

DEPARTMENT OF ORTHOPAEDICS

APPOINTMENTS, PROMOTION, AND TENURE

DEPARTMENT OF ORTHOPAEDICS
THE OHIO STATE UNIVERSITY
COLUMBUS, OHIO
OAA Approved May 27, 2019



Wexner
Medical
Center

APPOINTMENTS, PROMOTION AND TENURE
Criteria and Procedures for the DEPARTMENT OF ORTHOPAEDICS

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I. PREAMBLE

This document is a supplement to Chapters 6 and 7 of the *Rules of the University Faculty* located at <http://trustees.osu.edu/bylaws-and-rules/faculty-rules>, the Office of Academic Affairs procedural guidelines for promotion and tenure reviews located at <http://oaa.osu.edu/policies-and-procedures-handbook>, and any additional policies established by The Ohio State University (OSU).

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 (4) years and on the appointment or reappointment of the department chair.

This document must be approved by the Dean of the college 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.

All individuals considered for appointment, reappointment, promotion and/or tenure within the Department of Orthopaedics must have a record of excellence in teaching, research and scholarship, and service in accordance with the guidelines described in this document, and must also demonstrate conduct consistent with the “Statement on Professional Ethics” of the American Association of University Professors [Appendix B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” put forth by the American Academy of Orthopaedic Surgery [Appendix C].

The Department of Orthopaedics endorses the University’s recognition of the value of diverse contributions by individual faculty members toward the realization of the overall mission of the institution. For example, within the Tenure Track there may be many different patterns of scholarly activity that reflect a range of faculty interests, skills, and accomplishments. These different patterns of performance may result in variation in emphasis between teaching, scholarship and service. Although faculty members may choose to place greater emphasis on certain aspects of scholarly activity, and less emphasis on others, the Department requires that the faculty member demonstrate excellence in all areas.

In addition, faculty members' activities may change over time, and thus may be consistent with different patterns of performance throughout the course of their careers. All of these different patterns of faculty activity will still lead to consideration for, and granting of, promotion and/or tenure, provided that the Department's standard of excellence in all areas (including demonstration of national or international impact and recognition) as appropriate to the faculty level, is met.

Decisions considering appointment, reappointment, and promotion and tenure will be free of discrimination in accordance with the university's policy on equal opportunity (<http://hr.osu.edu/policy/policy110.pdf>).

II. DEPARTMENT MISSION

Orthopaedics, as practiced at The Ohio State University Medical Center, is defined as a practice of medicine dealing with but not limited to:

- Provision of the highest quality of orthopaedic patient care by a medical staff with the highest of qualifications and experience.
- Dedication to the teaching of medical students, residents in Orthopaedics or Podiatry, fellows in any appropriate orthopaedic subspecialty, and residents and fellows in related disciplines to produce the highest caliber future health care providers.
- Performance of research and scholarly investigation of orthopaedic problems and the underlying science and engineering in order to identify the causes, treatment, and prevention of orthopaedic problems.
- Provision of public service to the community in the areas of education, treatment and recovery options.

To achieve this mission, all faculty members are expected to participate in and contribute to the teaching, service, and research goals of the department in a manner that is consistent with the nature of their faculty appointment. Tenure-track Faculty members are expected to have responsibilities in all aspects of the academic mission, and are expected to have a relative emphasis of their efforts on research or other scholarly accomplishments. Clinical faculty members are also expected to have responsibilities in all aspects of the academic mission, with a relative emphasis on teaching and service. Research faculty members are also expected to have responsibilities in all aspects of the academic mission, with a relative emphasis on research, and service related to the Department's research mission. The department strives to enhance the quality of its endeavors by fostering the development and improvement of the faculty members.

The Department members, including both those with medical and graduate degrees, conduct basic and clinical research. Laboratories associated with the Department are active in the instruction of medical students, residents 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 regularly 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 orthopaedic surgery and its associated subspecialties. 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 subspecialties and fellowship programs; these divisions are responsible for providing care to patients whose medical problems are encompassed by the specialty or subspecialty. 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 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 and professional organizations in a variety of volunteer and 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 regular reassessments of the effectiveness of its efforts in teaching, research and service. A comprehensive evaluation is performed and published as the Department of Orthopaedics Annual Report.

A critical component of the Department 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

1. Tenure-track Faculty

The eligible faculty for appointment reviews of tenure-track faculty consists of all tenure-track faculty whose tenure resides in the department.

The eligible faculty for reappointment, promotion and tenure, and promotion reviews of tenure-track faculty consists of all tenured faculty of higher rank than the candidate whose tenure resides in the department excluding the department chair, the Dean and assistant and associate Deans of the college, the Executive Vice President and Provost, and the President.

For tenure reviews of probationary professors, eligible faculty are tenured professors whose tenure resides in the department excluding the department chair, the Dean and assistant and associate Deans of the college, the Executive Vice President and Provost, and the President.

Because of the limited number of tenure track faculty within the Department of Orthopaedics, outside tenured professors are asked to serve on the departmental AP&T Committee on an *ad hoc* basis.

2. Clinical Faculty

The eligible faculty for reappointment, contract renewal, and promotion of clinical faculty consists of all tenured faculty of higher rank than the candidate whose tenure resides in the department and all nonprobationary clinical faculty of higher rank than the candidate whose primary appointment is in the department excluding the department chair, the Dean and assistant and associate Deans of the college, the Executive Vice President and Provost, and the President.

3. Research Faculty

The eligible faculty for reappointment, contract renewal, and promotion reviews of research faculty consists of all tenured faculty of higher rank than the candidate whose tenure resides in the department, all nonprobationary clinical faculty of higher rank than the candidate whose primary appointment is in the department, and all nonprobationary research faculty whose primary appointment is in the department excluding the department chair, the Dean and assistant and associate Deans of the college, the Executive Vice President and Provost, and the President.

4. Associated Faculty

The eligible faculty for appointment reviews of associated faculty consists of all tenure track faculty whose tenure resides in the department, all clinical faculty whose primary appointment is in the department, and all research faculty whose primary appointment is in the department.

The eligible faculty for reappointment and promotion reviews of associated faculty consists of all tenured faculty of higher rank than the candidate whose tenure resides in the department, all nonprobationary clinical faculty of higher rank than the candidate whose primary appointment is in the department, and all non-probationary research faculty whose primary appointment is in the department excluding the department chair, the dean and assistant and associate deans of the college, the executive vice president and provost, and the president.

5. Conflict of Interest

A conflict of interest exists when an eligible faculty member is related to a candidate or has a comparable close interpersonal relationship, 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 so extensively with the candidate that an objective review of the candidate's work is not possible. Generally, faculty members who have collaborated with a candidate on at least 50% of the candidate's published work since the last promotion will be expected to withdraw from a promotion or appointment 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 Dean, will appoint a faculty member from another department within the college.

B. Promotion and Tenure Committee

The Department has a Promotion and Tenure Committee that assists the Committee of the Eligible Faculty in managing the personnel and promotion and tenure issues. The committee consists of at least three tenure track faculty at or above the level of the candidates seeking promotion. The committee's chair and membership are appointed by the department chair. The term of service is three (3) years, with reappointment possible. The chair of the Promotion and Tenure Committee will also serve as the chair of the Committee of the Eligible Faculty.

When considering cases involving clinical faculty the Promotion and Tenure Committee may be augmented by additional nonprobationary clinical faculty member(s).

When considering cases involving research faculty the Promotion and Tenure Committee may be augmented by one nonprobationary clinical faculty member and one nonprobationary research faculty member.

C. Quorum

The quorum required to discuss and vote on all personnel decisions is two-thirds (2/3) of the eligible faculty not on an approved leave of absence. A member of the eligible faculty on Special Assignment may be excluded from the count for the purposes of determining quorum only if the department chair has approved an off-campus assignment. 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 votes. 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.

1. Reappointment, Promotion and Tenure, Promotion, and Contract Renewal

A positive recommendation from the eligible faculty for reappointment, promotion and tenure, promotion, and contract renewal is secured when a simple majority of the votes cast are positive.

IV. APPOINTMENTS

The *Rules of the University Faculty* permit the Department of Orthopaedics to make appointments in the following categories: Tenure-track; Clinical; Research; and Associated. The latter contains Associated (clinical) and Adjunct faculty. The appropriate category for initial appointment to the Department of Orthopaedics must reflect these differing qualifications, be congruent with the job description of the position within the Department, and be consistent with both the short-term and long-term career plans of the individual. The department chair should carefully evaluate and align the career goals of the faculty candidate and the department needs in determining the most appropriate category for the faculty member.

Faculty appointments in the Department of Orthopaedics 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 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 cancelled or continued, as appropriate to the circumstances.

A. Criteria

1. Tenure-track Faculty

Tenure-track appointments exist for those faculty members who primarily strive to achieve sustained evidence of excellence in the discovery and dissemination of new knowledge, as demonstrated by national and international recognition of their scholarship and successful competition for extramural funding such as that provided by the National Institutes of Health or similar sources including federal or state agencies, charitable foundations or industry. This may include participation of as a principal or a co-investigator on such extramurally funded grants. Although excellence in teaching and outstanding service to The Ohio State University is required, these alone are not sufficient for progress on this track.

Faculty appointed on the tenure track must have the potential for excellence in all three critical areas: teaching, research 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 so as to ensure that the faculty candidate has clearly and convincingly met or exceeded applicable criteria in teaching, scholarship, and service. Each candidate for appointment should undergo an appropriate faculty review by the Department.

a. Instructor of Orthopaedics on the Tenure Track

Under certain circumstances, the Department may choose to appoint a new faculty member at the **Instructor** level. An appointment to the rank of Instructor is always probationary. During the probationary period a faculty member does not have tenure and is considered for reappointment annually.

This title is appropriate for individuals who embody most of the characteristics listed below under Assistant Professor, but have not completed the terminal degree at the time of appointment.

An appointment at the Instructor level is limited to three years. If an Instructor has not completed requirements for promotion to the rank of assistant professor by the end of the third year of appointment, the third year is a terminal year of employment. Upon promotion to assistant professor, the faculty member may request prior service credit for time spent as an instructor. 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 once granted.

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.
- 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.
- 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 B] and the "Principles of Medical Ethics and Professionalism in Orthopaedic Surgery" by the American Academy of Orthopaedic Surgeons [Appendix C].
- 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.

b. Assistant Professor of Orthopaedics on the Tenure Track

An appointment to the rank of Assistant Professor is always probationary. 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. An Assistant Professor must be reviewed for promotion and tenure no later than the date specified in the letter of offer; however, promotion and tenure may be granted at any time during the probationary period when the faculty member's record of achievement so merits. Similarly, a probationary appointment may be terminated at any time subject to the provision of University Rule [3335-6-08](#) and the provision of paragraphs (6), (H), and (I) of University Rule [3335-6-03](#).

Consistent with Faculty Rule [3335-6-09](#), faculty members with significant patient clinical service responsibilities are granted an extended probationary period of up to eleven (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 eleventh (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 appointments at the rank of Assistant Professor, prior service credit of up to three years may be granted for work experience at the time of the initial appointment. Doing so requires the approval of the eligible faculty, department chair, Dean, and Executive Vice President and Provost. Prior service credit shortens a probationary period by the amount of the credit and once granted cannot be revoked.

Criteria for appointment at the rank of Assistant Professor in the Tenure Track include:

- An earned doctorate or other terminal degree in the relevant field of study or possession of equivalent experience.
- 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 and a strong likelihood of independent extramural research funding.
- 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 B] and the "Principles of Medical Ethics and Professionalism in Orthopaedic Surgery" by the American Academy of Orthopaedic Surgeons [Appendix C].
- 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.

The following are examples of characteristics and accomplishments to be considered of individuals worthy of appointment as assistant professor in the areas of teaching, research and

service. Accomplishments in the area of program development will be included within the categories of teaching and service where appropriate.

Teaching (M.D., D.O., or equivalent)

1. Evidence of teaching competence and accomplishments during residency training and/or prior employment.
2. Teaching awards achieving during residency training or prior employment.
3. Participation in the development of educational materials and programs.

Teaching (Ph.D. or equivalent)

1. Evidence of teaching competence and accomplishments during graduate school, postdoctoral training, and/or prior employment.
2. Teaching awards obtained during postdoctoral training or prior employment.
3. Participation in the development of educational materials and programs.

Research and Scholarship (M.D., D.O., or equivalent)

1. Publications in peer-reviewed journals.
2. Presentations of scholarly work at local, regional, national or international forums.
3. A commitment to seek peer-reviewed funding from federal, professional, academic, or industrial sources
4. Initial development of a specialized area of research or scholarship.
5. Co-authorship of book chapters or other scholarly materials.

Research and Scholarship (Ph.D. or equivalent)

1. Publications in peer-reviewed journals.
2. Presentations of scholarly work at local, regional, national or international forums.
3. A commitment to seek peer-reviewed funding from federal, professional, academic, or industrial sources
4. Receipt of peer-reviewed research funding from federal, professional or academic sources.
5. Initial development of reputation for specific area of research or scholarship.
6. Authorship of books, book chapters or other scholarly materials.

Service (M.D., D.O., or equivalent)

1. Attainment of the M.D., D.O. (or suitable equivalent) degree.
2. Satisfactory completion of residency training in an area appropriate to the appointment.
3. Evidence during residency training or prior employment of a high level of clinical competence.
4. Demonstrated adherence to the values contained in the “Statement on Professional Ethics” by the American Association of University Professors [Appendix B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” by the American Academy of Orthopaedic Surgeons [Appendix C].
5. Qualifications necessary for attainment of appropriate licensure and medical staff appointment(s).

Service (Ph.D. or equivalent)

1. Attainment of Ph.D. (or suitable equivalent) degree.
2. Satisfactory completion of postdoctoral training in area suitable to the appointment.
3. Evidence during prior training or employment of research competence.
4. Demonstrated adherence to the values contained in the “Statement of Professional Ethics” of the American Association of University Professors.

c. Associate Professor of Orthopaedics on the Tenure Track

Criteria for **initial appointment** to the rank of Associate Professor with tenure are identical to the Department’s criteria for **promotion** to Associate Professor with Tenure, as detailed in Section VII.A.1.a. of this document.

d. Associate Professor of Orthopaedics without 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 Office of Academic Affairs. Appointment at the associate professor level without tenure is expected to be used only on occasions when the department Promotion and Tenure Committee feels there is a need to further evaluate the candidate prior to consideration for tenure. For faculty without patient clinical service responsibilities the probationary period may not exceed four (4) years. For faculty with patient clinical service responsibility, the probationary period may not exceed six (6) 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 without tenure is probationary, consistent with the provisions of Section V.A [Annual Review Procedures] of this document. During a probationary period a faculty member does not have tenure and is considered for reappointment annually.

Criteria for **initial appointment** to the rank of Associate Professor without tenure are identical to the Department’s criteria for **promotion** to Associate Professor without Tenure, as detailed in Section VII.A.1.b. of this document.

e. Professor of Orthopaedics on the Tenure Track

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 VII.A.1.c. of this document.

2. Clinical Faculty

Clinical appointments are equivalent in importance to the College of Medicine as the Tenure-track appointments. Clinical appointments exist 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 Tenure-track appointments within a defined

probationary period. For this reason, the nature of scholarship 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. Faculty members may choose to distinguish themselves through several portfolios of responsibility including Clinician-Educator and Clinician-Scholar 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. Clinical faculty members are not eligible for tenure and may not participate in promotion and tenure matters of tenure track faculty.

All clinical appointments 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. At the time of appointment, probationary Clinical faculty members will be provided with all pertinent documents detailing Department, College of Medicine, and University promotion policies and criteria. If these documents are revised during the probationary period, faculty members will be provided with copies of the revised documents.

In general, appointments in clinical faculty will be for five (5) years. Contracts will be for a period of at least three (3) years and for no more than five (5) years. Under special circumstances, three (3) or four (4) year contracts may be offered. The initial contract is probationary, and a faculty member will be informed by the end of each probationary year if he or she will be reappointed for another year. Review for reappointment will be performed in the penultimate 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. Length of the subsequent contract will usually be five (5) years, but will be negotiated at the time of reappointment. 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. 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. The following paragraphs will outline the basic criteria for initial appointments to the Clinical faculty.

The College of Medicine permits special consideration of individuals in the Clinical Faculty who choose to focus their activities almost exclusively on the scholarship of practice. In general, these will be faculty members who are assigned 90% or more of their time to clinical care or clinically related administrative duties. For these select individuals, Departments are authorized to establish special criteria for promotion which vary somewhat from the more traditional standards for the remainder of the Clinical Faculty, and which permit promotion without personal national recognition. The Department of Orthopaedics will continue to require the more traditional standards (including national recognition) for its faculty members in the Clinical Faculty, but reserves the right to amend this document in the future to include special standards for promotion of faculty members with heavy (90%) clinical responsibilities, consistent with College of Medicine guidelines.

Just as in the tenure track, the appointment of clinical faculty members 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. Clinical faculty must be individuals with the potential for excellence principally in the areas of teaching and service. Scholarly activities will be expected of the faculty member but will receive substantially less weight in appointment and promotion decisions.

In this section, criteria for initial appointment in the clinical faculty at the rank of assistant professor will be outlined in detail. Appointments at higher ranks shall be based upon fulfilling the same criteria described in section VII.A.2, which relate to promotion to the rank of associate professor and professor in the clinical faculty.

a. Instructor of Clinical Orthopaedics

Appointment to the rank of 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. 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. 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 Professor.

Instructor appointments are limited to four (4) years, with the fourth year being the terminal year. If the instructor has not completed requirements for promotion to the rank of assistant professor by the beginning 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.

When an Instructor is promoted to Assistant Professor, the years of service as an Instructor will not be included in the probationary period. A new letter of offer with a probationary period of three (3) to five (5) years will be issued. Candidates for appointment to the rank of Instructor will have, at a minimum:

- Anticipated receipt of an earned doctorate or other terminal degree in the relevant field of study.
- Evidence of potential for contributions to scholarship as demonstrated by activities such as publications or presentation of abstracts as primary or secondary author. The individual may not as yet have demonstrated substantial evidence of independent contributions as reflected by first author publications and/or presentations.
- 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 B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” by the American Academy of Orthopaedic Surgeons [Appendix C].

b. Assistant Professor of Clinical Orthopaedics

A candidate for appointment as **Assistant Professor** should have a demonstrated record of impact and recognition at a local or regional level. The following will constitute characteristics of individuals worthy of appointment as assistant professor in the areas of teaching, research and service. Accomplishments in the area of program development will be included within the categories of teaching and service where appropriate.

Teaching (M.D., D.O., or equivalent)

1. Evidence of teaching ability and accomplishments during residency training or prior employment.
2. Teaching awards achieved during residency training or prior employment.
3. Participation in the development of educational materials and programs.

Teaching (Ph.D. or equivalent)

1. Evidence of teaching competence and accomplishments during postdoctoral training and/or prior employment.
2. Teaching awards obtained during postdoctoral training or prior employment.
3. Participation in the development of educational materials and programs.

Research and Scholarship (M.D., D.O., or equivalent, Ph.D.)

1. Publications in peer-reviewed journals.
2. Presentations of scholarly work at local, regional, national or international forums.
3. Initial development of a specialized area of research or scholarship.
4. Co-authorship of book chapters or other scholarly materials.

Service (M.D., D.O., or equivalent)

1. Attainment of the M.D., D.O. (or suitable equivalent) degree.
2. Satisfactory completion of residency training in an area appropriate to the appointment.
3. Evidence during residency training or prior employment of a high level of clinical competence.
4. Demonstrated adherence to the values contained in the “Statement of Professional Ethics” of the American Association of University Professors [Appendix B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” by the American Academy of Orthopaedic Surgeons [Appendix C].
5. Qualifications necessary for attainment of appropriate licensure and medical staff appointment(s).

Service (Ph.D. or equivalent)

1. Attainment of Ph.D. (or suitable equivalent) degree.
2. Satisfactory completion of postdoctoral training in area suitable to the appointment.

3. Evidence during prior training or employment of research competence.
4. Demonstrated adherence to the values contained in the Statement of Professional Ethics of the American Association of University Professors.

c. Associate Professor of Clinical Orthopaedics

Criteria for **initial appointment** to the rank of Associate Professor are identical to the Department's criteria for **promotion** to Associate Professor, as detailed in Section VII.A.2. of this document.

d. Professor of Clinical Orthopaedics

Criteria for **initial appointment** to the rank of Professor of Clinical Orthopaedics are identical to the Department's criteria for **promotion** to Professor, as detailed in section VII.A.2. of this document

3. Research Faculty

Research Appointments exist for faculty members who focus principally on scholarship. Notably, the standards for scholarly achievement are comparable to those for Tenure-track appointments for each faculty rank. A Research faculty member may, but is not required to, participate in limited educational and service activities. Research faculty members are expected to contribute to the Department's research mission and are expected to demonstrate excellence in scholarship as reflected by high quality peer-reviewed publications and successful competition for extramural funding.

Research appointments are made such that each new appointment must enhance, or have strong potential to enhance, the quality of the Department. Research faculty must comprise no more than twenty per cent (20%) of the number of Tenure-track faculty in the Department. Contracts will be for a period of at least one (1) year and for no more than five (5) years, and must explicitly state the expectations for salary support. In general, research faculty appointments will require one hundred per cent (100%) salary recovery after a three (3) year period. This expectation may be lessened or waived in light of other contributions to the department's mission assigned by the Chair and provided by the faculty member. It is expected that salary recovery will be derived from extramural funds. The initial contract is probationary, and a faculty member will be informed by the end of each probationary year as to whether he or she 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. In addition, the terms of a contract may be renegotiated at the time of reappointment.

Research faculty are eligible to serve on University committees and task forces but not on University governance committees. Research faculty also are eligible to advise and supervise graduate and postdoctoral students and to be a 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 XV the [Graduate School Handbook](#).

Research Assistant Professor

A candidate should have a demonstrated record of research expertise at a local or regional level. The following will constitute characteristics of individuals worthy of appointment as research assistant professor in the areas of teaching, research and service.

Teaching

No requirements

Research and Scholarship

1. Publications in peer-reviewed journals.
2. Presentations of scholarly work at local, regional, national or international forums.
3. Commitment to seek peer-reviewed research funding from federal, professional, academic, charitable, or industrial sources
3. Receipt of peer-reviewed research funding from federal, professional, academic, charitable, or industrial sources.
4. Initial development of reputation for specific area of research or scholarship.
5. Authorship of books, book chapters or other scholarly materials.

Education

1. Attainment of Ph.D. (or suitable equivalent) degree.
2. Satisfactory completion of postdoctoral training in area suitable to the appointment.
3. Evidence during prior training or employment of research competence.
4. Demonstrated adherence to the values contained in the “Statement of Professional Ethics” of the American Association of University Professors [Appendix B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” by the America Academy of Orthopaedic Surgeons [Appendix C].

Research Associate Professor

The criteria for **initial appointment** to the rank of Associate Professor are identical to those criteria for **promotion** to this rank as outlined in Section VII.A.4. of this document.

Research Professor

The criteria for **initial appointment** to the rank of Professor are identical to those criteria for **promotion** to this rank as outlined in Section VII.A.4. of this document.

4. Associated Faculty

Associated appointments exist for faculty members who focus on a specific and well-defined aspect of the College and Department mission, most commonly outstanding teaching and exemplary clinical care. Associated faculty may be involved in scholarly pursuits and service to the College and the University, but this is not required for advancement.

Associated Faculty, as defined in the *Rules of the University Faculty* [3335-5-19](#) (D), includes “persons with adjunct titles, clinical practice titles, visiting titles, and lecturer titles,” plus “professors, associate professors, assistant professors, and instructors who serve on appointments totaling less than fifty per cent service to the university.” 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. Associated appointments are for periods of up to three years. Renewal decisions are made annually and are based upon the faculty member’s documented continued contributions to the Department. There is no presumption of renewal.

Associated faculty members are appointed based on participation in the teaching, patient care, academic, or leadership missions of the Department of Orthopaedics. Associated faculty members may focus on a limited number of the aspects of the Department’s mission and may have less than a 50% appointment. These members of the faculty may be paid or unpaid. The criteria for appointment and promotion differ from those of the tenure-track and clinical faculty, consistent with the more focused mission of these appointments.

Associated faculty with patient care responsibilities will be given clinical practice titles (e.g., Clinical Instructor of Practice, Clinical Assistant Professor of Practice) and those without clinical responsibilities will be given adjunct titles (e.g., Adjunct Assistant Professor, Adjunct Associate Professor) reflective of their Associated faculty status.

Within the Department of Orthopaedics, criteria for appointment and promotion of Associated faculty shall be identical to those for clinical faculty members in the categories of teaching and service. There shall be no requirement for Research and Scholarship. (For assistant professor, see section IV; for associate professor and professor, see section VII).

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

- Clinical practice faculty must be a licensed physician or health care provider.
- Have written support for appointment by the appropriate Division Director Chair or Department Chair to which they are appointed.
- Have significant and meaningful interaction in at least one of the following mission areas of the Department of Orthopaedics:
 - a) Teaching of medical students, residents, or fellows. For community physicians providing outpatient teaching of medical students, meaningful interaction consists of supervising medical students and/or residents for at least one month out of the year.
 - b) Research: These faculty members may collaborate with a Department faculty member in research projects or other scholarly activities.

- c) Administrative roles within the Department including participation in committees or other leadership activities (administration of residency program at an outside hospital).

5. Courtesy Appointments for Faculty

The Department of Orthopaedics may grant courtesy appointments to faculty members from another College or University department. A faculty member who is granted such an appointment must possess the credentials and skills that will have the potential to enhance the mission of the Department of Orthopaedics in teaching, research and/or service. Continued appointment in a courtesy capacity requires evidence of substantial ongoing contributions to the Department of Orthopaedics, commensurate with the faculty rank determined by the primary department. Such appointments shall require approval from the primary department for the initial appointment and for promotion. The faculty rank in the Department of Orthopaedics shall be identical to that held in the tenure initiating unit. Such appointments shall entail no salary from the Department of Orthopaedics and are available only to tenure-track, clinical, and research faculty members.

6. TRANSFER FROM THE TENURE TRACK

Transfers from the tenure tracks is permitted only under the strict guidelines detailed in the paragraphs below, per University Rules [3335-7-09](#) and [3335-7-38](#). 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.

Transfer: Tenure Track Faculty to Clinical Faculty

If tenure-track faculty members' activities become more aligned with the criteria for appointment to the Clinical Faculty, they may request a transfer. 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.

Transfer: Tenure Track Faculty to Research Faculty

If tenure-track faculty members wish to engage exclusively in research, without the multiple demands required of the tenure track, they may request a transfer. 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.

Transfer: Clinical or Research Faculty to Tenure Track Faculty

Transfer from the Clinical Faculty or Research Faculty to the Tenure Track is not permitted, but Clinical and Research faculty are eligible to apply for Tenure Track positions through a competitive national search.

B. Appointment Procedures

All searches in the Department of Orthopaedics must conform to the following guidelines:

- All searches should be conducted in accordance with the guidelines of the College of Medicine and Ohio State University.
- Searches must be undertaken only after an assessment of need, and may begin only after the approval of the Department Chair has been obtained. Searches should specify what type of appointment.
- Searches should be structured with specific job descriptions and carefully-outlined expectations.
- All searches should proceed following selection of an appropriate search committee. There must be substantial faculty involvement in the search.
- A vigorous effort must be made to ensure a diverse pool of highly qualified candidates.

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 and research faculty
- appointments at senior rank or with prior service credit
- hiring faculty from other institutions after April 30
- appointment of foreign nationals

A draft letter of offer to a faculty candidate must be submitted to the Office of Academic Affairs in the College of Medicine for review and approval. The draft letter of offer will be reviewed for consistency with the essential components required by the Office of Academic Affairs [Policies and Procedures Handbook](#), and by the College. Templates for letters of offer are found online on [OneSource](#). The departments will access these templates for each letter written to ensure that it uses the most current approved version.

Candidates should be provided with information regarding the programmatic goals of the Department of Orthopaedics and Pattern of Administration of the Department and of the University practice entity prior to their 2nd visit. Searches at the associate professor, professor, or chair level should be made only for candidates who match very specific needs of the Department (and division). The structure of the search committees at these levels should be more carefully tailored to the specifics of these solicitations. All search committees must include at least one member of the specific division and at least one faculty member from another Department. Appointments at a senior level (associate professor and above) require a vote of the eligible faculty and external letters of evaluation.

All offers at the associate professor and professor ranks, with or without tenure, and all offers of prior service credit require the prior approval of the Dean and the Office of Academic Affairs. Foreign nationals who lack permanent residency status may be appointed to a senior rank and approved for tenure, if appropriate, but the university will not grant tenure in the absence of

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

The following sections provide general guidelines for searches in the different faculty categories.

1. Tenure-track Faculty

A national search is required to ensure a diverse pool of highly qualified candidates for all tenure-track positions. Exceptions to this policy must be approved in advance by the college and 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 provides approval for the Department to commence a search process. 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 inclusive hiring practices training available through the college with resources from the Office of Diversity and Inclusion. Implicit bias training, also strongly encouraged, is available through the Kirwan Institute for the Study of Race and Ethnicity.

The search committee:

- Appoints a Diversity Advocate who is responsible for providing leadership in assuring that vigorous efforts are made to achieve a diverse pool of qualified applicants.
- Develops a search announcement for internal posting in the University Personnel Postings through the Office of Human Resources Employment Services (hr.osu.edu) and external advertising, subject to the Department Chair's approval.
- Develops and implements a plan for external advertising and direct solicitation of nominations and applications. If there is any likelihood that the applicant pool will include qualified foreign nationals, the search committee must advertise using at least one 30-day online ad is published in one of the discipline's academic journals. The University does not grant tenure in the absence of permanent residency ("green card"), and strict U.S. Department of Labor guidelines do not permit sponsorship of foreign nationals for permanent residency unless the search process resulting in their appointment to a Tenure Track position included an advertisement in a nationally circulated print journal.
- Screens applications and letters of recommendation and presents its findings to the Department Chair.

On-campus interviews are arranged by the search committee chair. Interviews with candidates must include opportunities for interaction with faculty groups, including the search committee; graduate students or residents, where appropriate; the Department Chair; and the Dean or designee. In addition, it is recommended that all candidates make a presentation to the faculty, students, and/or residents on their scholarly activity. All candidates interviewing for a particular position must follow the same interview format.

Following completion of on-campus interviews, the Search Committee presents its findings and makes its recommendations to the Department Chair or the individual who has commissioned the search, who then proceeds with the offer of an appointment.

If the offer involves senior rank (Associate Professor or above), the eligible faculty members must also vote on proposed rank. If the offer may involve prior service credit, the eligible faculty members vote on the appropriateness of such credit.

2. Clinical Faculty

Searches for initial appointments to the Clinical faculty should follow the same procedures as those utilized by the Department and the College of Medicine for Tenure Track faculty, with the exception that the candidate's presentation during the on-campus interview may be based on clinical/professional practice as well as scholarly activity. A national search is required to ensure a diverse pool of highly qualified candidates for all clinical positions. Exceptions to this policy must be approved in advance from the Dean of the College of Medicine (OAA approval is not needed). Search procedures must be consistent with the university policies set forth in [Policy on Faculty Recruitment and Selection](#).

3. Research Faculty

Searches for initial appointments to the Research faculty should follow the same procedures as those utilized by the Department and the College of Medicine for Tenure-track faculty, with the exception that the candidate is not required to make a presentation during the on-campus interview. Individuals with a clear and focused commitment to research, publication and grantsmanship should be selected as candidates. Prior evidence of such commitment is strongly encouraged. Interest in teaching and service are secondary considerations. 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 research positions. Exceptions to this policy must be approved in advance from the Dean of the College of Medicine (OAA approval is not needed). Search procedures must be consistent with the university policies set forth in [Policy on Faculty Recruitment and Selection](#).

4. Associated Faculty

Associated faculty appointments in the Department of Orthopaedics at the levels of clinical instructor of practice, clinical assistant professor of practice, clinical associate professor of

practice, and clinical professor of practice will not require formalized search processes. The existing guidelines for the involvement of community surgeons within the Department of Orthopaedics should be utilized as general principles. Offers of these faculty appointments should be primarily the purview of the division chief (if applicable) in consultation with the Chair. These appointments shall require the approval of the Department's Appointment, Promotion and Tenure Committee for initial appointment and annual renewal.

5. Courtesy Appointments for Faculty

Any department faculty member may propose a 0% FTE (Courtesy) appointment for a faculty member from another OSU department. A proposal that describes the uncompensated academic service to the courtesy department justifying the appointment must be considered at a regular faculty meeting. If the proposal is approved by the faculty, the Department Chair will extend an appointment. The Chair must review all courtesy appointments every three (3) years to determine whether they continue to be justified, may take recommendations for nonrenewal from the faculty, and must conduct a faculty vote at a regular meeting. A courtesy faculty appointment forwarded from a Department for approval by the College must have been made consistent with that Department's Appointments, Promotion and Tenure document, and other relevant policies, procedures, practices, and standards established by the *Rules of the University Faculty*, the Office of Academic Affairs, and the Office of Human Resources.

Courtesy appointments for faculty with appointments in other tenure initiating units should be suggested only when criteria described in section IV have been clearly met. These appointments will not require a formalized search process.

V. ANNUAL REVIEW PROCEDURES

Each Department Chair or his or her designee must conduct an annual review of **every** faculty member, irrespective of rank, in accordance with University Rule [3335-6-03](#) (C), and the Office of Academic Affairs [Policies and Procedures Handbook](#). The only exception to this guideline is that Courtesy appointments do not require formal annual renewal, but continuation of the appointment should reflect ongoing academic involvement as described in the Office of Academic Affairs Policies and Procedures [Volume 1: 2.3.1.6](#).

All faculty members must maintain an up-to-date *OSU Electronic dossier* profile and/or keep a recent curriculum vitae on record with the Department. The Department Chair or his or her designee will supply each faculty member with a written evaluation of his or her performance, in narrative format. The review will include not only an evaluation of all aspects of the faculty member's performance, but also recommendations for improvement and goals for the following year. Annual reviews must include a scheduled face-to-face meeting with Chair or his or her designee. If the Chair's designee conducts the annual review, the Chair must be notified of the faculty member's performance in writing. The department chair is required (per Faculty Rule [3335-3-35](#)) to include a reminder in the annual review letter 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.

Procedures regarding annual reviews and promotion reviews shall be the same for tenure track, clinical, and research faculty except that the college Dean's decision is final with respect to reappointment, non-reappointment and denial of promotion in the clinical and research faculty. External evaluations are required for all applications for promotion. Guidelines from the College of Medicine and the University regarding external evaluations must be followed.

A. Probationary Tenure Track Faculty

Every probationary tenure track faculty member is reviewed annually by the chair, who meets with the faculty member to discuss his or her performance and, future plans and goals; and prepares a written evaluation that includes a recommendation on whether to renew the probationary appointment.

If the department chair recommends renewal of the appointment, this recommendation is final. The department 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 he or she chooses).

If the department chair recommends nonrenewal, the Fourth-Year Review process (per Faculty Rule [3335-6-04](#)) 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.

As part of the annual review process, the faculty member's current OSU Electronic dossier profile or curriculum vitae will be reviewed by the Chair or his/her designee. It will be evaluated to determine if the faculty member has met or exceeded the minimal standards of academic performance for the Department of Orthopaedics, as outlined in the Faculty Workload Guidelines. The Chair or designee will provide a written appraisal of the faculty member's performance that 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 should provide an overall evaluation of the faculty member's performance, describe the faculty member's suitability for his/her appointment and potential for future promotion/tenure, and make a recommendation regarding reappointment for the following academic year. 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.

The faculty member may respond in writing to issues raised during the annual review. All review letters and written faculty responses shall become a permanent part of the faculty

member's dossier, and will be considered during subsequent annual reviews, including the review for promotion and tenure. At the completion of the review, the chair will provide the Dean of the College with a copy of the written evaluation of the faculty member's performance and professional development, and the indication of whether the faculty member will be reappointed for the next year.

If the Chair concludes that nonrenewal of the appointment should be considered, fourth year review procedures (see details below) must be followed (even if this is not a fourth or eighth year review). The full eligible faculty must vote on the matter, and if the Chair recommends nonrenewal, the comments process must be undertaken and then the case forwarded to the Dean for college level review. The Dean shall make the final decision in the matter.

In the event that both the Promotion and Tenure Committee and the Chair recommend renewal, no faculty vote is necessary.

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 Promotion and Tenure Committee or the Department Chair. The candidate may then initiate effort to seek promotion if desired.

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 two exceptions: external letters of evaluation will not be required, and review by the College of Medicine Promotion and Tenure Advisory Committee is not mandatory. 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.

Review will be conducted by the Department's Committee of the Eligible Faculty, which will review the case, vote and make a recommendation to the Department Chair. The Department Chair will make a final recommendation to the Dean. When the Department CEF, the Department Chair, and the Dean agree on a positive decision to continue the probationary appointment, review by the College Appointment, Promotion and Tenure Advisory Committee is not required.

If the Department Chair or the eligible faculty recommends nonrenewal of a faculty member's probationary contract, subject to the standards of notice per University Rule [3335-6-08](#), the College Appointment, Promotion and Tenure Advisory Committee is required to review the case and vote. This result is presented to the Dean, who makes the final decision.

If the Department Chair recommends renewal of a faculty member's probationary contract, but the Dean recommends nonrenewal, the case will be referred to the College Appointment, Promotion and Tenure Advisory Committee, which will review the case, vote, and make a recommendation to the Dean. However, in accordance with the Faculty Annual Review Policy, a

recommendation to terminate a probationary faculty member's appointment requires the approval of both the Department Chair and Dean, who makes the final decision.

2. Eighth Year Review

Faculty members with an eleven (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. Exclusion of Time from Probationary Period

Faculty Rule [3335-6-03](#) (D) sets forth the conditions under which a probationary tenure-track faculty member may exclude time from the probationary period. Additional procedures and guidelines can be found in the Office of Academic Affairs [Policies and Procedures Handbook](#).

B. Tenured Faculty

A written annual review of each tenured faculty member, irrespective of rank, is required. The purpose of the annual review for tenured faculty is to assist in developing and implementing professional plans, discussing accomplishments, identifying performance problems should they exist, evaluating progress toward promotion, and serving as a basis for annual salary recommendations. The review process will follow the same guidelines and utilize the same form of documentation outlined for probationary faculty.

Associate professors are reviewed annually by the professors, who submit a written performance review to the department chair along with comments on the faculty member's progress toward promotion. The department chair conducts an independent assessment; meets with the faculty member to discuss his or her performance and future plans and goals; and prepares a written evaluation on these topics. The faculty member may provide written comments on the review.

Professors are reviewed annually by the department chair, who meets with the faculty member to discuss his or her performance and future plans and goals. The annual review of professors is based on their having achieved sustained excellence in the discovery and dissemination of new knowledge relevant to the mission of the tenure initiating unit, as demonstrated by national and international recognition of their scholarship; ongoing excellence in teaching, including their leadership in graduate education in both teaching and mentoring students; and outstanding service to the department, the university, and their profession, including their support for the 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 prepares a written evaluation of

performance against these expectations. The faculty member may provide written comments on the review.

C. Clinical Faculty

The initial contract of all Clinical Faculty is probationary regardless of academic rank at hire, or prior employment in another faculty category. Subsequent contracts are not probationary, but there is no presumption of reappointment.

Clinical faculty members are reviewed annually by the Department Chair or his or her designee, using the same guidelines outlined for probationary faculty. The purpose of the annual review for clinical faculty is to assist in developing and implementing professional plans, discussing accomplishments, identifying performance problems if they exist, evaluating progress toward promotion, and serving as a basis for annual salary recommendations. A written evaluation in narrative format must be provided and a face-to-face meeting must be scheduled.

Each faculty member who wishes to be reappointed must undergo a review for reappointment in the penultimate year of each contract (either initial or subsequent) utilizing the same process as the review for tenure and promotion, with two exceptions: external letters of evaluation will not be required, and review by the College of Medicine Promotion and Tenure Committee does not occur. There is no presumption of renewal of the contract. The standards of notice set forth in Faculty Rule [3335-6-08](#) must be observed.

The decision by the Dean to reappoint or not renew Clinical faculty members is final.

D. Research Faculty

The initial contract of all Research Faculty is probationary regardless of academic rank at hire, or prior employment in another faculty category. Subsequent contracts are not probationary, but there is no presumption of reappointment.

Research faculty members are reviewed annually by the Department Chair or his or her designee. A written evaluation in narrative format must be provided and a face-to-face meeting must be scheduled.

Each faculty member who wishes to be reappointed must undergo a review for reappointment in the penultimate year of each contract (either initial or subsequent) utilizing the same process as the review for tenure and promotion, with two exceptions: external letters of evaluation will not be required, and review by the College of Medicine Promotion and Tenure Committee does not occur.

The decision by the Dean to reappoint or not renew Research faculty members is final.

During and until the end of non-probationary contract periods, Research Faculty appointments may be terminated for not meeting the terms of the contract (e.g., failure to obtain extramural

support for the research). The standards of notice as set forth in University Rule [3335-6-08](#) apply.

E. 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 his or her performance, future plans, and goals. The department chair's recommendation on 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 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 his or her performance, future plans, and goals. No later than October 15 of the final year of the appointment, the chair will decide whether or not to reappoint. The department chair's recommendation on reappointment is final.

VI. MERIT SALARY INCREASES AND OTHER REWARDS

Merit salary increases and other rewards must be made consistent with relevant policies, procedures, practices, and standards established by: (1) the [College of Medicine](#), (2) the [Rules of the University Faculty](#), (3) the Office of Academic Affairs [Policies and Procedures Handbook](#), and (4) the [Office of Human Resources](#).

A. Criteria

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.

On occasion, one-time cash payments or other rewards, such as extra travel funds, are made to recognize non-continuing contributions that justify reward but do not justify permanent salary increases. Such payments/rewards are considered at the time of annual salary recommendations. The Provost can identify parameters for such awards as part of the annual AMCP (Annual Merit Compensation Process) guidelines.

Meritorious performance in teaching, research, and service is assessed in accordance with the same criteria that form the basis for promotion decisions. The time frame for assessing performance will be the past 36 months, with attention to patterns of increasing or declining productivity. Faculty with high quality performance in all three areas of endeavor (consistent with the expectations of the faculty member's appointment) and a pattern of consistent professional growth will necessarily be favored. Faculty members whose performance is unsatisfactory in one or more areas are likely to receive minimal or no salary increases.

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.

Merit salary increases will be based upon performance of the faculty member in relation to the Department Workload Policy and the expectations outlined in the faculty member's previous annual review by the Chair

B. Procedures

Each faculty member must undergo an annual review utilizing the principles outlined in Section V of this document. The review must be in written form for all faculty members except for associated faculty who are on an annual appointment and not being reappointed. The review will compare the faculty member's performance to the expectations described in Section VI.A above and to those recorded in this Appointments, Promotion and Tenure document, and then recommend an appropriate level of merit salary increase (if any). Other rewards will be determined in a similar manner.

Evaluation for merit salary increase for each faculty member shall be performed initially by the division director and by the Chair. The faculty member may appeal the assigned level as described below.

C. Documentation

As part of the annual review process, the faculty member's current file will be reviewed by the Chair or his/her designee. This OSU Electronic dossier profile or curriculum vitae will outline the faculty member's accomplishments. The faculty member may submit a written appeal if dissatisfied with the annual review. When submitting such an appeal, the faculty member must prepare a statement utilizing the format of the Promotion and Tenure dossier outline prepared by the Office of Academic Affairs in order to document accomplishments for salary determination. Insufficient documentation shall constitute a basis for immediate denial of the appeal. The appeal is made to the division chair, if applicable, or directly to the Chair. Final decision regarding

Merit Salary appeals rests with the Department Chair acting in concert with the Department Executive Committee.

Documentation of teaching, research, and service for bonus determinations will be the same as that utilized for annual reviews and promotion/tenure considerations.

VII. PROMOTION AND TENURE AND PROMOTION REVIEWS

Outlined below are the Department of Orthopaedic's formal criteria for academic advancement, including promotion and awarding of tenure. When the Department forwards the dossier of a candidate for review and has recommended promotion and/or granting of tenure, every diligent

effort will have been made to ensure the qualifications of the candidate meet or exceed applicable criteria.

In evaluating a candidate's qualifications in teaching, scholarship, and service, reasonable flexibility will be exercised. As the Department of Orthopaedics diversifies and places new emphasis on interdisciplinary endeavors and program development, instances will arise in which the proper work of a faculty member may depart from established academic patterns, especially with regard to awarding tenure. Thus, care must be exercised to apply criteria flexibly, but without compromise in requiring the essential qualifications for promotion. Insistence upon this high standard for faculty is necessary for the maintenance and enhancement of the Department, the College, and the University as entities dedicated to the discovery, application, and transmission of knowledge.

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 can be demonstrated by constructive responses to and participation in department, College, and/or University initiatives. Examples include collegiality in all activities, participation in faculty governance, outreach and service, ethical behavior, adherence to principles of responsible conduct of research, constructive conduct and behavior during the discharge of duties, responsibilities and authority, and the exercise of rights and privileges of a member of the faculty. The department will consider these behaviors as reflected in the “Statement of Professional Ethics” of the American Association of University Professors [Appendix B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” developed by the American Academy of Orthopaedic Surgeons [Appendix C].

Annually, The Ohio State University’s Office of Academic Affairs establishes specific guidelines, procedures, and schedules for the review of candidates for promotion and tenure. The Dean of the College of Medicine also establishes and communicates the latest date for the receipt of dossiers for annual consideration by the College. Upon receipt of a candidate’s dossier, the department chair will submit the dossier to the department’s Promotion and Tenure Committee for formal review. The committee will review the dossier and convey to the chair in writing a recommended action to be taken. The chair will consider the recommendations of the committee and will convey, in writing, a recommended action to the Dean of the College of Medicine.

A. Criteria

1. Promotion of Tenure-track Faculty

a. Associate Professor with Tenure

Tenure is not awarded below the rank of Associate Professor at The Ohio State University.

The awarding of tenure is a prediction of excellence and future potential for preeminence and requires evidence of consistent achievement throughout the professional life of the faculty

member. Promotion to the rank of Associate Professor with Tenure occurs when a faculty member exhibits clear and sustained evidence of excellence in the discovery and dissemination of new knowledge, as demonstrated by a national level of significance and recognition of scholarship. In addition, excellence in teaching and outstanding service to the Department of Orthopaedics, the College of Medicine, and/or The Ohio State University is required, but alone is not sufficient for promotion and awarding of tenure. These three key achievements: scholarship, teaching and service, are individually discussed below.

Achievement of a national reputation is a prerequisite for promotion to Associate Professor and awarding of tenure. Objective examples of a national reputation include but are not limited to service on NIH or equivalent grant review panels, participation on steering, guideline or advisory committees, selection for service in a national professional society, invitation for lectureships or scholarly reviews, receipt of national scientific awards, external letters of evaluation and other measures of national impact.

Teaching and Mentoring: A distinctive record of teaching and mentoring excellence is required for promotion and tenure. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues, and national peers. Teaching awards and other honors are also supportive of teaching excellence. A faculty member may also demonstrate favorable impact on teaching and training programs, including curricular 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 valued.

Teaching excellence may be demonstrated through 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. Active participation as a mentor in training grants such as NIH T32 or K-awards is highly valued as a teaching and mentoring activity.

Scholarship: Scholarship is broadly defined as the discovery and dissemination of new knowledge. Achievement of excellence in scholarship is demonstrated by discovery of a substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings, and achievement of a national reputation for expertise and impact in one's field of endeavor. Such endeavors might include 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 dissemination of research findings, among many potential others. Participation in collaborative, multidisciplinary research and team science is highly valued, especially to the extent that a faculty member's record of collaborative scholarship includes manuscripts on which authorship is first, senior, or corresponding; or the individual input of the faculty member as a middle author is uniquely contributory and clearly evident.

While individual circumstances may vary, both the quantity and quality of publications should be considered. Additional metrics that are considered in assessing a candidate include the total number of citations of their publications, the impact factor of journals in which they have

published, and their H-index. A sustained record of high quality and quantity of scholarly productivity as an assistant professor is required for promotion to the rank of associate professor or professor. Specific metrics in support of excellence in scholarship may be discipline-specific. For examples, clinician investigators will have less time available for research than basic investigators and appropriate adjustments of these criteria should be made. The range of publications may be slightly adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical service. In particular, it is noted that very few of journals relevant to Orthopaedics have impact factors greater than 3.0, so each candidate's publication record will be evaluated against the highest-impact journals in their sub-discipline. The average impact factor will be computed for the candidates top ten (10) publications – those with the highest impact factors – to 1) encourage publication in the highest quality journals while simultaneously 2) encouraging the publication of smaller projects or lesser quality work in other journals.

The development of a competitive, innovative and distinctive program of scholarship is also evidenced by acquisition of peer-reviewed, nationally competitive extramural support as a principal investigator, multiple investigator, or co-investigator. Similarly, status as principal investigator of a project or a program grant is an acceptable criterion for extramural funding.

Competitive funding from a federal agency (i.e. NIH, NSF, NIOSH, NASA, FEMA), as a principal investigator or multiple principal investigator, is required for non-clinical faculty. NIH funding should be encouraged but not necessarily required for tenure-track physicians/clinicians. Other nationally competitive, peer reviewed funding, including support from national charitable foundations (e.g. Orthopaedic Research and Education Foundation, Arthroscopy Association of North America, Orthopaedic Trauma association, NFL Charities), or industry will be considered as evidence of nationally competitive peer reviewed funding should evidence exist for a sustained record of funding from these types of agencies. Faculty members are encouraged to collaborate with other investigators and may therefore meet the requirement for extramural support for their research as a co-principal investigator, or other comparable role. Funding through pharmaceutical or instrumentation companies for investigator-initiated proposals, or as local principal investigator for multi-center trials will also be considered. Similarly, faculty members who generate support for their research programs through creation of spin-off companies may also meet the criteria for extramural funding. Attempts to quantify the value of research conducted in the Department of Orthopaedics will explicitly consider the value of in-kind support (instruments, implants, etc.) as well as the funds handled through official University channels.

The Department of Orthopaedics acknowledges that there may be situations in which a faculty member develops a productive, nationally renowned program of scholarship without having obtained nationally competitive peer-reviewed funding. Such a situation is anticipated to be exceedingly infrequent, however.

A sustained record of high quality and quantity of scholarly productivity as an assistant professor is required for promotion to the rank of associate professor or professor. Specific metrics in support of excellence in scholarship are discipline-specific. Therefore, promotion and tenure deliberations will consider the balance of qualitative and quantitative accomplishments. Examples of discipline specific considerations include publications in highly specialized journals

that may have high impact in the specific subspecialty, but may have a relatively low overall impact factor and citation index. In addition, levels of productivity in disciplines may vary substantially and this variation must be appropriately acknowledged. Expectations regarding scholarship may be adjusted according to the extent of the faculty member's commitment to clinical service, teaching, or administrative duties. The extent of those activities must be documented in the annual reviews of faculty members and must be included in the Departmental promotion and/or promotion reviews.

Overall, the number of publications required for awarding of promotion and tenure should be sufficient to persuasively characterize faculty members' influence in discovery of new knowledge in their fields. Thus, both quality and quantity are important considerations. Publication as first or senior author in the field's highest impact factor journals is an important variable that, combined with other factors such as the extent of external funding, invited lectures, invited manuscripts, editorial boards, peer-review panels, and external letters of evaluation, guide the decision to promote and award tenure. Although the total body of scholarship over the course of a career is considered in promotion and tenure decisions, the highest priority is placed on scholarly achievements while a faculty member at Ohio State University. It should be appreciated that scholarship exceeding the specified range is not a guarantee of a positive tenure or promotion decision, especially if it occurs in isolation or in the context of poor performance in other areas.

Entrepreneurship is a special form of scholarship valued by the Department of Orthopaedics and the College of Medicine. Entrepreneurship includes, but is not limited to, invention disclosures, novel research techniques, software development, materials transfers (e.g., biologic agents), technology commercialization, patent and copyrights, formation of startup companies and licensing and option agreements. Inasmuch as there are no expressly defined metrics for entrepreneurship, the Department of Orthopaedics will analyze these achievements flexibly. 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 revenues should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or international) recognition and impact. These entrepreneurial activities will be recognized as scholarly or service activities in the promotion and tenure dossier.

Service: Service is broadly defined to include administrative service to the Department, the College, and/or the University, exemplary patient care, program development, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include appointment or election to Department, College of Medicine, hospital, and/or University committees and affirmative action or mentoring activities. Evidence of professional service to the faculty member's discipline can include journal editorships, reviewer for journals or other learned publications, offices held and other service to local and national professional societies. Evidence of the provision of professional expertise to public and private entities beyond the University includes: reviewers of proposals, external examiner, service on panels and commissions, program development, professional consultation to industry, government, and education.

Professional expertise provided as compensated outside professional consultation alone is insufficient to satisfy the service criterion.

For the Department of Orthopaedics, the following will constitute specific accomplishments characteristic of individuals worthy of promotion to **associate professor with tenure** in the areas of teaching, research and service:

Teaching (M.D., D.O., or equivalent)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, as reflected by:

1. Consistently high level evaluations of teaching performance by students, residents, peers
2. Divisional or departmental teaching awards as voted by medical students and/or residents
3. Participation in the development of new educational programs for teaching students or residents at Ohio State
4. K-Award mentorship
5. Participation in the publication of material of an instructional nature or evidence of production of other forms of teaching material (e.g. videotape, computer programs, etc.)
6. Participation in teaching for local, regional and national professional organizations
7. Participation in the development of educational materials for local, regional and national professional organizations

Teaching (Ph.D. or equivalent)

Evidence of persistent commitment to teaching and ongoing development of teaching abilities, as reflected by:

1. Evidence of regular participation in the educational processes within the division, department, or college
 - a) Coursework: organization and oversight of approved academic courses
lectures provided for approved academic courses
 - b) Documented training of individuals or groups in research skills or techniques
technicians and laboratory assistants, graduate students, postdoctoral fellows, medical research fellows, or professional colleagues
 - b) K-Award mentorship
2. Evidence of teaching excellence
 - a) Consistently high-level evaluations of teaching performance by students and peers
 - b) Divisional, departmental or collegiate teaching awards
3. Development of new educational programs for teaching within the institution.
4. Publication of instructional materials (e.g. videotapes, computer programs, etc.).
5. Participation of teaching for local, regional, or national organizations.
6. Development of educational materials for local, regional, or national organizations.

Research and Scholarship (M.D., D. O., or equivalent)

Evidence of ongoing, continuous development of research ability and reputation, as reflected by the following:

1. Multiple publications in peer-reviewed journals (numbers consistent with quantitative standards of department)

2. Peer reviewed publications in prestigious journals, the majority of which are first-authored or senior authored.
 - a. As a guideline the successful candidate should have 20-25 publications since appointment as an assistant professor. The mean impact factor should be at or above 50th percentile of impact factors of journals in which surgical disciplines in the Department of Orthopaedics publish. The list of journals is listed in Appendix D. The list will be updated every 4 years. The 50th as of May 2013 is an impact factor of 1.75. Faculty are encouraged to publish in other scientific journals as well.
 - b. This guideline is reduced for faculty with clinical responsibilities as follows: For faculty with 50% or greater clinical effort the minimum number of publications should be 15-20 publications occurring since the date of the OSU appointment as an assistant professor in peer-reviewed journals. The successful candidate will have an average impact factor above the 50th percentile of Orthopaedic journals and one third are first or senior authored publications.
3. Presentations of scholarly work at national or international forums.
4. Funded grant from external sources (federal, state, charitable, industrial) at levels (including in-kind support) equivalent to an R-01 or patents generating licensing income.
5. Development of an area of research or scholarship with growing national recognition.
6. Service on editorial board of journal(s).
7. Publications of book(s).
8. Publication of chapter(s) in books.

Research and Scholarship (Ph.D. or equivalent)

Evidence of ongoing, continuous development of research ability and reputation as reflected by the following:

1. Regular publication in peer-reviewed journals the majority of which are first or senior authored,.
 - a. As a guideline the successful candidate should have 20-25 publications since the OSU appointment. The ten (10) highest impact factor publications should exceed the 50th percentile of Orthopaedic journals [Appendix D]. H-Index of 10 or above. Publication in other scientific journals not listed in Appendix D is strongly encouraged.
2. Presentation of scholarly work at regional, national, or international forums.
3. Peer-reviewed research funding from national sources at monetary levels indicative of competitive research significance as evidenced by the following: NIH funding as Principal Investigator on at least one R-01 or equivalent NIH Grant (e.g. . multiple PI or project lead on a P01) is required for faculty members without clinical duties. Significant contributions of effort as co-investigator on multiple grants may be considered.
4. Development of a growing national reputation for research in one or more areas of importance to the scientific discipline.
5. Service on the editorial board of professional journal(s).
6. Service on grant review boards for local, regional, national, or international funding organizations.
7. Retention as consultant by professional or commercial organizations.
8. Publication of books or book chapters.

Service (M.D., D.O., or equivalent)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Completion of specialty Board certification
2. Maintenance of certification
3. Evidence of a high-level of clinical competence
4. Active participation in divisional, Departmental, College, and/or University committee functions
5. Participation in committee activities for local, regional, and national organizations.
6. Elected office in local, regional, or national professional organizations.
7. Other meritorious community service activities
8. Demonstrated adherence to the values contained in the “Statement of Professional Ethics” of the American Association of University Professors [Appendix B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” of the American Academy of Orthopaedic Surgery [Appendix C]
9. Maintenance of appropriate licensure and medical staff appointment(s).
10. Participation in the development of new programs for the advancement of medical practice or patient care.

Service (Ph.D. or equivalent)

Evidence of commitment to the provision of service to the institution, the community or the profession, as reflected by:

1. Direction/operation of a service laboratory for division, department, hospital, college, university, or professional organization.
2. Active participation in divisional, departmental, college, or university committee functions.
3. Active participation in committee functions for local, regional, or national organizations.
4. Elected office in local, regional, or national professional organizations.
5. Other meritorious community service activities.
6. Demonstrated adherence to the values contained in the “Statement of Professional Ethics” of the American Association of University Professors [Appendix B] and the “Principles of Medical Ethics and Professionalism in Orthopaedic Surgery” of the American Academy of Orthopaedic Surgery [Appendix C]

Table 1: Summary of representative metrics used to assess suitability for promotion to the rank of Associate Professor with tenure.

Peer-review publications	Grants and Patents	Teaching	Service and National Role
20-25 in journals with average impact factors above the 50 th percentile of Orthopaedic journals since appointment as assistant professor	PI or multiple-PD/PI on one (1) funded R01 (or other external funded award) or prior R01 <u>plus</u> either a) active pursuit of external funding; <u>or</u> b)	Active and ongoing teaching with strong student/resident evaluations; positive lecture evaluations	University committees plus active roles in professional societies and/or multiple <i>ad hoc</i> or regular NIH study section membership; and/

or an H-index of 10 or above.	patents generating licensing income.	from national audience.	or service as an regular <i>ad hoc</i> reviewer or on editorial boards.
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- For clinicians seeking tenure, accommodation should be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. For example, a 25 to 50% clinical commitment might reduce the required number of publications and H index by 25%. Publication in specialized clinical journals would reduce the impact factor requirement. However, evidence of at least co-investigator status in one of the grant categories listed above is a prerequisite to tenure. For clinicians with a greater than 50% clinical commitment there should be either evidence of co-investigator status in one of the grant categories listed above as a prerequisite to tenure and/or strong publication record (i.e., ≥ 50 peer review publications) coupled with clear evidence of a national reputation for clinical excellence and innovation. Similar accommodations can be made on the basis of educational commitments.

b. Promotion to Associate Professor without Tenure

Promotion to Associate Professor without Tenure is available only to clinician scientists and requires a level and pattern of achievement that demonstrates that the candidate is making significant progress toward tenure, but has not yet achieved all the requisite criteria for promotion with tenure. It is expected that promotion to Associate Professor without tenure will become more common in the Department of Orthopaedics among scholars with clinical roles prior to completion of the 11-year probationary period. Recommendation for promotion without tenure must be accompanied by rigorous and ample documentation of the special circumstances justifying this recommendation. Promotion without tenure may only occur if a candidate is not in the mandatory review year. If a clinician candidate is promoted without tenure, the tenure review must occur within six years, and no later than the mandatory review year, whichever comes first.

Scholarship: Qualitative indicators consistent with promotion without tenure might include an insufficient, but advancing record of scholarly excellence demonstrated by publications in high quality peer-reviewed journals, evidence of emerging external recognition, and progress toward an extramurally supported research program. An example might be clear evidence of escalating productivity late in the interval of probationary status, indicating acquisition of momentum that will propel the candidate toward the sustained record of productivity required for tenure. Publications in journals of lesser impact that reflect the preliminary stages of development of a research career, or a predominance of publications in which the candidate is not first or senior author are also examples. Criteria for a promising trajectory in extramural funding might be reflected by successful competition for extramural, locally funded grants, small foundation grants, training grants from national sources, and favorable reviews of federal grants that did not quite achieve funding. Evidence of an emerging national recognition might include invitations to lecture at local, statewide or regional institutions or scientific meetings. Although the quality of scholarship is of the utmost importance, quantity is also important, and the record of accomplishment must demonstrate discovery of a substantial body of important, new knowledge.

Teaching and Mentoring: Indicators of teaching consistent with promotion without tenure might include a record of teaching excellence involving a single group of trainees, a clear trend of improving teaching evaluations, or divisional (as opposed to department or college-wide) teaching awards. Teaching excellence may also be demonstrated through evaluations for

presentations at other academic institutions, scientific or professional societies, or other hospitals.

Service: Indicators of service consistent with promotion without tenure might include an insufficient volume of outstanding service; or service as a member or chair of committees within the Department or College, but the absence of significant service roles at the national level. This might also include activities as an *ad hoc* reviewer for journals, or service on the advisory board for local organizations.

Table 2: Summary of representative metrics used to assess suitability for promotion to the rank of Associate Professor without tenure.

Peer-review publications	Grants and Patents	Teaching	Service and National Role
10-15 in journals with an average impact factor (of the 10 highest) above the 50 th percentile of Orthopaedic journals since appointment as assistant professor or an H-index of ≥ 8 .	PI on an R21, R03 or co-investigator on a R01 plus PI status on a major national grant application; PI on industrially-funded grants; patents or other evidence of inventorship; an unfunded NIH R01 with a score below the 20 th percentile for a new investigator.	Active and ongoing teaching with strong student/resident evaluations; positive lecture evaluations from national audience.	University committees plus active roles in professional societies and/or multiple <i>ad hoc</i> or regular NIH study section membership; and/or service as a regular <i>ad hoc</i> reviewer or on editorial boards.

- For clinicians seeking tenure, accommodation should be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. For example, a 25 to 50% clinical commitment might reduce the required number of publications and H index by 25%. Publication in specialized clinical journals would reduce the impact factor requirement. However, evidence of at least co-investigator status in one of the grant categories listed above is a prerequisite to tenure. For clinicians with a greater than 50% clinical commitment there should be either evidence of co-investigator status in one of the grant categories listed above as a prerequisite to tenure and/or strong publication record (i.e., ≥ 50 peer review publications) coupled with clear evidence of a national reputation for clinical excellence and innovation. Similar accommodations can be made on the basis of educational commitments.

c. Promotion to Professor

Awarding promotion to the rank of Professor must be based upon clear and unambiguous evidence that the candidate has a sustained, eminent record of national leadership and/or international achievement and recognition. Importantly, the standard for external reputation is 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. The general criteria for promotion--that is, scholarship, teaching and service--are the same as those previously outlined for promotion to the

level of Associate Professor with tenure, except that the indicators are more advanced and sustained in quantity and quality and importantly, impact.

Scholarship: A sustained record of external funding and an enhanced quality and quantity of scholarly productivity as an Associate Professor is required for promotion to the rank of Professor. A strong record of collaboration and/or mentorship of junior colleagues is also considered significant. Clear evidence of national leadership and/or an international reputation must be achieved. Objective criteria relating to leadership include, but are not limited to: election or appointment to a national office, service as a national committee or task force chair, chair of a review panel, peer recognition or awards, and editorships. Candidates for promotion will be expected to have been awarded nationally competitive, peer-reviewed extramural funding to support their research program. Extramural funding as a principal investigator is preferred but not required; co-investigator status on interdisciplinary grant applications is also recognized.

Teaching and Mentoring: A record of teaching excellence as an Associate Professor must continue to justify promotion to the rank of Professor. The faculty member should make new, unique and impactful contributions to the teaching mission as an Associate Professor. Evidence for exemplary teaching includes outstanding student and peer evaluations, course or workshop leadership and design, a training program directorship, teaching awards, organization of national course and curricula, development of teaching methods that are subsequently adopted by other institutions, development and leadership of departmental or college programs, and participation in specialty boards such as Residency Review Committees, specialty boards and the Accreditation Council for Graduate Medical Education.

Service: Promotion to the rank of Professor requires service with distinction to the College of Medicine, The Ohio State University, or in a national context. The faculty member should make new, unique and impactful service contributions as an Associate Professor. Service includes the provision of exemplary patient care; development of new and innovative programs, participation in leadership positions of a learned society, participation in and appointment to management positions in College of Medicine, the University or national committees, professional societies, task forces, and advisory groups and other leadership roles leading to the betterment of the organization being served.

Table 3 Summary of representative metrics used to assess suitability for promotion the rank of Professor

Peer-review publications	Grants and Patents	Teaching	Service and National Role
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<p>40-60 papers in journals with an average impact factor (of the 20 highest) above the 50th percentile of Orthopaedic journals or an H- index \geq 17. More than 20 peer-reviewed journal papers since promotion to associate professor. Competitive federal funding (NIH, NSF, NIOSH, etc.) as a principal investigator, multiple PI, or project leader on a P01 is required. Other nationally competitive, peer reviewed funding, including support from national charitable foundations (e.g. OREF, AANA, OTA, NFL Charities), or industry are valuable and will be considered towards satisfy the criterion for extramural funding.</p>	<p>Renewed R01 <u>plus</u> a) second significant national grant <u>or</u> b) a second or more simultaneous R01 or equivalent grant (e.g., project on a P01 or U54 project); <u>or</u> c) two or more patents yielding licensing income.</p>	<p>Teaching awards; consistently positive teaching evaluations or positive lecture evaluations from national audience; T32 or K-award mentorship.</p>	<p>University committees plus: Leadership role in international society and regular NIH study section membership or federal panel or committee work; Journal editorial board.</p>
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- For clinicians seeking promotion to professor with tenure, accommodation should be made for the time devoted to clinical practice as reflected in percent effort or average RVUs/FTE. However, for those with 25 to 50% clinical effort evidence of at least co-investigator status in one of the grant categories listed above is a prerequisite to tenure. For clinicians with a greater than 50% clinical commitment there should be either evidence of co-investigator status in one of the grant categories listed above and/or strong publication record coupled with international recognition of clinical excellence. Similar accommodations can be made on the basis of educational commitments.

2. Promotion of Clinical Faculty

Clinical faculty members have a greater responsibility for clinical teaching and patient care than individuals in 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, 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.

The awarding of promotion to the rank of Associate Professor of Clinical Orthopaedics must be based upon clear and convincing evidence that that the candidate has developed a national level of impact and recognition since being appointed to the rank of Assistant Professor. Clinical faculty members typically pursue careers as clinician scholars or clinician educators.

a. Associate Professor, Clinician Educator Pathway

The awarding of promotion to the rank of Associate Professor in the Clinician-Educator Pathway should be based upon clear and convincing evidence that that the candidate is developing a national level of impact and recognition as a clinician educator since being appointed to the rank of Assistant Professor.

Teaching and Mentoring: A distinctive record of teaching and mentoring excellence is required for promotion. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching awards and other honors are necessary evidence of teaching excellence. Candidates should demonstrate favorable impact on teaching and training programs, including 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. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is highly valued as a teaching and mentoring activity.

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include membership on department, College, hospital, or University committees, affirmative action or mentoring activities.

Scholarship: The candidate should demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications (10-15) and scholarly review

articles focused on pedagogic theory, innovative teaching techniques or development of web-based or video-teaching modules.

Table 4: Summary of representative metrics used to assess suitability for promotion to Associate Professor in Clinician Educator Pathway.

Peer-review publications	Grants and Patents	Teaching	Service
As a general guideline, 10-15 peer reviewed publications, scholarly review articles, and/or web based or video teaching modules since being appointed as assistant professor at OSU.	Local leader of at least one nationally-funded or multi-institutional educational project or participation as the lead in new OSU educational programs	Excellent Evaluations; Positive lecture evaluations from national audience; Teaching awards	University committees; Committee work in professional organization

b. Professor, Clinician Educator Pathway

The awarding of promotion to the rank of Professor in Clinician-Educator pathway must be based upon clear and convincing evidence that that the candidate has developed a national level of impact and recognition as a teacher since being appointed to the rank of Associate Professor.

Teaching and Mentoring: A distinctive record of sustained superlative teaching and mentoring excellence is required for promotion. Excellence is demonstrated by sustained positive evaluations by students, residents, fellows, local colleagues and national peers. Multiple teaching awards and other honors are indicative of this level of teaching excellence. Candidates must demonstrate favorable impact on teaching and training programs, including curriculum innovation, new teaching modalities or methods of evaluating teaching, and program or course development. Development of multiple impactful, innovative programs that integrate teaching, research and patient care are valued. Teaching excellence may also be demonstrated through participation in specialty boards such as Resident Review Committees, specialty boards and the Accreditation Council for Graduate Medical Education.

Mentorship of junior faculty may also demonstrate teaching excellence. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates should evidence mentoring relationships by providing mentees’ evaluations.

Service: Service is broadly defined to include administrative service to the University, exemplary patient care, program development relating to clinical, administrative, leadership and related activities, professional service to the faculty member's discipline, and the provision of professional expertise to public and private entities beyond the University. Evidence of service can include appointment or election to College, hospital, and/or University committees and

affirmative action or mentoring activities. Evidence of professional service to the faculty member's discipline should include journal editorships, and offices held and other service to national professional societies.

Scholarship: The candidate must demonstrate sustained contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications (15-30) and scholarly review articles focused on pedagogic theory, innovative teaching techniques or development of web-based or video-teaching modules.

Table 5: Summary of representative metrics used to assess suitability for promotion to Professor in Clinician Educator Pathway.

Peer-review publications	Grants and Patents	Teaching	Service
As a general guideline, 15-30 peer reviewed publications, scholarly review articles with mean impact factor (of the top 10 papers) at 75 th percentile of Department Journal Rank and/or web based or video teaching modules since being promoted to associate professor.	National leader of at least one nationally-funded or multi-institutional educational project	Excellent Evaluations; Positive lecture evaluations from national audience; National teaching awards	Leadership role in College or University committees; Leadership role in national professional organization

C. Associate Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Associate Professor in Clinician-Scholar pathway must be based upon clear and convincing evidence that that the candidate has developed a national level of impact and recognition as a clinician scientist since being appointed to the rank of Assistant Professor (see Table 6).

Teaching and Mentoring: A distinctive record of teaching and mentoring excellence is required for promotion. Excellence is demonstrated by positive evaluations by students, residents, fellows, local colleagues and national peers. Teaching awards and other honors are also supportive of teaching excellence. Teaching excellence must be demonstrated through 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. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is very highly valued as a teaching and mentoring activity.

Scholarship: The candidate must demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical research projects or in clinical trials. For example, 25 peer review publications in journals with an average impact factor of 2.0 or 15 publications in journals with an average impact factor of 2.5 would satisfy this threshold. The recognition of the publication by peers can be adjudged by calculation of the H-index. Here 10 publications cited at least 10 times would be a reasonable minimum threshold. Again, participation in collaborative, multidisciplinary research and team science is highly valued even though it may result in “middle” authorship, as long as the faculty member’s unique contribution can be discerned. Faculty on this pathway should have acquired external funding in support of their program of scholarship. Candidates should have a track record of being investigators in foundation, industry or NIH studies. Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section VII [Criteria for promotion to Associate Professor with tenure] above, and will be viewed most favorably.

Table 6: Summary of representative metrics used to assess suitability for promotion to Associate Professor in the Clinician Scholar Pathway.

Peer-review publications	Grants and Patents	Teaching	Service
As a general guideline, 15-20 peer reviewed publications, scholarly review articles, and/or web based or video teaching modules since being appointed as assistant professor at OSU.	Participation on at least one clinical trial or other nationally funded grant.	Excellent Evaluations; Positive lecture evaluations from national audience	University committees; Committee work in professional organization

d. Professor, Clinician Scholar Pathway

The awarding of promotion to the rank of Professor in the Clinician-Scholar pathway must be based upon clear and convincing evidence that that the candidate has developed a national level of recognition as a clinician scientist since being appointed to the rank of Associate Professor (see Table 7).

Teaching and Mentoring: A record of teaching excellence as an Associate Professor must continue to justify promotion to the rank of Professor. The faculty member should have made unique and impactful contributions to the teaching mission as an Associate Professor. Active participation as a mentor in training grants such as NIH T32 or K-awards and other such mentored programs is highly valued as a teaching and mentoring activity.

Mentorship of junior faculty may also demonstrate teaching excellence. It is presumed that this will take the form of a primary mentoring relationship, and not just ad hoc career coaching. Candidates should evidence mentoring relationships by providing mentees’ evaluations.

Service: Promotion to the rank of Professor requires service with distinction to the College of Medicine, OSU, or in a national context. The faculty member should have made new and impactful service contributions as an Associate Professor. Candidates should have led the development of new and innovative clinical or clinical research programs that received national recognition and participated in leadership positions of learned academic education professional societies.

Scholarship: The candidate must demonstrate contributions to scholarship as reflected by primary or senior authorship of peer-reviewed journal publications, scholarly review articles and case reports, and participation in basic, translational or clinical research projects or in clinical trials. For example, 40 peer review publications in journals with an average impact factor of 2.5 or 25 publications in journals with an average impact factor of 4 would satisfy this threshold. The recognition of the publication by peers can be adjudged by calculation of the H-index. Here 18 publications cited at least 18 times each would be a reasonable minimum threshold. Faculty members should ideally have been co-investigators on multiple NIH, industry, or major national clinical trials. Entrepreneurship and inventorship are also evidence of scholarly activity, as described in Section VI.A., and will be viewed most favorably.

Table 7: Summary of representative metrics used to assess suitability for promotion to Professor in the Clinician Scholar Pathway.

Peer-review publications	Grants and Patents	Teaching	Service
As a general guideline, 25-40 peer reviewed publications, scholarly review articles with mean impact factor (of the top 15 papers) at 75 th percentile of Department Journal Rank and/or web based or video teaching modules since being promoted to associate professor.	PI, or multiple-PD/PI on a major national peer reviewed grant <u>or</u> co-investigator status clinical trials or other national grants; or patents; or national reputation for clinical innovation.	Excellent Evaluations; Positive lecture evaluations from national audience; T32 or K award mentor	University committees; Leadership role in national professional organization

e. Associate Professor, Clinician Excellence Pathway

In the circumstance where individuals are assigned major responsibilities (90% time or greater) for clinical care and clinical administrative activities, faculty members may seek **promotion for**

excellence in activities categorized as “scholarship of practice” (or “scholarship of application”). The clinical time commitment of these individuals may not allow the achievement of personal national recognition for their accomplishments; however, their unique contributions serve to enhance the national recognition of the Medical Center or their assigned hospital. For these individuals, their contribution to the regional and national recognition of the Medical Center may serve as a proxy for individual national recognition. Metrics should include consistent rankings among the Nation’s elite in the Castle-Connolly or U.S. News Physicians Survey, or similar (Best Doctors, Inc). At a minimum they should demonstrate:

- a) Referral patterns from beyond the typical distribution for their discipline (demonstrates a reputation external to our organization as “best in class”).
- b) Referral of the most complex and sickest patients (identifies those physicians with clinical skills beyond their peers).
- c) Multiple lines of evidence supporting excellence in clinical performance, including clinical measures such as quality indicators, mortality metrics, complication rates, and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison.
- d) Establishment of quality improvements or systems-based changes that result in enhancement of the care provided to OSU Medical Center patients.
- e) A sustained track record of exemplary clinical leadership and unique program development within the institution.
- f) Demonstration of dissemination of peer reviewed data and expertise in the form of Grand Rounds, clinical practice guidelines, seminars, podcasts, websites, small group activities with peer reviewed data and internal benchmarking.
- g) Demonstration of collaboration with researchers and educators in the department and beyond.

The awarding of promotion to the rank of Associate Professor on the Clinical Excellence Pathway must be based upon convincing evidence that the candidate has demonstrated a level of excellence and a record of impact beyond the usual physician’s scope or sphere of influence. Promotion will not be granted purely on the basis of length of service to the institution or satisfactory job performance.

One of the most important measures of excellence in the scholarship of practice would be evidence that activities or innovations of an individual faculty member have contributed to a change in the scope and the nature of practice in his or her own discipline. Another piece of evidence could be the development of new and innovative approaches to the clinical management of challenging clinical problems. Other examples of evidence that may be used to document excellence in the scholarship of practice include:

The standards for excellence in the scholarship of practice will vary from Department to Department. If a Department wishes to propose promotion to Associate Professor for individuals with heavy (90% or greater) clinical responsibility without national recognition, specific metrics must be carefully detailed in the Department’s Appointment, Promotion and Tenure document. 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.

f. PROFESSOR, CLINICAL EXCELLENCE PATHWAY

The awarding of promotion to the rank of Professor in the Clinical Excellence Pathway must be based upon convincing evidence that that the candidate's work has developed a national impact and recognition for clinical excellence and innovation since being appointed to the rank of Associate Professor. Metrics should include consistent rankings among the Nation's elite in the Castle and Connelly or U.S. News Physicians Survey or similar (Best Doctors, Inc). They should receive patient referrals from throughout the United States. National awards for clinical excellence and innovation are clear indicators of achievement.

3. Promotion of Research Faculty

The criteria for promotion focus principally on the category of research, and the standards are comparable to those used for the Tenure-track for each faculty rank.

a. Associate Professor

Scholarship: Scholarship is broadly defined as the discovery and dissemination of new knowledge. Achievement of excellence in scholarship is demonstrated by discovery of a substantial body of original knowledge that is published in high quality, peer-reviewed journals or proceedings, and achievement of a national reputation for expertise and impact in one's field of endeavor. Such endeavors might include 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 dissemination of research findings, among many potential others. Participation in collaborative, multidisciplinary research and team science is highly valued, especially to the extent that a faculty member's record of collaborative scholarship includes manuscripts on which authorship is first, senior, or corresponding; or the individual input of the faculty member as a middle author is uniquely contributory and clearly evident.

While individual circumstances may vary, both the quantity and quality of publications should be considered. Additional metrics that are considered in assessing a candidate include the total number of citations of their publications, the impact factor of journals in which they have published and their H-index. A sustained record of high quality and quantity of scholarly productivity as an assistant professor is required for promotion to the rank of associate professor or professor. Specific metrics in support of excellence in scholarship may be discipline-specific. For examples, clinician investigators will have less time available for research than basic investigators and appropriate adjustments of these criteria should be made. The range of publications may be slightly adjusted in relation to the proportion of the faculty member's effort that is allocated to clinical service. In particular, it is noted that very few of journals relevant to Orthopaedics have impact factors greater than 3.0 so each candidate's publication record will be evaluated against the highest-impact journals in their sub-discipline.

The development of a competitive, innovative and distinctive program of scholarship is also evidenced by acquisition of peer-reviewed, nationally competitive extramural support as a principal investigator, multiple investigator, or co-investigator. Similarly, status as principal investigator of a project or a program grant is an acceptable criterion for extramural funding.

Funding by the National Institutes of Health as a principal investigator, multiple PI, or project leader on a P01 is expected. It is recognized, however, that not all academic faculty members will pursue research in topics fundable through the NIH mechanism (e.g., fundamental basic science in non-biologic disciplines). Other nationally competitive federal, peer reviewed funding (e.g., NSF, NIOSH, CDC, etc.) will be considered as appropriate to each investigator's research focus. Support from national charitable foundations (e.g. Orthopaedic Research and Education Foundation, Arthroscopy Association of North America, Orthopaedic Trauma association, NFL Charities), or industry will also be considered as evidence of extramural funding but may not, by themselves, meet the required standard.

Faculty members are encouraged to collaborate with other investigators and may therefore meet the requirement for extramural support for their research as a co-investigator, co-principal investigator, or other comparable role. Funding through pharmaceutical or instrumentation companies for investigator-initiated proposals, or as local principal investigator for multi-center trials also meets the requirement of extramural funding. Similarly, faculty members who generate support for their research programs through creation of spin-off companies also meet the criteria for extramural funding. Attempts to quantify the value of research conducted in the Department of Orthopaedics will explicitly consider the value of in-kind support (instruments, implants, etc.) as well as the funds handled through official University channels.

It is expected that the successful candidate will have a sustained record of 75% salary recovery from extramural sources for the time they devote to research. The remainder of their time should be devoted primarily to grant writing and other activities directed towards external research funding.

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. Publication as at least a co-author in the field's highest impact factor journals is an important variable that converges with other factors such as the extent of external funding, invited lectures, invited manuscripts, editorial boards, peer-review panels, and external letters of evaluation in the decision to promote. 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.

Entrepreneurship is a special form of scholarship valued by the College of Medicine. Entrepreneurship includes, but may not be limited to, invention disclosures, software development, materials transfers (e.g., novel plasmids, transgenic animals, cell lines, antibodies, and similar reagents), technology commercialization, patent and copyrights, formation of startup companies and licensing and option agreements. Inasmuch as there are no expressly defined metrics for entrepreneurship, the College of Medicine will analyze these flexibly. 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 revenues should be considered equivalent to extramural grant awards, and materials transfer activities should be considered evidence of national (or international) recognition and impact. These entrepreneurial activities will be recognized as scholarly or service activities in the promotion dossier.

b. Professor

The awarding of promotion to the rank of Research Professor must be based upon clear and convincing evidence that the candidate has developed a national leadership role or an international level of impact and recognition.

Scholarship: A sustained record of external funding and an enhanced quality and quantity of scholarly productivity as an Associate Professor is required for promotion to the rank of Research Professor. Clear evidence of national leadership and/or an international reputation must be achieved. Examples of such a national reputation include service on NIH or equivalent grant review panels, participation on steering, guideline or advisory committees, selection for service in a national professional society, invitation for lectureships or scholarly reviews, receipt of national scientific awards, external letters of evaluation and other measures of national impact.

4. PROMOTION OF ASSOCIATED FACULTY

By definition, Associated Faculty members are appointed for one year terms. As such, associated faculty are not eligible for traditional promotion, but they are eligible to be reappointed at the next rank. Appointment or reappointment at advanced rank should evidence excellence in a specific aspect of the College mission. All new appointments at advanced rank require a review and vote of the eligible faculty, an evaluation by the department chair, and an evaluation letter from a person that can attest to the faculty member's primary contribution in clinical care, teaching or scholarship.

a. ASSOCIATE PROFESSOR, ADJUNCT FACULTY AND ASSOCIATED CLINICAL FACULTY

Teaching and Mentoring: For faculty members whose principal focus is teaching and mentoring, benchmarks for appointment or reappointment at advanced rank include sustained excellence in reviews by students and residents supervised by the faculty member, teaching awards, introduction of students to new modes of practice or patient populations not previously available to learners, participation or leadership in curriculum development.

Scholarship: For faculty members whose principal focus is scholarship, benchmarks include participation in research projects, programs, or other scholarly activity that result in enhanced regional recognition of the College through publications, funded programs, or other means. Presentations at regional meetings or leadership or participation in regional organizations dedicated to the faculty member's area of focused scholarship

serve as further indicators of advancement to this rank. Although a record of publication is not an expectation for Associated faculty, publications or other forms of dissemination of scholarship (*e.g.*, web based documents, other electronic media) are valued and contribute to advancement in rank. This is particularly true for faculty who are appointed based on their collaboration in research or other scholarly activities. Publications may be of diverse types and are not required to be first or senior authored.

Leadership and Administration: For faculty members whose principal focus is service, benchmarks may include the faculty member's membership and participation on committees or other leadership groups. Leadership of subgroups within a committee, such as a writing group, or supervision of a task force is another example of such benchmarks. There must be a sustained commitment to leadership and administration rather than a single interaction with a College or Medical Center committee or leadership group.

b. PROFESSOR, ADJUNCT FACULTY AND ASSOCIATED CLINICAL FACULTY

Appointment or Reappointment to the rank of Professor is based not only on sustained contributions in the faculty member's area of focus but on a more advanced stage of leadership or greater sphere of impact than that of an Associate Professor.

Teaching and Mentoring: For faculty members whose principal focus is teaching and mentoring, faculty appointed or reappointed to the rank of Professor will not only have the accomplishments of an Associate Professor but will also attain broader recognition for contributions through curriculum development and recognition of excellence in education. This may come in the form of regional and national teaching awards, membership and leadership in national organizations and meetings dedicated to medical education, adoption of teaching innovations and curricula introduced by the faculty member to institutions outside the College of Medicine, and invitations to speak at outside institutions. Although publications are not an expectation, publications or web sites conveying the faculty member's innovations will serve as an indication for dissemination of innovation outside the College.

Scholarship: For faculty members whose principal focus is scholarship, the scholarly contributions of Associated faculty appointed or reappointed to the rank of Professor will exceed the scope of those at the rank of Associate Professor. Benchmarks include participation in research projects, programs, or other scholarly activities that result in enhanced national recognition of the College through publications, funded programs, or other means. Authorship or co-authorship of manuscripts and participation in nationally funded programs of research are examples of benchmarks for those achieving this rank. Presentations at national meetings and membership or leadership in national organizations dedicated to the faculty member's focus of scholarship are further benchmarks.

Leadership and Administration: For faculty members whose principal focus is service, the faculty member appointed or reappointed to the rank of Professor will progress to senior leadership roles in the College or Medical Center. This may consist of serving as chair of

committees that contribute to the growth in excellence of the College or which have made fundamental and innovative changes in College procedures, practice or culture. There must be a record of sustained senior leadership rather than a single interaction with a College or Medical Center committee or leadership group.

B. Procedures

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

In evaluating a candidate's qualifications in teaching, scholarship, and service, reasonable flexibility will be exercised, balancing (where appropriate) heavier commitments and responsibilities in one area of performance against lighter commitments and responsibilities in another. As the Department enters new fields of endeavor, including interdisciplinary involvement, and places new emphases on its continuing activities, instances will arise in which the proper work of a faculty member may depart from established academic patterns. Generally, distinguished achievement in scholarship must include evidence of creative expression and innovation in the candidate's discipline.

Care must be taken to apply the criteria for appointment and promotion with sufficient flexibility. In all instances, superior intellectual attainment, in accordance with the criteria set forth, is an essential qualification for appointment and promotion to all faculty positions. Insistence upon this standard for continuing members of the faculty is necessary for the maintenance and enhancement of the University as an institution dedicated to the discovery and transmission of knowledge.

1. Candidate Responsibilities

Candidates are responsible for utilizing *Vita* to submit a complete, accurate dossier fully consistent with Office of Academic Affairs guidelines. Candidates should not sign the Office of Academic Affairs Candidate Checklist without ascertaining that they have fully met the requirements set forth in the core dossier outline including, but not limited to, those highlighted on the checklist.

Candidates must submit a copy of the APT document under which they wish to be reviewed. Candidates may submit 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, 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

Candidates are responsible for reviewing the list of potential external evaluators developed by the department chair and the Promotion and Tenure Committee. The candidate may add no more than three additional names, but is not required to do so. The candidate may request the removal of no more than two names, providing the reasons for the request. The department chair decides whether removal is justified. (Also see External Evaluations below.)

2. Promotion and Tenure Committee Responsibilities

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

- To review this document annually and to recommend proposed revisions to the faculty.
- To consider annually, in spring semester, requests from faculty members seeking a non-mandatory review in the following academic year and to decide whether it is appropriate for such a review to take place. Only professors on the committee may consider promotion review requests to the rank of professor. 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 (including student and peer evaluations of teaching as appropriate). Lack of the required documentation is necessary and sufficient grounds on which to deny a non-mandatory review.
 - A tenured or non-probationary faculty member may only be denied a formal promotion review under Faculty Rule [3335-6-04](#) for one year. If the denial is based on 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.
 - Consistent with Office of Academic Affairs policy, only faculty members who are citizens or permanent residents of the United States may be considered for non-mandatory tenure review. The committee must confirm with the department chair that an untenured faculty member seeking non-mandatory tenure review is a U.S. citizen or permanent resident (has a "green card"). Faculty members not eligible for tenure due to lack of citizenship or permanent residency are moreover not considered for promotion by this department.
- 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 making a positive recommendation during the review itself.
- Annually, in late spring through early autumn semester, to provide administrative support for the promotion and tenure review process as described below.

- **Late Spring:** Select from among its members a Procedures Oversight Designee who will serve in this role for the following year. The Procedures Oversight Designee cannot be the same individual who chairs the committee. The Procedures Oversight Designee's responsibilities are described in the Office of Academic Affairs annual procedural guidelines.
- **Late Spring:** Suggest names of external evaluators to the department chair.
- **Summer:** Gather internal evidence of the quality of the candidate's teaching, scholarship, and service from students and peers, as appropriate, within the department.
- **Early Autumn:** Review candidates' dossiers for completeness, accuracy (including citations), and consistency with Office of Academic Affairs requirements; and work with candidates to assure that needed revisions are made in the dossier before the formal review process begins.
- Meet with each candidate for clarification as necessary and to provide the candidate an opportunity to comment on his or her dossier. This meeting is not an occasion to debate the candidate's record.
- Establish the meeting(s) of the eligible faculty in line with the quorum and voting procedures established in section III above.
- Draft an analysis of the candidate's performance in teaching, scholarship and service to provide to the full eligible faculty with the dossier; and seek to clarify any inconsistent evidence in the case, where possible. The committee neither votes on cases nor takes a position in presenting its analysis of the record.
- Revise the draft analysis of each case following the meeting of the full eligible faculty, to include the faculty vote and a summary of the faculty perspectives expressed during the meeting; and forward the completed written evaluation and recommendation to the department chair.
- Provide a written response, on behalf of the eligible faculty, to any candidate comments that warrant 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.

4. Department Chair Responsibilities

The responsibilities of the department chair are as follows:

- Where relevant, to verify the prospective candidate's residency status. Faculty members who are neither citizens nor permanent residents of the United States may not undergo a non-mandatory review for tenure, and tenure will not be awarded as the result of a mandatory review until permanent residency status is established. Faculty members not eligible for tenure due to lack of citizenship or permanent residency are moreover not considered for promotion by this department.
- **Late Spring Semester:** To solicit external evaluations from a list including names suggested by the Promotion and Tenure Committee, the chair and the candidate. (Also see External Evaluations below.)
- To solicit an evaluation from a TIU head of any department with which the candidate has a joint appointment.
- To make adequate copies of each candidate's dossier available in an accessible place (option: a secure on-line site) for review by the eligible faculty at least one week before the meeting at which specific cases are to be discussed and voted.
- To remove any member of the eligible faculty from the review of a candidate when the member has a conflict of interest but does not voluntarily withdraw from the review.
- To attend the meetings of the eligible faculty at which promotion and tenure matters are discussed and respond to questions raised during the meeting.
- To provide an independent written evaluation and recommendation for each candidate, following receipt of the eligible faculty's completed evaluation and recommendation.
- To meet with the eligible faculty to explain any recommendations contrary to the recommendation of the committee.
- To inform each candidate in writing after completion of the department review process:
 - of the recommendations by the eligible faculty and department chair
 - of the availability for review of the written evaluations by the eligible faculty and department chair
 - of the opportunity to submit written comments on the above material, within ten 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 he or she expects to submit comments.
- To provide a written response to any candidate comments that warrants response for inclusion in the dossier.

- To forward the completed dossier to the college office by that office's deadline, except in the case of associated faculty for whom the department chair recommends against promotion. A negative recommendation by the department chair is final in such cases.
- To receive the Promotion and Tenure Committee'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 department chair of the other tenure initiating unit by the date requested.

5. External Evaluations

External evaluations are obtained for all promotion and/or tenure reviews. As described above, a list of potential evaluators is assembled by the 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 do 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

A minimum of five credible and useful evaluations 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 can give an “arms’ length” evaluation of the research record and is not a close personal friend, research collaborator, or former academic advisor or post-doctoral or residency mentor of the candidate. Qualifications are generally judged on the basis of the evaluator's expertise, record of accomplishments, and institutional affiliation. This department will only solicit evaluations from full professors at institutions comparable to Ohio State. In the case of an assistant professor seeking promotion to associate professor with tenure, a minority of the evaluations may come from associate professors.
- Provides 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.

Since the department cannot control who agrees to write and or the usefulness of the letters received, at least twice as many more letters are sought than 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. Any potential reviewer who declines to write a letter of evaluation must be included in the department’s report of non-responding evaluators.

The department follows the Office of Academic Affairs suggested format [<http://oaa.osu.edu/sampledocuments.html>] for letters requesting external evaluations.

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.

C. Documentation

Faculty members preparing their dossiers for promotion and/or tenure review should consult Volume 3 of OAA's [Policies and Procedures Handbook](#) to ensure that all required documentation is included. Additionally, it is highly recommended that faculty members consult the college's Dossier Standardization Guidelines for information about how and where to enter information into the core dossier in alignment with college objectives.

The following paragraphs provide suggested standards for documenting excellence in Teaching, Research and Scholarship, and Service. Additional standards are included in appendices attached to this document, the specific descriptions of initial appointments, and in the outlined criteria for promotion in other sections of this document.

1. Teaching

Teaching is defined as imparting knowledge, experience, insight, and skill to other persons. In the College of Medicine, teaching must be consistently effective and of high quality.

All Tenure-track and Clinical faculty members in the College of Medicine must be engaged in teaching, development of the Department's and College's academic programs, and mentoring of students. Evidence of effective teaching must be demonstrated by documentation of teaching activities over a sustained period of time. The College's Office of Medical Education can provide assistance with appropriate documentation and assessment tools to be used in evaluation of teaching.

Evidence for effective teaching may be collected from multiple different sources including students, peers, self-evaluation and administrators. Student evaluations and peer evaluations, at a minimum, are required. Excellence is demonstrated by positive evaluations from students,

residents, fellows, local colleagues and national peers See Section X for information on student and peer evaluations of teach.

Typically documentation of teaching for the promotion dossier will include, for the time period since the last promotion or the last five years, whichever is less:

- cumulative SEI reports (Student Evaluation of Instruction computer-generated summaries prepared by the Office of the University Registrar) for every formal class
- MedStar evaluations
- peer evaluation of teaching reports as required by the department's peer evaluation of teaching program (details provided in the Appendix to this document)
- teaching activities as listed in the core dossier including
 - involvement in graduate/professional exams, theses, and 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
- 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 review 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.

Other documentation of teaching may include an administrator's assessment of the candidate's teaching load, contribution to the teaching mission of the academic unit, and contribution to curriculum development. Evidence of the success of the candidate's former students including professional and graduate students and post-doctoral trainees should be documented.

2. Scholarship

Scholarship is broadly defined as the discovery and dissemination of new knowledge by research, study and learning. In the College of Medicine, a faculty member's scholarship must be demonstrated to be of high quality, significance and impact.

All tenure-track, clinical, and research faculty members must develop a record of scholarship that is documented by a body of original scholarly work over a period of time. 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 communities apropos to the faculty member's field of scholarship.

Evidence of scholarship can include: 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 or sales figures, adoption of texts or procedures by external departments or academic health centers, and so forth.

3. 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.

Evidence of administrative service to the University may include appointment or election to Department, College, and/or University committees, holding administrative positions; development of innovative programs, and participating in affirmative action and 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 professional consultant to industry, government, and education. While provision of high quality patient care is expected of all faculty members with clinical responsibilities, in and of itself it is insufficient for meeting the service requirement for Tenure-track and Clinical faculty.

VIII. APPEALS

Decisions regarding the renewal of probationary appointments and promotion and tenure must be made in accordance with the standards, criteria, policies and procedures described in this document, in the rules of the University, and in the Appointments, Promotion and Tenure document of the College of Medicine. If a candidate believes that a non-renewal decision or negative promotion and tenure action has been made in violation of these policies, and therefore alleges that it was made improperly, the candidate may appeal that decision. University Rules

[3335-5-05](#) and [3335-6-05](#) describe the criteria and the procedures for appealing a decision based on the allegation of improper evaluation.

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.

IX. REVIEWS IN THE FINAL YEAR OF PROBATION

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 head of the Department, and may not come from the faculty member himself/herself. Details of the criteria and procedures for a review in the final year of probation are described in University Rule [3335-6-05](#) (B).

If a terminal year review is conducted by this Department and the College, it will be made consistent with this document, the Department's Appointments, Promotion and Tenure document, 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.

X. 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-based (electronic) assessment tools are to be employed. Faculty members may supplement the required assessment tool with others if they wish. Students must be provided an opportunity to assess the instructor and course using the required assessment tool in every regular classroom course. Guidelines must be established for the frequency with which required assessment tools should be administered in other types of instructional settings such as outpatient clinics, inpatient services, and the operating room. Regardless of the instructional setting, effort should be made to obtain evaluations from the largest number of students possible. When there is a significant discrepancy between the number of students enrolled and the number providing evaluations, the evaluations cannot be assumed to represent a consensus of student opinion.

B. Peer Evaluation of Teaching

Each faculty member in the Department of Orthopaedics is required to undergo peer review of at least two teaching sessions each year. The types of teaching activities that qualify for this evaluation, the format for this evaluation, and the appropriate documents for recording this evaluation are outlined in the Department written policy for peer review. The peer review documents shall become part of the permanent file of the faculty member; they will be used as part of the annual review of the faculty member and included in the dossier for reappointment and/or promotion and/or tenure. Faculty members may supplement the required assessment tool with others if they wish. Students must be provided an opportunity to assess the instructor and course using the required assessment tool in every regular classroom course. Guidelines must be established for the frequency with which required assessment tools should be administered in other types of instructional settings such as outpatient clinics, inpatient services, and the operating room. Regardless of the instructional setting, effort should be made to obtain evaluations from the largest number of students possible. When there is a significant discrepancy between the number of students enrolled and the number providing evaluations, the evaluations cannot be assumed to represent a consensus of student opinion.

XI. APPENDICES

A. GLOSSARY OF TERMS

Adjunct Faculty – 0% FTE, non-salaried, non-clinical associated faculty that participate in the education and training of medical students. (see also **Associated Faculty**). An adjunct appointment is not the same as a **Courtesy Appointment**.

APT – Appointments, Promotion and Tenure

Appointments, Promotion and Tenure Committee – the body of faculty that make recommendations to the Department Chair or Dean regarding the viability of candidates for appointment, promotion and/or tenure.

Appointments, Promotion and Tenure Document – a document required of every Department and College that describes the guidelines that must be used for making appointments, and for faculty to achieve promotion and tenure.

Associated – faculty that are non-tenure track and not on clinical or research faculty appointments. These faculty fall into many sub-categories. (See also Clinical Associated Faculty, Adjunct Faculty, full-time Paid Associated)

Clinical Associated Faculty – 0% FTE community physicians that participate in the education and training of medical students and residents. (see also **Full-time Paid Associated Faculty**)

Clinical Faculty – the faculty category for physicians who primarily engage in clinical teaching and practice.

Courtesy Appointment – a no salary appointment for a tenure-track, clinical or research faculty member from another academic department within the University. The title associated with the no salary appointment is always the same as the position in the other department.

Dossier – a document compiled by a promotion and/or tenure candidate to demonstrate achievement.

Eligible faculty – the faculty who are authorized vote on appointment, promotion and tenure matters. These faculty must be above the candidate's rank. Clinical and Research faculty may not vote on tenure track faculty.

Exclusion of Time – the ability to have up to three years taken off the time clock toward achieving tenure

Faculty appointment types – the College of Medicine has four: Tenure-track, Clinical, Research, and Associated

FTE – Full-time equivalent, the percentage of time worked expressed as a decimal. Full-time is 1.0, half-time is .5, and quarter-time is .25.

Full-time Paid Associated Faculty – 50-100% FTE physicians working within (and being paid solely by) the OSU Health System. (see also **Clinical Associated Faculty**)

Joint Appointment – when a faculty member’s FTE (and salary support) is split between one or more academic departments it is considered to be a joint appointment. (see also **Courtesy Appointment**)

Mandatory review – a required 4th year, 8th year, tenure review, or reappointment review

MOU – Memorandum of Understanding – a document between two academic departments expressing how a faculty member’s appointment, time, salary and other resources will be allocated and/or divided. (Used during transfer of TIU and for joint appointments.)

Non-mandatory review – voluntary promotion or tenure review

OAA – Office of Academic Affairs

Peer Review – evaluation of teaching by colleagues. Documentation of peer review is required for the promotion and tenure dossier.

Penultimate year – the next to last year of a contract, used to determine required clinical and research faculty review dates

Prior Service Credit – Application of years of service at the University in one faculty category or rank applied to another category or rank when a faculty member transfers appointments or is promoted. Prior service credit is not allowed for transfers; it is automatic for promotions unless turned down. For probationary Tenure-track appointments, prior service credit shortens the length of time that a faculty member has to achieve tenure by the amount of the credit.

Probationary period – the length of time in which a faculty member on the Tenure Track has to achieve tenure (6 years for faculty without clinical service, 11 years for faculty with clinical service). It is also defined as the first contract for Clinical or Research faculty.

Reappointment Review – the review of a Clinical faculty member in the penultimate year of their contract to determine if the contract will be renewed.

Research Faculty – the faculty category for basic scientists who engage exclusively in research-based scholarship.

Vita – the University’s online dossier and CV creation tool

SEI – Student Evaluation of Instruction

Tenure – permanent employment status only granted to faculty on the Tenure-track when the probationary period is successfully completed

Tenure Track – the faculty track for basic scientists and physicians with a major focus of research-based scholarship. **TIU – Tenure Initiating Unit**, usually synonymous with Department. Centers and Institutes are not Tenure Initiating Units

University Rules – or *Rules of the University Faculty* – The section of the Ohio Revised Code that prescribes the rules and governance of The Ohio State University and its employees.

B. STATEMENT OF PROFESSIONAL ETHICS - AMERICAN ASSOCIATION OF UNIVERSITY PROFESSORS

The statement that follows was originally adopted in 1966. Revisions were made and approved by the Association's Council in 1987 and 2009.

Introduction

From its inception, the American Association of University Professors has recognized that membership in the academic profession carries with it special responsibilities. The Association has consistently affirmed these responsibilities in major policy statements, providing guidance to professors in such matters as their utterances as citizens, the exercise of their responsibilities to students and colleagues, and their conduct when resigning from an institution or when undertaking sponsored research. The *Statement on Professional Ethics* that follows sets forth those general standards that serve as a reminder of the variety of responsibilities assumed by all members of the profession.

In the enforcement of ethical standards, the academic profession differs from those of law and medicine, whose associations act to ensure the integrity of members engaged in private practice. In the academic profession the individual institution of higher learning provides this assurance and so should normally handle questions concerning propriety of conduct within its own framework by reference to a faculty group. The Association supports such local action and stands ready, through the general secretary and the Committee on Professional Ethics, to counsel with members of the academic community concerning questions of professional ethics and to inquire into complaints when local consideration is impossible or inappropriate. If the alleged offense is deemed sufficiently serious to raise the possibility of adverse action, the procedures should be in accordance with the 1940 *Statement of Principles on Academic Freedom and Tenure*, the 1958 *Statement on Procedural Standards in Faculty Dismissal Proceedings*, or the applicable provisions of the Association's *Recommended Institutional Regulations on Academic Freedom and Tenure*.

The Statement

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.

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C. PRINCIPLES OF MEDICAL ETHICS AND PROFESSIONALISM IN ORTHOPAEDIC SURGERY

The following *Principles of Medical Ethics and Professionalism in Orthopaedic Surgery* have been adopted by the Board of Directors of the American Academy of Orthopaedic Surgeons. They are not laws, but rather standards of conduct that define the essentials of honorable behavior for the orthopaedic surgeon.

I. Physician-Patient Relationship. The orthopaedic profession exists for the primary purpose of caring for the patient. The physician-patient relationship is the central focus of all ethical concerns. The orthopaedic surgeon should be dedicated to providing competent medical service with compassion and respect.

II. Integrity. The orthopaedic surgeon should maintain a reputation for truth and honesty with patients and colleagues, and should strive to expose through the appropriate review process those physicians who are deficient in character or competence or who engage in fraud or deception.

III. Legalities and Honor. The orthopaedic surgeon must obey the law, uphold the dignity and honor of the profession, and accept the profession's self-imposed discipline. The orthopaedic surgeon also has a responsibility to seek changes in legal requirements that are contrary to the best interest of the patient.

IV. Conflicts of Interest. The practice of medicine inherently presents potential conflicts of interest. Wherever a conflict of interest arises, it must be resolved in the best interest of the patient. The orthopaedic surgeon should exercise all reasonable alternatives to ensure that the most appropriate care is provided to the patient. If a conflict of interest cannot be resolved, the orthopaedic surgeon should notify the patient of his or her intention to withdraw from the care of the patient.

V. Confidentiality. The orthopaedic surgeon should respect the rights of patients, of colleagues, and of other health professionals and must safeguard patient confidences within the constraints of the law.

VI. Medical Knowledge. The orthopaedic surgeon continually must strive to maintain and improve medical knowledge and to make relevant information available to patients, colleagues, and the public

VII. Cooperation. Good relationships among physicians, nurses, and health care professionals are essential for good patient care. The orthopaedic surgeon should promote the development of an expert health care team that will work together harmoniously to provide optimal patient care.

VIII. Remuneration. Remuneration for orthopaedic services should be commensurate with the services rendered. Orthopaedic surgeons should deliver high quality, cost-effective care without discrimination.

IX. Publicity. The orthopaedic surgeon should not publicize himself or herself through any medium or form of public communication in an untruthful, misleading, or deceptive manner.

X. Societal Responsibility. The orthopaedic surgeon has a responsibility not only to the individual patient, to colleagues and orthopaedic surgeons-in-training, but also to society as a whole. Activities that have the purpose of improving the health and well-being of the patient and/or the community in a cost-effective way deserve the interest, support, and participation of the orthopaedic surgeon.

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D. PEER-REVIEWED ORTHOPAEDICS AND MUSCULOSKELETAL JOURNALS

Orthopaedic and Musculoskeletal Journals

Rank	Title	Impact Factor
1	BIOMATERIALS	7.883
2	SPORTS MED	5.072
3	ACTA BIOMATER	4.824
4	J APPL PHYSIOL	4.235
5	MED SCI SPORT EXER	4.106
6	EXERC SPORT SCI REV	3.825
7	AM J SPORT MED	3.821
8	BRIT J SPORT MED	3.545
9	ARTHROSCOPY	3.317
10	J MECH BEHAV BIOMED	3.297
11	BIOMECH MODEL MECHAN	3.162
12	PHYS MED BIOL	3.057
13	J BIOMED MATER RES A	3.044
14	SPINE J	3.024
15	J ORTHOP RES	2.976
16	J BONE JOINT SURG AM	2.967
17	IEEE ENG MED BIOL	2.844
18	J AM ACAD ORTHOP SUR	2.547
19	J SCI MED SPORT	2.542
20	J ORTHOP SPORT PHYS	2.538
21	SPINE	2.510
22	BIOMED MATER	2.467
23	J BIOMECH	2.463
24	INT J SPORTS MED	2.381
25	ANN BIOMED ENG	2.376
26	CLIN SPORT MED	2.356
27	J BONE JOINT SURG BR	2.351
28	J MATER SCI-MATER M	2.325
29	J SHOULDER ELB SURG	2.314
30	GAIT POSTURE	2.313
31	LASER MED SCI	2.311
32	INJURY	2.269
33	ARCH PHYS MED REHAB	2.254
34	J BIOMATER APPL	2.246
35	J BIOMED MATER RES B	2.220
36	J ARTHROPLASTY	2.207
37	CLIN ORTHOP RELAT R	2.116
38	CLIN J SPORT MED	2.110
39	EXPERT REV MED DEVIC	2.043
40	SPORTS MED ARTHROSC	2.043
41	CLIN BIOMECH	2.036
42	EUR SPINE J	1.994
43	J ATHL TRAINING	1.993
44	J REHABIL MED	1.967
45	BMC MUSCULOSKEL DIS	1.941
46	ACTA ORTHOP	1.897
47	J SPORT SCI	1.870
48	KNEE SURG SPORT TR A	1.857
49	J BIOMAT SCI-POLYM E	1.842
50	J ORTHOP TRAUMA	1.792
51	IEEE T BIO-MED ENG	1.790
52	ARTIF ORGANS	1.719
53	J MOTOR BEHAV	1.650

54	J BIOMECH ENG-T ASME	1.584
55	INT ORTHOP	1.561
56	INT J ARTIF ORGANS	1.503
57	J ARTIF ORGANS	1.488
58	J HAND SURG-AM	1.439
59	KNEE	1.403
60	ORTHOP CLIN N AM	1.398
61	J SPINAL DISORD TECH	1.333
62	J APPL SPORT PSYCHOL	1.264
63	ASAIO J	1.221
64	MOTOR CONTROL	1.204
65	ARCH ORTHOP TRAUM SU	1.196
66	J PEDIATR ORTHOPED	1.153
67	BIOMED ENG ONLINE	1.119
68	ORTHOPEDICS	1.098
69	FOOT ANKLE INT	1.092
70	CURR SPORT MED REP	1.086
71	J APPL BIOMECH	1.078
72	BIO-MED MATER ENG	1.026
73	P I MECH ENG H	0.957
74	EUR J SPORT SCI	0.890
75	J HAND SURG-EUR VOL	0.868
76	SPORT EDUC SOC	0.857
77	J ORTHOP SCI	0.839
78	HAND CLIN	0.802
79	HIP INT	0.792
80	INT J SPORT PHYSIOL	0.787
81	SOCIOL SPORT J	0.778
82	SPORT BIOMECH	0.763
83	J FOOT ANKLE SURG	0.760
84	P I MECH ENG P-J SPO	0.727
85	J SPORT SCI MED	0.676
86	J HARD TISSUE BIOL	0.674
87	J SPORT REHABIL	0.662
88	BIOMED TECH	0.590
89	ORTHOPAIDE	0.583
90	J APPL BIOMATER BIOM	0.544
91	KINESIOLOGY	0.525
92	ORTHOP TRAUMATOL-SUR	0.520
93	J MECH MED BIOL	0.493
94	J MED DEVICES	0.487
95	OPER TECHN SPORT MED	0.438
96	OPER ORTHOP TRAUMATO	0.433
97	ACTA BIOENG BIOMECH	0.432
98	J EXERC SCI FIT	0.421
99	J PEDIATR ORTHOP B	0.421
100	J MED BIOL ENG	0.420
101	SCI SPORT	0.364
102	J HUM KINET	0.321
103	ACTA ORTHOP TRAUMATO	0.309
104	J BACK MUSCULOSKELET	0.292
105	MED SPORT	0.255
106	INT SPORTMED J	0.250
107	ISOKINET EXERC SCI	0.242
108	OSTEOLOGIE	0.186
109	BIOL SPORT	0.150
110	EUR J ORTHOP SURG TR	0.146

Notes:

Top 11 journals all Sports or Basic Science

Sub-specialty variations - highest in:

Sports = Sports Med	5.092
Spine = Spine J	3.024
Total Joints = J Arthroplasty	2.207
Trauma = J. Ortho Trauma	1.792
Foot/Ankle = Foot & Ankle Intern	1.092
Oncology = no journal listed	

Highest impact journal in specialty is not always the best journal in that discipline

Average	1.705
90th %ile	3.057
75th %ile	2.325
50th %ile	1.503