

**REFEREE EVALUATION FOR THE RANK OF ASSOCIATE PROFESSOR IN THE CLINICAL TRACK**

Date: \_\_\_\_\_

Candidate Name: \_\_\_\_\_ Department: \_\_\_\_\_

Referee Name: \_\_\_\_\_ Institution/Dept.: \_\_\_\_\_

**I. CLINICAL CARE AND LEADERSHIP**

1. Do you consider Dr. \_\_\_\_\_ an exemplary model of a clinical practitioner in their field of expertise? If you have not had direct contact with this physician, consider their activities and accomplishments in comparison to similar clinical practitioners at your institution. Does their contribution to the academic medical center extend beyond the individual doctor-patient interaction and their individual practice? Is there evidence that they are advancing the practice locally or regionally in a significant way?
  - a) Yes, top 10% of similar clinical practitioners I have known
  - b) Yes, top 25%
  - c) Possibly, top 50%
  - d) No, lower 50%- please explain

**Comments that support your ranking (Maximum – 2,000 characters)**

2. Have you shared patient care with Dr. \_\_\_\_\_ and in what capacity?

a) Yes

b) No, skip to question 3

2a) Describe the nature of the patient care relationship you have shared. (Maximum – 500 characters)

2b) Please provide a numerical assessment of the his/her following attributes:

	1- top 10%	2- top 25%	3-average (50%)	4-Below ave (<50%)
Clinical Acumen				
Communication Skills				
Professional Conduct				
Patient rapport				

3. If applicable, what is the importance of Dr. \_\_\_\_\_'s role as an administrator?  
If you have had an opportunity to interact with them in this role, how well do they function in this capacity?  
(Maximum – 1,000 characters)

## II. TEACHING ACTIVITIES

For this track, teaching activities refer not only to the teaching of students or other trainees in the context of clinical practice, but also the education of the practice staff and patient population, as for example through the creation or dissemination of patient education materials.

1. Do the materials provided by Dr. \_\_\_\_\_ provide evidence that they have had a positive impact on the education of trainees, staff and/or patients?

a) Yes-significant impact

b) Yes-modest impact

c) No, minimal or no impact

2. If you have had direct observation of Dr. \_\_\_\_\_ teaching students or other trainees, please comment on their capacity to generate enthusiasm and respect among those being taught. (Maximum – 1,000 characters)

### **III. COLLABORATION AND PROFESSIONAL CONDUCT**

1. Have you collaborated with Dr. \_\_\_\_\_ on an activity related to the administration of healthcare or a mission of an academic medical center (research, teaching, patient care, diversity/inclusion, workforce issues). Collaborative efforts can be local within the institution or external to Yale, as for example on a committee of a society or national organization.
- a) Yes
  - b) No. Skip to section IV
2. Please comment on Dr. \_\_\_\_\_'s character and judgement as a collaborator, a colleague and a citizen of the academic community? Have you any reason to question their professional conduct? (Maximum – 1,000 characters)

### **IV. COMPARISON TO PEERS**

Please name other clinicians in Dr. \_\_\_\_\_'s field and approximate peer group and indicate where they rank within that group. (Maximum – 1,000 characters)

**V. OVERALL RECOMMENDATION**

Considering your understanding of the requirements for this \_\_\_\_\_ , and your overall impression of Dr. \_\_\_\_\_, please indicate your level of enthusiasm for approval of this \_\_\_\_\_.

- a) Approve with considerable enthusiasm
- b) Approve with modest enthusiasm
- c) Recommend against approval

\_\_\_\_\_  
Referee Signature

\_\_\_\_\_  
Date