

Department of Otolaryngology-Head and Neck Surgery

Statement of Evidence- Promotion and Tenure

I. Introduction

Promotion, and award of tenure (if applicable), are means by which the Department of Otolaryngology- Head and Neck Surgery and the College of Medicine encourages, recognizes and rewards academic achievement and productivity, and strives to maintain a faculty of excellence in service, education and research. In keeping with University policy, promotion will be based upon the demonstration of professional competence, productivity, and achievement as judged by criteria in the areas of teaching, research/scholarly activities and University service (and clinical service as applicable) and the continuing needs for a faculty member with particular qualifications and competencies. Evidence of clinical and research support of salary costs is also weighed against clinical, education and research productivity annually as well as toward promotion.

Faculty promotion shall be reviewed through the peer participation in the department with clear standards for outstanding performance of academic responsibilities that are consistent with expectations for faculty. Upon the faculty review, the dossier will be submitted to the College of Medicine Appointment, Promotion and Tenure Committee for review and recommendation to the Dean. Tenure or non-tenured faculty shall carry out their academic responsibilities as outlined in their job descriptions and DOEs. Annual evaluations procedures shall provide multiple outcomes including information for department planning, merit salary decisions, progress toward promotion and/or tenure, differential allocation of effort, and strategies for renewal or development.

II. Promotion

A. Promotion

Promotions are not automatic but are based on merit. Promotion is not contingent upon any set duration of appointment (unless otherwise define by time regulations for the granting of tenure), but a time period less than the typical 5-6 years in rank would be considered early and should only be considered if the faculty member has not just met, but exceeded the expectations and has the full support of the chair and departmental faculty. In addition to the usual criteria of outstanding performance in teaching, research/scholarly activity and service, contributions to the overall development and reputation of the College of Medicine by professional activities will be considered. Because of the varying missions of departments within the College of Medicine, criteria for promotion/tenure must be applied with consideration of our department discipline and peer review. However, for everyone, it is required that lesser achievement in one area be balanced by excellence in another. Demonstrable competence in teaching, research activity, scholarship and professional service/patient care are of paramount consideration. The understanding between the College of Medicine and the Department of Otolaryngology- Head

and Neck Surgery faculty members regarding the distribution of effort in the areas of teaching, research and service must be a factor when various criteria are balanced. Absence of DOE in any category does not preclude requirements set for any individual category with the exception of Clinical service for faculty who are not involved in clinical care. Evidence of scholarship should be manifested in peer reviewed publications or comparable communications.

B. Promotion vs. Tenure

Promotion is available to all department faculty members, regardless of tenure-track or non-tenure track appointment. Promotions are based on meritorious fulfillment of the faculty member’s job description and DOE. Tenure, when the candidate is on a tenure track appointment, is based on overall merit, a sustained record in scholarship, and commitment to the maintenance of high standards of performance in teaching, service, and scholarship.

Exceptions to the use of Department policies and definitions may be made on a case-by-case basis by the Department Chair after consultation with the Dean. Such expectations need to be clearly indicated in the offer letter from the Chief/Chair.

- This exception recognizes that individual faculty members may have unique contributions or circumstances that may need to be considered on a case-by-case basis. For example, faculty working as nocturnalists, or faculty with essentially no ability to undertake any academic activities (administrative, scholarly, educational.)

Title series changes cannot occur; however, faculty are eligible to apply for a new position in a new Title series at any time. The faculty member will be considered for appointment to a new title series position per the usual Department and College procedures. There is no “time clock” limitations on applying to new title series positions.

While promotion is not based on time in rank, submission for promotion earlier than 5-6 years in rank is unusual but may be considered with Departmental support by the Faculty member, Division Chief, Chairman, and Department APT committee.

The following table is used to define local, regional, or national reputation. Regional definition is subdivided into rankings (progressive rankings indicate progressive expansion of regional reputation)

	Clinical Title Series	Regular, Research or Special Title Series
Local	Within Department	Within College of Medicine
Regional	(1) Outside of Department, within Medical Center or Kentucky Outside of UK, within Kentucky	Beyond COM/ UK Healthcare system Beyond UK, within Kentucky or surrounding states

National	Outside of Kentucky	Outside of Kentucky

III. Comprehensive Examples of Evidence of Activity

A. Administration:

1. Being an officer or an active committee or subcommittee member in a national or international professional organization
2. Being an officer or an active committee or subcommittee member in a regional or state professional organization
3. Serving on a governmental commission, task force, or board
4. Serving an administrative leadership role at UK or its affiliated institutions
5. Serving as program chair or in a similar position at a national or international meeting
6. Serving as an officer or active member in the Faculty senate or Faculty council
7. Serving as an officer or active member of major COM or Department of Otolaryngology-Head and Neck Surgery committees
8. Serving as an officer or active member in major committees at the University hospital, VA hospital or other patient care-related facilities
9. Serving as a member of the IRB or IACUC research committees

B. Service/ Patient Care:

1. Evidence of excellence in professional service to the local community and public at large
2. Number of patient encounters
3. Number of patient referrals from outside the university
4. Number of patient consultations
5. Provision of unusual types of service not otherwise available in the region
6. Organizing innovative types of patient care programs
7. Organizer of state, regional, national or international conference or symposium
8. Evidence of excellent performance as medical director of various clinical entities
9. Serving as consultant at national and international levels
10. Evidence of substantial involvement in local, regional, national and international humanistic activities and volunteerism

C. Instruction:

1. Recognition

- a. Outstanding teaching performance as evidenced by such measures as peer-evaluation, student satisfaction, student and resident evaluations
- b. Selection for a Department, College, University, or professional society outstanding teacher award
- c. Receipt of awards for research or academic performance by the faculty member's students or residents
- d. Receiving external grant support for teaching/learning projects
- e. Receiving, on a competitive basis, internal funding for teaching
- f. Invitation to teach at domestic or international institution

2. Mentoring and Advising:

- a. Significant contribution to the professional development of students or residents
- b. Outstanding performance as a departmental undergraduate or graduate advisor
- c. Evidence of student or resident mentoring (professional or graduate students)
- d. Member of graduate student advisory committees

3. Direction and Leadership:

- a. Outstanding direction of graduate, resident, or student research or creative activity that is validated by peers
- b. Direction or leadership role in administering COM courses
- c. Direction or leadership role in administering Graduate Medical Education Programs
- d. Developing a new course that fills an identified need in the curriculum
- e. Evidence of courses taught at a rigorous and challenging level, with recognized excellence
- f. Direction of graduate student thesis or dissertation research
- g. Successful participation at teaching workshops

3. Publications:

- 1. Scholarly publications related to teaching

D. Research

- 1. Substantial extramural, peer-reviewed, funding as principal investigator or project leader

2. Receiving major fellowship or research award
3. Publications in refereed journals
4. Significant publication and/or funding resulting from collaborative efforts with researchers in other fields where the faculty member occupies a substantial role in research
5. Publication of scholarly book
6. Publication of a chapter in a scholarly book
7. Editing a scholarly book
8. Frequent citation of publications
9. Serving as editor or member of editorial board of peer-reviewed journals
10. Serving as a member of review panel for nation research organization
11. Presentation of invited papers at international and national meetings
12. Successful acquisition of patents and other intellectual properties

E. Professional Development

1. membership in professional or scientific societies
2. Recognition by scientific or scholarly societies
3. Evidence of established or recognized reputation in specialty area
4. Attendance at professional scientific organizations
5. Continuing medical education and/or maintenance of certification hours
6. Board certification/re-certification/ continuing certification status

IV. Criteria for Promotion-Clinical Title Series (non-tenure)

A. Instructor to Assistant Professor

1. Minimum Requirements
 - i. M.D., Ph.D., or equivalent degree
 - ii. Faculty holding the M.D. degree should be Board Certified/Eligible in Otolaryngology-Head and Neck Surgery or subspecialty, but preferably Board Certified
2. Administration (Non-Clinical Services)

- i. Demonstrated successful experience in the administration of Otolaryngology-Head and Neck Surgery services including interaction with physicians and staff as attested to by colleagues, mentors, or peers
 - ii. Demonstrated satisfactory performance as an overseer of residents, students, and hospital staff as attested to by colleagues, mentors, or peers
 - iii. Service on Departmental committees as assigned
 3. Clinical Service (Direct Patient Care)
 - i. Potential for expertise to provide surgical and diagnostic services as attested to by colleagues, mentors, or peers
 4. Instruction
 - i. Potential for excellence in teaching of medical students, residents, fellows, continuing medical education attendees, and peer as demonstrated by student, resident, and peer evaluations
 - ii. Demonstrated satisfactory teaching through evaluations of teaching at previous institutions or positions, if available
 - iii. Demonstration of clinical knowledge through syllabi, video and audio aids, computer-based material and/or professional communications to physicians and hospital staff
 5. Research (Scholarly Activities)
 - i. Potential for successful collaborative research or creative work supported through contracts, grants, or other funds and reported in peer-reviewed journals
 6. Professional Development
 - i. Potential for excellence in continuing professional development in otolaryngology-head and neck surgery as attested to by colleagues, mentors, or peers.
 - ii. Demonstrated professional recognition as evidenced by participation or membership in professional organizations at the local level

B. Assistant to Associate Professor

1. Minimum Requirements
 - i. In addition to meeting the criteria for Assistant Professor, appointment or promotion to the rank of Associate Professor shall require demonstration of continued achievement and regional recognition as a leader in administration, patient care, instruction, service, and academic and research endeavors
 - ii. M.D., Ph.D., or equivalent degree, Board completion of satisfactory performance at the level of Assistant Professor
2. Administration (Non-Clinical Services)

- i. Continuing evidence and peer recognition as administrative and clinical physician at regional or national levels as attested to by colleagues, mentors, or peers
- ii. Provide significant demonstrable contributions to clinical services and administration in otolaryngology-head and neck surgery otolaryngology disciplines as attested to by faculty and colleagues
- iii. Continuing evidence of participation in outside clinical department rounds and conferences presenting otolaryngology-head and neck surgery findings and their significance in the care of the patient as attested to by colleagues, mentors, or peers
- iv. Continuing evidence of excellence as a clinical role model in the teaching of outside physicians and residents on the administration of care based on otolaryngology-head and neck surgery results as attested to by colleagues, peers, and staff
- v. Serve as a division chief, section head, center director, residency program director, clerkship director, course director, etc.
- vi. Service on Departmental, College of Medicine and/or Hospital committees as assigned

3. Clinical Service (Direct Patient Care)

- i. Provide significant démontrable contributions to patient care as an expert in clinical and anatomic otolaryngology-head and neck surgery as attested to by colleagues and peers
- ii. Development of regional reputation for excellence in clinical practice as attested to by faculty and colleagues qualified in the field and quality assurance audits within the department
- iii. Evaluations of satisfactory or above by chairperson and departmental promotion committee
- iv. RVU generation in relationship to benchmark effort

4. Instruction

- i. Proven excellence as a teacher and practioner of otolaryngology-head and neck surgery disciplines as demonstrated by evaluations by trainees working with the faculty member in a clinical teaching setting
- ii. Evaluations of satisfactory or above by chairperson and peer review
- iii. Factors considered should include the following where appropriate
 - 1. Teaching load
 - 2. Development of new courses
 - 3. Development of syllabus material
 - 4. Student sponsorship
 - 5. Resident training
 - 6. Courses taken to improve teaching effectiveness

7. Student Evaluations

5. Research (Scholarly Activities)

- i. Evidence of establishment/continuation of research/scholarly program substantiated by publications in peer review journals
- ii. Continuing presentation of research at regional, national, and international scientific meetings
- iii. Evidence of substantial professional academic status and leadership of a regional level
- iv. Development of clinical videos, instructional videos, or educational patient pamphlets

6. Professional Development

- i. Demonstrated continuing professional development in discipline as evidenced by an active role in relevant professional and academic societies

C. Associate to Full Professor

1. Minimum Requirements

- i. In addition to meeting the criteria for Associate Professor, appointment to the rank of Professor shall require demonstration of continued excellence in achievement and regional as well as national recognition as a leader in administration, patient care, instruction, service, academic and research endeavors
- ii. Exemplary teaching experience at the level of Associate Professor
- iii. Faculty holding the M.D. degree should be board certified in a primary or subspecialty

2. Administration (Non-Clinical Services)

- i. Continuing evidence and peer recognition as administrative and clinical physician at regional and national levels as attested to by colleagues, mentors, or peers
- ii. Provide significant demonstrable contributions to clinical services and laboratory administration in clinical and anatomic otolaryngology-head and neck surgery as attested to by faculty and colleagues
- iii. Continuing evidence of participation in extra-departmental clinical rounds and conferences presenting otolaryngology-head and neck surgery findings and their significance in the care of the patient as attested to by colleagues, mentors, or peers
- iv. Continuing evidence of excellence as a clinician role model in the teaching of outside physicians and residents on the administration of care based on otolaryngology-head and neck surgery results as attested to by colleagues, peers, and staff
- v. Serve as a division chief, section head, center director, residency program director, clerkship director, course director, etc.

- vi. Service on Departmental, College of Medicine, and/or Hospital committees as assigned
- 3. Clinical Service (Direct Patient Care)
 - i. Provide significant demonstrable contributions to patient care as an expert in clinical otolaryngology-head and neck surgery as attested to by colleagues and peers
 - ii. Development of regional and national reputation for excellence in clinical practice as attested to by faculty and colleagues qualified in the field and quality assurance audits within the department
 - iii. Evaluations of excellent or above by chairperson and peer review
 - iv. RVU generation in relation to benchmark
- 4. Instruction
 - i. Proven excellence as a teacher and practitioner of otolaryngology-head and neck surgery as demonstrated by evaluation by trainees working with the faculty member in a clinical teaching setting
 - ii. Leadership role and significant contributions to teaching programs at regional and national levels
 - iii. Evaluations of excellent or above by chairperson and peer review
 - iv. Factors considered should include the following where appropriate :
 - 1. Teaching load
 - 2. Development of new courses
 - 3. Development of syllabus material
 - 4. Student sponsorship
 - 5. Resident training
 - 6. Courses taken to improve teaching effectiveness
 - 7. Student evaluations
- 5. Research (Scholarly Activities)
 - i. Evidence of establishment/continuation of research/scholarly program substantiated by publications in peer review journals
 - ii. Continuing presentation of research at regional, national, and international scientific meetings
 - iii. Evidence of substantial professional academic status and leadership on a regional and national level
- 6. Professional Development
 - i. Demonstrated continuing professional development in discipline as evidenced by an active role in relevant professional academic societies

V. Tenure Track Title Series

Regular Title Series

A. Instructor to Assistant Professor

1. Minimum Requirements
 - ii. M.D., Ph.D., or equivalent degree
 - iii. Faculty holding the M.D. degree should be Board Certified/Eligible in Otolaryngology-Head and Neck Surgery or subspecialty, but preferably Board Certified
2. Administration (Non-Clinical Services)
 - i. Demonstrated successful experience in the administration of Otolaryngology-Head and Neck Surgery services including interaction with physicians and staff as attested to by colleagues, mentors, or peers
 - ii. Demonstrated satisfactory performance as a supervisor of residents, students, and hospital staff as attested to by colleagues, mentors, or peers
 - iii. Service on Departmental committees as assigned
3. Clinical Service (Direct Patient Care)
 - i. Potential for expertise to provide surgical and diagnostic services as attested to by colleagues, mentors, or peers
 - ii. Clinical competence as demonstrated by opinions sought from other faculty and colleagues qualified in the area of specialty and quality assurance audits
4. Instruction
 - i. Potential for excellence in teaching of medical students, residents, fellows, continuing medical education attendees, and peers as demonstrated by student, resident, and peer evaluations
 - ii. Demonstration of clinical knowledge through syllabi, video, and audio learning aids, computer-based material, and/or professional communications to physicians and hospital staff
 - iii. Appropriate background and potential for the development of excellence in teaching and communication with students, faculty, and administrators
 - iv. Commitment to develop educational and curricular activities that interface with in his/her area of specialty
5. Research (Scholarly Activities)
 - i. Potential for successful collaborative research or creative work supported through contracts, grants, or other funds and reported in peer-reviewed journals
 - ii. Commitment to developing research excellence at the local level, as exhibited by training, publications of papers or abstracts, reviews or other venues in the discipline as attested to by colleagues, mentors, or peers

- iii. Commitment to the development and application of original materials or other methods are additional measures of scholarly activity
 - iv. Qualified to serve on a doctoral dissertation committee
6. Professional Development
- i. Potential for excellence in continuing professional development in otolaryngology-head and neck surgery as attested to by colleagues, mentors, or peers.
 - ii. Potential for professional recognition and specific competence in specialty areas as evidenced by participation or membership in professional scientific organizations on a regional level

B. Assistant to Associate Professor

1. Minimum Requirements
- i. In addition to meeting the criteria for Assistant Professor, appointment or promotion to the rank of Associate Professor shall require demonstration of continued achievement and regional or national recognition as a leader in administration, patient care, instruction, service, and academic and research endeavors
 - ii. M.D., Ph.D., or equivalent degree, Board completion and satisfactory performance at the level of Assistant Professor
2. Administration (Non-Clinical Services)
- i. Continuing evidence and peer recognition as administrative and clinical physician at regional or national levels as attested to by colleagues, mentors, or peers
 - ii. Provide significant demonstrable contributions to clinical and/or academic services and administration in otolaryngology-head and neck surgery otolaryngology disciplines as attested to by faculty and colleagues
 - iii. Continuing evidence of participation in outside clinical department rounds and conferences presenting otolaryngology-head and neck surgery findings and their significance in the care of the patient as attested to by colleagues, mentors, or peers
 - iv. Continuing evidence of excellence as a clinical or academic role model in the teaching of outside physicians and residents on the administration of care based on otolaryngology-head and neck surgery results as attested to by colleagues, peers, and staff
 - v. Service on Departmental, College of Medicine and/or Hospital committees as assigned
3. Clinical Service (Direct Patient Care)
- i. Provide significant demonstrable contributions to patient care or academics as an expert in otolaryngology-head and neck surgery as attested to by colleagues and peers

- ii. Development of regional reputation for excellence in clinical or academic practice as attested to by faculty and colleagues qualified in the field and quality assurance audits within the department
 - iii. Evaluations of satisfactory or above by chairperson and peer review
 - iv. RVU generation in relationship to benchmark effort as applicable
4. Instruction
- i. Proven excellence as a teacher and/or practitioner of otolaryngology-head and neck surgery disciplines as demonstrated by evaluations by trainees working with the faculty member in a clinical teaching setting
 - ii. Demonstrated excellence in teaching and outstanding abilities to communicate with students, faculty, and administrators
 - iii. Evaluations of satisfactory or above by chairperson and peer review
 - iv. Factors considered should include the following where appropriate
 - 1. Teaching load
 - 2. Development of new courses
 - 3. Development of syllabus material
 - 4. Student sponsorship
 - 5. Resident training
 - 6. Courses taken to improve teaching effectiveness
 - 7. Student Evaluations
5. Research (Scholarly Activities)
- i. Documentation of productive involvement or participation in scholarly activities such as publications, clinical studies, multi-centered trials, or funded projects
 - ii. Evidence of substantial professional academic status and leadership on a regional or national level
 - iii. Educational excellence shall be recognized at the regional and perhaps national level, as exhibited by scholarly activities through original or innovative publications, studies, review or other venues in area of specialty as attested to by colleagues, mentors, or peers
 - iv. Continuous extramural funding of research activities is expected. This would include more than one sequential or simultaneous external grant during the time as an assistant professor.
6. Professional Development
- i. Demonstrated continuing professional development in otolaryngology-head and neck surgery as evidenced by an active role in relevant professional and academic societies

- ii. Evidence of established and recognized reputation in the specialty area by participation in professional organizations on a regional and perhaps national basis

C. Associate to Full Professor

1. Minimum Requirements
 - i. In addition to meeting the criteria for Associate Professor, appointment to the rank of Professor shall require demonstration of continued excellence in achievement and regional as well as national recognition as a leader in administration, patient care, instruction, service, academic and research endeavors
 - ii. Exemplary teaching experience at the level of Associate Professor
 - iii. Faculty holding the M.D. degree should be board certified in a primary or subspecialty
2. Administration (Non-Clinical Services)
 - i. Continuing evidence and peer recognition as administrative and clinical physician at regional and national levels as attested to by colleagues, mentors, or peers
 - ii. Provide significant demonstrable contributions to clinical services and laboratory administration in clinical and anatomic otolaryngology-head and neck surgery as attested to by faculty and colleagues
 - iii. Continuing evidence of participation in extra-departmental clinical rounds and conferences presenting otolaryngology-head and neck surgery findings and their significance in the care of the patient as attested to by colleagues, mentors, or peers
 - iv. Continuing evidence of excellence as a clinician role model in the teaching of outside physicians and residents on the administration of care based on otolaryngology-head and neck surgery results as attested to by colleagues, peers, and staff
 - v. Service on Departmental, College of Medicine, and/or Hospital committees as assigned
3. Clinical Service (Direct Patient Care)
 - i. Provide significant demonstrable contributions to patient care or academics as an expert in clinical otolaryngology-head and neck surgery as attested to by colleagues and peers
 - ii. Development of national or international reputation for excellence in clinical practice as attested to by faculty and colleagues qualified in the field and quality assurance audits within the department
 - iii. Evaluations of excellent or above by chairperson and peer review
 - iv. RVU generation in relation to benchmark as applicable

4. Instruction
 - i. Proven excellence as a teacher and practitioner of otolaryngology-head and neck surgery as demonstrated by evaluation by trainees working with the faculty member in a clinical teaching setting
 - ii. Demonstrated excellence in teaching and outstanding abilities to communicate with students, faculty, and administrators
 - iii. Evaluations of excellent or above by chairperson and peer review
 - iv. Factors considered should include the following where appropriate :
 1. Teaching load
 2. Development of new courses
 3. Development of syllabus material
 4. Student sponsorship
 5. Resident training
 6. Courses taken to improve teaching effectiveness
 7. Student evaluations
5. Research (Scholarly Activities)
 - i. Documentation of significant productive involvement or participation in scholarly activities such as publications, clinical studies, multi-centered trials, or funded projects. Evidence of establishment/continuation of research/scholarly program substantiated by publications in at least three different peer review journals
 - ii. Evidence of substantial professional academic status and leadership on a national or international level
 - iii. Educational excellence shall be recognized at the national and perhaps international level, as exhibited by scholarly activities through original or innovative publications, studies, reviews or other venues in area of specialty as attested to by colleagues, mentors, or peers
 - iv. Participation as a journal editor and/or editorial board member
 - v. Significant extramural funding of research activities is expected on-going external funding for the research program is expected during the time in the associate professor rank. Funding should be continuous or nearly continuous with more than one grant that could be sequential or simultaneous.
6. Professional Development
 - i. Demonstrated continuing professional development in academic otolaryngology-head and neck surgery as evidenced by a significant and active role in relevant professional and academic societies
 - ii. Evidence of established and recognized reputation in the specialty area by participation in professional scientific organizations on a national and perhaps international level

Special Title Series

A. Assistant Professor

1. Minimum Requirements
 - i. M.D., Ph.D., or equivalent degree
 - ii. Faculty holding the M.D. degree should be Board Certified/Eligible in Otolaryngology-Head and Neck Surgery or subspecialty, but preferably Board Certified
2. Administration (Non-Clinical Services)
 - i. Demonstrated successful experience in the administration of Otolaryngology-Head and Neck Surgery services including interaction with physicians and staff as attested to by colleagues, mentors, or peers
 - ii. Demonstrated satisfactory performance as an overseer of residents, students, and hospital staff as attested to by colleagues, mentors, or peers
 - iii. Service on Departmental committees as assigned
3. Clinical Service (Direct Patient Care)
 - i. Potential for expertise to provide surgical and diagnostic services as attested to by colleagues, mentors, or peers
 - ii. Clinical competence as demonstrated by opinions sought from other faculty and colleagues qualified in the area of specialty and quality assurance audits
4. Instruction
 - i. Potential for excellence in teaching of medical students, residents, fellows, continuing medical education attendees, and peer as demonstrated by student, resident, and peer evaluations
 - ii. Demonstration of clinical knowledge through syllabi, video, and audio learning aids, computer-based material, and/or professional communications to physicians and hospital staff
 - iii. Appropriate background and potential for the development of excellence in teaching and communication with students, faculty, and administrators
 - iv. Commitment to develop educational and curricular activities that interface with his/her area of specialty
5. Research (Scholarly Activities)
 - i. Potential for successful collaborative research or creative work supported through contracts, grants, or other funds and reported in peer-reviewed journals

- ii. Commitment to developing research excellence at the local level, as exhibited by training, publications of papers or abstracts, reviews or other venues in the discipline as attested to by colleagues, mentors, or peers
 - iii. Commitment to the development and application of original materials or other methods as additional measures of scholarly activity
6. Professional Development
- i. Potential for excellence in continuing professional development in otolaryngology-head and neck surgery as attested to by colleagues, mentors, or peers.
 - ii. Potential for professional recognition and specific competence in specialty areas as evidenced by participation or membership in professional scientific organizations on a regional level

B. Assistant to Associate Professor

- 1. Minimum Requirements
 - i. In addition to meeting the criteria for Assistant Professor, appointment or promotion to the rank of Associate Professor shall require demonstration of continued achievement and regional or national recognition as a leader in administration, patient care, instruction, service, and academic and research endeavors
 - ii. M.D., Ph.D., or equivalent degree, Board certification and satisfactory performance at the level of Assistant Professor
- 2. Administration (Non-Clinical Services)
 - i. Continuing evidence and peer recognition as administrative and clinical physician at regional or national levels as attested to by colleagues, mentors, or peers
 - ii. Provide significant demonstrable contributions to clinical services and administration in otolaryngology-head and neck surgery otolaryngology disciplines as attested to by faculty and colleagues
 - iii. Continuing evidence of participation in outside clinical department rounds and conferences presenting otolaryngology-head and neck surgery findings and their significance in the care of the patient as attested to by colleagues, mentors, or peers
 - iv. Continuing evidence of excellence as a clinical role model in the teaching of outside physicians and residents on the administration of care based on otolaryngology-head and neck surgery results as attested to by colleagues, peers, and staff
 - v. Service on Departmental, College of Medicine and/or Hospital committees as assigned

3. Clinical Service (Direct Patient Care)
 - i. Provide significant demonstrable contributions to patient care as an expert in clinical and anatomic otolaryngology-head and neck surgery as attested to by colleagues and peers
 - ii. Development of regional reputation for excellence in clinical practice as attested to by faculty and colleagues qualified in the field and quality assurance audits within the department
 - iii. Evaluations of satisfactory or above by chairperson and peer review
 - iv. RVU generation in relationship to benchmark effort
4. Instruction
 - i. Proven excellence as a teacher and practitioner of otolaryngology-head and neck surgery disciplines as demonstrated by evaluations by trainees working with the faculty member in a clinical teaching setting
 - ii. Demonstrated excellence in teaching and outstanding abilities to communicate with students, faculty and administrators
 - iii. Evaluations of satisfactory or above by chairperson and peer review
 - iv. Factors considered should include the following where appropriate
 1. Teaching load
 2. Development of new courses
 3. Development of syllabus material
 4. Student sponsorship
 5. Resident training
 6. Courses taken to improve teaching effectiveness
 7. Student Evaluations
5. Research (Scholarly Activities)
 - i. Documentation of productive involvement or participation in scholarly activities such as publications, clinical studies, multi-centered trials, or funded projects
 - ii. Evidence of substantial professional academic status and leadership on a regional or national level
 - iii. Educational excellence shall be recognized at the regional and perhaps national level, as exhibited by scholarly activities through original or innovative publications, studies, review or other venues in area of specialty as attested to by colleagues, mentors, or peers
 - iv. Extramural funding of research activities is highly desirable.
6. Professional Development
 - i. Demonstrated continuing professional development in otolaryngology-head and neck surgery as evidenced by an active role in relevant professional and academic societies

- ii. Evidence of established and recognized reputation in the specialty area by participation in professional organizations on a regional and perhaps national basis

C. Associate to Full Professor

1. Minimum Requirements
 - i. In addition to meeting the criteria for Associate Professor, appointment to the rank of Professor shall require demonstration of continued excellence in achievement and regional as well as national recognition as a leader in administration, patient care, instruction, service, academic and research endeavors
 - ii. Exemplary teaching experience at the level of Associate Professor
 - iii. Faculty holding the M.D. degree should be board certified in a primary or subspecialty
2. Administration (Non-Clinical Services)
 - i. Continuing evidence and peer recognition as administrative and clinical physician at regional and national levels as attested to by colleagues, mentors, or peers
 - ii. Provide significant demonstrable contributions to clinical services and laboratory administration in clinical and anatomic otolaryngology-head and neck surgery as attested to by faculty and colleagues
 - iii. Continuing evidence of participation in extra-departmental clinical rounds and conferences presenting otolaryngology-head and neck surgery findings and their significance in the care of the patient as attested to by colleagues, mentors, or peers
 - iv. Continuing evidence of excellence as a clinician role model in the teaching of outside physicians and residents on the administration of care based on otolaryngology-head and neck surgery results as attested to by colleagues, peers, and staff
 - v. Service on Departmental, College of Medicine, and/or Hospital committees as assigned
3. Clinical Service (Direct Patient Care)
 - i. Provide significant demonstrable contributions to patient care as an expert in clinical otolaryngology-head and neck surgery as attested to by colleagues and peers
 - ii. Development of national or international reputation for excellence in clinical practice as attested to by faculty and colleagues qualified in the field and quality assurance audits within the department
 - iii. Evaluations of excellent or above by chairperson and peer review
 - iv. RVU generation in relation to benchmark

4. Instruction
 - i. Proven excellence as a teacher and practitioner of otolaryngology-head and neck surgery as demonstrated by evaluation by trainees working with the faculty member in a clinical teaching setting
 - ii. Leadership role and significant contributions to teaching programs at regional and national levels
 - iii. Evaluations of excellent or above by chairperson and peer review
 - iv. Factors considered should include the following where appropriate :
 1. Teaching load
 2. Development of new courses
 3. Development of syllabus material
 4. Student sponsorship
 5. Resident training
 6. Courses taken to improve teaching effectiveness
 7. Student evaluations
5. Research (Scholarly Activities)
 - i. Documentation of significant productive involvement or participation in scholarly activities such as publications, clinical studies, multi-centered trials, or funded projects. Evidence of establishment/continuation of research/scholarly program substantiated by publications in at least three different peer review journals
 - ii. Evidence of substantial professional academic status and leadership on a national or international level
 - iii. Educational excellence shall be recognized at the national and perhaps international level, as exhibited by scholarly activities through original or innovative publications, studies, reviews or other venues in area of specialty as attested to by colleagues, mentors, or peers
 - iv. Participation as a journal editor and/or editorial board member
 - v. Extramural funding over significant period of time of research activities is highly desirable
6. Professional Development
 - i. Demonstrated continuing professional development in academic otolaryngology-head and neck surgery as evidenced by a significant and active role in relevant professional and academic societies
 - ii. Evidence of established and recognized reputation in the specialty area by participation in professional scientific organizations on a national and perhaps international level