DEPARTMENT OF RADIATION MEDICINE
STATEMENTS OF EVIDENCES REGARDING PROMOTION AND TENURE

Special Title Series (tenure-eligible)

Mission

The Department of Radiation Medicine at the University of Kentucky is dedicated to offering patients the most advanced cancer care available in one convenient, supportive and comprehensive center. Excellence in our clinical practice is the framework within which we seek and achieve excellence in our educational programs in radiation oncology and medical physics. These programs are also core missions for the department. In addition, the department's ongoing commitment to research seeks to offer patients important investigative therapies. Our basic and translational research efforts are designed to develop and disseminate new knowledge on which further improvements in therapy might be based. In this regard, our goal is to be an integral part of the NCI-designated Markey Cancer Center's success in research, mentorship, and career development.

Basic Premises

Faculty members who are appointed to the Special Title Series track will typically have a significant percentage (>60%) of their effort reserved for clinical service and/or instructional/educational efforts, along with a reasonable allocation to research /scholarly activity. Alternatively, the faculty member could have a significant percentage of effort (>60%) allocated for clinical service and, in addition, have very significant effort devoted to educational scholarship and/or very significant educational leadership roles accounting for at least 30% of their effort allocation.

Decisions regarding promotion and tenure are based on thorough review and consideration of the faculty member's unique combination of strengths and accomplishments relative to their agreed upon faculty workload, distribution of effort and consistent with our Department's Statement of Evidences.

As part of a dynamic university medical center, radiation medicine enjoys a close relationship with a variety of specialty areas, including medical oncology, urology, gynecologic oncology, anesthesiology, diagnostic radiology, pathology, and various other surgical specialties. This multidisciplinary approach ensures excellent continuity of care and integration of services. To be considered for promotion, the faculty member must subscribe to and participate in a care model that recognizes the importance of care continuity, team orientation, and service excellence. In addition, the faculty member must meet the terms outlined in their letters of appointment (or reappointment) and consistent with the Departmental Statement of Evidences.

Promotion is awarded based on performance, not time in rank; however, submission for promotion earlier than 5-6 years in rank is unusual and only considered for exceptional performance with departmental support and support of the Department Chair.

As part of an academic medical center, it is expected that the faculty member will demonstrate excellence in areas to which they have assigned effort (DOE). It is expected that the faculty member will also engage in appropriate professional development activities.

Service-related contributions will be considered in the promotion and tenure decision. For example, administrative responsibilities (e.g. extended service on Institutional Review Board) or exceptional educational contributions (e.g. extended duration of program supervision such as Masters or PhD in Medical Physics) would meet this criterion. Other examples could include service on national committees, a significant leadership role within the UK College of Medicine, UK Healthcare, or within the larger university (e.g. University Senate, etc.)

Instruction is defined as the act of teaching or providing education. The college recognizes that instruction may be provided through many means, including formal didactic instruction, bedside teaching while providing clinical care, laboratory or experiential instruction, and other methods such as online, podcasts, etc. Additionally, instruction may be provided to anyone including enrolled students, graduate trainees, faculty peers, and learners outside of the University.

In order to meet the criteria for promotion in rank (with tenure), it is not expected that the faculty member will have demonstrated completion of every item listed below. These criteria serve as examples of how the candidate for promotion and/or tenure might demonstrate that their accomplishments meet or exceed departmental requirements for promotion in rank.

General Description of Faculty Roles and Impact on Promotion and Tenure Decisions

The Department of Radiation Medicine is fortunate to have a variety of general faculty classifications. In general, each faculty member will best fit one of the following descriptions, however there can be overlap between areas:

1. Radiation oncologist (MD): Significant clinical and educational effort. Promotion of these faculty members on Special Title Series will require evidence of independent research activity culminating in presentations and publications.

2. Medical Physicist (PhD): Significant clinical and educational effort. Promotion of these faculty members in Special Title Series will require evidence of independent research activity culminating in presentations and publications. Typically, promotion will require a moderate level of level of funding and

research publications in peer-reviewed journals, commensurate with time allotted to research efforts.

3. Non-clinical research faculty (PhD): These individuals are expected to be part of the overall Markey Cancer Center research effort and direct a successful laboratory-based research effort with a significant level of funding and research publications in peer-reviewed journals. In addition, they will have a major administrative role within the department or a recognized center with the College of Medicine.

Impact of Reputational Status on Academic Rank for Special Title Series

I. Assistant Professor- Local achievements and recognition within the College of Medicine

II. Associate Professor- Regional achievements and recognition beyond the College of Medicine, UK HealthCare system, within the Commonwealth of Kentucky

III. Full Professor- National/International achievements and recognition beyond the borders of Kentucky and/or outside of the USA

Appointment to the Faculty

In order to be appointed to the department's faculty at the Assistant Professor level in the Special Title Series, the following criteria should be met:

I. Terminal degree (MD, DO, PhD or equivalent)
II. Eligible for board certification if applicable (Physicians and Physicists)
III. Interest in and potential for excellence in teaching of residents, medical students, or other learners
IV. Interest in and potential for providing excellent clinical care and service (Physicians and Physicists)
V. Interest in and potential for success in scholarly activities, including clinical or translational research and/or educational scholarship
VI. Willingness to participate in non-clinical activities important to the department's and institution's missions, including service on departmental or institutional committees
VII. Willingness to undertake ongoing professional development activities

Overview and Principles Relative to Described Metrics – The metrics presented n this document are examples and are not a checklist.

Clinical and Other Service /Patient Care Metrics

As an academic medical center, the UK College of Medicine and UK HealthCare revolve around patients and the expert care that are provided by its clinicians. In terms of this document, a clinical expert is defined as having "strong regional and/or national

recognition as a clinical expert as evidenced by leadership roles and reputation related to the radiation oncology or radiation/medical physics." Therefore, demonstrable clinical competence is an absolute requirement for promotion to any rank.

Instruction Metrics

Providing a solid education for pre- and post-doctoral learners to enable future success is a core mission of an academic medical center and the UK Department of Radiation Medicine. The educational mission in the Department is tightly associated with its clinical practice. The research activities of the department are a means of further augmenting the educational mission, providing opportunities for learners to better understand how to pursue new knowledge as a separate and related skill, where appropriate. It is likely that every faculty member will have obligations in the educational programs, although to varying degrees depending on role and responsibility. Some faculty members in the Special Title Series will have a significant effort (DOE) devoted to educational instruction, scholarship and leadership. For these individuals, a higher level of demonstrated educational accomplishment will be required for successful promotion.

Research Metrics and Scholarship

Publications of original research and/or review articles in peer-reviewed journals will improve the reputation of the UK Department of Radiation Medicine, the College of Medicine and UK HealthCare. When appropriate, Special Title Series faculty will be, in part, evaluated on the number and quality of discipline-related research publications. In particular, publication of first and senior author manuscripts demonstrate the impact of the candidate's innovation and level of contribution to the work. Alternatively, demonstrable contributions toward publication as evidenced by middle authorship and letters of support from the first or senior author can provide adequate evidence of scholarship. Book chapters, reviews, and/or textbooks related to an area of clinical or scientific expertise that are recognized as authoritative and are widely cited can also be a component of the promotion dossier that supports promotion, although these are more appropriately considered educational contributions.

Publications in a group authorship will be weighted relative to the quality of the journal and new knowledge generated. In addition, the significance of the contribution to the publication can be assessed with the help of a letter of support from the lead author. The highest weight will be given to original clinical research that impacts clinical care at the national or international level. In the case of prospective clinical trials, additional weight is given when serving as institutional PI as opposed to associate investigator. It is not enough merely to participate in clinical trials. Finally, in terms of consideration for promotion, weight will be given to clinical trial recruitment and stewardship of resources as demonstrated by adherence to budgets.

To support one's research effort and the DOE, for promotion from Assistant to Associate Professor there is a general expectation to have demonstrated success in garnering at least

partial intramural or extramural support for their research program if effort is allocated for research. For promotion from Assistant to Associate Professor on the Special Title Series, participation in funded research efforts is a general expectation, consistent with the allotted distribution of effort; however, principal investigator status is not strictly required. For faculty on Special Title Series, it is not absolutely required that extramural peer-reviewed funding is obtained, assuming that there is unequivocal demonstration of excellence in areas considered appropriate for the position and necessary to the department's mission, with a level of accomplishment that argues strongly for promotion.

To support one's research effort and the time involved (if any), for the candidate for promotion from Associate to Full Professor there is a general expectation to have demonstrated success in garnering at least 75% of the intramural or extramural support for their research program on a consistent basis if effort is allocated for research. For promotion from Associate Professor to Full Professor on the Special Title Series, participation in funded research efforts is a general expectation, consistent with the allotted distribution of effort, and principal investigator status is generally required. However, for faculty on Special Title Series, it is not absolutely required that extramural peer-reviewed funding is obtained, assuming that there is unequivocal demonstration of excellence in areas considered appropriate for the position and necessary to the department's mission, with a level of accomplishment that argues strongly for promotion.

Promotion and Tenure Criteria for Promotion from Assistant Professor to Associate Professor – Special Title Series

The faculty member under consideration for promotion in academic rank from Assistant to Associate Professor should be able to demonstrate a regional reputation as defined above. The criteria below represent possible metrics by which a candidate could potentially gain a regional reputation and satisfy promotion criteria. For faculty members on tenure-eligible tracks with an allocation of effort to research activities, promotion in rank and the granting of tenure require the creation of new knowledge relevant to the discipline, as measured by some of the criteria outlined below. In addition, there should generally be evidence of external validation of the faculty member's research program, typically in the form of extramural peer-reviewed funding, publications, or other recognition.

Clinical and Other Service/Patient Care Metrics

I. Productivity
    a. There is a general expectation for physician faculty that the faculty member will achieve or exceed at least 90% of wRVU targets on a consistent basis while maintaining high quality (MD's). There can be exceptions to this based on numerous factors, such as Family Medical Leave, institutional or departmental decision that affect the faculty member's ability to reliably reach wRVU targets, or other factors.
    b. Referral of complex patients needing radiation oncology services (MD's)

c. Establishment of or support of new clinical programs or technologies within the department, e.g. Radiopharm, Deep Inspiration Breath Hold, etc. (MD's, physicists)
d. Building and growth of a new practice area, including an outreach location (MD's, physicists)
e. Others as appropriate, as suggested by candidate and endorsed by chair (MD and physicists)
    A. Number of patient encounters or consultations
    B. Number of patient referrals from outside the university
    C. Provision of unusual types of clinical service not otherwise available in the region
    D. Organizing innovative types of patient care programs
    E. Organizing state, regional, national or international conference or symposium specifically addressing clinical care
    F. Evidence of excellent performance as medical director
    G. Outstanding patient satisfaction scores (CG-CAHPS, HCAHPS)
    H. Letters of support from clinical colleagues/peers (within or outside institution)

II. Quality indicators
a. Absence of reportable radiation misadministrations (MD's and physicists)
b. Outcomes data if available (MD's and physicists)
c. Letters or other documented measures of patient and referring physician satisfaction that demonstrate excellence in clinical care delivery (MD)
d. Letters of reference from department chair, colleagues in the faculty member's department, referring physicians, and colleagues in other departments describing clinical excellence. (MD's and physicists)
e. Leading development of clinical protocols or pathways that objectively demonstrate a measurable positive impact on patient care at or beyond the local level (MD's and physicists)
f. Others as appropriate, as suggested by candidate and endorsed by chair (MD and physicists)

III. Clinical Leadership: Leadership roles in regional or national professional organizations related to clinical expertise, including leadership in regional and/or national courses or programs (MD and physicists)
a. Service on regional or national committees developing guidelines and policies for management in area of clinical expertise.
b. Membership on editorial boards in area of clinical expertise.
c. Peer-reviewed funding to support innovations that influence clinical practice regionally or nationally, if the faculty member has a portion of effort allocated to research.
d. Regional or national awards for contributions or innovation in the area of clinical expertise influencing clinical practice.

Non-clinical service

I. Service to College of Medicine, UK HealthCare and University of Kentucky committees, advisory, mentorship teams, etc.
II. Non-clinical regional and national committees
III. Philanthropy:
    A. Endowed chairs
    B. Philanthropic dollars realized
    C. Philanthropic dollars pledged
IV. Community engagement:
    A. Outreach programs to schools
    B. Interaction with community groups
    C. Free clinics

Instruction metrics

I. Outcomes of learners
    A. Residency Match Rates (mostly applies to Masters in Medical Physics program)
    B. Board certification pass rates of residents (MD and physicists)
    C. Letters of support from former learners attesting to the teaching skills of the faculty member and the importance of those skills in the former learner's success. (MD and physicists)
    D. Others as appropriate, as suggested by candidate and endorsed by chair (MD and physicists)

II. Quantitative and qualitative teaching metrics. Peer review and the judgment of colleagues in the department. Anecdotal reports of outstanding ability in teaching will not by themselves suffice to establish this criterion.
    A. Number of students/residents/fellows directly taught by the candidate. Including approximate number of sessions, number of students per session, setting of session (e.g. classroom, small group, bedside, etc.). (MD and physicists)
    B. Lectures, proctorships, or preceptorships for professional colleagues. (MD and physicists)
    C. Favorable formal and standardized teaching evaluations from learners. (MD and physicists)
    D. Teaching awards, whether regional or local. (MD and physicists)
    E. Mentorship of trainees or junior faculty. Examples may include outcomes such as successful development of new skills in the mentee, successful remediation of mentees, the mentee's development of a regional or national reputation, etc. (MD and physicists)
    F. Academic recognition, award, or other evidence of excellence achieved by a mentee of the candidate that can be clearly tied to the mentor's influence. (MD and physicists)

G. Service in educational administration, planning, or analysis. (MD and physicists)
H. Textbooks written, compiled, or edited by the faculty member and published by an established national or international publishing house. (MD and physicists)
    i. Additional factors to consider may include the adoption of the book beyond the local or regional market, overall sales, and whether it is being considered for further editions. Reference texts are weighted the same as classroom texts. Book chapters are weighted less than a textbook. Podcasts, instructional videos, and other electronic or online educational materials. Departments should consider the number of uses and demonstrated use beyond the local area.
I. Development of educational unit, course, or curriculum, preferably with demonstration of strong student evaluations, improved learning through standardized test scores, and adoption of the program beyond the local area. (MD and physicists)
J. Writing, performing, or supervising written, oral, or simulation-based exams. (MD and physicists)
K. Successful educational program leadership such as residency program director, etc. (MD and physicists)
L. Mentorship of physicians/student/resident/fellow with abstracts, posters, presentations, publications, etc. (MD and physicists)
M. GME, RRC, or CAMPEP survey reports on the graduate or post-graduate program (i.e. accreditation without citations), if the candidate can demonstrate a substantial role in the favorable accreditation decision (MD and physicists)
N. Invitations to speak regionally or nationally on issues related to area of clinical expertise with information that is accessible and usable for additional practitioners. (MD and physicists)

III. Mentoring and Advising
A. Significant contribution to the professional development of students
B. Outstanding performance as a departmental graduate advisor
C. Evidence of student mentoring (professional or graduate students)
D. Member or Chair of graduate student advisory committees (MD and physicists)
E. Evidence of success/excellence in mentoring/advising activities is provided by: (MD and physicists)
    i. Placement of graduate students or post-doctoral fellows into academic, scholarly or professional positions
    ii. Trainee/learner accomplishments such as board pass rates
    iii. Trainee/learner publications or presentations

iv. Mentee faculty accomplishments – promotion, funding, publications, etc.
v. Letters of support from trainees
vi. Letters of support from faculty colleagues attesting to excellence in role

F. Evidence of teaching or communicating publicly with clinicians/learners based on the niche or area of expertise (ex. talks to College of Medicine, regional partners, etc.).
G. Publications, protocols, guidelines, clinical talks, and/or policies that are public, reviewed, and usable.

Research Metrics and Scholarship

I. Research/Scholarly activity
A. Podium presentations at regional or national meetings
B. Posters presented at regional or national meetings
C. Number of publications (peer reviewed are weighted more heavily).
i. Average 2 per year during tenure-eligible term
D. Dollars of funding per square foot of research space (if applicable)

II. Contributing member of a successful research team (team science) in clinical, translational, or foundational science

III. Participation on regional (or national) panels or committees that review research and/or set research policy or guidelines

IV. Participation as a "team" expert for regional (or national) scientific effort (ex. college Alliances, guidelines/talks/webcasts based on expertise)

V. Extramural grants and funding

A. NIH or other funding awards
i. Principal or co-investigator investigator on one or more extramural grants supporting a portion of the research effort over half of the tenure-eligible time frame in the department. As a guideline, support of at least 50% of the time allocated to research effort is suggested as optimal for promotion.
ii. New grants submitted (peer reviewed, industry, philanthropy, etc.).
iii. Indirects realized, and the amount of Research Enrichment Funds returned to the Department
B. Grants submitted (NIH, other peer reviewed, industry, etc.)
C. Regional or Federal scientific panel participation
a. NIH Study Section participation (chair>member>invited)
b. FDA panel participation

VI. Educational scholarship
   A. Peer-reviewed educationally-oriented publications
   B. Creation and peer review of learning materials for local, regional or national use
   C. Local, Regional or National Teaching awards

VII. Research/scholarly activities evidenced by holding PI funding or senior author status
   A. Letters of support from the study PI or senior author of the publications indicating the specific role and contributions of the faculty member. Examples of unique creative contributions could include conception and design of the project; data collection clinical support; analysis and interpretation of data; intellectual contribution to grants and manuscripts; administrative, technical, supervisory or material support of the project and subject recruitment. These efforts may not require or result in independent funding.
   B. For team science projects, letters of support should assess the faculty member's contribution as major, moderate, or minor (defined below). Contributions assessed as "major" should be considered as equivalent to first or last authorship.
      i. Major: substantive input into overall design of research protocol or manuscript; regular participation in study meetings with input on a range of issues or protocol amendments; planning and directing analyses that span the breadth of the protocol.
      ii. Moderate: input into one or more specialist areas of a protocol or manuscript; regular participation in data collection, analysis, management, or quality control activities on a specific aspect that contributes to overall project, but without direct input into the overall project; assistance with revision/ resubmission/ rebuttal of a manuscript or project.
      iii. Minor: provision of critical review to sharpen a research protocol or manuscript without major substantive changes; advising only on specific issues when requested by the PI (e.g.: not regularly involved), performance of data acquisition or analysis without participation in the overall project.
   C. Letters of support from faculty peers indicating the faculty member's role

Administrative and Leadership Metrics

I. Significant participation in planning and completing facility construction and/or renovations
II. Completed or significant involvement in business plan for expansion (ex. new office site/new line of business, etc.)
III. Leadership of Graduate or Post-graduate program

a. Residency and/or other appropriate program accreditation
b. Implementation of a mentoring program
c. Collaborative endeavors with other departments/schools.
d. Successful direction of a clinical program or clinical laboratory. Examples may include financial measures such as contribution margin, relevant accreditation, program growth, or independent awards of excellence

IV. Awards such as Fellowship in National Societies (e.g. ASTRO), Distinguished Alumni Awards, etc.
V. Officer or active committee or subcommittee member in a national or international professional organization
VI. Officer or active committee or subcommittee member in a regional or state professional organization
VII. Service on a governmental commission, task force, or board
VIII. Participation in governmental policy development and/or implementation
IX. Serving an administrative leadership role at UK or its affiliated institutions
X. Serving as program chair or in a similar position at a national or international meeting
XI. Serving as an officer or active member in the Faculty senate or Faculty council
XII. Serving as an officer or active member of major COM or Department of Radiation Medicine committees
XIII. Serving as an officer or active member in major committees at the University hospital, VA hospital or other patient care-related facilities
XIV. Serving as a member of the IRB or IACUC research committees
XV. Serving as Director of a University Center or Institute
XVI. Administration and leadership activities as evidenced by:
a. Letters of support from committee members or chair
b. Rank ascension (i.e., regional committee to national committee, committee member to chair)

Promotion and Tenure Criteria for Associate to Full Professor: (Special Title Series, (tenure-eligible)

The faculty member under consideration for promotion in academic rank from Associate to Full Professor must be able to demonstrate a national or international reputation as defined above. Criteria to be met include those required for the rank of Associate Professor plus higher levels of leadership and accomplishments. The criteria below represent possible metrics by which a candidate could potentially gain a national or international reputation and satisfy promotion criteria. There should be evidence of external validation of the faculty member's research program, typically in the form of extramural peer-reviewed funding, peer-reviewed publications and/ or other national or international recognition.

Clinical Service Metrics

I. Productivity

A. Achieving and exceeding wRVU targets while maintaining high quality (MD's)

B. Referral of complex patients needing radiation oncology services (MD's)

C. Establishment of or support of new clinical programs or technologies within the department, e.g. Radiopharm, Deep Inspiration Breath Hold, etc. (MD's, physicists)

D. Building and growth of a new practice area, including an outreach location (MD's, physicists)

E. Others as appropriate, as suggested by candidate and endorsed by chair (MD and physicists)

II. Quality indicators

A. Absence of reportable radiation misadministrations (MD's and physicists)

B. Outcomes data if available (MD's and physicists)

C. Letters or other documented measures of patient and referring physician satisfaction that demonstrate excellence in clinical care delivery (MD)

D. Letters of reference from department chair, colleagues in the faculty member's department, referring physicians, and colleagues in other departments describing clinical excellence. (MD's and physicists)

E. Leading development of clinical protocols or pathways that objectively demonstrate a measurable positive impact on patient care beyond the local level (MD's and physicists)

F. Others as appropriate, as suggested by candidate and endorsed by chair (MD and physicists)

III. Clinical Leadership: Leadership roles in national professional organizations related to clinical expertise, including leadership in national courses or programs (MD and physicists)

A. Service on national committees developing guidelines and policies for management in area of clinical expertise.

B. Membership on editorial boards in area of clinical expertise.

C. Peer-reviewed funding to support innovations that influence clinical practice nationally

D. National awards for contributions or innovation in the area of clinical expertise influencing clinical practice.

Non-clinical service

I. Service to College of Medicine, UK HealthCare and University of Kentucky as Chair of committees, mentorship teams, etc.

II. Service on Non-clinical national committees

III. Philanthropy

A. Endowed chairs
B. Philanthropic dollars realized
C. Philanthropic dollars pledged

Instruction metrics

I. Outcomes of learners

A. Residency Match Rates (mostly applies to Masters in Medical Physics program)

B. Board certification pass rates of residents (MD and physicists)

C. Letters of support from former learners attesting to the teaching skills of the faculty member and the importance of those skills in the former learner's success. (MD and physicists)

D. Others as appropriate, as suggested by candidate and endorsed by chair (MD and physicists)

II. Quantitative and qualitative teaching metrics. Peer review and the judgment of colleagues inside and outside the department. Anecdotal reports of outstanding ability in teaching will not by themselves suffice to establish this criterion.

i. Number of students/residents/fellows directly taught by the candidate. Including approximate number of sessions, number of students per session, setting of session (e.g. classroom, small group, bedside, etc.). (MD and physicists)
ii. Lectures, proctorships, or preceptorships for professional colleagues. (MD and physicists)
iii. Favorable formal and standardized teaching evaluations from learners. (MD and physicists)
iv. Local, regional or national teaching awards. (MD and physicists)
v. Mentorship of trainees or junior faculty. Examples may include outcomes such as successful development of new skills in the mentee, successful remediation of mentees, the mentee's development of a regional or national reputation, etc. (MD and physicists)
vi. Academic recognition, award, or other evidence of excellence achieved by a mentee of the candidate that can be tied to the mentor's influence. (MD and physicists)
vii. Service in educational administration, planning, or analysis. (MD and physicists)
viii. Textbooks written, compiled, or edited by the faculty member and published by an established national or international publishing house. (MD and physicists)
ix. Additional factors to consider may include the adoption of the book beyond the local or regional market, overall sales, and whether it is being considered for further editions. Reference texts

are weighted the same as classroom texts. Book chapters are weighted less than a textbook. Podcasts, instructional videos, and other electronic or online educational materials. Departments should consider the number of uses and demonstrated use beyond the local area.

x. Development of educational unit, course, or curriculum, preferably with demonstration of strong student evaluations, improved learning through standardized test scores, and adoption of the program beyond the local area. (MD and physicists)

xi. . Writing, performing, or supervising written, oral, or simulation-based exams. (MD and physicists)

xii. Successful educational program leadership such as residency program director, etc. (MD and physicists)

xiii. Mentorship of physicians/student/resident/fellow with abstracts, posters, presentations at national meetings, publications, etc. (MD and physicists)

xiv. GME, RRC, or CAMPEP survey reports on the graduate or post-graduate program (i.e. accreditation without citations), if the candidate can demonstrate a substantial role in the favorable accreditation decision (MD and physicists)

xv. Invitations to speak nationally on issues related to area of clinical expertise with information that is accessible and usable for additional practitioners. (MD and physicists)

xvi. Mentoring and Advising (MD and physicists)

xvii. Significant contribution to the professional development of students

xviii. Outstanding performance as a departmental undergraduate or graduate advisor

xix. Evidence of student mentoring (professional or graduate students)

xx. Evidence of junior faculty mentoring

xxi. Member or Chair of graduate student advisory committees (MD and physicists)

xxii. Evidence of success/excellence in mentoring/advising activities is provided by: (MD and physicists)

1. Placement of graduate students or post-doctoral fellows into academic, scholarly or professional positions
2. Trainee/learner accomplishments such as board pass rates
3. Trainee/learner publications or presentations
4. Mentee faculty accomplishments – promotion, funding, publications, etc.
5. Letters of support from trainees
6. Letters of support from faculty colleagues attesting to excellence in role

xxiii. Evidence of teaching or communicating publicly with clinicians/learners based on the niche or area of expertise (ex. talks to College of Medicine, regional partners, etc.).
xxiv. Publications, protocols, guidelines, clinical talks, and/or policies that are public, reviewed, and usable.

Research Metrics and Scholarship

I. Research/Scholarly activity
A. Presentations at national meetings
B. Presentations at national meetings
C. Number of publications (peer reviewed are weighted more heavily)
1. Average 3 per year during promotion-eligible term
2. Average Impact factor of all peer-reviewed publications during promotion-eligible term >2.0
3. Dollars of funding per square foot of research space (if applicable)

II. Contributing member of a successful research team (team science) in clinical, translational, or foundational science

III. Participation on national panels or committees that review research and/or set research policy or guidelines

IV. Participation as a "team" expert for national scientific effort

V. Extramural grants and funding

A. NIH or other funding awards
1. Principal investigator on one or more extramural grants supporting a significant portion of the research effort over half of the tenure-eligible time frame in the department. As a guideline, support of at least 75% of the time allocated to research effort is suggested as optimal for promotion.
i. New grants submitted (peer reviewed, industry, philanthropy, etc.).
ii. Indirects realized, and the amount of Research Enrichment Funds returned to the Department
B. Grants submitted (NIH, other peer reviewed, industry, etc.)
C. Federal scientific panel participation
a. NIH Study Section participation (chair>member>invited)
b. FDA panel participation
c. Other

Administrative and Miscellaneous Metrics

I. Significant participation in planning and completing facility construction and/or renovations

II. Completed or significant involvement in business plan for expansion (ex. new office site/new line of business, etc.)

III. Faculty Affairs

A. Faculty retention rate (Division Chief or Chair)

B. Percent faculty eligible for promotion who got promoted (>80%) (Division Chief or Chair)

C. Faculty expansion consistent with planning/strategy (Division Chief or Chair)

D. Junior faculty mentorship efforts recognized by faculty member and/or specific mentoring program established

IV. Leadership of Graduate or Post-graduate program

A. Residency and/or other appropriate program accreditation
B. Implementation of a mentoring program.
C. Collaborative endeavors with other departments/schools.
D. Successful direction of a clinical program or clinical laboratory. Examples may include financial measures such as contribution margin, relevant accreditation, program growth, or independent awards of excellence.

V. Awards such as Fellowship in National Societies (e.g. ASTRO), Distinguished Alumni Awards, etc.