**CV Part 2: Description of Yale Activities**

**Overview: The CV Part 2 (formerly CV Supplement) is an opportunity for you to describe the scope and impact of your work at Yale and to provide other information that is not readily available in the CV. A suggested format is provided as well as detailed instructions and examples. You may modify the format as needed (e.g. by using narratives instead of tables or outlines), but the order and general content should remain the same. If a specific section does not apply to your position (e.g. clinical care), delete the section. Both your CV and the CV Part 2 will be provided to the referees who are asked to comment on your qualifications for reappointment or promotion. Thus, it is important for you to explain accomplishments and your contributions to the development of new programs in the clinical, educational and research domains.**

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**CV PART 2: DESCRIPTION OF YALE ACTIVITIES FORMAT**

**Date of Revision: (month, day, year)**

**Name:**

**Position:**

**1. Percent Effort**   
 Clinical activities

Educational activities

Research/Scholarship

Administration   
 Total 100%

**2. Introductory Narrative Description (max 150 words)**

**3. Clinical Activities**

A. Narrative Description of Clinical Activities (max 150 words)

B. Documentation of Clinical Activities

1) Patient care responsibilities

2) Distribution of clinical time   
 3) Clinical care productivity  
 4) Clinical expertise and quality of care measures

C. Clinical Program Leadership

1) Development or administration of clinical programs   
 2) Development or administration of clinical programs outside of Yale   
 3) Quality of care initiatives (independent of A, B)

1. Regional/National Clinical Activities
2. Other Clinical Activities (optional)
3. Influence on Clinical Practice

**4. Educational Activities**

1. Narrative Description of Educational Contributions (max 150 words)
2. Documentation of Educational Activities
   1. Didactic and/or Clinical Teaching
   2. Mentoring
   3. Curriculum Development
   4. Educational Leadership
   5. Other

**5. Research/Scholarship**  
 A. Narrative Description (max 500 words)

1. Area of research or scholarship and its significance
2. Impact of your work on progress in your major field
3. Current studies and future directions

B. Annotated Samples of Scholarship

C. Your role in collaborative projects within the Medical Center and with other institutions.

**INSTRUCTIONS**

**1. Percent Effort**

Provide a breakdown of your percent effort directed toward clinical activities, educational activities, research/scholarship, and administration. The total effort should not exceed 100%.

* Educational activities include didactic teaching, clinical teaching, mentoring, curriculum development, educational leadership and participation on education committees.
* Consider your sources of salary support when allocating time (e.g. if 75% of your effort is supported by grants, then 75% of your time should be devoted to the research supported by those grants).
* Administration refers to involvement in service or administration of programs at Yale. Examples include service on major committees within the school or Yale University (e.g. safety committees, regulatory committees). Administration of research grants should be included under research effort; administration of educational programs should be included under educational effort.
* If your percent effort in these domains has changed significantly over time in a way that impacts your track choice, provide separate breakdowns according to years in current rank.

**Example 1**: A faculty member teaches in the clinical setting while providing clinical care (55% time). They are also Program Director of a fellowship program, including both program administration (15% time) and direct involvement in teaching and clinical care associated with the program (10% time). On average, they also spend 20% time on research/scholarship.

* Clinical Care/Educational Activities = 65% (concurrent effort)
* Research/Scholarship = 20%
* Administration = 15%

**Example 2**: A junior faculty member in a basic science department lectures in several courses at Yale, equivalent to about 15% effort. They have no administrative responsibilities in the department or the university, but has a research program involving hands-on research and oversight of the work of several postdocs and students. They also are responsible for writing new grant applications and administering existing grants, including meeting regulatory requirements, managing subcontracts, and submitting progress reports.

* Clinical Care = 0%
* Educational Activities = 15%
* Research/Scholarship = 85%
* Administration = 0%

**Example 3**: A junior faculty member is hired as an assistant professor to provide clinical care and teaching. By the end of the first 3-year term, the faculty member developed a strong interest in clinical research and obtained an internal grant for a clinical project. After reappointment, the faculty member discusses their career options with mentors and supervisors within the Department, changes effort allocated toward scholarly work by reducing clinical/educational efforts, and successfully applies for a mentored career award.

2012-2015:

* Clinical Care/Educational Activities = 75%
* Research/Scholarship = 15%
* Administration = 0%

2015- present:

* Clinical Care/Educational Activities = 30%
* Research/Scholarship = 70%
* Administration = 0%

**2. Introductory Narrative Description (max 150 words)**

Provide a *brief* overview of your responsibilities and major contributions to your department or Yale program and to Yale School of Medicine. This section should provide an opportunity for you to highlight your most important clinical, educational and investigative achievements. Not all faculty will be active in each of these 3 domains. If your contributions are mainly in one domain, please focus on this area. In addition, in preparing your CV Part 2, please also delete the sections or subsections that are not applicable.

**3. Clinical Activities**

*Clinical excellence should be supported by evidence of a high level of clinical expertise and accomplishment, innovative program development and/or influence on clinical practice.*

**3A. Narrative Description of Clinical Activities (150 words max)**

This section should provide an opportunity for you to highlight your clinical expertise, clinical innovation, and influence on clinical practice or clinical program development.  
  
**Example 1:** A faculty member in the Clinician Educator track conducts clinical care in their specialty (internal medicine) and as a subspecialist (endocrinology). “*My clinical activities are focused on diabetes and I have developed a multi-disciplinary clinic focusing on the evaluation and management of patients with type 2 diabetes and cardiovascular disease. This clinic includes endocrinologists, cardiologists, surgeons and nutritionists and generates an individualized and comprehensive treatment plan for each patient. We offer state-of-the-art diagnostic procedures and therapy and have attracted patient referrals from throughout New England. This integrated approach has led to improvements in patient outcomes as recently published in the NEJM. I have been invited to visit many academic centers to help them to develop their own centers.”*

**3B. Documentation of Clinical Activities**

**3B.1 Patient Care Responsibilities**

**Table I: Clinical Activities:** List clinical activities for the past 3 years (Assistant Professor reappointment) or for the past 5 years (all others). Modify categories as appropriate for your specialty/subspecialty. Do not include activities that occur infrequently (<1 week/yr—e.g. covering for a colleague for 2 days on an inpatient clinical service)

|  |  |  |  |
| --- | --- | --- | --- |
| **Clinical Care Responsibility** | **Role2,3** | **Frequency of Activity** | **Average Frequency of Session1** |
| \*In-Patient Medicine | Attending | 2012 – 2017 | 1 mo every other year |
| \*Outpatient fellows' subspecialty clinic | Fellows' clinic  Attending | 2012 – 2017 | 1 half-day/wk |
| Temple Faculty Subspecialty Clinic | Provider | 2012 – 2017 | 1 half-day/wk |
| \*Outpatient procedure clinic | Attending | 2012 – 2017 | 1 half-day/wk |
| \*VA fellows' subspecialty clinic | Fellows' clinic attending | 2012 – 2017 | 1 half-day/wk |

**1**Define session (e.g. session = 1 month, one 2-wk block, 1 half-day). You may include a description of the intensity of on-call responsibilities that are associated with each activity.

2Distinguish between sessions in which you are the primary provider (e.g. "provider") from those in which you supervise care provided by others (e.g. as a clinical attending on a medical service staffed by residents or as an outpatient residents’/fellows’ clinic).

3\* Specify those activities in which you also consistently serve in a teaching capacity (i.e. either through direct oversight of clinical trainees providing clinical care or teaching trainees who otherwise are observers of care principally rendered by you).

**3B.2 Distribution of clinical time. Estimate the percent of your clinical time in recurring clinical care activities (total =100%).**

This section describes the fraction of time devoted to direct and billable clinical care and provides an estimate of non-billable time spent in clinical care-related activities. Use the following categories:

* + Clinical Care Sessions (e.g. inpatient and outpatient clinical care, excluding scheduled procedures)
  + Scheduled Procedures (operating room schedule, procedure schedule)
  + Supporting Clinical Care Activities (e.g. charting/follow-up letters, calls *outside of time allotted for clinical care sessions and procedures)*
  + Example:
    - A faculty member spends 70% of their time in clinical work, 10% educational time and has 20% academic time
    - Of the 70% clinical work, the faculty member estimates that:
      * 50% is spent in ambulatory sessions
      * 10% is spent in procedural sessions
      * 30% is spent in inpatient service time
      * 10% is spent in nonbillable clinical care-related activities

**3B.3** **Clinical Care Productivity: Evidence of Clinical Output/Volume (this information should be available through Yale Medicine or your practice business manager)**

If available, provide data (such as RVUs or equivalent for your specialty) on clinical output relative to your peers and/or to national standards. Modify descriptions of clinical categories (e.g. in-patient, out-patient) as appropriate for your clinical activities or specialty/subspecialty.

**Example 1:** Service for which only total RVU data are available.

Physician RVU: 500/yr

UHC/Vizient RVU benchmark at 50th percentile: 5000/yr

Imputed FTE: 10%

Note: Physician productivity may have different potential in different clinical domains (inpatient vs. procedural vs. ambulatory). A comment should be made in situations where physician clinical effort in these different domains affects productivity.

**3B.4** **Clinical Expertise and Quality of Care Measures**

*High level clinical expertise is required for excellence in patient care and training in the Medical Center. Your excellence in clinical care should be supported by evidence of your accomplishments within the Medical Center.*

* Please explain your most important individual clinical accomplishments so that they can be evaluated both by clinical experts in the Medical Center, and by outside referees who will also be asked to assess your regional and/or national/international reputation.
* If available, also provide data that address the quality of the care that you provide  
  (e.g. percent of patients achieving a specific healthcare standard, complication rate for procedures).

**3C. Clinical Program Leadership**

*Clinical program development enhances patient care within the Medical Center, improves the education of trainees, and provides opportunities for research that advances the field. In the sub-sections that follow, please describe your role in the development, administration, and/or quality improvement/control of clinical programs. Clinical program development is often multidisciplinary, and in this case, identifiable contributions of the individual to the program should be articulated. Please explain your clinical program development so that it can be evaluated by clinical experts in the Medical Center, and by outside referees who will be asked to assess the regional or national/international reputation of your program.*

**3C.1 Programs at Yale and Yale-affiliated institutions**

Describe your involvement in developing and/or administering clinical programs within Yale. In each case, list the name of the program and your role. Provide any available qualitative or quantitative measures (key performance indicators) of each program and the extent to which your activities have influenced clinical care/practice beyond the institution. Key performance indicators may include:

* Quality improvement/quality assurance of a program that you oversee (list program, then describe)
* Techniques, practice models and/or processes of care
* Development and/or application of clinical protocols
* Practice guidelines
* Policy improvement
* Technology development/implementation
* Patient safety and risk prevention

**Example 1:** A faculty member is Director of a Clinical Center/Program.

* Year(s)/Name of Program: Asthma Center (2009-present)
* Your role/title: Director
* Measurement of impact locally: Number of patient visits has increased from 3500/yr in 2012 to 5500/yr in 2014; increase in patient volume has necessitated additional hiring of 2 physicians to staff the clinic and 3 additional nurses. New patient referrals have also increased from 900 to 1200/yr and the catchment area now extends outside Connecticut. A map demonstrating the sites of referrals is included in Figure 1. Billing revenues generated from office visits have increased from $1.5 million to $3 million/yr. Three clinical protocols have been adopted that follow the practice guidelines established by the National Heart Lung and Blood Institute on the initial evaluation, treatment and longitudinal management of patients with asthma. From 2012 to 2017, there has been a decrease in frequency of emergency room visits and hospitalizations for severe asthma among patients followed longitudinally, as demonstrated in Figure 2. In 2014, the National Institutes of Health AsthmaNET designated the program as a Center of Excellence.

**3C.2 Development or Administration of Clinical Programs outside of Yale: Regional/National Clinical Leadership/Administration (list regional first, then national)**

If you are involved with administration of a regional or national clinical program in which Yale is a clinical site, describe in narrative form, using the format for 3C.1 above. For instance, if your program is a center of excellence for a national program such as a National Cancer Institute Center.

Sample Format

* Year(s)/Name of Program
* Your role/title
* Measurement of impact locally (if applicable)
* Measurement of impact regionally or nationally

**3C.3 Quality Improvement**

If applicable, provide information on your involvement in quality improvement initiatives (separate from your development/administration of clinical programs) that have led to an increase in the quality of clinical care locally. Include key performance indicators wherever possible. Do not repeat activities listed and described in 3C.1 and 3C.2 above.

**3D.** **Regional/National Clinical Activities**

Describe your involvement over the past 3-5 years in regional or national activities that impact clinical care (examples include guidelines committees, quality care committees, clinical practice committees, standards committees).

**3E.Other Clinical Activities (optional)**

If there are other aspects of your clinical contributions that are not adequately captured under the above headings, please describe here.

**3F. Influence on Clinical Practice**

*Clinical expertise and innovation can influence clinical practice within the institution and beyond. Clinical investigation can improve patient care by developing new procedures or therapies, or through the analysis of outcomes or quality improvement initiatives.*

* Please explain how your clinical expertise innovation has influenced practice locally within the YNHHS, WHVAH, CMHC, or other institutions.
* Please provide how you have disseminated your expertise and innovation in a way that has influenced clinical practice outside of the institution. Evidence for dissemination of your clinical expertise might include regional or national/international presentations, written scholarship, peer reviewed materials that are available on web-based programs or electronic media.
* Please briefly introduce how your clinical investigation has improved patient care and then detail your research accomplishments in Section 5 (research/scholarship).

**4. Educational Activities**

Summarize and document the quantity, quality, recognition of and impact of your work as an educator. The categories in 4B represent the types of educational activities and related metrics that are of particular importance in considering your reappointment or promotion.

**4A. Narrative Description of Educational Contributions (max 150 words).**

Provide a summary highlighting the major focus and impact of your work as an educator.

**4B. Documentation of Educational Activities**

**4B.1 Didactic and/or Clinical Teaching:**

*Excellence in teaching is critical to the educational mission of the School and Medical Center. Excellence in teaching is expected to be supported by superior teaching evaluations and any of the following: teaching awards, educational scholarship and adoption of teaching materials outside of Yale.*

* Document the nature and quantity of your teaching using the tables below (that include examples for inclusion). Formal didactic teaching activities for Yale undergraduate, medical, physician associate, nursing, public health and graduate students, postgraduate trainees or faculty. Note who you teach, what you teach, your role, when and how often.

**Table 2. Didactic Teaching Activities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Learner** | **Course** | **Role1** | **Year (s)** | **Ave. Annual Instructional Hours** |
| Undergraduate student | \*MB&B 301  Principles of Biochem II | Lecturer | 2013-2017 | 30 |
| Graduate student | \*Inflammation | Lecturer | 2013-2017 | 4 |
| MD student | \*Immunobiology Workshop | Small Group Instructor | 2013-2017 | 3 |
| MPH student | \*EPH 503a Introduction to Toxicology | Course Instructor | 2013-2017 | 12 |
| Postdoctoral fellow | Clinical Science Lecture Series for Fellows, Section of ID | Lecturer | 2013-2017 | 4 |
| Faculty | YCCI Junior Faculty Scholars Program | Lecturer | 2013-2017 | 6 |
| Total Average Annual Instructional Hours: 59 hours | | | | |

* Document clinical teaching activities for Yale trainees. Include activities such as attending rounds, clinical conferences, clinic or hospital supervision of students, residents and fellows.

**Table 3. Clinical Teaching Activities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Learner** | **Setting** | **Role1** | **Year (s)** | **Ave. Annual Instructional Hours**2 |
| Third year medical student | Outpatient Clinic | Clinic Supervisor | 2012-2017 | 20 |
| Third year medical student, intern and resident | Attending Rounds | Small Group Instructor | 2012-2017 | 8 |
| Interns and residents | Preclinic Conference | Small Group Instructor | 2012-2017 | 12 |
| Residents | Outpatient Continuity Clinic | Clinic Supervisor | 2012-2014 | 12 |
| Interns and residents | Urgent Visit Clinic | Clinic Supervisor | 2012-2017 | 4 |
| Faculty | Clinician Education Conference | Lecturer | 2012-2017 | 3 |
| Fellows | \*Outpatient fellows' subspecialty clinic | Attending | 2014-2017 | 25 |
| Fellows | \*Temple Faculty Subspecialty Clinic | Attending | 2014-2017 | 25 |
| Fellows | \*Outpatient procedure clinic | Attending | 2014-2017 | 25 |
| Fellows | \*VA fellows' subspecialty clinic | Attending | 2014-2017 | 25 |
| Total Average Annual Clinical Instructional Hours3: 159 hours | | | | |

* Teaching effort during clinical sessions with trainees in attendance. The teaching time in addition to that required to personally perform reimbursed clinical evaluations, treatments, or procedures, should be estimated and entered in Table 3.
* Additional teaching activities including lectures, seminars, workshops and other teaching sessions at Yale or affiliated institutions. These might include Research-in-Progress series, lectures at Yale affiliated institutions for medical education of housestaff, clinical teaching seminars outside the context of clinical care (i.e. not attending rounds), and grand rounds outside your department.

|  |  |  |
| --- | --- | --- |
| **Name of Series** | **Date or Frequency of Presentation** | **Subject of Presentation** |
| Infectious Disease Research-in-Progress | Twice yearly | Research on molecular genotyping of HIV |
| Yale School of Nursing | 03/05/17 | Prevention of Nosocomial Infections |
| \*Yale Affiliated Hospital Lecture Program | 6 lectures/year | Topics in infectious diseases1 |
| Surgery Grand Rounds | 04/03/2017 | Reducing Post-Op Infections after Joint Replacement |

**Additional Teaching Activities**

* Document the quality of your teaching by ensuring that evaluations for your teaching activities are included along with your CV Part 2. Evaluations should be included for the entirety of your last term (Assistant Professor – 3 years; Associate Professor – 5 years).
* Provide evidence of peer recognition of your teaching excellence. Examples includes teaching awards and honors, increasing responsibility for teaching and/or invitations to teach outside of Yale.

**4B.2 Mentoring**

*Individual mentoring is important to guide a trainee’s or junior faculty member’s career development. Excellence in mentoring should be supported by the success of trainees and peer review.*

* **Primary Mentoring Roles:** List trainees for whom you have served as a primary or significant mentor over a sustained period of time, and provide evidence of their career development, including presentations/publications, awards and honors, and progression along a career path to a new position. Use the suggested format in the following examples:

**Example 1:** A medical student conducted their thesis work with you and has now assumed a residency position at another university.

Name of trainee: Jane Doe, M.D.

Position and period of mentorship: Yale Medical Student; 2006-2017

Thesis title: “Impact of research experiences in medical school on pursuit of careers in academic medicine”

Presentations/publications: Results reported at the Annual Meeting of the AAMC

Awards & honors: Invited oral presentation at Annual Meeting of AAMC after peer-review of abs tracts

Current position: Resident, Internal Medicine, UCSF

**Example 2:** A postdoctoral fellow trained in your laboratory and has recently been appointed to a junior faculty position.

Name of trainee: John Deere, PhD

Position and period of mentorship: Postdoctoral Fellowship; 2014-2016

Research project: Role of the oral microbiome in asthma

Presentations/publications: 4 publications (see CV references #14, 18, 26, 35); 3 poster presentations at the Annual Meeting of the American Thoracic Society (ATS), 4 oral presentations at ATS and Keystone Symposium on Asthma

Awards & honors: Recipient of an NIH/NIAID K01 award

Current position: Associate Research Scientist, Internal Medicine/Infectious Diseases; Yale School of Medicine

* **Other Mentoring Activities:** List other mentoring activities, such as oversight of research or clinical trainees for whom you are not the primary mentor but participated significantly in their career development and success. Use the narrative format suggested in the following examples:

**Example 1:** A research scientist provides day-to-day oversight of the graduate students and postdocs in a ladder faculty member’s laboratory and has a substantive influence on the trainee, but is not designated as a primary mentor or member of the trainee’s oversight committee.

Suggested description:

“I help to oversee projects conducted by students and postdoctoral fellows in Dr. Nobel’s laboratory. Over the past 5 years, I have provided project guidance and technical advice for 3 PhD students and 4 postdoctoral associates and contributed to studies that resulted in 3 publications (see CV bibliography references #23, 38 and 49).”

**Example 2:** A first-term assistant professor who plans to enter the Clinician-Educator Track participates in career development seminars for medical students, residents and subspecialty fellows. They also incorporate career development discussions into regular teaching rounds.

“I have participated as a panel discussant in the career development seminar series offered for medical students (held twice yearly) and by the GME office for medical residents (average 3x/yr). For fellow trainees within the Section of Infectious Diseases, I oversee a career development session discussing career options for clinical infectious disease specialists and the transition from clinical fellowship to an academic faculty appointment as a Clinician-Educator. I also enjoy advising trainees at all levels about career paths and post-graduate employment options for clinicians interested in clinical care and teaching.

**Evidence of external recognition of your mentoring excellence.** If your scholarship includes a mentoring component, provide recognition of your excellence in this domain. This might include presentations on mentoring at national conferences, invitations to speak or serve as a consultant to other organizations on mentoring or implementation of innovative mentoring-related projects.

**4B.3 Curriculum Development**

*Innovative curriculum development is important to maintain the quality of educational programs in the School. Excellence in curriculum development should be supported by any of the following: superior evaluations, success of trainees on national testing, evidence of success based on a curriculum review process and curriculum dissemination outside of Yale.*

* Describe curricula, including pedagogical tools and assessment methods, that you have developed for educational courses or programs. Examples might include course material such as interactive case series for workshops associated with medical school courses.
* Describe the means by which the curricula you have developed have been assessed and provide specific measures of quality and impact. For example,
* Trainee evaluations of your course or program
* Outcomes (e.g. NBME subject scores, in-service examination scores)
* Adoption of curriculum materials at other institutions
* Invited presentations on curriculum development at other departments and schools, or at regional, national or international meetings
  + - Peer review of curricula you developed and implemented by local experts, the institution’s curriculum committee or accreditation reviewers

**Example:**

* + Year(s)/Name of Program: 2013-2016; YSM Musculoskeletal Disease Workshop
  + Curriculum or educational tool: Developed an interactive case series for the rheumatology workshop in which learners follow a systematic approach to analyze patient presentations with rheumatic diseases. The instructor assumes the role of the patient and guides them through a structured patient interview with immediate feedback regarding order and rationale for questions posed. Physical exam findings are shown in electronic images. Each student uses an electronic key pad to answer a series of questions regarding differential diagnosis, evaluation, and expected results of evaluation that would include or exclude a disease. Answers are provided to each question immediately after the group has responded and the instructor guides respondents in an analysis of their answers. Peer teaching is achieved by correct respondents describing their thought processes to those who had incorrect responses.
* Measurement of impact: workshop rating improved from 3.6 to 4.6 on a 5-point scale; mean performance of students on a standardized test improved from 65th percentile to 80 th percentile; curriculum and assessment tools have been adopted by 5 other medical schools (UConn, Columbia, Cornell, UMass, and Tufts); invited to speak at AAMC Educational Workshop on Novel Designs for Medical School Subspecialty Curricula

**4B.4 Educational Leadership**

*Successful educational leadership is critical to the institution’s educational mission. Success of its leaders should be supported by impact of the educational program, recognition at a local/national level, and membership on regional and national education committees.*

* Describe your role as an education leader at the school (e.g. course, clerkship, residency or fellowship director, committee chair, senior leader in education). Indicate the success of your program based on metrics such as national stature, accomplishments of trainees, subsequent stature of trainees, ability to attract highly qualified candidates and improvement in diversity through increasing enrollment of minorities and women
* Describe the courses, programs and other educational activities in which you have a leadership role regionally, nationally or internationally.
* Describe invitations to talk on educational topics at regional, national, and international professional meetings
* Describe leadership of or participation in task forces and guideline committees in education
* Note service on editorial boards of educational journals
* Describe awards received from YSM or professional societies for your work as a leader in education

**Example:**

* + Year(s)/Name of Program: 2014-2017; Emergency Medicine Residency Training Program Committee, Society for Academic Emergency Medicine
  + Your role/title: Committee Member; Chair, subcommittee to review recommendations to ACGME for training program requirements
  + Major contribution(s): Obtained consensus among program directors for recommended changes in training requirements for board eligibility
  + Measurement of impact: changes accepted by ACGME and will be effective in 2018.

**4B.5** **Other**

If there are other aspects of your educational contributions that are not adequately captured under the above headings, please describe them here).

**5. Research/Scholarship**

**5A. Narrative Description (max 500 words)**

All ladder faculty members are expected to be scholars and, over the course of their careers, to produce bodies of scholarship that receive national and/or international recognition. Investigator track faculty members who belong to research teams must make identifiable creative contributions to the scholarship produced by team efforts. Research rank faculty members should describe their specific role in research activities at Yale School of Medicine.

In each case, the narrative description should include the following:

* A description of your area of research or scholarship, its importance to basic or clinical science, education, or clinical medicine, and how it fits into the overall mission of your department and/or the medical school.
* A summary of your most significant scholarly contributions and an estimate of their impact on your field of interest. If a member of a research team, elaborate on your specific role and contribution.
* A description of your current studies and future directions of your work.

**5B. Annotated Publications or Other Examples of Scholarship**Annotated publications:

Submit up to 5 reprints or other samples of your scholarship that most clearly illustrate your major achievements. Include a description of each and why the work is important. You may select peer-reviewed articles, book chapters, or books. If scholarship is available only in a web-based electronic format, please include an accessible link for the item.

Other examples of scholarship:

* A new curriculum model in a peer reviewed repository (e.g. AAMC MedEd Portal)
* Publication of educational/curricular material, including syllabi, web-based training modules and courses, pedagogical methods and assessment tools in peer-reviewed print or other media
* Articles or books related to leadership in medical education

**5C. Summarize your role in collaborative projects within the Medical Center and with other institutions.**

This section provides information on how your research/scholarly efforts contribute to programs within and beyond the School. Describe the types of collaborative endeavors in which you participate and include the names and departments of collaborators here and at other institutions.