



School of Medicine

**SCHOOL OF MEDICINE
PROMOTION AND TENURE GUIDELINES FOR FACULTY**

As stated in the WSU/AAUP Agreement, recommendations for tenure and/or promotion are "based upon a candidate's qualifications in the light of specific department/division, college and University considerations. The assessments of a faculty candidate's qualifications shall be based upon excellence in teaching and in scholarly achievement ... Consideration shall also be given to non-instructional service to the department, college, and/or University and/or public and/or professional service which benefit the University."

The following promotion and tenure guidelines serve to delineate, as far as is practical and in a manner reflecting the particular missions and diverse characteristics of the School of Medicine, those factors that will be considered in the evaluation of the candidate's qualifications with respect to the criteria in the WSU/AAUP Agreement. There are four tracks: 1) Research Educator, 2) Clinician Educator 3) Clinical Scholar and 4) Research. Following are the promotion and tenure guidelines for each of these tracks.

Two of the four tracks (i.e. Research Educator and Clinical Scholar) are tenurable. Tenure may be awarded to faculty members who meet the criteria for promotion to associate professor and for whom there is evidence that continuing and sustainable extramural funding will be secured to support their future scholarly efforts. It will be the responsibility of the department chair recommending tenure to provide evidence of a consistent pattern of support for the candidate's research and scholarly efforts and additionally to provide assurance that continuing and sustainable extramural funding will be available to support the candidate's future scholarly efforts.

Appointment and promotion to associate professor without tenure on the tenure track will in most instances be accompanied by the awarding of tenure. There are instances, however, in which faculty members have established a national reputation based on significant, original, and creative contributions to their disciplines, but have not yet established a pattern of program development that gives assurance that continuing and sustained extramural funding will be available to support their future scholarly activities. Under such circumstances, faculty members may be recommended for appointment or promotion with the recommendation and decision on tenure deferred until the needed evidence of continued and sustainable extramural funding is available. Such an action does not influence the duration of the stated tenure probationary period.

I. RESEARCH EDUCATOR (RE)

Research Educators are faculty members whose major effort (at least 50%) is participation in research and who also provide education, service, and, if appropriate, clinical care.

REQUIREMENTS FOR APPOINTMENT TO ASSISTANT PROFESSOR ON THE RESEARCH EDUCATOR TRACK

Evidence of academic potential and of commitment to academic pursuits in the biomedical sciences, as demonstrated by the following criteria:

1. High-quality research-intensive professional training and experience, with an appropriate academic/professional degree and research productivity or scholarly activity beyond doctoral degree requirements, as indicated by research publications in refereed journals and presentations. Training should indicate potential for independent investigation.
2. Commitment to seek external funding for research.
3. Commitment to high-quality teaching.
4. Where appropriate, clinical competence demonstrated by high-quality professional training and experience. Primary board certification is required except in unusual circumstances (e.g., full certification delayed because of board requirement for a specified number of years in practice or when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter.

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO ASSOCIATE PROFESSOR ON THE RESEARCH EDUCATOR TRACK

1. The primary criterion is distinction in research that is rigorous, sustained, original, or novel, has a distinctive focus, has a trajectory of increasing quality and quantity, and has fundamental significance or impact. Peer recognition as a scholar at the national level is required. Success in obtaining substantial competitive investigator-initiated extramural funding at the national or international level is required. The faculty member should be the primary investigator or one who provides critical intellectual input to collaborative research while establishing an appropriate independent focus. Publication of original investigations in peer-reviewed journals is required. Although of less importance than original investigations in peer-reviewed journals, additional evidence of scholarship may include patents, reviews, and chapters, particularly when the request to author such publications is indicative of the individual's national or international stature. Publications that include trainees as co-authors are considered for evaluation of teaching as well as for scholarship.

Collaborative scholarship may satisfy the above criteria where the contribution of the candidate can be made clear (i.e., documented evidence of a key role in facilitating the scholarly research activity). Therefore, the faculty member may be the primary investigator or one who provides critical intellectual input to collaborative research. An example of such scholarship could be concept-driven scientific collaborative investigations (e.g., multi-center or investigator-initiated studies leading to highly recognized publications, development of clinical guidelines or position papers with national or international collaborators, studies with novel concepts or potential of advancing translational work in the related field, fundamental research establishing ground work for further clinical research, or developing exploratory ancillary studies concurrent with larger multi-center trials). The faculty member must provide documentation of

his/her pivotal role in collaborative research and publications.

2. Documented evidence of high-quality performance in biomedical education is required. Education may take many forms, including classroom teaching, clinical teaching, development of curricula and educational materials, and mentorship of research trainees. Reviews by learners (including trainees and faculty), must demonstrate high-quality performance as an educator and/or mentor. As noted above, publications that include trainees as co-authors are considered for evaluation of teaching as well as of scholarship.
3. Service at the levels of Department, School, University, physician practice plans, affiliate medical organizations (as appropriate), community, government, or one's profession is required. Service activities which are invited because of scholarly expertise and recognition (e.g. grant reviews, manuscript reviews) are highly desirable for promotion on this track. Service activities which reflect expertise in education (e.g., writing national board examination questions) may also be considered under teaching.
4. For faculty with clinical activity, maintenance of primary board certification is required except in unusual circumstances (e.g., full certification delayed because of board requirement for a specified number of years in practice or when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter. Competence in clinical performance must be verified by the department and also described in the Chair's letter.
5. External letters of evaluation, which are required for promotion, should indicate excellent performance in scholarship, teaching and service comparable to peers at a similar career stage.*

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO PROFESSOR ON THE RESEARCH EDUCATOR TRACK

1. Research accomplishment must be rigorous and original or novel, and with fundamental significance or impact. The research should result in national recognition, leadership stature, and eminence in the peer group that are appropriate for the area of research. This research might represent an expansion of the basis for promotion to associate professor into a more substantial and more mature level of academic achievement. On the other hand, the accomplishment may embody a change in research focus. Success in obtaining substantial competitive investigator-initiated extramural funding at the national or international level is required. The faculty member should be the primary investigator or one who provides critical intellectual input to collaborative research while establishing an appropriate independent focus. Publication of original investigations in peer-reviewed journals is required. Although of less importance than original investigations in peer-reviewed journals, additional evidence of scholarship may include patents, reviews, and chapters, particularly when the request to author such publications is indicative of the individual's national or international stature. Publications that include trainees as co-authors are valued for teaching as well as scholarship.

Collaborative scholarship may satisfy the above criteria where the contribution of the candidate can be made clear (i.e., documented evidence of a key role in facilitating the scholarly research activity). Therefore, the faculty member may be the primary investigator or one who provides critical intellectual input to collaborative research. An example of such scholarship could be concept-driven scientific collaborative investigations (e.g., multi-center or investigator-initiated studies leading to highly recognized publications, development of clinical guidelines or position papers with national or international collaborators, studies with novel concepts or potential of advancing translational work in the related field, novel

* See *External Evaluator Requirements* document: http://facaffairs.med.wayne.edu/promotion_and_tenure.php

platform research establishing ground work for further clinical research, or developing exploratory ancillary studies concurrent with larger multi-center trials). The faculty member must provide documentation of his/her pivotal role in collaborative research and publications.

2. Documented evidence of high-quality performance in biomedical education is required. Education may take many forms, including classroom teaching, clinical teaching, development of curricula and educational materials, and mentorship of research trainees. Mentorship of faculty is also an important role for promotion to professor. Publications that include trainees as co-authors are valued for teaching as well as scholarship. Reviews by learners, and where available, by peers, must demonstrate high-quality performance as an educator and/or mentor.
3. Service at the levels of Department, School, University, physician practice plans, affiliate medical organizations (as appropriate), community, government or one's profession is required. The achievement of a national and/or international reputation of excellence is required, as reflected by service on invited or elected national and/or international committees, boards, and governing bodies. Service activities which are invited because of expertise and recognition may also be considered under scholarship. Service activities that reflect expertise in education (e.g., writing national board examination questions) may also be considered under teaching.
4. For faculty with clinical activity, maintenance of primary board certification is required except in unusual circumstances (e.g., full certification delayed because of board requirement for a specified number of years in practice or when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter. Competence in clinical performance must be verified by the department and also described in the Chair's letter.
5. External letters of evaluation, which are required for promotion, should indicate excellent performance in scholarship, teaching and service comparable to peers at a similar career stage.*

* See *External Evaluator Requirements* document: http://facaffairs.med.wayne.edu/promotion_and_tenure.php

II. CLINICIAN EDUCATOR (CE)

Clinician Educators are faculty members who primarily provide clinical care, education, and service. Scholarship in the broadest sense is required and may include but is not limited to research (i.e., systematic investigation to develop new knowledge).

Promotion will be based on attainment of a record of accomplishment in two of the three mission areas, education, scholarship and service, as delineated in the annual assignment.

REQUIREMENTS FOR APPOINTMENT TO ASSISTANT PROFESSOR ON THE CLINICIAN EDUCATOR TRACK

Evidence of academic potential and commitment to academic medicine and/or medical sciences, as demonstrated by the following criteria:

1. Clinical competence demonstrated by high-quality professional training and experience. Primary board certification is required except in unusual circumstances (e.g., non-physicians or physicians with full certification delayed because of board requirement for a specified number of years in practice or when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter.
2. Commitment to high-quality teaching.
3. Commitment to scholarly activity.

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO ASSOCIATE PROFESSOR ON THE CLINICIAN EDUCATOR TRACK

1. As an Assistant Professor there is a record of accomplishments in education (including mentoring and educational leadership), scholarship, and service. Excellence is expected in at least two of these three areas, one of which must be education.
2. A significant program of excellent clinical activity, as verified by the department, is required. Leadership of clinical programs and hospital quality initiatives can be used to demonstrate excellence in clinical activity. Maintenance of board certification is required (either primary and/or subspecialty certification) except in unusual circumstances (e.g., non-physicians or physicians with when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter. Competence in clinical performance must be verified by the department and also described in the Chair's letter.
3. A primary focus on education and/or activities that enhance effectiveness of teaching and education distinguishes faculty members on this track. This focus should result in excellent performance as an educator in such activities as classroom/clinical teaching, development of curricula and educational materials, and mentorship of trainees. Teaching activities and reviews by learners (including trainees and faculty) must demonstrate excellent performance as an educator. Excellence in education can be demonstrated through publication of curricula, national

presentations, and developing/leading regional and/or national workshops. Excellence can also be demonstrated by accomplishments in educational leadership of medical undergraduate or graduate medical education programs. Mentorship of trainees, including writing case reports and abstracts for regional/state/national meetings, is expected. Evidence of training to improve as an educator may be used as a factor in assessment of teaching. Excellence in scholarly activities is evaluated not only for scholarship but also for teaching when conducted with trainees.

4. Evidence of scholarship is expected and may include a broad variety of accomplishments. Examples of scholarship for this track can include publications of original observations, review articles, case reports, letters to the editor, clinical and/or educational research studies, books, book chapters, patents, practice guidelines, and dissemination of curricula, curricular models or various teaching tools (e.g., MedEd Portal). Leadership of faculty development programs and regional/state/national presentations that demonstrate regional or national recognition are also acceptable as examples. These activities may involve collaborative efforts, as well as individual activities. As noted above, scholarly activities are valued not only for scholarship but also as teaching when conducted with trainees. Research activities, such as designing clinical trials is encouraged, but not required, in this track.
5. Service at the levels of Department, School, University, physician practice plans, affiliate medical organizations (as appropriate), community, government, or one's profession (professional societies) is expected. Participation in education, program or hospital quality improvement projects can be used to demonstrate excellence in service. Service activities which are invited because of scholarly expertise and recognition may also be considered under scholarship. Service activities which reflect expertise in education may also be considered under teaching. Evidence of training to develop skills as an administrator or academic leader may be considered.
6. External letters of evaluation, which are required for promotion, should indicate excellent performance in at least two of education, scholarship, and service activities, comparable to peers at a similar career stage.*

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO PROFESSOR ON THE CLINICIAN EDUCATOR TRACK

1. As an Associate Professor there is a record of accomplishments in education (including mentoring and educational leadership), scholarship, and service. Excellence is expected in at least two of these three areas, one of which must be education.
2. A significant program of excellent clinical activity, as verified by the department, is required. Leadership of clinical programs and hospital quality initiatives can be used to demonstrate excellence in clinical activity. Clinical leadership at the regional or national level is required. Maintenance of board certification is required (either primary and/or subspecialty certification), except in unusual circumstances (e.g., non-physicians or physicians with when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter. Competence in clinical performance must be verified by the department and also described in the Chair's letter.
3. Consistent and sustained focus on education and/or activities that enhance effectiveness of teaching and education is required. This focus should result in excellent performance as an

educator in such activities as classroom/clinical teaching, development and publication of curricula and educational materials, and mentorship of trainees. Excellence in leadership and mentorship of junior faculty is required. Excellence in education can be demonstrated through publication of curricula, national presentations, and developing/leading regional and/or national workshops. Excellence can also be demonstrated by accomplishments in educational leadership of medical undergraduate or graduate medical education programs. Teaching activities and reviews by learners (including trainees and faculty) must demonstrate excellent performance as an educator. External recognition of teaching, especially at the regional or national level, is required (e.g., invited Grand Rounds). Evidence of training to improve as an educator may be used as a factor in assessment of teaching. Excellence in scholarly activities is evaluated not only for scholarship but also for teaching when conducted with trainees.

4. Consistent and sustained scholarship is expected. Examples of scholarship for this track can include publications of original observations, review articles, case reports, letters to the editor, clinical and/or educational research studies, books, book chapters, patents, practice guidelines, and dissemination of curricula, curricular models or various teaching tools (e.g., MedEd Portal). Leadership of faculty development programs and regional/state/national presentations that demonstrate regional or national recognition are also acceptable as examples. These activities may involve collaborative efforts, as well as individual activities. As noted above, scholarly activities are valued not only for scholarship but also as teaching when conducted with trainees.
5. Consistent and sustained service at the levels of Department, School, University, physician practice plans, affiliate medical organizations (as appropriate), community, government, or one's profession is expected. Service to the profession, as reflected by participation on invited or elected national and/or international committees, boards, and professional governing bodies, is desirable. Service activities which are invited because of scholarly expertise and recognition may also be considered under scholarship. Service activities which reflect expertise in education may also be considered under teaching. Evidence of training to develop skills as an administrator or academic leader may be considered.
6. External letters of evaluation, which are required for promotion, should indicate excellent performance in at least two of education, scholarship, and service, comparable to peers at a similar career stage.*

III. CLINICAL SCHOLAR (CS)

Clinical Scholars are faculty members who focus on scholarly work and also provide education, service, and clinical care. As a general guideline, their scholarly activity should be at least 40% of their total effort.

REQUIREMENTS FOR APPOINTMENT TO ASSISTANT PROFESSOR ON THE CLINICAL SCHOLAR TRACK

Evidence of academic potential and strong commitment to basic, translational, and/or clinical research, as demonstrated by the following criteria:

1. High-quality research-intensive professional training and experience, with an appropriate academic/professional degree and research productivity or scholarly activity beyond doctoral degree requirements, as indicated by research publications in refereed journals and presentations. Training should indicate potential for independent investigation.
2. Commitment to seek external funding for research.
3. Commitment to high-quality teaching.
4. Clinical competence demonstrated by high-quality professional training and experience. Primary board certification is required except in unusual circumstances (e.g., non-physicians or physicians with full certification delayed because of board requirement for a specified number of years in practice or when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter.

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO ASSOCIATE PROFESSOR ON THE CLINICAL SCHOLAR TRACK

1. Substantial scholarly accomplishment as evidenced by success in publication and extramural funding, especially on the regional or national level, which may include investigator-initiated clinical trials and externally funded grants or contracts, is required. The faculty member should be the primary investigator or one who provides critical intellectual input to collaborative research while establishing an appropriate independent focus. Publication of original investigations in peer-reviewed journals is required. Although of less importance than original investigations in peer-reviewed journals, additional evidence of scholarship may include patents, reviews, case reports, and chapters, particularly when the request to author such publications is indicative of the individual's national or international stature. Case reports are given less importance than other peer-reviewed publications, with the exception of first reports of new diseases or reports that represent significant scientific advances. Publications that include trainees as co-authors are considered for evaluation of teaching as well as for scholarship.

Collaborative scholarship may satisfy the above criteria where the contribution of the candidate can be made clear (i.e., documented evidence of a key role in facilitating the scholarly research activity). Therefore, the faculty member may be the primary investigator or one who provides critical intellectual input to collaborative research. An example of such scholarship could be concept-driven scientific collaborative investigations (e.g., multi-center or investigator-initiated studies leading to highly recognized publications, development of clinical guidelines or position papers with national or international collaborators, studies with novel concepts or potential of advancing translational work in the related field, novel platform research establishing ground work for further clinical research, or developing exploratory ancillary studies concurrent with larger multi-center trials). The faculty member must provide

documentation of his/her pivotal role in collaborative research and publications.

2. Documented evidence of high-quality performance in biomedical education is required. Education may take many forms, including classroom teaching, clinical teaching, development of curricula and educational materials, and mentorship of clinical and research trainees. Reviews by learners (including trainees and faculty) must demonstrate high-quality performance as an educator and/or mentor. As noted above, publications that include trainees as co-authors are considered for evaluation of teaching as well as of scholarship.
3. A significant program of excellent clinical activity, as verified by the department, is required. Maintenance of primary board certification is required except in unusual circumstances (e.g., non-physicians or physicians with when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter. Competence in clinical performance must be verified by the department and also described in the Chair's letter.
4. Effective participation in administrative and committee responsibilities is required. This may include service at the levels of the Department, School, University, physician practice plans, affiliate medical organizations (as appropriate), community, government, and/or one's profession. Service activities which are invited because of scholarly expertise and recognition may also be considered under scholarship. Service activities which reflect expertise in education (e.g., writing national board examination questions) may also be considered under education.
5. External letters of evaluation, which are required for promotion, should indicate excellent performance in scholarship, teaching, and service, comparable to peers at a similar career stage.*

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO PROFESSOR ON THE CLINICAL SCHOLAR TRACK

1. Substantial scholarly accomplishment as evidenced by sustained success in publication and extramural funding, especially at the regional or national level, which may include investigator-initiated clinical trials and externally funded grants or contracts, is required. Such accomplishment might be different from the basis for promotion to Associate Professor or might represent the expansion of the basis for promotion to Associate Professor into a more substantial and more mature body of work. The faculty member should be the primary investigator or one who provides critical intellectual input to collaborative research while establishing an appropriate independent focus. Publication of original investigations in peer-reviewed journals is required. Although of less importance than original investigations in peer-reviewed journals, additional evidence of scholarship may include patents, reviews, case reports, and chapters, particularly when the request to author such publications is indicative of the individual's national or international stature. Case reports are given less importance than other peer-reviewed publications, with the exception of first reports of new diseases or reports that represent significant scientific advances. Publications that include trainees as co-authors are considered for evaluation of teaching as well as for scholarship

Collaborative scholarship may satisfy the above criteria where the contribution of the candidate can be made clear (i.e., documented evidence of a key role in facilitating the scholarly research activity). Therefore, the faculty member may be the primary investigator or one who provides critical intellectual input to collaborative research. An example of such scholarship could be concept-driven scientific collaborative investigations (e.g., multi-center or investigator-initiated studies leading to highly recognized publications, development of clinical guidelines or position papers with national or international collaborators, studies with novel concepts or potential of advancing translational work in the related field, novel platform research establishing ground work for further clinical research, or developing exploratory ancillary studies concurrent with larger multi-center trials). The faculty member must provide documentation of his/her pivotal role in collaborative research and publications.

2. Documented evidence of high-quality performance in biomedical education is required. Education may take many forms, including classroom teaching, clinical teaching, development of curricula and educational materials, and mentorship of clinical and research trainees. Mentorship of faculty is also important for promotion to full professor. Reviews by learners (including trainees and faculty), must demonstrate high-quality performance as an educator and/or mentor. As noted above, publications that include trainees as co-authors are considered for evaluation of teaching as well as of scholarship.
3. A significant program of excellent clinical activity, as verified by the department, is required. Maintenance of primary board certification is required, except in unusual circumstances (e.g., non-physicians or physicians when training obtained outside the U.S. makes the individual ineligible for U.S. board certification). A requirement for subspecialty board certification is left to the discretion of the department and described in the Chair's letter. Competence in clinical performance must be verified by the department and also described in the Chair's letter.
4. Service at the levels of Department, School, University, physician practice plans, affiliate medical organizations (as appropriate), community, government, or one's profession is required. The achievement of a national and/or international reputation of excellence, as reflected by service on invited or elected national and/or international committees, boards, and governing bodies will also be considered. Service activities which are invited because of expertise and recognition may also be considered under scholarship. Service activities that reflect expertise in education (e.g., writing national board examination questions) may also be considered under education.

5. External letters of evaluation, which are required for promotion, should indicate excellent performance in scholarship, teaching, and service, comparable to peers at a similar career stage.*

IV. RESEARCH (R)

Faculty members whose only obligation is research, without requirement for teaching and service, are on the Research track.

The Research track may provide a pathway for academic advancement of faculty members such as those who are:

- Senior postdoctoral students and/or other investigators who would be eligible to apply for extramural funding.
- Junior faculty who wish to focus exclusively on the development of independent research.
- Independent investigators who do not want to teach or to provide service.
- Investigators who are active in collaborative research, but who are not eligible to apply for grants and for whom tenure does not apply, such as faculty members in the Perinatal Research Branch of the NIH.
- Investigators who provide essential expertise in the application of a core facility's resources to innovative research (e.g., proteomics).
- Investigators who provide essential expertise, (e. g., biostatistical or bioinformatics consultation), to multiple funded research projects.

REQUIREMENTS FOR APPOINTMENT AS ASSISTANT PROFESSOR ON THE RESEARCH TRACK

Evidence of academic potential and of commitment to academic medicine and research in biomedical sciences, as demonstrated by the following criteria:

1. An academic/professional degree and high-quality professional training and experience.
2. Other evidence of scholarly activity or research productivity beyond degree requirements, as indicated by abstracts, presentations, and/or publications in refereed journals.

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO ASSOCIATE PROFESSOR ON THE RESEARCH TRACK

The primary criterion is essential contribution to research that is rigorous and original or novel. The publication record should reflect a trajectory of increased quality and quantity and demonstrate peer recognition as a scholar making essential contributions to peer-reviewed research of others at Wayne State University and/or independent recognition as a scholar at the regional and/or national level. Patents are also important evidence of scholarship. Evidence of recognition may also include documented contributions to the successful efforts of other investigators to obtain research funds from regional and national funding agencies and/or independent funding from the same.

REQUIREMENTS FOR APPOINTMENT OR PROMOTION TO PROFESSOR ON THE RESEARCH TRACK

The primary criterion is essential and sustained contribution to research that is rigorous and original or novel. The publication record should reflect a continuing trajectory of increased quality and quantity and demonstrate peer recognition as a scholar at the national and/or international level and/or a demonstrated leadership role in the development of essential support services for ongoing peer-reviewed research of other investigators. Patents are also important evidence of scholarship. Evidence of

recognition may also include sustained contributions to the successful efforts of other investigators to obtain research funds from regional and national funding agencies and/or independent funding from the same.

APPROVED:

Jack D. Sobel, M.D.
Distinguished Professor of Medicine
Dean, WSU School of Medicine

Date: October 10, 2017