Planning for Advancement - Understanding UF promotion guidelines and the importance of setting your own goals

September 28, 2016

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Senior Associate Dean for Faculty Affairs and Professional Development
UF College of Medicine
Everyone is on the path – do you know where it’s going and how long it will take?

- Know the “rules”
- Keep your documentation up to date
- Find mentor(s) – including Peers

Make use of an annual Individual Action Plan to set goals

- Assess where you’re at and where you want to be
- Write it down
- Discuss, Implement, Reassess, Revise
Body of literature to support value - people who develop and implement strategies to pursue career-specific goals

- achieve greater career success as measured by salary, promotions, and level of responsibility.\(^3\)
- report greater career satisfaction and rate themselves as more successful than their peers compared to those without career plans.\(^4\)

A nationwide study of 7600 postdoctoral researchers found that postdocs who developed training plans with their advisers at the start of their appointments reported greater satisfaction, published more papers, and experienced fewer conflicts with those advisers.\(^5\)
Today

- P&T Guidelines, “The Rules”
- Individual Action Plans
Professor = Teacher
- Faculty with title of professor must “profess”
- Teaching assignment is needed – including Research Professor

Tenure Track (UF)
- No “modifier” before title
- Assistant Professor, Associate Professor, Professor

If non-tenure track, UF uses a “modifier” or different title
- Clinical Asst Professor, Clinical Assoc Professor, Clinical Professor
- Research Asst Prof, Research Assoc Prof, Res Prof
- Asst Scientist, Assoc Scientist, Scientist
- Lecturer, Senior Lecturer, Master Lecturer
- Asst Scholar, Assoc Scholar, Scholar
Title “modifier” does not have to be used for any documents or labels

- Except for official UF use, e.g. in your letter of offer, or the title on the cover page of your promotion packet.
How do faculty succeed?

UF Missions:
1. Research
2. Education
3. Service – required of all, but not itself a basis for promotion
4. Patient Care (component of Service for UF, a primary mission for COM)

Align your effort and assignment!
Success will be assessed based on accomplishments per assigned effort
1. Research Mission

- Investigation
- Discovery
  - Including inventions, patents
- Scholarship
- Manifest by publications, presentations, research funding, external evaluations of impact
2. Teaching Mission

- Excellence in teaching
  - Student and peer evaluations
  - Educational supervisor letter
  - Learner outcomes
    - Board scores
    - Attaining degrees
    - Establishing independent research careers
  - Teaching awards and honors
  - Mentoring
  - Role and impact within educational societies
  - Educational scholarship
3. Service

- Expected of all faculty → citizenship + recognition

However: “service” leadership in education, patient care or research should be assigned in the areas of education, patient care or research

- E.g. Residency director = assignment in Teaching
- Director of a clinical service = assign in Clinical

Administrative roles like Division Chief, Department Chair cannot be used to assess excellence toward advancement

- Promotion can only be awarded for contributions to your academic missions of Research, Teaching, Clinical
Service - to advance the mission of the University, such as

- Service on Faculty Council
- Program development that enhances diversity
- Election to civic, charitable foundation boards
- Department or college committees or task forces

**Especially important:**

- Participation and leadership in professional societies
- Invitations and participations on policy or guideline producing groups
4. Patient Care Distinction

A candidate with a primary mission assignment in patient care may be promoted to associate professor with the **demonstration of distinction in patient care as documented by achievements detailed in the Clinical Portfolio.** The entire portfolio will be evaluated for evidence of clinical distinction. A candidate’s portfolio may demonstrate distinction even if one or more of the elements are not applicable or not available.

**Evidence for clinical scholarship is required.**

Faculty members are also expected to **contribute to the teaching mission** of the COM and generally should have a teaching and education assignment of no less than 10% and satisfactory performance as a teacher/educator.

The Clinical Portfolio demonstrates the breadth and impact of one’s academic clinical practice.
In addition, clinical distinction will be supported by the following elements:

- Annual letters of evaluation documenting excellence in clinical care, innovation in practice methods, development of new programs and leadership in safety and quality initiatives
- The Chair’s letter placing the candidate’s performance and reputation in the context of Departmental expectations
The purpose of this clinical portfolio is to provide documentation of clinical excellence for faculty who have a major clinical assignment.

Information provided here should not duplicate what is already contained in other sections of the Promotion and Tenure packet.

Rather, you should highlight and comment on the importance of some items (e.g. clinical publications, presentations), as well as providing the additional requested data that will establish excellence in patient care.
For each of the 12 components, please enter all information that is available for your clinical activities.

You may simply leave out any for elements not applicable in your circumstance.

You may delete the instructions (presented in italics) prior to finalizing your portfolio.

Please limit the completed portfolio to 12 pages.
Clinical Portfolio

1. Scope of clinical practice
   b. Clinical Billing Activity chart to be inserted
   c. Clinical Supervisor’s statement

2. Evaluations (insert or summarize)
   a. Summary of clinical performance. Highlight the chair’s assessment of clinical performance as contained in the annual letters of evaluation. This information may be presented as a descriptive summary or in table format.
   b. Peer Evaluations
3. **Patient satisfaction scores** *(insert or summarize)*
   a. Patient satisfaction data. *Provide any available assessment of patient satisfaction with the quality of care*
   b. Other patient feedback.

4. **Commitment to ongoing growth in clinical performance**
   a. Self-improvement activities
   b. New skills
   c. Role in new models of patient care – includes evaluating and programs to improve quality
   d. Efficiency and quality of your practice
   e. Creative works and activities related to patient care
Clinical Portfolio

5. Quality of care metrics (measures captured for your practice – include standards)

6. Clinical leadership – committees, teams, medical directorships, PDQ. Describe your role, projects and outcomes.

7. Professional Contributions

8. Clinical referrals (to you or your practice)

9. Clinical publications (summarize, highlight any that impact practice)

10. Clinical Presentations

11. Awards and Honors (already listed, so highlight and describe)

12. Other pertinent information
Clinical Portfolio

- Will also be included in your Mid-Cycle Review
- Required after 4 years of employment
- Reviewed by the Multi-Mission Promotion Committee
- Feedback: on track, not on track for promotion with recommendations for improving
5 elements:

1. **Educational Narrative** – for contributions within your discipline at dept., college, national level and recognitions for such, also personal philosophy, role of education in career and aspirations toward educational leadership.

2. **Detailed Instructional Activities**

3. **Educational Scholarship** – *REQUIRED if area of excellence*

4. **Educational Leadership/Recognition**

5. **Mentorship** (Faculty, Trainees, Students, Post-docs – beyond grad student activities)
## Current COM Guidelines

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<td>Clinical Professor</td>
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<td>Research and Teaching</td>
<td>Research (may be educational)</td>
<td>Patient Care or Teaching</td>
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<td>Clinical pubs</td>
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<td>Pubs (1st Au)</td>
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<td>Grants (not PI) Pubs (not 1st Au) Crucial lab role</td>
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<td>Teaching evals, Curric</td>
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Faculty scholarship, most simply defined, means faculty research and study on a specific topic related to their academic field or professional concerns. Faculty scholarship can be many things, all kinds of which improve content area knowledge, improve teaching, and retain faculty involvement in and enthusiasm for what they do.

Scholarship must be public, not private, susceptible to critical review and evaluation, accessible for exchange and use by other members of the scholarly community (Shulman, 1999)
Traditional Considerations of Scholarship

- Contribution to the discipline
  - Research discoveries
  - Observations and synthesis
  - Hypothesis testing
  - Application
  - Teaching and learning
- How is it demonstrated?
  - Publications
  - Presentations
  - Grant funding, which leads to
    - Publications
    - Presentations

Scholarship can be achieved in *any* of the mission areas
Recommendations to enhancing Scholarship

- Collaborations, teams
- Interdisciplinary cooperation and cross-disciplinary initiatives
  - Link physicians with other researchers
- Recognition of faculty for pursuing innovative and scholarly activities in planning and playing major roles in curricula
- Participate in structured training programs for junior faculty
Other suggestions

- Division writing groups/projects
  - Set meeting times for individual or group projects
- Peer mentoring
- Opportunities from Mentors
  - Invited reviews or book chapters
Transform clinical and educational activities into scholarship

- Clinical pathways
- Patient guides
- Quality, safety initiatives
- Practice improvements
- Case reports
- Presentations
  - These can be the foundation for review articles
- Curricula
- Teaching innovations
About writing – The Writing Cycle

Days to Deadline

Binge Writing

Minutes

Deadline
Alternative: Regular (daily) writing

- 20-30 min protected blocks
- Will take the same total amount of time
- But with less stress and angst
Writing Cycle

Scheduled, Regular Writing times

Minutes

Days to Deadline

Deadline
Writing Cycle - *Reality*

Scheduled, Regular Writing Times

Minutes

Days to Deadline

Deadline
Reality of deadlines – even when you use regular writing times

- Still have last minute issues
- But this will be for editing, not first draft
- Final product will be much improved
Italian = tomato

http://tomato-timer.com/
## 2015-16 Multi-Mission Associate Professors, publications

<table>
<thead>
<tr>
<th></th>
<th>Years at rank UF + prior</th>
<th>Book Chapters</th>
<th>Refereed Publications</th>
<th>Non-refereed Publications</th>
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<tr>
<td><strong>Full Support (n=24)</strong></td>
<td>7.88 (3-15)</td>
<td>5.29 (0-23)</td>
<td>22.83 (0* – 79) *2 bk chap</td>
<td>3.92 (0-15)</td>
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<tr>
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<td>11.5 (11-12)</td>
<td>1 (1)</td>
<td>5 (2-8)</td>
<td>4.5 (3-6)</td>
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<td>10</td>
<td>0</td>
<td>8</td>
<td>3</td>
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2015-16 Multi-Mission: Associate Professors

Refereed Publications

Median 18.5
Mean 22.8
Refereed Publications: Tenured Associate Professors

- Mean: 34.28
- Median: 31

Candidates:
1. 23
2. 24
3. 29
4. 31
5. 35
6. 48
7. 50
GNV Clinical Track Faculty

Assistant Professor

- 2012: 336
- 2013: 373
- 2014: 407
- 2015: 425
- 2016: 480

Associate Professor

- 2012: 94
- 2013: 112
- 2014: 123
- 2015: 143
- 2016: 168

Professor

- 2012: 33
- 2013: 39
- 2014: 44
- 2015: 53
- 2016: 62
GNV Clinical Faculty

Assistant Professor
Associate Professor
Professor
Promoted to Associate Professor
Promoted to Professor
GNV Tenured and Tenure Track Faculty

<table>
<thead>
<tr>
<th>Year</th>
<th>Assistant Professor</th>
<th>Associate Professor</th>
<th>Professor</th>
</tr>
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<tbody>
<tr>
<td>2012</td>
<td>97</td>
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<td>2014</td>
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</tr>
<tr>
<td>2015</td>
<td>78</td>
<td>104</td>
<td>221</td>
</tr>
<tr>
<td>2016</td>
<td>100</td>
<td>92</td>
<td>225</td>
</tr>
</tbody>
</table>
Plan for Promotion

- Start on Day One
- Importance of assignment
- Maintain your CV!
  - [www.aamc.org/download/53260/data/cvtemplate](www.aamc.org/download/53260/data/cvtemplate)
- Construct a “working” promotion packet OPT
  - Enter data into packet and then copy into CV
- Especially for publications and presentations – will be in correct format and order
- Attend Promotion workshops (Spring)
First, Access Your P&T packet template:

- [www.my.ufl.edu](http://www.my.ufl.edu)
  - Login
  - Main Menu
  - My Self Service
  - UF Faculty Promotion & Tenure
UF Online Promotion & Tenure Home

Welcome to UF's system for promotion, tenure and permanent status. If you have any questions contact Academic Personnel at opt@admin.ufl.edu.

Marian Limacher

Promotion & Tenure Packet Actions

View the Promotion & Tenure template packet. Upload documents and view the status of reviews tracked in Online Promotion & Tenure.

Promotion & Tenure Packet

Identify Designee Editor

Identify a designee editor to enter data or upload packet documents on your behalf.

Designee Editor Marjory Kovacevic

Add/Update a Designee Editor

Track Ongoing Activity - In Development

Enter and view data on activities and events including honors and awards, presentations, and publications. This data can be extracted for use in your packet.

Faculty Activity
UF Online Promotion & Tenure Activity

Marian Limacher

Empl ID 56951540

Track Ongoing Activity

Use these links to view or update your activities. The data will be available to include in your packet, if you choose to do so, for your next Promotion & Tenure Review.

Professional Education  Packet section 5 (read only)
Patents/Software Copyrights  Packet Section 15
Publications  Packet Section 16
Presentations  Packet Section 17
Honors  Packet Section 27

Return to Main Page
Recommendations for every faculty member

- Identify a P&T mentor
  - Senior knowledgeable faculty member, recently promoted or on P&T committee
  - Potentially eligible candidates meet with mentor PRIOR to packet prep – e.g. mid cycle; 2 yrs earlier
  - Also meet with mentor to review packets year of promotion

- Obtain recent successful packets for guidance
  - With approval of successful candidates
  - Past 1-2 years only
  - Especially for clinical and/or educational portfolios

- Consider forming working groups to prepare packets
  - Meet every month or so
The individual development (or action) plan (IDP/IAP) is a written list of goals mapped to a timeline, and includes goal setting for research projects, skills development, and career planning.

The IDP is to be written and developed by the individual, and is to serve as a framework for discussion between individual and supervisor/mentor.

The IDP is only meaningful if individual and supervisor/mentor make full use of the IDP’s potential as a career development tool.
The Individual Development Plan

- Used
  - To assess current skills, interests, and strengths
  - Make a plan for developing skills to meet academic and professional goals: and
  - Communicate with supervisors, advisors, and mentors about evolving goals, accomplishments and related skills

- It will be revisited again and again to update and refine as goals change or come into focus and to record progress and accomplishments
Preparing an IDP

1. Assess
2. Write
3. Discuss
4. Implement
5. Revise
6. Revisit
1. Assess

- **Skills** - get input (family, peers, mentors)
  - What are your strengths
  - What can you improve
  - What will you need for your future career

- **Current Responsibilities**
  - What are the milestones in your program or position
  - What are the expectations, degree requirements
  - Projects, scholarly articles, presentations

- Use a self-assessment tool and self-reflection
1. **Assess**

- What development activities are available in my current setting that could help me develop the skills and knowledge I need for my target job?
- Are there projects or experiences that could help my development?
- Are there formal learning opportunities I should participate in?
1. **Assess (example)**

- Complete a self assessment
- Rank 1-5 for your current ability for each skill
- From the assessment, identify
  - Those in great need of improvement (1-3 rating) and
  - Those that are important for your job or your aspirations
- Then prioritize which 1-2 you will set as a goal for the year (short term); for 3 years and for 5 years
<table>
<thead>
<tr>
<th>Professional Skills:</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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<tbody>
<tr>
<td>Grant writing skills</td>
<td></td>
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<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Oral presentation skills</td>
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<td>2</td>
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<td>5</td>
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<tr>
<td>Manuscript writing skills</td>
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<td>2</td>
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<td>5</td>
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<tr>
<td>Mentoring skills</td>
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<td>4</td>
<td>5</td>
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<tr>
<td>Being a mentee</td>
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<td>2</td>
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<td>4</td>
<td>5</td>
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<td>Approaching difficult conversations</td>
<td></td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
2. Write: Setting goals

Short term and long term

**SMARTeR framework for goals:**

- **S** – specific (clear, easily understood)
- **M** = Measureable (can be quantified, number, time, cost, etc.)
- **A** = Attainable (within your ability and resources)
- **R** = Realistic (within reach)
- **T** = Time bound (can be accomplished within a given cycle)
- **eR** = Reassess (adjust goals at least annually)
Example: Scientific abstract submission for Fall meeting
1. Complete data analysis by August 1
2. Draft results and graphs by August 10
3. Prepare abstract by August 15
4. Review with Mentor, co-authors by August 25
5. Deadline for submission September 1
Example: Submit training/funding application
1. Review all sources by August 1
   - Foundations
   - NIH, NSF, VA, etc.
   - Faculty and student suggestions
2. Attend grant writing workshop, Fall
3. Develop proposal by end of fall workshop
4. Review with Mentor, external review, December
5. Deadline for submission January 15
<table>
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<tr>
<th>1. Objectives or skills to be learned</th>
<th>2. Approaches and Strategies</th>
<th>3. Timeframe</th>
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<td>Teach undergraduate student a research method</td>
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# Write: Short Term goals (1 year)

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<td>Write manuscript from recent project</td>
<td>Draft outline. Complete methods, then results, then introduction and discussion. Last do abstract</td>
<td>Start July 1 Work 30 min per day First draft to Mentor by September 1 Revisions by September 30</td>
<td>Submit to journal XX by October 15.</td>
</tr>
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</table>
Consider career interests
- What type of work would you like to do
- What is important in your post-training career
- What will you do to achieve your career goals
- Expand your professional networks
2. Write

Assessment Summary

1 year: Improve ability to - conduct difficult conversations; write manuscripts; complete projects before deadline

3 years: Develop new clinical program; engage in team research projects; publish manuscripts

5 years: Lead team projects; secure extramural funding; get promoted
3. **Discuss** Mentor(s)

- Discuss expectations and goals
- Help to establish priorities
- Determine how feasible
- Identify ways the mentor can help
- Seek additional input as your IDP is revised and refined
- Agree when to meet midway to identify progress, challenges, barriers
- Review, report progress and revise the IDP after each year until long term goal is reached
3. **Discuss**

- Be sure to review with your spouse/family
- What make sense for short and long term goals
Give a heads up, set a meeting time

Explain the process (send draft early)
  - Establish that this process is important to you
  - If funded trainee: remind that this is NIH/CTSI/UF policy

Choose which goals to share with which mentor/advisor
4. *Implement* your plan

- Be sure each sub-goal and goal have anticipated completion dates
- Act
- Review in 1-2 months, check off completed elements
- Revise and modify as needed
- Do a comprehensive assessment every year, prepare a new plan, incorporate into your annual self-assessment, and discuss with your mentor/advisor/chief at your annual meeting
5. Revise your IAP

- Every 6 months, update your goals
- Celebrate your accomplishments!
- Use the IAP as your progress report and roadmap for the next period
- Incorporate into your Annual Evaluation
Annual Evaluation

- Required
- Department determined format and process
  - Self assessment
  - Face-to-face meeting with supervisor
- Final report is part of your “permanent record”
- Last 5 annual evaluations by Chair will become part of your Promotion Packet
The Annual Self Assessment

- Descriptions and listing of accomplishments over the past year
- Clinical
- Teaching
- Research/Scholarship
- Service
- (Administration)
- (VA) - *but include VA academic mission elements in your total UF mission accomplishments when you seek promotion*
Be proactive

- At the meeting, summarize your mission specific accomplishments
- **Produce your IDP/IAP for the next year!**
- **Agree on 1 year, and longer term goals**
- Discuss which resources/support you will need to accomplish
  - Negotiate for what supervisor will need to provide
- Don’t be afraid to ask for an interim meeting if the plan changes mid year
- Update your chair with accomplishments throughout the year
- Use your mentor for more frequent meetings
Be sure that achieving your goals

✓ Also enhances the goals of the Department and College
6. Revisit

- Based on feedback at annual evaluation (or better after 6 months), remove goals achieved
- Remove goals no longer worth pursuing or no longer able to accomplish
- Add new goals
Pomodoro

Brian Tracy Time Management Newsletter, “Time Management made Simple,” “Eat That Frog”

Stop procrastinating and supercharge your productivity

Many others...
Resources:

Professional Development Seminar 10/6/15: “Writing for Publication: Turning Research (and clinical observations) into Scholarship

http://facultyaffairs.med.ufl.edu/upcoming-events/faculty-development-seminar-series/professional-development/#Previously%20Recorded%20Sessions


Publishing and Presenting Clinical Research, Warren Browner, 3rd Edition

Many others....
You have put a lot of time and effort into pursuing your PhD degree. Now it's time to focus on how to leverage your expertise into a satisfying and productive career. An individual development plan (IDP) helps you explore career possibilities and set goals to follow the career path that fits you best.

myIDP provides:
- Exercises to help you examine your skills, interests, and values
- A list of 20 scientific career paths with a prediction of which ones best fit your skills and interests
- A tool for setting strategic goals for the coming year, with optional reminders to keep you on track
- Articles and resources to guide you through the process

There is no charge to use this site and we encourage you to return as often as you wish. To learn more about the value of IDPs for scientists, read the first article in our myIDP series.

Click below to get started.

First Time Here?  Returning User

Authored by:
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Bill Lindstaedt, M.S. (UCSF)
Jennifer A. Hobin, Ph.D. (FASEB)
Philip S. Clifford, Ph.D. (MCW)
Case Reports – where to publish

- **BMJ Case Reports** ([www.casereports.bmj.com](http://www.casereports.bmj.com))
- **Cases Journal** ([www.casesjournal.com](http://www.casesjournal.com))
- **Journal of Medical Case Reports** ([www.jmedicalcasereports.com](http://www.jmedicalcasereports.com))
- **Radiology Case Reports** ([www.radiology.casereports.net/index.php/rcr](http://www.radiology.casereports.net/index.php/rcr))
- **Journal of Dermatological Case Reports** ([www.jdcr.eu](http://www.jdcr.eu))
Questions??

- Faculty Affairs
  - http://facultyaffairs.med.ufl.edu/
  - 294-5343

- OPT training
  - http://www.hr.ufl.edu/training/myUFL/toolkits/opt.asp
P&T Committee

- MM
  - Chair: Peter Carek, MD (Chair, CHFM)
  - Co-Chair: John Davis, MD (Professor, OB-GYN)

- Tenure Track
  - Chair: Lucia Notterpeck, PhD (Chair, Neuroscience)
  - Co-Chair: Rob Hromas, MD (Chair, Medicine)

- Committee membership
  - MM 15 total, including Chair and co-Chair
  - TT 12 total, including Chair and co-Chair