

Professional-Track: Preparing Your Promotion Dossier

Presented by:

E. Steve Roach, MD, Assistant Dean for Faculty Academic Affairs

Ana Rubel, Assistant Director for Faculty Academic Affairs

Resources available on our webpage:

<https://intranet.dellmed.utexas.edu/public/promotion-and-tenure-information>

Questions? Please reach out to us: DellMedFacultyAffairs@austin.utexas.edu

Meeting the Varied Missions of Dell Med:

HEALTH STARTS HERE

STRATEGIC PLAN
for The University of
Texas Medical Center,
anchored by
Dell Medical School
2024–2030

GUIDING VALUE
PUTTING PATIENTS FIRST

CORE VALUES
EXCELLENCE
INNOVATION
IMPACT
COLLABORATION
COMPASSION
HUMILITY
STEWARDSHIP
ALTRUISM

UT TEXAS
WHAT STARTS HERE
CHANGES THE WORLD

VISION

DEFINING THE FUTURE OF HEALTH

The University of Texas Medical Center, anchored by Dell Medical School, is defining the future of health.

As a world-class academic medical center working together with our community, powered by cutting-edge technology and digital capabilities, we set the standard for excellence in integrated, multidisciplinary patient care, pioneer research with meaningful impact, lead innovation in medical education and catalyze life sciences entrepreneurship.

MISSION

TO REVOLUTIONIZE HOW PEOPLE GET & STAY HEALTHY by:

- Building a sustainable academic health system that delivers person-centered, integrated care across the continuum.
- Embracing novel, collaborative solutions to ensure that everyone has the opportunity to be as healthy as possible.
- Empowering patients, families and communities to be active participants in the health care process through information, access, engagement and agency.
- Cultivating transformative research, entrepreneurship and innovation that leads to real-world impact.
- Equipping faculty, staff and learners with the knowledge and skills necessary to lead the next generation of health care.
- Leading the advancement and use of cutting-edge technologies, data and digital capabilities that serve the needs of patients, physicians, health care professionals, faculty, staff, learners and our community.

FOUNDATIONS FOR SUCCESS

PEOPLE

Inspire, value and support our faculty and staff to contribute to their full potential.

ENVIRONMENT

Create a welcoming place for all people to heal, grow and learn.

CULTURE

Promote a culture of curiosity and collaboration that propels the continuous pursuit of knowledge and excellence.

SUSTAINABILITY

Install fiscal discipline and stewardship of public, private and philanthropic resources to ensure our financial resilience in supporting our mission.

STRATEGIC OBJECTIVES

ADVANCE THE DELIVERY OF EXCEPTIONAL CARE

- Expand access

- Maximize the

- Build the hos

- Champion in

- quality, exper

EMPOWER OPP

- Pursue auth

- Enable patie

- Invest in par

- Design data

TRAIN PHYSICI

- Attract and d

- and inquiry

- Pioneer inn

- Advance col

- Equip the wo

- and advance

DRIVE DISCOVER

- Accelerate t

- treatments a

- Cultivate tra

- discoveries

- Facilitate co

- clinical trans

- Leverage the

ACCELERATE TR

- Catalyze life

- that address

- Cultivate me

- meaningful i

- Facilitate be

- researchers

- Foster an ec

The broad mission of The University of Texas at Austin Dell Medical School includes clinical care, education of residents and students, and scholarship. Fulfilling these equally vital goals requires meaningful contributions from faculty members with a variety of backgrounds, skills, and interests.






To recognize the important contributions of these faculty to Dell Med's mission, the professional-track provides two advancement pathways or 'title series' :

- Clinical professor title series
- Professor title series

Goals for This Presentation

This session will provide guidance for professional-track faculty members on how to best synthesize the impact of their accomplishments and create a promotion dossier that will optimally depict these achievements.

In this session we will address:

-  *What is the purpose of the promotion dossier?*
-  *What are the required vs. supplemental components of the dossier?*
-  *What contributions convey meaningful impact or geographical reputation?*
-  *Why does the CV need to follow the Dell Medical School CV template?*
-  *What are some of the resources available for help with the dossier?*

Area of Excellence: Professional-Track

- The medical school defines four areas of review that align with its mission. Three of these may be designated as an **Area of Excellence**:
 - **Clinical expertise**
 - **Educational leadership**
 - **Investigation and inquiry**
 - **Academic and professional service (may not be designated as Area of Excellence)**
- Promotion in each area is based on pre-established guidelines for achievement set by the medical school.
- Substantial achievement must be demonstrated in the Area of Excellence. Accomplishments in the other areas of review should be delineated as **Additional Contributions to the Academic Enterprise**.

Key Components of the Professional-Track Dossier

Focused evaluation in the designated Area of Excellence (clinical expertise, educational leadership, or investigation and inquiry)

Additional contributions to the academic enterprise.

Effective Dossier Preparation: General Principles

A well-prepared, detailed dossier improves recognition of the full range of your accomplishments by reviewers at every step of the process. This, in turn, improves the likelihood of success.

Together the dossier components should:

- Make the scope of your accomplishments easy to understand
- Highlight the impact of your work, not just the activities
- Focus on the achievements during the time at your current rank
- Demonstrate a positive trajectory of achievements
- Establish the geographic scope of your reputation
- Illustrate accomplishments with objective data whenever possible

Typical Dossier Contents

Required documents

- Up-to-date CV in correct format
- Candidate impact statement
- Chair's nomination letter
- Peer evaluation letters (at least 3)
- Summary of invited reviewers
- Learner evaluations*

Supplemental (optional) material

- Patient or mentee letters
- Media stories
- Annotated list of 5 most significant articles
- Expanded outcome data from clinical or educational projects
- Updated CV highlighting major achievements since initial CV was submitted
- Other relevant information

* Required for faculty who interact with learners

Typical Dossier Contents

Required documents

- Up-to-date CV in correct format
- Candidate impact statement
- Chair's nomination letter
- Peer evaluation letters (at least 3)
- List of invited peer reviewers
- Learner evaluations

Supplemental (optional) material

- Patient or mentee letters
- Media stories
- Annotated list of 5 most significant articles
- Expanded outcome data from clinical or educational projects
- Updated CV highlighting major achievements since initial CV was submitted
- Other relevant information

In this presentation we will concentrate on the three highlighted sections.

Your Title Series Will Influence the Dossier's Content

🦋 Clinical professor title series:

- Requires active engagement in scholarly activities that derive from and support clinical, teaching, and professional service activities. Scholarship is defined broadly. **Peer-reviewed publications are not required.**
- Reputation for excellence derives from clinical focus and is typically local or regional.
- Evaluation letters can be entirely internal (but external letters are also allowed).

🦋 Professor title series:

- Expected to play an *active and sustained key role in a program of scholarship in an area of expertise*, which includes **traditional scholarship output (e.g., peer-reviewed publications)**.
- Reputation for excellence derives in part from traditional scholarship and is typically broader.
- Only one evaluation letter can be internal.

The series that best characterizes your overall contributions is usually the one to select, recognizing that contributions may overlap the two categories.

Scholarship

Defined as: the creation and/or dissemination of new knowledge*.

Dell Med uses a broad, flexible definition that includes:

- **Discovery**, original research that advances knowledge
- **Integration**, synthesizing information across disciplines, topics, or time
- **Application**, involving the rigorous application of your disciplinary expertise
- **Teaching**, systematic study of teaching and learning processes**

*All of these require accomplishments beyond your service duties (i.e., beyond your “job”) and in formats that allow dissemination, application, and/or evaluation by peers.

**Requires a format that will allow public sharing and the opportunity for application and evaluation by others.

Perfecting the Candidate Impact Statement

Candidate Impact Statement

- One statement (less than 4 pages) should emphasize contributions and achievements **while in rank**. Divide the statement into two sections – one for the Area of Excellence and one labeled Additional Contributions to the Academic Enterprise.
- Should educate non-biomedical readers and discuss:
 - Activity, impact, and **trajectory** of scholarship
 - Clinical activities, patient outcomes – if available
 - Service/leadership
 - Educational activities
 - Mentorship
 - Community-facing scholarship and practice
- If Area of Excellence is Investigation and Inquiry, statement must include NIH mean RCR index
 - Measures the scientific influence of an investigator's publications by field
 - For more guidance: please see NIH mean RCR index for Investigation and Inquiry information on OFAA Promotion and Tenure Library page
- For guidance on the candidate impact statement, check out sample statements on the OFAA Promotion and Tenure Resource Library

Creating an Effective Impact Statement

- Focus on the contributions during your time at current rank
- Organize the impact statement with relevant subheadings
- Include specific examples and outcome data to support accomplishments
- Provide evidence for reputation and a positive trajectory
- Try to avoid duplication
- Address potential unfavorable factors in the impact statement, the chair's letter, or both
- Add context and define significance when appropriate (e.g., was an award from the county medical society or from a national organization with 5,000 members?)
- Do not undersell or oversell your accomplishments!

Contributions that suggest impact at the institutional level

- Development and/or leadership of a clinical program
- Improved clinical outcomes with objective metrics
- Educational leadership roles
- Development and/or leadership of residency program, fellowship program
- Development/dissemination of curricula, practice guidelines
- Leadership of and/or engagement in quality improvement efforts that have measurably improved outcomes
- Organization of symposium in area of clinical expertise
- Honors and awards from UT, Dell Medical School, clinical site, local organizations
- Committee leadership/service at UT, Dell Medical School, clinical site
- Mentorship including evidence of the impact on mentees

Contributions that suggest impact and reputation beyond the institution

- Invited presentations – state/regional, national, international
- Organization of symposium on a state/regional, national, international level
- Invited service on advisory panels and national committees
- Publications, NIH mean Relative Citation Ratio (RCR)
- Competitive grant funding, especially federal or equivalent
- Honors or awards from national or regional organizations
- Leadership roles in professional societies or other entities related to your area of expertise
- Mentorship with evidence of impact on mentees

Additional Contributions to the Academic Enterprise

- Provide evidence supporting a future trajectory of excellence in additional contributions to the academic enterprise.
- Additional Contributions to the Academic Enterprise offered by the candidate **should not repeat the accomplishments in the Area of Excellence.**
- Academic and professional service activities that do not fall within the designated Area of Excellence should be included in Additional Contributions to the Academic Enterprise.
- Faculty members who do not list clinical expertise as their designated Area of Excellence should include clinical activities as Additional Contributions to the Academic Enterprise.

Is Your CV Designed for Success?

Updated CV in Dell Med Format

- Please use the DMS CV template. The standardized CV makes it easier for reviewers and staff to find information and distinguish between important components, so it helps YOU.
- A highly disorganized or inaccurate CV could result in postponement of your promotion nomination.
- Use the CV review checklist to ensure CV is optimal for success.
- See the slide deck and recording of our Info Session – Preparing your CV using the Dell Med CV Template. All CV resources can be found here: [Dell Med CV Template and Resources Page](#)

Unforced Errors: The Top Ten Senseless CV Errors

10. Irrelevant information (how is an interest in stamp collecting relevant to promotion?)
9. Misidentification of professional organization service vs. academic and hospital service
8. Incorrect CV format (people might fail to note all your promotion assets)
7. Incorrect categorization of mentorship and advising
6. Incomplete grant information (described later)
5. Discrepancies between the CV data and the impact statement information
4. Incorrect geographic scope of presentations (local, regional, national, international)
3. Inaccurate or incomplete article citations. Also include DOI/PMID if available.
2. Abstracts, letters, book reviews incorrectly listed as peer-reviewed publications
1. Unexplained gaps in the training or employment history

Incomplete or Inaccurate Citations

- Include complete citation data (authors, title, journal, volume, and page numbers) & DOI and PMID if available.
- **DOI** (Digital Object Identifier) is a unique, permanent identifier that acts as a stable, clickable link to its online location. **PMID** (PubMed Identifier) is a similar numerical identifier for articles indexed in PubMed. Both identifiers make an article very easy to find online.
- Include **ALL** authors names (truncating with et al. makes it difficult to accurately assess your role)
- Highlight your name with bold font.
- Identify trainee coauthors with an asterisk.

Example of a complete citation



*Romere C, Ramtin S, *Nunziato C, Ring D, Lavery D, *Hill A. Is Pain in the Uninjured Arm Associated With Unhelpful Thoughts and Distress Regarding Symptoms During Recovery From Upper-Extremity Injury? J Hand Surg Am. 2024 Dec;49(12):1266.e1-1266.e8. doi: 10.1016/j.jhsa.2023.03.019. Epub 2023 May 17. PMID: 37204359.

Mentorship versus Advising

- **Mentorship** typically results in a scholarly product (e.g., publications, poster presentations), completion of a clinical project (e.g., the successful launch of a new clinical service), or the achievement of a major goal (e.g., the mentee matching in a highly competitive fellowship at another institution). A mentoring relationship typically involves holistic conversations that happen on a regular basis, possibly extended over months or years.
 - **Mentorship is weighed more heavily** on CVs than advising due to the higher time commitment and significant amount of work/effort required.
 - To be a convincing mentorship, the project/product and the faculty member's role **must** be described.
 - Project/product must demonstrate the faculty member's **impact**.
- **Advising** often provides direct answers or potential solutions based on institutional and national guidelines, and/or supports students with competing program-specific tasks. This includes giving career advice, assisting with med school applications, etc. These conversations may happen regularly but are not holistic in nature. Advising typically does not result in a product/project.
 - **Advising is weighed less heavily** on CVs than mentorship due to a lower time commitment.
- Special attention needs to be paid to service such as a **Post Doctoral Advisor** – this is more typically aligned with **mentorship** than advising.

Mentorship vs. Advising - Examples

Example of Mentorship

██████████ MSSW/MPH Candidate, The University of Texas at Austin Steve Hicks 01/22 to 10/22
School of Social Work
Current: Healthcare Systems Manager, Ending Homelessness Coalition (ECHO),
Austin, TX
Research mentor for **scholarly project**-Teaching empathy through lived experience:
development, application and evaluation of the Understanding Homelessness course
for health professionals

Example of Advising

██████████ Dell Medical School at The University of Texas at Austin
Current Medical Student
Residency advising

Professional Memberships vs. Academic and Hospital Service

- If the faculty member is a member of a professional organization or is a part of a committee of a professional organization, that role/membership should be housed under **Professional Memberships**.
 - All roles related to that professional organization should be nested under one heading (e.g., the organization's name).
 - In the example image, this faculty member included all roles associated with the AAGP under one heading.

American Association for Geriatric Psychiatry (AAGP)
Distinguished Fellow (03/22)
Member, Teaching and Training Committee (03/11 to current)
Co-Chair, Educator Resources Task Force (07/16 to 03/19)
Chair, Resident Education Sub-Committee (03/19 to current)
Member, Annual Meeting Program Committee (2015, 2017 to current)
Co-Chair, 2023 Annual Meeting/Program Committee (06/22 to 03/23)
Chair, 2024 Annual Meeting/Program Committee (03/23 to current)
Member, AAGP Scholars Program Planning Committee (03/16 to 09/19)

- If the committee/role is related to Dell Medical School or another UT Austin School/College (for example, the Admissions Committee), that role should be housed under **Academic and Hospital Service -> Dell Medical School**.
- If the committee/role is related to hospital service (for example, Ascension Ethics Committee), that role should be housed under **Academic and Hospital Service -> Department/Hospital**
 - In the example image, all these roles belong under **Academic and Hospital Service**, not Professional Memberships and Service where they are currently listed.

An example of how to **not** do this



Professional Memberships and Service	
Local	
Ascension Seton, Dell Seton Medical Center Ambulatory Medicine Critical Care Peer Review Council Member (4 years)	2020 to 2024
University of Texas, Dell Medical School, Data Core Governance Committee Member (2 years)	2018 to 2020
University of Texas System, Defense and Veteran Health Collaborative Executive Director (5 years)	2016 to 2021
University of Texas System, Chief Medical Information Officer (CMIO) Representative, CIO/CMIO Joint Committee (2 years)	2017 to 2019

Professional Memberships and Service vs. Academic and Hospital Service - Examples

Professional Memberships and Service

National

The American College of Psychiatrists Member Those selected for membership to this prestigious organization have demonstrated excellence in the field of psychiatry, and achieved national recognition in clinical practice, research, academic leadership, and teaching. This is awarded annually to 30 psychiatrists nationally.	09/24 to date
American Medical Women's Association Member, Graduate Medical Education Committee (2024-date)	01/24 to date
American Psychiatric Association Member	10/23 to date, 07/13 to 06/17
Children's Hospital Neonatal Consortium Member, Perinatal Mood and Anxiety Disorders Committee (2022- date) Collaborate with a multidisciplinary team to improve family wellbeing in the Neonatal Intensive Care Unit. Serve as the sole psychiatrist on this committee, providing expertise on perinatal mental health.	09/22 to date
American Academy of Addiction Psychiatry Member, Scientific Program Committee (2022-2024) Focuses on high quality and evidenced based care to persons suffering with substance use disorders. This committee plans sessions for the annual conference ensuring scientific integrity and relevance of presented content.	05/21 to date

Academic and Hospital Service

Department / Hospital

Patient and Family Advisory Council for Neonatal Intensive Care Unit, Member, Dell Children's Medical Center, Austin, TX Enhance patient and family centered care by integrating family voices into decision making.
Neonatal Intensive Care Unit Psychosocial Team, Co-founder and member, Dell Children's Medical Center, Austin, TX Lead weekly rounds for a multidisciplinary group of medical professionals to provide family centered care to families with an infant in the Neonatal Intensive Care Unit.
Department Appointment, Promotion, and Tenure Committee, Member, Medical University of South Carolina, Charleston, SC

These example images demonstrate how this is done well on a CV.

Incomplete Grant Information

The grants listed on the CV must include the funding status, grant source, role of the faculty member, funding dates/amount, and percent effort (if applicable)

Example of grant information listed **correctly**:

Funding Status: Completed

Sponsor Name: Centers for Disease Control and Prevention

██████████ Washington University School of Medicine

Role: Principal Investigator, Washington University site 7/05 to 6/08 (Multi-site/multi-PI)

#/Title: 200-2002-00611 Study to Understand the Natural History of HIV

Total Duration: 9/2002-9/2011

Funding amount: \$1,200,000 (during my time as PI)

Percent effort: N/A

Invited Presentations

Invited Presentations are invitations specific to the faculty member, where **they are invited to present/speak** at conferences, symposia, seminars, grand rounds, etc. The **organization has sought out the faculty member due to their expertise and reputation**. Geographic designation of the presentation is typically based on the geographic proximity of the conference relative to UT or wherever the faculty member was appointed at the time of the activity. Exceptions apply for national meetings that occur locally.

Invited Presentations must be correctly categorized by geographic scope (local, regional, national, international)

- Each listing must include **all** information: title of presentation, meeting, name of organization, city, state, and use an* to indicate if virtual
- Provide an annotation if something could be misconstrued.
- In the example image, there is context provided for why this should be considered a regional/state presentation.

Regional/State	
██████████ Massey P. Skin Biopsy Workshop. Texas Nurse Practitioners Annual Conference. Texas Nurse Practitioners. Austin, Texas.	09/17
*This is a state organization that rotates the conference to other cities in Texas.	

Incorrectly organized invited presentations have a trickle-down effect for the entire dossier: it throws off stats in Chair/EC statements and internal/external reviewer letters and compromises the integrity of the dossier.

Geographic Scope of Invited Presentations, Abstract Presentations, and Related Activities

Why is this important?

- The geographic scope of the faculty member's activities demonstrates **geographic reputation and impact**.
- If the CV gets this wrong, then stats throughout the rest of the dossier (in Chair Statement, etc.) are wrong.
- For example, if it is overstated in the CV that someone has an international reputation because they miscategorized presentations as international, etc. the rhetoric within the dossier would be wrong.

What we mean when we say local, regional, national, international:

Local	within the Austin area and Dell Med
Regional	Southwest (TX, AZ, NM, CA, CO, NV, OK, and UT)
National	Within USA <i>Can include annotation if the meeting rotate around the US but occurs nearby</i>
International	Outside USA <i>Can include annotation if those meetings occur within the US</i>

CV Review Checklist

Set your CV up for success with this checklist!



Linked on the [CV Resources page](#)

Items to check for on CV:	Task Completed: Y/N
Revision Date: Included in top right corner of document.	
Up to Date: Ensure that each section is updated by reviewing dates of most recent activities listed.	
Ensure that each activity is only listed on the CV once.	
Formatting of Dates: Follows prescribed date format of [mm/yy to mm/yy] where applicable.	
Abbreviations: Check to make sure all abbreviations in the document are defined.	
Licensure is up to date. Should not be listed as expired.	
Academic appointments specify if professional-track, tenure-track, or tenured. For professional-track faculty in the clinical professor title series, include clinical modifier in the appointment. Example: Clinical Assistant Professor	
Honors/Awards: Curated annotation of significance needs to be included (e.g. regional/state/national scope of organization, who nominates for the award, competitiveness of award, etc.) Example: Outstanding Educator Award Department of Internal Medicine, Dell Medical School at UT Austin This is an annual award given to one faculty member in the department of 200 faculty to "...recognize educational leadership, innovation, clinical teaching skills, and the capacity to inspire."	
Professional Memberships/Service: Confirm geographic scope of the organizations in order to correctly categorize as local, regional/state, national or international. Designation is based on the geographic scope of the organization. The geographic scope of the organization's membership is not a primary determinant of the geographic scope of the organization. "Regional" refers to the region of the US (i.e., Southwest US)	
Is Mentoring and Advising correctly separated by category? A Mentor "fosters personal and professional growth by imparting wisdom, sharing experiences, and delivering expert insight. Encourages holistic long-term mentee success." An Advisor "addresses questions by providing direct answers or potential solutions based on institutional and national guidelines. Supports students with competing program-specific tasks." <small>References: Samiestedan L, Young E, Tiarks GC, Boemi MG, Patel RK, Bauckman KA, Fine L, Pasilla ME, Rajput V. Defining Advising, Coaching, and Mentoring for Student Development in Medical Education. <i>Cureus</i>. 2022 Jul 27;14(7):e27356. doi: 10.7759/cureus.27356. PMID: 36043012; PMCID: PMC9411822.</small>	

Mentoring: Is documentation included on current position of mentee, nature of mentoring relationship, product/project of mentoring relationship?	
Advising: Is documentation included on current position of advisee and nature of advising relationship?	
Grants: Is all required data - as indicated on the template - included for each project? Please note: "Co-PI" should not be listed as a role on a grant. Confirm if the role is Co-I or Multiple PI.	
Publications: Are they numbered AND in reverse chronological order?	
Publications: Is PMID or doi included as part of all citations? This is a required component.	
Publications: Are publications correctly divided by category?	
Publications: Do not list abstract presentations under publications. Abstract presentations go in the Oral and Abstract Presentations section of the CV.	
Invited Presentations and Abstract Presentations: Ensure that all required information - as indicated on the template - is included for each presentation	
Are Invited Presentations and Abstract Presentations correctly separated? Invited presentations are ones in which an organization reaches out to the faculty member asking them to speak; abstract presentations are ones in which the faculty member submitted an abstract for consideration for presentation.	
Invited Presentations: Is specific context included that confirms that the invitation is specific to the faculty member? For example, is it an invitation to present grand rounds, a seminar, or give a talk at a session at a conference? This helps to distinguish between invited presentations and abstract presentations.	
Invited Presentations: Correctly designate between local, regional/state, national, or international presentations. Designation of the presentation between local, regional/state, national, or international is based primarily on the geographic proximity of the conference relative to UT (or wherever the faculty member was appointed at the time of the activity). "Regional" refers to the region of the US (i.e., Southwest US). This is not based on geographic scope of the affiliations of the audience or attendees.	
Whenever possible, add annotated information to help explain the geographic category in the case of an unusual scenario. For example: *This is a national organization that rotates the conference/meeting location to other cities/states.	

Assessment Letters

What Is Meant by “Arm’s Length”?

- Selected reviewers should be sufficiently distant from the candidate to be capable of objectively assessing the candidate's merit for promotion without bias or personal or professional conflict of interest.
- General rule of thumb: If a reviewer is listed on your CV, they may not be arm's length.

Who Is a Qualified (“Arm’s Length”) Reviewer?

For External Reviewers

- No family members or partners
- No one involved in your promotion process
- No employment supervisory relationships
- No coauthors or close collaborators
- No former faculty members or mentors
- No former mentees or students

For Internal Reviewers

- No family members or partners
- No one involved in your promotion process
- No employment supervisory relationships

Letters of Assessment by Title Series

Professional-Track - Clinical Professor title series:

- Three letters required but can submit more
- All the letters may be internal (see qualifications)
- If an external letter is included, it must be arm's length
- Must hold a faculty rank at least equivalent to the applicant's proposed new rank

Professional-Track - Professor title series:

- Three letters required but can submit more
- One letter may be internal (but can only comment on clinical care and teaching)
- At least 2 of the 3 letters must be external and arm's length
- Must hold a faculty rank at least equivalent to the applicant's proposed new rank

Submitting more than three letters is fine, but **ALL** letters received must be included whether favorable or not.

Internal Reviewers: More Details

Internal Reviewers should be selected using the following considerations:

- Reviewers must hold an **active** academic appointment and be at a higher rank than the promotion candidate's current faculty rank.
- Reviewers are expected to be **independent** with no direct, vested interest.
- Reviewers **can be faculty members from the candidate's department** who are able to provide a fair and objective evaluation.
- Reviewers must have **no actual or potential conflict of interest** (e.g., spouse, partner, Ph.D. advisor, mentor).
- Reviewers should not be members of the Dell Medical School APT Committee or departmental Executive Committee.

External Reviewers: More Details

External Reviewers should be selected using the following considerations:

- Reviewers must hold **active** academic appointments and **be at a higher rank than the promotion candidate's current faculty rank.**
- **Avoid reviewers who are not arm's length.** Reviewers must not be current or close collaborators (within the last 7 years), former supervisors, advisors, mentors, dissertation chairs, or co-investigators.
- Best practice is that all selected external reviewers would be **from different institutions.**

Summary of Reviewers

- The Summary of Reviewers is a list of a **minimum of 6** internal/external reviewers who may provide letters of assessment
 - Follow the Summary of Reviewers Template listed on the OFAA Promotion and Tenure Resource Library
- Candidate will nominate a **minimum of 3 reviewers**
- Department Chair will nominate a **minimum of 3 reviewers**
- Department Chair selects which reviewers will be asked to provide a letter
- The faculty member should not have any contact with any of the reviewers
- The majority of letters received should be from reviewers nominated by the Department Chair
- Department and candidate determine what materials are sent to the reviewers. (Examples: CV, candidate impact statement, supplemental materials)

Supplemental Materials

- Candidates can determine, with guidance from their chair or associate chair, which supplemental materials would meaningfully contribute to their dossier and promotion case.
- Place supplemental materials in the Supplemental Materials folder.
- Several components of the Supplemental Materials folder require a Table of Contents with annotated description/relevance of each item.

Examples of Supplemental Materials

- Summary of activities in an Area of Review
- Annotated list of five most significant works (& why they are significant)
- [Clinical Outcomes](#) example – recommended for clinicians (if available)
- Description of selected clinical innovations
- Selected instructional activities
- Optional: [Impact of Professional Disruptions Statement](#)
- Other relevant documents

When to Include Supplemental Materials

- Summary of Clinical Activities: This may be helpful for a Clinical Professor title series dossier to help highlight the extent/scope of clinical activities that might not be completely captured in the CV, Candidates Impact Statement
- Clinical Outcomes: If available, these are helpful to discuss in the Candidate Impact Statement and include in this folder. [Guidance – Clinical Outcomes](#)
- List of 5 Most Significant Works: This may be helpful for a candidate that has selected Investigation and Inquiry as their Area of Excellence.
- Summary of Instructional Activities: This may be helpful for a candidate that has selected Educational Leadership as their Area of Excellence.
- Impact of Professional Disruptions Statement: This may be helpful to document the effects of professional external disruptions and the resulting impact on productivity, performance, and trajectory.

Supplemental Materials: Clinical Outcome Data

- Incorporation of objective outcome data (when available/applicable) can strengthen the promotion application – particularly for those with clinical expertise as designated Area of Excellence
- Examples:
 - Clinical outcome improvement data
 - Improved adherence to consensus recommendations or management pathways
 - Documentation of peer recognition
 - Analysis of referral patterns, encounter numbers, patient access data
 - Patient reported data (not testimonials)
- The information needs to be understandable, put into context for reviewers
- For complex figures/tables, include a legend
- [Guidance – Clinical Outcomes](#)

Supplemental Materials: Summary of Activities

- Annotated List: Activities related to Area of Excellence or Additional Contributions to the Academic Enterprise
- Purpose: Convey the amount of time, duration, scope and impact of the candidate's work
- Includes annotated descriptions of each activity, candidate's role and time commitment for each activity
- Include details such as the course name, your role, number of students, learner level, duration of the activity, any other explanatory notes
- Details will help the non-biomedical reader understand "clinical teaching"
- For guidance on Summary of Activities, check out samples linked on the OFAA Promotion and Tenure Resource Library

Supplemental Materials: List of Five Most Significant Works

- List of Five Most Significant Works While in Rank:
 - Candidate identifies 5 most significant published works*
 - Use [List of Five Most Significant Works template](#)
 - Significance of these works can be briefly mentioned in Candidate Impact Statement
 - PDFs of the 5 most significant works will be added to the Supplemental Materials Folder
 - The list of works **cannot** be updated after promotion review begins.

*The 5 most significant works should be **published works** rather than manuscripts that are submitted/under review, in progress, or pre-prints.

Dossier Updates After the Submission Deadline

- You **can and should** add important updates to your promotion dossier even after you have submitted the dossier to your department.
- Major changes such as:
 - New achievements
 - New leadership roles
 - New publications – ex: has a pre-print been published?
 - New funding – ex: has a grant been scored or funded?
 - New awards
- Reviewers may ask for these updates when they see something that looks out of date
- Send updated CV (with updates highlighted) to your department representative
- Additions will be added to the Supplemental Materials Folder

Final Tips

- Dossier should focus on contributions **while in rank**
- Establish evidence of a positive trajectory
- Pay attention to the department's internal deadlines for your dossier
- Ask a colleague in another field to review your dossier
- Write out all abbreviations
- Ensure that your CV is up to date and follows the template
- Typos: Spellcheck and proofread your dossier
- Make sure dates/stats are aligned between documents
Example: Dates on CV should align with dates in the candidate impact statement

Additional Online Resources

- [Summary of Dossier Preparation](#) – guide for naming protocols and prescribed order of each document in the dossier
- [Promotion & Tenure Resource Library](#) – details on faculty tracks/title series, commonly used templates, information slide decks and recordings
- [Dell Med CV Template and Resources](#) – guidance on the CV template, CV review checklist, guidelines for organizing faculty activities by geographic scope, etc.

Online Resources- cont'd

- Examples of Evidence of Achievement – Review the Examples of Evidence of Achievement for your Title Series for guidance on items to include in your CV.
- Guidelines for Promotion – Explains the promotion process, includes instructions/prompts for each component of the dossier for Area of Excellence and Additional Contributions to the Academic Enterprise.