

**Chair's letter for Teaching (Fixed Term Track):**

- I. Introduction
  - a. Reason for the recommendation letter (appointment or promotion including current rank and the new rank– with Modifier of adjunct, clinical or research included). Include secondary appointments if applicable.
  - b. Proposed effective date
  - c. Reason for the appointment/promotion (research, clinical activity, teaching, administration or community professional service)
  - d. Vote of full professors (format of “x in favor of, x opposed to and x abstain”)
    - i. Any negative votes and/or abstentions explained
  - e. Contingency statement
- II. Education and employment history
- III. Information regarding the candidate's accomplishments in education
  - a. Include information about actual classes taught
  - b. Invited presentations, talks, seminars, etc. to peers
  - c. Actual teaching activities to trainees
- IV. Information regarding the candidate's publications
- V. Information regarding the candidate's research activities (if applicable)
- VI. Information regarding the candidate's funding (if applicable)
- VII. Information regarding the candidate's clinical activity (if applicable)
- VIII. Administrative appointments (if applicable)
- IX. Awards (if applicable)
- X. Professional Service activities
- XI. Conclusion

Below is an example of this outline for reference purposes.

August 21, 2014

William L. Roper, MD, MPH  
Dean, School of Medicine  
Vice Chancellor for Medical Affairs  
CEO, UNC Health Care System  
University of North Carolina at Chapel Hill  
CB# 7000, 4030 Bondurant Hall  
Carolina Campus

Dear Dr. Roper:

Due to excellence in teaching, we are writing to recommend the promotion of Dr. [REDACTED] [REDACTED] from Clinical Associate Professor to Clinical Professor in the Department of Medicine (primary appointment) and the Eshelman School of Pharmacy (secondary appointment) effective December 1, 2014. The Full Professors in the Department of Medicine have been consulted and approve the promotion with 33 in favor of, 0 opposed, and 0 abstained. The Full Professors in the School of Pharmacy have been consulted and approve the promotion with 15 in favor of, 0 opposed, and 0 abstained. This position and the continuance of Dr. [REDACTED] employment are contingent upon the continued availability of funding from sources other than continuing state budget funds or permanent trust funds. Specifically, Dr. [REDACTED] will be required to generate from patient care revenues and/or research funding sufficient funds to cover his total compensation.

Dr. [REDACTED] received his M.D. degree and his Masters in Public Health here at the University of North Carolina at Chapel Hill where he also completed a Combined Residency in Internal Medicine and Pediatrics at UNC-Chapel Hill. He worked as a physician with Chatham Primary Care from 1999 to 2001. In 2002, Dr. [REDACTED] completed a Robert Wood Johnson Core Curriculum through the Robert Wood Johnson Clinical Scholars Program here at UNC-Chapel Hill, and in 2003, he completed a Primary Care Research Fellowship at the UNC-Chapel Hill Cecil G. Sheps Center for Health Services Research. During this time he also worked as a physician at Chatham Hospital. In 2003, he became a Clinical Assistant Professor in the Department of Medicine and was promoted to Clinical Associate Professor in 2008. In 2010, he obtained a secondary appointment as a Clinical Associate Professor in the Eshelman School of Pharmacy.

During his time here at UNC-Chapel Hill, Dr. [REDACTED] has established himself as one of the institution's premier clinician-educators. In 2004, he was appointed as the Associate Program Director for our Internal Medicine Residency. Up to that point, our residency program had been largely inpatient based and he was asked to focus on the ambulatory aspects of residency. Dr. [REDACTED] was responsible for developing a successful ambulatory curriculum. Specifically, he developed several outpatient ambulatory curricula for the residents, he was the driving force for adding an Ambulatory Chief Resident dedicated to ambulatory education, and he revamped the existing Continuity and Urgent Care curricula.

Dr. [REDACTED] participates in day-to-day educational activities for the Department of Medicine including presentations to residents and medical students at morning report, noon conferences, evidence-based medicine conferences, the Wednesday ambulatory conference division meetings, and grand rounds. He has closely mentored the first five Ambulatory Chief Residents and he directly supervises the residents weekly in their continuity clinics and the Same Day Care Clinic where he delivers didactic educational sessions. He has also advised and mentored about a dozen residents who have shared authorship on scholarly abstracts at regional and national meetings. Also, for the Eshelman School of Pharmacy, Dr. [REDACTED] supervises Pharm.D students and residents.

As documented in his curriculum vitae, Dr. [REDACTED] has delivered continuing education lectures in a variety of venues throughout the state of North Carolina and beyond. Topics of these lectures include chronic pain, abuse of prescription drugs, and research related to Graduate Medical Education. His presentations are clear, concise and provide a unique blend of scientific medicine, patient narrative, and the humanities.

On a national level, Dr. [REDACTED] has achieved national stature as a clinician educator. From 2008 to 2014, he served on the Association of Program Directors in Internal Medicine (APDIM) Program Planning Committee. The APDIM is a 4000 member professional organization dedicated to the education of internists and faculty development of clinician educators. During the last two years he served as a mentor to junior committee members. In 2013, he was elected to a three-year term on the APDIM Council which will provide him with the ability to influence broader policy related to training of internal medicine residents nationally. In addition, Dr. [REDACTED] is active in the southern chapter of the Society of General Internal Medicine serving on their program planning committee, executing a precourse, and organizing mentoring activities at their annual meeting.

In recognition of his efforts as a clinician, educator, and national educational leader, Dr. [REDACTED] was named the inaugural recipient of the Charles Sanders Clinician Scholar Award in 2012. This award is given to a clinician educator for outstanding beside contributions to clinical care and education. In 2010, Dr. [REDACTED] was elected as a Fellow in the UNC Academy of Educators.

Dr. [REDACTED] is an outstanding clinician who has served UNC exceptionally well by providing comprehensive care to patients in the Internal Medicine faculty practice. He has been a key contributor to the transformation of our practice into a multidisciplinary, high quality medical home. He has developed innovations in transitions of care, including the development of a home visit program and has supported the development of our mid-level providers. In addition, he has been recognized as one of “America’s Best Doctors” annually since 2009.

In addition to his teaching and clinical responsibilities, Dr. [REDACTED] is an active contributor and collaborator to the research mission of the Division. One area of his research for which he is nationally recognized is chronic pain and substance misuse in primary care settings. He collaborated with Dr. [REDACTED] in the Eshelman School of Pharmacy to develop a primary care disease management program for chronic pain. Their program is cited as a rational and safe model for managing patients with chronic pain receiving opioid analgesics. From this research initiative, Dr. [REDACTED] played a key role in developing the North Carolina Controlled Substances Reporting System which was created to combat the public health epidemic of opioid abuse. He was the only physician on the task force working with lawyers, pharmacists, politicians, public health officials, and policy makers at the state level to draft the legislation necessary to develop this monitoring system.

Dr. [REDACTED] is also extremely active in professional service activities here at UNC, statewide, and nationally. He currently serves on the Department of Medicine Education Committee, the General Medicine Education Leadership Committee, and the UNC Department of Medicine Residency Program Clinical Competence Committee. He also serves as a Physician Representative for the Orange County Board of Health, he is a member of the NC Medicaid and Access Care Chronic Pain Practice Improvement Work Group, and as mentioned above, he serves on the North Carolina Controlled Substances Reporting System Advisory Committee. Nationally, he is currently a member of the Society of General Internal Medicine and the Association of Program Directors in Internal Medicine. He is a Fellow of the American College of Physicians and serves on the Program Planning Committee for the Southern Society of General Internal Medicine.

Dr. Michael Pignone has enthusiastically recommended Dr. [REDACTED] promotion based on excellence in education and we are completely supportive of this recommendation. In the letter of recommendation from Dr. [REDACTED], Associate Chair for Education in the Department of Medicine, he states, “In summary, [REDACTED] has demonstrated both local and national expertise as a clinician educator. I cannot think of anyone more deserving of promotion to Clinical Professor of Medicine. I am pleased to give him my strongest endorsement.” Dr. [REDACTED], Professor of Medicine at Duke University states, “I do believe he has exceeded all of the criteria for promotion to clinical professor. He is a thought leader in education, an innovator, and a remarkable mentor.” Dr. [REDACTED], Professor of Medicine at the Medical University of South Carolina states, “Thus his consistent scholarly work, exceptional education leadership, and service to community seem to more than justify the promotion to Clinical Professor of Medicine at the University of North Carolina at Chapel Hill

School of Medicine. I enthusiastically recommend him for promotion to the rank of Clinical Professor of Medicine to recognize his career accomplishments.”

Dr. [REDACTED] serves as a role model for a highly productive, highly valued faculty member. We feel that he is an outstanding candidate for promotion and hope that the Promotions Committee will agree.

Sincerely,

Marschall S. Runge, M.D., Ph.D.  
Professor and Chair  
Department of Medicine

Denise H. Rhoney, Pharm.D.  
Professor and Chair  
Division of Practice Advancement & Cl. Ed.

APPROVED: \_\_\_\_\_  
Robert A. Blouin, Pharm.D.  
Dean, Eshelman School of Pharmacy

APPROVED: \_\_\_\_\_  
William L. Roper, M.D., M.P.H.  
Dean, School of Medicine  
Vice Chancellor for Medical Affairs  
CEO, UNC Health Care System