I. Introduction

Starting with cycle 2018/2019 to our current cycle 2021/2022, Ohio State has NOT required use of the Vita system to build your dossier. However, your dossier must still follow the “OAA Core Dossier template 2021.”

Dossiers that do not follow the template are in jeopardy of being returned by the College of Medicine back to the Department causing delays in the promotion process.

Have you input data into one of the past dossier databases (OSU Pro, Research in View or Vita)?

- If yes, then it may be beneficial to download your dossier from Vita in order to capture your previous data. Please note that the transfer of data will not produce a good quality dossier. You will need to clean up past data before adding new information. Some faculty will choose to simply start from scratch with the Microsoft Word template of the dossier to cut and paste from their own CV.
  - Vita (Elements) pulls information and puts them into tables. They are not in Microsoft Word with tabs between columns. If you highlight the section, you can add and delete rows to add new items to that section.
- If no, then I would suggest following the dossier template in Microsoft Word.

NO changes to the actual dossier template are allowed! Please do not add any tables, graphs or images and please do not remove any tables.

It is expected that you will have sections labeled as “None” and you must leave those in the template.

All sections should be in reverse chronological order, with the newest and most recent information at the top. Each subsection should be numbered (publications, presentations, etc).

Write in layman’s terms. The reviewers of your dossier at the College and University level are not in your same discipline and specialty. Make sure you eliminate the need for discussion of a reviewer to guess the impact of your academic work:

- Clearly explain what you are doing
- Spell out acronyms
- Avoid abbreviations
- Give quantities/details

Proof read the final document front to back. Look to fill in gaps, fix page breaks, etc. Make it look concise and presentable. Neatness Counts!

Updated 2/22/2021 by Suzanne Knott, P&T Coordinator, Dept of Surgery
I have been an employee at The Ohio State University Medical Center since 2003 working in both Surgical Oncology and Neurosurgery. I was promoted to the P&T coordinator position in the Department of Surgery in 2014. I support our Department of Surgery, Vice Chair of Academic Development and Promotion and Tenure, Dr. William E. Carson, III. He has been a faculty member here at Ohio State for over 20 years and served on the College of Medicine P&T Committee from 2010-2019. All of this experience has helped me to develop this template with tips.
This guide with tips includes notes from:


- Core dossier outline, revised 5/15/2020

- An Insider’s Guide to Research in View by Dr. Judith Westman
  Research in View was a previous software system used by Ohio State to build a dossier. The tips for each section were still relevant and combined into the new template we currently use.

- Feedback and tips from Dr. Oberyszyn and Kendra Kay that were seen during the College of Medicine P&T Committee Review meetings.
Name, MD  
The Ohio State University Wexner Medical Center  
Street Address  
Columbus, Ohio, 43210  
Phone:  
Email:  

Biographical Narrative  
This should be your Ohio State Narrative and not Biographical Narrative. Talk about your IMPACT since date of hire or last promotion. No need to restate your training or previous appointments. That information is listed below. Stick to describing your impact.  

This is the first thing a reviewer will read!  

Please clearly state your track and pathway (pathways only apply to the clinical track). Also list your % effort spent on clinical duties. You will explain your clinical duties in more detail later but listing the percent here will help the reviewer have a frame of reference on your time for academic activities outside of delivering patient care.  

For example, I am currently an Associate Professor on the Clinical Track and am requesting promotion to Professor on the Clinical Excellence Pathway. My clinical FTE is .8. (Yes this information is included in additional paperwork submitted to the College of Medicine but is helpful for external evaluators and internal reviewers to list here.)  

Make sure it is easy to know when you were hired/last promoted at Ohio State.  

All narrative sections in the dossier should contain “I” statements and not “we” statements. Your narratives create and give perspective to your data points and help to demonstrate your level of recognition impact. Create your story of why you should be promoted through the narratives.  

If applicable, add a paragraph about the Impact of COVID on your career if you needed to shift your academic or research priorities or had to adjust your timeline for research, etc.  

Current Appointments  
2016-Present  Associate Professor of Surgery  

Academic Appointments  
2011-2016  Assistant Professor of Surgery  

Other Appointments  
2014-Present  Associate Director, Minimally Invasive Surgery Program  

Degrees  
1994 - 1998  MD, New York University School of Medicine, New York, NY
Fellowships, Internships, Residency
1999-2001  Resident in General Surgery, Massachusetts General Hospital, Boston, MA
1998-1999  Intern in General Surgery, Massachusetts General Hospital, Boston, MA

Certifications
2007  Board Certified, General Surgery, American Board of Surgery

Licensures
2011  State Medical Board of Ohio
II. Core Dossier

What is a Core Dossier?
A Dossier should be like a Super CV:

- What have you done?
  - All data sections in the dossier include everything you have completed in your professional career.
- Why does it matter?
  - Narratives should focus on the most recent data (last 5 years or since last promotion)

Create unity and themes in your dossier through your teaching, research, service and clinical role. 
Connect the dots to show your IMPACT!

Questions that should be clear in your narratives:

- How are you known in your field?
- How have you created impact on a national, international level?
- How do you measure and demonstrate your impact?
- How have you met your department’s P&T criteria?

Be your own advocate. Do not be modest but do not be arrogant.

Address any challenges or setbacks you may have had. How you overcame these can be turned into a strength!

Tips in this section are written in red.

Number pages consecutively within the Core Dossier (Section II). The first page will be the first item in the Core Dossier Outline.

Include every item in the Core Dossier Outline in the dossier. If a particular item is not applicable, or there is nothing to report, write “None” for the item. Do not omit the item.

All material should be organized in reverse chronological order.

Do not duplicate information in multiple sections.

Make sure to include the years for each section, especially for any teaching or service.

Special guidance for documentation due to COVID-19

- Meeting presentations (talks, posters) that have been cancelled:
  Stepleman, L. M. and McCall, W. V. (accepted). Facilitating Faculty Success in Academic Medicine: An Institutional Example. 2020 Group on Faculty Affairs Professional Development conference, Portland, OR. Due to Covid-19 related conference cancellation, this peer-reviewed abstract and/or presentation was accepted but not presented.

Black is the template to follow
1) Undergraduate, graduate, and professional courses taught

Please list everything in 1 single table, recurrent items and one-time items. Include formal faculty/learner teaching opportunities (bedside teaching, rounds, operating room, clinics, lab, etc) for medical students, residents, fellows, post docs, etc. Do not include mentoring of other faculty members. Mentoring of faculty would appear under service, number 5 – Other professional/public community service.

Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

<table>
<thead>
<tr>
<th>Period Offered</th>
<th>Course Number and Title</th>
<th>Enrollment</th>
<th>% Taught, Role</th>
<th>Stdt. Eval.</th>
<th>Peer Eval.</th>
<th>Other Eval.</th>
<th>Instr. Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017 – Present</td>
<td>3rd Year Medical Student Surgery Clerkship</td>
<td>6 per month</td>
<td>40% taught, led interactive patient-based learning encounters on a daily basis, proctored technical skills in the clinical setting and facilitated team learning sessions with in depth case based learning</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>Precepting</td>
</tr>
<tr>
<td>2019 Spring Semester</td>
<td>Physiology 6102, GI Physiology, Class#1486.</td>
<td>37, mostly graduates, and senior undergrads</td>
<td>&gt;80%, I taught 8 of total 10 GI Physiology lectures, plus final exam</td>
<td>Yes. SEI report</td>
<td>No</td>
<td>No</td>
<td>Re-designed lectures and exam questions</td>
</tr>
</tbody>
</table>

2) Involvement in graduate/professional exams, theses, and dissertations and undergraduate research

Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

<table>
<thead>
<tr>
<th>Category</th>
<th>Current</th>
<th>Complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctoral Student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dissertation Advisor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctoral Student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dissertation Committee Member</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctoral Student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Candidacy Examination Committee Chair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctoral Student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Candidacy Examination Committee Member</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masters Student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thesis Committee Member</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masters Student Plan A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thesis Advisor</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If you served on the same students candidacy exam committee and on their dissertation committee they should be listed twice.

i) doctoral students (dissertation advisor):

ii) doctoral students (dissertation committee member):

2016-2020 John Smith, The Ohio State University, *Title of thesis*

iii) doctoral students (candidacy examination committee chair)

iv) doctoral students (candidacy examination committee member):

2018 John Smith, The Ohio State University

v) master’s students plan A (thesis advisor):

vi) master’s students plan B (advisor)

vii) master’s students (thesis committee member)

viii) master’s students (examination committee member)

b) Describe any noteworthy accomplishments of graduate students for whom you have been the advisor of record, for example, publications during or emanating from graduate program, awards for graduate work, prestigious post-docs or first post-graduate positions.

Only list true PhD or Master’s Graduate students

c) Senior honor theses: give name of student, title of thesis, quarter or semester of graduation, and noteworthy outcomes of this mentorship such as publications, presentations, honors or student awards.

d) Describe any noteworthy accomplishments of undergraduate students, in particular related to research, for whom you have been the advisor of record (publications, posters, honors or student awards).

3) Involvement with postdoctoral scholars and researchers

Resident/Fellows carrying out research should be listed here.
4) Extension and continuing education instruction

Summarize briefly the major instructional activities (workshops, non-credit courses) using the table below. Identify role and number of participants.

Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

**Continuing Education**

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Sponsor</th>
<th>Enr.</th>
<th>% Taught</th>
<th>Candidate’s Role</th>
<th>Formal Eval.</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/2013</td>
<td>SAGES: Flexible Endoscopic Surgery for Fellows Course</td>
<td>SAGES</td>
<td>50</td>
<td>30%</td>
<td>Lab instructor during two animate labs teaching advanced endoscopic surgical techniques during this national didactic and laboratory course for minimally invasive surgery fellows to learn advanced therapeutic endoscopy skills</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

**Grand Rounds**

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Sponsor</th>
<th>Enr.</th>
<th>% Taught</th>
<th>Candidate's Role</th>
<th>Formal Eval.</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/2015</td>
<td>Pancreas Transplantation</td>
<td>Department of Surgery</td>
<td>38</td>
<td>100%</td>
<td>Gave an hour lecture on &quot;Pancreas Transplantation&quot; to the Department of Surgery Grand Rounds.</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

Lecture

<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
<th>Sponsor</th>
<th>Enr.</th>
<th>% Taught</th>
<th>Candidate's Role</th>
<th>Formal Eval.</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/20/17</td>
<td>Taking it to the Next Level: Strategies for a Successful Robotic Surgery Program, Columbus, OH</td>
<td>The Ohio State University Center for Advanced Robotic Surgery</td>
<td>40</td>
<td>20%</td>
<td>Speaker</td>
<td>Yes</td>
</tr>
</tbody>
</table>

5) Curriculum development

This is a required narrative.

Give specific examples of the candidate's involvement in curriculum development (role in the design and implementation of new or revised courses); development of new teaching methods or materials (undergraduate, graduate, or professional); creation of new programs. This section may also include examples of teaching methods or materials adopted beyond Ohio State, presentations on pedagogy and teaching at national and international conferences.

6) Brief description of approach to and goals in teaching, major accomplishments, plans for the future in teaching.

This is a required narrative.

Describe your teaching philosophy and any achievements.

7) Evaluation of teaching. Brief description of how the candidate has used the evaluation information to improve the quality of instruction.

This is a required narrative.

Briefly describe how you have used the evaluation information to improve the quality of instruction. It is ok to list that on average one has received a 4.8 out of 5 in my teaching evaluations. **However, please do not list actual comments from evaluations.** The evaluation summaries are a separate part of your entire promotion packet that is submitted to the College of Medicine.

8) Awards and formal recognition for teaching

9) Other academic advising
10) Completion of teaching development programs (include endorsements from the University Institute for Teaching as well as other teaching development programs, completion date, and description of how information was used)

List continuing education programs related to teaching. Include endorsements from the University Institute for Teaching as well as other teaching development programs. Include name of session, completion date, description of training and impact of training.

RESEARCH

1) List of books, articles, and other published papers.
Your name needs to be in **bold** for all items under this section of Books, Articles, and Other Published Papers. Include the impact factor for each item. The impact factor that should be listed is what it was the year of the publication, not what it is now.

Example:


   50% Authorship: I participated in the study design, collection and analysis of the data, and took the lead in writing the manuscript.

All your journal articles should be listed in the same format.

Clearly denote outcomes since appointment or last promotion at Ohio State.

You need to list impact factor, percentage of effort and description of effort for the last 5 years for items a-e listed below. The impact factor that should be listed is what it was the year of the publication, not what it is now.

Be Realistic!
If there are 4 authors and you are a middle author, stating 80% effort is simply not believable.
Likewise, if you are one of 2 authors and state 100% effort, the other author should not have been on the manuscript

Examples:

- I designed the experiment (which was carried out by the graduate student co-authors), and wrote the article (75% contribution)
- I identified the patients for the study, administered the drug regimen, reported results to the consortium and reviewed the draft manuscript (25% contribution)
- I completed and wrote the literature review for the paper, shared equally with the co-author in the analysis and interpretation of the data, and reviewed the complete draft manuscript (50%)
Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

<table>
<thead>
<tr>
<th>Published Work Type</th>
<th>Number of Publications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer-Reviewed Journal Articles</td>
<td></td>
</tr>
<tr>
<td>Abstract and Short Entries</td>
<td></td>
</tr>
<tr>
<td>Chapters in Edited Books</td>
<td></td>
</tr>
<tr>
<td>Editor Reviewed Journal Articles</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
</tr>
</tbody>
</table>

a) Books (other than edited volumes)  
b) Edited books  
c) Chapters in edited books  
d) Bulletins, technical reports, fact sheets  
e) Peer-reviewed journal articles  
f) Editor-reviewed journal articles  
g) Other journal articles  
h) Reviews (indicate whether peer reviewed)  
i) Abstracts and short entries (indicate whether peer reviewed)  

All abstracts should go here. You can separate them out into those chosen for platform presentations and posters.

Platform presentations

Posters

j) Papers in proceedings (indicate whether peer reviewed)

k) Unpublished scholarly presentations

This section is for your invited presentations which are not based on the submission of an abstract. This is when someone reached out to you and asked you to come give a talk. These should be separated out into the 3 categories listed below. Abstracts should not be included in this section but rather should be listed above in letter i) abstracts.

**Invited**

**International**

**National**

**Local**
l) Potential publications under review (indicate authorship, date of submission, and to what journal or publisher the work has been submitted)

Try not to have NONE listed here. Think of the idea of showing your trajectory. You should always have something in the pipeline that you are working on. For anything in progress, one does not need as much detail but show continued effort.

2) List of creative works pertinent to the candidate’s professional focus

It is common for most of this section to be labeled as None as shown below. There are very few faculty in the College of Medicine that would have items that would count as these types of creative works with the exception of items like patents or multimedia/database work. If you do happen to be the exception and have something that counts, then please include it.

   a) Artwork
      Remember that drawings for papers or journal covers would count here.

   b) Choreography
      None

   c) Collections
      None

   d) Compositions
      None

   e) Curated Exhibits
      None

   f) Exhibited Artworks
      None

   g) Inventions and Patents
      None

   h) Moving Image
      None

   i) Multimedia / Database / Website
      Examples:
      50% Authorship: Performed a 15-minute interview with my mentor, John Hunter, as part of an interview series profiling the pioneers in laparoscopic foregut surgery.

      **Perry KA**, Hazey JW. “Diagnosis and Management of Achalasia: Past, Present, & Future” Presented for the Mednet21 Webcast Series, The Ohio State University, Columbus, Ohio. (2015). 50% Authorship: Presented a 1-hour webinar including two twenty minute lectures and a question and answer period covering the diagnosis and management options for patients with achalasia.

      Ohio Fetal Medicine Collaborative Web site (www.ohiofetalmedicine.org) – Pediatric Surgery Representative, contributing author to parent information on congenital anomalies and surgical management. This web site is a resource for referring physicians and parents who have been given a prenatal diagnosis including many which require surgical management.
International Pediatric Endosurgical Group (IPEG) Instruction video for laparoscopic fundoplication (anti-reflux surgery) – Senior Author, this video is available to all members of IPEG as part of the educational section of the web site, it is a resource that they may review when preparing to perform this surgery.

j) Radio and Television
   Example:
   Toward a Cancer Free World: Treatment Strategies for Lung Cancer in Non-Smokers. Dr. Merritt was featured in a 10TV segment “Toward a Cancer Free World” to discuss treatment strategies for lung cancer in non-smokers at The James on December 8, 2016.

k) Recitals and Performances
   None

l) Recordings
   None

m) Other Creative Works
   None

3) Brief description of the focus of the candidate’s research, scholarly work, major accomplishments, and plans for the future, including works in progress.

This is a required narrative.

Explain the significance, IMPACT, and progress of your research by highlighting specific significant contributions. Make your case for people outside of your field.

4) Description of quality indicators of the candidate’s research/scholarly work such as citations, publication outlet quality indicators such as acceptance rates, rankings or impact factors of journal or publisher.

Faculty members can add their H index or general summary of citations pulled from Scopus or Google Scholar just before the first table.

But you are not permitted to add your own graphs or tables.

The tables below must be completed for the last 5 years. There are a variety of web-based calculators that can generate article citations – Scopus, Web of Science, Google Scholar. Please make sure that you list which source you use.

Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

### Journal Impact Factor

<table>
<thead>
<tr>
<th>Journal Name</th>
<th>Year</th>
<th>Rank</th>
<th>Rank Field (Field of Work – example Surgery)</th>
<th>Impact Factor</th>
<th># of Pubs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
Please do not modify or delete any tables. If a table is not applicable, or there is nothing to report, write “None” for the item.

**Article Citations**

<table>
<thead>
<tr>
<th>Year</th>
<th>First-authorship Citations</th>
<th>First-authorship Citations</th>
<th>Co-authorship Citations</th>
<th>Co-authorship Citations</th>
<th>Sole-authorships Citations</th>
<th>Sole-authorships Citations</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2020</td>
<td>6</td>
<td>0</td>
<td>40</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>46</td>
</tr>
<tr>
<td>2019</td>
<td>10</td>
<td>0</td>
<td>29</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>39</td>
</tr>
<tr>
<td>2018</td>
<td>0</td>
<td>4</td>
<td>16</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>2017</td>
<td>0</td>
<td>8</td>
<td>20</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>28</td>
</tr>
<tr>
<td>2016</td>
<td>1</td>
<td>0</td>
<td>14</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>18</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>17</strong></td>
<td><strong>12</strong></td>
<td><strong>119</strong></td>
<td><strong>3</strong></td>
<td><strong>151</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5) Research funding

Make sure to include the bullet points below for funded research. Grant funding can be a hold-up.

If you are involved in clinical trials, they would also be listed in this section. A clinical trial is not successful without physicians that see and accrue the patients. Clinical trials are part of the research we do in the College of Medicine while providing patient care.

It is important that there be details with information on the following:
(Remember to keep this brief, but your reviewers will not likely know much about the funding in your specialty)
- whether it is a national or competitive grant, sponsorship
- a clear and complete description of the project objectives
- explanation of your role
- Date range (date awarded and date ending. Do not put down things like 2018 - present)
- Sponsor and funding mechanism (spell out acronyms if not well-known, American Heart Association Young Investigator Award - not AHA YIA)
- Role (PI, co-PI, etc.)
- Explanation of grant aims and goals along with your duties (3-6 sentences). If not obvious, mention whether the grant is national, competitive and peer-reviewed.

** Please note that the official template does not list Role or Goal. This information helps to provide critical details to emphasize your impact. So please add to the bottom each funding entry.

Examples (Please note these are from past dossier templates but the information provided is still an excellent show of the details needed):
Grant/Contract Number: n/a
Total funding: $16,990/patient, Number of patients: 320
PI: Crestanello, JA
Percent Effort: 5%
Explanation of Role: I supervise with Dr George (co-I) the overall conduction of the trial at OSU. I’m involved in the identification and recruitment of the patients, performance of the procedures, data collection, follow up and compliance with the regulatory aspects of the trial. The OSU Wexner Medical Center enrolled the first patient in Central Ohio for this trial.
Goal: The objective of this study is to evaluate the safety and effectiveness of the Lotus™ Valve System for transcatheter aortic valve replacement (TAVR) in symptomatic subjects with calcific, severe native aortic stenosis who are considered at extreme or high risk for surgical aortic valve replacement.

2) 07/01/2010 - 06/30/2012. “Hybrid revascularization: a collaborative approach to coronary artery disease”. Clinical Trial.
Funding Agency: American Heart Association Great Rivers Affiliate.
Grant/Contract Number: GRT########
Total funding: $121,000
PI: Crestanello, JA
Percent Effort: 10%
Explanation of Role: This was an investigator-initiated study. As a PI of the study, I was responsible for developing the original concept and experimental design and the grant planning, writing and application. I was responsible for the overall conduction of the study. I was involved in the identification and recruitment of the patients, performance of the procedures, follow up and compliance with the regulatory aspects of the trial. I was primarily responsible for data collection, analysis and interpretation, writing of manuscripts and reports. I also interacted with co-investigators and consultants.
Goal: The goal of the study was to compare the safety and efficacy of hybrid coronary revascularization vs. conventional CABG surgery in patients with triple vessel coronary artery disease.

3) 12/20/2017. “An open-label, first-in-human, study evaluating the safety, tolerability, and efficacy of VC-02 Combination product in subjects with Type 1 diabetes mellitus and hypoglycemia unawareness”. Clinical Trial
Grant/Contract Number: #
Funded: recruitment dependent
PI: Willa Hsueh
Role: I evaluate the potential candidate, performed the surgical implant procedures as well as the explanation. I also follow these patients for any potential complications.
Goal: to test if the VC-02™ combination product can be implanted subcutaneously in subjects with Type 1 Diabetes and Hypoglycemia Unawareness and maintained safely for up to two years.

a) Funded research, including contracts and clinical trials, on which the candidate is or has been the Principal Investigator

Dates of funding: 09/01/2013 – 05/31/2018
Title of grant: iGOT neuroprotection
Funding source: U.S. Department of Health and Human Services, National Institutes of Health.
Total award dollars: ($1,683,190 Total Award) Research Grant. 02/2013.
Grant/Contract #: R01NS####-01
Percent effort: 25%
Indicate PI or MPI: PI: John Smith and Jane Larson (multi-PI)
Explanation of Role: As PI for the study, Dr. Smith will direct and execute experiments related to surgical stroke modeling (MCAO), magnetic resonance imaging, NMR spectroscopy, sensorimotor testing, and stereotaxic delivery of transfection reagents. He will actively collaborate with Dr. Larson (Co-PI) to establish directions, set priorities, set up analytical procedures, perform experiments, analyze and interpret data, obtain specialty reagents, write manuscripts, interact with co-investigators and consultants and train and manage laboratory personnel.

Goal: This proposal identifies therapeutic strategies to induce expression of an enzyme, glutamate oxaloacetate transaminase (GOT), that can metabolize otherwise harmful glutamate at the site of ischemic brain injury. It is hypothesized that GOT metabolism of glutamate protects neural cells from brain injury by two mechanisms: (1) reducing excitotoxic levels of extracellular glutamate caused by ischemic injury, (2) providing neurons an alternative source of energy in ischemic brain tissue challenged by hypoglycemia.

b) Funded research, including contracts and clinical trials, on which the candidate is or has been a co-investigator

Dates of funding: 3/2017 - Present
Title of grant: “A PHASE II CLINICAL TRIAL PLATFORM OF SENSITIZATION UTILIZING TOTAL NEOADJUVANT THERAPY (TNT) IN RECTAL CANCER”.
Funding source: National Cancer Institute.
Total award dollars: N/A
Grant/Contract #: NRG-GI####
Percent effort: N/A

Explanation of Role: I help with patient accrual.
Goal: This randomized phase II trial studies how well veliparib or pembrolizumab work with combination chemotherapy and radiation therapy in treating patients with rectal cancer that has spread from where it started to nearby tissue or lymph nodes.

c) Proposals for research funding that are pending or were submitted but not funded

It is Mandatory to list proposals that were not funded. You do not have to include that much detail. However, submission often takes a significant effort, and even though not funded, the effort and drive to submit proposals cannot be credited to you if these are not listed.

Dates:
Title of grant:
Funding source:
Total award dollars:
Grant/Contract #:
Percent effort:
Your role:

d) Funded training grants on which the candidate is or has been the equivalent of the principal investigator

Dates of funding:
Title of grant:
Funding source:
Total award dollars:
Grant/Contract #:
Percent effort:

e) Proposals for training grants that are pending or were submitted but not funded

It is Mandatory to list grants that were not funded. You do not have to include quite as much detail. However, grant submission often takes a significant effort, and even though not funded, the effort and drive to submit grants cannot be credited to you if these are not listed.

Dates:
Title of grant:
Funding source:
Total dollars:
Grant/Contract #:
Percent effort:

f) Any other funding received for the candidate’s academic work

Dates of funding:
Title:
Funding source:
Total award dollars:
Grant/Contract #:
Percent effort:
Your role:

6) List of prizes and awards for research, scholarly or creative work. Nominations for such awards should not be listed.

SERVICE

Make sure your committee work especially in national societies has a brief description about the society i.e. what importance does that society have in your field.

1) List of editorships or service as an editorial reviewer or board member for journals, university presses, or other learned publications.

If this is a “None” for you, then one may wish to reach out to your division chief, mentor, department chair. There are plenty of opportunities for service available (specifically in Surgery). You do not need to list out specific articles, just the journals that you review for. One can list the approximate number of papers reviewed per year or in total for the last several years.

Editorships or editorial board member
2018 – Present  Associate Editor, Pediatric Blood and Cancer

Ad hoc reviewer
2) List of offices held and other service to professional societies. List organization in which office was held or service performed. Describe nature of organization (open or elected membership, honorary) and candidate’s responsibilities.

American College of Surgeons, 2003 - Present
2016 - Present Member, American College of Surgeons Operative Decision Making Foregut Subcommittee
I have served as a member of this subcommittee and worked actively in creating and developing online case-based modules for operative decision making for patients with gastroesophageal reflux, paraesophageal hiatal hernia, and achalasia.

3) List of consultation activity (industry, education, government).
Give the time period in which consultation was provided and other information as appropriate.

2015 Consultant, Hancock Regional Hospital, Greenfield, IN.
I served as a consultant to the Medical Staff Leadership Council and Professional Practice Evaluation committee of Hancock Regional Hospital and performed a process review involving the process for credentialing and performance of an endoscopic reflux procedure (transoral incisionless fundoplication) in their hospital.

4) Clinical services. State specific clinical assignments.

2016- present: Monthly Pancreas Clinic. Monthly half day of clinic dedicated for children with pancreatic insufficiency and other pancreatic disease.

2015-present: Pediatric Surgeon. My clinical duties include weekly pediatric surgery clinics, twice monthly surgery oncology clinics, and one to two days of scheduled general surgery and oncologic surgery operating time per week. I provide surgical attending in-house call three times per month and participate in the surgeon of the week service model five times per year, in which each surgeon is on-call during the daytime for a week at a time to round on all of the inpatients and consults on the service, to cover the emergency department and to staff all new surgical consults. During this week the rotating surgical residents and medical students work under my direction in the management of patient care both in and out of the operating room. My most recent faculty review (January 2020) showed that I had performed 402 operations in the one-year period and was credited with 7,490 WRVUs.

2014- present: Fertility and reproductive health program: Consultant. Provide clinical services and support to a child, adolescent young adult or their family members who are struggling with information about their infertility.

5) Other professional/public community service directly related to the candidate’s professional expertise, if not listed elsewhere.
6) Administrative service.

Give dates and a brief description of responsibility for all the committees below.

a) Unit committees

2015-2018 Member, Clinical Resource Utilization Committee, Medical Center. Met monthly to review clinical protocols for medical care.

b) College or university committees

2014-2019 Evaluator, Medical School Admissions Committee. Interviewed candidates for admission to The Ohio State University Medical College.

c) Initiatives undertaken to enhance diversity in your unit, college or the university

d) Administrative positions held, e.g. graduate studies chair

2014 - Present Ohio State University Wexner Medical Center. Associate Medical Director for Research, Center for Minimally Invasive Surgery (CMIS)

In this role I work with the center director to refine the research agenda and goals for CMIS. To facilitate this agenda, I organize and oversee biweekly research meetings with the CMIS team, and serve as a research mentor for our research fellows and residents.

e) Service as a graduate faculty representative on a dissertation in another unit or university

7) Advisor to student groups and organizations

List the group or organization and specific responsibilities as advisor.


8) Office of Student Life committees

a) List Office of Student Life committees on which you have served

b) Summarize participation in Student Life programs such as fireside discussions, lectures to student groups outside of your unit, addresses or participation at student orientations

9) List of prizes and awards for service to your profession, the university, or your unit. Nominations for such awards should not be listed.

2020 Golden Apple Teaching Award, Award is bestowed by medical students at The Ohio State University College of Medicine for recognition of education and mentoring.

10) Brief elaboration that provides additional information about service activities listed above.

Please add any other service that does not fit into one of the above service sections. Is there anything you do with the community or volunteer that relates to your academic field?

Make sure your dossier states plainly the number of days you are in the operating room and clinic. Good to give RVUs if they are high along with some context for non-clinicians. “I routinely generate
XXXX RVUs each year which is the highest in my division” or “which is well above average for an academic surgeon.”

This is the only place to capture your clinical workload. For example, if you operate 2 days per week and have 2 days of clinic, then all the other academic work appearing in this dossier is essentially done in 1 day. Now in that context, it becomes even more impactful. Remember to really SELL YOURSELF as if the reviewer has no knowledge of the life as a busy clinician with academic responsibilities and duties.