76.7%
ENDOWMENT FUNDS	\$684,647	\$746,312	\$1,133,936	\$1,465,524	\$1,520,865	122.1%
OPP & EDUCATIONAL FUNDS	\$482,703	\$438,235	\$616,624	\$490,315	\$651,751	35.0%
S&S -EDUCTATIONAL ACTIVIT	\$1,909,787	\$1,962,347	\$2,241,795	\$2,715,385	\$2,891,741	51.4%
OTHER SOURCES	(\$14,741)	\$14,852	(\$5,685)	\$9,997	(\$8,941)	-39.3%
Total:	\$25,406,502	\$25,521,370	\$24,988,887	\$26,742,528	\$27,155,140	6.9%
		<u>'</u>		·		

Expenditures by Fund Type Cardiovascular Research Institute FY 2007-08



Source: UCSF Budget & Resource

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures CARIOVASCULAR RESEARCH INSTITUTE (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
- -		General	Designated				
Instruction	1,686	-	901	784	1,050	636	-
Research	21,002	493	365	20,145	11,894	9,108	
Total	22,688	493	1,267	20,929	12,944	9,744	-

Source: UCSF Controller's Office

CENTER FOR REPRODUCTIVE SCIENCES

- Director Conti, Marco, M.D.
- Website http://obgyn.medschool.ucsf.edu/page.cfm?id=84

Mission Statement

The Center is a multidisciplinary group of basic and physician scientists engaged in research and training in reproductive biology. Molecular, cellular, and genetic approaches are used to address fundamental aspects of reproductive health and facilitate translation to the clinic. Each member is dedicated to ethical scientific discoveries. This knowledge disseminates to the clinical and research community for training of new generations of scientists and clinicians in order to improve human reproductive health.

The Center for Reproductive Sciences (CRS) is an Organized Research Unit of the University of California, founded in 1977. The CRS is composed of 19 basic scientists representing diverse fields of biology who have joined forces with 8 physician-scientists to coordinate basic and translational research in reproductive physiology and pathophysiology. The faculty utilizes state of the art techniques to extend the understanding and, ultimately, treatment of reproductive disorders and hormone-dependent cancers. CRS research activities are conducted within several different departments and programs throughout the UCSF campus which include the Department of Obstetrics, Gynecology and Reproductive Sciences, the Departments of Anatomy and Physiology, Department of Urology, the General Clinical Research Center and the Cancer Center. Senior members of the CRS act as mentors for scholars in several prestigious University-based training activities including the Programs in Biological Science (PIBS) and Biomedical Science (BMS), the Molecular Medicine Program, and three national NIH training programs: Medical Scientist Training Program, the Reproductive Scientist Development Program and the Women's Reproductive Health Research Career Development Center.

Source: Center for Reproductive Sciences 9/24/2008

HOOPER FOUNDATION

- Director Bishop, J. Michael, M.D.
- Business Officer Stauffer, Grace A
- Website http://www.ucsf.edu/hooper/

The Hooper Foundation is an organized research unit within the University of California at San Francisco. There are currently three faculty members doing research in the following areas:

- J. Michael Bishop Oncogenes and the molecular basis of cancer
- Frances M. Brodsky Clathrin and vesicular trafficking diseases
- Don Ganem Human pathogenic viruses

Source: Hooper Foundation 9/30/2008

FY 2007-08 Headcount as of 4/3/08 HOOPER FOUNDATION

St	Staff	Acac	Academic	Grand
Full Time	Part Time Full Time Part Time	Full Time	Part Time	Total
9	2	12		20

Source: UCSF Human Resources

Permanently Budgeted FTEs HOOPER FOUNDATION

	FY 2003-04	94	FY 2004-05	-05	FY 2005-06	9	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff
MR-INSTITUTE-HOOPER FOUNDATION		6.60 6.37		6.60 6.37	6.60 6.37	3.37	6.60 6.37	6.37		6.60 6.37
Total:	6.60 6.37	6.37	09:9	6.60 6.37	6.60 6.37	3.37	09'9	6.60 6.37	09.9	6.60 6.37

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 HOOPER FOUNDATION

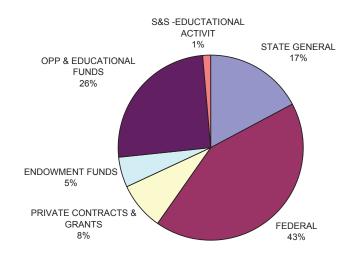
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$1,555,985	\$537,391	\$223,774	41.64%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$194,293	\$181,918	\$25,871	14.22%
Total:	\$1,750,278	\$719,309	\$249,645	34.71%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source HOOPER FOUNDATION

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$565,859	\$583,388	\$637,810	\$611,605	\$629,008	11.2%
FEDERAL	\$2,083,370	\$1,203,940	\$1,542,091	\$1,800,339	\$1,555,985	-25.3%
STATE SPECIAL & CONTRACTS	\$0	(\$2,083)	\$11	\$0	\$0	0.0%
PRIVATE GIFTS	\$49,190	\$7,975	\$82,347	\$768,925	\$308,088	526.3%
PRIVATE CONTRACTS & GRANTS	\$619,059	\$342,514	\$341,349	\$449,004	\$194,293	-68.6%
ENDOWMENT FUNDS	\$1,112,104	\$1,205,624	\$1,078,234	\$554,485	\$930,072	-16.4%
OPP & EDUCATIONAL FUNDS	\$81,964	\$60,170	\$33,200	\$42,874	\$47,624	-41.9%
S&S -EDUCTATIONAL ACTIVIT	\$187,372	\$73,381	\$127,308	\$159,940	\$188,855	0.8%
Total:	\$4,698,919	\$3,474,910	\$3,842,350	\$4,387,173	\$3,853,924	-18.0%

Expenditures by Fund Type Hooper Foundation FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures HOOPER FOUNDATION (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
•		General	Designated				
Instruction	195	-	64	130	58	137	-
Research	3,108	629	172	2,307	1,035	2,072	(1)
Total	3,303	629	236	2,437	1,093	2,209	(1)

Source: UCSF Controller's Office

INSTITUTE FOR GLOBAL HEALTH

- Director Rutherford, George W., M.D.
- Business Officer Lopez, Georgina Y.
- Website http://globalhealthsciences.ucsf.edu/igh/

Mission Statement

The Institute for Global Health is dedicated to improving health and reducing the burden of disease in the world's most vulnerable populations through applied public health research, education, and program improvement. We promote the use of evidence-based methods to build capacity in surveillance, monitoring and evaluation, epidemiology, clinical care and scientific best practices. We work with academic, governmental, and community partners throughout the world to accomplish these goals.

Goals

- Improve health and reduce the burden of disease in the world's most vulnerable populations;
- Promote the use of evidence-based methods to build capacity in surveillance, monitoring and evaluation, epidemiology, clinical care and scientific best practices;
- Work with academic, governmental, and community partners throughout the world to accomplish these goals.

Program Areas

The Institute for Global Health is dedicated to improving health and reducing the burden of disease in the world's most vulnerable populations through applied public health research, education, and program improvement. As new priorities emerge and as new capacities to improve human health are developed, these programs will expand and change over time. Current programs at IGH address:

- A randomized controlled trial to evaluate the effectiveness of clinic-centered, clinicand home-centered, and standard strategies for reducing HIV-transmission risk and increasing drug adherence in HIV-infected adults initiating antiretroviral therapy (ART) in a peri-urban area of Uganda;
- Evidence-based literature reviews and literature digests;
- Monitoring and evaluation of developing country programs to analyze their impact and effectiveness, with the results used for program improvement;

Source: Institute for Global Health - 9/25/2008

- Technical assistance and research support to countries on a variety of HIV/AIDS topics. This work includes developing protocols and sampling plans, conducting statistical analysis, coordinating data collection, data entry, and data cleaning, training data collection staff; coordinating study logistics, and troubleshooting for technical issues;
- Training programs for developing country scientists in clinical research methods;
- Training workshops for developing country public health workers on such topics as data use and analysis, geographic information systems (GIS), HIV surveillance, scientific writing, and triangulation (the synthesis and integrated analysis of data from multiple sources for program decision-making);
- A variety of other programs of education and training, research, and technical assistance.

Over the years, IGH has worked closely with such key entities as the World Health Organization (WHO), the Centers for Disease Control and Prevention's Global AIDS Program (CDC-GAP), and the Global Fund to Fight AIDS, Tuberculosis, and Malaria. Our multidisciplinary faulty have lead innovative, highly effective programs in multiple countries around the world.

The Institute for Global Health has partnered with and continues to work collaboratively with UCSF's Global Health Sciences (GHS). GHS, under the direction of Haile T. Debas, MD, and reporting directly to Chancellor J. Michael Bishop was established in 2003 to create a vision and provide institutional leadership for global health at UCSF. Many new relationships for training and research continue to be forged.

Source: Institute for Global Health - 9/25/2008

FY 2007-08 Headcount as of 4/3/08 INSTITUTE FOR GLOBAL HEALTH

St	aff	Acad	lemic	Grand
Full Time	Part Time	Full Time	Part Time	Total
10	2			12

Source: UCSF Human Resources

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 INSTITUTE FOR GLOBAL HEALTH

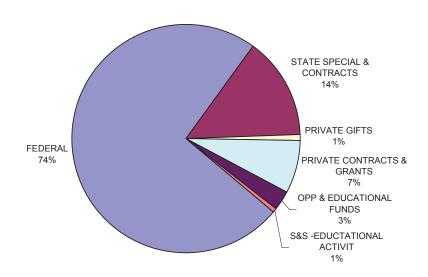
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$4,034,175	\$3,482,457	\$820,510	23.56%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$790,219	\$666,888	\$89,807	13.47%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$407,400	\$371,448	\$50,125	13.49%
Total:	\$5,231,794	\$4,520,793	\$960,442	21.24%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source INSTITUTE FOR GLOBAL HEALTH

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$0	\$0	\$0	\$3,000	\$0	0.0%
FEDERAL	\$0	\$741,686	\$1,938,036	\$2,422,397	\$4,034,175	0.0%
STATE SPECIAL & CONTRACTS	\$0	\$0	\$0	\$625,627	\$790,219	0.0%
LOCAL GOVERNMENT	\$0	\$1,683	\$26,526	\$0	\$0	0.0%
PRIVATE GIFTS	\$0	\$57,000	\$30,097	\$51,218	\$35,594	0.0%
PRIVATE CONTRACTS & GRANTS	\$0	\$0	\$14,243	\$95,867	\$407,400	0.0%
OPP & EDUCATIONAL FUNDS	\$0	\$0	\$0	\$0	\$158,007	0.0%
S&S -EDUCTATIONAL ACTIVIT	\$0	\$0	\$4,493	\$13,828.01	\$30,399	0.0%
OTHER SOURCES	\$0	(\$21,377)	(\$8,269)	\$15,321.51	\$3,917	0.0%
Total:	\$0	\$778,992	\$2,005,126	\$3,227,259	\$5,459,711	0.0%

Expenditures by Fund Source Institute for Global Health FY 2007-08



PHILIP R. LEE INSTITUTE FOR HEALTH POLICY STUDIES

- Chair Brindis, Claire D.
- Business Officer Fetto, Phyllis K.
- Website http://www.ihps.medschool.ucsf.edu/

Mission

The Institute's mission is to contribute to the solution of complex and challenging health policy problems through leadership in:

- health policy and health services research
- education and training
- technical assistance
- public service

We conduct, synthesize, and translate research among multiple academic disciplines and fields to provide a base of evidence to share with people who make decisions about health and health care

We focus on providing information about policy decisions that will affect people's health and lives, from helping to improve clinical decision-making at a patient's bedside to assessing the potential impact of state and national health legislation.

We help educate and train students, including post-doctoral fellows, in the health professions and other disciplines, for future leadership in health policy and health services research. We also help prepare fellows to take leadership in public health and health care in government at the local, state, federal and international levels, and in the non-profit and private sectors.

Most of all, we are committed to improving the health and health care of people in the Greater San Francisco Bay Area, the State of California, the nation, and the world.

Goals

- Improve the health of the public
- Improve health care
- Build future health policy leadership
- Improve the public's understanding of public sector, private sector, and personal choices about health care and health
- Improve health policy with research designed to impact public and private sector health policy decisions

Source: Institute for Health Policy Studies website, 7/3/2008

Research

The Philip R. Lee Institute for Health Policy Studies at the University of California, San Francisco (UCSF) is one of the nation's premier centers for health policy and health services research. Institute faculty and research staff generate evidence providing the basis for sound health policy decisions at the local, state, national, and international levels. We also work with UCSF colleagues to translate research, building a pathway from research to policy and from bench to bedside to community.

Research Areas

Health care reform and health care system

Access to care, with special consideration of underserved populations and health disparities, quality of care, financing of care, costs and cost-effectiveness of care, technology assessment, organization of care, physician practice patterns, health care workforce issues, and other issues

Child and adolescent health

Health insurance, children with special needs, evaluation of school-based clinics and coordinated school health services, adolescent health policy, physician practice guidelines, and other issues

Reproductive health

Teen pregnancy, evaluation of pregnancy prevention programs, Latina reproductive health, infertility issues, and other issues

HIV/AIDS

Costs of care, cost-effectiveness of prevention and treatment, HIV and injection drug use

Prescription drug policies

Drug safety, effectiveness, efficacy, drug use among the elderly and chronically ill, pharmaceuticals for disenfranchised populations

Substance abuse

Tobacco and other drug use, evaluation of treatment interventions, tobacco and corporate influences on health policy, tobacco control policies, second-hand smoke

Chronic illness

Costs of illness, functional and psychosocial outcomes of illness, functional status measurement

Work and health

Source: Institute for Health Policy Studies website, 7/3/2008

Relationship between work and health, work disability policies, and other issues

Research integrity

Evidence-based policy and research on bias in research

Biomedical communications

Editorial peer review, ethical standards in publishing, authorship guidelines, dissemination of research

Education

The Philip R. Lee Institute for Health Policy Studies houses the training program in Transdisciplinary Health Policy Research (TdHPR) which offers fellowships for postdoctoral and predoctoral scholars.

The TdHPR program trains researchers, policy makers, and practitioners to develop innovative approaches to complex policy problems in health and healthcare. From our perspective, such policies can range from proposals to revamp the health care system to better guidelines for clinicians to apply in daily practice. The program emphasizes how to use perspectives, tools, and theories of multiple academic disciplines and fields. The program seeks to train scholars to be fluent and to translate across the multiple "languages" of health policy. The goal is not just to do excellent research, but research with methods and findings sufficiently well-grounded that one can confidently offer them for use by policy makers.

Source: Institute for Health Policy Studies website, 7/3/2008

FY 2007-08 Headcount as of 4/3/08 INSTITUTE FOR HEALTH POLICY STUDIES

Academic Grand	Part Time Total	8 12 69
Aca	Full Time	
Staff	Part Time	12
St	Full Time	28

Source: UCSF Human Resources

Permanently Budgeted FTEs INSTITUTE FOR HEALTH POLICY STUDIES

	FY 2003-04		FY 2004-(35	FY 2004-05 FY 2005-06 FY 2006-07	90	FY 2006-	25	FY 2007-08	80
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
INST FOR HEALTH POLICY STUDIES	0.05 2.26	2.26	0.05 3.18	3.18	0.10 4.83	4.83	0.05 5.08	5.08	0.05 5.29	5.29
M/R-INST HLTH POLICY STUDIES	1.54		1.54		1.54		1.54		1.54	
SM-INST HLTH POLICY STUDIES		1.00		1.00		1.00		1.00		1.00
Total:	1.59 3.26	3.26	1.59 4.18	4.18	1.64 5.83	5.83	1.59 6.08	6.08	1.59 6.29	6.29

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 INSTITUTE FOR HEALTH POLICY STUDIES

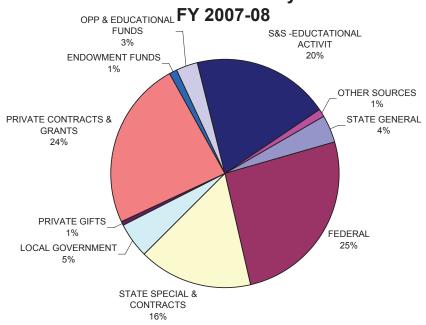
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$2,198,044	\$1,202,633	\$619,575	51.52%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$1,109,408	\$1,109,408	\$150,388	13.56%
Local Government	\$418,291	\$418,291	\$64,933	15.52%
Private Clinical Trials	\$2,040,675	\$1,988,814	\$292,095	14.69%
Private Contracts & Grants	\$0	\$0	\$0	0.00%
Total:	\$5,766,418	\$4,719,146	\$1,126,990	23.88%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source INSTITUTE FOR HEALTH POLICY STUDIES

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$236,380	\$339,144	\$334,122	\$324,767	\$332,330	40.6%
FEDERAL	\$3,781,607	\$3,166,669	\$2,895,181	\$2,296,062	\$2,198,044	-41.9%
STATE SPECIAL & CONTRACTS	\$1,670,516	\$1,926,722	\$1,723,633	\$1,507,439	\$1,379,951	-17.4%
LOCAL GOVERNMENT	\$151,849	\$117,895	\$250,388	\$363,188	\$418,291	175.5%
PRIVATE GIFTS	\$71,207	\$70,141	\$36,368	\$23,609	(\$52,017)	-173.1%
PRIVATE CONTRACTS & GRANTS	\$2,169,739	\$2,151,343	\$2,608,332	\$3,139,538	\$2,040,675	-5.9%
ENDOWMENT FUNDS	\$5,395	\$11,034	\$63,838	\$18,986	\$77,637	1339.2%
OPP & EDUCATIONAL FUNDS	\$330,903	\$250,667	\$285,603	\$261,652	\$262,571	-20.7%
S&S -EDUCTATIONAL ACTIVIT	\$647,491	\$344,439	\$563,195	\$700,641	\$1,668,671	157.7%
OTHER SOURCES	(\$66,185)	(\$28,043)	\$33,281	\$80,715	\$87,016	-231.5%
RESERVES	\$0	\$0	\$5,456	\$0	\$0	0.0%
Total:	\$8,998,902	\$8,350,010	\$8,799,399	\$8,716,597	\$8,413,170	-6.5%

Expenditures by Fund Source Institute for Health Policy Studies



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures INSTITUTE FOR HEALTH POLICY STUDIES (Dollars in Thousands)

		Current Funds			Distribution			
	Total	Unrestricted		Restricted	Salaries and Wages	Other Expenditures	Less: Transfers	
		General	Designated					
Instruction	1,357	50	1,113	193	994	363	-	
Research	3,675	282	(18)	3,411	1,844	1,831	-	
Public Service	2,271	-	15	2,256	1,627	644	<u>-</u>	
Total	7,303	332	1,110	5,861	4,464	2,838	-	

Source: UCSF Controller's Office

INSTITUTE FOR NEURODEGENERATIVE DISEASES

- Chair Prusiner, Stanley B., M.D.
- Business Officer Booth, Howard S.
- Website http://ind.universityofcalifornia.edu/

Mission Statement

Diseases resulting from degenerative changes in the nervous system markedly impact the lives of millions and pose growing public health challenges. The prevention and treatment of these neurodegenerative disorders represents one of the critical goals of medical research today and is the mission of the Institute for Neurodegenerative Diseases.

The Institute for Neurodegenerative Diseases (IND) brings together over 100 renowned researchers and clinicians from eight University of California campuses. IND members represent such diverse disciplines as neurology, neuropathology, cell biology, genetics, molecular biology, computational and structural biology, biotechnology and pharmaceutical science. By working together, IND members develop novel, multidisciplinary approaches to obtain new understanding and new treatments for neurodegenerative diseases.

The IND is a multi-site research organization devoted to accelerating knowledge and developing cures to combat the growing problem of neurodegenerative diseases. Spanning eight campuses within the University of California, the IND stimulates creative interactions among basic scientists and clinicians through a series of Core Activities that include:

- IND Seminar Series, which brings together experts in the field of neurodegenerative diseases to provide descriptions of their cutting-edge research. In addition to these lectures, each speaker is provided opportunities to interact with faculty members and students.
- IND Annual Retreat, which brings together faculty and students from all eight UC campuses to discuss recent developments in their research and clinical programs. In addition, two guest speakers are invited to give keynote addresses on significant aspects of neurodegenerative disease research.
- Mini-Courses, open to IND members and students across all eight campuses. These are half-day events that bring two or three researchers from outside institutions to focus on the latest developments in "hot" areas of research. Mini-courses are designed to encourage discussion and interaction between students and faculty.

In addition to emphasizing laboratory breakthroughs, physician-scientists within the IND con-

Source: Institute for Neurodegenerative Diseases 8/18/2008

duct clinical research to translate these discoveries into viable treatments. This work occurs in state-of-the-art clinical research and treatment centers such as:

- Memory and Aging Center
- Parkinson's Disease Clinic and Research Center
- Multiple Sclerosis Center
- ALS Research and Patient Care Center

Source: Institute for Neurodegenerative Diseases 8/18/2008

FY 2007-08 Headcount as of 4/3/08 INSTITUTE FOR NEURODEGENERATIVE DISEASES

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
44	3	10	ဂ	09

Source: UCSF Human Resources

Permanently Budgeted FTEs INSTITUTE FOR NEURODEGENERATIVE DISEASES

	FY 2003-04	6	FY 2004-05	-02	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff	Academic	Staff
S/M INST NEURODEGENERATIVE DIS	4.16	4.16 21.10	3.83	3.83 19.25		4.40 19.70	2.00	2.00 19.00	2.00	17.00
Total:	4.16	4.16 21.10	3.83	3.83 19.25	4.40	4.40 19.70	2.00	2.00 19.00	2.00	2.00 17.00

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 INSTITUTE FOR NEURODEGENERATIVE DISEASES

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$7,525,730	\$6,395,382	\$3,194,886	49.96%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,379,603	\$1,267,231	\$241,565	19.06%
Total:	\$8,905,333	\$7,662,613	\$3,436,452	44.85%

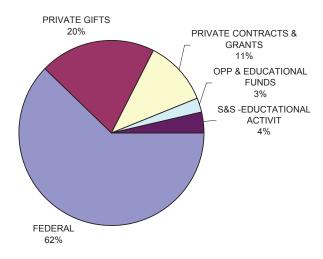
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source INSTITUTE FOR NEURODEGENERATIVE DISEASES

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$0	\$15,000	\$14,793	\$10,207	\$10,000	0.0%
FEDERAL	\$7,353,220	\$7,209,617	\$7,485,532	\$8,676,995	\$7,525,730	2.3%
PRIVATE GIFTS	\$992,851	\$708,885	\$1,118,557	\$722,948	\$2,464,717	148.2%
PRIVATE CONTRACTS & GRANTS	\$661,951	\$285,082	\$552,099	\$988,958	\$1,379,603	108.4%
OPP & EDUCATIONAL FUNDS	\$195,525	\$214,961	\$231,961	\$288,882	\$313,464	60.3%
S&S -EDUCTATIONAL ACTIVIT	(\$321,550)	\$414,471	\$81,748	(\$139,851)	(\$424,631)	32.1%
Total:	\$8,881,998	\$8,848,016	\$9,484,689	\$10,548,138	\$11,268,883	26.9%

Source: UCSF Budget & Resource Management

Expenditures by Fund Source Institute for Neurodegenerative Diseases FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures INSTITUTE FOR NEURODEGENERATIVE DISEASES (Dollars in Thousands)

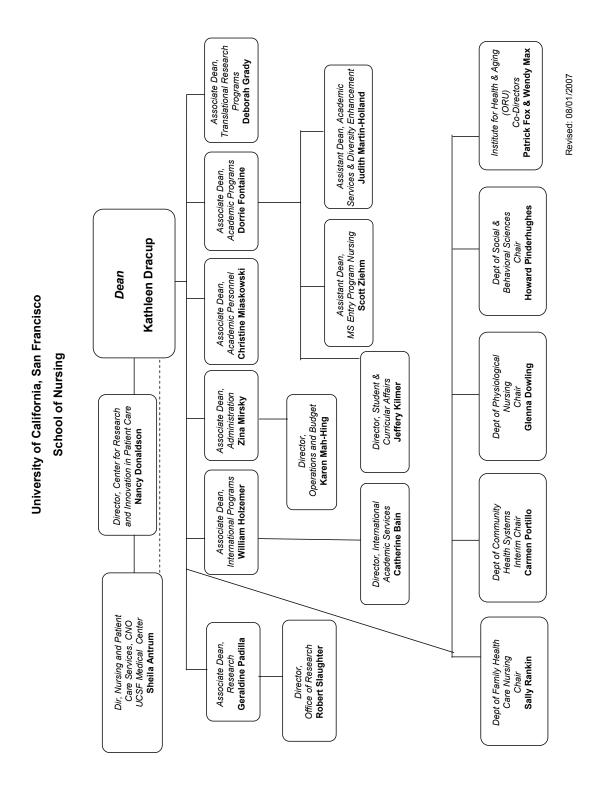
			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Research	10,545	10	(588)	11,123	4,823	7,010	1,288
Total	10,545	10	(588)	11,123	4,823	7,010	1,288

Source: UCSF Controller's Office

SCHOOL OF NURSING

Chapter Contents

Organizational Chart	754
Overview	755
Community Health Systems	767
Family Health Care Nursing	775
Physiological Nursing	780
Social and Behavioral Sciences	786
Institute for Health and Aging	792



SCHOOL OF NURSING

Leadership

Dean

Kathleen A. Dracup, RN, FNP, DNSc, FAAN is Dean and Endowed Professor in Nursing Education, University of California, San Francisco, School of Nursing

Dr. Dracup earned a Doctorate in Nursing Science from the University of California, San Francisco, a Master of Nursing degree from the University of California, Los Angeles, and a Bachelor of Science degree from St. Xavier's University, Chicago, Illinois.

Dr. Dracup's professional career includes 35 years of experience in cardiovascular nursing and university professorships. She is recognized nationally and internationally for her investigation in the care of patients with heart disease and the effects of this disease on spouses and other family members.

Her initial research focused on the needs of spouses of terminally ill cardiac patients in the intensive care unit. In her subsequent interdisciplinary program of research, she has tested a variety of interventions designed to reduce the emotional distress experienced by cardiac patients and their family members and to reduce morbidity and mortality from sudden cardiac death.

She consistently has been awarded extramural funding for her research from the National Heart, Lung and Blood Institute, the National Institute for Nursing Research, the American Heart Association, the Department of Defense, the Department of Veterans Affairs, and the American Association of Critical Care Nurses.

Dr. Dracup has published her research in more than 300 articles and chapters, and has recently published the textbook, Intensive Coronary Care. She served as the editor of Heart & Lung for over a decade and currently is the co-editor of the American Journal of Critical Care. She is a Fellow of the American Academy of Nursing and the American Heart Association Council of Cardiovascular Nursing. She was a Fulbright Senior Scholar to Australia and is a member of the Institute of Medicine. She received the outstanding teaching award at UCLA School of Nursing on four different occasions and was awarded the American Heart Association's Eugene Braunwald Award for Academic Mentorship in 2003.

Sheila Antrum, RN, MSHA

Chief Nursing and Patient Care Services Officer UCSF Medical Center

Catherine Bain, RN, MS

Director, International Academic Services, Academic Coordinator and Asst. Clinical Professor

Nancy Donaldson, RN, DNSc, FAAN

Director, UCSF Stanford Center for Research and Innovation in Patient Care Clinical Professor

Judith Martin-Holland, RN, MPA, MS, CCRN

Associate Dean, Academic Programs and Diversity Initiatives

Chrisanne Garrett, MAED

Director, Educational Technology and Academic Coordinator

Deborah Grady, MD, MPH

Associate Dean, Translational Research Programs

William Holzemer, RN, PhD, FAAN

Associate Dean of International Programs, Lillian and Dudley Aldous Endowed Chair in Nursing Science, Professor

Judith Martin-Holland, RN, MPA, MS, CCRN

Assistant Dean, Academic Services and Diversity Enhancement, Academic Coordinator and Asst. Clinical Professor

Christine Miaskowski, RN, PhD, ANP, CCRN, FAAN

Associate Dean, Academic Affairs Professor

Zina Mirsky, RN, EdD

Associate Dean, Administration, Lecturer

Geraldine (Geri) Padilla, PhD

Associate Dean for Research,

Professor

Robert Slaughter, PhD

Director, Office of Research, Academic Administrator and Lecturer

Scott Ziehm, RN, ND

Assistant Dean, Masters Entry Program in Nursing, Health Sciences Clinical Professor

History

The nationally recognized excellence of the School of Nursing reflects a long history of innovation in nursing education. A diploma program for the education of nurses was first offered by the University of California in 1907, when it established the Hospital Training School for Nurses.

In 1917 a five-year curriculum leading to a baccalaureate degree was developed on the Berkeley campus in the Department of Hygiene. This program combined academic study with practice in nursing, using the Training School program as the middle years. These two curricula continued until 1934, when the diploma program was discontinued.

Instruction in public health nursing leading to certification was first offered to graduate nurses in 1918 on the Berkeley campus. In 1925, through funds appropriated by the state legislature from the accumulated funds in the State Bureau of Registered Nurses, an additional certificate curriculum in nursing education and nursing service administration was initiated. The Berkeley and San Francisco programs were brought together administratively in 1934. On March 17, 1939, the Regents authorized the establishment of a School of Nursing, the first autonomous school of nursing in any state university. In 1941 the faculty of the School of Nursing achieved full academic status in the University. The School added programs in succeeding years:

- 1949 Master of Science (M.S.)
- 1965 Doctor of Nursing Science (D.N.S.)
- 1980 Articulated BS/MS Program for Registered Nurses
- 1984 Doctor of Philosophy (Ph.D.)
- 1991 Master's Entry Program in Nursing (MEPN)

In the fall of 1959, all activities of the School of Nursing were consolidated onto the San Francisco campus.

In the 2006-07 academic year, UCSF School of Nursing celebrated its centennial. See the centennial website for details.

Mission

Nursing care for the healthy and the ill occurs in a dynamic social and professional environment with changing needs for clinical, research, and theoretical expertise. As a leader in health care and nursing progress, the UCSF School of Nursing must anticipate and respond to changing issues and trends and must influence policies and practices in health care.

Within this context, the School of Nursing draws upon the insights and experiences that its students, faculty, and alumni have to offer from their rich and diverse cultural heritage.

Taking advantage of its long history as a part of the University of California, San Francisco health sciences campus, the School will continue to work cooperatively with other health professionals on campus, nationally, and internationally in its search for excellence in teaching, research, practice, and public service.

The School of Nursing's mission comprises three elements:

- Teaching
 - Prepare students from culturally diverse backgrounds to assume leadership roles in nursing clinical practice, administration, teaching, and research.
 - Provide education and research training in the social, behavioral, and biological sciences focused on health, illness, and health care.
- Research
 - Advance knowledge and theory through research.
 - Design and evaluate the organization, financing, and delivery of health care.
 - Generate and test innovative professional educational models.
- Practice
 - Promote and demonstrate excellence in professional nursing practice.
 - Benefit the public, the profession, and the University through active individual and group involvement in service activities.

Principles of Community

The San Francisco campus of the University of California is dedicated to learning and teaching in the health sciences. As a graduate and professional school campus, UCSF serves society through four primary missions: teaching, research, patient care, and public service. Faculty, staff, and students on the UCSF campus are a composite of many races, creeds, and social affiliations. To achieve campus goals, individuals must work collaboratively with mutual respect and with forbearance.

Several principles of community life are established to guide individual and group actions on the campus. Adherence to these principles is essential to ensure the integrity of the University and to achieve campus goals. UCSF faculty, staff, and students are asked to acknowledge and practice these basic principles of community life:

- We affirm that members of the campus community are valued for their individual qualities and members are encouraged to apply their unique talents in creative and collaborative work.
- We recognize, value, and affirm that social diversity contributes richness to the University community and enhances the quality of campus life for individuals and groups. We take pride in our various achievements and we celebrate our differences.
- We affirm the right of freedom of expression within the UCSF community and also affirm commitment to the highest standards of civility and decency toward all persons. We are committed to creating and maintaining a community where all persons who participate in University activities can work together in an atmosphere free of all forms of abusive or demeaning communication.
- We affirm the individual right of public expression within the bounds of courtesy, sensitivity, and respect. We recognize the right of every individual to think and speak as dictated by personal belief, to express individual ideas, and to state differences with other points of view, limited only by University requirements regarding time, place, and manner.
- We reject acts of discrimination, including those based on race, ethnicity, gender, age, disability, sexual orientation, and religious or political beliefs.
- We recognize that UCSF is devoted to public service and we encourage members of the campus community to participate in public service activities in their own communities and recognize their public service efforts in off-campus community settings.
- We affirm that each member of the campus community is expected to work in accord with these principles and to make individual efforts to enhance the quality of campus life for all.

UCSF was the fourth largest recipient of National Institutes of Health research support in 2005, receiving a total of \$452.2 million from all awards in the nationally competitive process, according to rankings released by NIH. The rankings cover research and training grants, fellowships, contracts and other awards. The UCSF School of Dentistry, School of Nursing and School of Pharmacy each ranked first nationally – all three schools maintaining their rankings from last

year. The UCSF School of Medicine ranked third nationally, as it did last year.

"UCSF's research has once again been deemed among the best in the country by the most rigorous of judges -- our scientific peers throughout the nation," said UCSF Chancellor Mike Bishop, M.D. "The strength of NIH support for UCSF is a national-level endorsement of scientific research here in all four schools. That bodes well for progress on many fronts critical to advancing health care."

Dean Dracup wrote to staff and faculty, "This ranking is a reflection of the hard work and talent of many people in the school -- faculty, staff and students. Thank you for everything you do to contribute to our success as the #1 School of Nursing in the United States."

National Institutes of Health Research Funding Rankings 2003-2005 Schools of Nursing

	2005		2004		2003	
Rank	School \$r	\$mil	School	\$mil	School	\$mil
-	UCSF	12.5 UCSF	SSF	14.6	14.6 UCSF	13.4
7	Univ. of Washington	10.4 Un	10.4 Univ. of Washington	11.4	1.4 Univ. of Washington	12.9
က	Univ. of Pennsylvania	7.6 Un	7.6 Univ. of Illinois, Chicago	8.7	8.7 Univ. of No. Carolina Chapel Hill	8.9
4	Univ. of No. Carolina Chapel Hill	7.3 Un	7.3 Univ. of No. Carolina Chapel Hill	8.1	8.1 Univ. of Illinois, Chicago	8.7
Ц	I Injy of Di#chirah	1	7 O I Iniv of Donneydyonia	C	C 2 I laiv of Donney lycapia	ď

Financial Schedule 8E - FY 2007-08 Current Fund Expenditures by Source SCHOOL OF NURSING

	Total
0 15 1	0.40.040.404
General Funds	\$12,812,121
Tuition and Fees	\$2,758,371
Federal Government Grants	\$12,305,119
Federal Government Contracts	\$0
Special State Appropriations & Contracts	\$11,477,020
Local Government	\$67,964
Private Gifts, Grants and Contracts	\$5,329,923
Endowment Income	\$1,328,898
Sales & Services Educational Activities	\$908,955
Sales & Services of Auxiliary	\$0
Sales & Services Medical Centers	\$0
Other Sources	\$1,811,067
Reserves	\$0
Total	\$48,799,437

Source: UCSF Controller's Office

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

	_		Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
SCHOOL OF NURSING							
INSTRUCTION							
Educational service	2,505	137	2,253	115	1,646	859	_
Family health care	3,069	2,079	150	840	2,381	688	_
Institute for health and aging	505	443	(104)	167	158	347	(0)
Mental health care and community	4.194	2,052	638	1,505	3,053	1,139	(2)
Physiological nursing	3,890	2,672	508	710	3,041	848	(2)
Social and behaviorial science	1,402	1,096	138	168	1,090	314	2
Intra-school services		-	-	-	-		-
Total	15,567	8,479	3,581	3,506	11,370	4,196	(0)
RESEARCH							
Family health nursing	2,442	8	2	2,433	1,434	1,009	_
Institute for health and aging	4,340	-	0	4,340	2,929	1,411	_
Mental health and community	1,901	_	18	1,883	1,111	790	_
Physiological nursing	4,380	5	5	4,370	2,758	1,622	_
Social and behavioral science	2,107	-	0	2,107	1,387	720	_
Other	(187)	-	(187)		-	(187)	-
Total	14,983	13	(162)	15,133	9,620	5,364	-
PUBLIC SERVICE							
Diabetic Center	9,975			9,975	5,986	3,989	-
Total	9,975			9,975	5,986	3,989	-
ACADEMIC SUPPORT							
Dean's office	7,150	3,838	2,118	1,195	4,145	3,020	15
Occupational health center	1,124	482	590	52	909	216	-
Total	8,274	4,320	2,708	1,247	5,054	3,236	15
Total School of Nursing	48,799	12,812	6,127	29,860	32,030	16,785	15

Source: UCSF Controller's Office

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO EXTRAMURAL AWARDS BY TYPE 07/01/2007 - 06/30/2008 (All Awards) SCHOOL OF NURSING	oos		Source: UCSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	CSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	Research RESULTS
	Total Dollars	Direct Costs	F&A Costs	#Awds	XT#
NIH Grants	13,181,073.00	9,405,540.00	3,775,533.00	26	33
Other DHHS Grants	2,038,972.00	1,840,539.00	198,433.00	10	10
Other Federal Grants	1,640,936.00	1,311,416.00	329,520.00	က	4
Subcontracts (excluding SBIR/STTR)	1,656,969.00	1,344,405.00	312,564.00	17	21
Subcontracts(SBIR/STTR)	83,502.00	66,271.00	17,231.00	-	_
Fellowships(All Federal Sources)	165,226.00	165,226.00	0.00	7	10
Subtotal, Federal Sources	18,766,678.00	14,133,397.00	4,633,281.00	64	79
OTHER PUBLIC SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	*L*
City/County of San Francisco	10,000.00	10,000.00	0.00	-	_
California Dept Health Services	13,662,120.00	12,649,476.00	1,012,644.00	32	56
Other California Public Agencies	1,550,309.00	1,302,746.00	247,563.00	80	15
Other Public Agencies	10,962.00	10,057.00	905.00	-	~
UC Programs(except IUCRP)	383,125.00	383,125.00	0.00	4	5
Subcontracts(all above prime sources)	3,890.00	3,890.00	0.00	-	_
Subtotal, Other Public Sources	15,620,406.00	14,359,294.00	1,261,112.00	47	79
Subtotal, Public Sources	34,387,084.00	28,492,691.00	5,894,393.00	111	158

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 7:00 PM on 11/4/2008.

#**1x**20
39

200	6,450,385.00	33,275,936.00	39,726,321.00	CUMULATIVE TOTAL
22	0.00	0.00	0.00	Subtotal, Misc Agreement Types
2	0.00	0.00	0.00	MTAs(Incoming),URCs
35	00.0	0.00	0.00	Extensions
20	00:0	0.00	0.00	Advance Awards
#Awds	F&A Costs	Direct Costs	Total Dollars	Miscellaneous Agreement Types
32	555,992.00	4,783,245.00	5,339,237.00	Subtotal, Private Sources
32	555,992.00	4,783,245.00	5,339,237.00	Subtotal, Private, Non-Profit Sources
က	0.00	180,000.00	180,000.00	Fellowships
Ω	40,508.00	340,264.00	380,772.00	Subcontracts
2	14,641.00	172,607.00	187,248.00	Contracts
22	500,843.00	4,090,374.00	4,591,217.00	Grants
#Awds	F&A Costs	Direct Costs	Total Dollars	PRIVATE NON-PROFIT SOURCES
				07/01/2007 - 06/30/2008 (All Awards) SCHOOL OF NURSING
SSF Offlice of Sponsored Research	Source: UCSF Office of Sponsored Resea		00	UNIVERSITY OF CALIFORNIA, SAN FRANCISCO
F Sponsored Rees	Source HCSE Office			CICIA CITIA CONTINUI DE LA CONTINUI

Note: Awards are selected for inclusion based on the budget period start or Results include actions processed through 7:00 PM on 11/4/2008.

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 SCHOOL OF NURSING

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$13,244,227	\$10,402,343	\$4,399,904	42.30%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$10,976,102	\$10,251,461	\$976,060	9.52%
Local Government	\$67,964	\$67,814	\$8,839	13.03%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$6,149,049	\$4,371,778	\$851,604	19.48%
Total:	\$30,437,342	\$25,093,396	\$6,236,405	24.85%

Source: UCSF Budget & Resource Management

FY 2007-08 Headcount as of 4/3/08 SCHOOL OF NURSING

	S	taff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
DEAN'S OFC: SCH OF NURSING	32	3	3	17	55
FAMILY HLTH CARE NSG	20	15	3	40	78
INSTITUTE FOR HEALTH & AGING	89	18	5	16	128
PHYSIOLOGICAL NURSING	20	10	3	49	82
S/N COMMUNITY HEALTH SYSTEMS	19	16	1	33	69
SOCIAL & BEHAVIORAL SCIENCES	8	2	7	16	33
Total	188	64	22	171	445

Source: UCSF Human Resources

COMMUNITY HEALTH SYSTEMS

- Interim Chair Portillo, Carmen.
- Business Officer Graham, Kent
- Website http://nurseweb.ucsf.edu/chs/

Mission

The mission of the Department of Community Health Systems is to promote and sustain health in the community and workplace, with particular emphasis on culturally diverse and high-risk populations. We are committed to improving the health and health care for those served by community-based health care systems through educating culturally competent nurses, conducting research, and providing services in the community which address the health issues of those underserved by the traditional institution-based health care system.

Education Mission

To prepare students from culturally diverse backgrounds to assume leadership roles in nursing clinical practice, administration, teaching, and research.

Research Mission

To advance knowledge and theory through research.

To design and evaluate the organization, financing, and delivery of health care.

To generate and test innovative professional educational models.

Service Mission

To promote and demonstrate excellence in professional nursing practice.

To benefit the public, the profession, and the University through active individual and group involvement in service activities.

Vision

Members of the Department of Community Health Systems are committed to conducting research, preparing nurse leaders, and providing services for those served by community based health care systems. We seek to maximize the health of communities with particular emphasis

on culturally diverse and high risk populations. Our work focuses on both health and illness. Through our research, teaching, practice, and service, we strive to:

- Provide mentoring for graduate students to enhance their clinical expertise and research training;
- Promote and sustain health in the community and workplace from an individual, clientcentered approach and from a community-level public health approach;
- Enhance the quality of life for people living with mental illnesses, infectious diseases, and other acute and chronic illnesses at work and at home;
- Improve the accessibility, affordability, acceptability, and quality of care of community-based care systems; and,
- Develop and test models of care that meet the health care needs of communities, with emphasis upon vulnerable populations.

Research

Research is one of the 3 primary missions of the Department of Community Health Systems. Our faculty conducts insightful and novel research in areas related to the Department's specialty programs. Research increases our knowlege about important specific issues, as well as leading to overall advancements in standards of health care. It also provides insights into the adequacy of current heath care services and the viability of new and old treatment protocols.

CHS faculty research focuses on vulnerable populations and communities such as: the homeless and disadvantaged; elderly; persons with psychiatric disorders and issues of trauma and abuse; high-risk infants and children; workers at risk for or living with injury or disability; individuals with choronic diseases such as asthma, cardiovascular disease, diabetes and HIV infections; incarcerated persons; and ethnic and immigrant minorities.

Areas of faculty research address major community health issues such as:

- The impact of disease or conditions on vulnerable populations (e.g. premature birth on infants and families, chronic illness and disability on health-related quality of life, stigma on access to care),
- Community and patient based intervention (e.g. self-management of chronic illnesses, health promotion in severe mental illness, lifestyle health behaviors and risk reduction, strategies to manage infectious diseases such as HIV/AIDS and TB, injury prevention,

- and drug and alcohol abuse), and
- Health care systems analysis and intervention (e.g. patient safety, organization of nursing staff to deliver care, multidisciplinary health care delivery, organization and financial aspects of health care delivery.

Patient Care

Located in and around San Francisco, our faculty practices allow us to serve the neediest people in our community, those normally underserved by more mainstream health care systems, including the homeless and mentally ill. The practices are also a vital educational resource for the Department because they provide invaluable opportunities for our students to train in actual community environments.

Our practices provide health services the some of the most vulnerable populations in our area. For example, the nurse-managed Glide Health Services provides free medical care to the city's homeless and underinsured. The faculty practice at Progress Foundation gives residents of the Progress Houses access to medical care that eliminates costly emergency room visits. The other practices each serve a special segment of the community. Our six faculty practices are:

- 1. Glide Health Services
- 2. Nursing Faculty Practice at Progress Foundation
- 3. UCSF Ambulatory Care Clinics, Division of Internal Medicine
- 4. UCSF Ambulatory Care Clinics, Division of Pulmonary Medicine
- 5. UCSF Positive Health Program
- 6. Comfort Care & Palliative Care Service Consultation

Educational Activities

Master of Science Program in Nursing prepares leaders in the roles of nurse practitioner, clinical nurse specialist, administrator, teacher, and consultant. Most applicants applying to this program are experienced registered nurses who have successfully completed a Bachelor's degree. Upon graduation, all have a base of knowledge in a specific area of nursing; can participate knowledgeably in research activity and application; and are capable of contributing to the formulation of theory and to the application of theory to nursing practice. The 5 Masters specialty areas are:

- The Adult Nurse Practitioner (ANP) Program prepares nurses in advanced practice to diagnose and manage primary care problems of adults. The curriculum emphasizes comprehensive physical and psychosocial assessment, decision-making processes in acute and chronic health conditions, introduction to complementary healing strategies, and health maintenance care, including health promotion and disease prevention.
- Advanced Community Health and International Nursing focuses on planning and evaluating community/public health programs; international health, population-level care, health promotion, grant writing, teaching/learning strategies, health care systems, public policy, and leadership; addressing health disparities of vulnerable and diverse populations; practicing and consulting in multicultural and international settings; and specializing in HIV/AIDS as a community health nurse. The focus of clinical experiences is on advanced nursing practice in a variety of community/public health private and governmental agencies in local, national, and international settings.
- **Nursing Administration (NA)** The administration program prepares individuals for management and administrative positions throughout the health care arena. The expert curriculum provides a solid business administration foundation for those interested in pursuing careers that require the use of management principles.
- Occupational and Environmental Health Nursing (OEH) focuses on the prevention and management of illnesses and injuries that result from conditions in the workplace or community. OEH nurses design programs and provide clinical interventions to prevent and manage these disorders effectively.
- **Psychiatric/Mental Health Nursing** teaches the skills to provide quality care that addresses mental and physical aspects of. The curriculum reflects important advances in understanding about mental disorders, including their prevention and treatment, and has evolved to respond to special needs of vulnerable populations in the community. The curriculum has a biopsychosocial orientation, addressing mental illness as a biological event, as a personal experience, and as a social and cultural phenomenon.

The UCSF School of Nursing's **Master's Entry Program in Nursing (MEPN)** is a way for students who have earned a B.S. or B.A. degree that is not in nursing to take part in our Master of Science in Nursing (MSN) Program.

While the MSN is a two-year program for students who have already earned a BSN, MEPN is a three-year program in which the first year is for preparatory nursing study. In that first year, MEPN students learn what is usually taught in a two-year BSN program and then proceed to the standard two-year MSN course of study.

Some masters students may also elect to choose a "minor" in addition to their designated specialty area.. A minor typically consists of three or more courses in one of the following specialties:

- MENTAL HEALTH NURSING CARE FOR VICTIMS OF TRAUMA
- HIV/AIDS
- HEALTH POLICY
- EDUCATION
- HUMANITIES, HISTORY, & ETHICS IN NURSING PRACTICE
- GENOMICS

The UCSF **PhD Program in Nursing** is a school-wide program in which students are assigned academic advisors in the Department that offers research mentorship most closely aligned to the applicant's research interests.

Doctoral education in the Department of Community Health Systems focuses on the many facets of health and illness in the community, including health promotion and disease prevention; care and management of chronic illness; the management related to mental, physical, environmental and occupational health and safety; and health care delivery systems, including patient safety, human resources and dissemination of best practices.

Faculty research focuses on vulnerable populations and communities such as: the homeless and disadvantaged; elderly; persons with psychiatric disorders and issues of trauma and abuse; highrisk infants and children; workers at risk for or living with injury or disability; individuals with chronic diseases such as asthma, cardiovascular disease, diabetes and HIV infections; incarcerated persons; and ethnic and immigrant minorities.

Post-Doctoral studies are arranged by individual request depending upon specific areas of interest and availability of resources within those areas.

Ample and attractive opportunities exist for scholarly pursuits in research, teaching, administration, and clinical work.

FY 2007-08 Headcount as of 4/3/08 COMMUNITY HEALTH SYSTEMS

St	Staff	Acad	Academic	Grand
ull Time	Part Time Full Time Part Time	Full Time	Part Time	Total
19	16	1	33	69

Source: UCSF Human Resources

Permanently Budgeted FTEs COMMUNITY HEALTH SYSTEMS

	FY 2003-04	_	FY 2004-05	05	FY 2005-06	90	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
NURS-COMMUNITY HEALTH SYSTEMS	16.37 3.61	3.61	16.37 3.61	3.61	15.87 4.41	4.41	15.87 3.61	3.61	15.87	3.61
ORG ACT-NURSING DEAN'S OFFICE									0.30	0.30
SCH NUR OCCUPATIONAL HEALTH CENTER	3.90	3.90 1.85	3.90 1.85	1.85	3.90	3.90 1.85	3.90 1.85	1.85	3.90	1.85
Total:	20.27 5.46	5.46	20.27 5.46	5.46	19.77 6.26	6.26	19.77 5.46	5.46	19.77 5.76	5.76

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 COMMUNITY HEALTH SYSTEMS

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$2,222,017	\$1,685,336	\$600,797	35.65%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$170,101	\$170,101	\$17,010	10.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,304,022	\$1,100,269	\$152,499	13.86%
Total:	\$3,696,140	\$2,955,706	\$770,307	26.06%

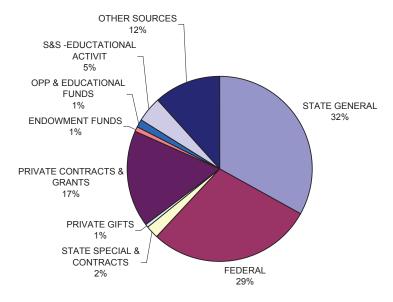
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source COMMUNITY HEALTH SYSTEMS

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$2,030,140	\$1,969,450	\$2,190,142	\$2,165,754	\$2,533,569	24.8%
TUITION & FEES	\$608	\$3,192	\$4,594	\$9,947	\$1,025	68.5%
FEDERAL	\$1,704,529	\$2,647,206	\$2,841,146	\$3,129,643	\$2,222,017	30.4%
STATE SPECIAL & CONTRACTS	\$136,129	\$195,248	\$205,143	\$164,754	\$170,101	25.0%
PRIVATE GIFTS	\$57,193	\$9,509	\$55,430	\$21,110	\$51,955	-9.2%
PRIVATE CONTRACTS & GRANTS	\$418,347	\$635,649	\$678,801	\$941,463	\$1,304,022	211.7%
ENDOWMENT FUNDS	\$12,285	\$17,311	\$56,023	\$13,291	\$59,966	388.1%
OPP & EDUCATIONAL FUNDS	\$68,336	\$68,616	\$103,403	\$125,745	\$98,356	43.9%
S&S -EDUCTATIONAL ACTIVIT	\$263,650	\$320,585	\$165,257	(\$27,316)	\$354,444	34.4%
OTHER SOURCES	\$707,207	\$899,434	\$647,311	\$1,054,860	\$888,196	25.6%
Total:	\$5,398,424	\$6,766,199	\$6,947,251	\$7,599,252	\$7,683,651	42.3%

Source: Budget & Resource Management

Expenditures by Fund Source Community Health Systems FY 2007-08



Source: Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures COMMUNITY HEALTH SYSTEMS (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
•		General	Designated				
Instruction	4,194	2,052	638	1,505	3,053	1,139	(2)
Research	1,901	-	18	1,883	1,111	790	-
Total	6,096	2,052	656	3,389	4,165	1,928	(2)

Source: UCSF Controller's Office

FAMILY HEALTH CARE NURSING

- Chair Rankin, Sally Heller
- Business Officer Pinster, William K.
- Website none

Department Description

The Department of Family Health Care Nursing (FHCN) offers specialties in the areas of neonatology, pediatrics, perinatology, midwifery, women's health, and family primary care. FHCN prepares nurses at the advanced practice across the care giving continuum of acute care to primary care settings. Doctoral students are prepared for careers in research, education, and leadership positions.

Mission Statement

Our mission is to optimize the health and well-being of children, women, and families in a changing multicultural society by fostering excellence in our nursing programs of teaching, research, and practice, as well as through community service. We promote the advancement of knowledge through systematic exploration, scholarly dialogue, reflection, and dissemination. We promote the personal and collective growth and sense of accomplishment of everyone affiliated with this department. We fulfill our mission through teaching, research, practice, community service, and personal and collective growth.

Research Activities

FHCN research programs are focused on the health of children, women, and families. Topical examples include, but are not limited to, relationships between children's environments, psychobiology, and physical and mental health; immigrant children's health; interrelations between family processes and health, particularly chronic illness; father's experiences in pediatric palliative care; identification of linkages between specific midwifery care processes and short- and long-term health outcomes for women and their families; the experiences, strengths, and interrelationships of battered women and their children; the effectiveness of culturally relevant interventions for changing children's health behaviors by reducing a mediating variable such as television viewing; the mental health and development of vulnerable adolescents; studies of rhythms of sleep and fatigue in a variety of populations and instrument development to measure fatigue and sleep disturbance; family management of chronic, technology-dependent health conditions in children and their transition to adulthood; and the role of religious organizations in HIV/AIDS prevention and care in sub-Saharan Africa.

Source: School of Nursing website 7/8/2008

Patient Care Activities

Faculty practice sites include Valencia Health Services, a primary care practice, providing comprehensive health services to pediatric and adolescent clients in the San Francisco Mission District; UCSF/Mount Zion Young Women's Clinic, providing perinatal and gynecological care for high-risk youth; Women's Primary Care Clinic, Mission Neighborhood Health Center, a partner clinic of the San Francisco Community Clinic Consortium, providing health promotion, disease prevention, gynecologic, and family planning services; Jail Health Services, San Francisco County Jail, providing primary health care for high-risk inmates; California Child Health Program, providing education and child care health resources and linkages for child care center providers and the families they serve throughout California; Midwives of San Francisco at San Francisco General Hospital, providing prenatal, labor and delivery, and postnatal care; and support of the North Coast Perinatal Access System, promoting high quality, risk appropriate care for mothers and their babies, and improving access to appropriate preconception, pregnancy, and postpartum diabetes education to women of child-bearing age and to providers.

Educational Activities

Preparation of nurses at the master's level for advanced practice include the specialties of Family Nurse Practitioner, Nurse-Midwifery, Advanced Practice Neonatal Nursing, Advanced Practice Pediatric Nursing, Acute Care Pediatric Nurse Practitioner, and Advanced Practice Perinatal Nursing. The Doctor of Philosophy in Nursing program prepares nurses to conduct research in nursing and to contribute to the body of knowledge in the areas of neonatology, pediatrics, perinatology, midwifery, women's health, and family primary care. Other opportunities include post-Master's specialized study, postdoctoral studies funded through T32 federal training grants, and nondegree special studies for postdoctoral scholars and international nurses.

Source: School of Nursing website 7/8/2008

FY 2007-08 Headcount as of 4/3/08 FAMILY HEALTH CARE NURSING

Grand	Total	82
Academic	Part Time	40
Acad	Full Time Part Time	3
Staff	Part Time	15
St	Full Time	20

Source: UCSF Human Resources

Permanently Budgeted FTEs FAMILY HEALTH CARE NURSING

	EV 2002 04	ļ	EV 2004 0E	4	EV 200E 0E	90	EV 2006 07	2	EV 2007 08	e
	1 2003-0		1 Z004-0	2	- 1 2003	9		- -	- / 007 1	9
Permanent Budget Account Title	Academic Staff Academic Staff Academic Staff Academic Staff	taff	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff
NURS-FAMILY HEALTH CARE NURSING	18.57 4.11	.1	18.57 4.11	4.11	17.17 4.11	4.11	17.17 4.11	4.11	17.17 4.11	4.11
ORG ACT-S/N FAMILY HLTH CARE SVCS	0	0.13		0.18		0.18		0.18		0.18
Total:	18.57 4.24	.24	18.57 4.29	4.29	17.17 4.29	4.29	17.17 4.29	4.29	17.17 4.29	4.29

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 FAMILY HEALTH CARE NURSING

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$3,210,736	\$2,509,949	\$885,098	35.26%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$1,059,649	\$1,018,939	\$149,804	14.70%
Local Government	\$68,335	\$68,185	\$8,894	13.04%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$100,685	\$104,559	\$18,060	17.27%
Total:	\$4,439,405	\$3,701,632	\$1,061,856	28.69%

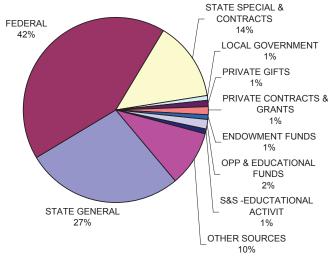
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source FAMILY HEALTH CARE NURSING

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,730,500	\$1,723,470	\$1,794,159	\$1,873,062	\$2,087,724	20.6%
TUITION & FEES	\$0	(\$4,951)	\$122,883	\$9,238	\$0	0.0%
FEDERAL	\$2,851,267	\$1,480,181	\$2,888,988	\$3,209,401	\$3,210,736	12.6%
STATE SPECIAL & CONTRACTS	\$4,152,264	\$2,609,271	\$1,642,072	\$831,110	\$1,059,649	-74.5%
LOCAL GOVERNMENT	\$0	\$31,039	\$49,011	\$11,159	\$68,335	0.0%
PRIVATE GIFTS	\$154,593	\$40,581	\$42,947	\$42,434	\$90,842	-41.2%
PRIVATE CLINICAL TRIALS	\$12,894	\$8,619	\$1,431	(\$100)	\$0	-100.0%
PRIVATE CONTRACTS & GRANTS	\$181,081	\$76,970	\$2,758	\$140,078	\$100,685	-44.4%
ENDOWMENT FUNDS	\$116,389	\$19,040	\$28,385	\$56,596	\$58,018	-50.2%
OPP & EDUCATIONAL FUNDS	\$80,648	\$52,805	\$88,097	\$98,105	\$131,172	62.6%
S&S -EDUCTATIONAL ACTIVIT	\$420,510	\$227,720	\$65,982	(\$7,410)	\$54,923	-86.9%
OTHER SOURCES	\$508,155	\$445,588	\$514,033	\$638,814	\$746,253	46.9%
Total:	\$10,208,301	\$6,710,332	\$7,240,747	\$6,902,487	\$7,608,336	-25.5%

Source: UCSF Budget & Resource Management

Expenditures by Fund Type Family Health Care Nursing FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures FAMILY HEALTH CARE NURSING (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	3,069	2,079	150	840	2,381	688	-
Research	2,442	8	2	2,433	1,434	1,009	
Total	5,512	2,088	152	3,272	3,815	1,697	_

Source: UCSF Controller's Office

PHYSIOLOGICAL NURSING

- Chair Dowling, Glenna A.
- Business Officer Tsujihara, Phyllis D.
- Website none

Department Description

The Department of Physiological Nursing is one of four departments within the School of Nursing. The Department offers clinical masters programs in areas such as Acute Care, Cardiovascular, Critical Care/Trauma, Genomics, Gerontology, and Oncology. These programs prepare graduates for roles in advanced practice. Graduates from our doctoral program are prepared for roles in academia and research.

Mission Statement

The mission of the Department of Physiological Nursing includes four elements: teaching, research, practice, and public service, with a principal focus on adults with acute and chronic illnesses.

Research Activities

The Department of Physiological Nursing has a wide spectrum of research activities ranging from disease and symptom management (e.g., dyspnea, fatigue, side effects of chemotherapy and radiation treatment, pain, sleep, and hyperlipidemia) to end of life care. Departmental faculty expertise is widely recognized as evidenced by significant intramural and extramural funding.

Patient Care Activities

Many of the faculty in the Department maintain current clinical expertise in a variety of practice settings including ambulatory, acute and long-term care.

Academic Program Areas

The Department of Physiological Nursing offers courses of study leading to a master's degree in science with emphases in the following areas:

<u>Acute Care Nurse Practitioner</u> - Acute Care Nurse Practitioners are advanced practice nurses who provide care to acutely ill patients with complex conditions such as critical care, emergency/trauma, cardiovascular, internal medicine, neurology and surgery. Students engage in five areas

Source: Physiological Nursing - 9/22/2008

of care management including: (1) eliciting patient histories and performing physical examinations; (2) ordering diagnostic tests; (3) performing therapeutic procedures; (4) furnishing and prescribing medications, and (5) coordination of care. The focus of the program is on developing skills to manage hospitalized or emergency department patients. The program has three areas of emphasis: critical care, cardiopulmonary, and ED/Trauma. If students have individual practice goals, additional areas such as neurosurgery or nephrology may be explored. Students will have preparation in pathophysiology, health assessment, pharmacology and primary, chronic and acute care.

Cardiovascular Nursing - The cardiovascular specialty spans the health care continuum and students can customize their focus areas on health promotion, coronary artery disease prevention, cardiac rehabilitation, or the management of medical, surgical, and critically ill cardiac patients. The curriculum includes courses in human pathophysiology and aging, and in nursing management of cardiac patients in critical care, acute care, outpatient settings, and rehabilitation programs. The cardiovascular nursing program prepares graduates for advanced nursing practice roles such as: clinical nurse specialists (CNS), educators, middle management administrators, and case managers. Our dual cardiovascular/genomics specialty provides coursework that empowers graduates through knowledge, skill, and resources to integrate genetic concepts, principles and new technologies into their practice.

<u>Critical Care/Trauma Nursing</u> - Change in health care delivery has led to an increase in the acuity of hospitalized patients and the need for continuity of care across settings. Certification as a Clinical Nurse Specialist in Critical Care/Trauma prepares the advanced practice nurse to perform in the roles associated with practicing, educating, managing, researching, or coordinating care in critical care or trauma settings. The program includes curriculum in pathophysiology, pharmacology, monitoring and clinical management of critical care, trauma and emergency department patients; critical analysis of practice issues and clinical experiences in advanced practice roles. The program provides students with the expertise needed to work in a fast-changing environment, to evaluate clinical outcomes, to improve patient care and to promote cost-effective care.

Gerontological Nursing - This specialty focuses on the nursing care of the older adult. Both Clinical Nurse Specialist and Gerontological Nurse Practitioner options are available. The curriculum for both specialties includes core courses in advanced clinical skills for the assessment and management of older adults, pathophysiology, pharmacology, mental health, social, political, economic factors, and current patterns/ future trends in the delivery of healthcare and long-term services to older adults. Students have an opportunity to obtain in-depth clinical experience in a wide range of settings that span the continuum, from ambulatory and community-based services, to hospitals and institutional long term care. Students interested in oncological nursing may

Source: Physiological Nursing - 9/22/2008

chose a dual Oncology/GNP program of study. Courses and clinical experiences combine both geriatric and oncology nursing in various settings. The dual program is three years in length.

Oncology - The Oncology specialty prepares advanced practice nurses to participate in cancer prevention and early detection, and in the planning, developing, and providing new strategies in caring for patients with cancer. Three advanced practice areas of focus are available: Advanced Practice Oncology Nursing (Clinical Nurse Specialist - CNS), dual option in Oncology and Genomics Advanced Practice Nursing (CNS), and Gerontological /Oncology Nurse Practitioner (GNP). Nurses are prepared for advanced clinical practice, leadership, research support, and adult education positions in cancer control or acute and chronic oncology care settings. The dual option of Oncology and Genomics: Advanced Practice Nursing prepares graduates for emerging roles in the science of cancer genetics. The emphasis is on screening for genetics predisposition, the genetics of cancer and other adult illness, and the use of genetically engineered technologies and therapies. The Oncology GNP specialty offers a limited number of students the opportunity to prepare for a role as a nurse practitioner with expertise in gerontology and oncology. Throughout this program, students focus their learning objectives on the management of cancer illness in the older adult.

<u>Genomics and Education Minors</u> – Students may choose to complete the Genomics Minor. The Genomics courses can be found with three dual specialty programs Cardiovascular/Genomics, Oncology/Genomics, and Gerontology/Genomics or as a genomics minor.

Source: Physiological Nursing - 9/22/2008

FY 2007-08 Headcount as of 4/3/08 PHYSIOLOGICAL NURSING

Grand	Total	82
Academic	Part Time	49
Acad	Full Time Part Time	3
Staff	Part Time	10
St	Full Time	20

Source: UCSF Human Resources

Permanently Budgeted FTEs PHYSIOLOGICAL NURSING

	FY 2003-04	04	FY 2004-05	05	FY 2005-06		FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff	taff	Academic	Staff	Academic	Staff
NURSING-PHYSIOLOGICAL NURSING	17.83 5.13	5.13	18.83 5.13	5.13	17.33 5.13	.13	18.33 5.13	5.13	18.33 5.13	5.13
Total:	17.83 5.13	5.13	18.83 5.13	5.13	17.33 5.13	.13	18.33 5.13	5.13	18.33 5.13	5.13

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PHYSIOLOGICAL NURSING

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$3,712,892	\$3,206,354	\$1,676,243	52.28%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$1,192,443	\$978,498	\$166,517	17.02%
Total:	\$4,905,335	\$4,184,853	\$1,842,759	44.03%

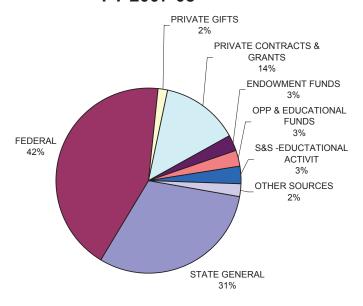
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PHYSIOLOGICAL NURSING

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$2,113,068	\$2,085,119	\$2,386,256	\$2,593,712	\$2,676,842	26.7%
TUITION & FEES	\$36,088	(\$34,676)	(\$20,029)	\$52,864	\$40,088	11.1%
FEDERAL	\$3,915,128	\$3,613,841	\$3,934,306	\$3,939,345	\$3,712,892	-5.2%
STATE SPECIAL & CONTRACTS	\$2,250	\$0	\$0	\$1,207	\$0	-100.0%
LOCAL GOVERNMENT	\$185,519	\$44,450	\$0	\$0	\$0	-100.0%
PRIVATE GIFTS	\$135,722	\$113,308	\$82,171	\$80,536	\$141,152	4.0%
PRIVATE CONTRACTS & GRANTS	\$571,012	\$1,790,315	\$1,671,002	\$1,132,579	\$1,192,443	108.8%
ENDOWMENT FUNDS	\$106,793	\$175,054	\$50,141	\$240,185	\$230,181	115.5%
OPP & EDUCATIONAL FUNDS	\$157,464	\$122,326	\$170,735	\$197,447	\$236,366	50.1%
S&S -EDUCTATIONAL ACTIVIT	\$253,776	\$368,191	\$268,836	\$243,312	\$258,441	1.8%
OTHER SOURCES	\$10,519	\$38,448	\$103,551	\$187,119	\$202,936	1829.3%
Total:	\$7,487,338	\$8,316,376	\$8,646,970	\$8,668,305	\$8,691,341	16.1%

Source: UCSF Budget & Resource Management

Expenditures by Fund Type Physiological Nursing FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PHYSIOLOGICAL NURSING (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	3,890	2,672	508	710	3,041	848	-
Research	4,380	5	5	4,370	2,758	1,622	
Total	8,270	2,677	513	5,081	5,800	2,470	

Source: UCSF Controller's Office

SOCIAL AND BEHAVIORAL SCIENCES

- Chair Pinderhughes, Howard
- Business Officer Gudelunas, Regina C.
- Website http://www.ucsf.edu/medsoc/

History

In 1960, UCSF School of Nursing began to recruit sociologists to conduct research related to health, to teach research methodology to selected students in the Masters Program in Nursing, and to generally provide, through substantive course work, scholarly emphasis upon social aspects of health and illness. During this time, the sociology faculty became integrated into the intellectual life and programs of UCSF and the School of Nursing by assisting nursing faculty with their research, helping nursing students attracted to sociological perspectives and methodologies to develop research careers in nursing, and developing courses suitable to the substantive interests of graduate nursing students.

In 1968, the sociology faculty developed plans for a Ph.D. degree-granting program in sociology. Their objectives, then as now, were 1) to train select numbers of sociology and health profession students for advanced careers in research and teaching in sociology of health and illness broadly defined, and 2) to establish on the UCSF campus a nationally and internationally recognized department for sociological research and training, especially in medical and health areas. The Doctoral Program in Sociology was provided authority to grant the Ph.D. degree in 1968.

Almost simultaneously, the School of Nursing developed its own doctoral (DNSc) program, based partially on the growing strength of numbers of doctorally-prepared faculty and the strong reputation of the sociology faculty. Although these programs developed separately, sociology faculty served, and continue to serve, the School of Nursing by teaching substantive courses, participating on qualifying exam and dissertation committees, and providing instruction in research methods and analysis to those graduate nursing students for whom sociological perspectives and methodologies are consistent with their own interests.

With its inception in 1968, the Doctoral Program in Sociology became the only doctoral program specializing in medical sociology in the state of California and the first of a limited number of such programs in the United States. Since then, the UCSF Program has established itself as a strong and important center for medical sociology research and training in this country and worldwide. In addition to the reputation of its faculty, what initially and clearly distinguished the UCSF program was its early and continuing methodological emphasis upon research data gained directly from interviews and field observations and upon qualitative data analysis. It is especially known for the development of the grounded theory method by Anselm Strauss and Barney

Source: Department of Social and Behavioral Sciences, 9/29/2008

Glaser.

In 1972, the School of Nursing departmentalized, and the Graduate Program in Sociology was incorporated into the Department of Social and Behavioral Sciences (SBS). In 1979, the Aging Health Policy Center was established within the Department, led by Carroll Estes and attracting researchers with skills in quantitative research and survey methodology who were knowledgeable in social policy, aging, and the organization, financing, and delivery of health care. These new faculty included Charlene Harrington and Robert Newcomer. In 1985, the aging center was officially designated by the Regents of the University of California as an organized research unit (ORU) and renamed the Institute for Health & Aging (IHA). The primary faculty appointment of all full-time research faculty must be in a department; today most Institute of Health and Aging (IHA) faculty are appointed in the Department of Social and Behavioral Sciences. These faculty contribute to both the Institute and the Department, bringing considerable quantitative methodological and substantive strengths which have also been integrated into the Doctoral Sociology Program. Current Co-Directors are Pat Fox and Wendy Max. The substantial extramural funds raised by the Institute thus provide additional faculty support to the Doctoral Program in Sociology.

With the rise of national interest in women's rights and women's health, an integrated core of courses on women's health and healing was initiated by department faculty in 1973. This program later won a major three-year grant from the Fund for the Improvement of Post-Secondary Education (FIPSE) to develop and nationally disseminate curricular resources and run three Summer Institutes in Women, Health and Healing (1984-87) that drew faculty from around the world. These were organized by Professors Virginia Olesen, Adele Clarke and Sheryl Ruzek and also supported by the School of Nursing. These two-week Institutes were designed for faculty in post-secondary educational settings who planned to teach courses or organize programs in the areas of women's health. After circa 2000, the name of this area of emphasis was changed to "Gender and Health."

Since circa 1990, new faculty have organized additional areas of emphasis within the Doctoral Program in Sociology. Professors Clarke and Janet Shim teach in the area of social studies of science, technology and medicine. Professors Howard Pinderhughes teach in the area of race, class, and health inequalities. Professor Pinderhighes also teaches violence studies. And Professor Shari Dworkin most recently adds the areas of global health and HIV/AIDs. All of these areas of emphasis attract students nationwide and internationally who wish to conduct research in these areas of expertise.

In 2002, the Department, with School of Nursing approval, started new Masters and doctoral degree programs in nursing with a specialty in health policy. Faculty in the Nursing Health Policy

Source: Department of Social and Behavioral Sciences, 9/29/2008

Programs include Charlene Harrington, Robert Newcomer, Ruth Malone, and Susan Chapman. They have interests in long term care, tobacco control policy, and health workforce policy, among others.

Research

The research mission of the Department is 1) to advance knowledge through theory and research; 2) to design and evaluate the organization, financing, and delivery of health care; and 3) to examine one broad dynamics of health, healing, and the production of knowledge and its application in these domains. Departmental faculty are actively involved in a large number of research activities directly and indirectly related to the teaching program and the mission of the department.

SBS is affiliated with the UCSF **Institute for Health & Aging**, an organized research unit of the campus which conducts research in the following areas: health economics, substance abuse, disability, health and diverse populations, aging and long-term care, women's health, healthy and active aging, and other topic areas.

SBS is part of the UCSF Center for Health and Community, a group of health policy and social sciences departments and research units within the university sharing a common mission that includes advancing innovative partnerships, interdisciplinary programs and service to the community; providing students with the basic and applied aspects of social and behavioral sciences and health policy; and improving the quality of education for health professionals and researchers.

Education

SBS offers courses of study leading to a Ph.D. in sociology, with major emphasis on the sociology of health, medicine, and health care systems, and also courses of study for nurses leading to an M.S. or Ph.D. with an emphasis in health policy.

Ph.D. Sociology - For the sociology Ph.D. program, enrollment is open to students with a bachelor's or master's degree in sociology or a related field. Students proceed through a program of coursework, preliminary and qualifying examinations and dissertation preparation.

Ph.D. Nursing - Health Policy - The health policy program is a cross-disciplinary program that prepares students to assess the policy dimensions of issues in the clinical practice, teaching, and research environments within which they work and to translate nursing practice issues into policy issues.

M.S. Nursing - Health Policy - A Health Policy specialty program leading to the Master of Science degree is open to registered nurses through the School of Nursing.

Source: Department of Social and Behavioral Sciences, 9/29/2008

FY 2007-08 Headcount as of 4/3/08 SOCIAL AND BEHAVIORAL SCIENCES

Grand	Total	33
Academic	Part Time	16
Acad	Full Time	7
Staff	Part Time	2
St	Full Time	8

Source: UCSF Human Resources

Permanently Budgeted FTEs SOCIAL AND BEHAVIORAL SCIENCES

	FY 2003-04	-04	FY 2004-05	-05	FY 2005-06	90	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
ORG ACT-S/N SOCIAL & BEHAVIORAL SCI		0.03		0.03		0.03		0.03		0.09
S/N SOCIAL & BEHAVIORAL SCIENCES	7.21	7.21 1.63	7.21	7.21 1.63	7.21 1.63	1.63	7.21	7.21 1.68	7.21	1.57
Total:	7.21	1.66	7.21	1.66	7.21	1.66	7.21	1.71	7.21	1.66

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 SOCIAL AND BEHAVIORAL SCIENCES

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$1,771,771	\$1,151,956	\$390,503	33.90%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$796,467	\$775,146	\$132,845	17.14%
Total:	\$2,568,238	\$1,927,103	\$523,348	27.16%

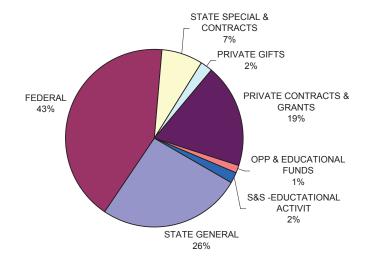
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source SOCIAL AND BEHAVIORAL SCIENCES

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$969,809	\$985,460	\$1,125,982	\$1,091,682	\$1,096,163	13.0%
TUITION & FEES	\$188	\$144	(\$156)	\$156	\$1,684	795.9%
FEDERAL	\$1,102,683	\$1,496,553	\$1,686,085	\$1,958,204	\$1,771,771	60.7%
STATE SPECIAL & CONTRACTS	\$166,170	\$206,398	\$248,456	\$196,614	\$315,119	89.6%
LOCAL GOVERNMENT	\$0	\$0	\$0	(\$12)	\$0	0.0%
PRIVATE GIFTS	\$100	\$13,931	\$72,190	\$83,190	\$88,033	87932.7%
PRIVATE CONTRACTS & GRANTS	\$517,767	\$647,667	\$543,284	\$403,007	\$796,467	53.8%
ENDOWMENT FUNDS	\$0	\$375	\$21,230	\$21,935	(\$6,026)	0.0%
OPP & EDUCATIONAL FUNDS	\$14,569	\$27,141	\$43,254	\$54,097	\$57,954	297.8%
S&S -EDUCTATIONAL ACTIVIT	\$19,378	\$157,607	\$244,876	\$218,482	\$87,018	349.1%
OTHER SOURCES	(\$1,114)	(\$4,080)	\$2,701	\$3,400	\$5,120	-559.7%
Total:	\$2,789,549	\$3,531,195	\$3,987,903	\$4,030,753	\$4,213,303	51.0%

Source: UCSF Budget & Resource Management

Expenditures by Fund Source Social and Behavioral Sciences FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures SOCIAL AND BEHAVIORAL SCIENCES (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	1,402	1,096	138	168	1,090	314	2
Research	2,107	-	0	2,107	1,387	720	
Total	3,509	1,096	138	2,275	2,477	1,034	2

Source: UCSF Controller's Office

INSTITUTE FOR HEALTH AND AGING

- Co-Directors Max, Wendy, Fox, Patrick
- Business Officer Gudelunas, Regina
- Website http://nurseweb.ucsf.edu/iha/

The Institute for Health & Aging (IHA), located at the Laurel Heights Campus of the University of California, San Francisco, was originally established by the School of Nursing in 1979 as the Aging Health Policy Center. The Center evolved from social sciences research and training activities, initially undertaken by faculty in the Department of Social and Behavioral Sciences in 1976.

Since Drs. Wendy Max and Patrick Fox assumed the role as Institute Co-Directors in 1999, their mission has been to build a productive, academically vibrant, and financially sound center of research, education, and public service programs.

When the Regents of the University of California established the Institute for Health & Aging as an organized research unit (ORU) on July 19, 1985, it represented a significant commitment by the University to the field of aging, and is a special acknowledgement of the importance of aging research, education, and public service to the University's mission.

Over the years, key research centers have been established by Institute faculty, which address a wide range of socioeconomic issues in the areas of women's health, healthy and active aging, disability, substance abuse, and medical economics including the following:

- The Dorothy P. Rice Center for Health Economics
- The Center for Healthy and Active Aging
- The Lesbian Health and Research Center

The Institute for Health & Aging provides public service to Californians through a number of important health promotion and research programs, most of which are funded through the Chronic Disease, Injury and Control (CDIC) & Cancer Detection Sections at the California Department of Health Services including the following:

- California Alzheimer's Disease Program
- California Cancer Detection Section (CDS)
- California Arthritis Partnership Program (CAPP)
- California Center for Physical Activity (CCPA)

Source: Institute for Health and Aging, 9/29/2008

- California Diabetes Program
- California Heart Disease & Stroke Prevention Program (CHDSP)
- Integrating Medicine and Public Health (IMAP)
- Preventive Health Care for Adults (PHCA)

Education & Training Programs

The Institute for Health & Aging at the School of Nursing, University of California, San Francisco, provides comprehensive education and training in aging, health policy, and health services research for pre- and post-doctoral scholars in a variety of social science disciplines.

Over the past 10 years, IHA faculty members have mentored 118 predoctoral students and post-doctoral researchers, and 67 visiting scholars.

• In addition, IHA participates in a joint training program,

Health Policy Fellowship Program. This program is a collaboration between the Institute for Health & Aging and the Institute for Health Policy Studies at UCSF, and provides multidisciplinary teaching and training for postdoctoral fellows. The fellowships are funded jointly by the Agency for Healthcare Research and Quality and the Robert Wood Johnson Foundation. The program curriculum comprises a supervised research project, a seminar series that focuses on health policy, health services, research methods, and writing, among other topics, and a career development component.

The Institute for Health & Aging also has a scholarship program with three components. The Carroll L. Estes Critical Scholars Program will provide support to graduate students studying aging, health, long-term care, and disability with particular attention to issues of social policy and social justice. The Estes Program in Law, Health and Aging, will provide support to law and social science grad students interested in issues related to law, health, and aging. The third component of the scholarship program will be the Senior Scholar Program, named in honor of Maggie Kuhn, cofounder of the Gray Panthers, and Tish Sommers, cofounder and president of OWL, Older Women's League. This program will provide support to distinguished older people who wish to spend time at UCSF working with our scholars on major issues related to aging in America. It may also support younger scholars with similar interests.

Source: Institute for Health and Aging, 9/29/2008

FY 2007-08 Headcount as of 4/3/08 INSTITUTE FOR HEALTH AND AGING

St	Staff	Acac	Academic	Grand
Full Time Part Time	Part Time	Full Time	Part Time	Total
89	18	5	16	128

Source: UCSF Human Resources

Permanently Budgeted FTEs INSTITUTE FOR HEALTH AND AGING

	FY 2003-04	40	FY 2004-05	92	FY 2005-06	90	FY 2006-07	20	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
ORG ACT-NURSE-INST HEALTH & AGING		0.34		0.36		0.26		0.26		0.18
S/N-INSTITUTE FOR HEALTH & AGING		1.53		1.52		1.52		1.52	1.00	1.52
Total:	0.00 1.87	1.87	00.0	1.88	0.00	1.78	00.00	0.00 1.78	1.00	1.70

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 INSTITUTE FOR HEALTH AND AGING

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$2,111,435	\$1,848,747	\$847,263	45.83%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$9,746,352	\$9,062,421	\$809,245	8.93%
Local Government	(\$371)	(\$371)	(\$56)	15.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$824,445	\$812,317	\$140,309	17.27%
Total:	\$12,681,861	\$11,723,115	\$1,796,761	15.33%

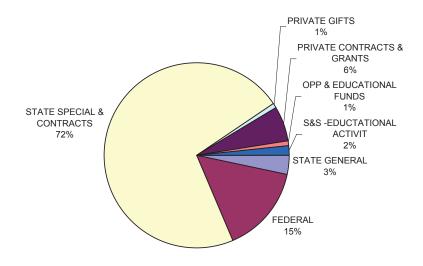
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source INSTITUTE FOR HEALTH AND AGING

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$263,846	\$327,289	\$240,932	\$255,814	\$442,761	67.8%
TUITION & FEES	\$6,735	(\$4,877)	(\$1,121)	\$2,822	\$230	-96.6%
FEDERAL	\$2,453,656	\$1,747,677	\$1,642,333	\$1,555,425	\$2,111,435	-13.9%
STATE SPECIAL & CONTRACTS	\$7,349,459	\$7,489,255	\$9,066,105	\$9,280,094	\$9,888,841	34.6%
LOCAL GOVERNMENT	(\$870)	\$0	\$311,878	\$11,645	(\$371)	-57.4%
PRIVATE GIFTS	\$98,041	\$103,968	\$56,797	\$94,783	\$111,874	14.1%
PRIVATE CLINICAL TRIALS	(\$7,820)	(\$811)	\$0	\$0	\$0	-100.0%
PRIVATE CONTRACTS & GRANTS	\$2,060,616	\$1,663,676	\$885,582	\$839,509	\$824,445	-60.0%
ENDOWMENT FUNDS	\$16,666	\$2,208	\$62,045	\$106,868	\$307	-98.2%
OPP & EDUCATIONAL FUNDS	\$158,382	\$135,214	\$169,906	\$197,610	\$124,660	-21.3%
S&S -EDUCTATIONAL ACTIVIT	\$109,426	\$51,145	\$9,142	\$23,056	(\$228,793)	-309.1%
OTHER SOURCES	\$8,701	\$1,955	(\$14,788)	\$17,492	(\$32,013)	-467.9%
Total:	\$12,516,839	\$11,516,698	\$12,428,811	\$12,385,118	\$13,243,375	5.8%

Source: UCSF Budget & Resource Management

Expenditures by Fund Source Institute for Health and Aging FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures INSTITUTE FOR HEALTH AND AGING (Dollars in Thousands)

			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	505	443	(104)	167	158	347	(0)
Research	4,340	-	0	4,340	2,929	1,411	
Total	4,845	443	(104)	4,507	3,087	1,758	(0)

Source: UCSF Controller's Office

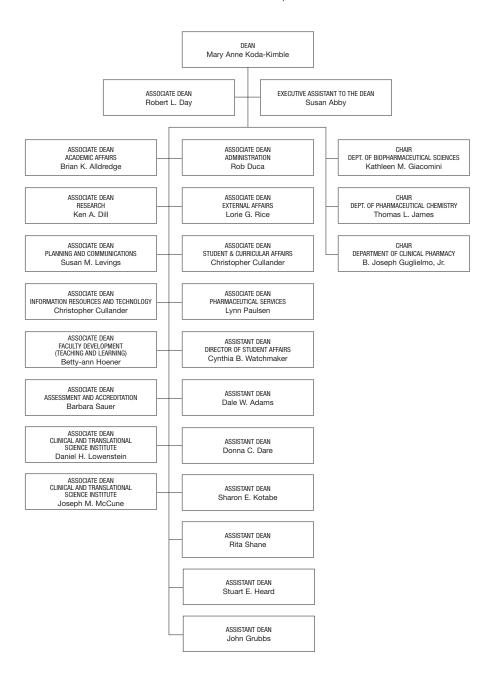
SCHOOL OF PHARMACY

Chapter Contents

Organizational Chart	798
Overview	799
Biopharmaceutical Sciences	815
Clinical Pharmacy	819
Pharmaceutical Chemistry	825

UCSF School of Pharmacy Dean's Office Administration

as of November 30, 2007



SCHOOL OF PHARMACY

School Leadership

Dean

Mary Anne Koda-Kimble, PharmD

- Current Title:
 - Dean, School of Pharmacy
 - Professor of Clinical Pharmacy
 - Thomas. J. Long Endowed Chair in Community Pharmacy Practice
- First Year on UCSF Faculty: 1970
- Education: Pharm.D., University of California San Francisco, 1969
- Licensure:
 - Licentiate in Pharmacy, California, 1969
 - Certified Diabetes Educator, National Certification Board for Diabetes Educators, 1992, 1997
- Specialty: Diabetes

Dr. Mary Anne Koda-Kimble is dean of the School of Pharmacy at the University of California, San Francisco, where she also holds the Thomas J. Long Endowed Chair in Chain Pharmacy Practice. Dr. Koda-Kimble received her PharmD from UCSF in 1969, and joined its faculty in 1970. A nationally recognized leader in pharmacy education, Dr. Koda-Kimble is a past president of the American Association of Colleges of Pharmacy and has served on the California State Board of Pharmacy, the FDA's Nonprescription Drugs Advisory Committee, and the Board of Directors of the American Council of Pharmaceutical Education. Dr. Koda-Kimble has received many teaching and practice awards. She was designated a "Founding Member and Distinguished Practitioner" of the National Academy of Practice in Pharmacy. She is a recipient of the Paul F. Parker Medal from the American Colleges of Clinical Pharmacy for distinguished service to the profession of pharmacy, and the Outstanding Dean Award from the American Pharmacists Association-Academy of Student Pharmacists. She is a member of the United States Pharmacopoeia Board of Trustees and was elected in 2000 to the prestigious Institute of Medicine for her major contributions to health and medicine. The author of many publications, she is best known for the text book Applied Therapeutics, which is widely used by health professional students and practitioners throughout the world.

Department Chairs

- Kathleen M. Giacomini, PhD
- B. Joseph Guglielmo, Jr., PharmD
- Thomas L. James, PhD

Associate Deans

- Brian Alldredge, PharmD
- Christopher Cullander, PhD
- Robert L. Day, PharmD
- · Ken Dill, PhD
- Rob Duca, MBA
- Betty-ann Hoener, PhD
- Susan Levings, MS
- Daniel H. Lowenstein, MD
- Joseph M. McCune, MD, PhD
- Lynn Paulsen, PharmD
- Lorie G. Rice, MPH
- Barbara Sauer, PharmD
- Sharon L. Youmans, PharmD, MPH
- Cynthia B. Watchmaker, MEd, MBA

Assistant Deans

- Dale Adams, PharmD
- Donna Dare, PharmD
- John Grubbs, PharmD
- Stuart Heard, PharmD
- Sharon Kotabe, PharmD
- Rita Shane, PharmD

Executive Assistant to the Dean

Susan Abby

History

Founded in 1872

The School of Pharmacy of the University of California, San Francisco was founded in 1872 as the California College of Pharmacy by a group of farsighted members of the California Pharmaceutical Society, itself then only four years old. This was the first college of pharmacy established in the West and the tenth in the United States. The objectives of the founders were to advance pharmaceutical knowledge and elevate the professional character of apothecaries throughout California.

1873: Affiliated with UC

On June 2, 1873, the college affiliated with the University of California. It became the College of Pharmacy of the University of California on July 1, 1934, at which time an academic curriculum leading to the bachelor's degree was offered to replace certification in vocational training.

1938: Graduate curriculum established

In 1938, a graduate curriculum leading to the MS and PhD degrees in pharmaceutical chemistry, internships in hospital pharmacy, and a pharmaceutical technology laboratory were established.

1955: Doctor of Pharmacy established

In 1955, a program of study leading to the professional degree, doctor of pharmacy, was established. In keeping with University policy, the College of Pharmacy became the School of Pharmacy in 1955.

1966-1969: Clinical pharmacy program established

In 1966, the School of Pharmacy instituted an experimental decentralized pharmacy service in the patient care area of UCSF's Moffitt Hospital. The success of this service encouraged the faculty to adopt a clinical pharmacy program as a new major educational objective of the curriculum. In 1969, a required clinical clerkship program was instituted which now encompasses

the entire training program of the fourth year.

Today

The School administers or co-administers a wide variety of academic programs, including several graduate programs leading to PhD degrees and a combined PharmD/PhD degree. The School's doctor of pharmacy program offers students a core clinical curriculum and the choice of one of three foci of further study in pharmaceutical care, pharmaceutical sciences, or pharmaceutical health policy and management.

The UCSF School of Pharmacy is the top-ranked pharmacy school in the nation as ranked independently by academic quality and perception, funding, and publications. The caliber of its sciences is reflected by the ability of the School's faculty to attract more research funding from the National Institutes of Health than any other pharmacy school in the nation every year since 1979. As a measure of the School's excellence in chemistry, UCSF receives more federal funding for chemical research and development than any university in the US.

Mission

The School's mission statement was most recently revised in 2007. It reads:

The School of Pharmacy at the University of California, San Francisco is dedicated to improving human health worldwide and advancing scientific discovery. The School:

- Conducts exceptional pharmaceutical research, including basic science, translational science, clinical science, health policy, and health services research.
- Delivers world-class education to our Doctor of Pharmacy, graduate, postdoctoral students and others.
 - We educate PharmD students to be leaders and effective team members in health care and to be lifelong experts in the safe and effective use of medicines.
 - We educate graduate students to be outstanding researchers across the spectrum from the basic to the health sciences.
 - We provide strong postdoctoral training.
- Develops and delivers outstanding and innovative pharmaceutical care.
- Serves the community by sharing our expertise with the public, industry leaders, and policy makers.

We achieve these goals within a culture of understanding, inclusion, equity, and respect. We recruit and support faculty members, staff, and students who are diverse in gender, age, race, ethnicity, religion, sexual orientation, and socioeconomic status. We have a particular commitment

to historically excluded populations who are currently underrepresented.

The missions of the UCSF School of Pharmacy departments of biopharmaceutical sciences, clinical pharmacy, and pharmaceutical chemistry fall under the broader umbrella of the School's mission statement. The School supports the larger missions of the University of California, San Francisco and the University of California.

Plans

The UCSF School of Pharmacy faculty and the School's administrative leaders believe that it is more important now than ever that the School look ahead with clarity at where it is headed and why. The reasons are many. At UCSF, the continued build out of the Mission Bay research campus has resulted in science possibilities beyond imagination. A new hospital will be built at Mission Bay as well, which will help speed the translation of discoveries into effective, safe patient care. The Parnassus and other campus sites will be reshaped for changing needs. Many of the School's accomplished, senior faculty members will retire over the next 5 to 10 years. New young faculty members are intellectually fearless and broad minded about what the School should become and can do. Nationally, while the School receives exceptional support from the National Institutes of Health, federal funding for research overall does not look bright. This is at a time when the School's faculty needs funding for new approaches to drug discovery and development and new collaborations among biological scientists and scientists in engineering, physics, and computation. The health care situation of haves and have nots in this country begs a major overhaul in which pharmacy could play a bigger and bigger role on behalf of the public it serves. The opportunities for the School are tremendous and timely. The School has chosen its future directions with great care to maximize its work and leverage its resources. The Schools' current strategic plan, Pressing Ahead in New Directions: Strategic Course 2007-2012, outlines 3 major goals:

- 1. Create a new framework for drug discovery and development.
- 2. Ensure that more patients get the best results from their drugs.
- 3. Shape the future of pharmacy science, policy, education, and patient care by working in fresh and collaborative ways.

Select Accomplishments

UCSF School of Pharmacy scientists and clinicians improve human health and well-being in ways that are both center stage and behind the scenes. Here are a few examples.

Clinical Pharmacy

In the 1960s, first to train pharmacists as drug therapy specialists and not simply drug dispensers.

This philosophical and academic shift positioned pharmacists as "clinical pharmacists" who, as active members of the health care team, began to work side by side with physicians and nurses to provide direct care to patients and consultation to patients' families.

Pathway Curriculum

Innovators today of a 3-pathway Doctor of Pharmacy (PharmD) curriculum that gives students, who are all clinically trained, the opportunity to further explore pharmaceutical care, pharmaceutical science, and pharmaceutical health policy and management in more detail.

In order for pharmacists to meet today's changing health care needs pharmacy school curricula must be farsighted and continually refreshed.

DOCK

First to develop computer-based molecular docking software program, called DOCK, that calculates and displays in three dimensions how potential drugs might attach to target molecules.

Computer-based approaches speed drug development by more efficiently "sorting out" or "screening" from millions, and billions, of chemicals those compounds that have the best potential for drug development.

AMBER

Developed one of the first, and most widely used, computer models of biomolecules and drugs, called AMBER.

AMBER has been used for designing drugs, for predicting the effects of mutations on proteins, and for understanding the structures and properties of proteins and DNA molecules.

Clearance

First to establish a physiological basis for describing drug distribution in the body by introducing the concept of drug "clearance."

Accurate calculations of how rapidly a drug is cleared from the body are key to understanding how much drug is active in the body at a given time and hence the most effective dose for a patient.

Research Analysis

Leader in establishing how to critically evaluate and make the best use of health care information and scientific research.

The best practices by physicians and other health care providers are based upon applying accurate, unbiased information.

Antimicrobials

Demonstrated the value of antimicrobial prescription-monitoring programs in hospitals.

The intervention of hospital pharmacists is associated with the improved treatment of hospital-associated infections.

Proteases

Developed a "defective version" of HIV virus protease, which acts much like a pair of molecular scissors as it "snips" apart the viral protein at specific locations. This protease can be used to corrupt normal versions of the protein, thereby preventing the viruses from accomplishing disease-related tasks in the body.

Through their publication of more than 200 papers and five patents on proteases since the early 1980s the School's scientists have made clear the value of proteases in understanding and controlling many human diseases.

Transporters

Cloned the first transporter molecule, known as N1, in humans that is responsible for moving specific types of organic molecules in the liver.

Understanding how the human body handles drugs and its own naturally produced molecules is a key to improving drug development.

NMR

Applied sophisticated nuclear magnetic resonance (NMR) techniques to describe important protein structures in AIDS and fatal neurodegenerative diseases, such as mad cow disease, which can serve as targets for the "rationale" design of potential new and effective drugs.

The power of NMR and other techniques to "see" the architecture of molecules involved in disease makes it easier to determine how to rationally design drugs that bind to, or incapacitate, those molecules.

Poison Control

Consolidated California's six independent poison control centers into one integrated system, which is administered by the UCSF School of Pharmacy and responds to inquiries 24 hours each

day via a toll-free telephone number.

The California Poison Control System responds to hundreds of thousands of poisoning inquiries each year and saves tens of millions of dollars annually in medical treatment costs.

Peptide Synthesis

Invented, with School of Medicine colleague, an efficient and economical way of generating large amounts of different peptides with potentially desirable properties.

During the past decade, pharmaceutical companies have devoted more and more resources to combinatorial chemistry, which is a technological approach to generating a variety of molecules quickly. These molecules in turn are evaluated for their potentials as new drug platforms. Peptides are a very important class of molecules, many of which are made naturally by the body and perform important functions, which companies synthesize and evaluate as potential precursers to drugs that fight disease.

Cancer Therapy

Discovered, through research on the basic mechanisms of the enzyme thymidylate synthase, that the then-standard combination chemotherapy of two specific drugs used against colorectal, breast, liver, head and neck cancers might actually be antagonistic.

This laboratory conclusion was subsequently supported by clinical investigations, which led to the establishment of more effective combination therapies that have now become standard cancer treatments.

Thyroid Hormone

Created a synthetic thyroid hormone, named GC-1, with special and specific properties.

GC-1 can be used to develop more selective drugs to treat thyroid disorders and to learn more about how thyroid hormone regulates metabolism.

Gene Delivery

Invented a method, called transfection, of delivering genes into cells for the purposes of both gene therapy to treat disease and the study of molecular mechanisms that underlie both normal physiology and disease.

Transfection is more efficient than previous gene delivery methods, which generally have yielded low percentages of cells that take up and activate a gene, and does not provoke the immunological reactions caused by the viruses typically used as gene delivery vehicles in gene therapy.

Parasitic Disease

In a collaborative research effort, identified a protein target needed by the parasite Tritrichomonas foetus, determined the structure of the protein, used DOCK (See above.) to identify molecules that might bind and "immobilize" the protein, and -- using these as touchstones -- synthesized molecules that could bind more tightly to the protein while not interfering with the human forms of the protein.

Protozoans are a major cause of deadly and debilitating illness of humans and livestock throughout the world. School scientists use the sophisticated techniques of structure-based drug design and combinatorial chemistry to produce effective species-specific molecules of medicinal importance.

Protein Folding

Studies at the School have led to a deeper understanding of the principles of how proteins adopt their structures.

Because a protein's structure is related to its function, the ability to understand principles of folding is leading to better computational models for designing drugs that can affect a protein's function. The physical theories developed here have led to a new view of how proteins adopt their structures. The ability to predict protein shape will ultimately speed the pace of scientific discovery and drug development.

Academic Programs

PharmD Professional Programs

Doctor of Pharmacy (PharmD) Professional Degree with Pathways in:

- Pharmaceutical Care
- Pharmaceutical Health Policy and Management
- Pharmaceutical Sciences

Joint-degree Programs

- PharmD/PhD
- PharmD/MPH

PhD Graduate Programs

Doctor of Philosophy (PhD) Graduate Degrees in:

- Biological & Medical Informatics (BMI)
- Biophysics

- Chemistry & Chemical Biology (CCB)
- Pharmaceutical Sciences & Pharmacogenomics (PSPG)

Postdoctoral Programs

- Postdoctoral PharmD Residencies
- Postdoctoral Fellowships
- Visiting Professorships

Continuing Education Programs

Research Programs, Facilities, Services

- Biomolecular Resource Center
- California Poison Control System (CPCS)
- Center for Consumer Self Care
- Center for Drug Development Science (CDDS)
- Center for Pharmacogenomics
- Computer Graphics Laboratory (CGL)
- Drug Product Services Laboratory (DPSL)
- Drug Research Unit (DRU)
- Drug Studies Unit (DSU)
- Mass Spectrometry Facility
- Medication Outcomes Center
- Molecular Design Institute (MDI)
- Nuclear Magnetic Resonance Laboratory (NMR)
- Partners in D
- Peptide and DNA Synthesis / Sequence Analysis & Consulting Service (SACS)
- Program for Pharmaceutical Economics and Policy Studies (ProPEPS)
- Small Molecule Discovery Center (SMDC)
- The San Francisco Cochrane Center

Major Instructional Facilities

- Basic Science Instruction Center
- Thomas A. Oliver Informatics Resource Center

Other Education and Training

- Pharmacy Leadership Institute
- American Course on Drug Development and Regulatory Sciences (ACDRS)
- International Program in Clinical Pharmacy Education with Tokyo University of Pharmacy and Life Science

School Statistics as of August 2007

Faculty

- Salaried 92
- Without Salary 839

Students

- PharmD 493
- PhD 154

Postdoctoral

- Fellows 95
- Residents 16

Staff - 287

Academic appointees 79

Alumni (living)

- PharmD (includes BS) 5,224
- MS 25
- PhD 495

FY 2006-07 Budget

More than US\$60 million, of which 33% is from federal contracts and grants.

Source: School of Pharmacy website, 7/22/2008

Financial Schedule 8E - FY 2007-08 Current Fund Expenditures by Source SCHOOL OF PHARMACY

	Total
General Funds	\$10,078,756
Tuition and Fees	\$4,139,912
Federal Government Grants	\$20,767,373
Federal Government Contracts	\$594,361
Special State Appropriations & Contracts	\$7,283,219
Local Government	\$1,325
Private Gifts, Grants and Contracts	\$8,454,472
Endowment Income	\$1,534,967
Sales & Services Educational Activities	\$756,143
Sales & Services of Auxiliary	\$0
Sales & Services Medical Centers	\$0
Other Sources	\$4,012,262
Reserves	\$220,083
Total	\$57,842,873

Source: UCSF Controller's Office

SCHEDULE 8C - FY 2007-08 CURRENT FUNDS EXPENDITURES BY DEPARTMENT (Dollars in Thousands)

			Current Funds			Distribution	
	Total	Unres	tricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
SCHOOL OF PHARMACY							
INSTRUCTION							
Clinical pharmacy	5.182	3,279	939	964	5,650	1,511	1.979
Educational Services	3,191	1,307	1,700	183	1,721	1,511	41
Pharmacy department	2,947	1,486	1,223	238	2,261	685	
Pharmaceutical chemistry	3,891	2,248	1,548	95	3,037	854	
Inter-school services	306	120	156	30	-	475	168
Total	15,517	8,440	5,567	1,510	12,670	5,036	2,189
RESEARCH							
Dean's office	502	-	248	255	100	440	37
Clinical pharmacy	4,225	1	122	4,102	2,685	1,539	
Pharmaceutical chemistry	12,799	203	978	11,617	6,835	6,256	292
Pharmacy department	10,585	206	814	9,565	5,397	5,188	((
Total	28,111	411	2,161	25,539	15,017	13,422	329
ACADEMIC SUPPORT							
Dean's office	1,483	1,148	204	130	1,361	355	233
Special Drug Study	432	-	432	-	83	349	
Clinical Pharmacy	2,287	80	2,208	-	1,540	2,145	1,398
Drug Product-home therapy							
Total	4,202	1,228	2,844	130	2,984	2,850	1,631
PUBLIC SERVICES							
Pharmacy Public Services	10,013	-	(24)	10,037	7,272	2,741	
Total School of Pharmacy	57,843	10,079	10,548	37,216	37,942	24,049	4,148

Source: UCSF Controller's Office

, 114	9,175,875.60	38,811,301.73	47,987,177.33	Subtotal, Public Sources
18	174,769.00	11,424,644.55	11,599,413.55	Subtotal, Other Public Sources
7	0.00	84,784.00	84,784.00	Fellowships(all above sources)
_	6,459.00	12,541.00	19,000.00	Subcontracts(all above prime sources)
4	0.00	231,333.55	231,333.55	UC Discovery portion of IUCRP
က	0.00	190,000.00	190,000.00	UC Programs(except IUCRP)
က	27,575.00	268,491.00	296,066.00	Other Public Agencies
4	66,035.00	8,818,060.00	8,884,095.00	Other California Public Agencies
-	74,700.00	1,819,435.00	1,894,135.00	California Dept Health Services
#Awds	F&A Costs	Direct Costs	Total Dollars	OTHER PUBLIC SOURCES
96	9,001,106.60	27,386,657.18	36,387,763.78	Subtotal, Federal Sources
9	0.00	222,017.00	222,017.00	Fellowships(All Federal Sources)
-	20,976.60	38,489.18	59,465.78	Subcontracts(SBIR/STTR)
24	852,591.00	2,128,599.00	2,981,190.00	Subcontracts (excluding SBIR/STTR)
-	0.00	8,352.00	8,352.00	Other Federal Contracts
_	12,406.00	37,594.00	50,000.00	Other DHHS Contracts
-	103,198.00	432,897.00	536,095.00	NIH Contracts
Ŋ	166,925.00	432,950.00	599,875.00	Other Federal Grants
Ŋ	268,949.00	526,283.00	795,232.00	NSF grants
_	418,700.00	4,299,842.00	4,718,542.00	Other DHHS Grants
51	7,157,361.00	19,259,634.00	26,416,995.00	NIH Grants
#Awds	F&A Costs	Direct Costs	Total Dollars	FEDERAL SOURCES
				07/01/2007 - 06/30/2008 (All Awards) SCHOOL OF PHARMACY
Date: 11/5/2008 - FINAL RESUI	Date: 11/5/		0	EXTRAMURAL AWARDS BY TYPE
f Sponsored Resea	Source: UCSF Office of Sponsored Resea		CISCO	UNIVERSITY OF CALIFORNIA. SAN FRANCISCO

Note: Awards are selected for inclusion based on the budget period start dat Results include actions processed through 7:00 PM on 11/4/2008.

UNIVERSITY OF CALIFORNIA, SAN FRANCISCO EXTRAMURAL AWARDS BY TYPE 07/01/2007 - 06/30/2008 (All Awards) SCHOOL OF PHARMACY	000		Source: UCSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	CSF Office of Sponsored Research Date: 11/5/2008 - FINAL RESULTS	Research RESULTS
PRIVATE NON-PROFIT SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	*L#
Grants	3,035,407.00	2,748,687.00	286,720.00	7	1
Contracts	1,600.00	1,600.00	0.00	~	~
Fellowships	168,696.00	168,696.00	00:00	4	2
Subtotal, Private, Non-Profit Sources	3,205,703.00	2,918,983.00	286,720.00	16	17
PRIVATE FOR-PROFIT SOURCES	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
Grants	13,523.00	10,733.00	2,790.00	_	_
Contracts	1,705,344.32	1,295,879.00	409,465.32	13	13
Subcontracts	159,322.00	126,446.00	32,876.00	~	~
Subtotal, Private, For-Profit Sources	1,878,189.32	1,433,058.00	445,131.32	15	15
Subtotal, Private Sources	5,083,892.32	4,352,041.00	731,851.32	31	32
Miscellaneous Agreement Types	Total Dollars	Direct Costs	F&A Costs	#Awds	XL#
Advance Awards	0.00	0.00	0.00	6	6
Extensions	0.00	0.00	0.00	23	23
MTAs(Incoming),URCs	0.00	00:00	0.00	56	99
OTHER agreements	0.00	0.00	0.00	~	_
Subtotal, Misc Agreement Types	0.00	00.00	0.00	88	68
CUMULATIVE TOTAL	53,071,069.65	43,163,342.73	9,907,726.92	234	259

Note: Awards are selected for inclusion based on the budget period start date. Results include actions processed through 7:00 PM on 11/4/2008.

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 SCHOOL OF PHARMACY

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$22,511,161	\$18,661,149	\$7,529,538	40.35%
CIRM	\$176,403	\$176,403	\$94,552	53.60%
Other State Contracts	\$6,908,371	\$6,889,510	\$49,276	0.72%
Local Government	\$1,325	\$1,325	\$437	33.00%
Private Clinical Trials	\$412,049	\$305,741	\$38,262	12.51%
Private Contracts & Grants	\$6,276,105	\$5,387,178	\$1,512,578	28.08%
Total:	\$36,285,414	\$31,421,306	\$9,224,642	29.36%

Source: UCSF Budget & Resource Management

FY 2007-08 Headcount as of 4/3/08 SCHOOL OF PHARMACY

	St	aff	Acad	emic	Grand Total
Department	FT	PT	FT	PT	
BIOPHARMACEUTICAL SCIENCES	25	4	43	84	156
DEAN'S OFC: SCH OF PHARMACY	33	1	2	3	39
DEPARTMT OF CLINICAL PHARMACY	90	27	20	52	189
PHARMACEUTICAL CHEMISTRY	37	2	76	52	167
Total	185	34	141	191	551

Source: UCSF Human Resources

DEPARTMENT OF BIOPHARMACEUTICAL SCIENCES

- Chair Giacomini, Kathleen M. Ph.D.
- Business Officer Nordberg, Michael
- Website http://www.ucsf.edu/dbps/

Welcome from the Chair

"What a wonderful time to be a scientist. It was not that long ago when classically trained scientists traditionally worked in parallel with little interaction -- biologist, chemist, geneticist, pharmaceutical scientist all moving ahead but on individual tracks. While this isolationism was never the norm at UCSF in particular, sea changes in science are quickly making it history elsewhere. And the Human Genome Project has been instrumental. It is becoming increasingly clear that genetic variation is involved with drug response and, along with it, the connection between the traditional disciplines of pharmaceutical sciences and human genetics is dissolving to be replaced by new collaborations of new groupings of scientists all working toward the goal of applying knowledge about genes and their proteins to ultimately ensure the right and most effective medicines are tailored to the special genetic needs of individuals with disease.

Here faculty members in the department of biopharmaceutical sciences are busy pioneering this new field of pharmacogenomics and preparing PhD students, through a new graduate program, to do the same. We are also busy uncovering new insights about how drugs act in the body, how they are absorbed, and how to best collect and organize information about genes and other biological structures and processes using computers and statistical methods."

Degree Programs

M.S. Programs

Biological and Medical Informatics (BMI)

Ph.D. Programs

Pharmaceutical Sciences and Pharmacogenomics (PSPG) Biological and Medical Informatics (BMI)

Joint Degree Programs

PharmD/PhD

Source: Biopharmaceutical Sciences website, 7/22/2008

FY 2007-08 Headcount as of 4/3/08 BIOPHARMACEUTICAL SCIENCES

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
25	4	43	84	156

Source: UCSF Human Resources

Permanently Budgeted FTEs BIOPHARMACEUTICAL SCIENCES

	FY 2003-0	94	FY 2003-04 FY 2004-05 FY 2005-06 FY 2006-07 FY 2007-08		FY 2005-0	9	FY 2006-0	_	FY 2007-	8
Permanent Budget Account Title	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	taff /	cademic	Staff	Academic	Staff	Academic	Staff
BIOPHARMACEUTICAL SCIENCE RESEARCH		0.04	0.02 0.02	02	0.02 0.02	0.02	0.02 0.02	0.02	0.01 0.02	0.02
S/P-BIOPHARMACEUTICAL SCIENCES	15.43 3.75	3.75	17.33 3.75	75	17.00 3.75	3.75	17.00 3.75	3.75	17.00 3.75	3.75
Total:	15.43 3.79	3.79	17.35 3.77	22	17.02 3.77	3.77	17.02 3.77	3.77	17.01 3.77	3.77

Source: UCSF Budget & Resource Management

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 BIOPHARMACEUTICAL SCIENCES

	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$7,165,141	\$5,525,453	\$2,583,723	46.76%
CIRM	\$176,403	\$176,403	\$94,552	53.60%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$400,817	\$294,509	\$18,408	6.25%
Private Contracts & Grants	\$2,129,094	\$1,659,819	\$699,492	42.14%
Total:	\$9,871,456	\$7,656,183	\$3,396,176	44.36%

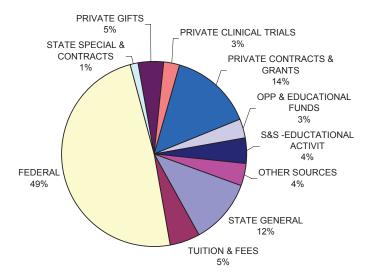
Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source BIOPHARMACEUTICAL SCIENCES

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$1,742,798	\$1,955,025	\$1,685,424	\$1,752,000	\$1,692,478	-2.9%
TUITION & FEES	\$217,808	\$341,638	\$637,288	\$591,738	\$763,675	250.6%
FEDERAL	\$4,664,372	\$4,901,837	\$5,434,491	\$6,256,245	\$7,165,141	53.6%
STATE SPECIAL & CONTRACTS	(\$19,102)	(\$12,607)	\$30,073	\$29,192	\$177,128	-1027.3%
PRIVATE GIFTS	\$302,907	\$778,584	\$553,521	\$698,422	\$663,308	119.0%
PRIVATE CLINICAL TRIALS	\$653,655	\$908,892	\$833,907	\$592,589	\$400,817	-38.7%
PRIVATE CONTRACTS & GRANTS	\$1,438,870	\$2,135,005	\$1,811,530	\$1,466,968	\$2,129,094	48.0%
ENDOWMENT FUNDS	\$12,319	\$50,258	\$112,044	\$106,881	\$39,825	223.3%
OPP & EDUCATIONAL FUNDS	\$87,841	\$153,649	\$172,847	\$266,211	\$499,610	468.8%
S&S -EDUCTATIONAL ACTIVIT	\$914,487	\$499,970	\$659,610	\$246,584	\$650,771	-28.8%
OTHER SOURCES	\$514,736	\$165,341	\$321,989	\$451,988	\$569,889	10.7%
Total:	\$10,530,691	\$11,877,592	\$12,252,723	\$12,458,818	\$14,751,737	40.1%

Source: UCSF Budget & Resource Management

Expenditures by Fund Source Biopharmaceutical Sciences FY 2007-08



Source: UCSF Budget & Resource

DEPARTMENT OF CLINICAL PHARMACY

- Chair B. Joseph Guglielmo
- Business Officer Petrie, Deborah J.
- Website http://clinicalpharmacy.ucsf.edu/

Our Mission

To advance health through excellence and innovation in education, patient care, research, and public service.

Our Vision

To be the best at bridging gaps in patient care, especially for the underserved.

Our Core Values

Caring, Integrity, Diversity, Collaboration, and Excellence.

Our Philosophy

Education

- Provide innovative, interprofessional experiences to develop students and pharmacists as integral members of the health care team
- Educate students and pharmacists to apply evidence-based approaches to practice
- Develop students and pharmacists to become leaders in all practice settings
- Provide educational programs to the public at large

Patient Care

- Provide evidence-based care that optimizes medication use across all health care settings
- Optimize health outcomes through partnerships with patients, caregivers, health care professionals, policy makers and health plans
- Ensure safe and effective therapy through secure and reliable medication prescribing, supply and delivery systems

Research

- Generate and disseminate knowledge to advance patient care, medication safety, disease prevention and treatment, health care cost-effectiveness and quality, and pharmacy education
- Apply new knowledge to develop, evaluate and disseminate innovative health care

Source: Department of Clinical Pharmacy - 9/20/2008

delivery models, pharmacy education models, and health policy

Public Service

- Participate in local, state, national and global health programs that promote and advocate health improvement, wellness, disease prevention and treatment, and access to health care
- Serve as patient advocates especially for underserved populations
- Participate as active leaders of the University and the public at large

HISTORY

The Department of Clinical Pharmacy has functioned as an independent unit since 1973 when the Department was approved by campus administration as the School of Pharmacy Division of Clinical Pharmacy. Through a cutting edge approach to practice, education, and clinical research, Clinical Pharmacy at UCSF has achieved international prestige. The faculty developed and established the first clinical pharmacy curriculum in the world. This curriculum serves as a model for many other Schools of Pharmacy. Over one-third of the paid faculty have been elected to serve on the boards of state and national professional organizations. Four have served as President of the California Society of Hospital Pharmacists and have been recognized as Pharmacist of the Year. Over 60% of the Clinical Pharmacy faculty have received formal recognition for excellence in teaching during their careers. The Clinical Pharmacy residency program is the largest accredited residency program in the nation. In 1996, the Office of the President of the University of California approved departmental status for Clinical Pharmacy. Since that time, the faculty of the Department of Clinical Pharmacy continue to lead in practice, education and clinical research.

Programs

- California Poison Control System
- Center for Consumer Self Care
- Drug Product Services Laboratory
- Drug Research Unit
- Infectious Disease Management Program
- International Affairs Program
- Medication Outcomes Center
- Program for Pharmaceutical Economics and Policy Studies (ProPEPS)
- Residency Program
- The San Francisco Cochrane Collaboration
- Center for Translation and Policy Research on Personalized Medicine

Source: Department of Clinical Pharmacy - 9/20/2008

- Women's Interagency HIV Study Satellite Pharmacy Education Programs
 - Los Angeles-Orange County Satellite Pharmacy Education Program
 - Santa Clara-South Bay Satellite Pharmacy Education Program
 - UC Davis-Sacramento Satellite Pharmacy Education Program
 - UC San Diego Satellite Pharmacy Education Program
 - UCSF Fresno Satellite Pharmacy Education Program
 - UCSF North Bay Pharmacy Education Program

Source: Department of Clinical Pharmacy - 9/20/2008

FY 2007-08 Headcount as of 4/3/08 CLINICAL PHARMACY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
06	27	20	25	189

Source: UCSF Human Resources

Permanently Budgeted FTEs CLINICAL PHARMACY

	FY 2003-04	94	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	90-
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff Academic Staff	Staff
PHARM-DIV CLINICAL PHARMACY	30.67 9.60	9.60	30.67	30.67 10.10	31.00	31.00 10.10		31.00 10.10	31.00 10.10	10.10
PHARM-DIVISION OF CLINICAL PHARM		31.88	0.37	17.02	0.37	0.37 17.02		1.27 8.81	1.27	8.81
S/P CLIN PHARM-SAN DIEGO PROG		0.50								
Total:	30.67 41.98	41.98		31.04 27.12		31.37 27.12	32.27 18.91	18.91	32.27 18.91	18.91

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 CLINICAL PHARMACY

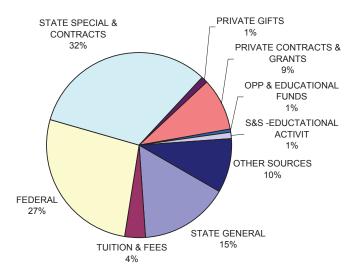
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$5,882,214	\$5,725,074	\$1,240,343	21.67%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$6,908,371	\$6,889,510	\$49,276	0.72%
Local Government	\$1,325	\$1,325	\$437	33.00%
Private Clinical Trials	\$11,232	\$11,232	\$19,854	176.76%
Private Contracts & Grants	\$1,955,770	\$1,743,788	\$298,755	17.13%
Total:	\$14,758,912	\$14,370,929	\$1,608,665	11.19%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source CLINICAL PHARMACY

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$4,140,874	\$3,911,164	\$3,313,123	\$3,381,575	\$3,359,180	-18.9%
TUITION & FEES	\$198,266	\$533,728	\$988,782	\$838,408	\$815,781	311.5%
FEDERAL	\$2,257,281	\$2,808,784	\$2,788,004	\$5,214,626	\$5,882,214	160.6%
STATE SPECIAL & CONTRACTS	\$6,844,336	\$6,994,809	\$6,996,226	\$7,058,972	\$7,067,375	3.3%
LOCAL GOVERNMENT	(\$227)	\$0	\$0	\$0	\$1,325	-685.1%
PRIVATE GIFTS	\$331,980	\$334,619	\$342,468	\$238,718	\$267,905	-19.3%
PRIVATE CLINICAL TRIALS	\$83,115	\$50,153	\$16,397	\$29,510	\$11,232	-86.5%
PRIVATE CONTRACTS & GRANTS	\$779,072	\$985,792	\$1,163,060	\$1,483,713	\$1,955,770	151.0%
ENDOWMENT FUNDS	\$0	\$0	\$0	\$0	\$9,342	0.0%
OPP & EDUCATIONAL FUNDS	\$120,720	\$79,541	\$85,933	\$123,516	\$152,062	26.0%
S&S -EDUCTATIONAL ACTIVIT	\$224,524	\$741,201	\$117,943	(\$399,274)	\$208,320	-7.2%
OTHER SOURCES	\$1,038,210	\$1,630,777	\$965,982	\$2,004,090	\$2,074,292	99.8%
RESERVES	\$0	(\$111,931)	\$111,668	\$0	\$0	0.0%
Total:	\$16,018,152	\$17,958,638	\$16,889,585	\$19,973,854	\$21,804,796	36.1%
		, in the second	, in the second second	, in the second second		

Expenditures by Fund Source Clinical Pharmacy FY 2007-08



Source: Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures CLINICAL PHARMACY (Dollars in Thousands)

			Current Fund	S		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	5,182	3,279	939	964	5,650	1,511	1,979
Research	4,225	1	122	4,102	2,685	1,539	
Total	9,407	3,280	1,061	5,066	8,335	3,051	1,979

Source: UCSF Controller's Office

DEPARTMENT OF PHARMACEUTICAL CHEMISTRY

- Chair James, Thomas L.
- Business Officer Harris, Debra E.
- Website http://www.pharmchem.ucsf.edu/

Vision for Research in Pharmaceutical Chemistry:

The opportunities in Pharmaceutical Chemistry for high impact discovery and design for human betterment have never been greater. The pioneers of this department were rooted in physical, computational, analytical, synthetic and enzyme chemistry. This faculty helped to forge modern approaches for structure-based drug and protein design, mass spectrometry, NMR spectroscopy and computer-aided visualization of macromolecules. The group has flourished from this base and currently represents world-class leaders in drug and protein design, de novo protein structure prediction, proteomics, and synthetic and chemical biology. We seek to innovate computational, chemical, and biochemical approaches to deepen our understanding of the principles of molecular recognition and cell circuit design. Our dream is for systematic and predictive algorithms to discover safe and effective pharmaceuticals, and for the construction of synthetic biosystems to understand and improve the human condition.

Mission

We echo the School's mission to create scientific visions that will drive new international science particularly in those basic and translational sciences that underpin the discovery and development of novel therapeutics. We also support the University's mission of teaching and community service.

Our research is in the discovery of molecular details in biological processes, to structure determination, to drug design.

Research Centers and Facilities

Campus Resources

The available computational resources are among the world's best in computational chemistry and biology. Hardware platforms include high performance workstations from Compaq, Hewlett Packard, IBM, Silicon Graphics, Sun Microsystems and numerous Linux and Mac stations (including clusters). Computers and workstations on campus are connected to campus-wide local

area network, which in turn is connected via high speed microwave link to the Internet. Access to remote computer facilities, such as the NFS-sponsored supercomputer centers, is also available via this Internet link. Access to extensive literature databases is available through such systems as MEDLINE and the University's MELVYL system. An on-line journal system provides desktop access to full text and graphics images for a limited, but growing, number of journals. A central aspect of the computer resources is the Computer Graphic Laboratory within the Department of Pharmaceutical Chemistry, which has been both developing state-of-the-art software for molecular modeling and design as well as providing access to high performance interactive graphics since 1969.

The Mass Spectrometry Facility (MSF)

The National Bio-Organic, Biomedical Mass Spectrometry Resource, supported by the NIH National Center for Research Resources, provides both scientific and technical expertise and state-of-the-art high-performance, tandem mass spectrometric instrumentation. The facility is a world leader in proteomic analysis although it also provides a service for small molecule analysis. Significant instrumentation in the facility include three QSTAR quadrupole orthogonal time of flight instruments, a 4700 Proteomic Analyzer MALDI tandem time of flight instrument, a LTQ-FT linear ion trap FT-ICR instrument equipped with the ability to perform electron capture dissociation and a recently acquired LTQ-Orbitrap with electron transfer dissociation capability. Major research focuses within the facility are the analysis of post-translational modifications and development of methods for quantitative comparative analysis of protein and post-translational modification levels. The facility also continues to develop one of the leading suites of tools for analysis of mass spectrometry proteomics data, ProteinProspector.

The Nuclear Magnetic Resonance Laboratory (NMR)

The Nuclear Magnetic Resonance Laboratory in Genentech Hall is equipped with state of the art high-field NMR spectrometers for chemistry and studies of macromolecular structure. For routine proton-heteronuclear and 2D NMR experiments, a 400 MHz Varian Inova spectrometer is available in room GH-S102. In room GH-S106, two Varian 600 MHz spectrometers and a Brunker 500 MHz spectrometer are available for high-resolution studies of macromolecules including solution structure determination of proteins, nucleic acids, and their complexes. The spectrometers have complete 2D and 3D NMR capabilities (including inverse detection, triple resonance, pulsed field gradients and tailored excitation) permitting use of virtually all modern pulse sequences for solution NMR experiments. In addition, room GH-S106 contains a newly installed state-of-the-art Brunker 800MHz spectrometer. The Brunker 500 MHz and 800 MHz spectrometers are equipped with Cryoprobes, and one of the Varian Inova 600 systems has a Coldprobe. Multidimensional NMR data are transferred to a dedicated data processing system

composed of a server, several Silicon Graphics workstations, and a Linux based cluster for offline data processing and analysis.

More information regarding the NMR lab, including scheduling, can be found at the following website: http://picasso.ucsf.edu. This website also enables others to access NMR software developed here such as SPARKY, CORMA, MARDIGRAS, CHIRANO, and other programs useful for structure refinement.

Resource for Biocomputing, Visualization, and Informatics

The Resource for Biocomputing, Visualization, and Informatics (RBVI) is an NIH Biomedical Technology Research Resource center. The Center is focused on the development of innovative computational and visualization-based data analysis methods and algorithms, and provides investigators with access to state-of-the-art interactive three-dimensional graphics hardware – including large screen stereoscopic projection equipment. The Center's computing environment includes a cluster of high-performance multiprocessor Linux servers used for performing theoretical studies on protein and nucleic acid structure and function, and for storing, searching, and analyzing various sequence and structure databases. Software developed by the RBVI includes UCSF Chimera, a highly extensible program now in use at more than 100,000 research laboratories world-wide for interactive visualization and analysis of molecular structures and related data, including density maps, supramolecular assemblies, sequence alignments, ligand-protein docking results, trajectories, and conformational ensembles. Training workshops are conducted regularly on the use of Chimera and other software developed at the Center.

The Sequence Analysis and Consulting Service (SACS)

The Sequence Analysis and Consulting Service is a recharge service dedicated to providing high quality access to bioinformatics computing services. SACS has consultants with expertise in sequence analysis software and databases, and offers training in the use of these resources. SACS supports the GCG Wisconsin Sequence Analysis Package, providing over 150 sequence analysis programs together with access to several integrated sequence databases. SACS also supports the homology tools BLAST and FASTA, the phylogeny suite Phylip, multiple alignment programs ClustalW, MSA, Mase and PIMA, and a variety of pattern identification, protein secondary structure, and DNA analysis tools. Comprehensive local databases, updated daily, are available for access by this suite of software tools.

Small Molecule Discovery Center (SMDC)

Overview and Mission

The Small Molecule Discovery Center (SMDC) is located at the California Institute for Quantitative Biomedical Research (QB3) on the Mission Bay Campus of the University of California, San Francisco. The SMDC offers biomedical investigators at UC campuses in San Francisco, Santa Cruz, and Berkeley access to small molecule discovery technologies including high-throughput screening, fragment-based screening, and hit-to-lead medicinal chemistry. High-throughput screening (HTS) is the predominant technology used in the pharmaceutical industry to identify small molecule hits in drug discovery programs. The SMDC screening function is enhanced by the presence of an integrated chemistry group staffed by experienced medicinal chemists from the pharmaceutical industry. The application of medicinal chemistry following screening allows correlations between chemical structure and biological activity (SAR) to be more fully understood and provides a better measure of a target's druggability than does screening alone. By collaborating with UC investigators, the SMDC aims to accelerate the path from new discoveries in biology to validated biological targets that could eventually lead to new small molecule therapeutics.

Capabilities and Workflow

The High-Throughput Screening (HTS) core of the SMDC performs biochemical and cell-based assays utilizing a screening library of more than 150,000 compounds. This compound collection contains diversity libraries (ca. 100K compounds), targeted libraries (>40K compounds), fragment libraries (ca. 12K compounds), and libraries of known drugs/actives (ca. 4k compounds). Collaboration between the SMDC and an investigator lab begins with the development of an assay suitable for a high throughput format. This work is normally performed in the investigator lab with the consultation of the HTS director of the SMDC. When the assay is judged to be robust enough for HTS (e.g., with a Z prime > 0.5) the screen is performed using SMDC instrumentation with the training and supervision of the SMDC screening group. Our HTS instrumentation includes liquid handling robots and automated bulk dispensers to plate-out compounds/ reagents and high-throughput plate readers to measure assay readout (e.g., fluorescence polarization, FRET, luminance, etc.). As part of a special arrangement with GE, the SMDC also houses the IN Cell analyzer 1000, a high-content screener used for cell-based phenotypic assays. Data analysis is carried out with a suite of programs in the commercial programming platform Pipeline Pilot. Pipeline Pilot also interfaces with relational databases allowing storage and subsequent retrieval of all assay and compound data deposited in the system. The results of a screen are posted to a website where users can view the data, including preliminary structure-activity

relationships (SAR) generated automatically by Pipeline Pilot from the screening data.

Following a screen, the SMDC will cherry-pick the hits (up to 0.3% of the total number of compounds screened) and provide these to the investigator lab. The cherry-picked "hits" can then be scrutinized in more detail for example by determining IC50 values, performing mechanism of action studies, and evaluating off-target toxicities. These studies are typically conducted in the investigator lab. In the event that additional quantities of hit compounds are required for these studies, the SMDC will assist users in finding suitable vendor(s) for re-supply. Following hit validation, the SMDC chemistry group will work with investigators to determine which hits are potential candidates for chemistry optimization. Of the approximately 8-10 high-throughput screens performed each year in the SMDC, we expect that only 1-2 (at most 3) will progress into the hit-to-lead chemistry phase.

The goal of the hit-to-lead chemistry effort is to improve potency against the target while minimizing off-target toxicities. This may be accomplished empirically by systematic modification of the chemical structure and/or by structure-based design if crystallographic information is available for the target. Alternate chemical scaffolds are examined that retain key recognition features of the hit but are more drug-like in nature (e.g., constrained systems, peptido-mimetics, etc.). Consideration of the germane patent literature is also advisable during this phase. New analogs are evaluated for target potency, cytotoxicity, and metabolic liabilities. As a project matures, select compounds may be tested for in vivo efficacy in animals, if reliable models are available. The hit-to-lead process requires close collaboration between the SMDC and user laboratories and typically require between 12 and 18 months of effort. When a promising lead series has been identified, composition-of-matter patents may be filed and partners in industry or the non-profit sector are sought out to continue lead optimization studies with the ultimate objective of identifying drug candidate(s).

Graduate Programs

Graduate research training at UCSF is organized primarily through several major research training programs: Program in Quantitative Biology (PQB), Program in Biological Sciences (PIBS), and the Biomedical Sciences Program (BMS).

The Department of Pharmaceutical Chemistry is affiliated with graduate programs in Bioengineering, Biological and Medical Informatics (BMI), Biophysics, Chemistry and Chemical Biology (CCB), Neuroscience, Pharmaceutical Science and Pharmacogeonomics (PSPG), and Tetrad.

FY 2007-08 Headcount as of 4/3/08 PHARMACEUTICAL CHEMISTRY

St	Staff	Acac	Academic	Grand
Full Time	Part Time	Full Time	Part Time	Total
37	2	76	52	167

Source: UCSF Human Resources

Permanently Budgeted FTEs PHARMACEUTICAL CHEMISTRY

	FY 2003-04	40	FY 2004-05	-05	FY 2005-06	90-	FY 2006-07	-07	FY 2007-08	80
Permanent Budget Account Title	Academic	Staff	Academic	Staff	Academic Staff Academic Staff Academic Staff Academic Staff	Staff	Academic	Staff	Academic	Staff
PHARMACEUTICAL CHEMISTRY	1.32	1.32 0.35	0.54	(0.10)		0.10		0.05		0.05
PHARM-PHARM CHEM-GRADUATE STUDENTS	9.00		9.00		00.6		9.00		9.00	
S/P BIOMOLECULAR RESOURCE CTR OPS			1.05	7.14	1.05	7.14	1.05	7.14	1.05	7.14
S/PHARMACY DEPT PHARM CHEM	20.50 3.24	3.24	21.00	8.44	21.00	8.44	21.00	8.44	20.00	8.20
S/P-PHARMACEUTICAL CHEMISTRY			2.73	2.13	2.73	2.13	1.73	0.81	3.15	1.23
Total:	30.82 3.59	3.59	34.32 17.61	17.61	33.78 17.81	17.81	32.78 16.44	16.44	33.20 16.62	16.62

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 PHARMACEUTICAL CHEMISTRY

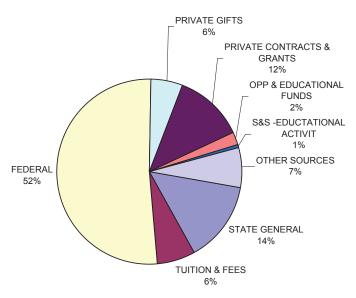
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$9,179,317	\$7,174,137	\$3,599,033	50.17%
CIRM	\$0	\$0	\$0	0.00%
State Special & Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$2,191,240	\$1,983,571	\$514,331	25.93%
Total:	\$11,370,557	\$9,157,708	\$4,113,364	44.92%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source PHYSICAL THERAPY AND REHABILITATION SCIENCE

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$505,724	\$445,070	\$357,148	\$402,550	\$355,229	-29.8%
TUITION & FEES	\$0	\$195,776	\$243,736	\$229,816	\$381,377	0.0%
FEDERAL	\$0	\$343	\$0	\$0	\$0	0.0%
PRIVATE GIFTS	\$2,810	\$16,180	\$44,260	\$113,984	\$130,373	4539.6%
PRIVATE CLINICAL TRIALS	\$0	\$0	\$0	\$0	\$2,671	0.0%
PRIVATE CONTRACTS & GRANTS	\$0	\$30,002	\$0	\$0	\$23,105	0.0%
ENDOWMENT FUNDS	\$34,344	\$25,500	\$5	\$9,578	\$48,663	41.7%
OPP & EDUCATIONAL FUNDS	\$4,938	\$0	\$881	\$1,975	\$24	-99.5%
S&S -EDUCTATIONAL ACTIVIT	\$96,089	\$324,315	\$416,458	\$646,212	\$1,179,506	1127.5%
Total:	\$643,906	\$1,037,186	\$1,062,487	\$1,404,114	\$2,120,950	229.4%

Expenditures by Fund Type Pharmaceutical Chemistry FY 2007-08



Source: UCSF Budget & Resource Management

Financial Schedule 8C - FY 2007-08 Current Funds Expenditures PHARMACEUTICAL CHEMISTRY (Dollars in Thousands)

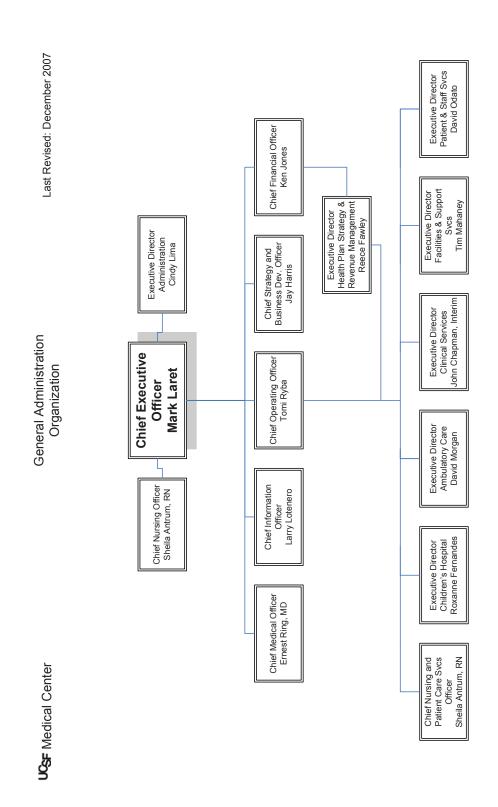
			Current Fund	ls		Distribution	
	Total	Unre	stricted	Restricted	Salaries and Wages	Other Expenditures	Less: Transfers
		General	Designated				
Instruction	3,891	2,248	1,548	95	3,037	854	-
Research	12,799	203	978	11,617	6,835	6,256	292
Total	16,690	2,451	2,526	11,713	9,872	7,110	292

Source: UCSF Controller's Office

UCSF MEDICAL CENTER

Chapter Contents

Organizational Chart	834
Introduction	835
Leadership	835
Income Statement Highlights - Trended	843



UCSF MEDICAL CENTER

Introduction

UCSF Medical Center and UCSF Children's Hospital are recognized as world leaders in health care, known for innovative medicine, advanced technology and compassionate care. For more than a century we have offered the highest quality medical treatment. Today our expertise covers virtually all conditions including cancer, heart disease, infertility, neurological disorders, organ transplantation and orthopedics as well as special services for women and children.

The UCSF Medical Center serves as the principal clinical teaching site for the UCSF School of Medicine, affiliated with the University of California since 1873. The mission of the Medical Center is Caring, Healing, Teaching and Discovering.

The Medical Center is licensed to provide inpatient care at Moffitt-Long hospital on the 107-acre Parnassus campus and at UCSF Mount Zion; outpatient hospital care at the two hospital sites; and physician clinical care at those hospitals and other locations, primarily in San Francisco. As of June 2008, the Medical Center operated 620 beds, including 68 ICU beds. 16 ICU beds are anticipated to be added in October, 2008.

Leadership

Mark R. Laret Chief Executive Officer

Mark R. Laret is the chief executive officer of UCSF Medical Center and UCSF Children's Hospital, together an internationally distinguished health care organization consistently ranked among America's 10 best hospitals by U.S. News & World Report. In his 9 years as CEO Mr. Laret has led a financial and operational turnaround at the Medical Center. His focus on patient safety, quality of care and patient satisfaction has helped UCSF achieve national leadership status in each of these areas.

A 28-year veteran of the health care field, Laret held management positions at UCLA Medical Center from 1980 to 1995. While there he engineered UCLA's acquisition of Santa Monica Community Hospital and served as CEO of the 900-physician UCLA Medical Group. From 1995 to 2000 he served as CEO of UC Irvine Medical Center and led a successful financial and operational overhaul.

Laret is active nationally through his leadership with the Association of American Medical Col-

leges' Council of Teaching Hospitals, the Accreditation Council for Graduate Medical Education, and the University Health System Consortium. He also serves on the executive committee of the Hospital Council of Northern and Central California and co-chairs the San Francisco African American Health Disparity Project. He has testified before state legislative committees on healthcare challenges in California. He also serves on the board of Mercy Ships, a charity which delivers medical care to underdeveloped countries on ships converted to floating hospitals.

A California native, Laret earned a bachelor's degree at UCLA in 1976 as a Regents scholar and a master's degree at the University of Southern California in 1979 – both in political science.

As of June 2008, the UCSF Medical Center senior leadership team includes:

Sheila Antrum, RN Larry Lotenero

Chief Nursing Officer Chief Information Officer

Jay Harris

Chief Strategy & Ernie Ring, MD
Business Development Officer Chief Medical Officer

Ken Jones Tomi Ryba

Chief Financial Officer Chief Operating Officer

Mission, Vision, Values

The mission, vision and values for UCSF Medical Center are:

Mission: Caring, Healing, Teaching and Discovering

Vision: Be the best provider of health care services, the best place to work and the best environment for teaching and research

Values: Embodied in the acronym PRIDE:

- P Professionalism, how we conduct ourselves and our business
- R Respect for our patients, families, ourselves and each other
- I Integrity, always doing the honest, right thing
- D Diversity, understanding and embracing the diverse beliefs, needs and expectations of our patients, community and employees
- E Excellence, what we strive for in everything we do

Distinctions

As an academic medical center, we are unlike community hospitals in that we offer pioneering treatments not widely available elsewhere. For example, we have the only nationally designated Comprehensive Cancer Center in Northern California. The center is dedicated to finding new and better treatments for cancer patients. We also have Northern California's only nationally designated Center of Excellence in Women's Health, which offers specialized care and health education for women.

Another area of distinction is our health services for children and pregnant women. Our Children's Hospital is a "hospital within a hospital" with more than 150 specialists in more than 40 areas of medicine. We have programs designed specifically for young patients, including a 50-bed neonatal intensive care nursery, recreational therapy for recovering kids and 60 outreach clinics throughout Northern California. Our physicians were the first in the world to successfully perform surgery on a baby still in the womb. They also developed life-saving treatments for premature infants whose lungs aren't fully developed.

The Medical Center continues to maintain an outstanding national reputation. The 2008 US News and World Report survey ranked UCSF Medical Center as the seventh best hospital in the nation. The survey also placed UCSF Children's Hospital as one of the top twenty in the nation. In the area of neurology and neurosurgery, UCSF Medical center has one of the largest brain tumor treatment programs in the nation as well as the only comprehensive memory disorders center and the only comprehensive epilepsy center in Northern California. We also have one of the nation's largest centers for kidney and liver transplants. Our AIDS program is the most comprehensive in the nation and our surgical eye care program is the largest in Northern California. In the area of orthopedics, we are internationally recognized for treating the spine, including deformities, degenerative disc disease, tumors and fractures.

In addition to world-class medical knowledge, we believe that the compassion of our doctors, nurses and other staff are the key to our success. We receive countless letters of gratitude from patients and their families, a true measure of the valuable and caring service we provide.

Patient Population

The Medical Center's primary service area is the City and County of San Francisco. Its secondary service area includes the eight Bay Area counties surrounding San Francisco; Alameda, Contra Costa, Marin, Monterey, San Mateo, Santa Clara, Solano, and Sonoma. The Medical Center also cares for patients from a tertiary service area including counties from Madera and Mariposa to the southeast to Yolo and Sacramento to the northeast, and San Joaquin and Stanislaus to the east. More than 85 percent of inpatient cases have historically originated from the 20 counties in these service areas.

The Medical Center provides care across the acuity spectrum, including basic care, moderate care, and highly complex care. The patient origin of the basic care population is heavily concentrated in the primary service area. Patients requiring moderate acuity care are largely concentrated in the secondary service area. High complexity care is provided to patients originating from a more widely dispersed geographic area.

Continuous Improvement

UCSF Medical Center is committed to providing the safest and highest quality care to patients. To continually refine the care we provide, we monitor and measure the treatments our patients receive and evaluate our performance against our own rigorous standards as well as industry benchmarks.

In addition to our own systems to track our performance, our progress in maintaining the highest

standards of care is reflected in our accreditations, rankings and activities:

- Full accreditation from the Joint Commission, a nonprofit agency that evaluates and accredits health care facilities nationwide, in January 2007.
- Leading the nation for the speed that heart attack patients are treated in the Emergency Department with balloon angioplasty to open narrowed or blocked blood vessels of the heart. Patients are treated in less than an hour, considerably faster than the 90-minute benchmark of the National Cardiovascular Data Registry (NCDR)
- Joining the ongoing Institute for Healthcare Improvement (IHI) campaign, called Saving 5 Million Lives to make hospitals and clinics safer environments for patients.

The Medical Center has further enhanced its patient satisfaction/customer service program by establishing Medical Center-wide and department-specific training, including fundamentals of communication. Concierge and greeter programs have been implemented to assist patients and visitors. The Medical Center surveys patients, reviews survey results and acts on such results. In 2008, the Medical Center launched a new program, Voice of the Patient, to monitor and ensure timely resolution of patient grievances and complaints.

Operating and financial performance improvements have included completion of several revenue cycle initiatives and continued supply chain savings programs. Improvements in perioperative services have included inventory control over implants, emphasis on first case start times, and improved operating room turn-around times. Patient flow initiatives have focused on timely patient placements from perioperative services and the emergency department and redesign of the care coordination model. The Medical Center continues to invest significant funds in the development of a Clinical Information System.

The Workforce Development plan continues to address results of an annual employee satisfaction survey, reduce workers' compensation loss days, expand employee reward and recognition programs, and continue management training and leadership programs. During the fiscal year 2007 the Medical Center launched a workforce planning task force to address short- and long-term staffing needs. The Medical Center is committed to creating a diverse work force, with an Annual Affirmative Action Plan that sets out by Department objectives and a Diversity Report that assesses progress.

Expanding our Reach

UCSF Medical Center's goal to provide the highest-quality care inspires us to reach out to our local community. Passionate and dedicated physicians, nurses and employees regularly share their

expertise outside the hospital, educating and giving medical care to people throughout Northern California. Their efforts include high-tech procedures, primary care and educational outreach at health fairs, seminars and classroom lectures.

Approximately 80 percent of the Medical Center's existing inpatient cases represent adults, while 20 percent are pediatric. From 2002 to 2006 the Medical Center's inpatient case volumes grew faster than healthcare market growth overall. By product line, the Medical Center experienced growth in almost all areas - even those experiencing declining market trends. Near term tactics to accommodate growing demand include increasing the number of beds to the fullest extent possible within the confines of Moffitt/Long hospital, assessing alternative uses of Mount Zion facilities, facilitating ambulatory growth in support of inpatient expansion, and expanding surgical services in neurosciences, cardiovascular and transplant areas.

For the longer term, to meet growing patient demand, UCSF Medical Center has proposed an ambitious plan to build a new hospital complex at San Francisco's Mission Bay. The \$1.7 billion new hospital complex will provide an opportunity to grow programs within three new integrated hospitals — one for children, another for women and a third for cancer patients — while freeing up space for expansion at other UCSF locations.

A Year of Accomplishments

Over the past year, the Medical Center illustrated its ongoing commitment to the full range of its mission—Caring, Healing, Teaching and Discovering—through the following sample of events:

ValleyCare and UCSF Join Forces in Tri-Valley Region

In January 2008, UCSF Children's Hospital and ValleyCare Health System began a unique collaboration – a long-term shared vision to broaden the availability of specialty services for women and children in the Tri-Valley region. Medical services provided through this collaboration are building on the combined strengths of the tertiary clinical expertise of UCSF Children's Hospital and ValleyCare's community resources to provide excellent specialty care close to home.

Superior Outcomes in Heart, Liver, Lung Transplants

One-year survival rates for patients receiving heart, liver and lung transplants at UCSF Medical Center were higher than national averages at "statistically significant" levels, according to new data compiled by the Scientific Registry of Transplant Recipients. UCSF is the only medical center in U.S. News & World Report's "honor roll" that exceeds the national averages or the "expected" survival rates at these levels in all three transplant programs.

On the Leading Edge of Molecular Biologic Testing

In 2008, UCSF Clinical Laboratories expanded its testing capabilities involving DNA- and RNA-based tests with a new state-of-the-art molecular pathology lab. Molecular biologic testing can play a key role in cancer diagnosis and prognosis, infectious processes diagnosis, patient evaluation for inherited disorders and evaluation of drug metabolism markers.

Work Begins on New Orthopedics Institute

UCSF Medical Center and the Orthopedic Surgery department began work to create a new Orthopedics Institute, which will provide comprehensive outpatient services and surgery for conditions affecting the foot and ankle, hand and spine as well as all conditions treated by sports medicine. The 42,000-square-foot center, scheduled to open in 2009, will be located at 1500 Owens St., near the Mission Bay campus.

Highest Rating for National LGBT Healthcare Equality

UCSF Medical Center received the highest possible rating on the groundbreaking lesbian, gay, bisexual and transgender (LGBT) Healthcare Equality Index. The Index evaluates the nation's hospitals on their treatment of LGBT patients and their families.

Exceptional Neurological Care for Newborns

With the April 2008 opening of a new Neurointensive Care Nursery, neonatologists, neurologists and radiologists at UCSF Children's Hospital are leading a program to improve neurodevelopmental outcomes in very premature infants and in full-term babies who are at high risk of neurological injury or who show clinical evidence of encephalopathy, seizures or stroke.

Cancer Center Renamed

Last November, UCSF's cancer center was renamed the UCSF Helen Diller Family Comprehensive Cancer Center. Helen Diller and her family are longtime residents of the San Francisco Bay Area and are dedicated to giving back to the community, especially through the advancement of education, science and the arts. "The new name is a tribute to the family's commitment to improving lives around the world and their trust in UCSF's ability to rapidly translate cancer discoveries into compassionate care," said Chancellor J. Michael Bishop, MD.

Financial Information

A five year summary of the Medical Center's financial performance is presented on the following page. For 2008, the UCSF Medical Center reported income before other changes in net assets of \$41.6 million.

UCSF Medical Center Income Statement Highlights - Trended (Dollars in Thousands)

INCOME STATEMENT

	2004	2005	2006	2007	2008	Compound Annual Growth Rate (CAGR)
Operating Revenue						
Net patient service revenue	\$981,470	\$1,081,628	\$1,244,462	\$1,363,149	\$1,457,023	10.4%
Orner operating revenue Total operating revenue	\$1,007,530	\$24,059	\$24,588 \$1,269,050	\$43,207	\$42,815	-0.2% 10.1%
Operating Expenses						
Salaries and employee benefits	\$433,865	\$475.620	\$546.978	\$623,352	\$715,258	13.3%
Supplies and purchased services	\$398,851	\$436,730	\$483,631	\$518,535	\$576,522	%9.6
Depreciation and amortization	\$49,336	\$51,434	\$52,171	\$55,968	\$60,711	5.3%
Other	\$64,017	\$66,683	\$72,528	\$75,989	\$85,769	7.6%
Total operating expenses	\$946,069	\$1,030,467	\$1,155,308	\$1,273,844	\$1,438,260	11.0%
Income from operations	\$61,461	\$75,220	\$113,742	\$112,512	\$44,578	-7.7%
Non-operating expenses, net	(\$5,984)	(\$2,702)	(\$18,099)	(\$1,670)	(\$3,014)	-15.8%
Net Income	\$55,477	\$72,518	\$95,643	\$110,842	\$41,564	-7.0%

Source: UCSF Medical Center Report on Audits of Financial Statements for the years ended June 30, 2004 - 2008

CALIFORNIA INSTITUTE FOR QUANTITATIVE BIOSCIENCES (QB3)

- Director Kelly, Regis, PhD
- Finance Manager Pasquini, Millo Mau
- Website http://www.qb3.org/

QB3 Mission

During the last half-century, molecular genetics revolutionized biomedical research and gave rise to the biotechnology industry. During the next half-century, the application of the quantitative sciences - mathematics, physics, chemistry and engineering - to Biosciences brings about a second revolution that promises to improve human health and create dynamic new technologies.

To catalyze these changes, the California Institute for Quantitative Biosciences (QB3), a cooperative effort among three campuses of the University of California and private industry, harnesses the quantitative sciences to integrate our understanding of biological systems at all levels of complexity - from atoms and protein molecules to cells, tissues, organs and the entire organism. This long-sought integration allows scientists to attack problems that have been simply unapproachable before, setting the stage for fundamental new discoveries, new products and new technologies for the benefit of human health.

The Institute builds on strengths in the engineering and physical sciences at UC Berkeley, engineering and mathematical sciences at UC Santa Cruz, and the medical sciences at UC San Francisco, as well as strong biology programs at the three campuses.

In addition to the creation of fundamental new knowledge and potent new technologies, a major goal of the Institute is to train a new generation of students able to fully integrate the quantitative sciences with biomedical research

The Institute involves more than 180 scientists housed in a new building at Mission Bay in San Francisco, in a new building at UC Berkeley, and in two new facilities at UC Santa Cruz.

Partnerships

The California Institute for Quantitative Biosciences (QB3) is a cooperative effort between the state of California, the University of California campuses at Berkeley, San Francisco, and Santa Cruz, and industry and venture capital partners.

QB3 fosters industry and venture capital partnerships by identifying potential opportunities for

Source: QB3 website, 7/28/2008

research collaborations and support, and by assisting faculty with intellectual property and technology transfer issues. QB3's Industrial Advisory Board, which includes industry and venture capital leaders, provides private sector perspective on QB3's role in the California economy and identifies emerging opportunities for new QB3 activities.

Research

Armed with the quantitative tools integral to physics, chemistry, engineering, and mathematics, QB3's more than 180 researchers explore how biological systems work, from atoms and molecules to cells, organs, and entire organisms. Using advanced imaging, modeling, and computational tools, these scientists decipher the complex systems involved in living systems, and discover ground-breaking applications for that basic knowledge.

QB3 researchers enjoy access to world-class instrumentation, technologies, and materials located at UC Berkeley, UC San Francisco, UC Santa Cruz, and nearby Lawrence Berkeley National Laboratory.

Access to these state-of-the-art resources enables scientists and engineers to develop devices, drugs, and therapies that save human lives, as well as technologies to prevent or mitigate environmental damage and improve energy production and use. Research areas include bioengineering and biotechnology, bioinformatics and computational biology, structural and chemical biology, experimental genomics, proteomics, and biochemistry.

Affiliated Research Programs

- Berkeley Center for Synthetic Biology
- Energy Biosciences Institute (EBI)
- HARC Research Center
- Membrane Protein Expression Center
- Small Molecule Discovery Center
- Synthetic Biology Engineering Research Center (SynBERC)
- UC San Francisco/UC Berkeley Center for Engineering Cellular Control Systems
- UCSF Nikon Imaging Center

Source: QB3 website, 7/28/2008

FY 2007-08 Headcount as of 4/3/08 CALIFORNIA INSTITUTE FOR QUANTITATIVE BIOSCIENCES (QB3)

Staff		Acad	Grand	٦	
Full Time	Part Time	Full Time	Part Time	Total	
					٦
5				ļ	5

Source: UCSF Human Resources

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 CALIFORNIA INSTITUTE FOR QUANTITATIVE BIOSCIENCES (QB3)

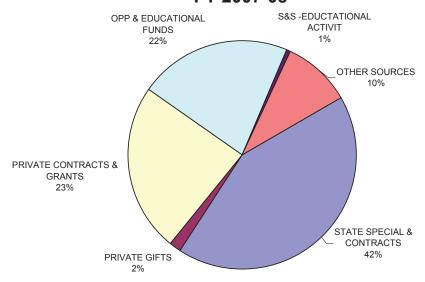
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$0	\$0	\$0	0.00%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$0	\$0	\$0	0.00%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$371,808	\$336,433	\$73,192	21.76%
Total:	\$371,808	\$336,433	\$73,192	21.76%

Total Expenditures by Fund Source CALIFORNIA INSTITUTE FOR QUANTITATIVE BIOSCIENCES (QB3)

FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
\$12,512	\$255	\$37	\$2,438	\$0	-100.0%
\$616,712	\$427,598	\$464,622	\$708,887	\$661,847	7.3%
\$0	\$0	\$110,030	\$0	\$24,564	0.0%
\$0	\$0	\$0	\$35,513	\$371,808	0.0%
\$0	\$0	\$25,000	\$5,000	\$334,496	0.0%
\$0	\$0	\$0	(\$14,394)	\$8,915	0.0%
\$103,236	\$63,757	\$385,805	\$201,705	\$151,416	46.7%
\$732,461	\$491,610	\$985,494	\$939,148	\$1,553,045	112.0%
	Year 1 \$12,512 \$616,712 \$0 \$0 \$0 \$0 \$103,236	Year 1 Year 2 \$12,512 \$255 \$616,712 \$427,598 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$103,236 \$63,757	Year 1 Year 2 Year 3 \$12,512 \$255 \$37 \$616,712 \$427,598 \$464,622 \$0 \$0 \$110,030 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$25,000 \$0 \$0 \$0 \$103,236 \$63,757 \$385,805	Year 1 Year 2 Year 3 Year 4 \$12,512 \$255 \$37 \$2,438 \$616,712 \$427,598 \$464,622 \$708,887 \$0 \$0 \$110,030 \$0 \$0 \$0 \$35,513 \$0 \$0 \$25,000 \$5,000 \$0 \$0 \$0 (\$14,394) \$103,236 \$63,757 \$385,805 \$201,705	Year 1 Year 2 Year 3 Year 4 Year 5 \$12,512 \$255 \$37 \$2,438 \$0 \$616,712 \$427,598 \$464,622 \$708,887 \$661,847 \$0 \$0 \$110,030 \$0 \$24,564 \$0 \$0 \$35,513 \$371,808 \$0 \$0 \$25,000 \$5,000 \$334,496 \$0 \$0 \$0 \$8,915 \$103,236 \$63,757 \$385,805 \$201,705 \$151,416

Source: UCSF Budget & Resource Management

Expenditures by Fund Source California Institute for Quantitative Biosciences (QB3) FY 2007-08



GLOBAL HEALTH SCIENCES

- Director Debas, Haile T., M.D.
- Website http://globalhealthsciences.ucsf.edu/

UCSF Global Health Sciences (GHS) is dedicated to improving health and reducing the burden of disease in the world's most vulnerable populations. It integrates UCSF expertise in all of the health, social, and biological sciences, and focuses that expertise on pressing issues in global health. GHS works with partners in countries throughout the world to achieve these aims.

Mission

UCSF Global Health Sciences (GHS) is dedicated to improving health and reducing the burden of disease in the world's most vulnerable populations. It integrates UCSF expertise in all of the health, social, and biological sciences, and focuses that expertise on pressing issues in global health. GHS works with partners in countries throughout the world to achieve these aims.

History

UCSF Global Health Sciences was established in 2003 to create a vision and provide institutional leadership for global health at UCSF. Under the direction of Haile T. Debas, MD, and reporting directly to Chancellor J. Michael Bishop, its creation underscores UCSF's commitment to global health and to the care of vulnerable populations at home and throughout the world.

International health programs and projects have long been part of the rich training and research portfolio of UCSF faculty. By shifting our terminology and focus at UCSF to Global Health Sciences, we underscore our attention to the global impact of diseases of poverty, chronic illness, and the worldwide threats of new infectious diseases. UCSF currently has many active projects in scores of countries throughout the world representing all four of its professional schools, the basic science departments, and specialized interdisciplinary units such as the Institute for Global Health and AIDS Research Institute.

Many new relationships for training and research continue to be forged, substantially driven by UCSF students who are keenly interested to share their knowledge with the wider world and to learn from other societies and cultures.

UCSF Global Health Sciences is charged to develop training and research programs and to provide institutional service.

Source: Global Health Sciences website, 7/28/2008

Training

Global Health Sciences has developed and continues to develop a range of programs to prepare the next generation of researchers and clinicians for careers in global health. The Education and Training Office oversees the creation and implementation of the education and training programs. These programs build upon the strength of health sciences research and training at UCSF, spanning professional health sciences education, clinical training, and graduate research. They bring students and faculty from partner institutions in developing countries together with UCSF students in all four professional schools and the graduate division. Though program details vary, the overall scope of GHS Education and Training reflects the vibrant community of multinational and interdisciplinary scholars working to improve health and reduce disease. For information on any program, contact the GHS Education and Training Office.

Areas of Concentration

Global Health Sciences has responded to high levels of interest in global health among students across UCSF by crafting areas of study focusing on global health within existing programs. Termed an area of concentration (AoC), these studies enable students to broaden their knowledge of global health topics and skills while deepening their experience in international research or practice. There are two Global Health AoCs at UCSF: one for students in the Graduate Division and one for students in the Medical School. For information on the Medical Student AoC, see the Office of International Programs, directed by Dr. Tom Novotny. Opportunities for other health professional students are currently under discussion. UCSF students with strong interest in global health are encouraged to monitor the status of the MS in Global Health Sciences being developed.

Research

UCSF Global Health Sciences will identify and implement a research agenda to foster new areas of research with global health relevance.

Global Health Innovations

Global Health Sciences (GHS) is dedicated to improving health and reducing the burden of disease in the world's most vulnerable populations. Directed by Dr. Haile T. Debas, GHS integrates research, clinical, and training expertise in all of the health, social, and biological sciences at the University of California, San Francisco.

Source: Global Health Sciences website, 7/28/2008

The GHS Pilot Research Award Program was launched in October 2005 when investigators from both UC San Francisco and UC Berkeley came together to present their international research. The common themes that emerged during this fall research day symposium are provided for reference. This seminal event resulted in a generous gift to support innovative research in global health. The UCSF AIDS Research Institute and the Maurice Galante Distinguished Professorship have since matched this donation.

From December 7, 2005 to January 17, 2006, we invited letters of intent for our first Innovations in Global Health Pilot Research Awards from investigators soliciting seed funding to conduct innovative pilot research in global health. These awards are for interdisciplinary, integrative global health research, which addresses significant knowledge gaps, and that encourages collaboration among researchers from different disciplines across the UC Bay Area network. It was expected that these Award funds would be used to initiate research that would lead to larger NIH, or similar, future funding. At least one award will be made to a proposal addressing research related to HIV/AIDS, and one for a proposal related to surgery.

Source: Global Health Sciences website, 7/28/2008

Sponsored Project Expenditures & Indirect Cost Recovery FY 2007-08 GLOBAL HEALTH SCIENCES

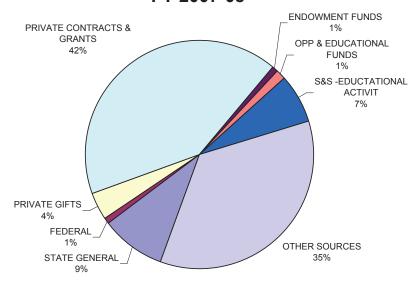
	Total Direct Cost (TDC)	Modified Total Direct Cost (MTDC)	Overhead Recovery	OH % MTDC
Federal	\$4,034,175	\$3,482,457	\$820,510	23.56%
CIRM	\$0	\$0	\$0	0.00%
Other State Contracts	\$790,219	\$666,888	\$89,807	13.47%
Local Government	\$0	\$0	\$0	0.00%
Private Clinical Trials	\$0	\$0	\$0	0.00%
Private Contracts & Grants	\$407,400	\$371,448	\$50,125	13.49%
Total:	\$5,231,794	\$4,520,793	\$960,442	21.24%

Source: UCSF Budget & Resource Management

Total Expenditures by Fund Source GLOBAL HEALTH SCIENCES

Fund Source	FY 2003-04 Year 1	FY 2004-05 Year 2	FY 2005-06 Year 3	FY 2006-07 Year 4	FY 2007-08 Year 5	% Change Year 1 to Year 5
STATE GENERAL	\$0	\$0	\$0	\$18,126	\$290,475	0.0%
TUITION & FEES	\$0	\$0	\$0	\$18,162	(\$1,768)	0.0%
FEDERAL	\$0	\$0	\$0	\$69,693	\$19,044	0.0%
STATE SPECIAL & CONTRACTS	\$0	\$0	\$0	\$0	\$0	0.0%
LOCAL GOVERNMENT	\$0	\$0	\$0	\$0	\$0	0.0%
PRIVATE GIFTS	\$0	\$0	\$0	\$76,394	\$122,359	0.0%
PRIVATE CONTRACTS & GRANTS	\$0	\$0	\$0	\$197,154	\$1,308,133	0.0%
ENDOWMENT FUNDS	\$0	\$0	\$0	\$7,803	\$24,757	0.0%
OPP & EDUCATIONAL FUNDS	\$0	\$0	\$0	\$7,333	\$42,190	0.0%
S&S -EDUCTATIONAL ACTIVIT	\$0	\$0	\$0	\$209,242	\$220,152	0.0%
OTHER SOURCES	\$0	\$0	\$0	\$1,431,605	\$1,100,793	0.0%
RESERVES	\$0	\$0	\$0	\$0	\$0	0.0%
Total:	\$0	\$0	\$0	\$2,035,512	\$3,126,134	0.0%

Expenditures by Fund Source Global Health Sciences FY 2007-08



AFFILIATED INSTITUTIONS

Chapter Contents

San Francisco General Hospital (SFGH)	858
San Francisco Veteran Affairs Medical Center (SFVAMC)	859
Ernest Gallo Clinic & Research Center	861
The J. David Gladstone Institutes	862
Howard Hughes Medical Institute (HHMI)	864

SAN FRANCISCO GENERAL HOSPITAL (SFGH)

Since 1864, the UCSF School of Medicine and San Francisco General Hospital (SFGH) have worked in close collaboration to provide health care services for the people of San Francisco. UCSF physicians and residents provide patient care at the SFGH Medical Center, which is part of the San Francisco Department of Public Health. Some of UCSF's most ground-breaking research also takes place at SFGH. The UCSF School of Medicine is proud to be a partner with the City to ensure and advance the health of our local community.

The SFGH Associate Dean's Office provides administrative oversight for UCSF activities on the SFGH campus and represents faculty, staff, students, and the University in matters involving administration and operation of the hospital and clinics. In part, the Dean's Office:

- 1. provides faculty and other personnel to the hospital;
- 2. facilitates UCSF medical research that takes place at the hospital;
- 3. provides central administration for a variety of functions, including personnel, finance, information technology, and credential compliance;
- 4. represents UCSF on the SFGH Executive Team.

SAN FRANCISCO VETERAN AFFAIRS MEDICAL CENTER (SFVAMC)

The UCSF School of Medicine has been affiliated with SFVAMC for over 30 years. This affiliation is integral to the success of SFVAMC. All physicians are jointly recruited by UCSF School of Medicine and SFVAMC. SFVAMC has 128 residency positions covering all specialties except obstetrics, pediatrics, and family practice. SFVAMC is a major UCSF teaching hospital; providing about one third of all medical student clinical training.

In 1988, the Northern California Institute for Research and Education (NCIRE)—a self-funded, private nonprofit research institute, was established to administer research at the SFVAMC. NCIRE is the largest of approximately 90 nonprofit research corporations associated with the Department of Veterans Affairs, and ranks 16th among independent research institutes in receiving support form the National Institutes of Health. NCIRE has a cooperative agreement worth over \$10 million with the U.S. Department of Defense, and has been designated as a DOD Center of Excellence in Neuroscience and Neuroimaging. In fiscal year 2005, NCIRE's budget for scientific medical research at SFVAMC was over \$40 million.

NCIRE's Mission: To improve the health and well-being of veterans and the general public by supporting a world-class biomedical research program conducted by the UCSF faculty at the San Francisco VA Medical Center.

What We Are

NCIRE--the Northern California Institute for Research and Education--is a self-funded, private nonprofit research institute, established in 1988 to administer research at the San Francisco VA Medical Center (SFVAMC). NCIRE is affiliated with the University of California San Francisco School of Medicine.

Who We Are

Approximately 90 MD and PhD principal investigators work at NCIRE to improve health and health care for our veterans--and our nation. They include biologists, biochemists, biostatisticians, developmental epidemiologists, immunologists, molecular biologists, and neuroscientists. Most are directly involved with patient care as well.

What We Do

NCIRE researchers work on the frontiers of many fields, including, aging, Alzheimer's disease, AIDS and other infectious diseases, cancer, heart disease, post-traumatic stress disorder, and other areas vital to the health of our veterans and our nation. We strive to encourage collaboration across disciplines in the quest for new insights and innovative solutions.

Recent NCIRE research initiatives have included investigating strategies for reducing brain injury after stroke; exploring the advantages of telephone psychotherapy; refining techniques for virtual colonoscopy; reducing the risks of cardiac surgery; discovering the genetic mechanism of acute leukemias; and improving hospital care.

How We Do It

NCIRE is the largest of approximately 90 nonprofit research corporations associated with the Department of Veterans Affairs, and ranks 16th among independent research institutes in receiving support from the National Institutes of Health. NCIRE has a cooperative research agreement worth over \$10 million with the U.S. Department of Defense, and has been designated as a DOD Center of Excellence in Neuroscience and Neuroimaging. In fiscal year 2005, NCIRE's budget for scientific and medical research at SFVAMC was over \$40,000,000.

ERNEST GALLO CLINIC & RESEARCH CENTER

- Director De Luca, John, PhD
- Website http://www.galloresearch.org/site/gallo/

The Ernest Gallo Clinic & Research Center (EGCRC) at the University of California, San Francisco (UCSF) was established in 1980 to study basic neuroscience and the effects of alcohol and drugs of abuse on the brain. It is the only center studying alcoholism in the United States that is based in a department of neurology. In the 20 years since its inception, the EGCRC has grown to a staff of over 150 and occupies nearly 77,000 square feet of newly constructed space in Emeryville, CA. The EGCRC has major neuroscience laboratories in cell biology, molecular biology, biochemistry, pharmacology, neurophysiology, behavioral pharmacology and physiology, and invertebrate, mouse and human genetics.

The Gallo Center hosts weekly teaching conferences, seminars, and research discussion groups. It is an excellent training resource for alcohol and addiction -related research for medical students, postdoctoral fellows, and visiting scientists. All Gallo Center faculty hold appointments in departments and interdisciplinary graduate programs at UCSF and all receive grant support from the National Institutes of Health.

The goals of the EGCRC are:

- To understand the cellular, molecular, and behavioral basis of alcoholism, alcohol abuse, and drug abuse.
- To develop cellular, molecular, and behavioral technologies to identify alcoholics and individuals at risk for developing alcoholism or drug abuse because of genetic vulnerability.
- To use advances in cellular, molecular, and behavioral neuroscience and genetics to develop new therapies for the prevention and management of alcoholism, drug abuse and related neurologic disorders.

THE J. DAVID GLADSTONE INSTITUTES

- President Mahley, Robert W., M.D., Ph.D.
- Website http://www.gladstone.ucsf.edu/gladstone/site/gweb1/

Key administrators

- Robert W. Mahley, MD, PhD, President, The J. David Gladstone Institutes; Senior Investigator, Gladstone Institute of Cardiovascular Disease; Senior Investigator, Gladstone Institute of Neurological Disease; Professor of pathology and medicine, UCSF
- Deepak Srivastava, MD, Director, Gladstone Institute of Cardiovascular Disease;
 Wilma and Adeline Pirag Distinguished Professor in Pediatric Developmental Cardiology;
 Professor of pediatrics, UCSF
- Warner C. Greene, MD, PhD, Director, Gladstone Institute of Virology and Immunology; Professor of medicine, microbiology and immunology, UCSF
- Lennart Mucke, MD, Director, Gladstone Institute of Neurological Disease; Joseph B. Martin Distinguished Professor in Neuroscience, UCSF
- Karl Weisgraber, PhD, Deputy Director and Senior Investigator, Gladstone Institute of Cardiovascular Disease; Senior Investigator, Gladstone Institute of Neurological Disease; Adjunct Professor of pathology, UCSF
- Eric Verdin, MD, Associate Director and Senior Investigator, Gladstone Institute of Virology and Immunology; Professor of medicine, UCSF
- Dan Oshiro, MS, Vice President for Administrative Affairs

About Us

 The J. David Gladstone Institutes is an independent, not-for-profit biomedical research institution affiliated with the University of California, San Francisco (UCSF), devoted to research into cardiovascular disease, HIV/AIDS, and Alzheimer's disease and other neurological disorders

Mission and Focus

- Our mission: to contribute to the health and welfare of humankind through research into the causes and prevention of cardiovascular disease, HIV and AIDS, and Alzheimer's disease and other neurodegenerative disorders
- Our focus: to conduct basic research for a better understanding of the fundamental biological processes underlying these maladies

• Our vision: to reduce the number of people afflicted with these debilitating illnesses, resulting in a substantial reduction in the social, emotional and financial costs of these disorders

Scientific Objectives and Accomplishments

• Research is organized into three key areas:

The Gladstone Institute of Cardiovascular Disease is dedicated to reducing the death toll caused by cardiovascular disease. Institute researchers focus on the role of embryonic processes that might be leveraged for cardiac stem cell biology, as well as congenital and acquired heart diseases; genetic modification to gain control of key molecules involved in stem cell development; genetics of heart disease in humans; the role of lipids and lipoproteins in heart disease, including macrophage biology and obesity research; the potential role of the enzyme DGAT1 in resisting diet-induced obesity; and inflammatory processes in atherosclerosis.

The Gladstone Institute of Virology and Immunology is dedicated to conquering major problems involving deadly viruses and the human immune system, with an emphasis on HIV and AIDS. Investigators conduct a broad range of investigations, including fundamental studies of how HIV grows, evolves, and induces disease; the interplay of HIV with various components of the immune system, including cytotoxic T lymphocytes, NKT cells and T-regulatory lymphocytes; the evaluation of new anti-viral drugs; and the use of cytokines and hormones to help rebuild the immune system

The <u>Gladstone Institute of Neurological Disease</u> is dedicated to the study of the healthy and diseased nervous system. Its researchers are investigating such topics as the mechanisms by which abnormally folded proteins cause neurodegenerative disorders, including Alzheimer's, Parkinson's, and Huntington's disease; the development and preclinical evaluation of novel treatments for these conditions; the functions and pathogenic roles of amyloid proteins and apolipoprotein E; brain inflammation; and mechanisms of neural repair

Financial

Annual budget of \$52 million (2006)

Number of employees, January, 2006: 358

Projected 2006 Sources of funding: NIH 59% \$31 million

Gladstone Trust and fundraising 32% \$16 million Other* 9% \$5 million

^{*}Other sources include the American Heart Association, Alzheimer's Association, and various organizations supporting AIDS research.

HOWARD HUGHES MEDICAL INSTITUTE (HHMI)

• President - Cech, Thomas R., PhD.

• Website: http://www.hhmi.org/

A revolution is taking place in biology, one that promises to transform our understanding of the living world and produce major advances in medical care. Among its leaders is the Howard Hughes Medical Institute (HHMI).

The Institute is a nonprofit medical research organization that employs hundreds of leading biomedical scientists working at the forefront of their fields. In addition, through its grants program and other activities, HHMI is helping to enhance science education at all levels and maintain the vigor of biomedical science worldwide.

The Institute is one of the world's largest philanthropies, with laboratories across the United States and grants programs throughout the world. Its headquarters and conference center are located in Chevy Chase, Maryland, near Washington, D.C. HHMI's endowment in fiscal year 2005 was approximately \$14.8 billion.

Research

The Institute carries out research with its own scientific staff in HHMI laboratories across the United States. Using the powerful new tools of molecular biology, these research teams seek to explain how the human body functions and why disease occurs. HHMI investigators have been involved in many recent advances, from the discovery of genes related to cancer, heart disease, obesity, cystic fibrosis, muscular dystrophy, and other diseases to new insights about how organisms develop, cells communicate or learning occurs.

In 2003, the Institute broke ground in Ashburn, Virgina to begin construction on the Janelia Farm Research Campus. The complex will consist of laboratory space, a conference facility, temporary housing for visiting scientists, and many amenities. The collaborative nature of the research will bring biologists, physicists, chemists, computer scientists, and engineers together to tackle the most difficult problems confronting science. It is a unique approach modeled after the successful collaborative science centers in Europe.

The Institute is an operating medical research organization—not a foundation. This means that it carries out research with its own scientific teams. Currently, it employs about 300 HHMI investigators, all of whom work in Institute laboratories while also serving as faculty members at the host institutions with which HHMI has entered into long-term collaborations. The scientists are

supported by approximately 2,500 research associates, technicians, and other personnel employed by the Institute, as well as by a headquarters staff.

HHMI selects its investigators from among the faculties of universities and academic health centers around the country. It solicits nominations from these institutions, with a view to identifying researchers with the potential to make significant contributions to science. Those selected as investigators are appointed for five- or seven-year terms, which may be renewed after a rigorous review process. They meet regularly at HHMI's headquarters in Maryland to discuss their work.

By appointing scientists as Hughes investigators—rather than awarding research grants—HHMI is guided by the principle of "people, not projects." It believes that science is facilitated best by providing outstanding researchers with the resources and flexibility to follow their scientific instincts and to pursue new opportunities as soon as they arise.

The Institute's grants program, the largest privately funded education initiative in U.S. history, is helping to enhance science education for students at all levels, from the earliest grades through advanced training.

The Institute has awarded more than \$1 billion in grants since 1988. The grants are helping to strengthen science education and encourage talented young people to pursue research and teaching careers. The grants program also supports research resources in medical schools and other institutions within the United States, and the research of outstanding biomedical scientists in selected countries elsewhere.

HHMI's grants are administered through four programs:

- Graduate Science Education Program has as its goal to expand the nation's pool of medically trained researchers; promote interdisciplinary, graduate-level research training; and integrate medicine into biomedical research training.
- International Program supports biomedical scientists outside the United States and provides funding for selected courses and workshops.
- Undergraduate Biological Sciences Education Program provides grants to selected undergraduate institutions and to individuals through the HHMI Professors.
- Precollege Science Education Program supports a variety of precollege grants to biomedical research institutions to engage in community outreach to pre-K through 12thgrade students and teachers.

The Institute makes grant awards through these programs; it will consider unsolicited proposals but rarely funds them. HHMI does not make grant awards for investigator-initiated research in the United States. Rather, through its own scientific program, it employs independent investigators at HHMI laboratories.

Howard Hughes Medical Institute (HHMI) Investigators*

- 1. Agard, David A.
- 2. Cyster, Jason G.
- 3. DeRisi, Joseph
- 4. Ganem, Donald E.
- 5. Jan, Lily Y.
- 6. Jan, Yuh Nung
- 7. Lisberger, Stephen G.
- 8. Locksley, Richard M.
- 9. Ptacek, Louis
- 10. Rowitch, David H.
- 11. Shokat, Kevan
- 12. Vale, Ronald D.
- 13. Walter, Peter
- 14. Weiss, Arthur
- 15. Weissman, Jonathan

*Source: HHMI website, May 2007

This section contains the Chancellor's annual letters for 2002, 2003, 2004, 2005, 2006, 2007, and 2008 describing the state of the university including:

- major milestones,
- accolades,
- personnel changes, and
- challenges for the future.

"Happy Holidays: UCSF at the Turn of the Year 2002"

Dear Colleagues:

The squalls blowing through the Bay Area in recent days seem a suitable metaphor for the state of the university as 2002 runs its course. The storm clouds of deficit now glower over us, dampening spirits and casting shadows on the academic landscape. The future has become less predictable than any of us would like. In the face of this uncertainty, however, UCSF remains on target to achieve its major goals for the coming decade, and to sustain its distinguished position in higher education and health care -- a remarkable testimony to the resilience and resourcefulness of our campus community. I offer a few reflections to justify that optimism and dramatize where we stand at year's end.

The State of California anticipates a budget deficit that could reach \$35 billion over the next 18 months. Given this grave circumstance, Governor Gray Davis has asked the University of California to share in the retrenchments that will be required to restore the state to fiscal health. He began by proposing cuts in the UC budget for the current fiscal year -- the details were provided to you in my email message of December 9 and will not be onerous for UCSF unless the legislature were to make drastic changes.

The only substantive development since my previous message has been action by the Board of Regents to raise student fees, effective this coming quarter. The university and Regents took this action with great reluctance and recognize that it will pose hardships for many. But it remains true that a UC education in any field is one of the premium bargains in higher education.

We can expect far more stringent measures in the coming fiscal year, but it would be foolhardy to predict their nature or impact. Much will depend upon whether the state takes steps to increase revenues or chooses to rely entirely upon cost cutting. The first indication of what might be in store for UC will come in January, when the Governor will make his budget proposal for fiscal 2003-04. But it will be May or beyond before some version of that proposal is enacted.

Meanwhile, our major initiatives will proceed undeterred because they are already suitably financed. Mission Bay is the cardinal example. Genentech Hall will open in January and be fully occupied by close to 1000 scientists and staff within a few months. It is a massive yet elegant building, completed on time and under budget, well received by the adjoining neighborhoods, worth a visit at your first opportunity. Three additional research buildings, a campus community center, and a major housing complex are in advanced design or under construction. The latest addition to this inventory is a building to house portions of the research programs affiliated with our Comprehensive Cancer Center.

At Parnassus Heights, construction has begun for a six-story building that will house vital support facilities for our research. Vigorous efforts are underway to build several new interdisciplinary academic programs. In particular, searches have been mounted to identify leaders for the programs in stem cell biology and human genetics, both of which have been jump-started by major philanthropic contributions.

The UCSF Medical Center continues its remarkable performance of the past two years. It has again been ranked among the top ten academic health centers in the United States. With 80-90% occupancy, it continues to operate in the black and, as important, patient ratings of the Medical Center services continue to rise. The past year saw the official opening of the UCSF National Center for Excellence in Women's Health, a vital addition to our burgeoning activities at Mount Zion.

Planning for a new hospital proceeds apace, although the hoped-for decisions as to location and configuration did not materialize during 2002. The magnitude of this undertaking beggars the imagination, yet it is an imperative for the campus, because seismic standards dictate that clinical operations in Moffitt Hospital must cease by the year 2030, and because even the more recently constructed Long Hospital does not meet the needs of hospital practice in the 21st century. Our patients, and our splendid staff and faculty deserve much better than they presently have. The improvements will come at a stiff price: current estimates place the cost of constructing an academic hospital at \$2 million per bed!

The Institute for Quantitative Biomedical Research (or QB3, for short) is taking shape under its new director, Dr. Marv Cassman, previously Director of the National Institute for General Medical Science at the NIH in Bethesda, MD. Cassman will oversee an elaborate collaboration among UCSF, UC Berkeley, and UC Santa Cruz to make QB3 a reality. Construction of the building at Mission Bay to house the UCSF component of QB3 is scheduled for completion in 2004.

Our faculty continues to excel. During the past year, Professor Gail Martin was elected to the National Academy of Sciences, 8 faculty were elected to the Institute of Medicine, 6 to the American Academy of Arts and Sciences, and 2 as Honorary Fellows of the American Association for the Advancement of Science.

Our research enterprise is thriving. We continue to rank among the top five recipients of grants from the NIH. Federal support of research at UCSF has grown at a remarkable rate, averaging approximately 13% for each of the past three years.

Last year, UCSF announced a campaign to raise \$1.4 billion in private gifts by June 30, 2005. It was a risky undertaking, given the grim economic climate. We have defied the odds. The campaign has just passed the \$1 billion mark, the first time an academic institution without an undergraduate program has ever reached that level in a fund-raising campaign. Furthermore, we are on a trajectory to raise more gift funds this year than last, despite the still wounded economy. Perhaps the most remarkable metric, however, has been the growth in number of individuals making gifts to UCSF, from 12,654 in fiscal year 1998 to 20,946 during the past fiscal year (the increase over last year alone has been 61% to date). The public has learned our worth and is responding admirably.

Many members of the campus community suspect that our efforts to raise money for construction at Mission Bay have distracted from the other meritorious causes in our gift portfolio. The data show otherwise. It is true that we are steadily accumulating the funds needed for the development of the Mission Bay campus. But the overwhelming majority of gifts to UCSF are still for programmatic purposes and those gifts account for most of the growth in our fund raising.

This past spring, Professor Haile Debas announced that he intends to step down as Dean of the School of Medicine next summer. Dean Debas ranks among the most visionary and effective leaders in the history of UCSF. We all owe him a deep debt of gratitude for his distinguished service. A committee to identify his successor was formed last July and is now well along in its work.

Efforts continue to enhance the campus ambience and improve the working lives of our employees, based in part on data obtained through a campus-wide survey performed during the past year. We have commissioned and/or installed 19 major works of art at our several sites (with more in the offing), launched a greatly expanded orientation for new employees, and plan a three-fold expansion of capacity for child care over the next three years.

UCSF has built up a multipronged effort to increase the diversity of our campus community. Dividends are beginning to accrue. For example, the private Greenlining Institute recently completed a study of diversity throughout the UC work force. They praised the efforts and results at UCSF as exemplary. We have no intention of resting on our laurels, but it is gratifying to have such endorsement of our progress.

These are challenging times for UCSF. We created some of the challenges ourselves, by embarking on a formidable expansion of our facilities and programs. Other challenges have been imposed by external circumstances, particularly the current crisis in the state economy. The record of the past year should sustain our confidence that we are up to the challenges. UCSF remains a robust and vibrant place, with great prospects. We will weather the squalls and prosper.

I wish you all a pleasant holiday and fulfilling New Year.

Sincerely,

J. Michael Bishop, M.D. Chancellor

"Happy Holidays: UCSF at the Turn of the Year 2003"

December 22, 2003

Dear Colleagues:

We are about to leave one tumultuous year and enter what I expect will be another. The continuing budget crisis in California, the recall of Governor Gray Davis and election of Arnold Schwarzenegger as his successor, the U.S. military action and its aftermath in Iraq, and the renewed controversy over admission policies at the University of California (UC) all reverberated through the corridors of the university with unnerving impact. But UCSF will still emerge from this year with every reason for optimism in the face of clear adversity.

- -- The shortfall for the California state budget remains a sobering challenge -- an estimated deficit of at least \$14 billion in the coming fiscal year. As is often the case with the state budget at this time of year, there has been much news that constitutes no news. Governor Schwarzenegger and the legislature remain at loggerheads over how to deal with the deficit, so it is impossible to predict how the UC budget will fare in the coming year. The Governor's original budget proposal displays some measure of leniency towards higher education, as does his recent effort to implement midyear cuts unilaterally. But we are not likely to know the shape of next year's budget until May or later. A statement from the UC Office of the President regarding the governor's action may be found at: http://www.ucop.edu/news/archives/2003/dec18art1.htm.
- -- A wave of change has swept through the leadership of UCSF. A few months ago, we welcomed David Kessler from Yale University as the new Dean of the School of Medicine. As announced recently, three other campus leaders will leave their posts in the coming weeks and months:

Regis Kelly will step down as Executive Vice Chancellor, Dee Bainton as Vice Chancellor for Academic Affairs, and Marvin Cassman as Director of the Institute for Quantitative Biomedical Research (QB3). Professor Eugene Washington, presently Chair of the Department of Obstetrics, Gynecology and Reproductive Sciences, will assume the position of Executive Vice Chancellor, which has been reconfigured to include responsibilities for Academic Affairs. Professor Graham Fleming of UC Berkeley will serve as Interim Director of QB3 until a successor to Dr. Cassman is named

-- We formally dedicated UCSF Mission Bay on October 28, with festivities and ceremonies attended by close to 1000 individuals. The symbolic centerpiece of the day was the opening of Koret Quad, the spacious heart of the new campus. The coming year will see another landmark

at Mission Bay: the transfer of the remaining land gift from the InstitutesCatellus Corporation, which will roughly double the footprint of the new campus. This acquisition will represent a glimpse of the future, a blank slate the inscription of which will occupy UCSF for decades to come.

- -- We continued the dramatic expansion of our physical facilities. At Mission Bay, Genentech Hall is now occupied; a second research building will open soon after the turn of the year; the QB3 laboratory building and the campus community center will open in early 2005; a housing complex to open in the summer of 2005 is now under construction; a laboratory building for the Cancer Research Institute is in final design; and two more research buildings are contemplated for completion by 2009. At Parnassus Heights, a six story building to provide vital support facilities for research is nearing completion; and planning is underway for the construction of a building to replace University Hall and the Radiobiology Laboratory, which are due for demolition. No one would have dared predict expansion of this magnitude just five years ago.
- -- With the successful launching of the Mission Bay campus, attention will turn to the revitalization of Parnassus Heights. During the course of the next six years, relocations of research groups will make available ca. 150,000 assignable square feet of laboratory space at Parnassus Heights. This represents a stirring opportunity: the prospect of recruiting as many as 110 new faculty to UCSF, a chance to further diversify our research and make it even more relevant to the relief of human suffering another step towards realization of the dream that caused us to launch the development at Mission Bay in the first place. The campus leadership fully appreciates the magnitude of what must be done at Parnassus Heights and the urgency that it be accomplished expeditiously.
- -- The past year brought further evidence of UCSF's scholarly distinction. Five of our faculty were elected to the National Academy of Sciences -- a truly bumper crop; six to the Institute of Medicine; four to the American Academy of Arts and Sciences; and one as Honorary Fellow of the American Association for the Advancement of Science.

Federal funding of research at UCSF continued its previous steady growth, placing UCSF once again among the best funded health science centers in the U.S. The excellence that these honors exemplify has not gone unnoticed. The press coverage of achievements at UCSF during the past year has been remarkable. Perhaps most notable was an extensive and highly laudatory feature article about UCSF in the September 8, 2003 issue of Business Week if you are in need of reasons to feel good about the team on which you work, read that article. The New York Times reported on our activities 57 times; the Los Angeles Times, 51 times; the Wall Street Journal, 25 times; the San Francisco Chronicle, 293 times; Time Magazine, three months in succession. The coverage ranged from fundamental discoveries on the genetics of aging and cancer to identification of the SARS virus. So although we do blow our own horn from time to time, others do it for

us far more frequently.

- -- The UCSF Medical Center went from strength to strength during the past year. It again ranked among the top ten U.S. academic medical centers, with the Children's Hospital separately named among the top ten pediatric programs in the country. The number of patients coming to UCSF for care continues to increase year after year, and patient satisfaction scores also continue to rise. Again this year, the Medical Center operated solidly in the black and accumulated cash reserves so vital to its long term future, even while making major upgrades of facilities and equipment. Great credit is due to the leadership, faculty, nurses, and staff of the Medical Center who have collaborated to produce this remarkable record. A large team of faculty and managers continues the preparation of a strategic plan for replacement of hospital facilities at both Parnassus Heights and Mount Zion that must eventually be decommissioned in order to comply with statutes on seismic risk.
- -- Fiscal 2002/2003 was another banner year for fund raising at UCSF. Private contributions to the campus remained at a near-record level in the face of a still wobbly national economy, and the number of individual gifts once again increased, this year by 35%. The Campaign for UCSF reached a total of \$1.2 billion, on target for the goal of \$1.4 billion by June 30 of 2005. The most dramatic news, however, came this past fall, with the announcement of a \$35 million gift to the Cancer Research Institute from the family of Helen Diller. This is the largest single gift in the history of UCSF, a remarkable expression of faith in our mission and potential. We are deeply grateful to the Diller family for their trust and support. Kudos are also in order for the leadership and staff of the UCSF Development Office and the volunteers from the community who assist us in our fund raising with their advice, energy, and time.
- -- We have tried not to neglect the more personal side of our lives together. Efforts to improve the quality of work-life for our staff continue on many fronts. We recently completed a second survey of staff opinions, designed to assess the progress made since the initial survey two years ago and to identify the most urgent further challenges. Both the level of participation and the results were gratifying: over 8000 staff participated in the survey, for a response rate of 62%, and performance scores were higher than two years ago for the vast majority of items. The details will be made available in the near future, and we will use these data to guide our efforts at further improvement. The campus is in the midst of initiatives designed to triple available childcare by the end of 2006: the facility at Laurel Heights has already been expanded; a facility for 80-100 children will open at Mission Bay in 2005; and expansion of the capacity at Parnassus Heights by 80-100 slots is targeted for 2006. One-hundred new beds of housing for students and medical center house staff at Parnassus Heights should also come on line in 2006. And the valiant "brown-baggers" at the Mission Center Building now have the option of a recently opened dining facility.

- -- UCSF also took steps on behalf of faculty welfare by creating a central source of funds to support child-bearing leave, by investing in initiatives from the Academic Senate designed to improve mentoring and to strengthen the diversity of our faculty, and by establishing a Chancellor's Council on Faculty Life to initiate and oversee these and other substantive efforts to improve the professional lives of our faculty. The details can be found at http://chancellor.ucsf.edu/responsetotaskforce/chancellor.htm.
- -- Nor have we neglected the benefits beyond our core missions that we can offer to the community at large. Two examples can serve to dramatize those benefits. First, UCSF has recently launched the UCSF Osher Lifelong Learning Institute, with the assistance of generous support from the Bernard Osher Foundation and the Mount Zion Health Fund. The program utilizes UCSF faculty to provide instruction for adults who want to continue learning and exploring new interests.

Second, UCSF has developed a Community Partnership Program that collaborates with community organizations in order to facilitate hiring of local residents, provide job training, and help local vendors do business with the campus. This program became an advance guard for UCSF at Mission Bay, setting up shop there well before any of our research laboratories and demonstrating how the campus can be a constructive presence for the nearby neighborhoods.

UCSF has repeatedly demonstrated the ability to turn tumult into triumph. We are now at it again! The record of the past year once again shows UCSF to be a place of immense creativity and prodigious ambition. We have every reason for pride and hope.

I wish you a pleasant holiday and fulfilling New Year.

Sincerely,

J. Michael Bishop, M.D. Chancellor

December 21, 2004

Dear Colleagues:

It has been a year of the improbable. California installed a new governor in January, following an unprecedented recall of the sitting governor last year. The Boston Red Sox rallied to defeat the New York Yankees for the American League Championship, then brushed aside the St. Louis Cardinals in the World Series to finally dispense with the "Curse of the Bambino." Ken Jennings set a record for the ages by surviving 74 sequential episodes of the quiz show "Jeopardy," but was finally undone by his failure to think of H & R Block. And the Supreme Court decided to rule on interstate commerce in boutique wines. (I took all of these examples from the front pages of The New York Times, so at least one editor found them as notable, and perhaps even as improbable, as I did.) But I suspect that few of you will find any of the advances at UCSF over the past year to be "improbable," because we have all come to expect the exceptional of our community. I am pleased to report that 2004 did not disappoint, and I will make that clear in due course. But I begin with a noxious topic.

The Budget

The California fiscal travail continues, with unfortunate consequences for UC. Over the past four years, the UC budget has been cut by a total of 33%. In this fiscal year alone, the University has sustained a \$600 million net reduction in its base budget, and UCSF has taken its share of that reduction. The events at UC mirror a nationwide trend: a steady decline of the per-capita public investment in higher education over the past two decades. That trend is particularly threatening to California, where the vast majority of the work force for the "knowledge economy" is educated at public colleges and universities.

In the face of budget cuts, UCSF has managed to avoid major layoffs, but our staff are being asked to do more than their share in keeping UCSF on track; faculty and staff salaries have stagnated and now seriously lag the market; and vital improvements to our infrastructure have been deferred once again. The overall impact of the cuts has been felt most strongly in the academic and central administrative units that support virtually every facet of our activities. There has also been a limitation on state funds for research and for the operation of university buildings, and our ability to provide financial aid to students has been compromised.

But hope springs eternal, even in budget offices. Earlier this year, UC negotiated a "compact" with Governor Schwarzenegger that calls for an increase in the University's 05/06 budget of no less than 3% (and further annual increases of roughly the same magnitude through the end of the governor's present term of office). That minimum increase next year alone would permit modest

salary raises for faculty and staff, as well as other improvements in the funding of the University. But also in the offing are further increases in student fees, as already proposed by The Regents. Student aid would be increased in an effort to cushion the blow for the more needy among UC students, but it remains to be seen whether aid will keep pace with increases in fees.

Although the compact is a welcome indication of the Governor's support for UC, it is not a guarantee. The State Legislature will have much to say about the UC budget, and it is far too early to know their collective will on the matter. The next shoe to drop in this annual exercise will be the Governor's formal budget proposal, due this coming January. But be advised that this particular creature – the budgetary process – wears far more than two shoes.

Leadership

The campus continues to reconfigure its leadership. Professor Eugene Washington took office as Executive Vice Chancellor early this year, and is now close to appointing an Associate Vice Chancellor for Academic Affairs and an Academic Information Technology Coordinator. Professor Regis Kelly returned from a brief respite on the high seas to become Director of the California Institute for Quantitative Biomedical Research (QB3). Bruce Komiske was recruited by the UCSF Medical Center as Project Executive-Clinical Facilities Development, to oversee the immense task of constructing hospital facilities at Mission Bay. Professor Ernie Ring became Chief Medical Officer, replacing Ted Schrock upon his retirement this past year. And Vice Chancellor for University Advancement and Planning Bruce Spaulding is presently conducting searches for new Associate Vice Chancellors for Development & Alumni Relations and for University Relations.

Academic Prowess

During the past year, numerous members of our faculty received national or international recognition for distinguished achievements. I will name just a few to dramatize the bounty, with apologies to the many who have been omitted.

The Shaw Prize in Life Science and Medicine was awarded to Professor Yuet W. Kan and Professor Emeritus Herbert Boyer (along with Professor Stanley Cohen of The Cardinal); the Christiane Reimann Prize from the International Council of Nurses, to Dean Emeritus Greta Styles; the Pharmaceutical Sciences Research Achievement Award, to Professor Leslie Benet; and the Dr. A.H. Heineken Prize in Medicine from the Netherlands Academy of Arts and Sciences, to Professor Elizabeth Blackburn.

The American Association of Medical Colleges conferred exceptional recognition on four UCSF

faculty: the Award for Distinguished Research in the Biomedical Sciences, to Professor Cynthia Kenyon (who was also named an American Cancer Society Research Professor and received the Discover Prize for Basic Research from Discover Magazine); the Abraham Flexner Award for Distinguished Service to Medical Education, to Professor Haile Debas; the Herbert W. Nickens Prize for the promotion of justice in medical education and health care, to Professor Michael Drake; and the Humanism in Medicine Award, to Professor Sharad Jain. The remarkable range of achievement represented by these four awards is a tribute to the breadth of excellence and commitment at UCSF.

Professor Joe DeRisi was named a MacArthur Fellow (popularly known as the "Genius Grant"); Professor Jeffrey Cox, a W. M. Keck Foundation Distinguished Young Scholar in Medical Research; and Professor Matthew Jacobson, a Sloan Fellow. Professor Mike McCune was among only nine scientists to receive the first set of "Pioneer Awards" from the National Institutes of Health, designed to recognize and advance path-breaking ideas. And a second year dental student, Stanley Liu, received first prize for his research from the American Dental Association in the "Basic Science and Research" category of its annual, nationwide student-clinician competition.

Four more of our faculty were elected to the National Academy of Sciences, six to the Institute of Medicine, four to the Academy of Arts and Sciences, and one to the venerable Royal Society of London.

A recent and widely publicized ranking of universities by the Times Literary Supplement of London placed UCSF twentieth in the world. No other health sciences institution appeared in the top fifty, and only one UC campus ranked above us (Berkeley, in second place). The much maligned but rarely ignored rankings by U.S. News and World Report placed the School of Nursing second among its peer institutions, the School of Pharmacy first, and the School of Medicine sixth; schools of dentistry were not ranked. And virtually all of our diverse graduate programs are regarded as among the top ten in the nation. The School of Pharmacy was especially pleased to learn that Chemical and Engineering News had ranked it first in the nation among academic institutions receiving federal support for research and development in chemistry – to give you an idea of the competition, MIT and UC Berkeley ranked second and third.

Extramural funding of research increased over last year by a healthy 7%. The Schools of Dentistry, Nursing, and Pharmacy ranked first among their peer institutions in the receipt of NIH grant funds; the School of Medicine, fourth; and UCSF as a whole, fourth among all U.S. academic institutions. These are not dry numbers: they are a reflection of how well our scholarship fares when inspected by rigorous and often skeptical peers.

New Programs

The academic reconfiguration at Parnassus Heights continues apace. Professor Arnold Kriegstein has arrived from Columbia University to direct the new Developmental and Stem Cell Biology Program, and Professor Neil Risch will join UCSF from Stanford University on January 1 as Director of the new Human Genetics Center. Both programs will be based at Parnassus Heights, both have faculty derived from multiple schools and departments, and both have been nucleated by generous private gifts. The passage of Proposition 71 in the recent election will provide the opportunity to procure state funds, as well, for stem cell research.

The School of Nursing has allied with the Gordon and Betty Moore Foundation to develop means that could improve both the working lives of nurses and the safety of hospitalized patients. The first component of the program will support doctoral study in nursing by 32 students over the next six years, in an effort to address the urgent need for additional nursing faculty in the Bay Area and throughout the U.S. The award from the Moore Foundation also calls for UCSF to coordinate efforts to develop more nursing leadership for Bay Area hospitals, and to develop a program in patient safety that could be implemented at both UCSF and community hospitals.

New (and Old) Buildings

The coming year will see the opening of six new buildings: the research building for QB3, the Campus Community Center, two parking structures, and a housing complex – all at Mission Bay; and the Parnassus Heights Service Building – a state of the art facility for the care of animals used in research. Construction will begin on the Helen Diller Family Cancer Research Building and a child care facility at Mission Bay, and on a housing project and a child care facility at Parnassus Heights. In addition, UCSF has just acquired a new neighbor at Mission Bay, with the opening of the J. David Gladstone Institutes research building immediately across Owens Street from Genentech Hall. The faculty at the Gladstone Institutes are part of the extended family of UCSF, so they are most welcome neighbors.

But what goes up eventually comes down. The campus has a long-standing obligation to demolish University Hall because of seismic standards, with a deadline of 2008. The campus and affected schools have found quarters for some – but far from all – of the individuals and programs that will be displaced by the demolition. So there is no end in sight for the "space olympics" at UCSF. Does anyone think there ever will be?

The Medical Center

The UCSF Medical Center is completing a stellar year. Its ranking improved from 7th to 6th in

the nation, and the UCSF Children's Hospital was designated as the best in California. In May, the Medical Center completed its triennial accreditation survey with a perfect score. Patient satisfaction scores continue to rise, with patients ranking UCSF Medical Center the best among all San Francisco hospitals in a standardized survey last summer. The financial performance of the Medical Center remained strong, with an operating surplus of \$55 million in fiscal year 03/04 and accumulated reserves now exceeding \$120 million. The reserves are vital to the future of the Medical Center: they represent protection against rainy days; they are required to replace and acquire medical equipment; they will be essential for financing the expansion of bed capacity and the construction of new facilities; and they are an important indicator for The Regents and external agencies in evaluating the health of the Medical Center.

Because of seismic standards, Mount Zion Hospital must be decommissioned as an inpatient facility by 2013, and the same must happen for the Moffitt Hospital no later than 2030. After several years in a monumental planning exercise, the Medical Center has elected to begin its efforts to create replacement facilities by constructing a children's hospital, a women's hospital and a hospital for cancer patients at Mission Bay. The favored site for this construction is across 16th Street from Genentech Hall. UCSF is negotiating actively to acquire the necessary land at that site.

The strategic plan for the UCSF Medical Center also envisions a facility for ambulatory care and clinical/translational research at Mission Bay, expansion of outpatient activities at Mount Zion, and, in a second phase of the restructuring, a new inpatient pavilion at Parnassus Heights. These undertakings represent an immense challenge. But they are essential to provide UCSF with the capability for cutting-edge patient care and clinical research throughout the 21st century.

Seismic standards also require that the San Francisco General Hospital (SFGH) be rebuilt or replaced by 2013. The UCSF faculty at SFGH, along with the San Francisco Department of Public Health, believe that it would be ideal to build a new hospital at Mission Bay, in close proximity to the UCSF campus and our eventual clinical facilities there. There is presently no plan to merge SFGH facilities with those of UCSF, but the campus/medical center and the city remain in consultation over how separate facilities might best be configured. The city would have to obtain voter approval for a bond issue to finance both the purchase of land at Mission Bay and the construction of a new hospital.

Private Support of UCSF

Fiscal 03/04 was another banner year for private support at UCSF. Total receipts were \$253,703,000, the second best yield in our history. And in the spirit of the improbable, the Campaign for UCSF passed its goal of \$1.4 billion this past July, a full year ahead of schedule. We

owe our thanks and congratulations to the leadership and staff of the UCSF Development Office, and to the UCSF Foundation and other volunteers from the community who play a vital role in securing private gifts for UCSF.

Another building at Mission Bay has acquired a distinguished name. The genetics and developmental biology building has been named for Arthur and Toni Rembe Rock, in recognition of a gift of \$25 million to UCSF. The gift also endowed a distinguished professorship to be held by whoever is chancellor. We are deeply grateful for the thoughtful generosity of Mr. and Mrs. Rock and proud to have their name become part of campus parlance.

Despite the large investment of private funds in new buildings over the past five years, programmatic support remains the most common purpose of gifts received by UCSF. Our supporters value what we do even more than what we build.

Community Life

The campus leadership has sought to enhance the quality of life at UCSF in diverse ways – some modest, some grand, all designed to benefit the entire UCSF community. Examples include continuation of a highly regarded noontime recital program, strengthening of the orientation for new employees, providing resources for conflict resolution and the deterrence of sexual harassment, a larger and more prominent program to formally recognize valuable service to the campus, expansion of capacity for child care, and ongoing procurement of public art for all of our major facilities that has led to more than twenty temporary or permanent installations over the past six years – the most recent example is the engagement of artist Juana Alicia to create a mural for Parnassus Heights, through the auspices of the Chancellor's Advisory Committee on Diversity.

The Chancellor's Council on Faculty Life initiated three new pilot programs: the Leadership Development Program, which will be particularly useful to faculty assuming new leadership positions, as well as to those with aspirations for such roles; the Welcoming Program, which will provide easy access to a wide array of campus resources through a central web portal and a social welcoming component to enhance the ease with which new faculty become familiar with the campus and their colleagues; and the Mentoring Program, which will facilitate faculty development. In addition, the Ambassador Faculty Search Program initiated by the Academic Senate and funded by the chancellor is off and running. Work has begun on developing the network of relationships, resource materials and data that will support our search efforts and foster a diverse faculty.

Conclusion

This is the 7th edition of my annual message to the UCSF community (and the fifth sent to the entire campus and medical center by email). The messages have been growing longer with each year, partly because many of you have told me that you would like to hear even more about what is happening throughout the institution. But I promise restraint come December of 2005, because I know that prolixity is an enemy of clarity.

Each of my messages has acknowledged the difficulties we face, but each has also been decidedly upbeat. Am I a Pollyanna? Anything but: my close associates will tell you that I am a relentless worrier. But I let the record speak for itself, and the message is undeniable. UCSF is in the midst of an astonishing transition that can be unnerving in any moment, but is both essential and exhilarating when considered in the long view. Every one of you is entitled to worry, as I do. But every one of you is also entitled to take pride in the unfailing aspiration and achievement of this great public institution that we all serve, and to be confident about its future.

I wish you all a pleasant holiday season and a satisfying New Year.

Sincerely,

J. Michael Bishop, M.D. Chancellor

December 21, 2005

Dear Colleagues:

I write to provide my eighth annual report to the UCSF community on the state of our affairs. My intent is to portray the general health of the campus, not to provide a comprehensive account of all its achievements and challenges during the past year. There have been more than enough of both.

The Budget

The economy of California is on the rise, and with it, hope for further improvement in the budget for the University of California (UC). The Governor and the Legislature honored the "Compact" this past year with a 5% increase in general funds for the UC. Most of the increase has been used to provide modest raises for faculty and staff, and to sustain continued growth in undergraduate enrollment.

The Compact calls for a further minimum increase of approximately 5% in fiscal year 06/07. All signs presently indicate that this "promise" will hold, but the state budgetary process is capricious, so there will be no certainty until the Legislature and Governor have taken final action in May or later.

In the face of this generally good news, the UC faces a crippling shortage of monies for construction. The capital funds provided to the UC by the state inevitably fall far short of what is actually required. So the University regularly borrows money to meet its needs for construction. It does so as a single entity rather than as individual campuses, and its debt capacity is now approaching saturation. As a result, the ability of individual campuses to undertake new construction faces severe constraints.

The limit on UC debt creates a considerable impediment to initiating further construction at UCSF. The campus is determined to meet all existing commitments. But anything beyond that will have to await an improvement in the finances of the UC and the preparation of a strategic plan for the next phase of development at UCSF (see below). The progress at Mission Bay in recent years has created ever-expanding expectations throughout our academic community. We must manage these expectations in an equitable and productive manner.

Leadership

UCSF welcomed a number of new recruits to its leadership over the past year. James Asp joined

us from the Memorial Sloan Kettering Cancer Center as our new Associate Vice Chancellor for University Development and Alumni Relations; Barbara French was recruited from the private sector to be Associate Vice Chancellor for University Relations; Linda Giudice abandoned the Cardinal (aka Stanford) to become Chair of Obstetrics and Gynecology in our School of Medicine; Deborah Greenspan became Chair of the UCSF Academic Senate; Jay Harris joined the Medical Center as Chief Strategy and Business Development Officer; Sally Marshall from the UCSF School of Dentistry assumed the office of Associate Vice Chancellor for Academic Affairs; and Jonathan Showstack was named Academic Information Technology Coordinator for the campus.

Laurels

The campus and its schools once again fared well in national rankings. My preferred metric is receipt of research funds from the National Institutes of Health, because it reflects peer review. The campus ranked fourth among all academic institutions in the United States. The Schools of Dentistry, Nursing and Pharmacy all ranked first, the School of Medicine ranked third. Four departments in the School of Medicine ranked first in their disciplines: Anesthesiology, Internal Medicine, Neurosurgery, and Obstetrics and Gynecology, with the Department of Internal Medicine first among all departments of any sort in the nation. Research in the social sciences, distributed among several departments, also ranked first.

The much maligned but rarely ignored rankings by U.S. News and World Report placed our School of Pharmacy first in the nation for its research training, and our School of Medicine fifth – the highest ranking for any public medical school. Notably, the School of Medicine also ranked among the top ten in primary care, testimony that the School is advancing its mission across a very broad front. The magazine did not publish rankings for Schools of Nursing or Dentistry.

The School of Pharmacy also gained note in two other ways: it was ranked first in federal support for chemical research and development by the Chemical and Engineering News report (MIT and Harvard were second and third, respectively); and one of its students, Dan Zlott, was elected as the next national president of the Academy of Student Pharmacists. The School of Dentistry was reaccredited without a single recommendation for improvement from the visiting committee, a singular achievement in a highly rigorous process.

The UCSF Human Research Protection Program just received full accreditation from the Association of Human Research Protection Programs (AAHRPP). Based on rigorous peer review, this accreditation serves as a "gold seal" signifying adherence to the highest standards in research on human subjects. UCSF is the first UC campus and only one of two institutions in California

to have received full accreditation by AAHRPP.

Many of our faculty received national or international recognition for their achievements. Four were inducted into the National Academy of Sciences, six were elected to the Institute of Medicine, four to the American Academy of Arts and Sciences. Individuals were lauded across a broad range of disciplines and contributions. Here are some examples, chosen to dramatize the diverse ways in which our faculty excel: Professor Emeritus Abraham Rudolph, the Pollin Prize in Pediatric Research; Professors Wade Smith and Robert Miller, the Royer Award for excellence in neurology; Professor Marylin Dodd, the Episteme Award from the Baxter International Foundation for her research in physiological nursing; Professor Emeritus Robert Langridge, named one of "Thirty Five Innovators of Our Time" by the Smithsonian Magazine; and Professor Ruth Greenblatt, the Women in Medicine Leadership Development Award from the American Association of Medical Colleges.

Our efforts in the San Francisco community have not gone unnoticed. Mayor Gavin Newsom wrote me in March to commend the efforts of the UCSF Community Partnerships Program for its "incredible job of reaching out to residents and businesses" in the "neglected and disenfranchised" southeast sector of San Francisco. And the United States Environmental Protection Agency named UCSF as one of the "2005 Bay Area Best Workplaces for Commuters" – given the daily trials of commuting life in the Bay Area, that may sound like damning with faint praise, but in reality, it represents the laudable result of devoted effort by our transportation department and the cooperation of countless members of the UCSF community.

Openings

UCSF opened three new buildings at our Mission Bay Campus during 2005: the Campus Community Center, a research building for the Institute for Quantitative Biomedical Research (QB3), and a housing complex that will accommodate approximately 730 individuals in apartments of varied configuration. Regrettably, clients for the housing complex were considerably inconvenienced by construction delays; I thank them for their patience. The entire complex is now open and represents a formidable milestone in our housing program.

The Community Center has been received as "one of the finest public spaces in San Francisco," a splendid facility for recreation and conferences. The QB3 building is filling rapidly with cutting edge research in advanced biomedical imaging, computation, drug discovery, and other crosscutting applications of the physical, chemical and mathematical sciences to medical problems.

The opening of the Community Center was celebrated with a gala dinner in the banquet space of the building that also recognized successful completion of the fund-raising "Campaign for

UCSF" (more on this later). In addition, the campus held a breakfast to salute the approximately two-hundred employees who have worked on the more than forty committees involved in the design and construction of buildings at Mission Bay. I suppose that only a university would use forty or more committees in this way. But the outcome in our case is superb.

The QB3 building was formally inaugurated with a symposium that featured UC President Robert Dynes and corporate leaders, including the CEOs of General Electric and Genentech, speaking to an overflow audience. The occasion also featured the announcement that the QB3 building would bear the name of Brook Byers, in recognition of his generosity and many years of service to UCSF. So Byers Hall has taken its proud place next to the southern entrance to UCSF Mission Bay.

Private Support

The State of California provides only 9% of our current operating budget, only 12% of all our salaries, and we receive only 3% of our support from tuition and fees. So private support is vital to the continuing success of UCSF. The campus concluded the seven-year "Campaign for UCSF" in July, having raised a total of almost \$1.7 billion in private funds, substantially over the original target of \$1.4 billion. Of that total, \$500 million were for capital projects, the remainder principally for research and education.

Private support during the last year of the Campaign, fiscal year 04/05, reached \$293 million, the highest in the UC system and an all-time record for UCSF. Over the past six years, the number of individual contributions to UCSF has grown from 15,000 annually to 33,000. These numbers are a great credit to the leadership and staff of our Development Office, and to the UCSF Foundation and other volunteers from the Bay Area community who play a vital role in securing private gifts for UCSF.

The Medical Center

The UCSF Medical Center completed a banner year, ranked again among the top ten in the nation, with an operating surplus of \$73 million and accumulated reserves of \$150 million. But these successes have come at a considerable cost, because an unprecedented demand for service has placed great strain on physicians and staff alike. The Medical Center has responded by creating additional capacity at Mount Zion and has been working to add capacity at Parnassus Heights. But relief will come only gradually. I extend my admiration and gratitude to all the personnel of the Medical Center for their valiant performance.

I reported last year on plans to build inpatient facilities for children, women, and adult cancer pa-

tients at Mission Bay. The campus is well along in procurement of land south of 16th Street that would accommodate this construction. But the precipitous rise in building costs over the past year has forced the Medical Center to reconfigure its plans so that they remain fiscally realistic. A final plan has yet to emerge, but UCSF remains committed to the vision of an integrated clinical and research campus at Mission Bay.

The San Francisco General Hospital (SFGH)

The SFGH plays a vital role in teaching and research at UCSF. It faces an uncertain future. Seismic standards require that the hospital be replaced by 2013. During the past year, a Blue Ribbon Committee appointed by Mayor Newsom determined that the SFGH should remain at its current location on Potrero Avenue, rather than being relocated to Mission Bay. But there is as yet no clear plan for either the design or financing of a replacement structure. UCSF is doing whatever it can to assist the City in this undertaking. Our participation is essential, because we need to assure that our faculty at SFGH will have adequate research space, both in the near and long term.

UCSF in the Community

UCSF reaches out to the San Francisco community in myriad ways. Some of these originated "from the top," but many more arose from the grass roots of the campus. To take stock of these activities and recommend how they might be improved, the campus commissioned a Taskforce on Community Partnerships, chaired by Professor Kevin Grumbach.

The Taskforce identified dozens of collaborations between UCSF and the community, ranging from our pathbreaking Science and Education Partnership (SEP), which works in virtually all of the public schools of San Francisco, to a primary care clinic at Glide Memorial Church, staffed by students and faculty of the School of Nursing.

In its final report, submitted earlier this year, the Taskforce recommended the creation of a University-Community Partnership Program, which would coordinate, inform, and advocate for engagement with the community. I accepted that recommendation, charged Associate Vice Chancellor Barbara French with oversight of the Program, allocated start-up funds, and appointed representatives to a governing council (see membership at http://chancellor.ucsf.edu/committees/standing/commpartnerships/contents.htm). UCSF seeks to become an even greater force for good in the community, to cultivate suitable credit for faculty and staff who serve this mission, and to maintain the idealism and social contract that are central to our purposes.

Campus Diversity

Nurturing diversity in every part of the UCSF community has been a long-standing goal of the campus, and one that I have wholeheartedly endorsed. Over the years, a host of working groups and campus events have been created to foster diversity. But the outcomes have fallen short of our aspirations. So it seems time to refresh and strengthen the commitment to diversity at UCSF. To this end, Executive Vice Chancellor Eugene Washington has drawn up and is now implementing an action plan that will create a comprehensive UCSF Web Site on diversity; develop a communications strategy on behalf of diversity; establish a program of best practices for recruitment and retention of staff and faculty; assemble a data base that will systematically examine the diversity profile of our faculty and staff, and allow us to monitor crucial variables; convene a diversity leadership retreat; strengthen accountability in meeting campus goals; and devise incentives for better performance.

Campus Life

The past year brought a number of developments that should enhance campus life and improve the welfare of our faculty and staff. Here are some examples:

- We should complete our initiative to triple the capacity for childcare within the next year or so, principally through construction of new facilities at both Parnassus Heights and Mission Bay, which is now underway.
- Associate Vice Chancellor Sally Marshall, working with the Chancellor's Council on Faculty Life (CCFL), is leading an ambitious initiative to cultivate leadership skills among our faculty.
- Professor Mitchell Feldman has assumed the position of Mentoring Director, established by the CCFL and reporting to Associate Vice Chancellor Sally Marshall. He is spearheading a comprehensive mentoring program for the campus, with an initial focus on assistant professors and new faculty.
- Sixty five faculty have utilized salary supplementation for childbearing leave since it was initiated by the campus in January of 2003.
- Three new major works of art now grace our campus: a tile mural by Juana Alicia at Parnassus Heights (commissioned by the Chancellor's Advisory Committee on Diversity), and sculptures by Richard Serra and Stephan Balkenhol at Mission Bay.
- The campus has negotiated an option to purchase land at Mission Bay from the City, upon which it may build as many as 160 units of affordable housing for staff. Construction of the housing would be coordinated with that of a new hospital at Mission Bay.

Last, but far from least, in recent days the UC has ratified or reached tentative labor
agreements with three of the major bargaining units at the University: the California
Nurses Association (CNA), the University Professional and Technical Employees
(UPTE), and the Coalition of University Employees (CUE). This is welcome news for
the holidays.

Strategic Planning

Since I assumed the chancellorship in 1998, the campus has been preoccupied with realizing the first phase of its vision at Mission Bay and the potential benefits of that vision throughout our academic community. Now that UCSF Mission Bay has become a thriving enterprise, it is time to pause and consider how UCSF should look twenty years hence. The scale of the opportunity is dramatized by the fact that half of the footprint at the Mission Bay campus remains available for future use.

In order to address the future, I have commissioned a campus-wide exercise in strategic planning. I have appointed a Planning Board, co-chaired by Professor Elizabeth Blackburn and Executive Vice Chancellor Eugene Washington, and including faculty, staff, postdoctoral fellows, students and house staff (see http://chancellor.ucsf.edu/committees/adhoc/strategic/contents.htm)

The Board has been charged to consult every substantial constituency among the campus community. It will be assisted by a professional consulting firm (AMC Strategies, LLC), and by an external advisory board appointed by the UCSF Foundation. This is a profoundly important undertaking, which will tax our collective wisdom to the maximum.

Conclusion

Change remains the order of the day at UCSF. There is a venerable axiom that "change is good," which certainly applies to UCSF of late. Change has brought us further prominence in scholarship and education, revitalization of our Medical Center, gorgeous new facilities, and international recognition for our daring – the first question I was asked during a recent visit to the National Cancer Institute of Spain was "how are things going at Mission Bay?" Undeniably, we have problems to solve, some arising from our successes – the geographical fractionation of our academic community is certainly one of these, the overburdening of our Medical Center, another. But the 18,000 employees of UCSF compose a social organism whose resilience and creativity make it possible for change to be good. Earlier this year, Mayor Gavin Newsom commented on the impact of our new campus at Mission Bay by calling UCSF a "big deal for San Francisco." I

would take issue with the Mayor only for limiting our reach. We are a "big deal" – period!

I wish you all a pleasant holiday season and a gratifying New Year.

Sincerely,

J. Michael Bishop, M.D. Chancellor

December 21, 2006

"UCSF at the Turn of the Year 2006"

Dear Colleagues:

It is time once again to take stock. Here is my ninth annual survey of the past year at UCSF. It has been a year of great achievement and persisting problems. I have tried to give a representative sample of both.

Stature

UCSF continues to be recognized as one of the premier life sciences institutions in the world, holding its own even in rankings against general universities, which have larger and more academically diverse faculties, deeper pockets, and – in some instances – successful football teams.

- Newsweek International ranked UCSF ninth among all the research universities of the world for its scholarly excellence and global impact. No other life sciences institution made the top 100.
- UCSF ranked fourth in the nation in receipt of research support from the National Institutes of Health (NIH). The Schools of Dentistry, Nursing, and Pharmacy all ranked first among their peer institutions, the School of Medicine ranked third.
- U.S. News and World Report ranked the UCSF School of Medicine fourth in the nation for research, the School's highest finish in the history of this ranking. The School was only one of three to be ranked in the top ten for both fundamental research and training in primary care, a testimony to the School's breadth of excellence.
- The San Francisco Veterans Administration Medical Center (VAMC) continues to receive the most research funding of all VAMCs in the nation, reflecting the outstanding performance of the UCSF faculty who staff the San Francisco VAMC.

Faculty Laurels

- UCSF is proud of its distinguished faculty, whose achievements regularly earn international recognition. Here is an arbitrary sampling from the past year, designed to illustrate the many ways in which our faculty excel.
- Elizabeth Blackburn: the Wiley Prize in Biomedical Science, the Peter Gruber Prize in Genetics, and the Albert Lasker Award in Basic Biomedical Research the last of these is generally regarded as the premier U.S. award for fundamental medical research.

Professor Blackburn was lauded for both her path-breaking research on the molecular machinery that preserves the integrity of our genomes and her political courage in defending the integrity of science.

- Roger Nicoll: the Peter Gruber Prize in Neuroscience, for advancing our fundamental understanding of learning and memory.
- Shaun Coughlin: the Stanley Korsmeyer Award of the American Society for Clinical Research, in recognition of his research on blood clotting.
- Y. W. Kan: the Lifetime Achievement Award from the Society of Chinese Bioscientists in the United States, for his pioneering work on the genetics of human disease.
- Richard Coughlin: the Humanitarian Award from the American Academy of Orthopaedic Surgery, for his volunteer work on medical education and patient care in developing nations.
- Paul Ortiz de Montellano: the Volwiler Research Achievement Award from the American Association of Colleges of Pharmacy, for sustained excellence in research on drug metabolism.
- Christopher Voigt: named a 2006 Young Innovator by Technology Review.
- Kathleen Puntillo: the 2006 Society of Critical Care Medicine's Grenvik Family Award for Ethics.
- Ruth Malone: honored by the American Legacy Foundation for her work in educating underserved populations about the hazards of tobacco.
- John Featherstone: the Scientific Research Award from the World Congress of Minimally Invasive Dentistry for his research on the assessment and management of dental caries.
- Genna Dowling and Janice Humphreys: named Fellows of the American Academy of Nursing, among the most distinguished recognitions in the nursing profession.
- Kathleen Giacomini, James Marks, Arnold Milstein and John Rubenstein: elected to the Institute of Medicine.

New Leadership

The Campus and its Schools were enriched during the past year by a bumper crop of new leadership. Renewal of this sort contributes greatly to the maintenance of our vigor and excellence. I congratulate all of the following individuals and thank them for taking on their new challenges.

- Joseph I. Castro has joined the Campus from UC Santa Barbara as Associate Vice Chancellor for Student Academic Affairs.
- New chairs were appointed to the Departments of Clinical Pharmacy (B. Joseph Guglielmo, Jr.), Epidemiology (Robert Hiatt and Neil Risch as co-chairs), Laboratory Medicine (Clifford Lowell), Ophthalmology (Stephen McLeod), Orthopaedics (Thomas Vail), Physiology (David Julius), and Social and Behavioral Sciences (Howard Pinderhughes).
- Kevin Shannon is the new Director of the Medical Scientist Training Program, which oversees students studying for both the M.D. and Ph.D.
- Joseph "Mike" McCune will lead the newly established Clinical and Translational Science Institute (see below).
- Jonathan Showstack was appointed as Co-Chief Information Officer for Academic and Administrative Information Systems, a responsibility that he shares with Associate Vice Chancellor Randy Lopez.

Special Initiatives

Innovation and new departures are a way of life at UCSF. Here are examples from the past year.

- UCSF was one of seven U.S. universities to receive an award of over \$100 million from the NIH to establish a Clinical and Translational Science Institute (CTSI). The Institute represents an unprecedented collaboration among our four Schools and the Graduate Division, designed to advance the application of fundamental research to the conquest of human disease. I commend the Deans and their faculties for this landmark undertaking.
- The Program for Global Health Sciences has developed a research partnership with the Muhimbili University College of Health Sciences of the University of Dar-es-Salaam, Tanzania, and an alliance with Kenya for the training of Kenyan Ph.D. students in UCSF laboratories. The Director of Global Health Sciences, Haile Debas, is chairing a UC committee to explore the possibility of creating a system-wide program in global health, and has been asked to oversee the planning of a new "African Institute of Science" in Tanzania that will focus on interdisciplinary education in biomedicine, agriculture, water sciences, and veterinarian medicine.
- Our School of Nursing has mounted an initiative to address a national shortage in nursing faculty, and is collaborating with the UCSF Schools of Pharmacy and Medicine, and the Medical Center in programs to improve patient safety. Both efforts have

generous support from the Gordon and Betty Moore Foundation. The Robert Wood Johnson Foundation is also supporting a separate study on the role of nurses in patient safety.

- The Campus has created separate administrative units for the Graduate Division and Student Academic Affairs. Joseph Castro has just arrived to lead the latter (see above), and a national search is underway for a Dean of the Graduate Division.
- Last year, UCSF launched a new initiative on diversity, acknowledging that the Campus has fallen short of its aspirations to become a truly representative community. The initiative continues, under the leadership of Executive Vice Chancellor and Provost Gene Washington. Meanwhile, there are signs of progress and earnest effort. For example, 42% of tenured faculty at UCSF and 40% of full professors are now women the highest such percentages among major research universities in the U.S.; and 28% of the students in the School of Medicine's incoming Class of 2010 are from groups presently underrepresented in medicine, compared to 19% in the Class of 2009. The School has a year-long Post Baccalaureate Program that helps underrepresented students prepare for application to Medical School. Now in its eighth year, the program has seen 91% of its 89 participants apply to medical school and be accepted.
- The movement of faculty to our Mission Bay campus created the opportunity to recruit new talent to the research community at Parnassus Heights. In the basic sciences alone, at least 25 new faculty have been appointed to positions at Parnassus Heights since the opening of UCSF Mission Bay.
- The School of Pharmacy and the Institute for Quantitative Biomedical Research (QB3) have jointly created a partnership in Systems Biology with Peking University, designed to train Chinese students in this rapidly emerging new discipline. The Institute has also entered into an agreement to train Malaysian students and senior scientists, with an emphasis on neglected and emerging diseases. Costs will be covered by the Malaysian government.
- QB3 has created a small facility in Byers Hall at Mission Bay that is available for rental by start-up companies in biotechnology. Known informally as "The Garage" (inspired by the origins of the Hewlett-Packard company, and with a size suiting the name), the unit represents one of the devices by which QB3 is attempting to enliven the local and state economy, and to facilitate "bench to bedside" transfer of new knowledge both core missions of QB3.
- Planning has begun for construction of new patient-care facilities for the San Francisco General Hospital (SFGH) on the current Potrero site, under the auspices of the City and County. Construction of the facilities will depend upon funding by a bond issue, presently slated for the ballot some time in 2008. The admirable work being done at

the SFGH, the extraordinary commitment of the staff, nurses, and UCSF faculty who work there, and the challenging circumstances under which they work were all captured movingly by a recent series of front-page articles in the San Francisco Chronicle, December 10-13, 2006. If you have not read those articles, I recommend that you do so.

• UCSF has been inclined to let its record speak for itself – perhaps too much so: no full page ads in the New York Times, no radio "spots" during talk shows. In a symbolic departure from this time-honored practice, and after lengthy consultation with friends in the community, the Campus has adopted a motto that captures our ambition and achievement: "Advancing Health Worldwide." It would be difficult to improve on that as a succinct reminder to ourselves and to the public of who we are and what we do. Use it with pride!

Celebrations

No year at UCSF is without celebrations of achievement, small and large. Four are especially deserving of note this year.

- The School of Nursing is in the midst of a year-long program that celebrates the one-hundredth anniversary of its founding. (For details, see http://nurseweb.ucsf.edu/cent-calendar.html.)
- The School of Dentistry is celebrating its 125th anniversary.
- Forty years ago, a collaboration between the School of Pharmacy and the Medical Center made the clinical pharmacist for the first time a part of the team caring for hospitalized patients. It was a landmark innovation. Now, few major hospitals are without clinical pharmacy services, and clinical pharmacy is a standard part of the curricula at U.S. schools of pharmacy.
- At a festive Founders Day Banquet at the Ritz Carlton Hotel, the UCSF medal was
 presented to Jane Brody, health columnist at the New York Times; Andy Grove, cofounder of INTEL, patient advocate, and National Chair of the Campaign for UCSF
 (1998-2005); Rudi Schmid, Dean Emeritus of the UCSF School of Medicine; and
 Maxine Singer, President Emerita of the Carnegie Institution and renowned advocate
 for women in science.

Campus Life

Surveys of our staff and faculty inevitably report satisfaction with their work and responsibilities, but dissatisfaction with their work environment, with complaints ranging from poor infrastruc-

ture to inadequate mentoring. The Campus is attempting to deal with a multiplicity of shortcomings of this sort, within the limits of its resources. Here are a few of the positive steps from the past year.

- Professor Mitchell Feldman assumed the position of Director of Faculty Mentoring, the first time that UCSF has had an officer who attends to faculty mentoring across the entire Campus.
- We opened new housing facilities at both Mission Bay (750 beds) and Parnassus Heights (43 beds), augmenting our inventory of below-market housing by almost three-fold. Tenants at the Mission Bay housing presently include students, postdoctoral fellows, Medical Center residents, faculty and staff. The new Parnassus Heights facility includes units for students and faculty.
- A new facility for child care was opened at Mission Bay, and one is under construction at Parnassus Heights. The result will be a tripling of our capacity.
- The Campus has begun the roll-out of a new research administration system and joined in a UC-wide initiative for strategic sourcing that could save the Schools and Departments considerable sums.
- New attention is being addressed to information technology, with the formation of the Office of Academic and Administrative Information Systems (OAAIS), directed by Randy Lopez and Jonathan Showstack.
- Our free shuttle service has been substantially expanded and redesigned to meet new and shifting needs. The service now carries in excess of 2 million passengers every year.
- The grand plaza at the Third Street entrance to UCSF Mission Bay was completed, along with "Ballast," a towering sculpture by Richard Serra. San Francisco Magazine commented that the sculpture "promises to be an international attraction [that] stands out not only for its scale, but also for its quality: such achievement is rare in public art."
- Muni Light Rail service to Mission Bay is scheduled to begin after the turn of the year: weekends-only service in January (free!), full service in April (not free!). The service will be accessible at any Muni station between Castro and the Embarcadero.

Planning for the Future

Our current exercise in strategic planning has proceeded rapidly, with a flurry of consultations through surveys, Town Hall meetings, interviews, and focus groups. Details are online at http://strategy.ucsf.edu.

- Professor Elizabeth Blackburn and Executive Vice Chancellor and Provost Eugene Washington co-chair a Strategic Planning Board that is overseeing the effort.
- The exercise has reached the stage of the "nitty gritty," in the hands of six Strategy Design Teams, addressing: Recruitment and Retention, Research Directions, Education and Training, Clinical Care, Infrastructure and Resources, and Leadership and Governance. All told, the teams involve more than 150 participants, including representatives from every segment of the Campus community.
- The final report is expected in the spring of 2007.
- Having now worked with UCSF for more than a year, the planning consultants remarked recently that they had never encountered a more self-critical institution. That characteristic is one of the secrets of our success, and we would do well to sustain it.

Bricks and Mortar

Construction of new facilities continues to be high on the UCSF agenda. It began at Mission Bay, but is of necessity spreading to other sites.

- Construction of The Helen Diller Family Cancer Research Building is well under way at Mission Bay, just north of the new housing complex, whose residents have been graciously enduring the racket of pile driving and other unpleasantries of nearby construction.
- The UC Regents recently approved the planning for six new buildings: at Mission Bay, buildings for cardiovascular research, and hospitals for children, mothers and cancer patients (see below); at Parnassus Heights, a building for the Institute for Regeneration Medicine; and at Mount Zion, a building to house both the Osher Center for Integrative Medicine and units of the Medical Center. The Regents also approved planning to retrofit portions of Mount Zion Hospital into compliance with seismic statutes.

Private Support

The UCSF Development Office entered its second year under the able leadership of Associate Vice Chancellor James Asp. Private support from foundations, corporations and individuals presently represents 21% of Campus revenues, and grows ever-more important to UCSF, as support from the state budget and the NIH fails to keep pace with needs.

- FY 2005/06 marked the seventh consecutive year in which UCSF received in excess of \$200 million of private support.
- The number of individual gifts exceeded 32,000, among the highest in our history.

- A gift of \$16 million from Ray and Dagmar Dolby will jump-start planning and construction of the Institute for Regeneration Medicine at Parnassus Heights.
- The Sandler Family Supporting Foundation continued its remarkable and longstanding support of UCSF, with \$10 million in gifts for research in the basic sciences, parasitic diseases, asthma, and the Osher Center for Integrative Medicine.
- A \$6.2 million bequest from the McEvoy family will help complete construction of The Helen Diller Family Cancer Research Building at Mission Bay.
- The School of Nursing received the largest outright gift in its history, to establish the Lillian and Dudley Aldous Endowed Chair in Nursing.
- More than 20% of our alumni provide gifts to UCSF each year, the highest fraction at any campus within the UC system, and among the better numbers in all of higher education. I salute the loyalty and generosity of our alumni, and encourage them to do even better in the coming year.

Campus Finances

The State of California provides only 8% of the operating budget for UCSF and its Medical Center, but these funds are vital, because they include the core of our payroll for staff and faculty. So we enter each new budget year with anxious anticipation of how the University will fare in Sacramento.

- The Regents have yet to approve a budget proposal to the State, and it would be premature to comment on what the UC budget might look like come May. The first hope is that Governor Schwarzenegger will continue the "compact" to assure the UC of a steady, albeit modest increase in funds annually, allowing for staff and faculty raises.
- UCSF continues to spread its capital investments across the entire institution. Here are the numbers between 1997 and 2005: Mission Bay, \$801 million; Parnassus Heights, \$604 million; Mount Zion, \$66 million; and other sites, \$86 million.
- The passage of Proposition 1D (the "Education Bond Issue") in the recent election was welcome news for the UC. But it will bring only limited benefit to UCSF, mainly for deferred maintenance and renewal of infrastructure. We remain a "tub on its own bottom" for major construction costs.
- UCSF remains financially sound. But our discretionary funds have been severely challenged by punishing escalations in the costs of utilities, and the operation and maintenance of facilities. In the current fiscal year alone, UCSF will have to cover nearly \$19 million of such costs that will not be reimbursed by the State. This circumstance constrains the ability of the Campus to support new initiatives and respond to unanticipated calls on its funds.

The Medical Center

The UCSF Medical Center continued its strong performance, and was once again ranked among the top ten in the nation. But success remained a double-edged sword, generating healthy finances on the one hand, but overtaxed facilities and personnel on the other.

- The Medical Center completed FY 2005/06 with an income of \$95 million and reserves of \$150 million. But the appetite for capital investment has been voracious and will only rise as the Medical Center moves ahead with plans to build new facilities at Mission Bay.
- In September, the UC Regents approved planning for new hospitals for children, mothers and cancer patients, and ambulatory care facilities at Mission Bay. The cost of this project is currently estimated to be \$1.0-1.3 billion.
- The Campus completed acquisition of 14.5 acres immediately south of 16th Street and Genentech Hall, as a site for the new clinical facilities.

UCSF as an Economic Generator

Universities regularly point to their beneficial impact on the local and national economies. UCSF is no exception, and we make such claims on sound grounds. Here are some examples.

- In a recent study from the Milken Institute, UCSF ranked second among all universities in the number of U.S. biotech patents, fourth in the number of biotech research papers and citations, nineteenth in an overall assessment of innovation and technology transfer. UCSF is presently responsible for 31% of all patent income to the UC, and has spawned more than 60 biotech companies, including two pioneers, Genentech and Chiron
- The anticipated impact of our new campus at Mission Bay is becoming apparent. More than 1000 new residential units have been constructed in the neighborhood (including the Mission Creek Senior Community 140 units for low-income senior citizens). The first new branch of the San Francisco Public Library in over forty years opened at Mission Bay this past July. The Gladstone Research Institute is thriving in its new quarters immediately across Owens Street from Genentech Hall and the Community Center. At least three biotechnology firms have set up shop in the neighborhood. One commercial life sciences laboratory building is nearing completion at the corner of Owens and 16th Streets, and another is slated for a site on Illinois Street, southeast of the UCSF campus. Contrary to popular perception, UCSF was not responsible for the seemingly premature (and much lamented) demise of the Mission

Bay Golf Center at the northwest corner of our property: the facility fell prey to the installation of infrastructure for a private development in the vicinity.

UCSF in the Community

UCSF is deeply imbedded in both local and global communities. We take particular pride in the public service that our employees render of their own volition, going far beyond our core missions or their official duties. The variety and volume of UCSF's outreach is not easily captured in a few sentences. But here are some representative examples from the past year.

- Our University-Community Partnership Program, announced last year, is now in full
 swing, led by Director Elba Sanchez, and with a governing Council, cochaired by Kevin Grumbach and Gwen Henry. The Program will maintain a data base of our myriad
 activities in the community, coordinate these activities to achieve greater effect and
 efficiency, cultivate credit for our faculty and staff who dedicate themselves to public
 service, and symbolize the idealism that is central to our institutional missions.
- With support from the Robert Wood Johnson Foundation, the School of Dentistry has provided community externships for its students. Over the past four years, the students have seen more than 44,000 patients, the equivalent of more than \$4 million of dental care.
- UCSF is justly renowned for its pioneering program to assist the teaching of science in the public schools of San Francisco, embodied by our Science and Health Education Partnership (SEP) with the schools. But SEP has other dimensions. This year, for example, the program received a grant of \$2.1 million from the Howard Hughes Medical Institute to fund an initiative for improving the teaching of science to undergraduate students.
- Since the mid-1980s, our Graduate Division has conducted a summer program that provides undergraduate students with research experience. This program has just been enhanced by a grant of \$1 million over four years from the Amgen Foundation, to provide 25 undergraduate students each year with a fully funded opportunity for research in the biological, biomedical, or behavioral sciences.
- The School of Pharmacy has received a grant of \$3.7 million from the Amgen Foundation for a program to assist elderly Californians in utilizing the Medicare prescription drug plan (by all accounts, no mean undertaking). Our School will collaborate with six other schools of pharmacy in California to implement the program.
- The UCSF Program at Fresno is a major and very welcome presence in the community.
 Among its special activities are a six-month program that immerses UCSF medical students in either urban or rural settings that provide medical care to the underserved; and

the Doctors Academy, a collaboration with the Fresno School District and the Fresno County Office of Education that encourages disadvantaged students to pursue careers in health and medicine. The program graduated its first students this past year. All 32 graduates are pursuing higher education, 14 at UC campuses, and 5 with UCSF Merit Scholar Awards that provide consideration for early admission to the UCSF School of Medicine. I have visited this program in the past and admire what it is doing.

Worries

No institution with the size and complexity of UCSF is without its worries. Here are a few that presently give special cause for concern.

- The recent increases in student fees, which may be repeated once again this coming year, have not been matched by adequate funds for student aid.
- The funding of the NIH by Congress has flattened over the past several years, whereas the number of grant requests has doubled. The predictable outcome is that the procurement of research grants has become far more competitive than in the recent past. Highly accomplished biomedical scientists suddenly face the possibility of attenuation or even discontinuation of their long-standing support from NIH. These circumstances could have a particularly adverse impact at UCSF, where an exceptional fraction of research support comes from NIH.
- Our need for capital funds beyond those already in hand is huge: combining the needs of the Campus and the Medical Center, current estimates for the next ten years approach \$3 billion, merely for projects already in view. This need can be satisfied only by a substantial increase in private gifts and augmented debt. This may be the largest challenge that UCSF faces over the next decade.
- The large and unfunded increases in costs for utilities, and for the operation and maintenance of facilities, have greatly taxed the discretionary funds of the Campus. There is no obvious remedy, other than an increase in state funding for these prosaic, yet vital functions.
- The Regents remain committed to reinstatement of individual and institutional contributions to the UC Retirement Plan, but the details have not been resolved. Although prudent according to financial analysts, this action has unwelcome implications for the institution and all of its employees.

Conclusion

Having read this far, you cannot help but have noticed that many of our unmet challenges are

rooted in money. This is hardly surprising. The UC's share of State general funds has declined by more than two-fold since the early 1970s; the UC as a whole and UCSF in particular are increasingly "tubs on their own bottoms." Our continuing success is a great tribute to the energy, creativity, and commitment of the UCSF community. As part of that success, we are serving a distinctive public good educating the coming generation of health care providers and medical scientists in a setting where they can be inspired by outstanding scholars, experience the excitement of discovery, come to understand the origins and limitations of what we know and use, and develop critical habits of mind. All the while, we continue our path-breaking research and the delivery of world-class health care. We are indeed "Advancing Health Worldwide."

I wish you all a pleasant holiday season and a gratifying New Year.

Sincerely,

J. Michael Bishop, M.D. Chancellor Arthur and Toni Rembe Rock Distinguished Professor

January 4, 2008

Dear Colleagues:

I write to welcome in the New Year with a report on the past year at UCSF. True to form for UCSF, it was an eventful year. The campus, schools and medical center sustained or even enhanced their admirable national and international rankings; completed and began the implementation of a strategic plan for the entire campus; launched a path-breaking effort in clinical and translational research; continued the momentum in the development of our new campus at Mission Bay; obtained Regental approval to develop new clinical facilities at Mission Bay; and secured the largest gift from a private individual in the history of UCSF. All these and much more were achieved in the face of declining support from the State – a tribute to the energy, ingenuity, entrepreneurial spirit and commitment of the UCSF community.

Health of the Campus

- By all the usual metrics, the campus, its schools and medical center maintained or even enhanced their premier status. Every unit of the campus that was evaluated by U.S. News and World Report ranked among the best in the country.
- The campus as a whole was fourth in receipt of NIH funding; the School of Medicine, third; and the Schools of Dentistry, Nursing and Pharmacy, all first. Both the campus and the School of Medicine ranked first among public institutions.
- The University Health System Consortium ranked the UCSF Medical Center among the top ten in the country for "quality and accountability," calling it one of seven "rising stars" for its dramatic improvement over recent years. The Medical Center was ranked seventh in the nation by U.S. News and World Report.
- A report in the Chronicle of Higher Education ranked the "faculty scholarly productivity" of UCSF as third among all universities and research institutes in the world, just behind Harvard and Cal Tech.
- The campus remained second in the world for number of biotechnology patents.
- Inevitably, it seems, many of our faculty receive distinguished recognition during the course of the year. Here are a few examples from 2007: David Agard was elected to the National Academy of Sciences: Michael Callaham and Louis Ptácek were elected to the Institute of Medicine; Douglas Hanahan, Lily Jan,

Yuh Nung Jan, Alexander Johnson, Steven Schroeder and Robert Stroud were elected to the American Academy of Arts and Sciences; Dean Mary Anne Koda-Kimble of the School of Pharmacy received the 2007 Paul F. Parker Medal for Distinguished Service to the Profession of Pharmacy; and David Julius received two major awards for his work in neuroscience.

Leadership

- The UCSF School of Medicine began the New Year under the leadership of Interim Dean Sam Hawgood, W.H. and Marie Wattis Distinguished Professor of Pediatrics, Chair of the Department of Pediatrics, and Physician in Chief of the UCSF Children's Hospital. An international search for a new dean will be initiated shortly.
- John Featherstone continues his service as Interim Dean of the School of Dentistry. An international search for a new dean is well underway.
- Patricia Calarco was appointed as Dean of the Graduate Division, following a competitive national search. Professor Calarco is the first full-time Dean of the Graduate Division in the history of UCSF, a revision that symbolizes the importance of graduate education to the UCSF mission.
- Renee Navarro was appointed as the campus Director of Academic Diversity, a newly
 created position with responsibility for coordinating programs developed to foster
 diversity among faculty, students, house staff and postdoctoral scholars.
- The position of Vice Chancellor for Research has been established and a search initiated.
- New chairs were appointed to the Departments of Medicine (Talmadge King), Orofacial Sciences (Deborah Greenspan), and Radiation Oncology (Mack Roach). In addition, Kimberly Topp was appointed Interim Chair of Physical Therapy and Rehabilitation Sciences, and Michael Callaham was named the first chair of the nascent Department of Emergency Medicine.

Planning for the Future

- After a highly inclusive, two-year process, we have completed and published the firstever campus-wide strategic plan, "advancing health worldwide: A Strategic Plan for UCSF."
- More than 200 individuals participated in various analytical and planning groups, overseen by a Strategic Planning Board. In his report to the Regents on strategic planning, UC Provost and Executive Vice President Rory Hume described the UCSF process as the most structured and comprehensive in the UC system.

• This new Strategic Plan for UCSF underpins what we aspire to accomplish in the years to come. It articulates the investments we must make – in people, infrastructure, partnerships and working environment – to achieve our goals. Implementation of many of the strategic priorities identified in this plan is well underway. Details can be found at the UCSF Web Site.

Money Matters

- The State budget is in dire straits yet again, so a lean year lies ahead for higher education in California. The first signal of how far the belt might be tightened will come when the Governor delivers his budget proposal in January. The news is not likely to be good: as of last year, the UC's share of the state budget had slipped to 4%, half of what it was four decades ago. Put another way, the State contributed only \$3 billion of the UC's \$16 billion in revenues. One telling comparison from the State Department of Finance: between 1984 and 2004, the State's spending on prisons increased by 205% in constant dollars, whereas spending on higher education increased by 18%.
- UCSF itself is increasingly a "tub on its own bottom." The portion of our revenues provided by state funds has dropped to 9%. Those funds are vital, however, because they provide core support for salaries and infrastructure.
- Campus discretionary funds have been severely taxed by large short-falls in state funds for utility costs and operations, and by sorely needed investments in information technology and security.
- Construction costs continue to soar, nearly doubling over the past decade.
- As student fees continue to rise, the need for financial aid grows proportionately. The
 UC as a whole and each of its campuses, UCSF included, are seeking ways to mitigate
 that need. It is essential that this be achieved if the UC is to remain accessible to all
 qualified students.

Facilities

- Construction of the Helen Diller Family Cancer Research Building is nearing completion and is now scheduled to open in late 2008. This will be the fourth research building to be completed on the Mission Bay campus since we began development at the site in the year 2000.
- The Community Center at Mission Bay has been named for William J. Rutter, former Chair of the Department of Biochemistry and Biophysics at UCSF, major architect of the ascendance of UCSF, cofounder of the biotechnology company Chiron, and both facilitator and generous benefactor for the Mission Bay campus.
- The Regents provided final approval to begin construction of a building at Mount Zion

to house the Osher Center for Integrative Medicine and several facilities of the UCSF Medical Center. Construction is scheduled to start in the autumn of 2008.

- The Regents have also approved construction of a building at Mission Bay for the UCSF Cardiovascular Research Institute and allied programs. Construction is expected to begin in early 2008.
- The campus is advancing its plans to build a central utilities plant at Mission Bay, which will improve both efficiencies of cost and operational reliability of our utilities infrastructure.
- Plans have been completed for a laboratory building at Parnassus Heights to serve as headquarters for the UCSF Institute for Regeneration Medicine. The Regents have approved planning monies for the building, but the campus cannot initiate construction until successful completion of a fund-raising effort now under way.
- Close to a dozen floors of research laboratories are presently under renovation at Parnassus Heights in preparation for new recruitments and reorganization of existing faculty.
- This past fall, the campus reopened a beautifully renovated Cole Hall, restoring use of a vital facility to the Parnassus Heights community.
- An additional childcare facility is scheduled to open in mid-2008 on Kirkham Street at Parnassus Heights. Following this opening, the Marilyn Reed Lucia Center on Parnassus Avenue will be converted to an infant care center the first facility for this age group at the Parnassus site.
- Under the leadership of Associate Vice Chancellor Steve Wiesenthal and the UCSF Sustainability Committee, the campus has mounted a multi-pronged effort on behalf of "environmental sustainability," including conservation of energy and water, creation of "green" facilities, and other measures to reduce our "carbon footprint." As an example, this past year the campus saved enough energy to power over 500 homes for one year. That was a good start, but there is much more that can be done, with every member of the campus community playing their part. As a further symbol of commitment to sustainability, UCSF joined the other campuses of the UC in subscribing to the American College and University Presidents Climate Commitment, a pact among more than 280 colleges and universities nationwide to address global warming.
- The transportation program at UCSF, including its far-flung shuttle system and various commuter benefits, has once again earned UCSF recognition as one of the Bay Area's "best workplaces for commuters" by the US Environmental Protection Agency and the Bay Area Quality Management District.
- The public art program at UCSF Mission Bay is flourishing and has been well re-

ceived. In her book art–SITES SAN FRANCISCO, the critic Sidra Stich has described the program as having fostered "the best public art in the Bay area, by far."

UCSF Medical Center

- The UCSF Medical Center continues to operate at or near capacity, despite the recent addition of several dozen beds, utilizing both Parnassus Heights and Mount Zion. The demand for our services is gratifying, but it is also challenging, putting inordinate stress on our physicians and staff.
- In accord with occupancy, the financial performance of the Medical Center continues to be outstanding.
- Hospital safety has become a nation-wide issue. Our Medical Center continues its vigorous initiatives to address major vulnerabilities in patient care.
- Architectural design continues for new clinical facilities at Mission Bay, including
 hospitals for children, women and oncology patients. The Regents have approved the
 initiative and authorized a campaign to raise \$500 million in private gifts to assist in
 construction. The campaign is being led by a cabinet of volunteers from the private
 community, chaired by Diane B. Wilsey, civic leader and philanthropist.

Sundry Initiatives

- The UCSF Clinical and Translational Science Institute, created last year with the assistance of a more than \$100 million grant from the National Institutes of Health, has been thriving, fueled by the commitment and energy of its Director, Professor Mike McCune and hundreds of participating faculty.
- The UCSF Program in Global Health Sciences continues to mature, under the leadership of Dr. Haile Debas. And it has taken on a new dimension. The UC Office of the President has implemented a study to ascertain whether the program might eventually become the first system-wide school in the history of the UC.
- The multicampus California Institute for Quantitative Biosciences (QB3), headquartered at UCSF under its Executive Director Regis Kelly, received high marks during a recent five year review by a distinguished external panel, assembled by UC Provost Rory Hume.
- The Schools of Medicine and Pharmacy are poised to create the first joint department between two schools in the history of UCSF: the Department of Bioengineering and Therapeutic Sciences.
- The UCSF stem cell program is flourishing with newly recruited faculty and strong extramural support. In particular, UCSF ranks among the largest recipients of grants awarded by the California Institute for Regenerative Medicine (established by the pas-

sage of Proposition 71).

- In the face of a stagnated budget for the National Institutes of Health, the campus has entered into collaborative efforts with individual schools to provide bridge grants to faculty whose grant support has been at least temporarily interrupted. The grants are awarded on the basis of peer review and rigorous assessment of need.
- The campus has used discretionary funds to substantially augment the funding of student mental health services.
- The lack of opportunity for career development ranks among the most common laments from the staff of UCSF. The campus has responded with a new initiative to provide leadership training and other tools for career advancement. The campus initiative will be supplemented by a UC-wide "learning management system" that UCSF is helping to support. For more information, contact Human Resources and Training Development Manager Don Diettinger.

Campus Diversity

- The campus has implemented a ten-point initiative to promote and nurture academic diversity at UCSF. Details can be found at the UCSF Web Site.
- The campus leadership participated in an unprecedented, campus-wide town hall, devoted to a presentation of the objectives of the diversity initiative and status reports from both the academic and staff arenas. The leadership pulled no punches, about either heartening progress to date or the substantial deficiencies that must be rectified.
- We created and filled the position of Academic Diversity Coordinator (see above).
- Planning for increased focus on staff diversity is also well along. An early step will be to create an oversight position analogous to the Academic Diversity Coordinator.
- There is concrete evidence that we can achieve our goals. Here are three examples. In the School of Medicine, 35% of the incoming Class of 2011 is from groups presently underrepresented in medicine, compared with 19% in the Class of 2009. The School of Nursing has increased the fraction of under-represented minorities in its Masters Entry in Nursing Program from 15 % two years ago to 45% in the class that entered this past fall. And the Graduate Division hosts between 55 and 75 undergraduate students from minorities for summer internships each year, ca. 30% of whom later matriculate as graduate students at UCSF.

UCSF and the Community

• The UCSF School of Medicine has admitted its first students to the Program in Medical Education for the Urban Underserved ("PRIME") – a special five-year track for medical students interested in working with urban underserved populations.

- In an allied effort, UCSF is participating in a UC-wide initiative to exploit telemedicine on behalf of underserved populations. The UCSF portion of the initiative is aimed at the urban underserved. A substantial grant from the State will finance the creation of suitable infrastructure.
- UCSF has worked closely with its various neighbors at Mission Bay from well before we initiated construction of our new campus. As our presence there has grown, however, a more formal alliance has proven necessary. So we have created the UCSF Mission Bay Community Task Force to strengthen communication among three constituencies: UCSF, communities in the vicinity of our Mission Bay campus, and the City and County of San Francisco. The principal objectives are to coordinate the planning of land-use in the area and to assure that UCSF continues to be a responsive partner with its neighbors and the community at large.
- A recent review estimated that the UCSF development at Mission Bay has produced close to 1,000 new apprenticeships and 2,000 new jobs for individuals from economically distressed neighborhoods.

Private Support

- Fiscal year 2006-2007 was a banner year for UCSF in the receipt of private support. The numbers that follow are impressive, but the public approval and confidence that they represent are even more gratifying.
- UCSF received \$252 million in private support during fiscal year 2006-2007 the second largest sum in the history of the campus, a 25% increase over last year, and the eighth consecutive year in which UCSF received more than \$200 million in private support.
- The past year also featured individual gifts of unprecedented magnitude, including an anonymous gift of \$150 million to support the UCSF Helen Diller Family Comprehensive Cancer Center, and a \$50 million gift from Atlantic Philanthropies for cardiovascular research at Mission Bay. The anonymous gift for the Cancer Center is the largest from a single individual in the history of UCSF, among the largest in the history of the UC as a whole, and the largest anonymous gift to higher education in the United States during fiscal year 2006-2007.

Conclusion

The San Francisco Chronicle paid UCSF a rare and welcome compliment in April of last year by calling our Mission Bay campus "a great California success story." In reality, we all know that the entire institution is a success story of the first order. Forty years ago, when I informed friends on the East Coast that I would be taking a faculty position

at UCSF, they purported not to know that there was a medical school, let alone an entire health science campus, in San Francisco. Oh, how times, people and institutions have changed! It is now not even remotely possible that an aspiring young academician would encounter the response I heard to the name of UCSF. We are among the premier institutions of higher education on the planet, a stature that should evoke great responsibility more than it should evoke pride. Can we sustain our excellence and momentum in the face of declining state and federal support? Can we compete with private universities and their billion-fold endowments? I believe so, and I have nearly 20,000 reasons to sustain that belief – the individuals of the UCSF workforce. Each of us has a role to play, as we pursue the UCSF mission of advancing health worldwide. Keep up the good work, and Happy New Year!

Sincerely,

J. Michael Bishop, M.D. Chancellor Arthur and Toni Rembe Rock Distinguished Professor

January 13, 2009

Dear Colleagues:

Four years into my tenure as chancellor, I abandoned the traditional "state of the campus" address. Attendance at my addresses had been poor, as it had been for previous chancellors. Moreover, the occasions lent themselves to distractions: my first year on the podium, the audience included vociferous demonstrators against animal research; another year, the event was waylaid by labor issues. It seemed to me that the addresses were not serving the purpose for which they were intended. So I began the practice of sending annual reports to the entire campus community by email at the turn of each calendar year. It was my ambition to reach everyone at UCSF, although I probably have not achieved that to this day.

Now I file my last annual report as chancellor. My message will contain much to be pleased about, but hanging over us is a financial crisis that will color everything we do for some time to come. I have addressed that crisis and UCSF's response to it in a message to the campus sent just before the holidays (see http://pub.ucsf.edu/today/cache/feature/200812232.html), and there will be more communications about our budget in the near future. So I will greet the New Year by featuring some of the less onerous news from the past twelve months at UCSF.

Campus Stature

- UCSF fared well once again in the annual rankings of research institutions by U.S. News and World Report. Our School of Pharmacy placed first in the nation, our School of Nursing second, our School of Medicine fifth (albeit second in "peer esteem," and first among public schools), and our Medical Center seventh. In a manifestation of its breadth of excellence, the School of Medicine ranked in the top ten in 23 of 25 categories, ranging from primary care to structural biology. Rankings were not reported for Schools of Dentistry, but rest assured, ours would have been number-one.
- Our Schools of Dentistry, Nursing and Pharmacy were all first in the nation in receipt
 of NIH funding; the campus as a whole and the School of Medicine both ranked third,
 and first among all public institutions. This was the School of Pharmacy's 29th consecutive year in first place, the School of Dentistry's 18th consecutive year.
- Further evidence that we are a formidable research engine came from the National Science Foundation, which reported that total expenditure on research and development by UCSF was second in the nation among all universities and research institutes, up from fifth the year before. Our expenditures increased by \$47 million, in the face

of constraints on the NIH budget and a weakening economy – a manifestation of the entrepreneurial spirit at UCSF.

- With the School of Nursing in the lead, UCSF received its second large grant (\$6.5 million) from the Gordon and Betty Moore Foundation in support of the Integrated Nurse Leadership Program.
- The School of Dentistry received a grant of \$24.4 million from the NIH to address socio-economic and cultural disparities in dental health among children.
- UCSF faculty at the San Francisco Veteran's Administration Hospital continue to comprise the largest research enterprise in the national VA program.

Laurels

Our faculty once again distinguished itself with outstanding achievements. The following is only a representative sampling of this year's many laurels.

- Ken Dill of the School of Pharmacy was elected to the U.S. National Academy of Sciences. UCSF now has 32 faculty who are members of the Academy.
- Thomas Bodenheimer, Douglas Hanahan, Arnold Kriegstein and Michael Merzenich were elected to the Institute of Medicine, bringing the number of UCSF faculty who are members of the Institute to 79.
- Fred Cohen, Allison Doupe, Steve Lisberger and Louis Ptáček were elected to the American Academy of Arts and Sciences. Fifty-one UCSF faculty are now members of the Academy. Also elected was Brook Byers, long-standing member of the UCSF Foundation and its Board, and stalwart supporter of UCSF – the QB3 research building at UCSF Mission Bay bears his name.
- Elizabeth Blackburn received several distinguished awards, including the Albany Medical Center Prize in Medicine and Biomedical Research (shared with Joan Steitz of Yale University) – America's largest medical prize; the L'Oreal-UNESCO Award for Women in Science, given to one woman from each of five continents; and the Paul Ehrlich and Ludwig Darmstaedter Prize (shared with her former student, Carol Greider, now at Johns Hopkins University) – Germany's largest scientific prize.
- Joe DeRisi received the Heinz Award in recognition of his pioneering work in the new science of genomics and its application to health care.
- The Protein Society honored two UCSF faculty with distinguished awards for their pathbreaking work on proteins and their functions: Peter Walter received the Stein and Moore Award; and Robert Stroud, the Hans Neurath Award.

- Shinya Yamanaka received the prestigious Shaw Prize for his remarkable work in stem cell biology. Dr. Yamanaka divides his time between the J. David Gladstone Institute, where he is a member of the UCSF faculty, and Kyoto University.
- Psychologist Tonie Heineman received a national Purpose Prize for creating A Home Within, a nonprofit that matches volunteer therapists with foster youth.
- Having recently completed twelve years as President of the National Academy of Sciences, Professor Bruce Alberts was named Editor of Science magazine, the influential and most widely read journal of science in the world.
- The California Institute for Quantitative Biosciences (QB3) and the J. David Gladstone Institute jointly received the 2008 "Economic Development Award" from the San Francisco Chamber of Commerce. The award recognizes outstanding contributions to economic development in San Francisco. QB3 is a collaboration among UCSF, UC Berkeley and UC Santa Cruz, headquartered at UCSF Mission Bay. The Gladstone Institute is a private research enterprise, formally affiliated with UCSF and located adjacent to our campus at Mission Bay.
- The Scientist magazine ranked UCSF 12th in its national survey of "Best Places to Work" for scientists. The J. David Gladstone Institute ranked first. The only other UC campus in the top forty was UCLA.
- With the guidance of UCSF faculty members Wendell Lim and Hana El-Samad, and a
 number of postdoctoral fellows and graduate students, a team of students from Abraham Lincoln High School in San Francisco won top awards for the second consecutive
 year in the International Genetically Engineered Machine competition, held at the Massachusetts Institute of Technology. The UCSF team was competing with older students
 from colleges or universities, which makes its success all the more remarkable.

Leadership

• The UCSF campus leadership is in transition. I will step down as Chancellor as of June 30, 2009. Senior Vice Chancellor Steve Barclay retired this past July and is now back on part-time recall as Senior Vice Chancellor for Resource Management and Capital Programs. Randy Lopez is serving as Interim Vice Chancellor for Financial and Administrative Services. Jim Asp resigned as Associate Vice Chancellor for University Development and Alumni Relations to take a position at the Brigham and Women's Hospital in Boston. Mike Irwin, Executive Director of Financial Services and Administration in our Development Office, has stepped in to serve as Interim Associate Vice Chancellor. Steve Wiesenthal resigned as Associate Vice Chancellor for Capital Programs and Facilities Management and moved to the University of Chicago. His duties have been divided between Stella Hsu, Associate Vice Chancellor, Campus

Life Services and Facilities Management; and Michael Bade, Interim Assistant Vice Chancellor for Capital Programs and Campus Architect. I am grateful to all those individuals who have taken on extra duty, assuring stable and capable leadership during the transition to my successor as chancellor.

- John Featherstone was appointed Dean of the School of Dentistry, after serving ably as Interim Dean for more than one year.
- The School of Medicine continues to thrive under the leadership of Interim Dean Sam Hawgood. I have deferred appointment of a new Dean until my successor has been named and can participate in the selection process. I am grateful to the search committee for its hard work over the past ten months and look forward to its continuing counsel until the selection process has been concluded.
- UCSF has reestablished the position of Vice Chancellor for Research, but has yet to recruit an individual suitable for the position. Jeff Bluestone is generously serving as Interim Vice Chancellor while the search continues.

Celebrations

- The Annual Founders Day Banquet attracted a record attendance of nearly 600. UCSF Medals were awarded to Willie Brown, former Speaker of the California Assembly and former Mayor of San Francisco; Warren Hellman, distinguished financier and philanthropist; Janet Rowley, a pioneering cancer researcher; and Eugenie Scott, a renowned advocate for science education, and in particular, the teaching of evolution.
- At a ceremony held in Saunders Court, UCSF announced a gift of \$25 million from the Eli and Edythe Broad Foundation to help fund the construction of a building to house stem cell research at Parnassus Heights. The ceremony featured the first official visit to UCSF by Governor Arnold Schwarzenegger. He was joined by Mr. and Mrs. Broad; Robert Klein, Chair of the California Institute for Regenerative Medicine, which had previously awarded UCSF \$34 million towards construction of the building; Ray and Dagmar Dolby, whose gift of \$16 million several years ago initiated fundraising for the building; Chairman of the UC Regents Richard Blum; and UC President Mark Yudof. In recognition of the Broad gift, the UCSF Institute for Regeneration Medicine will be renamed the Eli and Edythe Broad Center of Regeneration Medicine and Stem Cell Research. The Center will comprise 125 research groups, 25 of which will be housed in the new building.
- The legendary Ward 86 at the San Francisco General Hospital celebrated its 25th anniversary and was featured in media coverage of World AIDS Day. Ward 86 is the oldest AIDS outpatient clinic in the world, and is renowned for its pioneering care of individuals with AIDS.

Academic Initiatives

Innovation is a constant in the academic life of UCSF. Here are a few examples from the past year.

- The School of Medicine launched a major curricular initiative known as "Pathways to Discovery," to provide students with the opportunity for in-depth training in any of five focus areas. The School's new Department of Emergency Medicine, chaired by Michael Callaham, admitted its first class of postgraduate trainees this past autumn.
- The Schools of Medicine and Pharmacy are awaiting final approval of their joint Department of Bioengineering and Therapeutic Sciences, which will be the first interschool department in the history of UCSF co-chaired by Kathleen Giacomini and Sarah Nelson.
- The School of Pharmacy established two new Centers, one for Translational and Policy Research for Personalized Medicine, the other for Medication Outcomes.
- The first students for the new masters degree in Global Health Sciences matriculated in the autumn of 2008.
- Professor Haile Debas, former Dean of the School of Medicine and Chancellor, and now Executive Director of Global Health Sciences at UCSF, is spearheading an initiative to create a multicampus School of Global Health within UC. The initiative recently received a \$4 million planning grant from the Bill and Melinda Gates Foundation.

Faculty Life

- Two more rounds of leadership training in collaboration with the Coro Center for Civic Leadership were completed, bringing the number of faculty who have participated in the program to 94. (Two leadership programs directed towards staff also have been established: the Leadership Academy and the Leadership Institute.)
- Our faculty development program held several well-attended sessions on leadership, negotiating, financial management, and academic advancement.
- The campus-sponsored mentoring program is now well established, with career mentors assigned to virtually all new and junior faculty.
- Welcoming Week for new faculty was expanded and strengthened, to good effect.
- Biographies of new faculty are now routinely posted on the UCSF website at monthly intervals.

Student Academic Affairs

- The campus implemented several improvements in student services, including: a new online course schedule; wireless access in Parnassus Heights classrooms; online payment of student fees; electronic transfer for all financial aid; a new lecture-capturing system; and approval of a common academic calendar, to be implemented for the academic year 2009-10.
- Beginning this past fall, students were given the opportunity for the first time to waive university-provided health insurance if they possess comparable health insurance through a job, parent, spouse or partner.
- The School of Pharmacy's Doctor of Pharmacy Program was reaccredited, with high praise.

Facilities

- The Helen Diller Family Comprehensive Cancer Center Research Building at Mission Bay is due to open in the coming spring. The building will make possible a doubling of scientists studying cancer at UCSF.
- Construction of the cardiovascular research building at Mission Bay is proceeding well and on schedule for completion in late 2010.
- The site for the new stem cell research building behind the Health Science research towers at Parnassus Heights has been cleared and the first stirrings of construction are evident. The building is scheduled for completion by 2010.
- Ground was broken for construction of a building at Mount Zion to house the Osher Center for Integrative Medicine and facilities for the Division of General Internal Medicine.
- Construction has begun to transform the second floor of the Kalmanowitz Library into a learning center that will focus on delivery of health care to underserved populations.
- A new childcare center is under construction on Kirkham Street behind the School of Dentistry, with opening scheduled for the Fall of 2009. The Lucia Childcare Center on Parnassus Avenue will then be converted to an infant care center, an urgent need at UCSF.
- Our Development Office has moved from its previous quarters to newly renovated (and less expensive) space at 220 Montgomery Street.
- The campus established a Chancellor's Advisory Committee on Sustainability to augment UCSF's efforts at reducing its environmental footprint.

Passage of two important ballot initiatives in the recent November elections will benefit health care provided by UCSF faculty and staff: California Proposition 3, which will provide capital funds for children's hospitals throughout California (UCSF's share will be \$39 million); and San Francisco Proposition A will provide nearly \$900 million towards construction of a new San Francisco General Hospital.

UCSF Medical Center

- Demand for services continued to grow, setting a new record for inpatient census and keeping operations near or at capacity throughout the year a taxing circumstance for staff, nurses and physicians alike. The Medical Center enjoyed another year of strong financial performance.
- The UC Regents have approved the environmental impact report, architectural design and construction budget for clinical facilities at UCSF Mission Bay, which will include hospitals for children, women and cancer patients.
- Development began for a new UCSF Orthopaedic Institute in a facility adjacent to the Mission Bay campus.
- Improvements in information technology within the Medical Center were recognized by the GE Customer Innovation of the Year Award, and selection as a partner by GE to develop the next generation of clinical information systems.

UCSF and the Corporate World

- UCSF continued its efforts to improve interactions with the corporate world. These efforts have been rewarded with a 135% increase in corporate funding of research at UCSF over the past three years, to a yield this past year of \$110 million. But augmented revenue is only part of our purpose. We also wish to facilitate the translation of fundamental discoveries into benefits for health care, a translation that can be greatly enhanced by cooperative interactions between academia and the corporate sector.
- In a further manifestation of our progress, the San Francisco Business Times praised our "culture of cooperation" and featured a recently approved master agreement that facilitates collaborations between scientists at UCSF and Genentech. A senior officer at Genentech told the Business Times that he would like to see "other universities adopt a similarly enlightened approach.
- UCSF and the Pfizer pharmaceutical company entered into a three-year agreement that will provide up to \$9.5 million in funding for early stage research that might eventually lead to new therapeutics or other biomedical tools.
- The American Medical Student Association recently graded 150 U.S. medical schools

on their conflict of interest policies. UCSF was one of only seven schools that received an A (UCLA and UC Davis were among the others), and only 15% of the schools received a B or better. Forty percent got an F.

Planning

- UCSF unveiled a new Strategic Plan last year. A progress report on implementation of recommendations in the plan was published last month and can be found at http://strategy.ucsf.edu/.
- The steady expansion of UCSF in the Mission Bay neighborhood has led us to cooperate with the local community in developing a set of Planning Principles, designed to mitigate concerns about the impact of our expansion. The scope and specificity of the principles are exceptional among UC practices. The Principles were approved by the UC Regents as an amendment to our Long Range Development Plan.
- The School of Pharmacy completed and released a five-year strategic plan entitled "Pressing Ahead in New Directions."

Information Technology

- There is hardly any aspect of information technology (IT) that has not needed improvement at UCSF. The campus leadership is acutely aware of the deficiencies and how important it is to remedy them. We have made substantial investments in IT over the past decade, but are still far from achieving state-of-the-art. The principal limitation has been financial resources.
- A select advisory committee composed of faculty and staff recently reported on the need to invest further in IT. Among its major recommendations: a recharge system that would generate sufficient funds to rectify the deficiencies. A newly formed Data Services Recharge Committee is developing plans to act on that recommendation. Recharges for IT support are commonplace among UCSF's peer institutions, both within UC and at other universities.
- Meanwhile, scrutiny and actions addressed to IT security were augmented during the
 past year; a new campuswide online procurement system was implemented; installation of wireless capability was completed at Parnassus Heights and the Mission Center
 Building, and is underway at Mission Bay and Laurel Heights; and construction was
 initiated for both a new voice and data network across the multiple UCSF sites, and a
 new campus data center.

Diversity

- The UCSF ten-point diversity initiative is entering its third year. Objectives of the initiative are available at http://pub.ucsf.edu/today/news.php?news_id=200702281 and progress on diversity issues is addressed in the strategic plan progress report at http://strategy.ucsf.edu/.
- UCSF is making slow but steady progress in diversifying its senior leadership, which
 now includes six females and five minorities among the group represented by the
 Chancellor, Executive Vice Chancellor and Provost, Vice Provosts, Senior Vice Chancellors, Vice Chancellors, Associate Vice Chancellors and Deans. White males now
 comprise less than half of this group, although they remain a slight majority among the
 most senior positions.
- UCSF is now among the top tier of U.S. universities in the representation of women on its faculty.
- UCSF was cited as a "model institution" for diversity practices by the Minority Access 9th National Role Model Conference.
- The campus launched an online system that has greatly improved assessment of the pool in faculty searches.
- The Academic Outreach Program completed an inventory of all UCSF outreach programs and made recommendations for how the programs might be strengthened and better coordinated.
- The School of Medicine was cited by an independent study as the most improved among all UC medical schools for diversity among its student body.
- The campus unveiled a large mural that celebrates the many forms of diversity. Designed and executed by the San Francisco artist Juana Alicia, the project was initiated by the Chancellor's Advisory Committee on Diversity and supported by chancellor's funds.

Private Support

- Fiscal year 2008 was a banner year for philanthropy at UCSF, with a yield of \$366 million in cash from private sources by far the largest amount ever raised by UCSF in a single year and an 82% increase since 2006. UCSF received nearly 35,000 gifts. Private support for UCSF now exceeds the funds received from the state budget.
- Highlights for the year included two contributions for construction of our stem cell research building \$34 million from the California Institute for Regenerative Medicine, and \$25 million from the Eli and Edythe Broad Foundation, as described above; an \$18

million bequest from Kenneth Rainin to support research on inflammatory bowel disease; and a \$10 million gift from the Charles and Helen Schwab Foundation to establish a new Center for the Prevention of Heart and Vascular Disease.

- Receipts during the first quarter of the current fiscal year were even higher than last year's record pace, but realism dictates that we anticipate a decline as the year proceeds and the economic slump continues.
- UCSF leads the UC system in dollars raised per FTE in the Development Office the figure is roughly twice that achieved by any other UC campus. Accordingly, our cost of seven cents per dollar raised is well below the systemwide or national mean.

Conclusion

I had been on the UCSF faculty for thirty years when I assumed the chancellorship in 1998. I had known and worked closely with the last three of my predecessors. Yet I took office less than certain about what to expect of the job. The truth of the matter is that no reasonable expectation could have prepared me for the ensuing metaphorical "surprise a minute." Some of the surprises have been exhilarating, others unwelcome.

How could it be otherwise? UCSF has more than 18,000 employees and ranks among the top ten of all U.S. public universities in its operating budget. The expectations and values that animate the place are extraordinary, but so are the possibilities for mishap and mischief. The saving grace is that we succeed much more often than we fail, and in doing so, we set an example that is admired around the globe.

I may not have known what to expect of the chancellorship, but I thought I knew UCSF well after thirty years on the faculty. I was wrong about that. The last ten years have revealed many facets of UCSF that I had not previously encountered, each of which contributes to our prowess as a place of discovery, learning and healing. And I have met numerous individuals whose commitment to UCSF and pride in working here are remarkable. There are many more like them whom I have not met and – to my great regret -- will now probably never meet.

I am occasionally asked what I have liked most about the job of chancellor. My inevitable answer is "the people," both those with whom I have worked directly and those countless others whom I could only admire from a distance or in passing. I thank you all for your service to UCSF, and for helping to make my experience as chancellor both stimulating and gratifying. Happy New Year!

Sincerely, J. Michael Bishop, M.D. Chancellor Arthur and Toni Rembe Rock Distinguished Professor

A

Abbas, Abul K. 17, 639

Abby, Susan 798

Abelson, John 19

Abraham Lincoln High School 911

Abrams, Donald I. 201, 718

Academic Geriatric Resource Center 323

Academic Research Systems (ARS) 411

Academic Senate 113, 147, 160, 169, 170, 171, 174, 312, 325, 341, 416, 873, 879, 882

Accounting & Reporting 393

Accounts Payable 396

Adams, Dale W. 798, 800

Adams, Michael B. 10, 318, 327

Adler, Nancy E. 17, 707

Administrative Services 392

Affiliated Colleges 117, 118, 119, 121, 123, 125, 126, 128, 130, 133, 134, 142, 144, 174

Affirmative Action/Equal Opportunity/Diversity 327

Agabian, Nina 696

Agard, David A. 16, 864, 901

AHEC 193

AIDS. See under Diseases

AIDS Research Institute. See under Institutes

Albert Lasker Award for Basic Medical Research. See under Awards

Alberts, Bruce 16, 19, 911

Aldredge, Brian 798

Alexis H. Purcell 451

Alicia, Juana 879, 886, 917

Alldredge, Brian K. 800

Alpern, Robert 587

Alzheimer's Disease. See under Diseases

Ambulatory Care Center 180, 182, 616

AMC Strategies, LLC 21, 447, 887

American Academy of Arts & Sciences. See under Associations

American Academy of Nursing. See under Associations

American Association for the Advancement of Science. See under Associations

American Association of Colleges of Pharmacy. See under Associations

American Association of Dental Schools. See under Associations

American Board of Internal Medicine 312

American Cancer Society 597, 876

American College of Dentists 313

American Dental Association. See under Associations

American Legacy Foundation. See under Foundations

American Medical Student Association 915

American Society for Clinical Investigation 587

American Society of Transplantation 587

Amgen Foundation. See under Foundations

Ammann, Arthur 200

Anatomy 503, 732

Anderson, Courtney 308

Antrum, Sheila 754, 834, 836

Application Services 412

Area Health Education Center (AHEC) 182

Arenson, Ronald L. 675

Arieff, Allen 587

Arnold D'Ancona 128, 132, 136

Arthritis Foundation. See under Foundations

Artiga, Nelson 450

Arts & Events 401

Ascher, Nancy L. 17, 681

Asp, James 10, 298, 426, 431, 881, 895, 911

Associate Vice Chancellor of Administration 410

Associate Vice Chancellor - Student Academic Affiars 329

Association of American Medical Colleges (AAMC). See under Associations

Association of American Physicians. See under Associations

Association of Collegiate Schools of Nursing. See under Associations

Associations

American Academy of Arts & Sciences 19, 491, 503, 867, 871, 875, 876, 883, 902, 910

American Academy of Nursing 890

American Anthropological Association 509

American Association for the Advancement of Science 867, 871

American Association of Colleges of Pharmacy 151, 890

American Association of Dental Schools 313

American Dental Association 149, 876

Association of American Medical Colleges (AAMC) 312, 875

Association of American Physicians 312, 587

Association of Collegiate Schools of Nursing 147

California Medical Association (CMA) 314

California Nurses Association 130

Atlantic Philanthropies. See under Foundations

Attkisson, C. Clifford 205, 209

Awards

Albany Medical Center Prize in Medicine and Biomedical Research 910

Albert Lasker Award for Basic Medical Research 199

American Society of Nephrology Young Investigators Award 587

Belding Schribner Award 587

Christiane Reimann Prize 875

Economic Development Award 911

Episteme Award 883

Flexner Award 876

GE Customer Innovation of the Year Award 915

Hans Neurath Award 910

Heinz Award 910

Herbert W. Nickens Prize 876

Lasker Award 20, 889

L'Oreal-UNESCO Award 910

Nobel Prize 14, 137, 197, 199, 204, 309, 311, 539

Paul Ehrlich and Ludwig Darmstaedter Prize 910

Peter Gruber Prize in Genetics 889

Peter Gruber Prize in Neuroscience 890

Pollin Prize in Pediatric Research 883

Purpose Prize 911

Royer Award 883

Shaw Prize 911

Stanley Korsmeyer Award of the American Society for Clinical Research 890

Stein and Moore Award 910

Volwiler Research Achievement Award 890

Warren Triennial Prize 309

Wiley Prize in Biomedical Science 889

Aweeka, Francesca 696

В

Bade, Michael 10, 380, 912

Bailey, June 171

Bain, Catherine 754, 756

Bainton, Dorothy (Dee) 17, 870

Balestreri, Kathleen 210

Balkenhol, Stephan 886

Barbour, Jason D. 696

Barclay, Steve 8, 9, 10, 380, 381, 416, 911

Baron, Bobby 486

Barondes, Samuel H. 17

Barrows, David P. 144, 145, 152, 175

Basbaum, Allan I. 17, 19, 20, 503

Baxter, John D. 16, 17

Beauchamp, Kevin 426

Beckett, F. A. 117

Beckman Vision Center 616

Behr, Herman H. 102, 112

Belding Schribner Award. See Under Awards

Bellevue. See under Medical Centers

Bell, H. Glenn 156

Benet, Leslie 17, 875

Benner, Patricia 786

Bennett, Leslie 167, 174, 176

Benowitz, Neal 580

Berger, Mitchel S. 596

Berg, Sharon 527

Bernard Osher Foundation. See under Foundations

Bertolami, Charles N. 205, 209, 486

Betbeze, James 450

Biddle, H. C. 151

Bidwell, Davidson 390

Bill and Melinda Gates Foundation. See under Foundations

Binder, Renee 10, 486

Biomechanics Laboratory 196

Biomedical Sciences Program (BMS) 503, 527, 539, 611, 876

Bird, William F. 450, 454, 477

Bisexual and Transgender (LGBT) Resource Center 444

Bishop, J. Michael. See under Chancellors

Black Bulletin 181

Blackburn, Elizabeth 16, 17, 19, 20, 207, 875, 887, 889, 890, 895, 910

Black Caucus 181

Bluestone, Jeffrey A. 10, 19, 711, 912

Blum, Richard 912

Bodenheimer, Thomas 910

Booth, Howard S. 748

Borland, Judy 472

Bourne, Henry R. 16, 17, 19

Boyer, Herbert 16, 19, 20, 196, 198, 875

Brain Tumor Research Center 196

Braveman, Paula A. 17

Braxton, Keith 380

Brear, Sheila 450

Brennan, Deborah 9, 10, 308

Brenner, Barry 587

Brigg, LeRoy 156

Brigham and Women's Hospital. See under Medical Centers

Brindis, Claire D. 742

Broad, Edythe 912

Brodskey, Francis M. 733

Broome, Anne 380

Brown, Adelaide 110, 137

Brown, Charlotte Amanda Blake 110

Brown, Kathleen 380

Brown, Willie 912

Brunn, Harold 156

Bryan, Edith 146, 160, 170, 171

Buchbinder, Susan 696

Budd, James H. 116

Budget and Resource Management 1, 386

Buildings

Arthur and Toni Rembe Rock Hall 207

Byers Hall 884, 892

Cancer Research Building, Helen Diller Family 3, 208, 877, 895, 896, 903, 914

Cardiovascular Research Institute Building 3

Clinics Building 185

Community Center at Mission Bay 866, 871, 877, 883, 897, 903

Donohoe Building 114, 118, 124, 126

Genentech Hall 207, 826, 866, 871, 877, 878, 897

Health Science East and West 185

Millberry Union 180

Neurosciences Building 3

School of Dentistry building 185

School of Nursing building 185

Toland Medical Building 111, 114, 115

University Hall 871, 877

University House 185

Bunker, Mary F. 639

Busch, Michael 696

Business and Resource Management (BRM) 412, 414

Business Contracts (BC) 390

Business Week. See under Publications

Butter, Karen 10, 211, 318, 349

Byers, Brook 884, 910

Byers Hall 207. See under Buildings

C

Caffey, Marie 343, 659

Calarco, Patricia 10, 205, 209, 318, 338, 902

California Academy of Sciences 112

California Institute for Quantitative Biomedical Research (QB3). See under Institutes

California Institute for Quantitative Biosciences (QB3). See under Institutes

California Institute for Regenerative Medicine. See under Institutes

California Institute of Science and Innovation (Cal ISI). See under Institutes

California Medical Association (CMA). See under Associations

California Nurses Association. See under Associations

California Pacific Medical Center. See under Medical Centers

California Pharmaceutical Society 107, 108, 139, 801

California Poison Control System 204

California School of the Deaf 183

California State Journal of Medicine. See under Publications

Callaham, Michael A. 563, 901, 902, 913

Cameron, Kathleen 211

Campbell, William W. 145, 152, 153, 154, 175

Campus Events Calendar 295

Campus Life Services 280, 401

Campus Police 417

Campus Procurement and Business Contracts 390

Campus Procurements (CP) 390

Campus Projects and Facilities Management (CPFM) 407

Campus Sites

China Basin 574, 583, 675, 676

Laurel Heights 4, 187, 263, 583, 659, 916

Medical School building 130, 132

Medical Sciences Building 169, 172, 173, 177, 182, 185, 187

Mission Bay 3, 97, 202, 204, 207, 208, 262, 268, 272, 286, 434, 583, 586, 659, 676, 728, 803, 866, 868, 870, 871, 872, 873, 875, 877, 878, 879, 881, 883, 884, 885, 886, 887, 892, 894, 895, 896, 897, 901, 903, 904, 905, 907, 910, 911, 914, 915, 916

Mission Center 263, 872, 916

Mt. Zion 3, 4, 262, 289, 467, 574, 639, 689, 867, 895, 896, 903, 914

Parnassus Heights 2, 3, 4, 96, 119, 126, 132, 133, 134, 135, 136, 137, 138, 144, 146, 147, 148, 149, 154, 156, 158, 159, 160, 161, 162, 164, 167, 168, 169, 170, 171, 172, 174, 176, 177, 181, 182, 185, 186, 187, 190, 196, 208, 262, 265, 266, 583, 591, 610, 639, 659, 689, 835, 867, 871, 872, 877, 878, 879, 884, 886, 892, 894, 895, 896, 904, 905, 912, 914, 916

Pasadena Hospital 146

Cancer Center. See Comprehensive Cancer Center, Helen Diller Family

Cancer Research Building, Helen Diller Family. See under Buildings

Cancer Research Institute (CRI). See under Institutes

Canning, Marcia 9, 10, 380

Capital Accounting 393

Capital Projects & Facilities Management 280

Capra, Richard Eugene 624

CAPS. See Center for AIDS Prevention Studies (CAPS)

Cardiovascular Research Institute (CVRI). See under Institutes

Carey, Henry Benjamin 136

Carlisle, Sue 486

Carman, Sharon 308

Carnegie Foundation. See under Foundations

Carol E 563

Caroline Damsky 451

Carroll, Peter R. 486, 688, 689

Cassman, Marvin 867, 870

Castillo, Eloisa 308, 327

Castro, Joseph I. 10, 318, 329, 891, 892

Catellus Corporation 204, 871

Cech, Thomas R. 862

Cedars, Marcelle 609

Cell and Tissue Biology 452, 463

Cellular and Molecular Pharmacology (CMP) 527

Center for AIDS Prevention Studies (CAPS) 201, 263, 291, 589

Center for BioEntrepreneurship 335

Center for Craniofacial Anomalies 472

Center for Gender Equity - 282

Center for Health and Community 263, 488, 708, 788

Center for Reproductive Sciences (CRS) 488, 610, 732

Center for the Prevention of Heart and Vascular Disease 918

Center of Science Education & Opportunity 329

Centore, Linda 450

Chancellors

Bishop, J. Michael 5, 8, 9, 10, 14, 15, 16, 17, 19, 20, 197, 199, 201, 205, 206, 207, 209, 308, 309, 311, 368, 380, 426, 539, 733, 738, 760, 841, 869, 873, 880, 888, 900, 908, 918

Debas, Haile T. 8, 9, 17, 19, 205, 209, 311, 318, 696, 849, 868, 876, 891, 905, 913

Fleming, Willard C. 174, 176, 190, 313

Krevans, Julius R. 17, 195, 202, 205, 311, 312

Lee, Philip R. 17, 194, 195, 196, 312, 743

Martin, Joseph B. 205, 311, 860

Saunders, John B. 156, 174, 190, 314

Sooy, Francis A. 312

Chancellor's Advisory Committee on Diversity 917

Chan, John 609

Chapman, John 834

Charles and Helen Schwab Foundation. See under Foundations

Chater, Shirley S. 17

Chemical and Engineering News. See under Publications

Chertow, Glenn 587

Child & Elder Care 282, 401

Children's Hospital-Oakland. See under Medical Centers

Chiron Corporation 199, 287, 897, 903

Chlamydia Research Laboratories 197

Christiane Reimann Prize. See under Awards

Chronicle of Higher Education. See under Publications

City and County of San Francisco 200, 204, 262, 313, 907

Cleaver, James 16

Clements, John 16, 19, 20, 590

Clinical and Translational Science Institute (CTSI). See under Institutes

Clinical Sciences 187

Cochlear Implant 13

Code of Conduct 374

Code of Ethics 373

Cogan, Martin 587

Cohen, Fred E. 17, 910

Cohen, Neal 486

Cohen, Stanley 198, 875

Cole Hall 190

Cole Hall Cinema 294

Cole, R. Beverly 103, 105, 106, 107, 116, 117

College of Dentistry 99, 113, 138, 149, 150, 163, 176

College of Medicine 136

College of Pharmacy 111, 112, 113, 115, 117, 121, 123, 134, 136, 141, 151, 152, 156, 157

Communicable Disease Prevention Program 332

Community and Governmental Relations (CGR) 441

Community Center at Mission Bay. See under Buildings

Community & Governmental Relations 280

Community Partnership Program 282, 284, 873, 885, 898

Comprehensive Cancer Center, Helen Diller Family 291, 311, 584, 609, 632, 639, 682, 700, 723, 732, 837, 866, 907

Comroe, Julius 166, 175, 176, 590

Conant, Marcus 199, 200

Conference Services 401

Conflict of Interest Admisory Committee 359

Contracts and Grants Division 359

Controller's Office 392

Cooper, Elias Samuel 104

Cotterman, Rob 380

Coughlin, Richard 890

Coughlin, Shaun R. 16, 17, 19, 727, 890

Cox, Jeffrey 876

Crawford, Margaret A. 130, 131

Crayne, Richard 193

Credé, Robert H. 191

Creutzfeldt-Jakob Disease. See under Diseases

Crockett, Wanda Ellison 318, 319

Cullander, Christopher 798

Cullen, Stuart C. 551

Cummings, Steven R. 17

Cushing, Harvey 122, 156

Customer Support Services (CSS) 413

Cyster, Jason G. 864

D

Damsky, Caroline 450

D'Ancona, Arnold 116, 119, 121, 129, 130, 131, 133, 135

Daniels, Troy C. 157, 174, 191

Daniels, Troy E. 210

Dare, Donna C. 798, 800

Darney, Philip D. 17, 608

Davidson, Forrest 367

Davis, Grae 516

Davis, Gray 866, 870

Dawson, Chandler 368

Day, Robert L. 210, 798, 800

Debas, Haile T.. See under Chancellors

Defranco, Anthony L. 539

De Luca, John 859

Den Besten, Pamela 450

Dennis, S.W. 108, 109

Dental Department 114, 120, 123, 126, 136

Dental Scientist Award Program. See under Awards

DePeralta, Brenda Gee 308

DeRisi, Joseph 20, 864, 876, 910

Derugin, Lydia 426

Derynck, Rik 450, 717

Des Jarlais, Christine 338

Diabetes. See under Diseases

Diamond, LaDene 10, 392

Diettinger, Don 906

Diller, Helen 872, 877, 895, 896, 903, 907

Diller, Helen Family Comprehensive Cancer Center. See Comprehensive Cancer Center, Helen Diller Family Dilley, James W. 696 Dill, Ken A. 798, 800, 910 Dinccag, Yuksel 654 Disabled Students Services 329 Disbursements 396 Discover Magazine. See under Publications Diseases AIDS 13, 197, 199, 200, 263, 288, 290, 291, 311, 371, 456, 472, 488, 520, 534, 574, 581, 588, 589, 617, 660, 662, 696, 770, 775, 857, 860, 861 Alzheimer's Disease 199, 602, 857, 860, 861 Creutzfeldt-Jakob Disease 199 Diabetes 13, 711, 776, 799 Hepatitis B 13, 178, 199 HIV 13, 200, 201, 288, 290, 291, 472, 520, 557, 558, 568, 581, 586, 588, 589, 660, 661, 696, 770, 771, 775, 805, 860, 861 HIV/AIDS 198 Huntington's Disease 861 Kaposi's Sarcoma 199, 200, 201 Parkinson's Disease 199, 596, 597, 603, 861 **SARS 871** Sjögren's Syndrome 369, 371, 472 Distribution & Storage 401 DNA 13, 178, 354 Documents, Media & Mail 280, 401, 402 Dodd, Marylin 883 Dolan, Brian 210 Dolby, Ray and Dagmar 896, 912 Dolhancryk, Larisa L. 539 Donaldson, Nancy 754, 756 Donohoe Building. See under Buildings Doupe, Allison 910 Dowdall, Major F. 141 Dowling, Glenna A. 754, 780, 890 Dracup, Kathleen A. 8, 9, 17, 205, 209, 754, 755 Drake, Michael 876 Duca, Rob 798, 800 Durie, Stanley 170 Dynes, Robert 884 E

Eakle, Warren 450 Earley, Laurence 587 Economic Development Award. See under Awards Edelman, Isidore 587 Eisele, David W. 630

Eli and Edythe Broad Center of Regeneration Medicine and Stem Cell Research 912

Eli and Edythe Broad Foundation. See under Foundations

Ellis, Jeff 298, 426, 431

Ellison-Crockett, Wanda 10, 359

El-Samad, Hana 911

Englebert-Dunphy, J. 191

Enterprise Information Security (EIS) 413

Enterprise Network Services (ENS) 414

Episteme Award. See under Awards

Epstein, Charles J. 17, 19

Ernest Gallo Clinic & Research Center (EGCRC) 544, 602, 603, 859

Ernest Lawrence 155

Estes, Carroll L. 17, 793

Evans, Herbert McLean 122, 169

Executive Vice Chancellor & Provost 870, 875

Extramural Funds 397

F

Faucett, Julia A. 767

Fawley, Reece 834

FDA 198, 354, 552

Featherstone, John D. B. 9, 205, 450, 451, 890, 902, 912

Feinstein, Diane 313

Feldman, Mitchell 886, 894

Fellouris, Mara 380

Fenzel, Paula Elaine 596

Fernandes, Roxanne 834

Ferriero, Donna 17, 486

Ferris, Tom 450

Fetal Treatment Center 291

Fetto, Phyllis K. 742

Fields, Howard L. 720

Finance 385

Financial & Administrative Systems 397

Financial Reporting 393

Financial Services Department (AVCA) 423

Finzen, Frederick 450

Fisher, Susan 450

Fishman, Robert 602

Fitness & Recreation 401, 402

Flagg, Dr J. Foster 102

Fleming, Graham 870

Fleming, Willard C.. See under Chancellors

Flexner, Abraham 133, 134, 143, 145, 150, 175, 876

Flexner Award. See under Awards

Flint, Joseph Marshall 120

Flood, Marilyn 210

Flynn, Bruce 380, 399

Folkman, Susan 718 Fong, Victoria 426 Fontaine, Dorothy (Dorrie) 754, 756 Foreman, Gary 380 Foundations

American Legacy Foundation 890

Amgen Foundation 898

Atlantic Philanthropies 907

Bernard Osher Foundation 873

Bill and Melinda Gates Foundation 913

Carnegie Foundation 134, 149

Charles and Helen Schwab Foundation 918

Eli and Edythe Broad Foundation 912, 917

Gladstone Foundation 197, 200

Gordon and Betty Moore Foundation 877, 892

Hooper Foundation 136, 144, 201, 309, 488, 733

Mt. Zion / UCSF Foundation 184

National Science Foundation 909

Polio Foundation 168

Proctor Foundation 366, 367, 368, 369

Robert Wood Johnson Foundation 196, 892

Sandler Family Supporting Foundation 896

W.M. Keck Foundation Center for Integrative Neuroscience 199, 203

W.M. Keck Foundation for Integrative Neurosciences 544, 631

Fox, Patrick 754, 792

Franklin Mall 154

Freedman, Joyce 10

French, Barbara 10, 426, 437, 882, 885

Fresno Medical Education Program 264, 493, 898

Fritz, Jeffrey 380, 414

Fu, Karen 669

Fulford, Millie-Hughes 203

G

Gallo Clinic and Research Center 197 Ganem, Donald E. 17, 19, 733, 864

Gango, Angelina 463

Ganong, Francis 174

Garzio, Catherine 675

Gates, Elena 609

Genentech Corporation 198, 287, 884, 915

Genentech Hall. See under Buildings

General Accounting 394

General Clinical Research Center 197, 732

Giacomini, Jon 380

Giacomini, Kathleen M. 17, 798, 800, 815, 890, 913

Gies, William 149, 150, 158

Gilman, Daniel Coit 99, 108, 110, 111, 175

Giudice, Linda C. 17, 608, 882

Gladstone Foundation. See under Foundations

Gladstone Institutes. See under Institutes

Glantz, Stanton A. 17

Glaser, Barney 197

Gledhill, Jon 380

Glide Memorial Clinic 204

Global Health Sciences 8, 208, 891, 905, 913

Gluck, Stephen 587

Goldberg, Andrew 631

Goldberg, Henry 677

Goldman, Andrea 450

Goldman, Lee 17

Gold Rush 98, 100, 101

Gordon and Betty Moore Foundation 910

Goyan, Jere E. 191, 192, 205

Graduate Division 178, 180, 182, 187, 189, 190, 202, 203, 206, 207, 208, 338, 339, 340, 341, 655, 891, 892, 898, 902, 906

Grady, Deborah 754

Graham, Kent 767

Graham, Sarah 426

Grazer, Frederick A 112

Greenberg, David 155, 174

Greenblatt, Ruth 696, 883

Greene, John C. 17, 205

Greene, Warner C. 17, 696, 860

Green, Franklin T. 136

Greenling Institute. See under Institutes

Greenspan, Deborah 10, 17, 201, 450, 453, 472, 882, 902

Greenspan, John S. 9, 17, 201, 450, 451, 696

Gregg, Paulette 727

Greider, Carol 910

Grey Davis 207

Gross, Carol A. 16, 19

Grove, Andy 893

Grubbs, John 798, 800

Grumbach, Kevin 17, 567, 885, 898

Grumbach, Melvin 16, 17, 19

Gudelunas, Regina C. 786

Guerra, Maria 467

Guggenhime, Berthold 367

Guglielmo, B. Joseph Jr. 798, 800, 891

Guthrie, Christine 16, 19

Н

Haas, Walter 184

Halme, Dina Gould 486

Halsted, William S. 156

Hamilton, William K. 551

Hanahan, Douglas 901, 910

Hand, David 450

Hang, Tony Huoi 574

Hans Neurath Award. See under Awards

Hardesty, Irving 120

Hare, C. Bradley 696

Harper, Harold 188

Harrington, Charlene A. 17

Harris, Debra E. 825

Harris, Jay 834, 836, 882

Harrison, Michael 263

Harvard University. See under Universities

Hausen, Harold zur 201

Hauser, Stephen L. 17, 19, 602

Havel, Richard 16, 17, 19

Havlir, Diane V. 696

Hawgood, Samuel 9, 205, 209, 486, 646, 902, 912

Hawkins, Angela 380, 386

Hayes, Daniel J. 508

Health Science East and West. See under Buildings

Heard, Stuart E. 798, 800

Hearst, Phoebe 120

Hecht, Frederick (Rick) 696, 718

Heineman, Tonie 911

Heinz Award. See under Awards

Helen Diller Family Cancer Research Building. See under Buildings

Helen Diller Family Comprehensive Cancer Center. See Comprehensive Cancer Center, Helen Diller Family

Hellman, Warren 912

Hendrick, Larry 308

Henry Gibbons 105

Henry, Gwen 16, 898

Hepatitis B. See under Diseases

Herbert, Denly 450

Herbert W. Nickens Prize. See under Awards

Herzstein, Max 121

Hiatt, Robert 891

Hicks, Diana Lynn 616

Hildebrand-Zanki, Susanne U. 711

Hindery, Michael 486

Hind, Harry 367

Hine, Jim 380

Hinman, Frank 689

HIV. See under Diseases

Hobart, Louis Parsons 133

Hodges, Shirley 450 Hoener, Betty-ann 798, 800 Hogan, Michael J. 368 Holzemer, William L. 17, 754, 756 Honey, Sadie 211 Hooper Foundation. *See under* Foundations Hooper, George W. 136

Hooper Institute. See under Institutes

Hormone Research Laboratory 196

Horning, Dixie D 608

Hospitals. See Medical Centers

Housing 401, 403

Howard Hughes Medical Institute (HHMI). See under Institutes

Hoyt, Creig 368 Hsu, Chi-yuan 587

Hsu, Stella 10, 380, 401, 911

Hughes, Ellen 718

Hughes-Fulford, Millie 197

Hulley, Stephen B. 533

Human Genetics Program 311

Human Research Protection Program 352, 882

Human Resources 280, 281, 410, 421, 422, 423, 447, 906

Humboldt, Alexander von 102

Hume, Rory 902, 905

Humphreys, Janice 890

Humphreys, Michael 587

Huntington's Diseases. See under Diseases

Hurtado, Josue 210

I

Immune Tolerance Network 291

Industry Contracts Division 359, 360

Infectious Disease Laboratories 197

Information Technology Services (ITS) 411, 414

Institute for Aging Health Policy. See under Institutes

Institute for Global Health. See under Institutes

Institute for Health & Aging (IHA). See under Institutes

Institute for Health Policy Studies (IHPS). See under Institutes

Institute for Human Genetics. See under Institutes

Institute for Regenerative Medicine. See under Institutes

Institute of Medicine. See under Institutes

Institutes

AIDS Research Institute 311, 488

California Institute for Quantitative Biomedical Research (QB3) 867, 870, 875, 883, 892

California Institute for Quantitative Biosciences (QB3) 207, 867, 870, 871, 875, 877, 883, 884, 892, 905, 911

California Institute for Regenerative Medicine 905, 912, 917

California Institutes for Science and Innovation 207

Cancer Research Institute (CRI) 165, 488, 723, 871, 872

Cardiovascular Research Institute (CVRI) 166, 175, 176, 184, 196, 291, 590, 904

Clinical and Translational Science Institute (CTSI) 354, 891

Gladstone Institutes 200, 203, 544, 602, 603, 860, 861, 877, 897, 911

Greenlining Institute 868

Howard Hughes Medical Institute (HHMI) 293, 862, 864, 898

Institute for Aging Health Policy 197

Institute for Health & Aging (IHA) 198, 290, 788

Institute for Health Policy Studies (IHPS) 312

Institute for Regeneration Medicine 208, 266, 895, 904

Institute for Regenerative Medicine 4, 895, 904

Institute of Medicine 17, 18, 910

Langley Porter Neuropsychiatric Institute 181

Langley Porter Psychiatric Institute (LPPI) 343, 493, 659, 662

Milken Institute 897

Molecular Design Institute 827

National Cancer Institute 887

National Cancer Institute (NCI) 700, 701

National Heart Institute 166

National Institute of Arthritis and Metabolic Diseases (NIAMD) 167

National Institutes of Health (NIH) 164, 175, 186, 194, 203, 204, 208, 213, 309, 491, 552, 586, 587, 588, 590, 597, 675, 728, 732, 759, 802, 803, 826, 827, 857, 861, 867, 876, 882, 889, 891, 895, 899, 901, 905, 906, 909, 910

Northern California Institute for Research and Education (NCIRE) 857

Osher Lifelong Learning Institute 873

UCSF Orthopaedic Institute 915

Instructional & Research Technology Services (IRTS) 329

Insurance Services 399

Integrated Nurse Leadership Program 910

International Center for HIV/AIDS Research and Clinical Training in Nursing 198

Irby, David 486

Irwin, Michael 298, 426, 431, 911

Ives, Harlan 587

J

Jacobsen, Lynda J. 700, 723 Jacobson, Matthew P. 876

Jaffe, Robert B. 17

Jain, Sharad 876

James, Thomas L. 798, 800, 825

Jamison, Dean T. 17

Jan, Lily Y. 16, 19, 864, 901

Jan, Yuh Nung 16, 19, 864, 902

Jew, Jacqueline 646

Johansen, Kirsten 587

Johns Hopkins University. See under Universities

Johnson, Alexander 902

Johnson, Mallory 696 Johnson, Margaret 308 Jones, Barbara 380 Jones, Janet 380 Jones, Ken 834, 836 Jonsen, Albert 195 Jordan, Richard 450 Jordon, M. Evangeline 138 Jorgensen, Eugene 194 Journal for Dental Research. See under Publications Journal of Oral and Maxillofacial Surgery. See under Publications Julius, David J. 16, 19, 311, 544, 891, 902

K

Kalmanowitz Library 914 Kamerick, Michael 380 Kan, Yuet Wai 16, 19, 20, 875, 890 Kaposi's Sarcoma. See under Diseases Kellogg, Ralph 174 Kelly, K. H. 165 Kelly, Regis 8, 9, 10, 318, 319, 845, 870, 875, 905 Kenaani, Mounira 557 Kenyon, Cynthia 16, 17, 19, 876 Kenyon, George L. 205 Kerr, Clark 173, 190 Kerr, William B. 17, 183, 209 Kerr, William J. 142, 156, 166 Kessler, David A. 10, 17, 205, 209, 870 Kilmer, Jeffery 754 King, Martin Luther, Jr. 181 King, Talmadge E. 17, 578, 902 Kipfer, E. B 152

Kirkland, Mark 450, 452

Kirschbaum, Joel 10, 318, 363

Kleinberg, Leslie 210 Klein, Robert 912

Kniery, Penny 516

Kochi, Julia 210

Koda-Kimble, Mary Anne 8, 9, 17, 205, 209, 798, 799, 819, 902

Koo, Peter 193

Koret Center for Human Nutrition 197

Koret Vision Research Laboratory 616, 617

Kornberg, Thomas 19

Kotabe, Sharon E. 798, 800

Kough, Robert 309

Kountz, Sam 196

Kozloff, Lloyd 188, 205 Krevans, Julius R.. *See under* Chancellors Kriegstein, Arnold 717, 877, 910

\mathbf{L}

Laboratory Animal Resource Center (LARC) 353

Laboratory Medicine 574

LaDou, Joseph 210

Laguna Honda Hospital. See under Medical Centers

Lance, Anna 165

Landefeld, Seth 323

Lane, Drs. Levi Cooper 105

Langley Porter Psychiatric Institute (LPPI). See under Institutes

Langridge, Robert 17, 883

Laret, Mark R. 8, 9, 205, 209, 834, 835

Lasker Award. See under Awards

Laurel Heights. See under Campus Sites

Laurence Livermore National Laboratory 2

Lawrence Berkeley National Laboratory 2, 574, 702

Lawrence, John 155

Leake, Chauncey 153, 156, 157, 194, 551

Leake, Patricia A. 631

Lee, Philip R.. See under Chancellors

Lennette, Evelyne 201

Lesbian, Gay, Bisexual and Transgender (LGBT) Resource Center 444

Letterman Hospital. See under Medical Centers

Levine, Amy 426

Levings, Susan 798, 800

Levy, Jay A. 19, 200, 696

Lewis, Vickie Lynn 667

Library 349

Li, Cho Hao 167

Li, Choh Hao 196

Lima, Cindy 834

Lim, Wendell 911

Lin, Susan 380

Lisberger, Stephen G. 199, 864, 910

Lister, Sir Joseph 114

Liu, Stanley 876

Lo, Bernard 17

Locket, Judi 380

Locksley, Richard M. 19, 864

Loeb, Jacques 120, 121, 122, 154

Loeser, Helen 486

Long Hospital. See under Medical Centers

Long Range Development Plan 186, 916

Lopez, Georgina Y. 737

Lopez, Randy 9, 10, 380, 410, 411, 414, 416, 891, 894, 911

Los Alamos National Laboratory 2

Los Angeles Times. See under Publications

Lotenero, Larry 834, 836

Lovett, David 587

Lowell, Clifford A. 574, 891

Lowenstein, Daniel H. 798, 800

Lucas, William Palmer 135, 136

Lucile Salter Packard Children's Hospital. See under Medical Centers

Lucille P. Markey Charitable Trust 201

Luft, Harold S. 17

Lung Biology Center 197

Lynch, Cynthia 321

\mathbf{M}

Magnetic Resonance Imaging (MRI) 13, 184

Mahaney, Tim 834

Mah-Hing, Karen 754

Mahley, Robert W. 19, 860

Maimon, Tamara 325

Malone, Ruth 890

Margolis, Todd P. 10, 318, 366, 368

Margulis, Alexander R. 17

Marks, James 17, 890

Marshall, Grayson 450

Marshall, Sally 10, 318, 321, 882, 886

Martin, Gail 16, 19, 867

Martin-Holland, Judith 754, 756

Martin, Joseph B.. See under Chancellors

Martinson, Ida M. 17

Massachusetts General Hospital. See under Medical Centers

Massachusetts Institute of Technology (MIT). See under Universities

Massey, Carol E. 563

Mass Spectrometry Facility (MSF) 826

Max, Wendy 754, 792

McCartney, Robin 308

McClean, Robert 116

McCormick, Frank 17, 486, 539, 700, 723

McCune, Joseph M. (Mike) 697, 798, 800, 876, 891, 905

McDevitt, Christina D. 688

McEvoy Family 896

McKenzie, Richard 450

McLean, Robert 115

McLeod, Stephen D. 616, 891

Mead, Sally A. 533

Media & Mail 402

Medical Centers

Bellevue 110

Brigham and Women's Hospital 911

California Pacific Medical Center 689

Children's Hospital-Oakland 689

City and County Hospital of San Francisco 104, 106, 111, 123, 124, 128, 138

Laguna Honda Hospital 165, 182

Lakeside Senior Medical Center 583

Long Hospital 97, 184, 186, 312, 867

Massachusetts General Hospital 110, 309

Massachusetts Hospital 147

Memorial Sloan Kettering Cancer Center 882

Moffitt Hospital 97, 161, 166, 172, 173, 174, 177, 181, 186, 187, 191, 312, 467, 574, 801, 867, 878

Moffitt-Long Hospitals 265, 467, 493, 564, 574, 591, 609, 630, 639, 675, 835

Mt. Zion Hospital 156, 184, 493, 609, 630, 675, 872, 878, 884, 895, 905

Natividad Medical Center-Salinas 689

New England Hospital For Women And Children 110

New Haven Hospital 110

Peter Bent Brigham Hospital 167

San Francisco City and County Hospital 105

San Francisco County Hospital 689

San Francisco General Hospital (SFGH) 3, 4, 175, 182, 196, 197, 199, 200, 262, 289, 309, 467, 493, 551, 552, 557, 558, 564, 567, 568, 574, 580, 581, 582, 583, 584, 585, 586, 587, 590, 591, 603, 608, 610, 616, 618, 630, 639, 659, 660, 662, 675, 681, 689, 776, 856, 878, 885, 892, 912, 915

San Francisco Medical Center 366, 588

San Francisco VA Medical Center (SFVAMC) 3, 182, 197, 200, 262, 291, 467, 491, 493, 551, 557, 558, 574, 581, 582, 583, 584, 585, 587, 588, 610, 616, 618, 630, 639, 659, 661, 662, 675, 676, 689, 856, 857, 878, 885, 892, 910

Santa Monica Community Hospital 835

State Marine Hospital 103, 104

St. Luke's Hospital 130

St. Mary's Hospital 104

UC Hospital 132, 133, 134, 144, 145, 147, 158, 160, 169, 185

UC Irvine Medical Center 835

UCLA Medical Center 835

UC Medical Center 172, 181

UCSF Children's Hospital 3, 646, 835, 872, 878

UCSF Medical Center 4, 97, 178, 182, 183, 204, 288, 292, 295, 493, 581, 582, 583, 584, 585, 586, 587, 835, 867, 872, 875, 877, 878, 884, 885, 887, 891, 893, 895, 896, 897, 901, 904, 905, 909, 915

UCSF/Mount Zion 610

UCSF Stanford Health Care (USHC) 204, 311

University Hospital 130, 152

University of California Medical Center 127, 177

U.S. Marine Hospital 104

Valley Medical Center 182

Women's and Children's Hospital 110

Women's Hospital 3

Medical Department 113, 117, 119, 122, 124, 133, 135, 136

Medical School 132, 152, 163, 167

Medical Sciences Building. See under Campus Sites

Medicine, Department of

Division of Allergy Immunology 578

Division of Cardiology 579

Division of Endocrinology, Metabolism and Osteoporosis 581

Division of Gastroenterology 581

Division of General Internal Medicine 582

Division of Geriatrics 583

Division of Infectious Diseases 585

Division of Nephrology 587

Division of Rheumatology/Arthritis 590

Divisions of Hematology and Oncology 583

Hospital Medicine 584

Medical Effectiveness Research Center for Diverse Populations 586

Prevention Science 588

Pulmonary and Critical Care Division 590

UCSF General Clinical Research Center at SFGH 582

Mellon, Synthia H. 732

Memorial Sloan Kettering Cancer Center. See under Medical Centers

Merzenich, Michael M. 16, 631, 910

Meyer, K. F. 164

Meyers, Howard 189

Miaskowski, Christine 754, 756

Microbial Pathogenesis Program 463, 539

Milberry, Guy 138

Milken Institute. See Institutes

Millberry Fitness & Recreation 294

Millberry, Guy S. 139, 149, 150, 159, 176, 180

Millberry Union 177. See under Buildings

Miller, Robert 883

Miller, Ronald D. 17, 551

Millett, Margaret 503

Milliken, Nancy 486

Milstein, Arnold 17, 890

Mirsky, Zina 754, 756

Mission Bay. See under Campus Sites

Mission Center. See under Campus Sites

MIT. See under Universities

Mix, Lisa 210

Moffitt, Herbert C. 132, 133, 142, 152, 172

Moffitt Hospital. See under Medical Centers

Moffitt, James K. 132

Moffitt-Long Hospitals. See under Medical Centers

Molecular Design Institute. See under Institutes

Molecular Medicine Program 732

Molina, Sylvia E. 323

Monie, Ian 174

Morales, Esther E. 426, 434

Moreno, Mario 696

Morgan, David 834

Morin, Stephen F. 697

Morris, Curtis 587

Morris, James 193

Morrow, Louise 146

Morse, John F. 105

Mozesson, Judith 567

Mt. Zion. See under Campus Sites

Mt. Zion Hospital. See under Medical Centers

Medical Centers 835

Mt. Zion Research Building. See under Buildings

Mt. Zion / UCSF Foundation. See under Foundations

Mucke, Lennart 602, 860

Muinn, Maric 380

Murphy, Suzanne 335, 352, 359

Murray, John 590

Musgrave, William E. 146

N

Nadel, Jay 590

Naffziger, Howard C. 121, 122, 142, 156

Nahm, Helen 171, 193, 197

Najarian, John 196

Nakashige, Jocelyn 10, 380

Nakashima, Susan Yvonne 363

National Academy of Sciences 312, 491, 503, 867, 871, 876, 883, 901, 911

National Cancer Institute (NCI). See under Institutes

National Center of Excellence in Women's Health 290

National Heart Institute. See under Institutes

National Institute of Arthritis and Metabolic Diseases (NIAMD). See under Institutes

National Institutes of Health (NIH). See under Institutes

National Science Foundation. See under Foundations

Navarro, Renee 486, 902

Neisen, Joseph 426

Nelson Artiga-Diaz 452

Nelson, Karen 210, 338

Nelson, Sarah 913

New Business Architecture Program Management Office (NBA PMO) 416

Newlon, Molly 450

Newsom, Gavin 883, 885, 887

Newsweek International. See under Publications

Newton, Mildred 171

New York Times. See under Publications

Nicoll, Diana 486

Nicoll, Roger 16, 19, 890
Nieva, Rochelle 426
NIH. See under Institutes
Nobel Prize. See under Awards
Norbeck, Jane S. 17, 198, 205
Nordberg, Michael 815
Norris, Ron 380
Northern California Institute for Research and Education (NCIRE). See under Institutes
Nuclear Magnetic Resonance Laboratory (NMR) 826
Nussbaum, Robert L. 17

$\mathbf{0}$

Obstetrics 732 O'Connor, G. Richard 368 Odato, David 834 Office of Academic and Administrative Information Systems (OAAIS) 411 Office of Admissions and Registrar 329 Office of Career and Professional Development 329 Office of Environmental Health and Safety 352, 353 Office of Student Life 329, 330 Office of Technology Management 363 O'Halloran, Marge 551 Oncogenes 15, 309 Oneto, John 157 Ophthalmology 616 Oral and Maxillofacial Surgery 452, 467 Oral Medicine Clinical Center 472 Oral Pathology Diagnostic Laboratory 472 Orofacial Sciences 453, 472 Ortiz de Montellano, Paul R. 890 Osher Center for Integrative Medicine 4, 266, 488, 895, 896, 904, 914 Oshiro, Dan 860 Osler, William 123 Other Student Resources 329 Outdoor Programs 294

P

Padian, Nancy S. 17
Padilla, Geraldine (Geri) 754, 756
Papadakis, Maxine 486
Parker, Paul F. 902
Parking & Transportation 280, 281
Parkinson's Disease. *See under Diseases*Parks, Jay 792
Parnassus Heights. *See under Campus Sites*Pasquini, Millo Mau 845

Pasteur, Louis 114

Patterson, James N. 141

Paul Goldhaber Award. See under Awards

Paulsen, Lynn 798

Payroll 396

Pearce, David 587

Pearl, Jeffrey 486

Perez-Stable, Eliseo J. 17

Performing Arts Clubs 294

Perry, David 450

Perry, Dorothy A. 451

Peter Bent Brigham Hospital. See under Medical Centers

Peter Gruber Prize in Genetics. See under Awards

Peter Gruber Prize in Neuroscience. See under Awards

Petrie, Deborah J. 819

Pharmaceutical Chemistry 825

Phillips, Theodore L. 17

Physiology 732

Pickering, Mary May 147, 148, 160

Pinderhughes, Howard 754, 891

Pogrel, M. Anthony (Tony) 450, 452, 467

Police Department 280, 281

Polio Foundation. See under Foundations

Pollin Prize in Pediatric Research. See under Awards

Porter, Dorothy E. 210, 508

Porter, R. Langley 152, 153, 156, 161, 171

Portillo, Carmen 754

Powers, Jane 380

Preventive and Restorative Dental Sciences (PRDS) 454, 463, 477

Prions 14, 15

Proctor Foundation. See under Foundations

Proctor, Francis I. 168, 366, 367

Program in Biological Sciences (PIBS) 527, 528, 544, 611, 732

Program in Craniofacial and Mesenchymal Biology (CMB) 463

Program in Developmental Biology 503

Program in Quantitative Biology (PQB) 528

Protein Society 910

Prusiner, Stanley B. 14, 15, 16, 18, 19, 20, 199, 204, 748

Psychiatry 659

Ptáček, Louis 864, 901, 910

Public Affairs 261, 295, 437

Publications

Business Week 871

California State Journal of Medicine 129

Chemical and Engineering News 876, 882

Chronicle of Higher Education 901

Discover Magazine 876

Journal for Dental Research 149 Los Angeles Times 871 Newsweek International 92, 889 New York Times 871, 874, 893 Pacific Coast Journal of Nursing 147 San Francisco Business Times 915 San Francisco Chronicle 130, 871, 893, 907 Science Magazine 911 Synapse 295 The Scientist 911 Times Literary Supplement of London 876 UCSF Magazine 295 U.S. News & World Report 838, 876, 882, 889, 901, 909 Wall Street Journal 871 Puntillo, Kathleen 890 Purcell, Alexis 450 Putman, Kathryn Ione 309

Q

QB3 8, 867, 870, 871, 875, 877, 883, 892, 905, 910 Quint, Jeanne 197

R

Rainin, Kenneth 918 Raissi, Shahla 380 Rankin, Sally Heller 754, 775 Rec Sports 295 Rector, Floyd, Jr. 587 Red Cross 141 Reed, Patrick 380 Regents. See UC Regents Reichardt, Louis F. 19 Reingold, Arthur 697 Reinhardt, William 174, 190, 191 Research Administration Program (RAP) 359, 360 Research Center for Symptom Management 198 Retail 401, 403 Reyes, E. Michael 697 Reynolds, Penny 426 Rice, Dorothy P. 18, 792 Rice, Lorie G. 798, 800 Riegelman, Sidney 191 Riley, Daniel 426, 431 Ring, Ernest 834, 836, 875 Risch, Neil 877, 891 Risk Management Services 399

Rivera, Diego 159

Riverside 173

Roach, Mack 667, 668, 902

Robert Gesell 154

Robert G. Sproul 154

Robert McClean 116

Roberts, Clifford 318

Robert Wood Johnson Foundation. See under Foundations

Rockafellar, Nancy 210

Rock, Arthur and Toni Rembe 879

Rockefeller 143, 144, 145, 154

Rockefeller Foundation. See under Foundations

Rockefeller Institute 136. See under Institutes

Rock Hall. See under Buildings

Roe, Benson 196

Roldan, Arsenio 380

Rosalind Russell Arthritis Research Laboratories 197

Roskowski, Pamela 10, 380, 417

Rowitch, David H. 864

Rowley, Janet 912

Royal Society of London 20, 503, 876

Royer Award. See under Awards

Rubenstein, John 18, 890

Rudolph, Abraham M. 18, 883

Runyon, Edward W. 112

Rush Medical College. See under Universities

Rutherford, George W. 534, 697, 737

Rutter, William J. 198, 199, 903

Ryba, Tomi 834, 836

Ryder, Mark 450

S

Sall, Susan Kay 544

Samii, Deborah Z. 630

Sanchez, Elba 898

Sande, Merle 200

Sandler Family Supporting Foundation. See under Foundations

Sandler Neurogenetics Center 602

San Francisco Business Times. See under Publications

San Francisco Chamber of Commerce 911

San Francisco Chronicle. See under Publications

San Francisco City and County Hospital. See under Medical Centers

San Francisco County Hospital. See under Medical Centers

San Francisco Department of Public Health 585

San Francisco General Hospital (SFGH). See under Medical Centers

San Francisco Medical Center. See under Medical Centers

San Francisco Medical Society 314

San Francisco State University. See under Universities

San Francisco VA Medical Center (SFVAMC). See under Medical Centers

Santa Monica Community Hospital. See under Medical Centers

Santos, David 450

Sargent, Peter 450, 452, 463

SARS. See under Diseases

Sauer, Barbara 798, 800

Saunders, John B.. See under Chancellors

Schachter, Julius 196

Schechter, Gail 10, 318, 335

Schmid, Rudi 19, 893

Schmidt, Carl L. A. 154, 157

Schmidt, Heidi 380

Schmitt, Lionel 152

Schmitt, L. S. 137

School of Dentistry 174, 176, 183, 187, 189, 190, 203, 204, 207, 208, 263, 882, 889, 893, 898, 901, 902, 910, 912, 914

School of Global Health 913

School of Medicine 140, 149, 166, 172, 174, 176, 182, 189, 190, 191, 206, 208, 492, 835, 868, 876, 889, 892, 899, 901, 902, 905, 906, 909, 912, 913, 917

School of Nursing 96, 160, 170, 171, 173, 188, 193, 197, 198, 203, 207, 208, 755, 876, 877, 889, 891, 893, 896, 901, 906, 909, 910

School of Pharmacy 96, 174, 182, 187, 191, 192, 194, 203, 204, 206, 208, 801, 876, 882, 889, 892, 893, 898, 901, 902, 905, 909, 913, 914, 916

Schools of Dentistry 909

Schreiner, Christoph E. 631

Schrier, Robert 587

Schrock, Ted 875

Schroeder, Steven A. 18, 902

Schultz, Susan 477

Schumm, Daniel 681

Schwarzenegger, Arnold 870, 874, 896, 912

Science Magazine. See under Publications

Scott, Eugenie 912

Searby, William 126

Sebastian, Anthony 587

Serra, Richard 886, 894

Services to International Students & Scholars (SISS) 329

Severinghaus, John 590

Shane, Rita 798, 800

Shannon, Kevin 891

Shaw Prize. See under Awards

Sherman, Harry 130

Shokat, Kevan 864

Showstack, Jonathan 10, 318, 411, 882, 891, 894

Silva, Avelino 450

Simpson, Miriam 174

Sisco-Smith, Alma 318, 373

Sjögren's Syndrome. See under Diseases

Slaughter, Robert 754, 757

Sloan-Swartz Center for Theoretical Neurobiology 544

Smith, Donald 689

Smith, Lloyd H. ("Holly") 18

Smith, Wade 883

Smith, William E. 192

Smyth, Francis 165, 166, 174

Snyder, Diane 450

Society for Medical Anthropology 509

Sooy, Adrian 380

Sooy, Francis A. 184, 185, 186. See under Chancellors

Sorby, Donald 191

Souza, Kevin 486

Spaulding, Bruce 8, 9, 10, 426, 427, 875

Spreckels, Rudolph 121

Sproul, R. G. (Robert) 151, 156, 160, 165, 170, 175

Srivastava, Deepak 860

Stanford University. See under Universities

Stanley Korsmeyer Award of the American Society for Clinical Research. See under Awards

Stark, Marvin 183

Stebbins, Lucy Ward 160

Stein and Moore Award. See under Awards

Steitz, Joan 910

Stem cell research 912, 914

Stephens, Richard S. 368

Stevens, C. L. 152

Stewart, Linda 366

St. Luke's Hospital. See under Medical Centers

St. Mary's Hospital. See under Medical Centers

Stoeckenius, Walther 16

Stone, Robert 164, 165

Strategic Sourcing (SS) 390

Strauss, Anselm 197

Stroud, Robert 16, 902, 910

Stryker, Michael 19

Student Accounts 395

Student Financial Services 329

Student Health Services 329, 331

Student Information Systems 329, 332

Styles, Greta 875

Styles, Margretta 197, 198

Summersgill, H.T. 146

Sustaita, Gloria 717

Sutro, Adolph 96, 107, 116, 144

Sutter, John 100

Sutton, Albert 117

T

Tahmassian, Ara 352
Takayama, Paul 426
Tanagho, Emil A. 689
Tarver, Harold 174
Taylor, Alonzo E. 120, 121
TETRAD 539
The Scientist. See under Publications
Thorn, George 167
Thygeson, Phillips 366, 367, 368
Tianen, Carl 380
Times Literary Supplement of London. See under Publications
Toland, Hugh H. 102, 103, 104, 105, 106
Toland Medical College. See under Universities
Tomitch, Lana 450

Toni Rembe Rock Hall. See under Buildings

Tooley, William H. 648

Topp, Kimberly 654, 902

Tracy, Margaret 160, 170, 171

Transportation 403

Transportation Services 401

Tuttle, Roslyn 450

Tyburski, Mike 10, 380, 421

U

UC Dental Department 109, 138

UC Hospital. See under Medical Centers

UC Irvine Medical Center. See under Medical Centers

UCLA Medical Center. See under Medical Centers

UC Medical Department 122, 124

UC Medical School 137, 143, 167

UC Newswire 295

UC Regents 1, 96, 97, 99, 108, 109, 116, 119, 128, 132, 133, 144, 145, 146, 149, 151, 152, 154, 157, 160, 161, 168, 170, 176, 177, 178, 186, 187, 190, 204, 263, 325, 366, 367, 368, 393, 434, 510, 757, 866, 875, 878, 895, 896, 897, 899, 901, 902, 903, 904, 905, 912, 915, 916

UC School of Medicine 145

UCSF AIDS Clinical Research Center 200

UCSF Cell Culture Facility 352

UCSF Children's Hospital. See under Medical Centers

UCSF Community Partnerships Program 282, 286, 883

UCSF Global Health Sciences 683

UCSF Institutional Animal Care and Use Committee 353

UCSF library 187

UCSF Link 416, 423

UCSF Medical Center. See under Medical Centers UCSF News Office 295 UCSF Orthopaedic Institute. See under Institutes UCSF Osher Lifelong Learning Institute. See under Institutes UCSF Public Affairs 438 UCSF Sinus Center 632 UCSF Stanford Health Care (USHC). See under Medical Centers UCSF Today 295 UCSF Voice Center 632 United States Cochrane Center 203 Universities California College of Pharmacy 96, 102, 108, 112, 117, 118, 125, 126, 151, 801 California State University 188 Cal Tech 901 Columbia University 92, 149, 877 Cooper Medical College 105, 113 Dental College 109 Gettysburg College 309 Harvard University 92, 123, 143, 155, 156, 167, 194, 309, 319, 366, 882, 901 Indiana Dental College 109 Johns Hopkins University 115, 120, 121, 122, 123, 143, 146, 154, 156, 511, 910 King's College 194 Kyoto University 911 Massachusetts Institute of Technology (MIT) 194, 876, 882, 911 Mills College 146 Rush Medical College 143 San Francisco State University (SFSU) 189, 206, 655 Stanford University 13, 92, 143, 175, 196, 198, 204, 311, 319, 756, 877, 882 St. Xavier's University 755 Toland Medical College 96, 105, 106, 107, 109, 111 UC Berkeley 92, 99, 106, 113, 122, 128, 129, 134, 136, 137, 143, 144, 145, 146, 147, 148, 149, 155, 157, 160, 164, 165, 169, 171, 173, 175, 182, 187, 188, 193, 196, 207, 312, 319, 508, 510, 567, 588, 677, 867, 870, 876, 911 UC Davis 173, 588, 916 UCLA 165, 171, 173, 755, 836, 911, 916 UC Santa Barbara 173, 188, 891 UC Santa Cruz 207, 867, 911 University of California (UC) 1, 96, 99, 106, 107, 109, 123, 129, 175, 195, 262, 287, 312, 313, 323, 325, 386, 801, 866, 870, 881 University of Cambridge 13, 92 University of Chicago 120, 194 University of Colorado 367 University of Dar-es-Salaam, Tanzania 891 University of Southern California 313

University of Toronto 313 Yale University 92, 194, 870, 910

University-Community Partnership Program 885, 898

University Hall. *See under* Buildings
University of California Medical School 136
Urology 732
U.S. National Academy of Sciences 910
U.S. News & World Report. *See under* Publications

V

Vail, Thomas P. 624, 891 Valencia Health Services 203 Vale, Ronald D. 16, 19, 527, 864 Van Dyke, Craig 10, 318, 343 Vargervik, Karin 205, 450 Varmus, Harold 14, 15, 20, 197, 199, 309, 312 Veitch, Patricia 720 Verdin, Eric 860 Verkman, Alan 587 Vermillion, Eric 10, 380, 385 Vesalius, Andreas 314 Vice Chancellor for Academic Affairs 870, 875, 882 Vice Chancellor for Research 912 Vice Chancellor of Univ. Advancement & Planning 875 Vincenti, Flavio 587 Vision Care and Research Unit (VCRU) 616 Voigt, Christopher 890 Volberding, Paul A. 18, 199, 200, 201, 697 Volwiler Research Achievement Award. See under Awards Voris, Joan 450, 486

W

Waldura, Renaud 211 Wall Street Journal. See under Publications Walter, Peter 16, 19, 516, 864, 910 Wanzer, Lucy 107 Wara, Diane W. 18, 697 Wara, William 668 Warnock, David 587 Warren, Earl 162 Warren, Margaret 349 Warren Triennial Prize. See under Awards Washington, A. Eugene 8, 9, 18, 210, 318, 319, 353, 368, 870, 886, 887, 892, 895 Watchmaker, Cynthia 798 Webb, Shaun 211 Weintraub, Jane 450 Weisgraber, Karl 860 Weiss, Arthur 16, 18, 19, 864 Weissman, Jonathan 864

Wells, James 16

Wenzell, William T. 112

Werb, Zena 18, 19

Westbrook, Bill 308

Western Association of Schools and Colleges. See under Associations

Western Association of College and University Business Officers (WACUBO). See under Associations

Wheeler, Benjamin Ide 119, 120, 121, 123, 127, 133, 135, 145, 175

Wheeler Center for the Neurobiology of Addiction 488, 544, 603

Whipple, George 137, 152

Whitcher, John P. 368

White, Raymond 16, 18, 19

Wiener-Kronish, Jeanine P. 18

Wiesenthal, Steve 10, 380, 407, 904, 911

Wiley Prize in Biomedical Science. See Awards

Williams, Charleane 373

Williams, Linda E. 298, 426, 431

Wilsey, Diane B. "Dede" 905

Wintroub, Bruce U. 486, 557

Wise, Candace 450

Wissmiller, Adnrew 380

Wittenberg, Catherine 757

W.M. Keck Foundation Center for Integrative Neuroscience. See under Foundations

W.M. Keck Foundation for Integrative Neurosciences. See under Foundations

Wofsy, Constance 200

Wofsy, David 486

Women's Hospital. See under Medical Centers

Wong, Jane 380

Woo, Maryanne 602

World Congress of Minimally Invasive Dentistry 890

World Health Organization (WHO) 367, 738

\mathbf{Y}

Yale University. *See under* Universities Yamamoto, Keith 16, 18, 19, 486 Yamanaka, Shinya 911 Yamauchi, Lori 10, 426, 429 Youmans, Sharon L. 800 Yudof, Mark 9, 912

\mathbf{Z}

Zakheim, Bernard 159 Zanko, Gene 426 Zare, Kamyar 380 Ziegler, John 200 Ziehm, Scott 754, 757 Zlott, Dan 882

Zubov, Abby 10, 380, 383 Zuffo, Mark 426