

Preparing a Portfolio for Appointment and Promotion (FAQ)

Substantial documentation to support recommendation for appointment or promotion should be submitted in the form of a Portfolio (i.e., a set of materials that includes a Chair's letter, curriculum vitae, Executive Summary, referee names and email addresses, publications, etc.; (see "Checklist for Preparation of Faculty Portfolios"). The following responses to "frequently asked questions" supplement the [University of Pittsburgh School of Medicine Guidelines for Faculty Appointment and Promotion](#) by highlighting types of information that are very useful to the School's standing committees for appointment and promotion and that should be included (as relevant) in the portfolio.

Frequently Asked Questions

Who must prepare a portfolio?

All faculty members appointed or promoted in the non-tenure or tenure tracks, as follows:

- Associate Professor
- Professor
- Research Associate Professor
- Research Professor

Faculty members appointed or promoted to Instructor or Assistant Professor do not need to prepare portfolios. Those appointed or promoted with a Clinical prefix should follow the guidelines titled "[Checklist for Preparation of Faculty Portfolios for Volunteer Clinical Appointment and Promotion](#)".

What is a portfolio?

A portfolio for a candidate who is being considered for appointment or promotion is a set of materials that describe the candidate's qualifications and accomplishments. For a complete listing of the required portfolio materials, see "[Checklist for Preparation of Faculty Portfolios](#)".

What is a pathway?

A pathway is a conceptual framework for describing a faculty member's scholarly accomplishments, contributions, and career progression. Pathways exist within either the non-tenure or tenure tracks (see diagram titled "[Pathways in the Tenure and Non-Tenure Tracks](#)").

What is the purpose of having pathways?

The pathways are designed to encourage a candidate for appointment or promotion, and his or her mentor, to think about career development and to help the candidate prepare materials for the School's appointment/promotions committee. The pathways reflect the most common ways that faculty careers develop. In cases in which a faculty member's career overlaps or extends beyond these pathways, the pathways should not be seen as limiting, and the narrative in the Executive Summary should describe the candidate's full accomplishments and contributions.

At what point should I declare that I am in a particular pathway?

In this context, the pathways are a conceptual tool to facilitate the documentation of a faculty member's accomplishments and contributions. From the perspective of the School of Medicine, one should indicate a pathway at the time of portfolio preparation. From the perspective of the individual faculty member, division, or department, it may facilitate career development, time allocation, and other decisions for a faculty member to consider himself or herself in a particular pathway.

How should I describe projects, programs, initiatives, and other major undertakings?

It is helpful to members of appointment/promotion committees if descriptions of projects, programs, initiatives, and other major undertakings in which you played a significant role in creation, development, implementation, and evaluation include: clear goals, adequate preparation, appropriate methods, significant results, effective presentation, and reflective critique. (For more information, see Glassick CE, Huber MT, Maeroff GI. Scholarship Assessed - Evaluation of the Professoriate, 1997.)

Do I need to address each item listed for my pathway?

The committees recognize that each candidate has a unique set of qualifications and that an individual candidate may not provide documentation for each listed item.

Is there a required format for my Curriculum Vitae?

Yes, the University of Pittsburgh School of Medicine has a [required format for a Curriculum Vitae](#) submitted with an appointment or promotion portfolio.

Who should prepare my Executive Summary?

The faculty member and his/her mentor or chair should prepare the executive summary jointly. It should be in narrative form (3rd person) and not an outline of bullet points. Information in executive summary must match the details listed within your CV. The document "Preparing a Portfolio for Appointment or Promotion" should serve as a guide for providing specific information to describe the faculty member's accomplishments relative to the appropriate pathway in the tenure or non-tenure track.

How long should my Executive Summary be?

The summary should be three to five pages in length.

How should my Executive Summary be organized?

The typical Executive Summary will include main categories (as applicable to a particular faculty member's work and accomplishments) such as Education and Training, Research, Teaching, Clinical Service, and Administrative Leadership and Service. Within each category, information should be provided to document a faculty member's scholarly accomplishments, contributions, and career progression (for more specific guidance, see Supplemental Guidelines ([link to new doc](#)) and also refer to the information listed below under the applicable Pathway).

How are appointment or promotion criteria different for Associate vs. Full Professors?

Refer to the [University of Pittsburgh School of Medicine Guidelines for Faculty Appointment and Promotion](#).

Investigator-Educator Pathway

Who will generally consider themselves to be Investigator-Educators?

Individuals who seek appointment or promotion as an Investigator-Educator generally dedicate most of their effort to independent research. A significant portion of their effort is devoted to educating the next generation of investigators by teaching graduate students and medical students and supervising postdoctoral fellows.

Investigator-Educators who have demonstrated independence, national/international reputation, seminal scholarly contributions, and significant educational and service accomplishments are generally in the tenure track or have been awarded tenure. Investigator-Educators with a high degree of initiative and who collaborate productively with independent investigators are generally appointed or promoted in the non-tenure track.

What should I include in my Executive Summary for appointment or promotion in the NON-TENURE TRACK?

- Education and Training
- Record of individual accomplishment in investigation
- Record of programmatic responsibilities and contributions
- Demonstration of career progression with increasing responsibilities over time
- Evidence of recognizable career goals and objectives
- Record of high quality teaching
- Role model for medical and graduate students, trainees, and junior colleagues
- 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
- Documented excellence in these endeavors

What should I include in my Executive Summary for appointment or promotion in the TENURE TRACK?

Above categories of documentation, plus:

- Education and Training
- Record of intellectual leadership in a scholarly field
- Evidence of innovative contributions (patents; development of new methodologies, techniques, devices, diagnostic tools)
- Evidence of independence
- Record of continuing, peer-reviewed external funding
- Record of scholarly publications in peer reviewed journals demonstrating innovative conceptualizations or novel solutions
- Evidence of a consistent research theme with indication of originality, independence, and sustained scholarly or investigative productivity
- National/international reputation as evidenced by leadership in scientific organizations, service on study sections, editorial boards, invited papers, invited lectures
- Likelihood of continued productivity and creativity in investigation

Clinician-Investigator Pathway

Who will generally consider themselves to be Clinician-Investigators?

Individuals who seek appointment or promotion as a Clinician-Investigator generally devote significant amounts of their effort to both the clinical programs of the health system and the research programs of the School of Medicine. This pathway includes a diverse group of individuals in both the non-tenure and tenure tracks.

Clinician-Investigators are engaged in patient care, clinical service functions, and basic science or clinical research and are generally in the non-tenure track. In exceptional circumstances, tenure may be recommended for Clinician-Investigators who have demonstrated outstanding and sustained accomplishments in academic medicine in the areas of patient care, clinical service functions, and scholarly contributions in research.

What should I include in my Executive Summary for appointment or promotion in the NON-TENURE TRACK?

- Record of individual accomplishment in investigation

- Record of programmatic responsibilities and contributions
- Demonstration of career progression with increasing responsibilities over time
- Evidence of recognizable career goals and objectives
- Record of high quality patient care
- Evidence of a consistent research theme
- Record of high quality teaching
- Role model for medical and graduate students, trainees, and junior colleagues
- 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
- Documented excellence in these endeavors

What should I include in my Executive Summary for appointment or promotion in the TENURE TRACK?

Above categories of documentation, plus:

- Demonstration of leadership in investigation and patient care
- Evidence of innovative contributions (patents, development of new diagnostic tools, surgical techniques and devices, groundbreaking clinical trials)
- Evidence of independence
- Record of intellectual leadership
- Record of continuing, peer-reviewed external funding
- Record of scholarly publications in peer reviewed journals demonstrating innovative conceptualizations or novel solutions
- Evidence of a consistent research theme with indication of originality, independence, and sustained scholarly or investigative productivity
- National/international reputation as evidenced by leadership in scientific organizations, service on study sections, editorial boards, invited papers, invited lectures
- Likelihood of continued productivity and creativity in clinical investigation and patient care

Typical Profile of the Successful Candidate for Promotion in the Tenure Track or Conferral of Tenure in the Clinician-Investigator Pathway

Assessment of prior TFPA Committee cases reveals that the successful candidate usually met all of the criteria below:

- Excellent physician who devotes at least 40% effort to patient care and/or clinical program leadership (e.g. division directors)
- Clearly identifiable consistent research theme(s) with evidence that the candidate is driving these efforts at the University of Pittsburgh, both intellectually and operationally. Laboratory research is not required.
- Excellent publication record with an appropriate proportion as first, last, or corresponding author.
- External funding often from foundations, medical associations, medical societies, industry, government entities, and other sources. In selected cases, the research themes do not require significant funding to be successful and so external funding may not be present.
- National or international reputation in his or her field as evidenced by invited lectures, publications, visiting professorships, leadership roles in medical associations and societies, leadership roles in multi-center clinical trials or cooperative research groups, among other activities.

- Successful educator with students, residents, fellows, physicians (e.g., continuing medical education courses), usually associated with his or her clinical and research activities
- Meaningful activities and leadership in service (in addition to patient care) to the School of Medicine, University, UPP, UPMC, affiliated hospitals, medical associations and societies, journals, and other professional entities.

Clinician-Educator Pathway

Who will generally consider themselves to be Clinician-Educators?

Individuals who seek appointment or promotion as a Clinician-Educator generally devote significant amounts of their effort to both the clinical programs of the health system and the educational programs of the School of Medicine. Teaching and programmatic level contributions to the School's education programs comprise a major focus of their work.

Clinician-Educators are engaged in teaching, patient care, and clinical service functions and are generally in the non-tenure track. In exceptional circumstances, tenure may be recommended for Clinician-Educators who have demonstrated outstanding and sustained accomplishments in academic medicine in the areas of teaching, patient care, and clinical service.

What should I include in my Executive Summary for appointment or promotion in the NON-TENURE TRACK?

- Record of individual accomplishment in education
- Record of programmatic responsibilities and contributions
- Demonstration of career progression with increasing responsibilities over time
- Evidence of recognizable career goals and objectives
- Record of high quality patient care
- Role model for medical and graduate students, trainees, and junior colleagues
- Documented excellence in these endeavors

What should I include in my Executive Summary for appointment or promotion in the TENURE TRACK?

Above categories of documentation, plus:

- Demonstration of leadership in medical education
- Record of scholarly publications in peer-reviewed journals
- Evidence of innovation (new educational activities, programs, curricula, or other educational products)
- Evidence of independence
- Record of intellectual leadership
- Record of external education funding
- Likelihood of continued productivity and creativity in medical education

Note that 1) giving a few lectures each year or 2) doing the same teaching annually with no evidence of career progression, are insufficient grounds for appointment or promotion based primarily on teaching.

Clinician-Leader Pathway

Who will generally consider themselves to be Clinician-Leaders?

Individuals who seek appointment or promotion as a Clinician-Leader generally devote

approximately 75 to 80 percent of their effort to clinical practice, including leadership of clinical programs and administrative time related to patient care. The practice is almost always located inside the tertiary health center. These individuals are often recognized locally for contributions to the health care system, contributions to the community, administrative accomplishments, and clinical excellence. Although not the major focus of their work, they often contribute to the academic mission by teaching or collaborating on research projects. Clinician-Leaders are appointed and promoted in the non-tenure track.

What should I include in my Executive Summary for appointment or promotion in the NON-TENURE TRACK?

- Record of individual accomplishment
- Record of programmatic responsibilities and contributions (program development, administration of a clinical program, administration of clinical/hospital operations)
- Demonstration of career progression with increasing responsibilities over time
- Evidence of recognizable career goals and objectives
- Record of high quality patient care
- Role model for medical and graduate students, trainees, and junior colleagues
- Demonstration of clinical leadership
- Likelihood of continued productivity and creativity in clinical medicine
- Evidence of innovation (new activities, community-based projects, etc.)
- Documented excellence in these endeavors

What should I include in my Executive Summary for appointment or promotion in the TENURE TRACK?

Appointment or promotion in the Clinician-Leader Pathway is not available in the tenure track.