

**Appointments, Promotion, and
Tenure
Criteria and Procedures for
The Ohio State University
College of Medicine
Department of Surgery**

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I. Preamble

This document is a supplement to Chapters 6 and 7 of the [Rules of the University Faculty](#); the annually updated procedural guidelines for promotion and tenure reviews in Chapter 3 of the Office of Academic Affairs [Policies and Procedures Handbook](#) and other policies and procedures of the college and university to which the department and its faculty are subject.

Should those rules and policies change, the department will follow the new rules and policies until such time as it can update this document to reflect the changes. In addition, this document must be reviewed, and either reaffirmed or revised, at least every four years on the appointment or reappointment of the Department Chair.

This document must be approved by the Dean of the College of Medicine (COM) and the Office of Academic Affairs before it may be implemented. It sets forth the Department's mission and, in the context of that mission and the missions of the college and university, its criteria and procedures for faculty appointments and for faculty promotion, tenure and rewards, including salary increases. In approving this document, the Dean and the Office of Academic Affairs accept the mission and criteria of the department and delegate to it the responsibility to apply high standards in evaluating current faculty and faculty candidates in relation to departmental mission and criteria.

The faculty and the administration are bound by the principles articulated in Faculty Rule [3335-6-01](#) of the Administrative Code. In particular, all faculty members accept the responsibility to participate fully and knowledgeably in review processes; to exercise the standards established in Faculty Rule [3335-6-02](#), and other standards specific to this department and college; and to make negative recommendations when these are warranted in order to maintain and improve the quality of the faculty.

Decisions considering appointment, reappointment, and promotion and tenure will be free of discrimination in accordance with the university's [policy on affirmative action and equal employment opportunity](#).

II. Department of Surgery Mission

The Department of Surgery at Ohio State University is dedicated to excellence in education, research, and clinical care in all of the various disciplines encompassed by the specialty.

The Department of Surgery is a participant in the education of medical students at all levels of the medical curriculum. It also educates medical school graduates in a General Surgery residency program and in other residency and fellowship programs associated with the specialty. Graduates of these programs become eligible for certification by specialty boards and similar agencies. The Department instructs graduate students in the College of Medicine's master's and PhD level programs and in other related disciplines. In addition, the department trains postdoctoral fellows in both basic and clinical science categories. The Department also conducts a variety of teaching programs for practicing physicians. From time-to-time members of the Department may also participate in educational projects for the general public.

The Department members, including both those with medical and non-medical doctoral degrees, conduct basic, translational and clinical research. Laboratories associated with the Department are active in the instruction of pre-medical students, medical students, residents, clinical fellows, postdoctoral fellows and graduate students in research methodology and technique. Departmental research is supported by both internal and external funding. Department members are engaged in collaborative projects with researchers in other departments of the University and outside of the University. The results of these various efforts

are presented at various scientific meetings and symposia, and they are published in books, journals and other media.

Physician members of the Department are active practitioners of surgery and its associated specialties. Members of the Department who are non-physician practitioners engage in practice related to their area of expertise. These faculty members are organized into divisions based upon surgical specialties and fellowship programs; these divisions are responsible for providing care to patients whose medical problems are encompassed by the specialty or sub-specialty. The Department strives to maintain a clinical staff with the capability of providing a broad spectrum of surgical and related services, with special expertise in the management of complex and unusual problems in addition to those considered more common.

Department members also participate in the administration and governance of the OSU Wexner Medical Center and Nationwide Children's Hospital, the College of Medicine and the University through service as members and officers of various committees. In addition, faculty members serve local, regional and national medical organizations in a variety of administrative positions. Faculty members may also serve as members and officers of other charitable and service organizations on a local, regional and national level.

The Department performs reassessments of the effectiveness of its efforts in teaching, research and service. A comprehensive evaluation is performed and published as the Department of Surgery Annual Report.

A critical component of the Department's mission is the dedication to continuous improvement in the quality of its contributions to the discipline and practice of surgery and its various specialties, and to the provision of personalized health care for all of its patients.

III. Definitions

A. Committee of the Eligible Faculty

The eligible faculty for all appointment (hiring), reappointment, promotion, or promotion and tenure reviews must have their tenure home or primary appointment in the department.

The department chair, the dean and assistant/associate/vice deans of the college, the executive vice president and provost, and the president may not participate as eligible faculty members in reviews for appointment, reappointment, promotion, or promotion and tenure.

1. Tenure-Track Faculty

Appointment Reviews

Initial Appointment Review.

Initial appointments are made by the Department Chair based on search committee recommendations. A faculty vote is required only if the appointment is at senior rank (associate professor or professor).

For an appointment (hiring) review at senior rank (associate professor or professor), the eligible faculty consists of all tenure-track faculty in the department.

Rank Review. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested.

Reappointment, Promotion, or Promotion and Tenure Reviews

- For the reappointment and promotion and tenure reviews of assistant professors and untenured associate professors, the eligible faculty consists of all tenured associate professors and professors.
- For the promotion reviews of associate professors, the eligible faculty consists of all tenured professors.

2. Clinical Faculty

Appointment Reviews

Initial Appointment Review. For an appointment (hiring or appointment change from another faculty type) review of an assistant clinical professor; an associate clinical professor; or a clinical professor, the eligible faculty consists of all tenure-track faculty and all clinical faculty in the department.

Rank Review. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested, and all non-probationary clinical faculty of equal or higher rank than the position requested.

Reappointment and Promotion Reviews

- For the reappointment and promotion reviews of assistant clinical professors, the eligible faculty consists of all tenured associate professors and professors, and all non-probationary associate clinical professors and professors.
- For the reappointment and promotion reviews of associate clinical professors, and the reappointment reviews of clinical professors, the eligible faculty consists of all tenured professors and all non-probationary clinical professors.

3. Research Faculty

Appointment Reviews

For an appointment (hiring or appointment change from another faculty type) review of a research assistant professor, research associate professor, or research professor, the eligible faculty consists of all tenure-track faculty and all research faculty in the Department.

Rank Review. A vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested and all non-probationary research faculty of equal or higher rank than the position requested.

Reappointment and Promotion Reviews

For the reappointment reviews of research assistant professors, the eligible faculty consists of all tenured associate professors and professors and all non-probationary research associate professors and professors.

For the reappointment and promotion reviews of research associate professors and the reappointment reviews of research professors, the eligible faculty consists of all tenured professors and all non-probationary research professors.

4. Associated Faculty

Initial Appointment and Reappointment

Initial appointments are made by the Department Chair based on search committee recommendations. A faculty vote is required only if the appointment is at senior rank (associate professor or professor).

For initial appointments (hiring or appointment change from another faculty type) at senior rank (associate professor or professor), a vote on the appropriateness of the proposed rank must be cast by all tenured faculty of equal or higher rank than the position requested and all non-probationary clinical faculty of equal or higher rank than the position requested and prior approval of the college dean.

The eligible faculty for reappointment reviews of associated faculty consists of all tenured faculty at or above the rank for which the candidate is being reviewed and all non-probationary clinical faculty at or above the rank for which the candidate is being reviewed.

Promotion Reviews

Associated faculty are eligible for promotion but not tenure if they have adjunct titles, tenure-track titles with service at 49% FTE or below, clinical titles, and lecturer titles.

For the promotion reviews of associated faculty with adjunct titles, the eligible faculty shall be the same as for tenure-track, clinical, or research faculty, as appropriate to the appointment, as described in Sections III.A.1, 2, or 3 above.

For the promotion reviews of associated faculty with tenure-track titles, the eligible faculty shall be the same as for tenure-track faculty as described in Section III.A.1.

For the promotion reviews of associated clinical faculty, the eligible faculty shall be the same as for clinical faculty as described in Section III.A.2 above.

For the promotion review of a lecturer to senior lecturer, the eligible faculty shall be all tenure-track and nonprobationary clinical faculty at the rank of associate professor and professor.

5. Conflict of Interest

Search Committee Conflict of Interest

A member of a search committee must disclose to the committee and refrain from participation in any of the interviews, meetings, or votes that comprise the search process if the member:

- decides to apply for the position;
- is related to or has a close interpersonal relationship with a candidate;
- has substantive financial ties with the candidate;
- is dependent in some way on the candidate's services;
- has a close professional relationship with the candidate (e.g., dissertation advisor); or
- has collaborated extensively with the candidate or is currently collaborating with the candidate.

Eligible Faculty Conflict of Interest

A member of the eligible faculty has a conflict of interest when he/she/they are or have been to the candidate:

- a thesis, dissertation, or postdoctoral advisee/advisor;
- a co-author on more than 50% of the candidate's publications since appointment or last promotion, including pending publications and submissions;
- a collaborator on more than 25% of projects since appointment or last promotion, including current and planned collaborations;
- in a consulting/financial arrangement with the candidate since appointment or last promotion, including receiving compensation of any type (e.g., money, goods, or services) or is dependent in some way on the candidate's services; or
- in a family relationship such as a spouse, child, sibling, or parent, or other relationship, such as a close personal friendship, that might affect one's judgment or be seen as doing so by a reasonable person familiar with the relationship.

Such faculty members will be expected to withdraw from a promotion review of that candidate.

6. Minimum Composition

In the event that the department does not have at least three eligible faculty members who can undertake a review, the department chair, after consulting with the Vice Dean for Faculty Affairs, will appoint a faculty member from another TIU within the college.

B. Appointments, Promotion and Tenure Committee

The department has an Appointments, Promotion and Tenure Committee that assists the eligible faculty in managing the personnel and promotion and tenure issues. The Appointments, Promotion, and Tenure Committee is composed of ten (10) diverse associate professors and professors, selected from the clinical, research, and tenure track faculty, who represent OSU/NCH. These members are appointed by the Vice Chair for Promotion and Tenure and must receive approval from the Department Chair. The Committee plays a supportive role for the Department Chair in various administrative functions and aids the Eligible Faculty Committee in addressing matters related to faculty appointments, evaluations, promotions, and tenure. It is important to note that the APT Committee does not engage in voting on the qualifications of candidates for promotion and tenure. Instead, it provides the aforementioned services and subsequently presents a comprehensive case, including both advantages and disadvantages, for each faculty candidate to the Eligible Faculty Committee, whose roles and responsibilities are outlined in this APT document. The final decision made by the Eligible Faculty is then communicated to the Department Chair and the College Promotion and Tenure Committee. Members serve a term of three years, with the possibility of reappointment.

When considering cases involving clinical faculty the Appointments, Promotion and Tenure Committee may be augmented by an additional 1-5 non-probationary clinical faculty members at the rank of associate professor or professor, as appropriate to the case.

When considering cases involving research faculty the Appointments, Promotion and Tenure Committee may be augmented by an additional 1-2 non-probationary research faculty members at the rank of associate professor or professor, as appropriate to the case.

C. Quorum

The quorum required to discuss and vote on all personnel decisions is simple majority of the eligible faculty not on an approved leave of absence. Faculty on approved leave are not considered for quorum unless they declare, in advance and in writing, their intent to participate in all proceedings for which they are eligible during the leave.

Faculty members who recuse themselves because of a conflict of interest are not counted when determining quorum.

D. Recommendation from the Committee of the Eligible Faculty

In all votes taken on personnel matters only “yes” and “no” votes are counted. Abstentions are not considered votes and are not permitted in votes for promotion and/or tenure in this department. Faculty members are strongly encouraged to consider whether they are participating fully in the review process when abstaining from a vote on a personnel matter.

Absentee ballots and proxy votes are not permitted but participating fully in discussions and voting via remote two-way electronic connection are allowed.

1. Appointment

- A positive recommendation from the eligible faculty for appointment is secured when a simple majority (greater than 50%) of the votes cast are positive.
- In the case of a joint appointment, the department must seek input from a candidate’s joint-appointment TIU prior to his/her/their appointment.

2. Reappointment, Promotion and Tenure, and Promotion

- A positive recommendation from the eligible faculty for reappointment, promotion and tenure, and promotion is secured when a simple majority (greater than 50%) of the votes cast are positive.
- In the case of a joint appointment, the department must seek input from a candidate’s joint-appointment TIU prior to their reappointment, or promotion and/or tenure.

IV. Appointments

A. Criteria

Faculty appointments in the Department of Surgery shall be made only to individuals with clear potential to enhance the quality of the Department and facilitate the achievement of the Department's mission. Important considerations include the individual's record to date in teaching, research, and service; the potential for professional growth in each of these areas; and the potential for interacting with colleagues and students in a way that will enhance their academic work and attract other outstanding faculty, residents, fellows, and students to the department. No offer will be extended in the event that the search process does not yield one or more candidates who would enhance the quality of the department. The search is either canceled or continued, as appropriate to the circumstances. For each appointment, the projected schedule of promotion and tenure reviews will be stipulated in the letter of offer.

The appointment of all compensated tenure-track, clinical, research, and associated faculty, irrespective of rank, must be based on a formal search process following the [SHIFT](#) Framework for faculty recruitment.

All faculty positions must be posted in [Workday](#), the university's system of record for faculty and staff. A formal review and selection process, including interviews using pre-designed evaluation rubrics, is required for all positions. Appropriate disposition codes for applicants not selected for a position must be entered in [Workday](#) to enable the university to explain why a candidate was not selected and what stage they progressed to before being removed.

1. Tenure-Track Faculty

The tenure track exists for faculty members who strive to achieve sustained excellence in the discovery and dissemination of new knowledge, as evidenced by national and international recognition of their scholarship and successful competition for extramural funding. While excellence in teaching and outstanding service to The Ohio State University are also required, these alone are not sufficient for advancement on this track. Departments are responsible for establishing criteria for appointment, reappointment, promotion, and tenure that align with these standards and ensuring that all related recommendations adhere to them.

Faculty appointed on the Tenure-Track must have the potential for excellence in all three critical areas: teaching, scholarship, and service. In addition, faculty members are encouraged to develop programs that reflect the integration of teaching, service and research in a specific content area. Appointments to this track are made in accordance with University Rule [3335-6-02](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. There must be an expectation that faculty members who are appointed to the Tenure-Track will be assigned a workload that provides sufficient time for the faculty member to meet the expectations and requirements for Tenure-Track appointments. The appointment process requires the Department to provide sufficient evidence in support of a Tenure-Track faculty appointment to ensure that the faculty candidate has clearly and convincingly met or exceeded applicable criteria in teaching, scholarship, and service [See Section VI of this document for examples]. Each candidate for appointment should undergo an appropriate faculty review by the Department.

An appointment to the rank of Instructor or Assistant Professor in the Tenure-Track is always probationary, and tenure will not be awarded at this rank. The maximum probationary period will be dependent upon whether the faculty member has patient clinical service responsibilities as determined by the Department Chair in consultation with the College of Medicine.

Consistent with Faculty Rule [3335-6-09](#), faculty members **with significant clinical responsibilities** in the College of Medicine are granted an extended probationary period of up to 11 years, including prior service credit, depending on the pattern of research, teaching, and service workload. An assistant professor with an extended probationary period is reviewed for promotion and tenure no later than the 11th year as to whether promotion and tenure will be granted at the beginning of the 12th year. For individuals not recommended for promotion and tenure after the mandatory review, the 12th year will be the final year of employment.

For faculty members **without significant clinical responsibilities**, the maximum probationary period will be six years. An Assistant Professor is reviewed for promotion and tenure no later than the sixth year of appointment as an Assistant Professor and informed by the end of that year as to whether promotion and tenure will be granted at the beginning of the seventh year. For individuals not recommended for promotion and tenure after the mandatory review, the 7th year will be the final year of employment. It is anticipated that not all faculty members will require the full probationary period, and that, consistent with University Rule [3335-6-03](#)(B2), promotion and tenure may be granted at any time during the probationary

period if the faculty member's record of achievement merits tenure and promotion. Similarly, a probationary period may be terminated at any time, subject to the notice provisions of University Rule [3335-6-08](#) and the provisions of paragraphs (G), (H), and (I) of this rule. In all circumstances, annual review and fourth year review procedures, as specified in University Rule [3335-6-03](#)(C), will be followed.

For each appointment, the projected schedule of promotion and tenure reviews will be stipulated in the letter of offer.

University promotion and tenure policies and criteria are modified on occasion. All faculty members have access to all pertinent documents detailing the Department, College of Medicine, and University promotion and tenure policies and criteria. The most updated documents are located at the University Office of Academic Affairs website.

In this section, the criteria for appointment in the Tenure-Track at the rank of Instructor and Assistant Professor will be outlined in detail. Appointments at higher ranks shall be based upon fulfilling the same criteria described in sections VI A and VI B which relate to promotion to the rank of Associate Professor and Professor in the Tenure-Track.

For faculty with clinical responsibilities, each appointee must obtain the appropriate Ohio licensure and other required certifications if required for the successful execution of their faculty responsibilities.

Appointment: Instructor on the Tenure-Track

Appointment at the rank of instructor is made only when the offered appointment is that of assistant professor, but requirements for the terminal degree have not been completed by the candidate at the time of appointment. Procedures for appointment are identical to those for an assistant professor. The department will make every effort to avoid such appointments. An appointment at the instructor level is limited to three years. Promotion to assistant professor occurs without review following completion of the required credentialing. An instructor must be approved for promotion to assistant professor by the beginning of the third year, or the appointment will not be renewed, and the third year is the terminal year of employment.

Upon promotion to Assistant Professor, the faculty member may request prior service credit for time spent as an Instructor. Unless there are unique circumstances, the department does not recommend requesting prior service credit. This request must be approved by the department's eligible faculty, the department chair, the Dean, and the Office of Academic Affairs. Faculty members should carefully consider whether prior service credit is appropriate since prior service credit cannot be revoked without a formal request for an extension of the probationary period. In addition, all probationary faculty members have the option to be considered for early promotion.

Criteria for appointment to the rank of Instructor include the following.

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience. Individuals who have completed all the requirements of their terminal degree, but who have not obtained the final degree at the time of initial employment will be appointed as an Instructor. In addition, appointment at the rank of Instructor is appropriate for individuals who, at the time that they join the faculty, do not have the requisite skills or experience to fully assume the full range of responsibilities of an Assistant Professor.

- Evidence of potential for excellence in scholarship. Such evidence might include peer-reviewed publications in a mentored setting, but insufficient evidence of an independent, creative, and productive program of research with potential for external funding.
- Evidence of previous activities fostering an inclusive environment in scholarship, teaching and service or demonstration of a willingness to contribute to an inclusive environment within the department.
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professor (Appendix)
- In aggregate, accomplishments related to the above criteria should be sufficiently compelling that the appointee is judged to have significant potential to attain tenure and a distinguished record as a faculty member in the College of Medicine.

Appointment: Assistant Professor on the Tenure-Track

An earned terminal degree is the minimum requirement for appointment at the rank of assistant professor. During a probationary period, a faculty member does not have tenure and is considered for reappointment annually. Tenure cannot be awarded at the rank of assistant professor. Evidence of potential for scholarly productivity, high-quality teaching, and high-quality service to the department and the profession is highly desirable.

Consistent with Faculty Rule, [3335-6-09](#), faculty members without clinical service responsibilities are reviewed for promotion & tenure no later than the 6th year as to whether promotion and tenure will be granted at the beginning of the 7th year. For individuals not recommended for promotion and tenure after the mandatory review, the 7th year will be the final year of employment. Faculty members with significant clinical service responsibilities are granted an extended probationary period of up to 11 years, including prior service credit, depending on the pattern of research, teaching, and service workload. An assistant professor with an extended probationary period is reviewed for promotion and tenure no later than the 11th year as to whether promotion and tenure will be granted at the beginning of the 12th year. For individuals not recommended for promotion and tenure after the mandatory review, the 12th year will be the final year of employment.

Review for tenure prior to the mandatory review year is possible when the Appointments, Promotion and Tenure Committee determines such a review to be appropriate. The granting of prior service credit, which requires approval of the Office of Academic Affairs, may reduce the length of the probationary period, but is strongly discouraged as it cannot be revoked once granted except through an approved request to extend the probationary period.

Appointment to the rank of assistant professor requires meeting the following criteria.

- An earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience. This is the minimum requirement for appointment at the rank of assistant professor.
- Early evidence of excellence in scholarship as demonstrated by the initial development of a body of research, scholarship, and creative work. In addition, evidence must be provided that supports a candidate’s potential for an independent program of scholarship or leadership within a productive research program as well as a strong likelihood of independent extramural research funding or extramural funding through team science work.

- Evidence of previous activities fostering an inclusive environment in scholarship, teaching and service or demonstration of a willingness to contribute to an inclusive environment within the department, college, and/or university.
- No ongoing negative behavior such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [Appendix].
- In aggregate, accomplishments related to the above criteria should be sufficiently compelling that the appointee is judged to have significant potential to attain tenure and a distinguished record as a faculty member in the College of Medicine.

Appointment: Associate Professor on the Tenure-Track

Appointment offers at the rank of Associate Professor with tenure, and offers of prior service credit require prior approval of the Office of Academic Affairs.

Criteria for appointment to the rank of associate professor with tenure are identical to the criteria for promotion to associate professor with tenure, as detailed in Section VI of this document. In general, appointments at the rank of associate professor shall not entail a probationary period unless there are compelling reasons not to offer tenure.

Offers to foreign nationals require prior consultation with the Office of International Affairs.

Appointment: Associate Professor in Advance of Tenure on the Tenure-Track

While appointments to the rank of Associate Professor generally include tenure, a probationary period may be granted after petition to the University Office of Academic Affairs. The Department must exercise care in making these appointments and provide the metrics that the faculty member must achieve to be awarded tenure. For faculty without clinical responsibilities, the probationary period may not exceed four years. For faculty with patient clinical service responsibility, the probationary period may not exceed six years. Requests for such appointments require the approval of the Dean of the College of Medicine, and the Executive Vice President and Provost.

An appointment to the rank of Associate Professor in advance of tenure is probationary, consistent with the provisions of Section V.A. [Annual Performance and Merit Review Procedures] of this document. During a probationary period, a faculty member does not have tenure and is considered for reappointment annually. Criteria for the initial appointment to the rank of associate professor in advance of tenure are identical to the criteria for promotion to associate professor in advance of tenure, as detailed in Section VI of this document.

Offers to foreign nationals require prior consultation with the Office of International Affairs.

Appointment: Professor with Tenure on the Tenure-Track

Appointment offers at the rank of professor require prior approval of the University Office of Academic Affairs. Criteria for initial appointment to the rank of professor with tenure are identical to the department’s criteria for promotion to professor with tenure, as detailed in Section VI of this document.

Appointments at the rank of professor without tenure are not possible.

Offers to foreign nationals require prior consultation with the Office of International Affairs.

2. Clinical Faculty

The Clinical Faculty is equivalent in importance to the College of Medicine as the Tenure-Track faculty. The Clinical Faculty exists for those faculty members whose principal career focus is outstanding teaching, clinical and translational research, and delivery of exemplary clinical care. Clinical Faculty members will generally not have sufficient protected time to meet the robust scholarship requirements of the Tenure-Track within a defined probationary period. For this reason, the nature of scholarship in the Clinical Faculty differs from that in the Tenure-Track and may be focused on a mixture of academic pursuits including the scholarship of practice, integration, education, as well as new knowledge discovery. Clinical Faculty members may choose to distinguish themselves in teaching, innovative pedagogic program development, or patient-oriented research. Clinical Faculty members may choose to distinguish themselves through several portfolios of responsibility including Clinician-Educator, Clinician-Scholar, and Clinical Excellence pathways. These reflect 1) pedagogic excellence as measured by teaching evaluations and innovative teaching practices, modules, and publications; and 2) excellence in translational science, clinical research, and health services (*e.g.*, health care policy and comparative effectiveness research) as measured by publications and grant funding, respectively. The clinical excellence pathway exists for faculty members who focus on exemplary clinical care or unique areas of emphasis in patient management. These faculty members may build signature clinical programs and/or serve as preferred providers developing a regional or national reputation for clinical service expertise. Faculty members on this pathway typically devote 80% or more of their effort to patient care or administrative service. Clinical Faculty members are not eligible for tenure and may not participate in promotion and tenure matters of Tenure-Track faculty.

All appointments of faculty members to the Clinical Faculty are made in accordance with Chapter 7 of the *Rules for University Faculty* [3335-7](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. All faculty members have access to all pertinent documents detailing the Department, College of Medicine, and University promotion and tenure policies and criteria. The most updated documents are located on the University Office of Academic Affairs website.

Except for those appointed at the rank of instructor, for whom a contract is limited to three years, the initial contract for all other clinical faculty members must be for a period of five years. The initial contract is probationary, with reappointment considered annually. Second and subsequent contracts for clinical faculty must be for a period of at least three years and for no more than five years. By the end of the penultimate year of the probationary contract, the faculty member will be informed as to whether a new contract will be extended. In the event that a new contract is not extended, the final year of the probationary contract is the terminal year of employment. There is no presumption that a new contract will be extended regardless of performance. In addition, the terms of the contract may be renegotiated at the time of reappointment. Furthermore, each appointee must obtain the appropriate Ohio licensure and other required certifications, including medical staff privileges.

In this section, the criteria for initial appointment in the Clinical Faculty at the rank of Clinical Instructor and Clinical Assistant Professor will be outlined in detail. Appointments at higher ranks shall be based upon fulfilling the same criteria described in section VI which relate to promotion to the rank of Associate Clinical Professor and Clinical Professor in the Clinical Faculty.

Appointment: Clinical Instructor

Appointment to the rank of clinical instructor is made if all of the criteria for the position of assistant professor have been met with the exception that the candidate will not have completed the terminal degree,

or other relevant training, at the time of the appointment. The department will make every effort to avoid such appointments.

When an individual is appointed as an instructor, the letter of offer should indicate the specific benchmarks and accomplishments that will be necessary for promotion to assistant clinical professor.

Clinical instructor appointments are limited to three years, with the third year being the terminal year. When a clinical instructor meets the criteria for promotion to assistant clinical professor, a new letter of offer with a probationary period of three to five years will be issued.

In the event the instructor has not completed the requirements for promotion to the rank of assistant professor by the end of the penultimate year of the contract period, a new contract will not be considered even if performance is otherwise adequate, and the position itself will continue.

Candidates for appointment to the rank of instructor on the clinical faculty will have at a minimum:

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study, or anticipated completion of clinical residency and/or fellowship.
- Evidence of potential for contributions to scholarship, education or patient care.
- Post-doctoral clinical training in an appropriate area.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [Appendix].
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.

Appointment: Assistant Clinical Professor

Candidates for appointment at this rank are expected to have earned a doctorate or appropriate terminal degree, to have completed all relevant training, including residency and fellowship where appropriate, consistent with the existing or proposed clinical or educational program goals of the Department of Pediatrics. Assistant clinical professor is the appropriate level for initial appointment of persons holding the appropriate terminal degree and the relevant clinical training.

The initial appointment to the rank of assistant clinical professor is always probationary for a period of five years. During a probationary period, a faculty member is considered for reappointment annually. A probationary appointment may be terminated at any time subject to the provision of University Rule [3335-6-08](#) and the provision of paragraphs (B) and (C) of University Rule [3335-7-07](#). An assistant clinical professor may be reviewed for promotion at any time during the probationary period or during a subsequent contract.

Candidates for appointment to the rank of assistant clinical professor will have at a minimum the following criteria:

- An earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience; and completion of requisite post-doctoral clinical training.
- Evidence of contributions to scholarship, education, community engagement or patient care and the potential to advance through the faculty ranks.

- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [Appendix].
- Evidence of previous activities fostering an inclusive environment or demonstration of a willingness to contribute to an inclusive environment within the department, college, and/or university.
- No ongoing negative behaviors such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.

Appointment: Associate Clinical Professor

Criteria for **initial appointment** to the rank of Associate Clinical Professor are identical to the Department’s criteria for **promotion** to Associate Clinical Professor in the Clinical Faculty, as detailed in Section VI.A.4 of this document.

Appointment: Clinical Professor

Criteria for **initial appointment** to the rank of Clinical Professor are identical to the Department’s criteria for **promotion** to Professor in the Clinical Faculty, as detailed in section VI.A.4 of this document.

3. Research Faculty

Research faculty appointments are intended for individuals who will have faculty-level responsibilities in the research mission, comparable to the level of a Co-Investigator. Individuals who serve as laboratory managers or otherwise contribute to the research mission at a level comparable to that of a postdoctoral fellow should not be appointed on the research faculty but rather should be appointed as research scientists.

Appointments to the Research Faculty are made in accordance with Chapter 7 of the *Rules of the University Faculty* [3335-7](#). Each new appointment must enhance, or have strong potential to enhance, the quality of the Department. Each new appointment must enhance, or have strong potential to enhance, the quality of the department. Unless otherwise authorized by a majority vote of the tenure-track faculty in a department, research faculty must comprise no more than twenty per cent (20%) of the number of tenure-track faculty in the department. In all cases, however, the number of research faculty positions in a unit must constitute a minority with respect to the number of tenure-track faculty in the department.

Tenure is not granted to research faculty.

Contracts will be for a period of at least one year and for no more than five years and must explicitly state the expectations for salary support. In general, research faculty appointments will require ninety-five percent (95%) salary recovery. It is expected that salary recovery will be derived from extramural funds. While salary support for research faculty may not come from dollars provided to the department from the college, departments may choose to provide funding from individual departmental funds and/or department chair package funds to maintain the faculty member’s salary at 100%. The initial contract is probationary, and a faculty member will be informed by the end of each probationary year as to whether they will be reappointed for the following year. By the end of the penultimate year of the probationary contract, the faculty member will be informed as to whether a new contract will be extended at the conclusion of the probationary contract period. In the event that a new contract is not extended, the final year of the probationary contract is the terminal year of employment. There is no presumption that a new

contract will be extended, regardless of performance. In addition, the terms of a contract may be renegotiated at the time of reappointment.

Research faculty members are eligible to serve on The Ohio State University committees and task forces but not on governance committees. Research faculty members also are eligible to advise and supervise graduate and postdoctoral students and to be principal investigator on extramural research grant applications. Approval to advise and supervise graduate students must be obtained from the Graduate School as detailed in Section 12 of the [Graduate School Handbook](#).

Appointment: Research Assistant Professor

Criteria for appointment at the rank of assistant professor on the research faculty are as follows:

- Earned doctorate or other terminal degree in the relevant field of study, or possession of equivalent experience.
- Completion of sufficient research training to provide the basis for specific expertise for contributing to the research mission.
- An initial record of scholarship that indicates effective collaboration and contribution to peer-reviewed research, reflected by co-authorship of peer reviewed publications, participation in team science initiatives, or funded effort on peer-reviewed grants that strongly indicate the ability to sustain an independent, externally funded research program.
- Evidence of activities fostering an inclusive environment in scholarship and mentoring or demonstration of a willingness to contribute to an inclusive environment within the College and unit.
- No ongoing negative behavior such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors [Appendix].
- Strong potential for career progression and advancement through the faculty ranks.

Appointment: Research Associate Professor or Research Professor

The criteria for **initial appointment** to the rank of Associate Professor or Research Professor on the Research Faculty are identical to those criteria for **promotion** to this rank as outlined in Section VI.A.5 of this document. Appointment at the rank of research associate professor or research professor requires that the individual have a doctorate and meet, at a minimum, the department’s criteria for promotion to these ranks.

4. Associated Faculty

Associated faculty appointments may be as short as a few weeks to assist with a focused project, a semester to teach one or more courses, or for up to three years when a longer contract is useful for long-term planning and retention. Associated faculty may be reappointed. Members of the associated faculty are not eligible for tenure, may not vote at any level of governance, and may not participate in promotion and tenure matters.

Adjunct Assistant Professor, Adjunct Associate Professor, Adjunct Professor. Adjunct titles are used to confer faculty status on individuals who have credentials comparable to tenure-track, clinical, or research faculty of equivalent rank. The adjunct faculty rank is determined by applying the criteria for

appointment of tenure-track, clinical, or research faculty, as appropriate to the appointment. Adjunct appointments are uncompensated. Adjunct faculty appointments are given to individuals who give academic service to the department, such as teaching a course or serving on graduate student committees, for which a faculty title is appropriate. Adjunct faculty members are eligible for promotion (but not tenure) and the relevant criteria are those for promotion of tenure-track, clinical, or research faculty, as appropriate to the appointment.

Clinical Instructor-Practice, Clinical Assistant Professor-Practice, Clinical Associate Professor-Practice, Clinical Professor-Practice. Associated Practice faculty appointments may be compensated or uncompensated. Uncompensated appointments are given to individuals who volunteer uncompensated academic service to the Department of Surgery, for which a faculty title is appropriate. Compensated appointments are given to full time clinicians who are not appointed to the tenure track or clinical faculty.

This category of Associated faculty will have a paid appointment at OSU, OSUP (Ohio State University Physicians, Inc.), or Nationwide Children's Hospital (NCH) and requires a faculty appointment (e.g. for clinical credentialing or teaching a course). They may have another paid appointment at OSU (e.g. physician), but their faculty appointment can be unpaid. This may be appropriate to use for faculty appointments that are expected to be less than three years or for faculty who are paid through OSU, OSUP, or NCH but are 100% deployed in the community.

Associated clinical practice rank is determined by applying the criteria for appointment of clinical faculty. Associated clinical practice faculty members are eligible for promotion (but not tenure) and the relevant criteria for promotion of clinical faculty.

Lecturer. Appointment as lecturer requires that the individual have, at a minimum, a Master's degree in a field appropriate to the subject matter to be taught. Evidence of ability to provide high-quality instruction is desirable. Lecturers are not eligible for tenure but may be promoted to senior lecturer if they meet the criteria for appointment at that rank. The initial appointment for a lecturer cannot exceed one year. Second and subsequent contracts for lecturers cannot exceed three years.

Senior Lecturer. Appointment as senior lecturer requires that the individual have, at a minimum, a doctorate in a field appropriate to the subject matter to be taught, along with evidence of ability to provide high-quality instruction; or a Master's degree and at least five years of teaching experience with documentation of high quality. Senior lecturers are not eligible for tenure or promotion. The initial appointment for a senior lecturer cannot exceed one year. Second and subsequent contracts for senior lecturers cannot exceed three years.

Tenure Track Assistant Professor, Associate Professor, Professor with FTE below 50%.

Appointment at tenure track titles is for individuals at 49% FTE or below, either compensated (1-49% FTE) or uncompensated (0% FTE). Associated tenure track rank is determined by applying the criteria for appointment of tenure track faculty. Associated tenure track faculty members are eligible for promotion (but not tenure) and the relevant criteria are those for promotion of tenure track faculty.

Visiting Instructor, Visiting Assistant Professor, Visiting Associate Professor, Visiting Professor.

Visiting faculty appointments may either be compensated or not compensated. Faculty members on temporary leave from another academic institution are appointed as a visiting faculty at the same rank held in that other institution. Visiting faculty appointments may also be used for new senior rank candidates for whom the appointment process is not complete at the time of their employment. In that case the visiting rank is determined by the criteria for the appointment to which they will be ultimately employed. Visiting faculty members are not eligible for tenure or promotion. They may not be reappointed for more than three consecutive years.

Returning Retiree – faculty who have retired from the University and return in any paid appointment at the University. Approvals are only for one year and must cover their salary and associated costs. All reemployed retiree faculty appointments must be approved by the department chair, Dean and University Office of Academic Affairs. Reemployment as a retiree is not an entitlement. The appointment is based on the needs of the unit rather than the desire of the individual, with particular attention to the ways the reappointment can benefit the university. Refer to the [APT Required Documents and Process](#) site for more information (policy, required documents, and tip sheet).

At a minimum, all candidates for Associated faculty appointments must meet the following criteria.

- Associated clinical faculty with clinical responsibilities must be a licensed physician or health care provider if required for successful execution of their faculty responsibilities.
- Have significant and meaningful interaction in at least one of the following mission areas of the College of Medicine:
 - a) Teaching of medical students, residents, clinical fellows, undergraduate and graduate students and postdoctoral fellows. For community physicians providing outpatient teaching of medical students, meaningful interaction consists of supervising medical students for at least one month out of the year.
 - b) Research: These faculty members may collaborate with the department or Division in the College in research projects or other scholarly activities.
 - c) Service to the department or the College: This includes participation in committees or other leadership activities (e.g., membership in the Medical Student Admissions Committee).
- Evidence of activities fostering an inclusive environment within the department
- No ongoing negative behavior such as discrimination, bullying, harassment, retaliation, or promotion of other hostile work conditions.
- A mindset and track record reflecting adherence to standards of professional ethical conduct consistent with the “Statement on Professional Ethics” by the American Association of University Professors (Appendix)

Appointment: Associated Faculty at Advanced Rank

Associated faculty may be compensated or uncompensated, and typically provide service to the college in the areas of research, clinical care, or education. For compensated faculty who are principally focused on patient care, the appointment at advanced rank criteria and procedures will be identical to those for the clinical excellence pathway. For compensated faculty who contribute principally through educational activities or scholarship, the appointment at advanced rank criteria and procedures will be identical to those for the clinician educator pathway.

Appointment and reappointment of uncompensated adjunct or visiting faculty may be proposed by any faculty member in the department and are decided by the department chair in consultation with Appointments, Promotions and Tenure committee.

5. Emeritus Faculty

Emeritus faculty status is an honor given in recognition of sustained academic contributions to the university as described in Faculty Rule [3335-5-36](#). Full-time tenure track, clinical, research, or associated faculty may request emeritus status upon retirement or resignation at the age of sixty or older with ten or more years of service or at any age with twenty-five or more years of service.

Faculty will send a request for emeritus faculty status to the department chair outlining academic performance and citizenship. The faculty eligible to conduct promotion reviews within the requestor's appointment type (see Section III.A.1-4) will review the application and make a recommendation to the chair. The chair will decide upon the request, and if appropriate submit it to the dean. If the faculty member requesting emeritus status has, in the 10 years prior to the application, engaged in serious dishonorable conduct in violation of law, rule, or policy and/or caused harm to the university's reputation or is retiring pending a procedure according to Faculty Rule [3335-5-04](#), emeritus status will not be considered. Should the department chair deny the request, the faculty member may appeal the decision to the dean.

Emeritus faculty may not vote at any level of governance and may not participate in promotion and tenure matters.

6. Joint Appointments

Joint appointments are created to leverage a faculty member's unique expertise to advance the mission areas of the academic units involved and promote cross-disciplinary collaboration. To establish a joint faculty appointment, a [memorandum of understanding \(MOU\)](#) (see [Faculty Appointments Policy](#), Section 1.B) is developed by all affected TIUs, centers, and/or institutes. The MOU will clearly define the distribution of the faculty member's time commitment to the different units. The MOU will also state the sources of compensation directed to the faculty member, distribution of resources, the planned acknowledgment of the academic units in publications, the manner in which credit for any grant funding will be attributed to the different units, and the distribution of grant funds among the appointing units. Unless other arrangements are specified in the MOU, the TIU in which the faculty member's FTE is greater than 50% will be considered that faculty member's TIU. Joint-appointed faculty may vote on promotion and tenure cases only in their TIU.

7. Courtesy Appointments for Faculty

The Department of Surgery may grant courtesy (non-salaried, 0% FTE) appointments to faculty members whose primary activity falls within the purview of another College or College of Medicine department. A faculty member who is granted such an appointment must possess the credentials and skills which will have the potential to enhance the mission of the Department of Surgery in teaching, research and/or service. Continued appointment in a courtesy capacity requires evidence of substantial ongoing contributions to the Department of Surgery, commensurate with the faculty rank determined by the primary department. As long as the faculty member remains active with their contributions to the Department of Surgery and is in good standing within their own primary department, they will retain their courtesy appointment. Any changes to status will be addressed by the Department Chair and/or AP&T Committee. Such appointments shall require approval from the primary department for the initial appointment and for promotion. The faculty rank in the Department of Surgery shall be identical to that held in the tenure initiating unit. Such appointments shall entail no salary from the Department of Surgery and are available to Tenure-Track, Clinical faculty, and Research faculty.

B. Appointment Procedures

The appointment of all compensated tenure-track, clinical, research, and associated faculty, irrespective of rank, must be based on a formal search process following the [SHIFT](#) Framework for faculty recruitment. All faculty positions must be posted in [Workday](#), the university's system of record for faculty and staff. A formal review and selection process, including interviews using pre-designed evaluation rubrics, is required for all positions. Appropriate disposition codes for applicants not selected for a position must be

entered in [Workday](#) to enable the university to explain why a candidate was not selected and what stage they progressed to before being removed.

In addition, see the [Policy on Faculty Recruitment and Selection](#) and the [Policy on Faculty Appointments](#) for information on the following topics:

- recruitment of tenure-track, clinical, research, and associated faculty
- appointments at senior rank or with prior service credit
- hiring faculty from other institutions after April 30
- appointment of foreign nationals
- letters of offer

1. Tenure-Track Faculty

A national search is required to ensure a diverse pool of highly qualified candidates for all Tenure-Track positions. This includes all external candidates for all faculty positions. The only exception is for dual career partners, as described in Chapter 5, section 4.1 of the [Policies and Procedures Handbook](#). Exceptions to this policy must be requested in advance from the Office of Academic Affairs. Search procedures must entail substantial faculty involvement and be consistent with the OAA [Policy on Faculty Recruitment and Selection](#). Searches for tenure-track faculty proceed as follows:

The Dean of the College or designee provides approval for the Department to commence a search process. This approval may or may not be accompanied by constraints with regard to salary, rank, and field of expertise.

The Department Chair or the individual who has commissioned the search appoints a search committee, usually consisting of three or more faculty members who reflect the field of expertise that is the focus of the search, as well as other fields within the Department.

Prior to any search, members of all search committees must undergo the training identified in the [SHIFT](#) Framework for faculty recruitment. In addition, all employees/faculty involved in the hiring and selection process must review and acknowledge the AA/EEO Recruitment and Selection Guidelines in the BuckeyeLearn system.

The [SHIFT](#) Framework serves as a centrally coordinated guideline and toolkit to support the entire process of faculty recruitment with clear engagement from all participating stakeholders involved in the faculty hiring process. This framework is intended to provide faculty engaged in search committees and staff providing support services with the tools and support needed to attract excellent and diverse applicant pools, conduct consistent and equitable evaluations, and successfully hire and properly onboard new faculty members who will continue our tradition of academic excellence. This framework consists of six phases, each targeting a specific stage of the recruitment process:

- “Phase 1 | Search Preparation & Proactive Recruitment” is the earliest stage in the search process. Key steps during this phase include determining faculty needs for the unit, creating a search strategy (including a timeline), establishing a budget, and identifying additional partners to include in the process. The steps in this phase provide guidance on forming committees, detail training requirements for search committee members, and innovative approaches to advertising and outreach. This section also includes ideas and resources for developing qualified, diverse talent pools to ensure alignment with the university’s commitment to AA/EEO principles and advance the eminence of the institution.

- “Phase 2 | Preliminary Review of Applicants” focuses on best practices for the application review and candidate screening processes. The guidelines and resources in this section support consistency, fairness, and equity in the review, assessment, and selection of candidates moving forward in the recruitment process. This section also outlines how to select a list of candidates for on-campus interviews.
- “Phase 3 | Finalists Interviews & Evaluations” provides guidance and tools for conducting interviews and campus visits, requesting reference letters (if not requested earlier in the application stage), and collecting feedback from everyone who interacted with the candidates. Adherence to the guidelines outlined in this section has a direct impact on enhancing the candidate experience and ensuring a consistent evaluation process. This phase concludes with the submission of a letter from the search committee to the department chair.
- “Phase 4 | Extend Offer” provides guidance and resources related to effectively selecting the most qualified candidate(s) for the position(s) and successfully negotiating to result in an accepted offer.
- “Phase 5 | Preboard and Onboard” offers resources to help prepare and support new faculty as they transition to Ohio State. The suggestions in this phase focus on creating a seamless transition for incoming faculty and their partners/families, if applicable.
- “Phase 6 | Reflect and Assess the Search” is a process supported by OAA to reflect the hiring cycle each year and evaluate areas that may need improvement and additional support.

If the offer involves senior rank, the eligible faculty members vote on the appropriateness of the proposed rank. If the offer may involve prior service credit, the eligible faculty members also vote on the appropriateness of such credit. The eligible faculty reports a recommendation on the appropriateness of the proposed rank or the appropriateness of prior service credit to the Department Chair or the individual who has commissioned the search, who then proceeds with the offer of an appointment. Appointment offers at the rank of associate professor, with or in advance of tenure, professor with tenure, and/or offers of prior service credit require prior approval of the Office of Academic Affairs.

In the event that more than one candidate achieves the level of support required to extend an offer, the Department Chair decides which candidate to approach first. The details of the offer, including compensation, are determined by the Department Chair.

This department will discuss potential appointment of a candidate requiring sponsorship for permanent residence or nonimmigrant work-authorized status with the Office of International Affairs. An [MOU](#) must be signed by faculty eligible for tenured positions who are not U.S. citizens or nationals, permanent residents, asylees, or refugees.

2. Clinical Faculty

Searches for clinical faculty generally proceed identically as for tenure-track faculty, with the exception that the candidate is not required to give a presentation. Individuals with a clear commitment to service and teaching should be selected. The composition of the search committees shall be comparable to those for tenure-track faculty. A national search is required to ensure a diverse pool of highly qualified candidates for all clinical faculty positions. As above, faculty appointed to the clinical faculty should evidence a career consistent with the values of the college and department and aligned with its cultures.

3. Research Faculty

Searches for research faculty generally proceed identically as for tenure-track faculty, with the exception that during the interview the candidate is not asked to teach a class. As for candidates for appointment to the tenure-track faculty, it is recommended that research faculty candidates make a presentation to

learners and faculty regarding their scholarship. Individuals with a clear and focused commitment to research, publication and grantsmanship should be selected. Prior evidence of the commitments is strongly encouraged. Interest in teaching and service are secondary considerations. A national search is required to ensure a diverse pool of highly qualified candidates for all research faculty positions. As above, faculty appointed to this track should evidence a career consistent with the values of the college and aligned with its cultures. The composition of the search committees shall be comparable to those for Tenure-Track faculty.

4. Track and TIU Transfers

Tenure-track faculty may transfer to the clinical or research faculty if appropriate circumstances exist. Tenure or eligibility for tenure is lost upon transfer, and transfers must be approved by the Department Chair, the College Dean, and the Executive Vice President and Provost.

Transfers should be considered the exception rather than the norm and are permitted only under the strict guidelines detailed in the paragraphs below, per University Rules [3335-7-09](#) and [3335-7-10](#). Furthermore, transfer of an individual to a faculty title with more limited expectations for scholarship, may not be used as a mechanism for retaining underperforming faculty members. An engaged, committed, productive and diverse faculty should be the ultimate goal of all appointments.

Transfer: Tenure-Track to Clinical Faculty

If faculty members' activities become more aligned with the criteria for appointment to the Clinical Faculty, they may request a transfer. The request for transfer must be initiated by the faculty member in writing and must state clearly how the individual's career goals and activities have changed. A transfer request must be approved by the Department Chair, Dean, and Executive Vice President and Provost. The first appointment to the clinical faculty is probationary; and tenure, or the possibility thereof, is revoked. The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities.

Transfer: Tenure-Track to Research Faculty

If faculty members wish to engage exclusively in research, without the multiple demands required of the Tenure-Track, they may request a transfer. The request for transfer must be initiated by the faculty member in writing and must state clearly how the individual's career goals and activities have changed. A transfer request must be approved by the Department Chair, Dean, and Executive Vice President and Provost. The first appointment to the research faculty is probationary; and tenure, or the possibility thereof, is revoked. The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities.

Transfer: Clinical Faculty or Research Faculty to Tenure-Track

Transfer from the Clinical Faculty or Research Faculty to the Tenure-Track is not permitted, but Clinical Faculty and Research faculty are eligible to apply for Tenure-Track positions here at OSU through a competitive national search. The new letter of offer must outline a new set of expectations for the faculty member aligned with the new responsibilities.

Transfer: Tenure Initiating Unit (TIU Transfer)

Following consultation with TIU chairs and college dean(s), a faculty member may voluntarily move from one TIU to another upon approval of a simple majority of eligible faculty in the receiving TIU (e.g.

if an associate professor-clinical is transferring, the eligible faculty are all tenured associate professors and professors and all non-probationary associate professors-clinical and professors-clinical).

Approval of the transfer by the Office of Academic Affairs is dependent on the establishment of mutually agreed upon arrangements between the administrators of the affected TIUs, including the TIU chairs, college dean(s), and the faculty member. An MOU signed by all parties, including the Office of Academic Affairs, must describe in detail the arrangements of the transfer. Administrative approval will be dependent on whether satisfactory fiscal arrangements for the change have been made. Since normally the transferring faculty member will fill an existing vacancy in the receiving unit, the MOU will describe the resources supporting the position, including salary, provided by the receiving unit.

The Office of Academic Affairs can provide guidance to non-tenure-track faculty about the process for transferring from one TIU to another.

5. Associated Faculty

The appointment of compensated associated faculty members follows a formal search following the [SHIFT](#) Framework, which includes a job posting in [Workday](#) (see Section IV.B above) and candidate interviews. The appointment is then decided by the Department Chair based on recommendation from the search committee. The reappointment of all compensated associated faculty is decided by the Department Chair in consultation with the appropriate Vice Chair.

Compensated associated appointments are generally made for a period of one to three years, unless a shorter or longer period is appropriate to the circumstances.

Appointments to an unpaid associated faculty position require no formal search process. Appointment and reappointment of uncompensated adjunct or visiting faculty may be proposed by any faculty member in the department and are decided by the department chair in consultation with the AP&T Committee. Visiting appointments may be made for one term of up to three years or on an annual basis for up to three years.

Lecturer and senior lecturer appointments are made on an annual basis and rarely semester by semester. After the initial appointment, and if the department's curricular needs warrant it, a multiple year appointment may be offered.

All associated appointments expire at the end of the appointment term and must be formally renewed to be continued.

6. Joint Appointments.

This department may propose a joint appointment for a faculty member from another OSU TIU as described in Section IV.A.7. The potential for a joint appointment is typically evaluated during the recruitment process and, as such, is subject to all criteria outlined above for each faculty category.

Approval of the joint appointment by the Office of Academic Affairs is dependent on establishing a mutually agreed-upon arrangement between the TIU heads, college dean(s), and the faculty member. An [MOU](#) (see [Faculty Appointments Policy](#), Section 1.B) signed by all parties, including the Office of Academic Affairs, must describe in detail the arrangements of the joint appointment. Administrative approval will be dependent on whether satisfactory fiscal arrangements have been made.

7. Courtesy Appointments for Faculty

Any department faculty member may propose a 0% FTE (courtesy) appointment for a tenure-track, clinical, or research faculty member from another Ohio State tenure-initiating unit. Courtesy appointments (0% FTE) for faculty with appointments in other departments should be suggested only when criteria described in section IV have been clearly met. These appointments will not require a formalized search process and should be made only upon recommendation of the division chief (if applicable) with the approval of the AP&T Committee and the Department Chair. The department chair reviews all courtesy appointments every three years to determine whether they continue to be justified and takes recommendations for nonrenewal before the faculty for a vote at a regular meeting.

V. Annual Performance and Merit Review Procedures

The department follows the requirements for the annual performance and merit review as set forth in the [Policy on Faculty Annual Review and Reappointment](#), which stipulates that such reviews must include a scheduled opportunity for a face-to-face meeting for all probationary faculty, an opportunity for a face-to-face meeting for all other compensated faculty members, as well as a written assessment. According to the policy, the purposes of the review are to:

- Assist faculty in improving professional productivity through candid and constructive feedback and through the establishment of professional development plans;
- Establish the goals against which a faculty member's performance will be assessed in the foreseeable future; and
- Document faculty performance in the achievement of stated goals in order to determine salary increases and other resource allocations, progress toward promotion, and, in the event of poor performance, the need for remedial steps.

The department chair may designate the responsibility for annual performance and merit reviews to appropriate unit administrators. The designee must provide a written assessment to the department chair. However, unless the Office of Academic Affairs has granted an exception to a large unit, the Department Chair still must schedule a face-to-face meeting with all probationary faculty as part of the review. An opportunity for a face-to-face meeting with the department chair or the chair's designee must be provided to all tenured and non-probationary faculty.

The only exception to this guideline is that Courtesy appointments do not require formal annual review, but continuation of the appointment should reflect ongoing academic involvement.

In all cases, accountability for the annual review process resides with the department chair.

- Depending on a faculty member's appointment type, the annual performance and merit review is based on expected performance in teaching, research, and/or service as set forth in the department's policy on Faculty Duties, Responsibilities, and Workload; on any additional assignments and goals specific to the individual; and on progress toward promotion where relevant.
- The review of faculty with budgeted joint appointments must include input from the joint appointment TIU head for every annual evaluation cycle. The input should be in the form of a narrative commenting on faculty duties, responsibilities, and workload; on any additional assignments; and on goals specific to the individual in the joint unit.
- Meritorious performance in teaching, scholarship, and service is assessed in accordance with the same criteria that form the basis for promotion decisions.

- Annual performance reviews should outline a projected timeline for promotion and tenure reviews.
- Per Faculty Rule [3335-3-35](#), department chairs are required to include a reminder in annual review letters that all faculty have the right (per Faculty Rule [3335-5-04](#)) to view their primary personnel file and to provide written comment on any material therein for inclusion in the file.

A. Documentation

For their annual performance and merit review, faculty members must submit the following documents to the Department chair no later than August 1.

- Annual Evaluation Form, which will be made available to all faculty in an accessible place (all faculty);
- updated CV, which will be made available to all faculty in an accessible place (all faculty)

Under no circumstances should faculty solicit evaluations from any party for purposes of the annual performance and merit review, as such solicitation places its recipient in an awkward position and produces a result that is unlikely to be candid.

B. Probationary Tenure-Track Faculty

As part of the annual review process, the faculty member's completed file will be reviewed by the Chair or their designee Vice-Chair or Division Chief. It will be evaluated to determine if the faculty member has met or exceeded the minimal standards of academic performance for the Department of Surgery, as outlined in the Faculty Workload Guidelines (available in the Department of Surgery [Pattern of Administration](#)). The Chair, designee Vice-Chair or designee Division Chief will provide a written appraisal of the faculty member's performance which directly addresses the quality and amount of achievement in each of the categories of information in the file. This evaluation will define strengths and weaknesses of faculty member performance, and it will provide recommendations for the ensuing year. Progress toward recommendations from the previous year should be discussed. A final statement in the annual review letter should provide an overall evaluation of the faculty member's performance, describe the faculty member's suitability for their chosen academic faculty and potential for future promotion/tenure, and make a recommendation regarding reappointment for the following academic year. If, during an annual review process, it becomes apparent that the candidate could stand for promotion consideration, the candidate will be informed of this recommendation by the AP&T Committee or the Department Chair. The candidate may then initiate effort to seek promotion if desired. The statement and recommendations will be presented to the faculty member for review, and a formal, face-to-face meeting will be scheduled for discussion of the review.

If the department chair recommends renewal of the appointment, this recommendation is final. The chair's annual review letter to the faculty member renews the probationary appointment for another year and includes content on future plans and goals. The faculty member may provide written comments on the review. The department chair's letter (along with the faculty member's comments, if received) is forwarded to the dean of the college. In addition, the annual review letter becomes part of the cumulative dossier for promotion and tenure (along with the faculty member's comments, if provided).

If the department chair recommends nonrenewal, the Fourth-Year Review process (per Faculty Rule [3335-6-03](#)) is invoked. Following completion of the comments process, the complete dossier

is forwarded to the college for review and the dean makes the final decision on renewal or nonrenewal of the probationary appointment.

1. Fourth-Year Review

Each faculty member in the fourth year of probationary service must undergo a more comprehensive review utilizing the same process as the review for tenure and promotion, with three exceptions: external letters of evaluation will not be solicited, review by the College of Medicine Promotion and Tenure Committee is not mandatory, and the dean (not the department chair) makes the final decision regarding renewal or nonrenewal of the probationary appointment. The objective of this review will be to determine if adequate progress towards the achievement of promotion and tenure is being made by the candidate.

External evaluations are solicited only when either the department chair or the eligible faculty determine that they are necessary to conduct the Fourth-Year Review. This may occur when the candidate's scholarship is in an emergent field, is interdisciplinary, or the eligible faculty do not feel otherwise capable of evaluating the scholarship without outside input.

The eligible faculty conducts a review of the candidate. On completion of the review, the eligible faculty votes on whether to renew the probationary appointment.

The eligible faculty forwards a record of the vote and a written performance review to the department chair, who conducts an independent assessment of performance and prepares a written evaluation that includes a recommendation on whether to renew the probationary appointment. At the conclusion of the department review, the formal comments process (per Faculty Rule [3335-6-04](#)) is followed and the case is forwarded to the college for review, regardless of whether the department chair recommends renewal or nonrenewal.

If either the Department Chair or the College Dean recommends nonrenewal of a faculty member's probationary contract, the case will be referred to the college's Promotion and Tenure Committee, which will review the case, vote, and make a recommendation to the dean. The dean makes the final decision regarding the renewal or nonrenewal of the probationary appointment.

In all cases, the dean or their designee independently evaluates all faculty in their fourth year of probationary appointment and will provide the department chair with a written evaluation of the candidate's progress.

2. Eighth Year Review

Faculty members with an 11-year probationary period who have not achieved promotion and tenure by the eighth year will undergo a formal eighth-year review, utilizing the same principles and procedures as the fourth-year review.

3. Extension of the Tenure Clock

Faculty Rule [3335-6-03 \(D\)](#) sets forth the conditions under which a probationary tenure-track faculty member may extend the probationary period. Faculty Rule [3335-6-03 \(E\)](#) does likewise for reducing the probationary period. A faculty member remains on duty regardless of extensions or reductions to the probationary period, and annual reviews are conducted in every probationary year regardless of time extended or reduced. Approved extensions or reductions do not limit the department's right to recommend nonrenewal of an appointment during an annual review.

C. Annual Review Procedures: Tenured Faculty

The Department Chair designates the responsibility for the annual reviews of associate professors to Division Directors. Each Division Director conducts an independent assessment; meets with the faculty member to discuss their performance and future plans and goals; and prepares a written evaluation on these topics. The faculty member may provide written comments on the review. This written performance review is then forwarded to the Department Chair along with comments on the faculty member's progress toward promotion. The Department Chair has full accountability and signs off on the annual review process. Each faculty member meets with the Department Chair about their review.

Professors are reviewed annually by the Department Chair or their Division Director, who meet with the faculty member to discuss their performance and future plans and goals. The annual review of professors is based on their having achieved sustained excellence and ongoing outcomes in the discovery and dissemination of new knowledge relevant to the mission of the department, as demonstrated by ongoing national and international recognition of their scholarship; ongoing excellence in teaching, mentoring students or junior faculty, and ongoing outstanding service to the department, the university, the community and their profession, including their support for the mentoring and professional development of assistant and associate professors. Professors are expected to be role models in their academic work, interaction with colleagues and students, and in the recruitment and retention of junior colleagues. As the highest-ranking members of the faculty, the expectations for academic leadership and mentoring for professors exceed those for all other members of the faculty.

If a professor has an administrative role, the impact of that role and other assignments will be considered in the annual review.

The Department Chair or designee prepares a written evaluation of performance against these expectations. The faculty member may provide written comments on the review.

D. Annual Review and Reappointment Procedures: Clinical Faculty

The annual performance and merit review process for clinical probationary and non-probationary faculty is identical to that for tenure track probationary and tenured faculty respectively, except that non-probationary clinical faculty may participate in the review of clinical faculty of lower rank. Accountability for the annual review process resides with the Chair.

In the penultimate year of a clinical faculty member's appointment, the department chair must determine whether the position held by the faculty member will continue. A formal performance review is necessary to determine whether the faculty member will be offered reappointment. If the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule [3335-6-08](#) must be observed.

There is no presumption of renewal of appointment.

E. Annual Review and Reappointment Procedures: Research Faculty

The annual performance and merit review process for research faculty who are probationary and non-probationary is identical to that for tenure track probationary and tenured faculty respectively, except that non-probationary research faculty may participate in the review of research faculty of lower rank. Accountability for the annual review process resides with the Chair.

In the penultimate year of a research faculty member's appointment, a formal performance review is

necessary to determine whether the faculty member will be offered reappointment. If the position will not continue, the faculty member is informed that the final contract year will be a terminal year of employment. The standards of notice set forth in Faculty Rule [3335-6-08](#) must be observed.

There is no presumption of renewal of appointment. For faculty in one- and two-year appointment terms, the department will ensure these faculty receive the appropriate review and notification according to their term.

F. Annual Review and Reappointment Procedures: Associated Faculty

Compensated associated faculty members in their initial appointment must be reviewed before reappointment. The Department Chair, or designee, prepares a written evaluation and meets with the faculty member to discuss their performance, future plans, and goals. The Department Chair's recommendation for renewal of the appointment is final. If the recommendation is to renew, the Department Chair may extend a multiple-year appointment.

Compensated associated faculty members on a multiple-year appointment (or hired annually for multiple years) are reviewed annually by the Department Chair or designee. The Department Chair or designee prepares a written evaluation and meets with the faculty member to discuss their performance, future plans, and goals. No later than October 15 of the final year of the appointment, the department chair will decide whether or not to reappoint. The Department Chair's recommendation on reappointment is final.

When considering the reappointment of uncompensated associated faculty members, at a minimum, their contribution to the department must be assessed on an annual basis and documented for the individual's personnel file. This may take the form of self-evaluation. Neither a formal written review nor a meeting is required.

G. Salary Recommendations

The Chair will make annual salary recommendations to the dean, who may modify them. The recommendations are based on the current annual performance and merit review as well as on the performance and merit reviews of the preceding 24 months. For clinicians, salary recommendations are under the auspices of the College of Medicine Compensation Plan.

In formulating recommendations, the department chair consults with the Department Executive Committee. The department chair should proactively engage in an annual equity audit of faculty salaries to ensure that they are commensurate both within the department and across the field or fields represented in the department. Salary increases should be based upon these considerations.

It is the expectation of the College that merit salary increases and other rewards made by the chair will be made consistent with this APT document and other relevant policies, procedures, practices, and standards established by: (1) the College, (2) the Faculty Rules, (3) the Office of Academic Affairs, and (4) the Office of Human Resources.

Except when the university dictates any type of across-the-board salary increase, all funds for annual salary increases are directed toward rewarding meritorious performance and assuring, to the extent possible given financial constraints, that salaries reflect the market and are internally equitable by the department and subject to the Faculty Group Practice (FGP) Compensation plan as appropriate.

Meritorious performance in teaching, scholarship, and service are assessed in accordance with the same

criteria that form the basis for promotion decisions. The time frame for assessing performance will be the past 24 months, with attention to patterns of increasing or declining productivity. Faculty with high-quality performance and a pattern of consistent professional growth will be viewed positively. Faculty members whose performance is unsatisfactory in one or more core areas as defined by our department are likely to receive minimal or no salary increases.

Faculty members who wish to discuss dissatisfaction with their salary increase with the department chair should be prepared to explain how their salary (rather than the increase) is inappropriately low, since increases are solely a means to the end of an optimal distribution of salaries.

Faculty who fail to submit the required documentation for an annual review at the required time will receive no salary increase in the year for which documentation was not provided, except in extenuating circumstances, and may not expect to recoup the foregone raise at a later time.

VI. Promotion and Tenure and Promotion Reviews

Faculty Rule [3335-6-02](#) provides the following context for promotion and tenure and promotion reviews:

In evaluating the candidate's qualifications in teaching, scholarship, and service, reasonable flexibility shall be exercised, balancing, where the case requires, heavier commitments and responsibilities in one area against lighter commitments and responsibilities in another. In addition, as the university enters new fields of endeavor, including interdisciplinary endeavors, and places new emphases on its continuing activities, instances will arise in which the proper work of faculty members may depart from established academic patterns. In such cases care must be taken to apply the criteria with sufficient flexibility. In all instances superior intellectual attainment, in accordance with the criteria set forth in these rules, is an essential qualification for promotion to tenured positions. Clearly, insistence upon this standard for continuing members of the faculty is necessary for maintenance and enhancement of the quality of the university as an institution dedicated to the discovery and transmission of knowledge.

A. Criteria and Evidence that Support Promotion

Although citizenship and collegiality cannot be used as an independent criterion for promotion or tenure, these positive attributes characterize the ability of a faculty member to effectively contribute to exemplary scholarship, teaching and service.

A commitment to these values and principles is demonstrated, for example, by participation in faculty governance and community outreach; activities related to the University's [Shared Values](#); adherence to principles of the responsible conduct of research; constructive conduct and ethical behavior during the discharge of responsibilities and authority; and the exercise of rights and privileges consistent with the [American Association of University Professors' Statement on Professional Ethics](#).

This department is committed to assessing the practice of these values and principles as part of all performance evaluations. Except when the university dictates any type of across-the-board salary increase, all funds for annual salary increases will be directed toward rewarding meritorious performance and the active promotion of an enriching working and learning environment through collegiality, civility, and openness to diverse ideas and opinions.

- **Defining Impact for Promotion and Tenure**

Fundamental to promotion in all faculty appointment types (e.g., clinical, research, tenure track) are the totality of the impact of a candidate's body of work and the candidate's upward trajectory over time.

Impact refers to the direct effect of one's work on science, education, medicine, healthcare, and/or community. The clinician educator and clinician scholar pathways, research faculty and tenure-track emphasize scholarly achievements, but the nature of scholarly activity, level of engagement, and measures of impact are specific to faculty appointment types and pathways within those appointment types. Community engagement will be carefully considered and refers to institutional, local, national, and international community contributions (particularly to DEI) that are closely aligned with and complementary to a candidate's scholarly work.

The elements below highlight examples of how **impact** can be demonstrated. This is not intended to be a checklist of required contributions needed to achieve promotion. The biographical narrative should encapsulate the candidate's own description of demonstrated impact for the achievements listed.

- **Scholarship/Creative Works/Research**

Fundamental to promotion in the clinician educator and clinician scholar pathways, research faculty and tenure-track is evidence of continuous scholarly productivity and an evaluation of the totality of the impact of a candidate's body of work. Any area of research consistent with the mission of the department and the College of Medicine (COM) is acceptable as long as impact and an upward trajectory of a candidate's achievements over time can be demonstrated. The nature of scholarly activity may also differ between faculty appointment types and pathways. For the clinician educator pathway, for example, scholarly activity typically focuses on the scholarship of education, including but not limited to innovative teaching and educational practices, delivery methods, and/or interventions, instructional design, and curriculum development. For the clinician scholar pathway, scholarly activity typically reflects translational sciences, clinical research, and/or health services research. For all faculty appointment types and pathways, demonstration of impact entails providing evidence of successful translation of new knowledge into new approaches, techniques, devices, programs, etc. and may include:

Peer-reviewed papers assessed by:

- Citations of published peer-reviewed work
- Contribution to published peer-reviewed work
- Authorship of published peer-reviewed work
- Impact/quality of journals in which peer-reviewed work is published
- Grant funding from federal, industry, foundation and private sources
- Academic awards
- Participation in grant review study sections, organizing committees, etc.
- Editorial leadership roles
- External lectures and invited talks
- Patents and commercialization aligned with primary research program
- Identifiable contributions to collaborative research /team science

- **Education**

Promotion in the clinical faculty and tenure-track is in part a recognition of the totality of the impact of a candidate's educational activities as measured by high quality engagement and sustained excellence. Promotion to professor requires ongoing engagement and demonstrated excellence in education.

High quality engagement

- Teaching in any of the defined categories of education within and outside of the department
- Leadership roles in teaching or educational programs
- Innovation or novel application in local classroom teaching methods

- Development of new educational products such as curriculum, assessment tools or programs, policy statements, technologies such as simulation, etc.
- Development of new Masters or Doctoral degree programs.
- Leading or substantive participation in education-related committees
- Involvement in local mentoring programs, particularly outreach programs related to diversity and inclusion, and those that promote health equity
- Participation in CME, research, and inter-professional meetings
- Participation in the development of scholarly products related to education

Excellence in education

- Internal and external evaluations of teaching
- Outcomes of successful mentorship such as scholarly products, regional and national presentations by trainees/mentees, trainee/mentee career trajectory, etc.
- Course or program evaluations that reflect educational leadership roles
- Awards for teaching, mentoring, and other educational contributions
- Invited lectures to disseminate new knowledge related to successful education programs, interventions, and curricula that have been generated by the candidate
- Grant funding or scholarship specifically related to education activities
- National leadership roles in education/training committees and professional societies.

- **Service**

For faculty who have clinical responsibilities, impact may be demonstrated as a result of:

- Contribution to the development of innovative clinical approaches to diagnosis, treatment or prevention of disease, applications of technologies and/or models of care delivery that influence care (e.g., community-based programs, clinical care models, practice guidelines, innovative application of existing or new technology, etc.)
- Service on committees in the candidate's area of clinical expertise with contributions to development of practice guidelines or policies for health equity, clinical management, evaluating clinical programs, etc.
- Leadership roles in professional organizations, courses, or programs related to clinical expertise
- Invitations to share expertise through invited talks, book chapters, and clinical reviews
- Awards for contributions and/or innovation in the area of clinical expertise
- Regional, national, and international patient referrals
- Engagement/collaboration in clinical trials and clinical studies
- Clinical awards (e.g., Best Doctors, OSU Mazzaferri-Ellison Society of Master Clinicians, etc.).

Additionally, consideration should be given to the demonstration of impact via non-traditional methodologies including social media portfolios such as blog/vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics and consider incorporating the use of Altmetrics to assess the impact of the candidate's work utilizing traditional and social media platforms (e.g. Digital scholarship)

Resources for non-traditional evidence of impact/reputation:

Information on creating impact statements with Altmetric data may be found here:

Cabrera D, Vartabedian BS, Spinner RJ, Jordan BL, Aase LA, Timimi FK. *More Than Likes and Tweets: Creating Social Media Portfolios for Academic Promotion and Tenure*. J Grad Med Educ. 2017 Aug;9(4):421-425. doi: 10.4300/JGME-D-17-00171.1. PMID: 28824752; PMCID: PMC5559234.

Husain A, Repanshek Z, Singh M, Ankel F, Beck-Esmay J, Cabrera D, Chan TM, Cooney R, Gisondi M, Gottlieb M, Khadpe J, Repanshek J, Mason J, Papanagnou D, Riddell J, Trueger NS, Zaver F, Brumfield E. *Consensus Guidelines for Digital Scholarship in Academic Promotion*. West J Emerg Med. 2020 Jul 8;21(4):883-891. doi: 10.5811/westjem.2020.4.46441. PMID: 32726260; PMCID: PMC7390542

1. Promotion to Associate Professor with Tenure

Faculty Rule [3335-6-02](#) provides the following general criteria for promotion to associate professor with tenure:

The awarding of tenure and promotion to the rank of associate professor must be based on convincing evidence that the faculty member has achieved excellence as a teacher, as a scholar, and as one who provides effective service; and can be expected to continue a program of high-quality teaching, scholarship, and service relevant to the mission of the academic unit(s) to which the faculty member is assigned and to the university.

Tenure is not awarded below the rank of associate professor at Ohio State University.

The award of tenure is an acknowledgment of excellence and future potential for preeminence. It is therefore essential to evaluate and judge the probability that faculty, once tenured, will continue to develop professionally and contribute to the department's academic mission at a high level for the duration of their time at the university.

Every candidate is held to a high standard of excellence in all aspects of performance. Above all, candidates are held to a very high standard of excellence in the areas central to their responsibilities. For example, if a candidate's primary teaching role is and will continue to be undergraduate teaching, then excellence in undergraduate teaching is required. A mediocre performance in this area would not be adequately counterbalanced by excellent performance in another aspect of teaching that is a significantly smaller part of the individual's responsibilities.

Excellence in teaching, scholarship, and service is moreover defined to include professional ethical conduct in each area of responsibility, consistent with the [American Association of University Professors' Statement on Professional Ethics](#).

The tables that follow list the criteria and types of evidence the department has identified that support promotion to associate professor with tenure. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

TEACHING	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
A strong and consistent record of effective teaching and mentoring	<ul style="list-style-type: none"> Positive evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers. (<i>required</i>). The dossier must clearly document the faculty member's contribution and the impact of these efforts. Evaluations and peer feedback based on presentations at other academic institutions, presentations or tutorials at

	<p>scientific conferences or meetings, presentations at other medical centers or hospitals, etc.</p> <ul style="list-style-type: none"> • Teaching awards and other honors • Documented impact on teaching and training programs, including curricular innovation, new teaching modalities such as web-based design, mobile application, virtual teaching, methods of evaluating teaching, program or course development, publications on teaching, and societal leadership in education. • Development of impactful, innovative programs that integrate teaching, research and patient care are valued. • Programs that improve cultural competence or access to teaching for underserved populations and are inclusive of learners from diverse backgrounds. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Active participation as a mentor in training grants such as NIH T32 or K-awards is highly valued.
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SCHOLARSHIP/CREATIVE WORKS/RESEARCH	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Discovery and dissemination of new knowledge	<ul style="list-style-type: none"> • Laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, public health and community research, implementation science, and diffusion research, among many potential others. • Substantial body of original knowledge that is published in high-quality, peer-reviewed journals or proceedings.
A sustained record of scholarly productivity, reflected in both quantity and quality of publications	<ul style="list-style-type: none"> • 15-25 peer-reviewed publications since appointment as an assistant professor (<i>Required</i>). However, specific metrics in support of excellence may be adjusted within the range of 15-25 peer-reviewed manuscripts based on the overall pattern of the faculty member's responsibilities. The range of publications may be adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical/administrative service and or the norms for rates of publication within their field of research. Overall impact of scholarship is important. • In instances where a faculty member was as Assistant Professor at another institution, the total volume of scholarly work since being appointed as Assistant Professor at that institution will be considered in meeting the requirement above. • High impact and positive trajectory of scholarship, including work showing national impact in the College and University values of inclusivity and DEI. • The pattern of scholarship should include an increasing proportion of publications as first, senior, or corresponding

	<p>author, but importance of other authorship positions as a key/indispensable contributor is to be considered.</p> <ul style="list-style-type: none"> • The number of citations of their publications, and/or citation record may be used to demonstrate impact of work. • Although review articles may form a portion of the publication list (typically less than 30%) and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles • Book chapters or reviews alone or in majority will not be sufficient for promotion. • The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research, the best journal may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors reflects broader interest but does not in and of itself demonstrate the impact of research. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
National recognition and impact for a program of scholarship (<i>required</i>)	<ul style="list-style-type: none"> • Invitations to serve as ad hoc journal reviewer • Invited platform presentations at national/international scientific sessions • Visiting Professorships at peer institutions • Invitations to serve on editorial boards, study sections, and grant review sections • Social media portfolios such as blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics • Achieve national recognition for the impact of a program of scholarship through activities such as invention disclosures, copyrights, patents (equivalent to peer-reviewed manuscripts), revenue-generating licensing agreements (comparable to extramural grants), and materials transfer activities that demonstrate widespread influence. • The above supports the demonstration of national recognition and impact but this list is not comprehensive.
Participation in collaborative, multidisciplinary research or team science (<i>required</i>)	<ul style="list-style-type: none"> • Record of collaborative scholarship with manuscripts on which authorship is first, senior, or corresponding. • Middle authorship that is uniquely contributory, clear, and well-documented may be considered.
Innovation and entrepreneurship	<ul style="list-style-type: none"> • Entrepreneurship with patents and licenses of invention disclosures, software development, and materials technology commercialization, formation of startup companies, and licensing and option agreements. • Designing and/or supervising the construction of creative products (e.g., new technologies, devices, software, algorithms) that advance health-related science and healthcare

	<ul style="list-style-type: none"> • Developing and securing intellectual property such as patents, patent disclosures, and licensing of university-developed intellectual property. • Commercializing intellectual property through innovation and entrepreneurial activities such as entity creation, formation of startup companies and licensing and option agreements. • Engaging in a reciprocal partnership with the community, involving mutually beneficial exchanges of knowledge and the creation, delivery and assessment of timely, unbiased, educational materials and programs that address relevant, critical, and emerging issues. • Generally, invention disclosures and copyrights will be considered equivalent to a professional meeting abstract or conference proceeding, patents should be considered equivalent to an original peer-reviewed manuscript, licensing activities that generate revenue should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or international) recognition and impact. • Entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.
<p>Evidence of sustained or multiple external peer reviewed grant support, national foundation awards, or large-scale industry collaborations (<i>required</i>)</p>	<p>WITHOUT Significant Clinical Responsibilities</p> <ul style="list-style-type: none"> • Must have obtained NIH (or comparable) funding as a principal investigator (PI) or Multiple Principal Investigator (MPI) on an R01, P01, U54, or K award or other comparable funding, including but not limited to NSF, DoD, USDA, AHRQ, DARPA, RWJF, Commonwealth Fund, or Kaiser Family Foundation. • <i>Required</i>- Demonstrated sustainability of their research program by renewal of the award and/or by garnering a second distinct nationally competitive, peer-reviewed grant. The latter may include support from prominent national charitable foundations (e.g., American Heart Association, American Lung Association, American Diabetes Association, American Cancer Society, the Lupus Foundation, the March of Dimes, etc.), a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation, a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation. • Serving as the site-principal investigator for a multi-center trial or principal investigator for a project included as part of a multi-project grant <u>does not</u> satisfy the expectation for extramural funding on the tenure track. • Creation of patents that generate licensing income or spinoff companies would meet the equivalent criteria of extramural funding.

	<ul style="list-style-type: none"> • In some circumstances, (e.g. specific techniques) faculty member's expertise may not justify PI-level status. In such cases serving as a co-investigator on multiple grants will satisfy the requirement for extramural funding. • Inclusion of diversity supplements when assessing funded projects/ protocols and their impact in supporting the University's mission of diversity, equity, and inclusion will be considered. <p>WITH Significant Clinical Responsibilities</p> <ul style="list-style-type: none"> • Expected to obtain extramural NIH or comparable funding as defined in the previous paragraph as a PI, or MPI to support their research program prior to their mandatory tenure review. Competitive, peer-reviewed career development award funding, such as an NIH K award or national foundation career development award, is acceptable. • Depending on the extent of clinical responsibilities, sustained funding through pharmaceutical or instrumentation companies for investigator-initiated proposals is acceptable. • Serving as the site-principal investigator for a multi-center trial <u>does not</u> satisfy the expectation for extramural funding on the tenure track. • Creation of patents that generate licensing income or spinoff companies would meet the equivalent criteria of extramural funding. • In rare circumstances (specific technique), a faculty member's expertise may not justify principal investigator-level status. In such cases serving as a co-investigator on <u>multiple</u> grants will satisfy the requirement for extramural funding. • Inclusion of diversity supplements when assessing funded projects/ protocols and their impact in supporting the University's mission of diversity, equity, and inclusion will be considered.
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SERVICE	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Administrative service to the department, COM, or University	<ul style="list-style-type: none"> • Appointment to, election to, or leadership of departmental, College of Medicine, Hospital, and/or University committees or working groups • Service on departmental or COM UME/GME committees • Participation on the Institutional Review Board or Intramural Research Review Committee
Excellent patient care (if applicable)	<ul style="list-style-type: none"> • Clinical program development or enhancement

	<ul style="list-style-type: none"> • Innovative programs that advance the mission of the University or Hospital, such as the creation and sustenance of a program to deliver healthcare to the community • Design and implementation of a novel program to reduce race, gender-based, or other discrimination, or to improve health equity.
Professional service to the faculty member's discipline	<ul style="list-style-type: none"> • Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews. • Serving on editorial boards or editorships. • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to local and national professional societies, service as an advocate for discipline-specific clinical care, education, and/or research and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Surgery and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and nonprofit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. • Candidates can consider demonstrating impact of their work by utilizing social and traditional media (such as X, Facebook, Instagram, and Threads).

2. Promotion to Associate Professor in Advance of Tenure

Promotion to associate professor in advance of tenure is only available to faculty members with clinical responsibilities who have an 11-year probationary period. Candidates for such promotion will have a level and pattern of achievement that demonstrates that the candidate is making progress toward but has not yet achieved all of the stated criteria for promotion with tenure. In the Department of Surgery, this title will be restricted to physician (M.D., D.O., MBBS, etc.) candidates. Specifically, the candidate should demonstrate evidence of emerging national recognition.

Faculty members who are promoted without the award of tenure must be considered for tenure no later than the mandatory review date or six years following promotion, whichever comes first.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to associate professor in advance of tenure. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

TEACHING	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
A strong and consistent record of effective teaching and mentoring	<ul style="list-style-type: none"> • Positive evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers. (<i>required</i>) The dossier must clearly document the faculty member's contribution and the impact of these efforts. • Evaluations and peer feedback based on presentations at other academic institutions, presentations or tutorials at scientific conferences or meetings, presentations at other medical centers or hospitals, and the like. • Teaching awards and other honors • Documented impact on teaching and training programs, including curricular innovation, new teaching modalities such as web-based design, mobile application, virtual teaching, methods of evaluating teaching, program or course development, publications on teaching, and societal leadership in education. • Development of impactful, innovative programs that integrate teaching, research and patient care are valued. • Programs that improve cultural competence or access to teaching for underserved populations and are inclusive of learners from diverse backgrounds. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Active participation as a mentor in training grants such as NIH T32 or K-awards is highly valued.

SCHOLARSHIP/CREATIVE WORKS/RESEARCH	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Discovery and dissemination of new knowledge	<ul style="list-style-type: none"> • Laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, public health and community research, implementation science, and diffusion research, among many potential others. • Substantial body of original knowledge that is published in high-quality, peer-reviewed journals or proceedings
Substantial progress toward the establishment of a thematic program of scholarship	<ul style="list-style-type: none"> • 10-15 peer-reviewed publications since appointment as an assistant professor (<i>required</i>). The range of publications may be adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical/administrative service and or the norms for rates of publication within their field of research. Overall impact of scholarship is important. • In instances where a faculty member was as Assistant Professor at another institution, the total volume of scholarly work since being appointed as Assistant Professor

	<p>at that institution will be considered in meeting the requirement above.</p> <ul style="list-style-type: none"> • High impact and positive trajectory of scholarship, including work showing national impact in the College and University values of inclusivity and DEI. • The pattern of scholarship should include an increasing proportion of publications as first, senior, or corresponding author, but importance of other authorship positions as a key/indispensable contributor is to be considered. • The number of citations of their publications, and/or citation record may be used to demonstrate impact of work. • Although review articles may form a portion of the publication list (typically less than 30%) and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles • Book chapters or reviews alone or in majority will not be sufficient for promotion. • The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research, the best journal may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors reflects broader interest but does not in and of itself demonstrate the impact of research. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
Emerging national recognition (<i>required</i>)	<ul style="list-style-type: none"> • Invitations to serve as ad hoc journal reviewer • Invited platform presentations at national/international scientific sessions • Invited lectures outside of the University • Visiting Professorships at peer institutions • Invitations to serve on editorial boards, study sections, and grant review sections • Social media portfolios such as blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics • The above supports the demonstration of national recognition and impact but this list is not comprehensive.
Participation in collaborative, multidisciplinary research or team science (<i>required</i>)	<ul style="list-style-type: none"> • Record of collaborative scholarship with manuscripts on which authorship is first, senior, or corresponding. Middle authorship that is uniquely contributory, clear, and well-documented may be considered. • Participation as co- principal investigator on nationally funded projects, principal investigator of components of NIH U or P grants, and participation as an essential core service provider on multiple externally funded grants in which the contribution of the faculty member is clearly evident.

Innovation and entrepreneurship	<ul style="list-style-type: none"> • Entrepreneurship with patents and licenses of invention disclosures, software development, and materials technology commercialization, formation of startup companies, and licensing and option agreements. • Designing and/or supervising the construction of creative products (e.g., new technologies, devices, software, algorithms) that advance health-related science and healthcare • Developing and securing intellectual property such as patents, patent disclosures and licensing of university-developed intellectual property. • Commercializing intellectual property through innovation and entrepreneurial activities such as entity creation, formation of startup companies, and licensing and option agreements. • Engaging in reciprocal partnership with the community, involving mutually beneficial exchanges of knowledge and the creation, delivery, and assessment of timely, unbiased, educational materials and programs that address relevant, critical and emerging issues. • Generally, invention disclosures and copyrights will be considered equivalent to a professional meeting abstract or conference proceeding, patents should be considered equivalent to an original peer-reviewed manuscript, licensing activities that generate revenue should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or international) recognition and impact. • Entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.
Promising trajectory in extramural funding	<ul style="list-style-type: none"> • Serving as a principal investigator on an R21, R03, K award or an equivalent grant, co-investigator status on an R01 NIH grant award • Depending on the extent of clinical responsibilities, sustained funding through pharmaceutical or instrumentation companies for investigator-initiated proposals is acceptable. • Serving as the site-principal investigator for a multi-center trial or principal investigator for a project included as part of a multi-project grant does not satisfy the expectation for extramural funding on the tenure track. • Creation of patents that generate licensing income or spinoff companies would meet the equivalent criteria of extramural funding. • Inclusion of diversity supplements when assessing funded projects/ protocols and their impact in supporting the University's mission of diversity, equity and inclusion will be considered.

SERVICE	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Administrative service to the department, COM, or University	<ul style="list-style-type: none"> • Appointment to, election to, or leadership of departmental, College of Medicine, hospital, and/or University committees or working groups • Service on departmental or COM UME/GME committees • Participation on the Institutional Review Board or Intramural Research Review Committee
Excellent patient care (if applicable)	<ul style="list-style-type: none"> • Clinical program development or enhancement. • Innovative programs that advance the mission of the University or hospital, such as the creation and sustenance of a program to deliver healthcare to the community. • Design and implementation of a novel program to reduce race, gender-based, or other discrimination, or to improve health equity.
Professional service to the faculty member's discipline	<ul style="list-style-type: none"> • Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews. • Serving on editorial boards or editorships. • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to local and national professional societies, service as an advocate for discipline-specific clinical care, education, and/or research and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Surgery and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and nonprofit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. • Candidates can consider demonstrating the impact of their work by utilizing social and traditional media (such as X, Facebook, Instagram, Threads).

3. Promotion to Professor with Tenure

Awarding promotion to the rank of Professor with tenure must be based upon clear and unambiguous evidence that the candidate has a sustained, eminent record of achievement recognized nationally and/or internationally. The general criteria for promotion in scholarship, teaching, and service require more advanced and sustained quantity, quality, and impact than that required for promotion to Associate Professor. Importantly, the standard for external reputation is substantially more rigorous than for promotion to Associate Professor with tenure. This record of excellence must be evident from activities undertaken and accomplishments achieved since being appointed or promoted to the rank of Associate Professor.

Faculty Rule [3335-6-02](#) establishes the following general criteria for promotion to the rank of professor:

Promotion to the rank of professor must be based on convincing evidence that the faculty member has a sustained record of excellence in teaching; has produced a significant body of scholarship that is recognized nationally or internationally; and has demonstrated leadership in service.

The specific criteria in teaching, scholarship, and service for promotion to professor are similar to those for promotion to associate professor with tenure [see charts in Section VI.A.1], with the added expectation of sustained accomplishment and quality of contributions, a record of continuing professional growth, and evidence of established national or international reputation in the field.

When assessing a candidate's national and international reputation in the field, a national and international reputation for the scholarship of teaching may be counted as either teaching or scholarship.

In addition, as further specified by Faculty Rule [3335-6-02](#), assessment is in relation to specific assigned responsibilities with reasonable flexibility being exercised in order to balance, where the case requires, heavier responsibilities and commitment in one area against lighter ones in another. Promotion should reflect the reality that (a) not all faculty members have the same distribution of assignments (b) not all faculty members will be able to contribute excellence equally in all evaluation dimensions; and (c) there is a multi-faceted institutional responsibility that must be achieved by the skills of the faculty collectively. Promotion to professor should be awarded not only to those faculty who have demonstrated impact in their scholarship of research and creative inquiry, teaching and learning, and service but also to those who have exhibited excellence in leadership to make a visible and demonstrable impact upon the mission of the department, college and university.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Professor with tenure. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

TEACHING	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
A strong and consistent record of effective teaching and mentoring	<ul style="list-style-type: none"> Outstanding evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers (<i>required</i>). The dossier must clearly document the faculty member's contribution and the impact of these efforts. Course or workshop leadership and design Training program directorship, teaching awards, and organization of national course and curricula and participation in specialty boards or Residency Review Committees of the Accreditation Council for Graduate Medical Education. Active participation in student or trainee teaching. Active participation as a mentor in training grants such as NIH T32 or K- awards is highly valued but not required. Achievement by direct mentees, including publications, external funding, and invited presentations.

	<ul style="list-style-type: none"> • Programs that improve the cultural competence of or access to teaching for underserved populations • Professional development in the mentoring or teaching of underserved or underrepresented populations and making changes to teaching or mentoring approaches to foster inclusivity • Mentorship of junior faculty is expected (<i>required</i>). It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc coaching. <ul style="list-style-type: none"> ○ Documented mentorship relationships with junior faculty, including mentees' achievements and testimonials about the mentorship's impact. ○ Evidence of the faculty member's influence on junior colleagues' career paths, research opportunities, and professional growth. • Candidates with clinical duties should demonstrate consistent and effective teaching of trainees and practicing clinicians, and leadership in the administration of clinical training programs.
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SCHOLARSHIP/CREATIVE WORKS/RESEARCH	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Discovery and dissemination of new knowledge	<ul style="list-style-type: none"> • Laboratory investigation, development of innovative programs, theoretical insight, innovative interpretation of an existing body of knowledge, clinical science, public health and community research, implementation science, and diffusion research, among many potential others. • Substantial body of original knowledge that is published in high-quality, peer-reviewed journals or proceedings
A sustained record or scholarly productivity, reflected in both quantity and quality of publications (<i>required</i>)	<ul style="list-style-type: none"> • 25-35 peer-reviewed publications since promotion to associate professor (<i>required</i>). <i>However</i>, specific metrics in support of excellence may be adjusted within the range of 15-25 peer-reviewed manuscripts based on the overall pattern of the faculty member's responsibilities. Overall impact of scholarship is important. • The pattern of scholarship should include a substantial proportion of publications as senior or corresponding author, but the importance of other authorship positions as a key/ indispensable contributor is considered. (<i>required</i>) • High impact and continued trajectory in their scholarly productivity. (<i>required</i>) • In instances where a faculty member was an Associate Professor at another institution, the total volume of scholarly work since being appointed as Associate Professor at that institution will be considered in meeting the requirement above. • Number of citations of their publications, the trajectory of the publication and/or citation record

	<ul style="list-style-type: none"> • Although review articles may form a portion of the publication list (typically less than 30%) and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles. • Book chapters or reviews alone or in majority will not be sufficient for promotion. • Work showing international impact in the College and University values of inclusivity and DEI. • The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research, the best journal may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors reflects broader interest but does not in and of itself demonstrate the impact of research. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
National Leadership and/or International Reputation (<i>required</i>)	<ul style="list-style-type: none"> • Election or appointment to a leadership position in a national or international society • Service as a national committee or task force chair, chair of an NIH or other federal review panel, regular membership on an NIH study section, peer recognition or awards for research, editorial boards or editorships of scientific journals, and invited lectures at hospitals or universities outside the country or at meetings of international societies. • Invited platform presentations at national/international scientific sessions. • Visiting Professorships at peer institutions. • Invitations to serve on editorial boards, study sections, and grant review sections. • National/international reputation/impact may also be demonstrated in part through non-traditional metrics (e.g., social media portfolios, Altmetrics scores) [<i>See Defining Impact above</i>]
Participation in collaborative, multidisciplinary research or team science (<i>required</i>)	<ul style="list-style-type: none"> • Record of collaborative scholarship with manuscripts on which authorship is first, senior, or corresponding. Middle authorship that is uniquely contributory, clear, and well-documented may be considered. • Participation as co-principal investigator on nationally funded projects, principal investigator of components of NIH U or P grants, and participation as an essential core service provider on <u>multiple</u> externally- funded grants in which the contribution of the faculty member is clearly evident. (<i>required</i>)
Innovation and entrepreneurship	<ul style="list-style-type: none"> • Entrepreneurship with patents and licenses of invention disclosures, software development, and materials technology commercialization, formation of startup companies, and licensing and option agreements. • Designing and/or supervising the construction of creative products (e.g., new technologies, devices, software,

	<p>algorithms) which advance health-related science and healthcare.</p> <ul style="list-style-type: none"> • Developing and securing intellectual property such as patents, patent disclosures and licensing of university-developed intellectual property. • Commercializing intellectual property through innovation and entrepreneurial activities such as entity creation, formation of startup companies, and licensing and option agreements. • Engaging in reciprocal partnership with the community, involving mutually beneficial exchanges of knowledge and the creation, delivery and assessment of timely, unbiased, educational materials and programs that address relevant, critical, and emerging issues. • Generally, invention disclosures and copyrights will be considered equivalent to a professional meeting abstract or conference proceeding, patents should be considered equivalent to an original peer-reviewed manuscript, licensing activities that generate revenue should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or international) recognition and impact. • Entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.
<p>Evidence of sustained or multiple external peer reviewed grant support, national foundation awards, or large-scale industry collaborations (<i>required</i>)</p>	<p>WITHOUT Significant Clinical Responsibilities</p> <ul style="list-style-type: none"> • Must have obtained NIH (or comparable) funding as a principal investigator or multiple principal investigator (MPI) on at least one R01, P01, U54, or K award or other comparable funding, including but not limited to the National Science Foundation, the Substance Abuse, and Mental Health Services Administration, the Health Resources and Services Administration, the Patient-Centered Outcomes Research Initiative (PCORI), the Department of Defense, the Food and Drug Administration, the US Department of Agriculture, the Agency for Healthcare Research and Quality, the Centers for Disease Control and Prevention. (<i>required</i>) • Must have a history of at least one competitive renewal and another nationally competitive grant or have simultaneous funding on two NIH R01 level awards. This may include support from prominent national charitable foundations (e.g., American Heart Association, American Lung Association, American Diabetes Association, American Cancer Society, the Lupus Foundation, the March of Dimes, etc.), a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department of Defense and the National Science Foundation, a major industry grant, or other federal entities such as the Centers for Disease Control and Prevention, Department

	<p>of Defense and the National Science Foundation. (<i>required</i>)</p> <ul style="list-style-type: none"> • Serving as the site-principal investigator for a multi-center trial or principal investigator for a project included as part of a multi-project grant does not satisfy the expectation for extramural funding on the tenure track. • In some circumstances (e.g. specific techniques), a faculty member's expertise may not justify PI-level status. In such cases serving as a co-investigator on multiple NIH grants will satisfy the requirement for extramural funding. • Creation of patents that generate licensing income or spinoff companies would meet the equivalent criteria of extramural funding. • Inclusion of diversity supplements when assessing funded projects/ protocols and their impact in supporting the University's mission of diversity, equity and inclusion will be considered. <p>WITH Significant Clinical Responsibilities</p> <ul style="list-style-type: none"> • Must obtain extramural NIH or comparable funding as defined above as a PI or MPI to support their research program. Depending on the extent of clinical responsibilities <u>sustained</u> funding through pharmaceutical or instrumentation companies for investigator-initiated proposals is acceptable. (<i>required</i>) • Must have demonstrated sustainability of their research program by garnering another distinct nationally competitive, peer-reviewed grant. This may include but not limited to the National Science Foundation, the Substance Abuse and Mental Health Services Administration, the Health Resources and Services Administration, the Patient-Centered Outcomes Research Initiative (PCORI), the Department of Defense, the Food and Drug Administration, the US Department of Agriculture, the Agency for Healthcare Research and Quality, the Centers for Disease Control and Prevention. (<i>required</i>) • Serving as the site-principal investigator for a multi-center trial or principal investigator for a project included as part of a multi-project grant <u>does not</u> satisfy the expectation for extramural funding on the tenure track. • Creation of patents that generate licensing income or spinoff companies would meet the equivalent criteria of extramural funding. • Inclusion of diversity supplements when assessing funded projects/ protocols and their impact in supporting the University's mission of diversity, equity and inclusion will be considered.
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SERVICE	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Administrative service to the department, COM, or University	<ul style="list-style-type: none"> • Appointment to, election to, or leadership of departmental, College of Medicine, hospital, and/or University committees or working groups • Service on departmental or COM UME/GME committees • Participation on the Institutional Review Board or Intramural Research Review Committee
Excellent patient care (if applicable)	<ul style="list-style-type: none"> • Clinical program development or enhancement. • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community. • Design and implementation of a novel program to reduce race, gender-based, or other discrimination, or to improve health equity.
Professional service to the faculty member's discipline	<ul style="list-style-type: none"> • Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews. • Serving on editorial boards or editorships. • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to local and national professional societies, service as an advocate for discipline-specific clinical care, education, and/or research and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Surgery and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and nonprofit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion. • Candidates can consider demonstrating impact of their work by utilizing social and traditional media (such as X, Facebook, Instagram, and Threads).

4. Clinical Faculty

Clinical faculty members have a greater responsibility for clinical teaching and patient care than individuals on the Tenure-Track. Clinical faculty members are not eligible for tenure. The criteria in the categories of teaching and service are, for the most part, similar to those for the Tenure-Track for each faculty rank, although there is greater emphasis on teaching, service, and patient care in this appointment type, and less emphasis on traditional scholarship.

Clinical faculty members may continue their service to the Department and the University without ever seeking promotion to the next higher faculty rank, simply through repeated reappointment at the same level. However, the goals and objectives of the College and the University are best served when all faculty members strive for continued improvement in all academic areas as measured by meeting or exceeding the requirements for promotion to the next faculty rank.

Clinical faculty members typically pursue careers as clinician scholars, clinician educators, or clinical practitioners and innovators (excellence). The awarding of promotion to the rank of Associate Clinical Professor (clinician educator and clinician scholar pathways) must be based upon clear and convincing evidence that the candidate has developed a national level of impact and recognition since being appointed to the rank of Assistant Clinical Professor. For those on the clinical excellence pathway, local/regional reputation is required when seeking promotion to associate clinical professor.

a. Promotion to Assistant Clinical Professor

For promotion to assistant clinical professor, a faculty member must complete their doctoral degree, relevant post-doctoral clinical training, and meet the required licensure/certification of their specialty, and be performing satisfactorily in teaching, professional practice, and service. Promotion will entail the generation of a renewed contract. There is no presumption of a change in contract terms.

b. Associate Clinical Professor, Clinician Educator Pathway

The awarding of promotion to the rank of associate clinical professor on the clinician-educator pathway must be based upon convincing evidence that the candidate has developed a national level of impact and recognition as a clinician educator since being appointed to the rank of assistant clinical professor. Evidence of national recognition and impact should be related to the primary focus of this pathway (clinical or didactic education), but can also be related to clinical, scholarship, or professional service. Excellence is not required in all domains. The clinician-educator pathway may reflect effectiveness as an educator of trainees at any level. Alternatively, the pathway may reflect an outstanding clinician who has a demonstrated record of educating colleagues and peers, such as through invitations to serve as faculty on national continuing medical education programs. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Associate Clinical Professor on the Clinician Educator Pathway. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

TEACHING	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Longitudinal record of teaching and mentoring excellence	<ul style="list-style-type: none"> • Positive evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers (<i>required</i>). The dossier must clearly document the faculty member's contribution and the impact of these efforts. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Teaching and/or mentoring awards and other honors. • Programs that improve cultural competence or access to teaching for underserved populations and are inclusive of learners from diverse backgrounds. • Potential venues for teaching excellence range from traditional lecture formats to bedside instruction to digital

	materials, including social and digital media-based education.
Favorable impact on teaching and training programs	<p>The following are desirable but not required:</p> <ul style="list-style-type: none"> • Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development. • Development of impactful, innovative programs that integrate teaching, research and patient care are particularly valued. • Professional development in the mentoring or teaching of underserved or underrepresented populations. • Changes to teaching or mentoring approaches to foster inclusivity.

SCHOLARSHIP/CREATIVE WORKS/RESEARCH

Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Contribute to scholarship, academics, and research in their area of expertise (<i>required</i>)	<ul style="list-style-type: none"> • Authorship of 10–15 peer-reviewed journal publications. A portion of this may be other scholarly works including those that have undergone rigorous review (<i>required</i>). Examples of such works include published review articles, invited commentaries, published guidelines, book chapters, web-based or video teaching modules, peer-reviewed or collaborative curricula with a national reach, and other forms of digital media. However, this range does not represent an inflexible requirement for promotion. • Importantly, 10 or more scholarly works must have been accomplished since appointment as an assistant professor at The Ohio State University. • In the current era of team and collaborative scholarship, it is recognized that meaningful scholarship is not uniformly represented by first or senior authorship. • Publications may focus on pedagogic theory, innovative teaching techniques, educational content promoting diversity, equity, and inclusion, development of web-based or video-teaching modules, and podcasts. for example. They also may focus on the broad spectrum of original scholarship and research, including clinical science, basic science, health services research, outcomes research, quality improvement science, unique clinical observations and case series, meta-analyses, and guidelines, et cetera. • There should exist a trajectory of increasing scholarly activity and outcomes over time.

SERVICE

Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Administrative service to the department, COM, or University	<ul style="list-style-type: none"> • Appointment to, election to, or leadership of departmental, College of Medicine, hospital, and/or University committees or working groups. • Service on departmental or COM UME/GME committees

	<ul style="list-style-type: none"> • Participation on the Institutional Review Board or Intramural Research Review Committee.
Excellent patient care	<ul style="list-style-type: none"> • Clinical program development or enhancement. • Innovative programs that advance the mission of the University or hospital, such as the creation and sustenance of a program to deliver healthcare to the community. • Design and implementation of a novel program to reduce race, gender-based, or other discrimination, or to improve health equity.
National Leadership and /or Recognition	<ul style="list-style-type: none"> • Leadership of or election to a national committee or organization. • Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews. • Serving on editorial boards or editorships. • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to national professional societies, service as an advocate for discipline-specific clinical care, education, and/or research and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Surgery and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and nonprofit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.
Innovative program development	<ul style="list-style-type: none"> • Development of initiatives that promote diversity, justice, equity, and inclusion in health care, improved health care of underprivileged and under-resourced communities, training related to racism in medicine, racism and bias in individual and public health, and implicit bias.

c. Clinical Professor, Clinician Educator Pathway

The awarding of promotion to the rank of Clinical Professor on the clinician-educator pathway must be based upon convincing evidence that the candidate has developed a national level of leadership or international recognition since appointment or promotion to the rank of Associate Clinical Professor. Evidence of international recognition or national leadership should be related to the primary focus of the pathway (clinical or didactic education), but can also be related to clinical, scholarship activities, or professional service. Excellence is not required in all domains.

For promotion to Clinical Professor, a faculty member must have a record of continuing professional growth and increasing quality of contributions, including a sustained record of excellence in teaching and professional practice; leadership in service to this department and to the profession; and production and dissemination of scholarly materials pertinent to pedagogy and/or professional practice. Promotion will entail the generation of a renewed contract. There is no presumption of a change in contract terms.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Clinical Professor on the Clinician Educator Pathway. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require

a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

TEACHING	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Distinctive record of superlative teaching and mentoring excellence	<ul style="list-style-type: none"> • Positive evaluations by students, residents, fellows, postdoctoral trainees, local colleagues, and national peers (<i>required</i>). The dossier must clearly document the faculty member's contribution and the impact of these efforts. • Achievement by direct mentees, including publications, external funding, and invited presentations. • Multiple teaching and/or mentoring awards and other honors • Committee appointments in national education committees such as the Accreditation Council for Graduate Medical Education, National Medical Association, American Association of Higher Education, Association of American Colleges and Universities, or Association of American Medical Colleges, including specialty boards or professional societies at a national level. • Mentorship of junior faculty is expected (<i>required</i>). It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc coaching. <ul style="list-style-type: none"> ○ Documented mentorship relationships with junior faculty, including mentees' achievements and testimonials about the mentorship's impact. ○ Evidence of the faculty member's influence on junior colleagues' career paths, research opportunities, and professional growth.
Favorable impact on teaching and training programs	<p>The following are desirable but not required:</p> <ul style="list-style-type: none"> • Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development • Development of impactful, innovative programs that integrate teaching, research, and patient care • Professional development in the mentoring or teaching of underserved or underrepresented populations. • Changes to teaching or mentoring approaches to foster inclusivity.

SCHOLARSHIP/CREATIVE WORKS/RESEARCH	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Contribute to scholarship, academics, and research in their area of expertise (<i>required</i>)	<ul style="list-style-type: none"> • Authorship of 15–20 peer-reviewed journal publications. A portion of this may be other scholarly works including those that have undergone rigorous review (<i>required</i>). Examples of such works include published review articles, invited commentaries, published guidelines, book chapters, web-based or video teaching modules, peer-reviewed or collaborative curricula with a national reach, and other

	<p>forms of digital media. However, this range does not represent an inflexible requirement for promotion.</p> <ul style="list-style-type: none"> • In the current era of team and collaborative scholarship, it is recognized that meaningful scholarship is not uniformly represented by first or senior authorship. • Publications may focus on pedagogic theory, innovative teaching techniques, educational content promoting diversity, equity, and inclusion, development of web-based or video-teaching modules, and podcasts for example. They also may focus on the broad spectrum of original scholarship and research, including clinical science, basic science, health services research, outcomes research, quality improvement science, unique clinical observations and case series, meta-analyses, guidelines, et cetera. • Published works may be based on their areas of clinical expertise which form the basis for their teaching of colleagues and peers. These may include, but are not limited to, review papers, book chapters as well as original investigator-initiated studies related to their area of clinical practice. Some faculty members may combine these two areas of career emphasis. • Development of web-based or video-teaching modules and other digital media are considered to be published works. • Acquisition of grant funding is highly valued by not required. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
National leadership or international recognition/influence in their field (<i>required</i>)	<ul style="list-style-type: none"> • Invited platform presentations at national/international scientific sessions. • Visiting Professorships at peer institutions. • Invitations to serve on editorial boards, study sections, and grant review sections. • Social media portfolios such as blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics.

SERVICE	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Administrative service to the department, COM, or University	<ul style="list-style-type: none"> • Leadership of departmental, COM, hospital or University committees, working groups, divisions, or centers. • Service on departmental or COM UME/GME committees • Participation on the Institutional Review Board or Intramural Research Review Committee.
Excellent patient care	<ul style="list-style-type: none"> • Clinical program development or enhancement. • Innovative programs that advance the mission of the University or hospital, such as the creation and sustenance of a program to deliver healthcare to the community. • Design and implementation of a novel program to reduce race, gender-based, or other discrimination, or to improve health equity.

Professional service to the field of Surgery	<ul style="list-style-type: none"> • Leadership of or election to a national committee or organization. • Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews. • Serving on editorial boards or editorships. • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to local and national professional societies, service as an advocate for discipline-specific clinical care, education, and/or research and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Surgery and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and nonprofit organizations. • Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.
Innovative program development	<ul style="list-style-type: none"> • Development of initiatives that promote diversity, justice, equity, and inclusion in health care, improved health care of underprivileged and under-resourced communities, training related to racism in medicine, racism and bias in individual and public health, and implicit bias.

d. Associate Clinical Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Associate Clinical Professor on the Clinician-Scholar pathway must be based upon clear and convincing evidence that the candidate has developed a national level of impact and recognition as a clinician scholar since being appointed to the rank of Assistant Clinical Professor. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Associate Clinical Professor on the Clinician Scholar Pathway. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

TEACHING	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Longitudinal record of teaching and mentoring excellence	<ul style="list-style-type: none"> • Positive evaluations by learners including students, residents, fellows, postdoctoral trainees, local colleagues, or national peers (<i>required</i>). The dossier must clearly document the faculty member's contribution and the impact of these efforts, with formal peer review and teaching evaluations.

	<ul style="list-style-type: none"> • Achievement by direct mentees, including publications, external funding, and invited presentations. • Teaching and/or mentoring awards and other honors • Programs that improve cultural competence or access to teaching for underserved populations and are inclusive of learners from diverse backgrounds • Potential venues for teaching excellence range from traditional lecture formats to bedside instruction to digital materials, including social and digital media-based education. • Mentorship of junior faculty is expected (<i>required</i>). It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc coaching. <ul style="list-style-type: none"> ○ Documented mentorship relationships with junior faculty, including mentees' achievements and testimonials about the mentorship's impact. ○ Evidence of the faculty member's influence on junior colleagues' career paths, research opportunities, and professional growth. • Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is not required, but highly valued.
Favorable impact on teaching and training programs	<ul style="list-style-type: none"> • Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development • Development of impactful, innovative programs that integrate teaching, research, and patient care • Professional development in the mentoring or teaching of underserved or underrepresented populations • Changes to teaching or mentoring approaches to foster inclusivity

SCHOLARSHIP/CREATIVE WORKS/RESEARCH	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Contribute to scholarship, academics, and research in their area of expertise	<ul style="list-style-type: none"> • 10-20 peer-reviewed publications since appointment as an assistant professor (<i>required</i>). The range of publications may be adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical/administrative service and or the norms for rates of publication within their field of research. Overall impact of scholarship is important. • In instances where a faculty member was an Assistant Professor at another institution, the total volume of scholarly work since being appointed as Assistant Professor at that institution will be considered in meeting the requirement above. • High impact and positive trajectory of scholarship, including work showing national impact in the College and University values of inclusivity and DEI.

	<ul style="list-style-type: none"> • The pattern of scholarship should include an increasing proportion of publications as first, senior, or corresponding author, but the importance of other authorship positions as a key/indispensable contributor is to be considered. • The number of citations of their publications, and/or citation record may be used to demonstrate the impact of work. • Although review articles may form a portion of the publication list (typically less than 30%) and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles. • Book chapters or reviews alone or in the majority will not be sufficient for promotion. • The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research, the best journal may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors reflects broader interest but does not in and of itself demonstrate the impact of research. • Social media portfolios such as blog/vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics and the use of Altmetrics to assess the impact of the candidate's work utilizing traditional and social media platforms will be considered. However, these non-traditional metrics do not in and of themselves demonstrate the impact of research. • There should exist a trajectory of increasing scholarly activity and outcomes over time.
Acquired competitive external funding in support of their research program (<i>required</i>)	<ul style="list-style-type: none"> • A track record of funding a Principal Investigator, or Coinvestigator is <i>required</i>. Sources of funding include foundation, industry, or federal agencies. The Department especially values funding as principal investigator from the NIH or comparable agencies. • Inclusion of diversity supplements when assessing funded projects/ protocols and their impact in supporting the University's mission of diversity, equity, and inclusion will be considered. • Creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding.
Obtaining a national recognition and impact for a program of scholarship (<i>required</i>)	<ul style="list-style-type: none"> • Invitations to serve as ad hoc journal reviewer • Invited platform presentations at national/international scientific sessions. • Visiting Professorships at peer institutions. • Invitations to serve on editorial boards, study sections, and grant review sections. • Social media portfolios such as blog vlog/podcast/vodcast authorship/editorial duties or professional media engagement on scholarly topics.

	<ul style="list-style-type: none"> The above support the demonstration of national recognition and impact but this list is not comprehensive.
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SERVICE	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Administrative service to the department, COM, or University	<ul style="list-style-type: none"> Leadership of departmental, COM, hospital or University committees, working groups, divisions, or centers. Service on departmental or COM UME/GME committees Participation on the Institutional Review Board or Intramural Research Review Committee.
Exemplary patient care	<ul style="list-style-type: none"> Clinical program development or enhancement. Innovative programs that advance the mission of the University or hospital, such as the creation and sustenance of a program to deliver healthcare to the community. Design and implementation of a novel program to reduce race, gender-based, or other discrimination, or to improve health equity.
Professional service to the faculty member's discipline	<ul style="list-style-type: none"> Leadership of or election to a national committee or organization. Provision of professional expertise to public and private entities beyond the University. Performing journal reviews. Serving on editorial boards or editorships. Service as a grant reviewer for national funding agencies, elected or appointed offices held. Service to local and national professional societies, service as an advocate for discipline-specific clinical care, education, and/or research and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Surgery and The Ohio State University. Service on panels and commissions, and professional consultation to industry, government, education, and nonprofit organizations. Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.
Innovative program development	<ul style="list-style-type: none"> Development of initiatives that promote diversity, justice, equity, and inclusion in health care, improved health care of underprivileged and under-resourced communities, training related to racism in medicine, racism and bias in individual and public health, and implicit bias.

e. Clinical Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Clinical Professor on the Clinician-Scholar pathway must be based upon clear and convincing evidence that the candidate has developed a national level of leadership or international recognition as a clinician scholar since appointment or promotion to the rank of Associate Clinical Professor.

For promotion to Clinical Professor, a faculty member must have a record of continuing professional growth and increasing quality of contributions, including a sustained record of excellence in teaching and professional practice; leadership in service to this department and to the profession; and production and dissemination of scholarly materials pertinent to pedagogy and/or professional practice. Promotion will entail the generation of a renewed contract. There is no presumption of a change in contract terms.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Clinical Professor on the Clinician Scholar Pathway. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

TEACHING	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Distinctive record of superlative teaching and mentoring excellence	<ul style="list-style-type: none"> • Positive evaluations by learners including students, residents, fellows, postdoctoral trainees, local colleagues, or national peers (<i>required</i>). The dossier must clearly document the faculty member's contribution and the impact of these efforts, with formal peer review and teaching evaluations. • Evaluations and peer feedback based on presentations and learner interactions locally at other academic institutions, or at scientific conferences • Achievement by direct mentees, including publications, external funding, and invited presentations. • Teaching and/or mentoring awards and other honors • Programs that improve cultural competence or access to teaching for underserved populations and are inclusive of learners from diverse backgrounds • Potential venues for teaching excellence range from traditional lecture formats to bedside instruction to digital materials, including social and digital media-based education. • Mentorship of junior faculty is expected (<i>required</i>). It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc coaching. <ul style="list-style-type: none"> ○ Documented mentorship relationships with junior faculty, including mentees' achievements and testimonials about the mentorship's impact. ○ Evidence of the faculty member's influence on junior colleagues' career paths, research opportunities, and professional growth. • Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is not required, but highly valued.
Favorable impact on teaching and training programs	<ul style="list-style-type: none"> • Curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development.

	<ul style="list-style-type: none"> • Development of impactful, innovative programs that integrate teaching, research, and patient care. • Professional development in the mentoring or teaching of underserved or underrepresented populations. • Changes to teaching or mentoring approaches to foster inclusivity.
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SCHOLARSHIP/CREATIVE WORKS/RESEARCH	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Sustained and expanded impact and national/emerging international reputation for scholarship (<i>required</i>)	<ul style="list-style-type: none"> • 20-30 peer-reviewed publications since appointment as an associate professor (<i>required</i>). The range of publications may be adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical/administrative service and or the norms for rates of publication within their field of research. Overall impact of scholarship is important. • In instances where a faculty member was an Associate Professor at another institution, the total volume of scholarly work since being appointed as an Associate Professor at that institution will be considered in meeting the requirement above. • Faculty members who participate in team science may have a record of scholarship primarily as middle author. In these cases, there must be evidence from other domains that demonstrate at the national level the faculty member's unique expertise (e.g., invitation to serve on study sections, invitation to speak at national meetings, etc.). • High impact and positive trajectory of scholarship, including work showing national impact in the College and University values of inclusivity and DEI. • The pattern of scholarship should include an increasing proportion of publications as primary, senior, or corresponding author, but the importance of other authorship positions as a key/indispensable contributor is to be considered. • The number of citations of their publications, and/or citation record may be used to demonstrate impact of work. • Although review articles may form a portion of the publication list (typically less than 30%) and may be used to indicate that a faculty member is considered to be an expert in the field, a successful dossier will contain primarily peer-reviewed research articles. • Book chapters or reviews alone or in the majority will not be sufficient for promotion. • The impact factor of a journal may or may not reflect the quality of the scholarship. For example, in some areas of research, the best journal may have a relatively low impact factor but may be highly cited. Conversely, publication in journals with very high impact factors reflects broader

	<p>interest but does not in and of itself demonstrate the impact of research.</p> <ul style="list-style-type: none"> • There should exist a trajectory of increasing scholarly activity and outcomes over time
Acquired and sustained competitive external funding in support of their research program (<i>required</i>)	<ul style="list-style-type: none"> • A sustained track record of funding as Principal Investigator or Co-investigator (<i>required</i>). Candidates should have a track record of funding by foundation, industry, NIH or comparable agencies (e.g. but not limited to NSF, DoD, USDA, AHRQ, DARPA, RWJF, Commonwealth Fund, or Kaiser Family Foundation). Major activity in industry-supported research is acceptable. • Inclusion of diversity supplements when assessing funded projects/ protocols and their impact in supporting the University's mission of diversity, equity, and inclusion will be considered. • Creation of patents that generate licensing income or spin-off companies would meet the equivalent criteria of extramural funding.

SERVICE	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Administrative service to the department, COM, or University	<ul style="list-style-type: none"> • Leadership of departmental, COM, hospital or University committees, working groups, divisions, or centers. • Service on departmental or COM UME/GME committees • Participation on the Institutional Review Board or Intramural Research Review Committee.
Exemplary patient care	<ul style="list-style-type: none"> • Clinical program development or enhancement. • Innovative programs that advance the mission of the University or hospital, such as creation and sustenance of a program to deliver healthcare to the community. • Design and implementation of a novel program to reduce race, gender-based, or other discrimination, or to improve health equity.
Professional service to the faculty member's discipline	<ul style="list-style-type: none"> • Leadership of or election to a national committee or organization. • Provision of professional expertise to public and private entities beyond the University. • Performing journal reviews. • Serving on editorial boards or editorships. • Service as a grant reviewer for national funding agencies, elected or appointed offices held. • Service to local and national professional societies, service as an advocate for discipline-specific clinical care, education, and/or research and funding at the level of local, state, and federal agencies to the extent it serves the mission of the Department of Surgery and The Ohio State University. • Service on panels and commissions, and professional consultation to industry, government, education, and nonprofit organizations.

	<ul style="list-style-type: none"> Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.
Innovative program development	<ul style="list-style-type: none"> Development of initiatives that promote diversity, justice, equity, and inclusion in health care, improved health care of underprivileged and under-resourced communities, training related to racism in medicine, racism and bias in individual and public health, and implicit bias.

f. Associate Clinical Professor, Clinical Excellence Pathway

Faculty members with predominantly clinical or clinical administrative responsibilities may be considered for promotion based on clinical excellence. Ordinarily, these faculty have 80% or greater clinical and/or clinical administrative responsibilities. These faculty have distinguished themselves by having particularly outstanding clinical outcomes. These faculty are recognized for the scholarship of clinical practice or novel contributions to the advancement of the practice in their field. Local/regional reputation is a requirement for Associate Clinical Professor on the Clinical Excellence Pathway; national recognition is not a requirement. The awarding of promotion to the rank of Associate Clinical Professor on the Clinical Excellence Pathway must be based upon convincing evidence that the candidate has demonstrated outstanding clinical outcomes and a record of impact relating to clinical care. Promotion will not be granted purely based on length of service to the institution, clinical productivity, or satisfactory job performance. A faculty member who qualifies for promotion on this pathway should have supportive annual evaluations that document clinical effort in the years leading up to promotion on this pathway. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

These faculty are expected to support the overall mission of the Department, but the focus of the promotion review is on the demonstration of clinical excellence. The documentation and demonstration of outcomes or impact is required. It is not expected that candidates will meet all of the examples below, but meeting only one will not satisfy the demonstration of the collective impact of excellence.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Associate Clinical Professor on the Clinical Excellence Pathway. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

CRITERIA FOR PROMOTION TO ASSOCIATE CLINICAL PROFESSOR, CLINICAL EXCELLENCE PATHWAY	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Teaching Excellence	<ul style="list-style-type: none"> Outstanding clinical mentorship of trainees (residents, fellows) and early career faculty with evaluations documenting the faculty member's contribution and impact of these efforts. Peer evaluations noting excellence in clinical mentorship and guidance.
Scholarship Excellence	<ul style="list-style-type: none"> While traditional research (e.g., clinical, translational, basic, or population health science) is not a focus of this pathway,

	publications, presentations, or written reports demonstrating success in clinical performance are valued.
Excellence in clinical performance	<ul style="list-style-type: none"> • Demonstration of impact or excellence in clinical performance is the hallmark of the clinical excellence pathway (<i>required</i>). • Multiple lines of evidence supporting excellence in clinical performance, including discipline-relevant clinical measures such as, but not limited to quality indicators, mortality metrics, complication rates, turnaround times, readmission rates, process improvements, and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison (<i>required</i>) <ul style="list-style-type: none"> ○ Clinical productivity metrics (e.g. wRVU) per se, are not sufficient for supporting excellence in clinical performance. • Preferred provider recognition. Referral patterns or other metrics that indicate acknowledgment of a faculty member's expertise such as, but are not limited to, the number of cases referred for a second opinion, patients referred from other states or other regions within Ohio. • Evidence that physicians from other medical centers come to OSU/NCH for training specifically by the faculty member, or request proctoring at their home institution by the faculty member. • A record that demonstrates that a faculty member is frequently consulted by health care providers from outside the OSU/NCH system for advice about patient care. • Clinical program development. Evidence that a faculty member has developed a new program or led improvements in an existing program and that subsequent to those innovations the success of the program has materially improved, or the program has been duplicated or adopted within the Medical Center or by other institutions or practices. • Operational improvements that make practice more efficient, effective, easier to access, or more cost-effective. • Evidence for development of programs to identify healthcare disparities or programmatic changes to advance equitable healthcare delivery. • Evidence of the faculty member's efforts and participation in programs supporting the clinical mission by improving workforce diversity, promoting inclusion of diverse talent, and creating an equitable workplace, in alignment with the mission of the university and COM.
Local and regional recognition/reputation (<i>required</i>)	<ul style="list-style-type: none"> • Invitations to speak locally, regionally or at other hospitals, academic medical centers, or statewide professional societies. • Dissemination of clinical expertise by presentation at grand rounds or equivalent regional, state, or national conferences, participation in the development of clinical practice guidelines, small group activities with peer-reviewed data and internal benchmarking, and participation in web-based education, online seminars, podcasts, blogs, social media outlets and creation of educational websites relating to patient care to the extent their impact can be quantified.

	<ul style="list-style-type: none"> • Development of innovative approaches to the management of a specific clinical problem that becomes a local, regional, or national standard of practice. • Demonstration of the faculty member's expertise as recognized by the receipt of honors and awards from internal and external sources, for example, ranking among the region's and nation's elite such as Best Doctors ©, Castle-Connolly, or similar recognitions. • Receipt of awards from local, state, or national organizations for clinical excellence. • Participation in the development of institutional or statewide practice guidelines.
Track record of exemplary clinical leadership and unique clinical program development	<ul style="list-style-type: none"> • In addition to the examples above, this may include both clinical and administrative work and must be supported by written documentation such as internal letters of support from departmental or hospital leadership and external letters of support from referring physicians or peers in the candidate's field. • Development of initiatives that promote diversity, justice, equity, and inclusion in health care, improved health care of underprivileged and under-resourced communities, training related to racism in medicine, racism and bias in individual and public health, and implicit bias. • Evidence of development of programs to identify healthcare disparities or programmatic changes to negate the effects of inequitable healthcare delivery. • Evidence of the faculty member's efforts and participation in programs supporting the clinical mission by improving workforce diversity, promoting inclusion of diverse talent, and creating an equitable workplace, in alignment with the mission of the University and COM e.g., work done to improve pathway programs for URiM (Underrepresented in Medicine) or developing programs to enhance education and improve culture of acceptance in the workplace.

g. Professor, Clinical Excellence Pathway

Faculty members with predominantly clinical or clinical administrative responsibilities may be considered for promotion based on clinical excellence. Ordinarily, these faculty have 80% or greater clinical and/or clinical administrative responsibilities. These faculty have distinguished themselves by having particularly outstanding clinical outcomes. These faculty are recognized for the scholarship of practice or novel contributions to the advancement of the practice in their field. National reputation/recognition for outstanding clinical care is a requirement for promotion to Clinical Professor on the Clinical Excellence Pathway. The awarding of promotion to the rank of professor in the clinical excellence pathway must be based upon convincing evidence that the candidate has demonstrated a sustained and enhanced level of excellence in clinical care and has developed a national impact and recognition since being appointed to the rank of associate professor. Mentorship of junior faculty is an expectation for faculty being considered to the rank of professor.

For promotion to clinical professor, a faculty member must have a record of continuing professional growth and increasing quality of contributions, including a sustained record of excellence in teaching and professional practice; leadership in service to this department and to the profession; and production and

dissemination of scholarly materials pertinent to pedagogy and/or professional practice. Promotion will entail the generation of a renewed contract. There is no presumption of a change in contract terms.

Promotion will not be granted solely based on length of service to the institution, time in rank, clinical productivity, or satisfactory job performance. A faculty member who qualifies for promotion on this pathway should have supportive annual evaluations that document increasing clinical impact and performance since achieving the rank of associate clinical professor. These faculty are expected to support the overall mission of the Department, but the focus of the promotion review is on the demonstration of clinical excellence. The documentation and demonstration of outcomes or impact is required. It is not expected that any candidate will meet all of the examples below but meeting only one will not satisfy the demonstration of collective impact of excellence.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Clinical Professor on the Clinical Excellence Pathway. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

CRITERIA FOR PROMOTION TO CLINICAL PROFESSOR, CLINICAL EXCELLENCE PATHWAY	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Teaching Excellence	<ul style="list-style-type: none"> • Outstanding clinical mentorship of trainees (residents, fellows) and early career faculty with evaluations documenting the faculty member's contribution and impact of these efforts. • Peer evaluations noting excellence in clinical mentorship and guidance. • Mentorship of junior faculty is expected (<i>required</i>). It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc coaching. <ul style="list-style-type: none"> ○ Documented mentorship relationships with junior faculty, including mentees' achievements and testimonials about the mentorship's impact. ○ Evidence of the faculty member's influence on junior colleagues' career paths, research opportunities, and professional growth.
Scholarship Excellence	<ul style="list-style-type: none"> • While traditional research (e.g., clinical, translational, basic, or population health science) is not a focus of this pathway, publications, presentations, or written reports demonstrating success in clinical performance are valued. • Acquisition of grant funding is highly valued but not required.
Excellence in clinical performance	<ul style="list-style-type: none"> • Demonstration of impact or excellence in clinical performance is the hallmark of the clinical excellence pathway (<i>required</i>). • Multiple lines of evidence supporting excellence in clinical performance, including discipline-relevant clinical measures such as, but not limited to quality indicators, mortality

	<p>metrics, complication rates, turnaround times, readmission rates, process improvements, and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison (<i>required</i>).</p> <ul style="list-style-type: none"> ○ Clinical productivity metrics (e.g. wRVU) per se, are not sufficient for supporting excellence in clinical performance. • Preferred provider recognition. Referral patterns or other metrics that indicate acknowledgment of a faculty member's expertise such as, but are not limited to, the number of cases referred for a second opinion, and patients referred from other states or other countries. • Evidence that physicians from other medical centers come to OSU/NCH for training specifically by the faculty member, or request proctoring at their home institution by the faculty member. • A record that demonstrates that a faculty member is frequently consulted by health care providers from outside the OSU/NCH system for advice about patient care. • Clinical program development. Evidence that a faculty member has developed a new program or led improvements in an existing program and that subsequent to those innovations the success of the program has materially improved, or the program has been duplicated or adopted within the Medical Center or by other institutions or practices. • Operational improvements that make practice more efficient, effective, easier to access, or more cost-effective. • Evidence for development of programs to identify healthcare disparities or programmatic changes to advance equitable healthcare delivery. • Evidence of the faculty member's efforts and participation in programs supporting the clinical mission by improving workforce diversity, promoting inclusion of diverse talent, and creating an equitable workplace, in alignment with the mission of the university and COM.
National Impact and Recognition (<i>required</i>)	<ul style="list-style-type: none"> • Invitations to speak nationally at hospitals, academic medical centers or national professional societies. • Dissemination of clinical expertise by presentation at grand rounds or equivalent regional, state, or national conferences, participation in the development of clinical practice guidelines, small group activities with peer-reviewed data and internal benchmarking, and participation in web-based education, online seminars, podcasts, blogs, social media outlets and creation of educational websites relating to patient care to the extent their impact can be quantified. • Development of innovative approaches to the management of a specific clinical problem that becomes a local, regional, or national standard of practice. • Demonstration of the faculty member's expertise as recognized by the receipt of honors and awards from internal and external sources, for example, ranking among the regions' and nations' elite such as Best Doctors ©, Castle-Connolly, or similar recognitions.

	<ul style="list-style-type: none"> • Receipt of awards from national organizations for clinical excellence. • Participation in the development of national practice guidelines.
Track record of clinical leadership	<ul style="list-style-type: none"> • Leadership of operational improvements that make practice more efficient, effective, easier to access, or more cost-effective. • Continued evidence of the increasing impact at the state or national level of programs developed to identify healthcare disparities or programmatic changes to negate the effect of inequitable healthcare delivery. • Evidence of the faculty member's leadership of programs supporting the clinical mission by improving workforce diversity, promoting inclusion of diverse talent, and creating an equitable workplace, in alignment with the mission of the University and COM e.g., work done to improve pathway programs for URiM or developing programs to enhance education and improve culture of acceptance in the workplace. Demonstrating regional or national recognition of this work e.g., programs being incorporated at peer institutions. • Evidence of faculty members' administrative leadership involves creativity, and innovation, and is evaluated by outcomes. These leadership roles may include the following: <ul style="list-style-type: none"> ○ Health system leadership of patient care programs, operations, or health care finance. ○ Leadership at the Departmental, College, University, or national level of programs that advance disease prevention, patient care, or faculty and staff wellness. ○ Leadership at the Departmental, College, University, or national level of programs that advance health equity, improvement of health care access, or the inclusion of clinicians of diverse backgrounds who are sensitive to the health care needs of diverse and underserved populations.
Unique clinical program development	<ul style="list-style-type: none"> • In addition to the examples above, this may include both clinical and administrative work and must be supported by written documentation such as internal letters of support from departmental or hospital leadership and external letters of support from referring physicians or peers in the candidate's field. • Development of initiatives that promote diversity, justice, equity, and inclusion in health care, improved health care of underprivileged and under-resourced communities, training related to racism in medicine, racism and bias in individual and public health, and implicit bias. • Evidence of the development of programs to identify healthcare disparities or programmatic changes to negate the effects of inequitable healthcare delivery.

5. Research Faculty

The criteria for promotion focus entirely on the category of research. Since research faculty typically have a supportive role in research programs, the expectations for scholarship are quantitatively and qualitatively different than those for faculty on the tenure-track.

a. Research Associate Professor

Candidates for promotion to research associate professor are expected to demonstrate the beginnings of a national recognition of their expertise. Research faculty are not expected to establish an independent program of research, but rather support the investigative work of others. **It is expected in general that the successful candidate will have a sustained record of 95% salary recovery from extramural sources.** Research faculty typically serve as coinvestigators, and independent extramural funding as principal investigator or multiple principal investigators is not required. However, a record of continuous peer-reviewed extramural and/or commercial funding is required. Publications must appear in high-quality peer-reviewed venues and be judged by external evaluators as having a substantial positive impact on the field. Promotion will entail generation of a renewed contract. There is no presumption of a change in contract terms.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Research Associate Professor. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

CRITERIA FOR PROMOTION TO RESEARCH ASSOCIATE PROFESSOR	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Teaching Excellence	<ul style="list-style-type: none">• Not required, although participation in teaching and mentoring of trainees and early career faculty is valued and may be included.
Service Excellence	<ul style="list-style-type: none">• Not required
Documentation of a sustained and substantial record of scholarship based in area of expertise (<i>required</i>)	<ul style="list-style-type: none">• 20-25 peer-reviewed journal publications since their appointment as a research assistant professor (<i>required</i>). First, senior, or corresponding authorships are not necessarily expected, but a faculty member should demonstrate their supportive role to the project.• Overall, the number of publications required for promotion should be sufficient to persuasively characterize the faculty member's influence in helping to discover new knowledge in their field. Thus, both quality and quantity are important considerations. It should be appreciated that scholarship exceeding the specified range is not a guarantee of a positive promotion decision. Similarly, records of scholarship below the specified range do not preclude a positive promotion decision.• There should exist a trajectory of increasing scholarly activity and outcomes over time.

	<ul style="list-style-type: none"> • Research faculty typically serve as Co-Investigators, and independent extramural funding (Principal Investigator or Multiple Principal Investigator) is not required. • Funding by the NIH, while highly desirable, is not strictly required for the promotion of research faculty. • Other nationally competitive, peer-reviewed funding with salary recovery, including support from national foundations, national societies, pharmaceutical industry (investigator-initiated trials or studies), or other federal agencies also meets the requirement for extramural funding. • Licensing activities on patents that generate revenues should be considered equivalent to extramural grant awards.
Demonstrate the beginnings of a national recognition of their expertise (<i>required</i>)	<ul style="list-style-type: none"> • Invitations to review manuscripts or grant applications. • Invitations to lecture at scientific societies or other universities, consultation with industry or governmental agencies. • Requests for collaboration from other universities, request to serve in central roles on multi-center studies. • National reputation/impact may also be demonstrated in part through non-traditional metrics (e.g., social media portfolios, Altmetrics scores). • Materials transfer agreements (MTA's) should be considered evidence of national (or international) recognition and impact.

b. Research Professor

The awarding of promotion to the rank of research professor must be based upon convincing evidence that the candidate has established a national level of recognition and impact beyond established for promotion to associate professor. Research faculty typically are not expected to establish an independent program of research. **It is expected in general that the successful candidate will have a sustained record of 95% salary recovery from extramural sources.** A record of continuous peer-reviewed extramural and/or commercial funding is required, along with demonstrated research productivity as a result of such funding. Research faculty typically serve as co-investigators, and independent extramural funding as principal investigator or a multiple principal investigator is not required. Promotion will entail the generation of a renewed contract. There is no presumption of a change in contract terms.

The tables that follow list the criteria and types of evidence the department has identified that support promotion to Research Professor. Please note these are not intended to be an exhaustive list of requirements but are examples for consideration for individual candidates. This resource is meant to promote evidence-based analysis during the evaluation of dossiers rather than require a specific prescription for those reports. Promotion decisions are based on the totality of the accomplishments of the candidate.

CRITERIA FOR PROMOTION TO RESEARCH PROFESSOR	
Criteria	Types of Evidence Demonstrating Impact and Showing Criteria Have Been Met
Teaching Excellence	<ul style="list-style-type: none"> Not required, although participation in teaching and mentoring of trainees and early career faculty is valued and may be included.
Service Excellence	<ul style="list-style-type: none"> Not required
Documentation of a sustained and substantial record of scholarship based in area of expertise (<i>required</i>)	<ul style="list-style-type: none"> 25-35 peer-reviewed journal publications since their appointment as research associate professor (<i>required</i>). First, senior, or corresponding authorships are not necessarily expected, but a faculty member should demonstrate their supportive role to the project. Overall, the number of publications required for promotion should be sufficient to persuasively characterize the faculty member's influence in helping to discover new knowledge in their field. Thus, both quality and quantity are important considerations. It should be appreciated that scholarship exceeding the specified range is not a guarantee of a positive promotion decision. Similarly, records of scholarship below the specified range do not preclude a positive promotion decision. There should exist a trajectory of increasing scholarly activity and outcomes over time. Research faculty typically serve as Co-Investigators, and independent extramural funding (Principal Investigator or Multiple Principal Investigator) is not required Funding by the NIH, while highly desirable, is not strictly required for the promotion of research faculty. Other nationally competitive, peer-reviewed funding with salary recovery, including support from national foundations, national societies, pharmaceutical industry (investigator-initiated trials or studies), or other federal agencies also meets the requirement for extramural funding. Licensing activities on patents that generate revenues should be considered equivalent to extramural grant awards
Established a national level of recognition and impact beyond established for promotion to associate professor (<i>required</i>)	<ul style="list-style-type: none"> Invitations to review manuscripts or grant applications. Invitations to lecture at scientific societies or other universities, consultation with industry or governmental agencies. Requests for collaboration from other universities, requests to serve in central roles on multi-center studies. National reputation/impact may also be demonstrated in part through non-traditional metrics (e.g., social media portfolios, Altmetrics scores).

6. Associated Faculty

Associated faculty for whom promotion is a possibility follow the promotion guidelines and procedures for tenure-track and clinical faculty (see Promotion and Tenure and Promotion Reviews above), with the exception that the review does not proceed to the college level if the Department Chair's recommendation is negative and does not proceed to the University level if the dean's recommendation is negative.

a. Compensated Associated Faculty (i.e., Practice)

For compensated associated faculty (paid through OSU, OSUP, or NCH) who are principally focused on patient care, the promotion criteria and procedures will be identical to those for the clinical excellence pathway, except that the decision of the Dean is final. For compensated associated faculty (paid through OSU, OSUP, or NCH) who contribute principally through educational activities, the promotion criteria and procedures will be identical to those for the clinician educator pathway, except that the decision of the dean is final.

For assistant and associate professors with FTE below 50% (tenure track titles), the promotion criteria and procedures will be identical to those for the tenure track.

Promotion to Senior Lecturer. Lecturers may be promoted to senior lecturer if they meet the criteria for appointment at that rank as described in Section IV.A.4.

Visiting Faculty. Visiting faculty members are not eligible for promotion.

b. Uncompensated Associated Faculty (i.e., Adjunct)

For uncompensated associated faculty, promotion should reflect contributions to the Department or College that exceed the activities that represent the basis for their faculty appointment, in most cases related to the educational mission. At the associate professor level, this could include service on Department and or college committees, contributions to medical student curriculum development, or other evidence of contributions to the educational or scholarly mission of the Department or college. For promotion to professor, the level of contribution must demonstrate sustained and enhanced engagement or leadership.

Procedures for promotion of uncompensated associated faculty:

- Submission of an updated CV
- Letters from two people, including the faculty member's immediate supervisor (i.e., division director or clerkship director), who can attest to the associated faculty member's contributions.
- Teaching evaluations if available
- Letter from the committee of eligible faculty including the vote
- Letter from the chair
- Review and approval by the College of Medicine Office of Faculty Affairs.

B. Procedures for Tenure-Track, Clinical, and Research Faculty

The department's procedures for promotion and tenure and promotion reviews are fully consistent with those set forth in Faculty Rules [3335-6-04](#) for tenure-track faculty, [3335-7-05](#) for clinical faculty, [3335-7-32](#) for research faculty, and the Office of Academic Affairs annually updated procedural guidelines for promotion and tenure reviews found in Chapter 3 of the [Policies and Procedures Handbook](#). The following sections, which state the responsibilities of each party to the review process, apply to all tenure-track, clinical, and research faculty in the department.

1. Candidate Responsibilities

Candidates for promotion and tenure or promotion are responsible for submitting a complete, accurate dossier and providing a copy of the APT document under which they wish to be reviewed, if other than

the department's current document. If external evaluations are required, candidates are responsible for reviewing the list of potential external evaluators compiled for their case according to departmental guidelines. Each of these elements is described in detail below.

a. Dossier

Every candidate must submit a complete and accurate dossier that follows the Office of Academic Affairs [dossier outline](#). Candidates should not sign the Office of Academic Affairs [Candidate Checklist](#) without ascertaining that they have fully met the requirements set forth in the Office of Academic Affairs core dossier outline including, but not limited to, those highlighted on the checklist.

While the Appointments, Promotion and Tenure Committee makes reasonable efforts to check the dossier for accuracy and completeness, the candidate bears full responsibility for all parts of the dossier that are to be completed by them.

Unless specifically stated in the core dossier, the time period for teaching documentation to be included in the dossier for probationary faculty is the start date of employment as faculty at The Ohio State University to present. For tenured or non-probationary faculty, it is the date of the last dossier submission for promotion or the last five years, whichever is less. Information included in a previous promotion is not included. However, the Department Eligible Faculty may allow a candidate to include information prior to the date of last promotion or reappointment if it believes such information would be relevant to the review. Any such material should be clearly indicated.

For scholarship documentation, a full history of publications and creative work should be included, as this information provides context to the more recent and relevant research record and/or demonstrates scholarly independence. Information about scholarship produced prior to the start date (for probationary faculty) or date of last promotion or reappointment may be provided. Any such material should be clearly indicated. However, it is the scholarship performance since the start date or date of last promotion that is to be the focus of the evaluating parties.

The time period for service documentation to be included in the dossier for probationary faculty is the start date to present. For tenured or non-probationary faculty, it is the date of last promotion, reappointment, or the last five years, whichever is more recent, to present. The Department Eligible Faculty may allow a candidate to include information prior to the date of last promotion or reappointment if it believes such information would be relevant to the review. Any such material should be clearly indicated.

Departments may allow a dossier appendix to augment evidence for teaching, clinical excellence or scientific achievement if the Appointments, Promotion and Tenure Committee feels this information enhances understanding of a candidate's career achievements. This appendix, however, will not be forwarded to the Executive Vice President and Provost for final review.

The complete dossier is forwarded when the review moves beyond the department. The documentation of teaching is forwarded along with the dossier. The documentation of scholarship and service is for use during the department review only, unless reviewers at the college and university levels specifically request it.

i. Teaching

Typically, documentation of teaching for the promotion dossier should include the following items.

- Cumulative SEI reports (Student Evaluation of Instruction computer-generated summaries prepared by the Office of the University Registrar) for formal University classes.
- Cumulative evaluations of clinical teaching (lectures, conferences, grand rounds, patient care encounters, etc.) utilizing appropriate online evaluation tools, where available.
- medical student evaluations, for example using Vitals
- resident and fellow evaluations, for example using MedHub
- Peer evaluation of teaching reports as required by the department's peer evaluation of teaching program.
- teaching activities as listed in the core dossier including, involvement in graduate/professional exams, theses, dissertations, and undergraduate research, mentoring postdoctoral scholars and researchers, extension and continuing education instruction, involvement in curriculum development, awards and formal recognition of teaching, presentations on pedagogy and teaching at national and international conferences, adoption of teaching materials at other colleges or universities, and other relevant documentation of teaching, such as a teaching portfolio, as appropriate.
- Other relevant documentation of teaching as appropriate.

Peer evaluation is required on a recurring basis for all faculty members. Peer evaluations may include internal and/or external reviews of classroom instruction, clinical teaching, and course materials such as syllabi, examinations, and instructional materials including textbooks. Assessment by observation of classroom and clinical teaching is most useful when done systematically over time and conducted with the specific goal of offering constructive suggestions.

Peer evaluation resources can be found [here](#).

ii. Scholarship

Scholarship is broadly defined as the discovery and dissemination of new knowledge by research, study, learning, and the scholarship of practice. This includes but is not limited to investigator-initiated clinical trials and research based on cases or case series, educational outcomes research, development of academic modules, and entrepreneurship. The nature and amount of scholarship should be pertinent to the faculty member's track and pattern of responsibilities. In addition, departments should incorporate mechanisms to recognize new and emerging methods of dissemination of scholarship including websites, social media, etc. Evaluation of scholarship must be open to the ongoing evolution of new scholarly domains in the medical sciences including scholarship of community engagement and the advancement of diversity, equity, and inclusion. This Appointments, Promotion and Tenure document specifically establishes how the evidence of a faculty member's scholarship will be documented and assessed in terms of quality and significance and in relationship to the expectations of the track they are in.

All tenure-track, clinical, and research faculty members (with the exception of clinical faculty on the clinical excellence pathway) must develop a record of scholarship that is documented by a body of original scholarly work over a period of time. Scholarship is broadly defined including all aspects of basic science, clinical research including clinical trials and research based on cases or case series, scholarship of teaching and learning, development of academic modules, entrepreneurship, etc. The evidence for scholarship must refer to original, substantive works that are documented achievements. Recognition of the scholarly work must also be external to the University, residing in the scientific and educational practice communities apropos to the faculty member's field of scholarship. The nature of scholarship

should be pertinent to the faculty member's track and pattern of responsibilities. Those in the clinical excellence pathway demonstrate scholarship of practice through innovations in patient care that advance disease prevention, detection, and treatment (see the criteria for the clinical excellence pathway sections).

Evidence of scholarship can include but is not limited to: peer-reviewed journal articles, bulletins and technical reports, original books and monographs, edited books, chapters in edited books, editor-reviewed journal articles, reviews and abstracts, papers in proceedings, unpublished scholarly presentations, externally funded research, funded training grants, other funding for academic work, prizes and awards for research or scholarly or creative work, major professional awards and commendations.

Evidence of scholarship may also include invited lectures at other universities, symposia, and conferences; invention disclosures, patent activity, entrepreneurship, technology commercialization, software development; editorship of a major collection of research work; leadership of advanced seminars and symposia under organizational sponsorship; and invitations to serve on national review bodies.

Documentation of scholarship also includes grants and contracts submitted and received, and a demonstration of the impact of the scholarship, as documented with citation data, impact factors, book distribution data, adoption of texts or procedures by external TIUs or academic health centers, and so forth. Although receipt of an extramural grant is meritorious, promotion also requires evidence of the impact and outcomes of the scholarly program it supports.

If requested by the Department AP&T Committee, copies of all scholarly papers published or accepted for publication. Papers accepted for publication but not yet published must be accompanied by a letter from the publisher stating that the paper has been unequivocally accepted and is in final form, with no further revisions needed.

Other relevant documentation of research may be included as appropriate (published reviews including publications where one's work is favorably cited, grants and contract proposals that have been submitted).

iii. Service

Service is broadly defined to include administrative service to the University, exemplary patient care, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. In the College of Medicine, a candidate's service contributions must be demonstrated to be of high quality and effectiveness. All tenure-track and clinical faculty members must contribute to service as evidenced by documentation of contributions over a sustained period of time. This Appointments, Promotion, and Tenure document specifically establishes how the evidence of a candidate's service will be documented and assessed in terms of quality and effectiveness. High-quality patient care is an expectation of all faculty members with clinical responsibilities, and therefore, evidence of additional service is necessary for promotion. Evidence of administrative service to the University may include appointment or election to department, college, and/or University committees, holding administrative/leadership positions; development of innovative programs, and participating in mentoring activities. Program development, reflecting the integration of teaching, service, and research in a specific content area, may be given special recognition and significance if desired by the department. Evidence of professional service to the faculty member's discipline can include editorships of, or service as, a reviewer for journals or other learned publications; offices held and other service to professional societies. Evidence of the provision of professional expertise to public and private entities beyond the University includes service as a reviewer of grants or other scholarly proposals, external examiner or advisor, a panel and commission participant, and as a professional consultant to industry, government, and education. Evaluation of service should include

evidence of a spirit of collegiality and collaboration with all of those in the many roles that work to advance the College and its mission.

b. Appointments, Promotion, and Tenure (APT) Document

Candidates must also indicate the APT under which they wish to be reviewed. Candidates may be reviewed using the department's current APT document; or, alternatively, they may elect to be reviewed under either (a) the APT document that was in effect on their start date, or (b) the APT document that was in effect on the date of their last promotion (or reappointment in the case of clinical and research faculty), whichever of these two latter documents is the more recent. However, the current APT document must be used if the letter of offer or last promotion, whichever is more recent, was more than 10 years before April 1 of the review year. The APT document must be submitted when the dossier is submitted to the department.

If a candidate wishes to be reviewed under an APT other than the current approved version available [here](#), a copy of the APT document under which the candidate has elected to be reviewed must be submitted when the dossier is submitted to the department.

c. External Evaluations

If external evaluations are required, candidates are responsible for reviewing the list of potential external evaluators developed by the department chair and the Appointments, Promotion and Tenure Committee. The candidate may add no more than two additional names (one for clinical excellence and clinician educator), but is not required to do so. The candidate may request the removal of no more than two names. The department chair decides whether removal is justified. (Also see External Evaluations below).

2. Appointments, Promotion, and Tenure (AP&T) Committee Responsibilities

The responsibilities of the Appointments, Promotion and Tenure Committee are as follows:

- The committee reviews the Department of Surgery's Appointments, Promotion, & Tenure document annually and recommends proposed revisions to the faculty.
- The committee considers annual requests from faculty members seeking a nonmandatory review in the following academic year and decides whether it is appropriate for such a review to take place. A simple majority of those eligible to vote on a request must vote affirmatively for the review to proceed.
 - The committee bases its decision on assessment of the record as presented in the faculty member's CV and on a determination of the availability of all required documentation for a full review (student and peer evaluations of teaching). Lack of the required documentation is necessary and sufficient grounds on which to deny a non-mandatory review.
 - A tenured faculty member may only be denied a formal promotion review under Faculty Rule [3335-6-04](#) only once. Faculty Rules [3335-7-08](#) and [3335-7-36](#) make the same provision for non-probationary clinical and research faculty, respectively. If the denial is based on a lack of required documentation and the faculty member insists that the review go forward in the following year despite incomplete documentation, the individual should be advised that such a review is unlikely to be successful.

- A decision by the committee to permit a review to take place in no way commits the eligible faculty, the department chair, or any other party to the review to make a positive recommendation during the review itself.
- Only the faculty member under consideration may stop the review process.

Annually, in late spring through early autumn semester, to provide administrative support for the promotion and tenure review process as described below.

Late Spring: A Procedures Oversight Designee who will serve in this role for the following year is appointed by the Department Chair to ensure reviews are procedurally correct, fair, and free of bias for all faculty members. The Procedures Oversight Designee cannot be the same individual who chairs the committee. The Procedures Oversight Designee's responsibilities are described [here](#).

Late Spring: Suggest names of external evaluators to the department chair. The external evaluators will be drawn predominantly from peer and aspirational peer programs (see Section VI.B.4 below). Justification will be provided in cases when a suggested evaluator is from a program not included on these lists.

Late Summer: The Appointments, Promotion and Tenure Committee meets to evaluate candidates' completed dossiers and to ensure accomplishments are clearly characterized and documented. The dossiers are reviewed for completeness, accuracy of information (including citations), and consistency with University Office of Academic Affairs requirements; and the committee works with candidates to assure that needed revisions are made in their dossier before the formal review process begins.

- The AP&T Committee or its designees will meet with each candidate for clarification as necessary and to provide the candidate an opportunity to comment on their dossier. This meeting or communication is not an occasion to debate the candidate's record.
- A mechanism will exist to permit each candidate's dossier to be accessible for review by the Appointments, Promotion and Tenure Committee at least two weeks before the meeting at which specific cases are to be discussed and voted. Members are expected to review thoroughly and objectively every candidate's dossier in advance of the meeting at which the candidate's case will be discussed. Members are also expected to attend all committee meetings except when circumstances beyond their control prevent attendance, to participate in discussion of every case, and to vote.
- At the meeting for discussion of specific cases, following the presentation and formal discussion of each candidate, the Appointments, Promotion and Tenure chair (or co-chairs) conduct a vote that will take into account the interdisciplinary work of a candidate across multiple units as part of the whole work, especially if the candidate has a joint appointment in another unit or is a member of a Discovery Theme. Only tenured professors participate in the assessment of eligibility for award of tenure and promotion on the tenure track. A positive recommendation is secured when a simple majority (greater than 50%) of the votes cast are positive.
- The chair of the Appointments, Promotion and Tenure committee will draft a summary of the deliberations of each candidate following the faculty meeting. This letter will include the committee vote and a summary of the perspectives expressed during the meeting. The letter will be evaluative as well as descriptive and contextualize the vote, including any "minority opinions" as appropriate. In the event the candidate is on the tenure track, this letter must be written by a

tenured professor. The letter is forwarded along with the Committee's final recommendation to the Department of Surgery chair. It is included in the candidate's dossier.

- The Committee will provide a written evaluation and recommendation to the Department Chair in the case of joint appointees from another tenure-initiating unit. The Appointments, Promotion and Tenure Committee does not vote on these cases since the department's recommendation must be provided to the other tenure-initiating unit substantially earlier than the committee begins meeting on this department's cases.
- The Committee will provide a written response, on behalf of the eligible faculty, to any candidate comments that warrant a response, for inclusion in the dossier.

3. Eligible Faculty Responsibilities

The responsibilities of the members of the eligible faculty are as follows:

- To review thoroughly and objectively every candidate's dossier in advance of the meeting at which the candidate's case will be discussed.
- To attend all eligible faculty meetings except when circumstances beyond one's control prevent attendance; to participate in discussion of every case; and to vote.
- Faculty must be present for the entire discussion to be eligible to vote.
- The evaluation by the eligible faculty is not advisory to the department chair but represents an independent voice of the faculty.
- The Committee of the Eligible Faculty chair will write a letter to the department chair reporting the vote and summarizing the discussion of the eligible faculty. This letter will be evaluative as well as descriptive and comment on discussions justifying the final recommendation and vote, considering areas of strength and areas in which there might have been greater achievement. In the event the candidate is on the tenure track, this letter must be written by a tenured faculty member at the appropriate rank per University Faculty Rules.

4. Department Chair Responsibilities

In the event that the Department of Surgery chair is on the clinical faculty, and therefore ineligible to conduct the promotion evaluation of a tenure track candidate for promotion, the Department must appoint or otherwise designate a tenured faculty member who can provide the chair-level review. This most typically would be one of the Vice Chairs for Research. For review of candidates being considered for promotion to professor, that designee must be a tenured professor. The responsibilities of the Department of Surgery chair or designee are as follows.

- To determine whether a candidate is authorized to work in the United States and whether a candidate now, or in the future, will require sponsorship for an employment visa or immigration status. The department must ensure that such questions are asked of all applicants in a non-discriminatory manner. For tenure-track assistant professors, Department Chairs are to confirm that candidates are eligible to work in the U.S. Candidates who are not U.S. citizens or nationals, permanent residents, asylees, or refugees will be required to sign an [MOU](#) at the time of promotion with tenure.
- **Late Spring:** The chair will solicit external evaluations from a list including names suggested by the Appointments, Promotion and Tenure Committee, the chiefs, and the candidate. More information on external evaluations is provided further on in this document.

- The chair will solicit an evaluation from a chair of any department in which the candidate has a joint appointment. The TIU head from the joint appointment unit must provide a letter of evaluation to the primary TIU head. The input should be in the form of a narrative commenting on faculty duties, responsibilities, and workload; on any additional assignments; and on the impact of the work of the individual in the field of the joint unit.
- The chair will remove any member of the Appointments, Promotion and Tenure Committee from the review of a candidate when the member has a conflict of interest but does not voluntarily withdraw from the review.
- Following receipt of the letter of the Appointments, Promotion and Tenure Committee's completed evaluation and vote, the chair must provide an independent written evaluation and conclusion of the candidate's suitability for promotion and/or tenure. The chair's written assessment and recommendation for the dean is included in the dossier.
- In the interest of obtaining a fully independent evaluation, the College of Medicine discourages the chair from attending the Appointments, Promotion and Tenure Committee deliberations.
- To inform each candidate in writing after completion of the department review process:
 - Of the recommendations by the Committee of Eligible Faculty and department chair.
 - Of the availability for review of the written evaluations by the Committee of Eligible Faculty and department chair.
 - Of the opportunity to submit written comments on the above material, within ten calendar days from receipt of the letter from the department chair, for inclusion in the dossier. The letter is accompanied by a form that the candidate returns to the department chair, indicating whether or not they will submit comments.
- The chair will provide a written response to any candidate comments that warrant a response for inclusion in the dossier.
- The chair will meet with the committee to explain recommendations contrary to the recommendation of the committee.
- To forward the completed dossier to the college office by that office's deadline of November 1. With the exception of associated faculty, all dossiers including those with a negative department evaluation must be forwarded to the College. Only the faculty member may stop the review process.
- To receive the Committee of Eligible Faculty's written evaluation and recommendation of candidates who are joint appointees from other tenure-initiating units, and to forward this material, along with the department chair's independent written evaluation and recommendation, to the head of the other tenure-initiating unit by the date requested.

C. Procedures for Compensated Associated Faculty

Adjunct faculty, associated faculty with tenure-track titles, and associated clinical faculty for whom promotion is a possibility following the promotion guidelines and procedures detailed in Section VI.B above, with the exception that the review does not proceed to the college level if the department chair's

recommendation is negative (a negative recommendation by the department chair is final in such cases), and does not proceed to the executive vice president and provost if the dean's recommendation is negative.

D. External Evaluations

External evaluations of research and scholarly activity are required for all promotion reviews in the College of Medicine for tenure-track, clinical (clinician scholar and clinician educator pathways), and research faculty. External evaluations of scholarly activity and research are not obtained for associated faculty unless the faculty member has been involved in a significant amount of scholarship. The decision to seek external evaluations for an associated faculty member will be made by the Department Chair after consulting with the candidate and the chair of the Appointments, Promotion, and Tenure Committee.

In alignment with the national standing of The Ohio State University, the Department of Surgery seeks evaluations from faculty affiliated with programs nationally recognized in their respective fields or subfields. The department encompasses a wide range of disciplines, including Cardiothoracic Surgery, General and Gastrointestinal Surgery, Pediatric Surgery, Surgical Oncology, Transplantation, Trauma, Critical Care, Burn, and Vascular Surgery. This diversity makes it impractical to create a fixed list of institutions or programs.

To ensure comprehensive and credible evaluations, the department prioritizes external reviewers from institutions within the Big Ten Academic Alliance and the Association of American Universities. When additional expertise is required beyond these affiliations, the College of Medicine will review and approve the selection of evaluators.

This flexible approach acknowledges the diverse research specialties of our faculty and the challenge of identifying experts across multiple niche fields. Given the need to secure three to five letters per faculty member—often requiring 8–10 requests—limiting evaluations to a fixed set of institutions would be insufficient.

A conflict of interest for external reviewers exists if the reviewer is or has been to the candidate:

- a) a thesis, dissertation, or postdoctoral advisee/advisor;
- b) a research collaborator, which includes someone who has been a co-author on a publication within the past 3 years, including pending publications and submissions;
- c) a collaborator on a project within the past 3 years, including current and planned collaborations;
- d) in a consulting/financial arrangement with the candidate within the past 3 years, including receiving compensation of any type (e.g., money, goods, or services);
- e) a relative or close personal friend; or
- f) in any relationship, personal or professional, that could reduce the reviewer's objectivity. Also excluded are reviewers from the same institution, those who had previous employment in the same institution within the past 12 months, or those who are being considered for employment at that institution.

A minimum of five credible and useful evaluations (three for clinical excellence and clinician educator pathways) must be obtained. A credible and useful evaluation:

- Is written by a person highly qualified to judge the candidate's research (or other performance, if relevant) who is not a close personal friend, research collaborator, or former academic advisor or postdoctoral or residency mentor of the candidate (see description of conflict of interest for external reviewers just above). Qualifications are generally judged on the basis of the evaluator's expertise, record of accomplishments, and institutional affiliation. They must be at the rank above

the candidate being considered. In the case of an assistant professor seeking promotion to associate professor with tenure, a minority of the evaluations may come from associate professors.

- Provide sufficient analysis of the candidate's performance to add information to the review. A letter's usefulness is defined as the extent to which the letter is analytical as opposed to perfunctory. Under no circumstances will "usefulness" be defined by the perspective taken by an evaluator on the merits of the case.
- In the event that the department is unable to obtain the required number of external evaluations, the department will document its efforts, noting the individuals who were contacted, how they were contacted, and the dates and number of times they were contacted. The department is to notify the college as soon as it becomes apparent that it will not be able to obtain the required letters in time for the meeting of the eligible faculty. The lack of five external letters (three for clinical excellence and clinician educator pathways) will not stop a mandatory review from proceeding but will halt a non-mandatory review from proceeding unless the candidate, P&T chair, and the department chair all agree in writing that it may proceed and agree that it will not constitute a procedural error.
- Faculty on the clinical excellence pathway moving to Associate Professor may have three internal letters of evaluation; faculty moving to Professor should have at least one external letter of evaluation out of the three total letters.

Since the department cannot control who agrees to write and or the usefulness of the letters received, at least twice as many letters are sought as are required, and they are solicited before the end of the academic year prior to the review year. This timing allows additional letters to be requested should fewer than five useful letters result from the first round of requests.

As described above, a list of potential evaluators is assembled by the Appointments, Promotion and Tenure Committee, the department chair, and the candidate. If the evaluators suggested by the candidate meet the criteria for credibility, a letter is requested from at least one of those persons. Faculty Rule [3335-6-04](#) requires that no more than half the external evaluation letters in the dossier be written by persons suggested by the candidate. In the event that the person(s) suggested by the candidate does not agree to write, neither the Office of Academic Affairs nor this department requires that the dossier contain letters from evaluators suggested by the candidate.

The department follows the Office of Academic Affairs suggested format for letters requesting external evaluations. A sample letter for tenure-track and research faculty can be found [here](#). A sample letter for clinical faculty can be found [here](#).

Under no circumstances may a candidate solicit external evaluations or initiate contact in any way with external evaluators for any purpose related to the promotion review. If an external evaluator should initiate contact with the candidate regarding the review, the candidate must inform the evaluator that such communication is inappropriate and report the occurrence to the Department Chair, who will decide what, if any, action is warranted (requesting permission from the Office of Academic Affairs to exclude that letter from the dossier). It is in the candidate's self-interest to assure that there is no ethical or procedural lapse, or the appearance of such a lapse, in the course of the review process.

All solicited external evaluation letters that are received must be included in the dossier. If concerns arise about any of the letters received, these concerns may be addressed in the department's written evaluations or brought to the attention of the Office of Academic Affairs for advice.

VII. Promotion and Tenure and Reappointment Appeals

Faculty members who believe they have been evaluated improperly for tenure, promotion, or reappointment may appeal a negative decision to the University Senate Committee on Academic Freedom and Responsibility.

Performance that is adequate for annual reappointment may not be adequate for the granting of promotion or tenure with promotion for faculty on the tenure track or, in the case of clinical or research faculty, for securing a reappointment.

Faculty Rule [3335-6-05](#) sets forth general criteria for appeals of negative promotion and tenure decisions.

Appeals alleging improper evaluation are described in Faculty Rule [3335-5-05](#).

Disagreement with a negative decision is not grounds for appeal. In pursuing an appeal, the faculty member is required to document the failure of one or more parties to the review process to follow written policies and procedures.

VIII. Reviews in the Final Year of Probation

Faculty Rule [3335-6-05](#) sets forth the conditions of and procedures for a Seventh-Year Review for a faculty member denied tenure as a result of a sixth-year (mandatory tenure) review.

In most instances, a decision to deny promotion and tenure in the penultimate probationary year (11th year for faculty members with clinical responsibilities, 6th year for those without clinical responsibilities) is considered final. However, in rare instances in which there is substantial new information regarding the candidate's performance that is relevant to the reasons for the original negative decision, a seventh (or twelfth) year review may be conducted. The request for this review must come from the eligible faculty and the department chair and may not come from the faculty member himself/herself/themselves.

If a terminal year review is conducted by this Department and the College, it will be made consistent with this document, the College's Appointments, Promotion and Tenure document, and other relevant policies, procedures, practices, and standards established by: (1) the College, (2) the *Rules of the University Faculty*, (3) the Office of Academic Affairs, including the Office of Academic Affairs Policies and Procedures Handbook, and (4) the Office of Human Resources.

IX. Procedures for Student and Peer Evaluation of Teaching

A. Student Evaluation of Teaching

For formal University courses taught by members of this department, the University's Student Evaluation of Instruction (SEI) should be utilized to assess performance. For all other courses and teaching activities involving students and residents, departmentally/college-based (electronic) assessment tools are to be employed. Faculty members should choose a day late in the semester when attendance is likely to be high if students are asked to complete the evaluation using a mobile application. The faculty member must leave the classroom during the time allotted for completing the evaluation. The faculty member should reiterate to students that the feedback provided in the evaluations is used both for performance reviews and to provide feedback that can be taken into account in future teaching.

B. Peer Evaluation of Teaching

The Department Chair oversees the peer evaluation of teaching process in collaboration with the Vice Chair for Education and other relevant faculty.

Each faculty member in the Department of Surgery is required to undergo peer review based on their current faculty rank as follows:

- At least once per year for all probationary tenure-track faculty, probationary clinical faculty, tenured associate professors, non-probationary associate professors on the clinical faculty, and associated faculty.
- At least once every two years for all tenured professors and non-probationary clinical professors.

While faculty members may self-select their peer reviewers, the Department Chair serves as the ultimate overseer of the peer evaluation of teaching process and has final authority in approving all peer reviewers. Faculty members may propose a colleague or an educational expert to observe their teaching activities, which can include classroom lectures, small group discussions, ward rounds, clinical teaching, or other instructional settings. Evaluations of lectures such as Grand Rounds, which are required for CME credit, may also fulfill the peer review requirement.

Once approved by the Chair, peer reviewers provide written feedback and meet with the faculty member to discuss strengths and areas for improvement. Faculty members may also seek guidance from the Executive Vice Chair for Academic Affairs or the Vice Chair for Education to identify suitable reviewers and appropriate evaluation tools.

The Department Chair or faculty member may request additional peer evaluations. Given that many evaluation opportunities occur outside of OSU, faculty members are responsible for identifying appropriate evaluators for external teaching activities such as national conferences or Grand Rounds. However, all selected peer reviewers must align with the faculty member's teaching responsibilities—such as bedside teaching, residency and fellowship program lectures, CME courses, or formal didactic sessions—and must be approved by the Chair.

The evaluator submits a complete review of the type of teaching conference (for example grand rounds) that they observed and should focus on such issues as the quality and effectiveness of the instructional materials and assessment tools and the appropriateness of the approach relative to current disciplinary knowledge.

During the annual review, the department chair will discuss the plan for peer evaluation for the upcoming year discuss past evaluations with the candidate and suggest improvement strategies if needed. Peer review documents become part of the faculty member's permanent record. These evaluations are integral to the annual review process and will be included in the faculty member's dossier for reappointment, promotion, and tenure considerations.

Faculty seeking formative reviews should seek the services of the [Michael V. Drake Institute for Teaching and Learning](#).

Appendix: Statement on Professional Ethics

1. Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon them. Their primary responsibility to their subject is to seek and to state the truth as they see it. To this end professors devote their energies to developing and improving their scholarly competence. They accept the obligation to exercise critical self-discipline and judgment in using, extending, and transmitting knowledge. They practice intellectual honesty. Although professors may follow subsidiary interests, these interests must never seriously hamper or compromise their freedom of inquiry.
2. As teachers, professors encourage the free pursuit of learning in their students. They hold before them the best scholarly and ethical standards of their discipline. Professors demonstrate respect for students as individuals and adhere to their proper roles as intellectual guides and counselors. Professors make every reasonable effort to foster honest academic conduct and to ensure that their evaluations of students reflect each student's true merit. They respect the confidential nature of the relationship between professor and student. They avoid any exploitation, harassment, or discriminatory treatment of students. They acknowledge significant academic or scholarly assistance from them. They protect their academic freedom.
3. As colleagues, professors have obligations that derive from common membership in the community of scholars. Professors do not discriminate against or harass colleagues. They respect and defend the free inquiry of associates, even when it leads to findings and conclusions that differ from their own. Professors acknowledge academic debt and strive to be objective in their professional judgment of colleagues. Professors accept their share of faculty responsibilities for the governance of their institution.
4. As members of an academic institution, professors seek above all to be effective teachers and scholars. Although professors observe the stated regulations of the institution, provided the regulations do not contravene academic freedom, they maintain their right to criticize and seek revision. Professors give due regard to their paramount responsibilities within their institution in determining the amount and character of work done outside it. When considering the interruption or termination of their service, professors recognize the effect of their decision upon the program of the institution and give due notice of their intentions.
5. As members of their community, professors have the rights and obligations of other citizens. Professors measure the urgency of these obligations in the light of their responsibilities to their subject, to their students, to their profession, and to their institution. When they speak or act as private persons, they avoid creating the impression of speaking or acting for their college or university. As citizens engaged in a profession that depends upon freedom for its health and integrity, professors have a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom.