CV Supplement: Description of Yale Activities

Overview: The CV Supplement is an opportunity for you to describe the scope and impact of your work at Yale and other information that is not readily available in the CV. A suggested format is provided as well as detailed instructions and examples. You may modify the format as needed (e.g. by using narratives instead of tables or outlines), but the order and general content should remain the same. If a specific section does not apply to your position (e.g. clinical care), delete the section. Both your CV and the CV Supplement will be provided to the referees who are asked to comment on your qualifications for reappointment or promotion.

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CV SUPPLEMENT: DESCRIPTION OF YALE ACTIVITIES

Date of Preparation: (month, day, year)

Name: 
Position: (Current Position)

1. Percent Effort
   | Clinical activities | Educational activities | Research/Scholarship | Administration |
   | | | | |
   Total 100%

2. Narrative Description (max 150 words)
   Provide a ≤150 word description of your role in the department and Yale School of Medicine

3. Clinical Activities
   A. Narrative Description of Clinical Activities (max 250 words)
   B. Documentation of Clinical Activities
      1) Table I (inpatient and ambulatory care responsibilities)
      2) Percent of clinical time in clinical care activities (total = 100%)
      3) RVU or equivalent for your specialty
      4) Quality of care measures
   C. Clinical Program Leadership
      1) Describe involvement in development or administration of clinical programs within the Medical Center, along with key performance indicators
      2) Describe involvement in development or administration of clinical programs outside the Medical Center, along with key performance indicators
      3) Describe your involvement in quality of care initiatives (independent of a, b)
   D. Regional/National Clinical Activities
      1) Describe your involvement in regional or national activities that impact clinical care (examples include guidelines committees, quality care committees, clinical practice committees, standards committees, etc.)
   E. Other Clinical Activities (optional)

4. Educational Activities
   A. Narrative Description of Educational Contributions (max 250 words)
   B. Documentation of Teaching Activities
1) Table II: Formal lectures, courses
2) Table III: Other major lectures or educational activities conducted over prior term of appointment within the Medical Center and affiliated institutions

C. Mentoring Activities
   1) Student mentoring: Thesis advisor for predoctoral and masters degree students (MD, PhD, or MPH students)
   2) Postdoctoral mentoring: Postdoctoral fellows, clinical fellows and/or residents
   3) Faculty mentoring
   4) Other mentoring activities

D. Educational Program Leadership & Curriculum Development
   1) Describe the development or administration of courses, programs and other educational activities in which you play a leadership role within the Medical Center.
   2) Describe your involvement in the development of curricula and educational tools for courses and programs at Yale in which you do not play a direct leadership role
   3) Describe involvement in educational activities regionally and nationally

E. Other Educational Activities (optional)

5. Research/Scholarship

   A. Narrative Description (max 1 single-spaced page)
      1) Describe your area of research or scholarship, its importance to basic or clinical science, and how it fits into the overall research mission of your department and/or the medical school.
      2) Summarize your contributions and provide an estimate of their impact on progress in your major field of interest.
      3) Describe your current studies and future directions.

   B. Annotated Samples of Scholarship

   C. Summarize your role in collaborative projects within the Medical Center and with other institutions.
INSTRUCTIONS

1. **Percent Effort**
   Provide a breakdown of your percent effort directed toward clinical activities, educational activities, research/scholarship, and administration. The total effort should not exceed 100%.

   - If most of your educational activities occur as you provide clinical care, combine clinical care and educational activities into a single domain
   - Consider your sources of salary support when allocating time (e.g. if 75% of your effort is supported by grants, then 75% of your time should be devoted to the research supported by those grants.
   - Administration refers to involvement in service or administration of programs at Yale. Examples include service on major committees within the school or Yale University (e.g. safety committees, regulatory committees) and administration of training programs. Administration of research grants should be included under research effort.
   - If your percent effort in these domains has changed significantly over time in a way that impacts your track choice, provide separate breakdowns according to years in current rank.

**Example 1**: A faculty member teaches in the clinical setting while providing clinical care (55% time). He/she is also Program Director of a fellowship program, including both program administration (15% time) and direct involvement in teaching and clinical care associated with the program (10% time). On average, he/she also spends 20% time on research/scholarship.

   - Clinical Care/Educational Activities = 65% (concurrent effort)
   - Research/Scholarship = 20%
   - Administration = 15%

**Example 2**: A junior faculty member in a basic science department lectures in several courses at Yale, equivalent to about 15% effort. He/she has no administrative responsibilities in the department or the university, but has a research program involving hands-on research and oversight of the work of several postdocs and students. He/she also is responsible for writing new grant applications and administering existing grants, including meeting regulatory requirements, managing subcontracts, and submitting progress reports.

   - Clinical Care = 0%
   - Educational Activities = 15%
   - Research/Scholarship = 85%
   - Administration = 0%

**Example 3**: A junior faculty member is hired as an assistant professor to provide clinical care and teaching. By the end of the first 3-year term, the faculty member developed a strong interest in clinical research and obtained an internal grant for a clinical project. After reappointment, the faculty member discusses his/her career options with mentors and supervisors within the Department, changes effort allocated toward scholarly work by reducing clinical/educational efforts, and successfully applies for a mentored career award.

   2008-2011:
   - Clinical Care/Educational Activities = 75%
   - Research/Scholarship = 15%
• Administration = 0%

2011 - present:
• Clinical Care/Educational Activities = 30%
• Research/Scholarship = 70%
• Administration = 0%

2. Narrative Description (max 150 words)

Provide a brief overview of your responsibilities and major contributions to your department or Yale program and to Yale School of Medicine. This overview is intended to help the reader anticipate which sections of the CV Supplement should be completed and/or most comprehensive. For example, if you are a Clinician-Educator whose primary role is to build a clinical program, the reader will expect Section 3 to detail your contributions in that domain.

3. Clinical Activities (delete section or subsections if not applicable)

This section provides information on a) the context in which you provide clinical care; b) how your time is apportioned among clinical care activities; c) the quantity of your clinical activities relative to national standards; and d) indicators of quality of care that you as an individual provide and/or key performance indicators of a program that you direct.

3A. Narrative Description (250 words max)

Briefly describe the context in which you provide clinical care (e.g. as a teaching physician in a fellows’ or residents’ clinic, as an ICU attending). If you have a referral-based practice, provide estimates of new patient referrals from within and outside the medical center and the number of established patient visits. If your clinical activities are part of a group setting/center/section, explain how clinical work is divided amongst you and your peers if referrals are not made to you directly.

Example 1: A faculty member in the Clinician Scholar track conducts clinical care in his/her specialty (internal medicine) and as a subspecialist (endocrinology).

“My clinical activities are conducted as a consultant endocrinologist and also as an attending physician for clinical teams providing care in internal medicine and in endocrinology. I see ~ 100 new patient referrals from within CT to my outpatient consultative practice in thyroid disorders each year. I also serve as an attending physician on the inpatient endocrine consult service and in the outpatient fellows’ clinic that evaluates patients referred to the Endocrinology Practice of YMG. As a member of the Department of Medicine, I also serve as an attending physician on a general medicine service ~1 month every other year, where I oversee the clinical care provided by a medical housestaff team comprised of residents and medical students.”

3B. Documentation of Clinical Activities

3B.1 Table I: Clinical Care Responsibilities

List clinical care responsibilities for the past 3 years (Assistant Professor reappointment) or for the past 5 years (reappointment as Associate Professor, promotion to Associate Professor or Professor). Modify categories as appropriate for your specialty/subspecialty. Do not include activities that occur only occasionally (<2 weeks/yr—e.g. covering for a colleague for 2 days on an inpatient clinical service)
### Table I (Example shown for Internal Medicine)

<table>
<thead>
<tr>
<th>Clinical Care Responsibility</th>
<th>Role$^{2,3}$</th>
<th>Frequency of Activity</th>
<th>Average Frequency of Session$^{1}$</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>In-Patient Medicine</em></td>
<td>Attending</td>
<td>2008-2012</td>
<td>1 mo every other year</td>
</tr>
<tr>
<td><em>Outpatient fellows' subspecialty clinic</em></td>
<td>Fellows' clinic attending</td>
<td>2008-2012</td>
<td>1 half-day/wk</td>
</tr>
<tr>
<td>Temple Faculty Subspecialty Clinic</td>
<td>Provider</td>
<td>2009-2012</td>
<td>1 half-day/wk</td>
</tr>
<tr>
<td><em>Outpatient procedure clinic</em></td>
<td>Attending</td>
<td>2009-2010</td>
<td>1 half-day/wk</td>
</tr>
<tr>
<td><em>VA fellows' subspecialty clinic</em></td>
<td>Fellows' clinic attending</td>
<td>2008-2010</td>
<td>1 half-day/wk</td>
</tr>
</tbody>
</table>

$^{1}$Define session (e.g session = 1 month, one 2-wk block, 1 half-day). You may include a description of the intensity of on-call responsibilities that are associated with each activity.

$^{2}$Distinguish between sessions in which you are the primary provider (e.g. "provider") from those in which you oversee care provided by others (e.g. as a clinical attending on a medical service staffed by residents or as an outpatient residents’/fellows’ clinic).

$^{3}$Asterisk those activities in which you also consistently serve in a teaching capacity (i.e. either through direct oversight of clinical trainees providing clinical care or teaching trainees who otherwise are observers of care principally rendered by you).

#### 3B.2 Estimate the percent of your clinical time in recurring clinical care activities (total =100%).

This section describes the fraction of time devoted to direct and billable clinical care and provides an estimate of non-billable time spent in clinical care-related activities. Use the following categories:

- Clinical Care Sessions (e.g. inpatient and outpatient clinical care, excluding scheduled procedures)
- Scheduled Procedures (operating room schedule, procedure schedule)
- Supporting Clinical Care Activities (e.g. charting/follow-up letters, calls outside of time allotted for clinical care sessions and procedures)

**Example 1:** A faculty member spends 85% of his/her time in clinical care and 15% in scholarship. He/she attends 2 months a year on an inpatient service in 2-week blocks and spends the rest of his/her clinical time in the outpatient setting attending 6 half-days of clinic each week; one of these half-day sessions is a procedure clinic. Each week, he/she also attends a regularly scheduled 2-hour multidisciplinary conference to discuss therapeutic approaches to specific patients. Each outpatient half-day clinic generates an additional 1.5 hours of follow-up communications and other activities (totally ~9 hours/week).

- Clinical Care Sessions: 70%
- Scheduled Procedures: 10%
• Supporting Clinical Care Activities: 20%

3B.3 Evidence of Clinical Output/Volume (this information should be available through YMG or your practice business manager)

If available, provide data (such as RVUs or equivalent for your specialty) on clinical output relative to your peers and/or to national standards. Modify descriptions of clinical categories (e.g. in-patient, out-patient) as appropriate for your clinical activities or specialty/subspecialty.

Example 1: Service for which only total RVU data are available.

Physician RVU: 300/yr
UNC Work RVU (benchmark at 63rd percentile): 2865/yr
Imputed FTE: 10%

Example 2: Service for which RVU data are separated into billing categories.
• Inpatient: Physician RVU = 1000, UNC Work RVU (benchmark at 63rd percentile) = 1248
• Outpatient: Physician RVU = 2500, UNC Work RVU (benchmark at 63rd percentile) = 2200

3B.4 Evidence of Quality of Care by Physician
If available, provide data that address the quality of the care that you provide (e.g. Press-Ganey scores, percent of patients achieving a specific healthcare standard, complication rate for procedures).

3C. Clinical Program Leadership
This section describes your role in development, administration, and/or quality improvement/control of 1) clinical programs locally or affiliated with Yale and 2) regional or national clinical programs.

3C.1 Programs at Yale and Yale-affiliated institutions
Describe your involvement in developing and/or administering clinical programs within Yale. In each case, list the name of the program and your role. Provide any available qualitative or quantitative measures (key performance indicators) of each program and the extent to which your activities have influenced clinical care/practice beyond the institution. Key performance indicators may include:

• Quality improvement/quality assurance of a program that you oversee (list program, then describe)
• Techniques, practice models and/or processes of care
• Development and/or application of clinical protocols
• Practice guidelines
• Policy improvement
• Technology development/implementation
• Patient safety and risk prevention

Example 1: A faculty member is Director of a Clinical Center/Program.
• Year(s)/Name of Program: Asthma Center (2009-present)
• Your role/title: Director
• Measurement of impact locally: Number of patient visits has increased from 3500/yr in 2009 to 5500/yr in 2012; increase in patient volume has necessitated additional hiring of 2 physicians to staff the clinic and 3 additional nurses. New patient referrals have also increased from 900 to 1200/yr and the catchment area now extends outside Connecticut. Revenues generated have increased from $1.5 million to $3 million/yr. Three clinical protocols have been adopted that follow the practice guidelines established by the National Heart Lung and Blood Institute on the initial evaluation, treatment and longitudinal management of patients with asthma. From 2009-2012, there has been a decrease in frequency of emergency room visits and hospitalizations for severe asthma among patients followed longitudinally. In 2012, the Connecticut State Chest Society designated the center as state center of excellence.

3C.2 Regional/National Leadership/Administration (list regional first, then national)
If you are involved with administration of a regional or national clinical program in which Yale is a clinical site, describe in narrative form, using the format for 3C.1 above.

Sample Format
• Year(s)/Name of Program
• Your role/title
• Measurement of impact locally (if applicable)
• Measurement of impact regionally or nationally

3C.3 Quality of Clinical Activities
If applicable, provide information on your involvement in quality improvement initiatives (separate from your development/administration of clinical programs) that have led to an increase in the quality of clinical care locally. Include key performance indicators wherever possible. Do not repeat activities listed and described in 3C.1 and 3C.2 above.

3D. Regional/National Clinical Activities
Describe your involvement over the past 3-5 years in regional or national activities that impact clinical care (examples include guidelines committees, quality care committees, clinical practice committees, standards committees).

3E. Other: if there are other aspects of your clinical contributions that are not adequately captured under the above headings, please describe here.

4. Educational Activities
Note: Investigator Track and Research Rank faculty members are not required to complete this section if educational activities are not part of their department or program-related responsibilities; in this situation only, Section 4 should be deleted. For other faculty members, Subsections 4B.1 and/or 4B.2 may be deleted if not applicable, but the narrative should clearly document the nature and scope of any educational contributions.

4A. Narrative Description (max 250 words)
Summarize the nature of your educational activities at Yale. The summary should include the context(s) in which you teach, your role (if any) in educational program development, assessment, and administration, and a description of your specific contributions toward accomplishing the educational missions of your department and YSM.
4B. Documentation of Teaching Activities

4B.1: Table II

Complete Table II to document your involvement in formal teaching activities for Yale undergraduate, medical, and graduate students, and in postgraduate training. List also courses for Yale faculty if they are given as part of a series or program. Table II should NOT include teaching activities that are done in the context of providing clinical care (e.g. service as in-patient attending where you have direct patient care responsibilities). Place an asterisk adjacent to activities for which formal teaching evaluations are available.

Table II: Formal Teaching Activities

<table>
<thead>
<tr>
<th>Learner</th>
<th>Course/Module</th>
<th>Role(^1)</th>
<th>Year(s)</th>
<th>Ave. Annual Instructional Hours(^2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergrad</td>
<td>*MB&amp;B 301 Principles of Biochem II</td>
<td>Course Director</td>
<td>2009-2012</td>
<td>30</td>
</tr>
<tr>
<td>Graduate</td>
<td>*Inflammation</td>
<td>Lecturer</td>
<td>2009-2012</td>
<td>4</td>
</tr>
<tr>
<td>MD student</td>
<td>*Immunobiology Workshop</td>
<td>Small Group Instructor</td>
<td>2009-2012</td>
<td>3</td>
</tr>
<tr>
<td>MPH student</td>
<td>*EPH 503a Introduction to Toxicology</td>
<td>Course Instructor</td>
<td>2009-2012</td>
<td>12</td>
</tr>
<tr>
<td>Postdoctoral</td>
<td>Clinical Science Lecture Series for Fellows, Section of ID</td>
<td>Lecturer</td>
<td>2009-2012</td>
<td>4</td>
</tr>
<tr>
<td>Faculty</td>
<td>YCCI Junior Faculty Scholars Program</td>
<td>Lecturer</td>
<td>2009-2012</td>
<td>6</td>
</tr>
</tbody>
</table>

Total Average Annual Instructional Hours\(^3\): 59 hours

\(^*\)Indicates formal teaching evaluations are available for this activity
\(^1\)Standard terminology for roles include course director, instructor, lecturer, lab instructor, etc.
\(^2\)Include only time spent in direct contact with learners, either in the classroom or in scheduled office hours.
\(^3\)The total average annual instructional hours should not exceed the percent effort toward educational activities listed in item 1.

4B.2: Other major lectures and educational activities

List your major lectures, seminars, workshops and other teaching sessions (apart from formal courses) in each of the past 3 years (assistant professor reappointment) or five years (associate professor reappointment/promotion or promotion to professor). Include teaching activities at Yale and those at affiliated institutions. If a teaching session is repeated within the Medical Center or at an affiliated institution, list it once and indicate the frequency of the activity. If the session is given only once, list the date.

Example 1. A faculty member presents his/her research twice yearly in a monthly Research-in-Progress series.

<table>
<thead>
<tr>
<th>Name of Series</th>
<th>Frequency of Presentation</th>
<th>Subject of Presentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious Disease</td>
<td>Twice yearly</td>
<td>Research on molecular genotyping of HIV</td>
</tr>
<tr>
<td>Research-in-Progress</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Example 2: A faculty member gives 6 lectures each year at Yale affiliated institutions for medical education of housestaff.
### Table I: Other Major Lectures and Educational Activities

<table>
<thead>
<tr>
<th>Name of Series</th>
<th>Date or Frequency of Presentation</th>
<th>Subject of Presentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yale Affiliated Hospital Lecture Program</td>
<td>6 lectures/year</td>
<td>Topics in infectious diseases†</td>
</tr>
<tr>
<td>Lectures to medical residents</td>
<td>Average 10 yearly</td>
<td>Topics in infectious diseases</td>
</tr>
<tr>
<td>Immunobiology Seminar Series</td>
<td>04/05/2012</td>
<td>Title of seminar</td>
</tr>
<tr>
<td>Surgery Grand Rounds</td>
<td>04/03/2012</td>
<td>Reducing Post-Op Infections after Joint Replacement</td>
</tr>
</tbody>
</table>

*Indicates formal teaching evaluations are available for this activity.

It is preferable to provide the above information in a single Table III as illustrated below. Place an asterisk adjacent to the activities for which formal teaching evaluations are available.

### Table III: Other Major Lectures and Educational Activities

<table>
<thead>
<tr>
<th>Name of Series</th>
<th>Date or Frequency of Presentation</th>
<th>Subject of Presentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious Disease Research-in-Progress</td>
<td>Twice yearly</td>
<td>Research on molecular genotyping of HIV</td>
</tr>
<tr>
<td>Yale Affiliated Hospital Lecture Program</td>
<td>6 lectures/year</td>
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<td>Reducing Post-Op Infections after Joint Replacement</td>
</tr>
</tbody>
</table>

*Indicates formal teaching evaluations are available for this activity.

### 4C. Mentoring Activities (delete subsections that are not applicable)

#### 4C.1-C.3: Listing of mentees
List trainees for whom you have served as a primary or significant mentor over a sustained period of time, and provide evidence of their career development, including presentations/publications, awards and honors, and progression along a career path to a new position.
Example 1: A medical student conducted his/her thesis work with you and has now assumed a residency position at another university.

Name of trainee: Jane Doe, M.D.
Position and period of mentorship: Yale Medical Student; 2009-2010
Thesis title: “Impact of research experiences in medical school on pursuit of careers in academic medicine”
Presentations/publications: Results reported at the Annual Meeting of the AAMC
Awards & honors: Invited oral presentation at Annual Meeting of AAMC after peer-review of abstracts
Current position: Resident, Internal Medicine, UCSF

Example 2: A postdoctoral fellow trained in your laboratory and has recently been appointed to a junior faculty position.

Name of trainee: John Deere, PhD
Position and period of mentorship: Postdoctoral Fellowship; 2010-2012
Research project: Role of the oral microbiome in asthma
Presentations/publications: 4 publications (see CV references #14, 18, 26, 35); 3 poster presentations at the Annual Meeting of the American Thoracic Society (ATS), 4 oral presentations at ATS and Keystone Symposium on Asthma
Awards & honors: Recipient of an NIH/NIAID K01 award
Current position: Associate Research Scientist, Internal Medicine/Infectious Diseases; Yale School of Medicine

Example 3: You served as a mentor on a K award for an assistant professor.

Name of trainee: Jane Liu, MD PhD
Position and period of mentorship: Assistant Professor; 2010-2012
Role as mentor: mentor on K08 award
Presentations/publications: the faculty member has 4 original research articles published in two prominent journals (Chest, Amer. Rev. Resp Diseases), numerous invited speaking engagements at peer institutions (UPenn, UChicago, UCSF) and has submitted an R01 application.
Awards & honors: Junior Investigator Award, American Thoracic Society
Current position: Assistant Professor, Internal Medicine/Pulmonary & Critical Care Medicine, Yale School of Medicine

4C.4 Other mentoring activities (e.g. oversight of research or clinical trainees for whom you are not the primary mentor)

Example 1: A research scientist provides day-to-day oversight of the graduate students and postdocs in a ladder faculty member’s laboratory and has a substantive influence on the trainee but is not designated as a primary mentor or member of the trainee’s oversight committee.

Suggested description:
“I help to oversee projects conducted by students and postdoctoral fellows in Dr. Nobel’s laboratory. Over the past 5 years, I have provided project guidance and technical advice for 3 PhD students and 4 postdoctoral associates and contributed to studies that resulted in 3 publications (see CV bibliography references #23, 38 and 49).”
Example 2: A first-term assistant professor who plans to enter the Clinician-Educator Track participates in career development seminars for medical students, residents and subspecialty fellows. He/she also incorporates career development discussions into regular teaching rounds.

“I have participated as a panel discussant in the career development seminar series offered for medical students (held twice yearly) and by the GME office for medical residents (average 3X/yr). For fellow trainees within the Section of Infectious Diseases, I oversee a career development session discussing career options for clinical infectious disease specialists and the transition from clinical fellowship to an academic faculty appointment as a Clinician-Educator. I also enjoy advising trainees at all levels about career paths and post-graduate employment options for clinicians interested in clinical care and teaching.

4D. Educational Program Leadership & Curriculum Development

4D.1 Local Program Leadership

Describe courses, programs, and other educational activities in which you have played a leadership role at Yale and Yale-affiliated institutions (e.g. VA). Examples may include courses for graduate students, medical students, residents, and fellows. In each case, indicate your contributions, including curriculum development, and changes that have occurred because of your leadership. Provide specific measures of impact, if possible (e.g. changes in course evaluation by students and changes in student performance). If your scholarship is in the area of medical education, there should be evidence that your leadership of the program has had an impact beyond Yale (e.g. by distribution of educational materials or assessment tools and/or by invited speaking engagements or consultations). This information can be provided in narrative format or using an outline as shown below:

Sample Outline Format with Example

- Year(s)/Name of Program: 2008-2011; YSM Musculoskeletal Disease Module
- Your role/title: Course Director
- Major contribution(s): Revised curriculum for module; developed electronic-based assessment tool
- Measurement of impact: course rating improved from 3.6 to 4.3 on a 5-point scale; mean performance of students on a standardized test improved from 73rd percentile to 82nd percentile; curriculum and assessment tools have been adopted by 5 other medical schools (UConn, Columbia, Cornell, UMass, and Tufts); Invited to speak at AAMC Educational Workshop on Novel Designs for Medical School Subspecialty Curricula

4D.2 Local Curriculum Development

Describe curricula (including educational tools) that you have developed for educational programs in which you participate, but do not direct, at Yale. Examples include course material such as interactive case series for workshops associated with Yale Medical School courses. Describe the means by which the curricula have been assessed and provide specific measures of impact. If your scholarship is in the area of medical education, there should be evidence that the curriculum has been formally assessed and has had an impact beyond Yale (e.g. by distribution and use of educational materials or assessment tools by other institutions). This information can be provided in narrative format or using an outline as shown below:

Sample Outline Format with Example

- Year(s)/Name of Program: 2008-2011; YSM Musculoskeletal Disease Module Workshop
- Curriculum or educational tool: Developed an interactive case series for the rheumatology workshop in which learners follow a systematic approach to analyze patient presentations with rheumatic diseases. The instructor assumes the role of the patient and guides them through a
structured patient interview with immediate feedback regarding order and rationale for questions posed. Physical exam findings are shown in electronic images. Each student uses an electronic key pad to answer a series of questions regarding differential diagnosis, evaluation, and expected results of evaluation that would include or exclude a disease. Answers are provided to each question immediately after the group has responded and the instructor guides respondents in an analysis of their answers. Peer teaching is achieved by correct respondents describing their thought processes to those who had incorrect responses.

- **Measurement of impact:** workshop rating improved from 3.6 to 4.6 on a 5-point scale; mean performance of students on a standardized test improved from 65th percentile to 80th percentile; curriculum and assessment tools have been adopted by 5 other medical schools (UConn, Columbia, Cornell, UMass, and Tufts); invited to speak at AAMC Educational Workshop on Novel Designs for Medical School Subspecialty Curricula

### 4D.3 Regional/National Leadership (list regional first, then national)

Describe the courses, programs and other educational activities in which you have a leadership role regionally or nationally. Follow the same format as for Section D.1.

**Example 1:**

- **Year(s)/Name of Program:** 2008-2012; Emergency Medicine Residency Training Program Committee, Society for Academic Emergency Medicine
- **Your role/title:** Committee Member; Chair, subcommittee to review recommendations to ACGME for training program requirements
- **Major contribution(s):** Obtained consensus among program directors for recommended changes in training requirements for board eligibility
- **Measurement of impact:** changes accepted by ACGME and will be effective in 2013.

**4E. Other:** if there are other aspects of your educational contributions that are not adequately captured under the above headings, please describe here.

### 5. Research/Scholarship

#### 5A. Narrative Description (max 1 single-spaced page, ~500 words)

All ladder faculty members are expected to be scholars and, over the course of their careers, to produce bodies of scholarship that receive national and/or international recognition. Investigator track faculty members who belong to research teams must make identifiable creative contributions to the scholarship produced by team efforts. Research rank faculty members should describe their specific role in research activities at Yale School of Medicine.

In each case, the narrative description should include the following:

- A description of your area of research or scholarship, its importance to basic or clinical science, education, or clinical medicine, and how it fits into the overall mission of your department and/or the medical school.
- A summary of your most significant scholarly contributions and an estimate of their impact on your field of interest.
- A description of your current studies and future directions of your work.
5B. Annotated Publications or Other Samples of Scholarship
Submit up to 5 reprints or other samples of your scholarship that most clearly illustrate your major achievements. Include a description of each and why the work is important. You may select peer-reviewed articles, books, course syllabi, or other works of scholarship that have been peer-reviewed and are in the public domain. If scholarship is available only in a web-based electronic format, please include an accessible link for the item.

5C. Summarize your role in collaborative projects within the Medical Center and with other institutions.

This section provides information on how your research/scholarly efforts contribute to research programs within and beyond the School. Describe the types of collaborative endeavors in which you participate and include the names and departments of collaborators here and at other institutions.