In 2012, the faculty in the Department of Radiology endorsed using the College of Medicine’s Appointments, Promotion, and Tenure Document (http://oaa.osu.edu/assets/files/documents/MED‐APT.pdf) rather than creating a separate document. The following amendments have been approved by the faculty. Note that these amendments augment, but do not replace the relevant sections in the college document.

- Assessment of qualifications for appointment, promotion, and tenure
- Recruitment and appointment processes
- Promotion and tenure processes
- Criteria metrics for promotion at all ranks
- Compensation guidelines
Executive Summary of the 2015 Department of Radiology AP&T Processes

Introduction:

The Department of Radiology Appointment, Promotion & Tenure (AP&T) document is a department-specific adaptation of the current OSU College of Medicine (COM) AP&T document (approved 2012) which redefines academic Tracks, Pathways, and Ranks. This Department AP&T document translates the OSUCOM guidelines for the AP&T process into academic Radiology/imaging science-centric guidelines (subject to future revision and updating under the direction of the OSUCOM).

Background:

In order to advance the OSUCOM to one of the nation’s top-tier schools of medicine, excellence and synergy within the faculty, staff, and administration are of paramount importance. The advancement of the OSUCOM also depends on the successful recruitment and retention of outstanding clinicians, clinical scientists, basic scientists, medical educators, and physician-administrators.

Nationally/internationally known clinical scientists are frequently engaged in substantial clinical service and have limited protected research time and resources available to them; this is particularly true in the field of Radiology. A previous informal survey of top-tier academic Departments of Radiology in the nation revealed that most provide their clinical scientists with the option for pursuit of Tenure, without prerequisite NIH-based funding [Appendix 1]. Therefore, a Clinical Science focus, along with the more standard Basic Science focus, is incorporated as an option within the Tenure track described in this Department of Radiology AP&T document.

The primary goal in developing this Department AP&T document is to define the AP&T process for the Radiology faculty in terms of objective quantitative metrics and qualitative measurements tailored to the field of academic Radiology/imaging sciences. As established in the current OSUCOM AP&T document, there are 4 different routes by which 4 different academic Ranks can be potentially achieved by Radiology faculty members as they develop their academic careers in OSUCOM. The Ranks found in each route are as follows: Professor, Associate Professor, Assistant Professor, and Instructor.

Routes available to meet the needs of both the faculty and Department are as follows: Tenure track, Clinical, Research, and Associated. In the Tenure track, there is a Basic Science focus and a Clinical Science focus, as previously mentioned. The Clinical route contains a Clinical Scholar Pathway, a Clinical Educator Pathway, and a Clinical Excellence Pathway. The other 2 routes are the following: Research and Associated. Regardless of promotion route or Tenure status, national or international recognition (depending on Rank) is required for either initial appointment or promotion to Associate Professor or Professor. A brief description of each route follows:

1) Tenure track: The Tenure track is the only means by which a Radiology faculty member can achieve Tenure status. As previously described, it contains 2 options: the Basic Science focus and Clinical Science focus. The Basic Science focus is specifically designed for faculty members who emphasize research and scholarship, and it requires NIH funding; both teaching excellence and outstanding service to OSU are also expected. The Clinical Science focus, on the other hand, is specifically designed for clinically trained faculty deployed with ≥ 40 % funded release time devoted to competitive national grant-supported research predicated on adequate ongoing extramural self-funding, while ≤ 60 % time is spent on clinical, educational, and/or administrative activities. There are probationary periods for reaching Tenure status as follows: 7 years for the Basic Science focus (with interim 4th and 8th year reviews) and 11 Years for the Clinical Science focus (with interim 4th year review); failure of the faculty member to achieve Tenure after the probationary period introduces the possibility of their being discharged from OSU. Evidence of research and scholarship potential (e.g. research publications or funding) is required for the initial appointment of
an Assistant Professor or Associate Professor to the Tenure track with either the Basic Science focus or Clinical Science focus.

2) **Clinical**: The Clinical route is designed for faculty members with a primary focus on clinical service. It is subdivided into 3 Pathways: Clinical Scholar, Clinical Educator, and Clinical Excellence, as previously mentioned. The Clinical Scholar Pathway is specifically designed to recognize an associated balance of professional accomplishments favoring research/scholarly activities, while the Clinical Educator Pathway is specifically designed to recognize a balance of accomplishments favoring formal education/training activities. The Clinical Excellence Pathway is specifically designed for faculty devoting ≥ 90% time to high-quality clinical service (includes administrative time directly related to clinical service), including the pursuit of personal contributions to programmatic patient-care enhancements.

3) **Research**: The Research route is designed for faculty members almost totally devoted to specific lines of self-funded NIH-supported research, with no associated clinical or teaching service requirements.

4) **Associated**: The Associated route is designed for faculty members serving OSU with < 50% appointments, focusing on either clinical care responsibilities or non-clinical (e.g. scholarship, administrative) responsibilities.

**Guidelines for the Department of Radiology AP&T Processes:**

**Overview:**
The primary parameter used for recommendation of initial appointment, promotion, and/or Tenure status change at OSU is contribution impact, measured by degrees of positive influence on professional peers. The guidelines for the Department of Radiology AP&T processes were developed according to the specific scope of practices, expertise, and needs pertinent to the missions of academic Radiology/imaging sciences. This Department AP&T document is designed to delineate and facilitate application of metrics for quantifying research/scholarly accomplishments and measuring national/international recognition of a faculty member.

**Assessment of Qualifications for Appointment, Promotion, or Tenure Status Change:**
The qualifications of each person being considered for initial faculty appointment, academic promotion, or eligibility for Tenure by means of the Department of Radiology AP&T processes are evaluated by the Department P&T Committee. They are assessed according to the overall accomplishments of the individual relative to the 3 academic missions of OSUCOM: service (e.g. clinical care, administration), research/scholarly achievement, and education/teaching. Excellence in only one mission is not sufficient for advancement to the positions of Associate Professor or Professor, regardless of Tenure status. The evaluation of achievement is primarily based on 2 scales: the Department P&T Research Publication/Funding Metrics, which identifies milestones in both scientific publication and extramural funding, and the Department National/International Recognition Index.

**Recruitment and Appointment Processes:**

**Recruitment:**
In the Department of Radiology, faculty recruitment procedures will comply with the rules and regulations of OSU and the guidelines in OSUCOM [http://medicine.osu.edu/faculty/resources/admins/pages/hiring-faculty-guide.aspx]. Working closely with the OSUWMC Human Resources-Recruiting Office, the Department recruits faculty into open positions within its Divisions as needed to maintain programs or in response to approved new program development.

The Faculty Recruiting Committee within the Department of Radiology supervises each faculty position search and recruitment. In the process, the Committee works closely with the appropriate Division Chief and the OSUWMC Human Resources-Recruiting Office to: 1. properly advertise/post externally each open faculty position; 2. identify suitable candidates, emphasizing a desire to support diversity in the Department; 3. when appropriate, conduct the recruiting of the strongest candidates.
candidates; and 4. formulation of a recommendation for hiring to the Department Chair. Members of the Committee will participate in the interview visits of invited candidates.

The Department is dedicated to the fair recruitment of faculty and strives for faculty diversity in terms of gender, sexual preference, race, and ethnic background. Accordingly, its Faculty Recruiting Committee and the OSUWMC Human Resources-Recruiting Office will ensure consideration of all candidates.

Appointment:
The qualifications of each person being considered for initial faculty appointment are evaluated by the Department P&T Committee. They are assessed according to the overall accomplishments of the individual to date relative to the aforementioned 3 academic missions of OSUCOM.

Promotion and Tenure Processes:
Assessment of Qualifications for Promotion or Tenure Status Change:
The qualifications of each person being considered for academic promotion, or eligibility for Tenure, by means of the Department of Radiology AP&T processes are evaluated by the Department P&T Committee. They are assessed according to the overall accomplishments of the individual since appointment or previous promotion relative to the previously described 3 academic missions of OSUCOM. Excellence in only one mission is not sufficient for advancement to the positions of Associate Professor or Professor, regardless of Tenure status. The evaluation of achievement is primarily based on 2 scales: the Department P&T Research Publication/Funding Metrics, which identifies milestones in both scientific publication and extramural funding, and the Department National/International Recognition Index.

Department P&T Research Publication/Funding Metrics [Table 1]:
Scientific Publication: Achievement in scientific publication is judged on a combination of the following: total number of peer-reviewed manuscripts; Impact Factor (IF) of journal, and H Index (HI) which incorporates the number of citations. Reaching the thresholds for required numbers of peer-reviewed publications according to promotion route and Rank are prerequisites, yet alone insufficient for advancement, justifying utilization of IF and HI. Publishing in leading journals pertaining to general academic Radiology/imaging sciences, subspecialty academic Radiology/imaging sciences, or specific imaging modalities/technologies is strongly recommended. IF for representative leading journals range from 1.2 to 7.0 [Appendix 2]; consequently, a minimal IF of 1.2 for crediting a publication has been established. Added use of HI, permits an IF=1.2 publication with evidence of many citations to be considered as meritorious as a high-IF publication with few citations.

Extramural Funding: Recognized sources of extramural funding include NIH grants, Competitive National Grants (CNG), approved patents generating income (amount not currently established by OSUCOM), or any established lines of extramural funding > $200,000. NIH funding is the only type of research grant credited as extramural funding for advancement along either the Tenure track with the Basic Science focus or the Research route. Examples of CNG include (but are not limited to) grants from the: NSF, DOD, CMS, AHRQ, State of Ohio, American Heart Association, American Cancer Association, American Diabetes Association, Susan G. Komen for the Cure Foundation, etc. Patents not generating income will be considered to be equivalent to a single high-IF peer-reviewed publication.

Department National/International Recognition Index [Table 2]:
Regardless of promotion route and Tenure status, promotion from Assistant Professor to Associate Professor must be supported by evidence of a strong professional reputation at the national level by means consistent with (but not limited to) the items listed in the Department National/International Recognition Index. For promotion from Associate Professor to Professor along any route, the candidate must have achieved greater professional impact with evidence of national-leadership or international recognition.
Recommendations from the Department of Radiology P&T Committee: For each portfolio under consideration, the Department of Radiology P&T Committee will apply the 2 aforementioned scales - the Department P&T Research Publication/Funding Metrics and the Department National/International Recognition Index – in order to judge academic accomplishments of the faculty member. After factoring in overall achievement (including areas not sufficiently defined herein), a recommendation to the Chair, Department of Radiology will be made either in favor, or not in favor, of the individual’s candidacy for the requested initial appointment, promotion, and/or change in Tenure status.

Compensation Guidelines
The approved OSU Radiology, LLC compensation plan for practicing physicians in the Department of Radiology is based on academic rank and Radiology subspecialty. To that end, the annually released results of the current Fiscal Year Faculty Salary & Productivity Survey collected by The Association of Administrators in Academic Radiology (AAARad) are utilized. Total salary compensation (including incentive, medical directorship, extra-duty and on-call pays) levels used will typically range between the 50th and 75th percentiles of the AAARad data.

For non-physician research-focused faculty members of the Department of Radiology, the approved “Compensation Plan for Research/Technology-Focused Radiology Faculty of the Department of Radiology”, which is also based on available non-clinician AAARad data, will be utilized to establish levels of compensation by the Chair, Department of Radiology.

Merit-based academic-salary adjustments approved by OSU/OSU Wexner Medical Center/OSUCOM leadership for the Department of Radiology will be distributed to individual faculty members based on their personal performance trends and completeness of self-funding of salary and benefits by individual efforts or coverage in kind, as judged by the Department Chair. Those members not demonstrating complete self-funding/coverage will not be considered to be eligible.

The approved OSU Radiology, LLC Service and Professional Incentive and Bonus Plans, addressed in Department Guidelines 005 (Service and Professional Incentive and Bonus Plan): 1. expects that each clinical faculty member will achieve satisfactory levels of service and professionalism in order to maintain incentive support; deficiencies in these areas represent a potential loss of ≤ 20% total salary support for the next 6 months for unsatisfactory performance during the previous 6-month period; and 2. requires the LLC to have overall profitability and Faculty Group Practice/OSU Wexner Medical Center/OSUCOM leadership approval in order for any individual one-time merit-based bonuses to be paid; with these prerequisites met, eligibility of an individual faculty member for a one-time merit-based bonus will require an outstanding performance, including complete self-funding of personal salary and benefits by individual efforts or coverage in kind, as judged by the Department Chair (members not demonstrating complete self-funding/coverage will not be considered eligible).

Document History:
- Original 2012 Document Approved by OSU OAA: 06/05/14
- Revised 2015 Document Submitted-for-Approval to OSU OAA: 05/21/15
Table 1: 2015 Department of Radiology P&T Research Publication/Funding Metrics

<table>
<thead>
<tr>
<th>Route</th>
<th>Rank</th>
<th>Thresholds for New Accomplishments Since Previous Academic Appointment</th>
<th>Additional Required Research Funding and Programmatic Development</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Additional Required Manuscripts with Impact Factor ≥ 1.2 and H Index</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥ 15 (since Assist Prof)</td>
<td>≥ 16</td>
<td>P-I on New R01</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥ 25 (since Assist Prof)</td>
<td>≥ 20</td>
<td>P-I on Renewed R01 or P-I on Additional R01</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥ 25 (since Tenured Assoc Prof)</td>
<td>≥ 20</td>
<td>P-I on Renewed R01 and P-I on Additional R01</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥ 25 (since Tenured Assoc Prof)</td>
<td>≥ 20</td>
<td>P-I on Renewed CNG or P-I on Additional CNG or Co-I on New R01</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥ 15 (since Assist Prof)</td>
<td>≥ 16</td>
<td>P-I on New CNG</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥ 25 (since Assist Prof)</td>
<td>≥ 20</td>
<td>P-I on Renewed CNG or P-I on Additional CNG or Co-I on New R01</td>
</tr>
<tr>
<td></td>
<td></td>
<td>≥ 25 (since Tenured Assoc Prof)</td>
<td>≥ 20</td>
<td>P-I on Renewed CNG or P-I on Additional CNG or Co-I on New R01</td>
</tr>
<tr>
<td></td>
<td>Scholar: Assoc Prof</td>
<td>≥ 10</td>
<td>≥ 12</td>
<td>Co-I on New CNG</td>
</tr>
<tr>
<td></td>
<td>Scholar: Prof</td>
<td>≥ 10</td>
<td>≥ 16</td>
<td>Co-I on Additional CNG</td>
</tr>
<tr>
<td></td>
<td>Educator: Assoc Prof</td>
<td>≥ 5</td>
<td>≥ 10</td>
<td>Co-I on New Education CNG</td>
</tr>
<tr>
<td></td>
<td>Educator: Prof</td>
<td>≥ 5</td>
<td>≥ 14</td>
<td>Co-I on Additional Education CNG and Successful development of significant new Education program</td>
</tr>
<tr>
<td></td>
<td>Excellence: Assoc Prof</td>
<td></td>
<td></td>
<td>*</td>
</tr>
<tr>
<td></td>
<td>Excellence: Prof</td>
<td></td>
<td></td>
<td>*</td>
</tr>
<tr>
<td></td>
<td>Assoc Prof</td>
<td>≥ 25 (since Assist Prof)</td>
<td>≥ 20</td>
<td>P-I on Renewed R01 or P-I on Additional R01</td>
</tr>
<tr>
<td></td>
<td>Prof</td>
<td>≥ 25 (since Assoc Prof)</td>
<td>≥ 20</td>
<td>P-I on Renewed R01 and P-I on Additional R01</td>
</tr>
<tr>
<td></td>
<td>Associated</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td></td>
<td>Prof</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
</tbody>
</table>

CNG = Competitive National Grant

50% in Clinical Trials

Evidence of Excellence in Education required

OAA Approval, 06/08/15
<table>
<thead>
<tr>
<th>Categories</th>
<th>National – Level</th>
<th>National-Leadership/International – Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Service</td>
<td>• National patient referrals for expertise&lt;br&gt;• National clinical consultant&lt;br&gt;• Pioneered nationally important clinical development</td>
<td>• Inter-national patient referrals for expertise&lt;br&gt;• Inter-national clinical consultant&lt;br&gt;• Pioneered inter-nationally important clinical development</td>
</tr>
<tr>
<td>Research &amp; Scholarship</td>
<td>• National award/distinction for scholarship¹&lt;br&gt;• Member: NIH Study Group or Institute review committee&lt;br&gt;• Member: National multi-center trial/research program&lt;br&gt;• Invited manuscript/key address: National organization</td>
<td>• Inter-national award/distinction for scholarship²&lt;br&gt;• Leader: NIH Study Group or Institute review committee&lt;br&gt;• Leader: National multi-center trial/research program&lt;br&gt;• Invited manuscript/key address: Inter-national organization&lt;br&gt;• Consultant: National/inter-national professional organization&lt;br&gt;• Holder: Revenue-generating patent&lt;br&gt;• Editor/Author: High-profile book/journal issue/CME series</td>
</tr>
<tr>
<td>Education</td>
<td>• National award/distinction for educational work&lt;br&gt;• Pioneered nationally important educational development&lt;br&gt;• Director: Residency program&lt;br&gt;• Contributor: Board certification process³&lt;br&gt;• Faculty: National-level training program⁴</td>
<td>• Inter-national award/distinction for educational work&lt;br&gt;• Pioneered inter-nationally important educational development&lt;br&gt;• Reviewer: Departments or residency programs&lt;br&gt;• Leader: Board certification process&lt;br&gt;• Leader: National-level training program</td>
</tr>
<tr>
<td>Administration</td>
<td>• National award/distinction for administrative work&lt;br&gt;• Member: Committees of national professional organizations⁵&lt;br&gt;• Member: Research foundation board⁶&lt;br&gt;• Member: IF&gt;1.2 journal editorial board&lt;br&gt;• Reviewer: Several major journals&lt;br&gt;• Medical consultant: State government</td>
<td>• Inter-national award/distinction for administrative work&lt;br&gt;• Chair: Committee of national professional organization&lt;br&gt;• Leader: National/Inter-national professional organization⁷&lt;br&gt;• Editor: IF&gt;1.2 journal&lt;br&gt;• Medical consultant: Federal government</td>
</tr>
</tbody>
</table>

**Examples**

1. FACR
2. RSNA Gold Medal Award
3. ABR examination question writer
4. ACR Training Center education programs
5. ACR Appropriateness Criteria Panel
6. Susan G. Komen for the Cure Foundation
7. Elected President, Vice President, or Chairman of R&E Foundation of RSNA
## Appendix 1: 2012 Survey of Clinical Scientist Tenure Options in National Top-Tier Departments of Radiology

<table>
<thead>
<tr>
<th>Department</th>
<th>Rank (Dx Rad &amp; Rad Onc)*</th>
<th>Rank (Dx Rad)**</th>
<th>Tenure Option</th>
<th>Prerequisites for Tenure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Any Grant</td>
</tr>
<tr>
<td>UCLA</td>
<td>16</td>
<td>34</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>UCSD</td>
<td>9</td>
<td>16</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>UCSF</td>
<td>5</td>
<td>2</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>U Chicago</td>
<td>20</td>
<td>39</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Duke U</td>
<td>14</td>
<td>18</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Emory U</td>
<td>15</td>
<td>26</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Johns Hopkins U</td>
<td>2</td>
<td>5</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>MD Anderson</td>
<td>63</td>
<td>21</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>U Miami</td>
<td>NA</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>U Michigan</td>
<td>4</td>
<td>12</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Mount Sinai</td>
<td>30</td>
<td>45</td>
<td>Y</td>
<td>N</td>
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<tr>
<td>NYU</td>
<td>11</td>
<td>17</td>
<td>Y</td>
<td>N</td>
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<tr>
<td>Northwestern</td>
<td>36</td>
<td>22</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>U Pennsylvania</td>
<td>3</td>
<td>6</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>U Pittsburgh</td>
<td>7</td>
<td>13</td>
<td>NA</td>
<td>NA</td>
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<tr>
<td>UVA</td>
<td>39</td>
<td>44</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Wake Forest U</td>
<td>18</td>
<td>33</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>U Washington</td>
<td>10</td>
<td>11</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Washington U</td>
<td>6</td>
<td>7</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>U Wisconsin</td>
<td>35</td>
<td>20</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Yale U</td>
<td>8</td>
<td>14</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

* Blue Ridge Report  
** Total Departmental NIH funding
### Appendix 2: 2012 Impact Factors of Representative Radiology/Imaging Science-Related Journals

<table>
<thead>
<tr>
<th>Representative Journals Related to:</th>
<th>Impact Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>General Academic Radiology/Imaging Sciences, Subspeciality Academic Radiology/Imaging Sciences or Specific Imaging Modalities/Technologies</strong></td>
<td></td>
</tr>
<tr>
<td>Journal of Nuclear Medicine (J Nucl Med)</td>
<td>7.022</td>
</tr>
<tr>
<td>Radiology (Radiology) / Radiographics (Radiographics)</td>
<td>6.06 / 2.76</td>
</tr>
<tr>
<td>Investigative Radiology (Invest Radiol)</td>
<td>4.665</td>
</tr>
<tr>
<td>American Journal of Neuroradiology (AJNR)</td>
<td>3.464</td>
</tr>
<tr>
<td>Magnetic Resonance in Medicine (Magn Res Med)</td>
<td>3.267</td>
</tr>
<tr>
<td>American Journal of Roentgenology (AJR)</td>
<td>2.950</td>
</tr>
<tr>
<td>Journal of Magnetic Resonance Imaging (JMRI)</td>
<td>2.747</td>
</tr>
<tr>
<td>International Journal of Cardiovascular Imaging (Int J Cardiovasc Imag)</td>
<td>2.539</td>
</tr>
<tr>
<td>Academic Radiology (Acad Radiol)</td>
<td>2.195</td>
</tr>
<tr>
<td>Journal of Vascular and Interventional Radiology (JVIR)</td>
<td>2.064</td>
</tr>
<tr>
<td>Magnetic Resonance Imaging (MRI)</td>
<td>2.042</td>
</tr>
<tr>
<td>Abdominal Imaging (Abdom Imag)</td>
<td>1.950</td>
</tr>
<tr>
<td>Skeletal Radiology (Skeletal Radiol)</td>
<td>1.387</td>
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<tr>
<td>Journal of Computer Assisted Tomography (JCAT)</td>
<td>1.383</td>
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<tr>
<td>Journal of Thoracic Imaging (J Thorac Imag)</td>
<td>1.207</td>
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</table>