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2023 AAMC Regional Medical Campus Survey Report

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Authors

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Introduction

The 2023 AAMC Regional Medical Campus (RMC) Survey sought to identify practices and trends among medical schools with RMCs (also referred to as regional campuses). The RMC survey was administered from July 25 to Sept. 28, 2023.

For the purposes of this survey, the Liaison Committee on Medical Education's (LCME® accrediting authority) definition of a regional campus was used: "A regional campus is an instructional site that is distinct from the central/administrative campus of the medical school and at which some students spend one or more complete curricular years."

The survey was administered online and sent to 133 deans or senior leaders overseeing RMCs at 58 medical schools (see Appendix). These 58 schools were identified as having at least one RMC based on outreach to senior leaders at each medical school in the United States and Canada (170 schools at the time of survey administration).

The survey contained 31 questions organized into topic areas, including Education, Research, Faculty, and Student Affairs. Respondents were not required to answer all survey questions, and thus, response rates varied by question.

This report summarizes findings of the 2023 RMC survey for the purpose of discussion among AAMC-member institutions and others who seek to understand and address the current and future needs of RMCs in the United States and Canada.

Results

Characteristics of Regional Medical Campuses

Based on initial outreach efforts, 34% of U.S. and Canadian medical schools had at least one RMC at the time of survey administration. On average, medical schools reported having two RMCs (the range being between one and eight RMCs). In total, 133 RMCs were identified. Fifty-one of the 58 medical schools that reported having RMCs were in the United States; among them, 69% were public schools, compared to all U.S. medical schools of which 60% were public schools (Figure 1). Additionally, 43% of schools with RMCs were in the Southern region, compared with 36% of all U.S. medical schools (Figure 2).

Figure 1. Ownership types of U.S. medical schools with regional medical campuses (RMCs), compared to those of all U.S. medical schools.

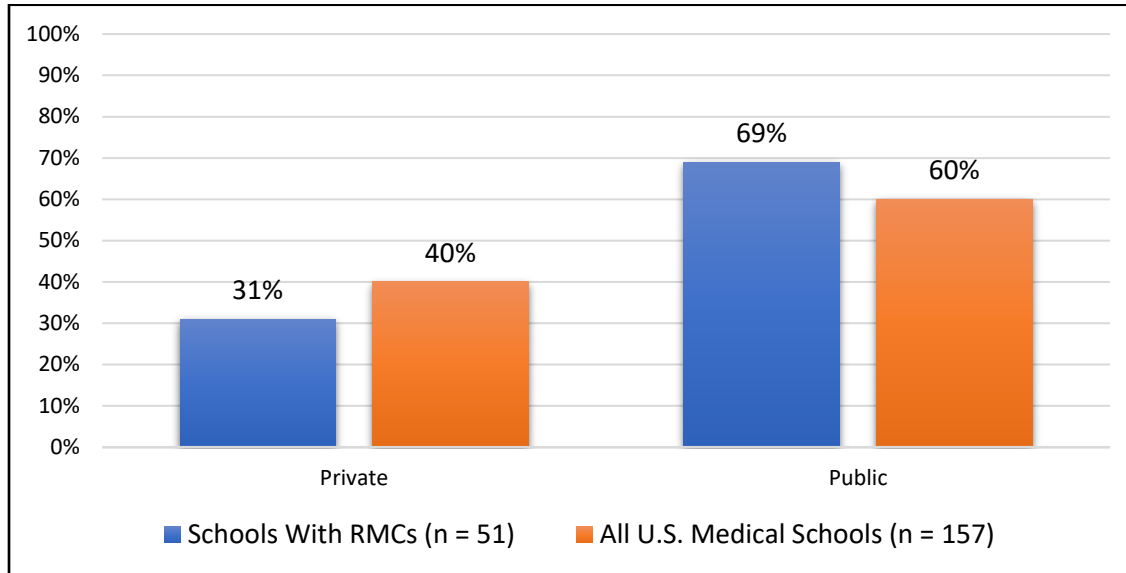
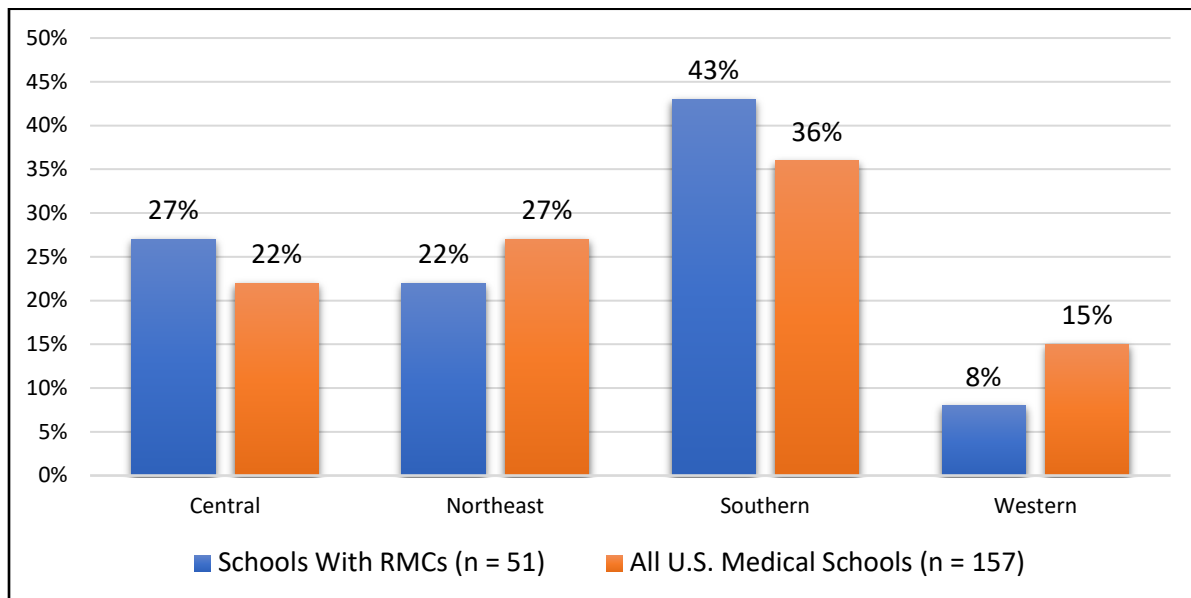


Figure 2. Regional distribution of U.S. medical schools with regional medical campuses (RMCs), compared to that of all U.S. medical schools.



Note on regions: Central = IL, IN, IA, KS, MI, MN, MO, NE, ND, OH, SD, and WI; Northeast = CT, DE, ME, MD, MA, NH, NJ, NY, PA, RI, VT, and DC; Southern = AL, AR, FL, GA, KY, LA, MS, NC, OK, SC, TN, TX, VA, WV, and Puerto Rico; Western = AK, AZ, CA, CO, HI, ID, MT, NV, NM, OR, UT, WA, and WY.

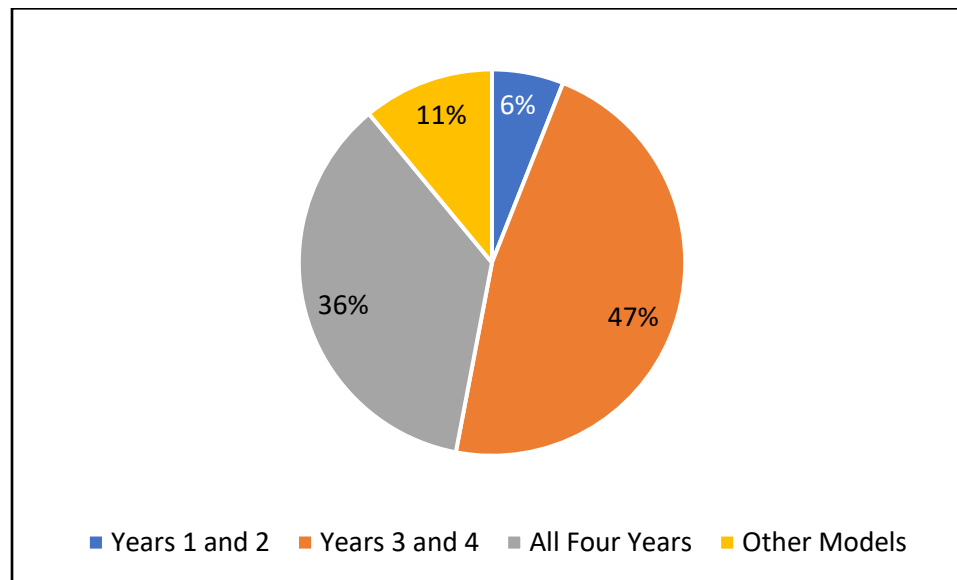
Overall, 105 of the 133 invited RMCs participated in the survey, for a 79% response rate. Ninety-seven of these RMCs represented 46 U.S. medical schools. Overall, the demographics of the respondent pool mirrored the characteristics of all U.S. medical schools with RMCs; for example, 31% of U.S. medical schools with regional campuses were private schools, compared to 33% of the responding institutions being private schools.

The following results include responses from both U.S. and Canadian medical school participants.

Educational Models of Regional Medical Campuses

Forty-seven percent of responding RMCs offered curricula only during the third and fourth years, and 36% offered curricula all four years (Figure 3).

Figure 3. Years of curricula offered at regional medical campuses.



Seventy-two percent of respondents indicated having longitudinal or distributed curricula models that included basic science or clinical experiences spanning a period of more than 12 weeks in one or more courses of study. Longitudinal models were defined as the continuous assignment of learners to the RMC over repeated cycles, with administrative mechanisms to coordinate the academic experience, student affairs, and faculty oversight.

Medical School Matriculants to Regional Campuses

Across responding campuses, approximately 8,000 students had matriculated at the RMCs, with an average of 84 students per campus (Table 1).

Table 1. Students Matriculated at Regional Medical Campuses (RMCs), by Years of Curricula Offered
Students Matriculated at RMCs

| Students Matriculated at RMCs (n = Responding RMCs) | Year 1 | Year 2 | Year 3 | Year 4 |
|--|--------|--------|--------|--------|
| Sum | 1,879 | 1,811 | 2,329 | 1,996 |
| Overall Mean | 19.6 | 18.7 | 24.5 | 21.0 |
| Years 1 and 2 Mean (n = 6) | 33.5 | 33.5 | N/A | N/A |
| Years 3 and 4 Mean (n = 49) | N/A | N/A | 22.2 | 20.0 |
| All Four Years Mean (n = 38) | 42.0 | 38.5 | 32.0 | 28.6 |
| Other Models Mean (n = 12) | 13.9 | 20.6 | 21.8 | 12.3 |

Training Locations and Patient Populations

Respondents were also asked to describe their settings for educational experiences. Approximately 60% of campuses reported that 76%-100% of their RMC students were required to train in community-based settings (i.e., hospitals or practices). When asked about locations of training sites, 87% of respondents indicated that students trained in urban settings (i.e., those located within densely developed territories of at least 5,000 people) and 66% trained in rural settings (i.e., those located outside urban areas). Regardless of the number of training locations, 77% of respondents indicated that most of the patients seen by students-in-training resided in urban settings, 18% resided in rural settings, and 5% resided in other settings.

Additional Learners at Regional Campuses

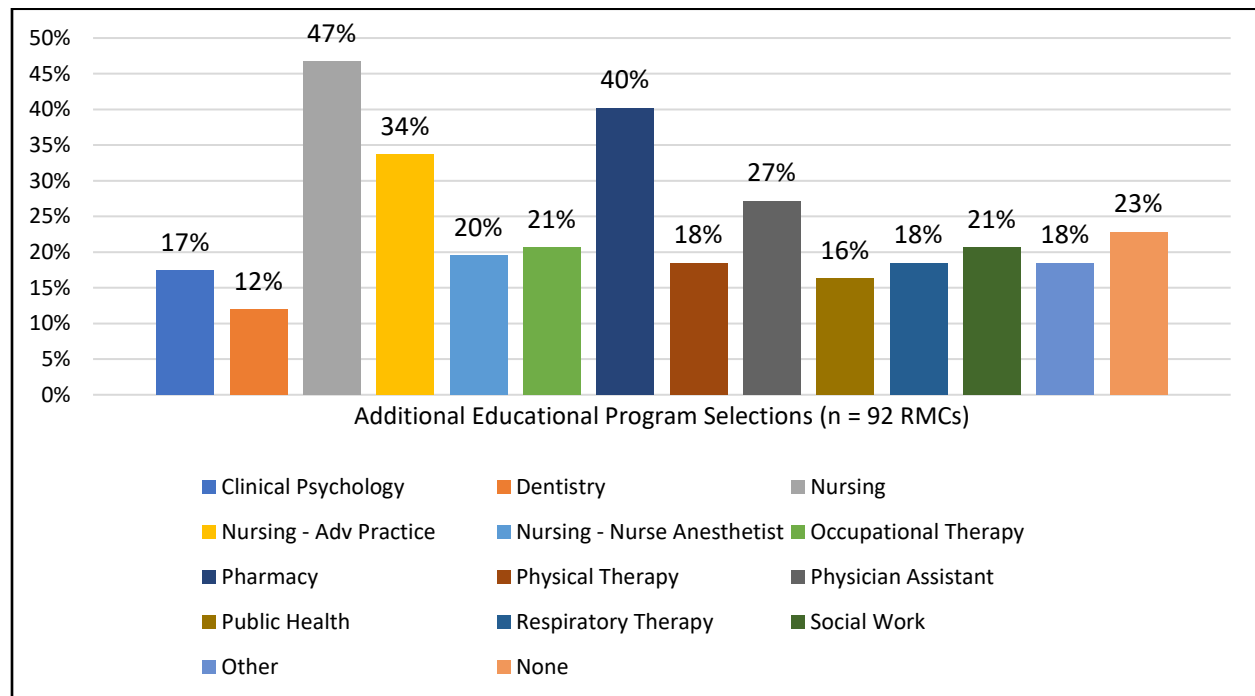
In addition to their own students, RMCs also provided rotations for learners from other medical schools, including DO-granting schools and national and international institutions. Fifty-five percent of responding campuses reported supporting away rotations for students from other MD-granting schools, and 44% were hosting students from DO-granting schools. In total, RMCs reported hosting almost 6,000 additional students from other medical schools, with an average of 89 additional students per campus (Table 2).

Table 2. Students Rotating at Regional Medical Campuses (RMCs) From Other Institutions RMCs

| RMCs (n = 63) | Year 1 | Year 2 | Year 3 | Year 4 |
|------------------|------------|------------|-------------|-------------|
| Sum | 233 | 425 | 1,619 | 3,522 |
| Range | 0-120 | 0-120 | 0-250 | 0-500 |
| Mean (SD) | 3.7 (17.2) | 6.7 (23.9) | 25.7 (47.0) | 55.9 (96.3) |

Lastly, respondents were asked to identify any additional educational programs offered at their regional campuses; approximately 47% of respondents had nursing programs, 40% had pharmacy programs, and 23% had no additional programs (Figure 4).

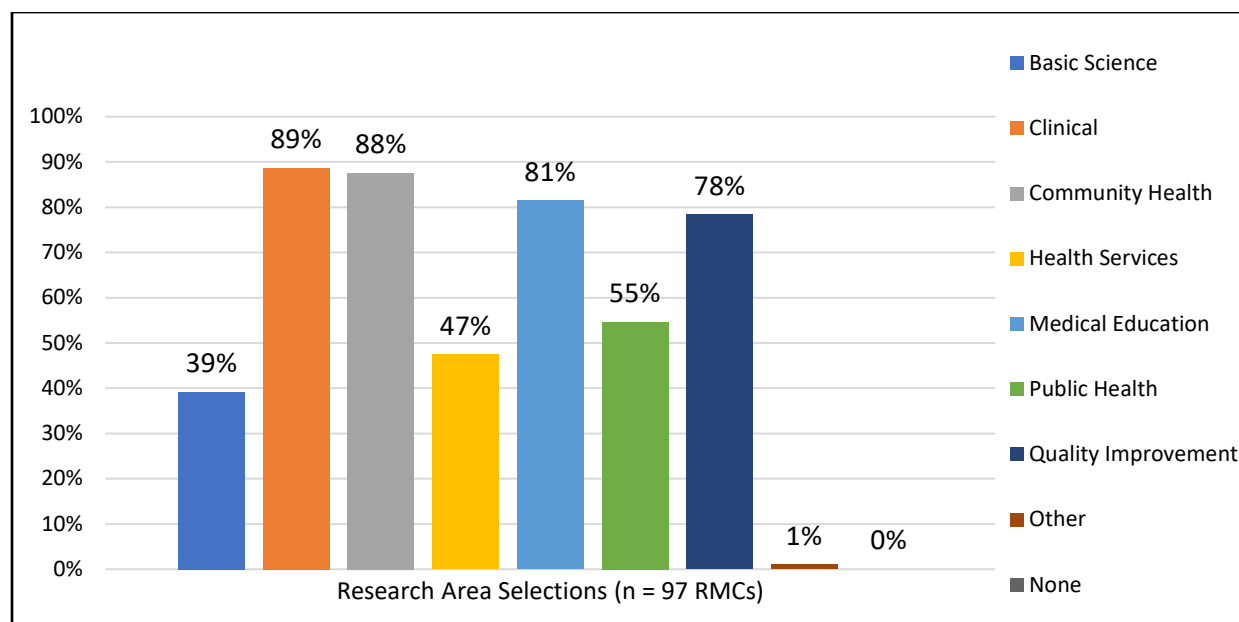
Figure 4. Additional programs offered at regional medical campuses (RMCs).



Research at Regional Medical Campuses

Nearly all respondents (98%) reported that faculty conducted research at their RMCs (Figure 5), the majority of which was related to clinical science (89%), community health (88%), medical education (81%), and quality improvement (78%). Participants were also asked which agencies funded the research conducted at their campuses; 44% indicated they received National Institutes of Health funding, while 28% also received funding from the Health Resources and Services Administration, among other agencies; however, 29% of campuses received no external funding from major funding agencies to conduct research.

Figure 5. Research conducted at regional medical campuses (RMCs).



Faculty at Regional Medical Campuses

It is critical to have sufficient faculty to teach medical students at RMCs, which includes both paid and unpaid faculty members. In sum, for academic year 2022-23, respondents reported having slightly more than 9,000 paid and approximately 23,000 unpaid faculty members employed at RMCs, with an average of 124 paid and 281 unpaid faculty members per campus (Table 3).

Table 3. Average Number of Faculty Members at RMCs

| RMCs (n = 82) | Paid Full-Time | Paid Part-Time | Unpaid Full-Time | Unpaid Part-Time |
|------------------|----------------|----------------|------------------|------------------|
| Sum | 2,927 | 6,294 | 12,262 | 10,798 |
| Range | 0-500 | 0-525 | 0-3,000 | 0-1,146 |
| Mean (SD) | 35.7 (91.5) | 76.8 (117.9) | 149.5 (430.4) | 131.7 (220.7) |

Based on the enrollment data provided, student-to-faculty ratios were calculated. Across all responding campuses, there were 3.30 paid and 5.95 unpaid faculty members per student (Table 4). Compared to private institutions, public-school RMCs had fewer faculty members per student.

Table 4. Faculty Members per Matriculated Student by Medical School Ownership Type

| | Paid Full- and Part-Time Faculty Members per Student | Unpaid Full- and Part-Time Faculty Members per Student |
|--|---|---|
| Public School Regional Medical Campuses (n = 19) | 3.12 | 5.18 |
| Private School Regional Medical Campuses (n = 56) | 4.09 | 8.58 |
| All Responding Regional Medical Campuses (n = 82) | 3.30 | 5.95 |

Faculty Support at Regional Medical Campuses

For the faculty members who were compensated for medical education activities, 90% were compensated for administrative work, 75% for clinical teaching and precepting, and 59% for classroom teaching. RMCs also used several compensation alternatives to recognize faculty contributions; for example, 90% of respondents provided faculty appointments, 74% provided fringe benefits, 41% provided stipends, and 35% provided FTE splits.

To support faculty at regional campuses, 41% of respondents indicated that a regional campus leader implemented the faculty appointment program, as opposed to a leader from the main campus (58%); 1% had a different arrangement. In terms of faculty development, 77% of RMCs delivered continuing medical education programming, and 68% planned formal medical school orientation programs for faculty.

Administrative Leaders and Staff at Regional Medical Campuses

Regional campuses also reported on the total FTE assignments for administrative faculty and professional staff supporting medical education. Most campuses reported having administrative leaders and staffing infrastructure to support the delivery of educational programs and student affairs functions (Table 5).

Table 5. Average FTE of Administrative Leaders Supporting Medical Education at Regional Medical Campuses (RMCs).

| RMCs (n = 84) | Dean(s) (Senior Associate, Associate, Assistant) | Preclinical Course Directors | Clerkship or Clinical Course Directors | Faculty Members (Student Affairs, Academic Advising, Career Advising, Counseling, Student Health, Other) | Staff, Academic Affairs Only | Staff, Student Affairs Only | Staff, Academic Affairs and Student Affairs |
|----------------------|---|-------------------------------------|---|---|-------------------------------------|------------------------------------|--|
| Range FTE | 0-11.4 | 0-22.0 | 0-10.0 | 0-40.5 | 0-17.0 | 0-32.0 | 0-18.0 |
| Mean FTE (SD) | 1.88 (2.00) | 0.96 (2.80) | 1.58 (1.68) | 1.92 (5.40) | 2.34 (3.50) | 1.83 (4.10) | 1.91 (2.60) |

Student Services and Regional Medical Campuses

The survey also asked about various student affairs policies and programs in place at RMCs, including student recruitment and assignment processes; for example, 25% of RMCs reported having different recruitment efforts than those at their main campuses. Sixty percent of RMCs reported student assignment to the RMCs prior to matriculation, 21% at matriculation, and 40% after matriculation (Figure 6a). Assignment of students to RMCs was completed in a number of ways, including assignment by committee or a lottery system, as well as individual student choice (Figure 6b).

Figure 6a. Time periods when students were assigned to regional medical campuses (RMCs).

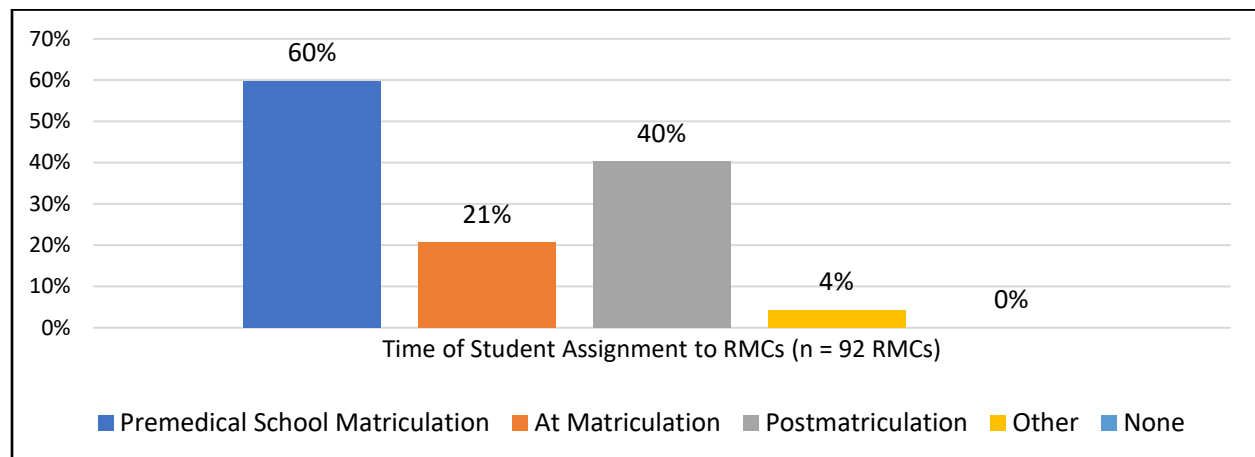
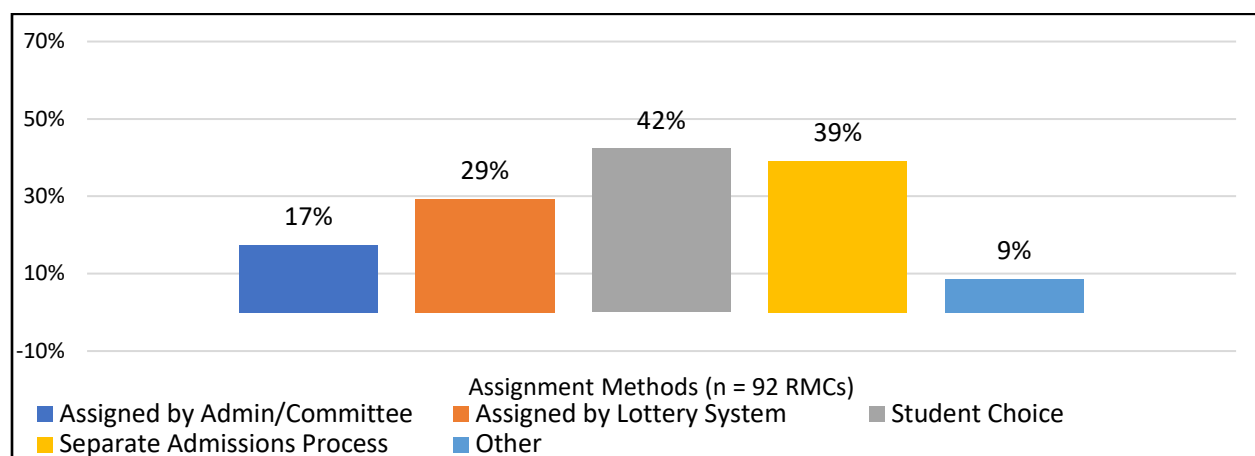
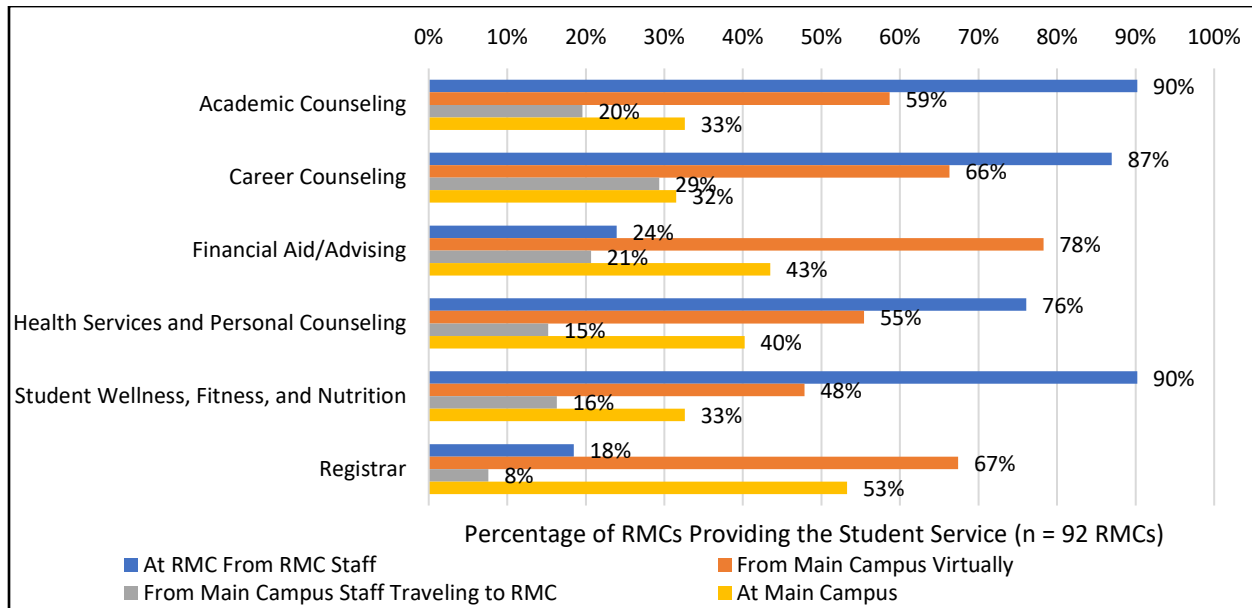


Figure 6b. Methods by which students were assigned to regional medical campuses (RMCs).



In addition to recruitment and admissions, many RMCs offered onsite student services to supplement what might be offered at the main campus, onsite or virtually (Figure 7); for example, apart from the financial aid and registrar functions, a large majority of RMCs delivered onsite academic counseling (90%), student wellness programs (90%), career counseling (87%), and health services and personal counseling (76%).

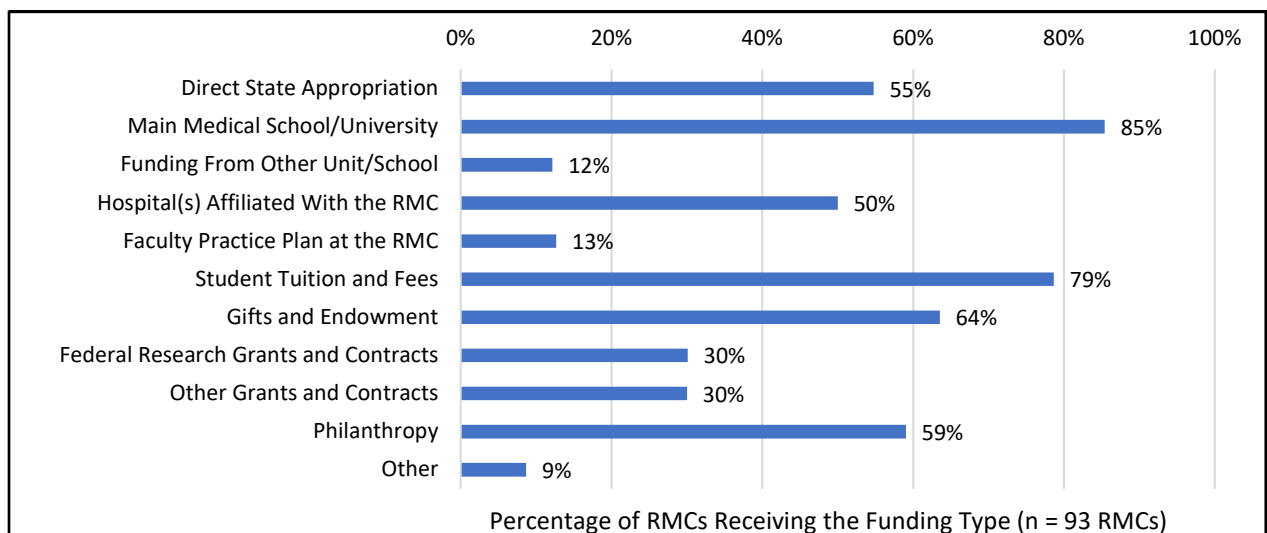
Figure 7. Student services delivered by RMCs and their main campuses to RMC learners.



Note: The LCME accrediting authority requires that all medical schools provide the listed student services to all students, regardless of if they are learning at the main campus or regional campus. Regional campuses frequently rely on an overlapping mix of in-person locations and delivery methods to provide comprehensive student services.

Lastly, survey respondents were asked how the medical education programs at their regional campuses were funded; they could select more than one option (Figure 8). A large majority reported funding for RMCs coming (at least in part) directly from the main campus (85%), as well as student tuition and fees (79%).

Figure 8. Funding sources for regional medical campuses (RMCs).



Conclusion

Approximately one-third of U.S. medical schools have at least one regional campus, and there are a number of medical school students matriculating at and rotating through regional campuses, as well as students from other medical schools and health professions colleges. Given the size of the learner population, both paid and unpaid faculty members are needed to help support the delivery of education and the research being conducted at RMCs. Considering the breadth of activities occurring at RMCs, deans and medical education leaders should continue to allocate resources thoughtfully to successfully deliver on the core missions of academic medicine at these locations.

Appendix. U.S. and Canadian Medical Schools With Regional Medical Campuses, According to the 2023 AAMC Regional Medical Campus Survey

1. Baylor College of Medicine
2. Boston University Aram V. Chobanian & Edward Avedisian School of Medicine
3. Central Michigan University College of Medicine
4. Creighton University School of Medicine
5. Dalhousie Medical School
6. Drexel University College of Medicine
7. Florida State University College of Medicine
8. Geisinger Commonwealth School of Medicine
9. The George Washington University School of Medicine and Health Sciences
10. Indiana University School of Medicine
11. Lewis Katz School of Medicine at Temple University
12. LSU Health New Orleans School of Medicine
13. Mayo Clinic Alix School of Medicine
14. McMaster University Michael G. DeGroote School of Medicine
15. Medical College of Georgia at Augusta University
16. Medical College of Wisconsin
17. Medical University of South Carolina College of Medicine
18. Mercer University School of Medicine
19. Michigan State University College of Human Medicine
20. Penn State College of Medicine
21. Ponce Health Sciences University School of Medicine
22. School of Medicine at Queen's University
23. Sidney Kimmel Medical College at Thomas Jefferson University
24. State University of New York Upstate Medical University Alan and Marlene Norton College of Medicine
25. Texas A&M University College of Medicine
26. Texas Tech University Health Sciences Center School of Medicine
27. Tufts University School of Medicine
28. Université de Montréal Faculty of Medicine
29. University of Alabama at Birmingham Marnix E. Heersink School of Medicine

30. University of Arkansas for Medical Sciences College of Medicine
31. University of British Columbia Faculty of Medicine
32. University of California, San Francisco, School of Medicine
33. University of Colorado School of Medicine
34. University of Illinois College of Medicine
35. University of Iowa Roy J. and Lucille A. Carver College of Medicine
36. University of Kansas School of Medicine
37. University of Kentucky College of Medicine
38. University of Louisville School of Medicine
39. University of Massachusetts T. H. Chan School of Medicine
40. University of Miami Leonard M. Miller School of Medicine
41. University of Minnesota Medical School
42. University of Missouri - Columbia School of Medicine
43. University of Missouri - Kansas City School of Medicine
44. University of North Carolina at Chapel Hill School of Medicine
45. University of North Dakota School of Medicine and Health Sciences
46. University of Oklahoma College of Medicine
47. University of Saskatchewan College of Medicine
48. University of South Carolina School of Medicine - Columbia
49. University of South Dakota Sanford School of Medicine
50. University of Tennessee Health Science Center College of Medicine
51. University of Toronto Temerty Faculty of Medicine
52. Robert Larner, M.D., College of Medicine at the University of Vermont
53. University of Virginia School of Medicine
54. University of Washington School of Medicine
55. University of South Florida Morsani College of Medicine
56. Wake Forest University School of Medicine
57. Washington State University Elson S. Floyd College of Medicine
58. West Virginia University School of Medicine