2. General Guidance for Appointments and Promotions
   Associate Professor (Non-tenure Track and Tenure Track)

Appointment or promotion is based on documentation of excellence in a primary mission with evidence of good to excellent performance in at least one of the other academic mission areas of education, research, and patient care. Faculty members who contribute primarily to the patient care mission may be eligible for non-tenure track/non-tenured appointments or promotions based on clinical mission alone, given clinical excellence in combination with evidence of leadership, clinical expertise, healthcare quality and patient safety expertise, and/or business development related to patient care (see separate guidelines for Patient Care Single Mission Pathway, page 28).

Appointment at, or promotion to the rank of Associate Professor is dependent on achievement and not length of service, and is an honor within the institution. Examples of evidence of excellence include the following.

**Research**
- Record of individual accomplishment in investigation.
- Recipient of grant funding as PI or co-investigator.
- Evidence of a consistent research theme.
- Important collaborative roles with independent investigators.
- Review service for scientific journals or panels.
- Appointment to journal editorial board.
- Demonstration of career progression with increasing responsibilities over time.
- Evidence of recognizable career goals and objectives.
- Record of scholarly publications in peer-reviewed journals.
- Local/national reputation, as evidenced by membership in scientific organizations, service on editorial boards or as a reviewer, invited papers, invited lectures.
- Role model and mentor for medical and graduate students, trainees, and junior colleagues.
- Contributions to business development or innovation.

**Education**
- Demonstration of career progression with increasing responsibilities over time.
- Evidence of recognizable career goals and objectives.
- Record of scholarly publications in peer-reviewed journals.
• Publication of books or book chapters.
• Review service for scientific journals or panels.
• Appointment to journal editorial board.
• Local/national reputation, as evidenced by membership in scientific organizations, service on editorial boards or as a reviewer, invited papers, invited lectures, CME activities.
• Role model and mentor for medical and graduate students, trainees, and junior colleagues.
• Record of programmatic responsibilities and contributions.
• Record of high quality teaching, as evidenced by student evaluations, peer reviews, teaching materials and/or educational awards, such as the Norton, Rose Fulbright Faculty Excellence Awards.
• Academic administrative leadership.

Clinical
• Demonstration of career progression with increasing responsibilities over time.
• Evidence of recognizable career goals and objectives.
• Record of scholarly publications in peer-reviewed journals.
• Publication of books or book chapters, case reports or online peer-reviewed websites.
• Local/national reputation, as evidenced by membership in scientific organizations, service on editorial boards or as a reviewer, invited papers, invited lectures, CME activities.
• Role model and mentor for medical and graduate students, trainees, and junior colleagues.
• Record of programmatic responsibilities and contributions.
• Record of high quality patient care.
• Being sought out for consultation by colleagues inside and outside the institution and/or being the recipient of referrals from the community.
• Recognition on National/Regional/City Best Doctor’s lists.
• Key role in the adaptation, testing, implementation, or local/regional dissemination of established (evidence-based) tools, strategies, approaches, or health and science policies related to diagnosis, treatment, quality improvement, patient safety, prevention of disease and disability, or model of care delivery.
• Director of a major clinical service.
• Documented major role in interdisciplinary clinical conferences at local, regional, or national education or care management meetings.
• Documentation of the development of new materials for clinical care, such as protocols that define clinical pathways, guidelines, or algorithms.
• Positive evaluations of frequent clinical presentations at departmental or same specialty CME conferences, or as faculty presenter in workshops designed to help other clinicians obtain new clinical skills.
• Documentation of specialty certification(s) issued by a board that is a member of the American Board of Medical Specialties or the Bureau of Osteopathic Specialists Board.
• Evidence of innovations that improve patient care that have been developed or enhanced by the clinician.