



Associate Professor, Clinical Expertise and Innovation (CEI)

This Area of Excellence (AoE) is appropriate when a specific area of clinical expertise provides the unifying theme for the candidate’s scholarship, academic reputation, and impact. The individual is considered a regional to national leader in a clinical field and has a reputation as an innovator in approaches to diagnosis, treatment, or prevention of disease, applications of technology to clinical care, and/or in developing models of care delivery. Candidates must produce original, peer-reviewed research investigations demonstrating the impact of clinical innovations, with an emphasis on senior-author publications. Reviews, chapters, clinical practice guidelines, and protocols for patient care can also support the evidence of clinical expertise.

Compared to Assistant Professor, there is an increased expectation for high-quality, broadly impactful research that advances clinical science, independence as a thought leader, the dissemination of clinical innovations beyond the local level, and recognition as a clinical expert and innovator beyond the local level.

Policies about eligibility for particular AoEs (e.g., other health professionals, Quad faculty) can be found in [Section 6.1](#) of the Faculty of Medicine Handbook.

Major Domains of Evaluation:

Trajectory	
Recency	Strong, sustained academic productivity since Assistant Professor promotion, including within the past 3 years
Independence	Clear contributions independent from mentors
Cohesion	Increasing alignment across scholarship, reputation, and impact
Scholarship	
Nature of Scholarship	<ul style="list-style-type: none"> Substantial body of peer-reviewed publications aligned with area of clinical focus Evidence of sustained major authorship, typically senior/co-senior authorship Emphasis on research investigations; other peer-reviewed publications and non-peer-reviewed publications may also be included
Reputation & Recognition	
Reputation	Regional to national recognition as an independent clinical expert & innovator
Clinical Innovations	Innovations with regional to national dissemination, impact, or uptake
Service and Leadership	Service in regional/national professional societies, often with leadership roles on committees

Editorial and Peer Review	Editorial board membership or related roles (e.g., Associate Editor) and/or grant review activities
Presentations	Regional to national presentations to academic audiences related to area of clinical focus

In addition to the metrics noted above, candidates will also be evaluated on their **contributions to teaching and mentoring**:

Teaching	
Nature of Teaching	<ul style="list-style-type: none"> • Typically engaged in clinical supervision and mentorship • Commensurate with independence, influence, and expertise in the field • Evidence of teaching and mentoring impact on Harvard learners

Key terms:

- **Academic productivity** includes scholarship, committee service, invited presentations, and involvement in academic organizations.
- **Peer review** is the critical, independent, and determinative assessment of manuscripts and grants by multiple external experts typically not part of the editorial staff.
- **Research investigations** are full-length, peer-reviewed manuscripts that present new data and analysis and include methods, results, and discussion sections. Includes systematic reviews and meta-analyses.
- **Other peer-reviewed publications** are defined as publications that are not considered research but undergo a peer review process. Includes peer-reviewed review articles (including narrative reviews, scoping reviews, or other forms of literature reviews), peer-reviewed clinical guidelines or consensus statements, methods reports, UpToDate entries, peer-reviewed case reports or case series, clinical pathologic conference reports, peer-reviewed educational materials (e.g., MedEdPORTAL), peer-reviewed editorials, descriptions of new models, theories or programs without systematic evaluation, or full-length proceedings of meetings which have undergone a formal peer-review process.
- **Major authorship** is typically signified by first/co-first authors or senior/co-senior author positions, though norms may vary across disciplines. In many biomedical fields, corresponding/co-corresponding authorship may be analogous to major authorship. While major authorship is prioritized, candidates may highlight publications in another authorship position, or as member of an unnamed authorship group, for which the candidate has made documented, unique, intellectual contributions. Contributions to team science in the absence of other evidence of intellectual leadership will typically be insufficient to warrant promotion.
- **Clinical innovations** are defined as novel models, interventions, and protocols that have a significant impact on clinical care. Examples include new approaches to diagnosis, treatment or prevention of disease; development and application of technology to clinical care; quality improvement initiatives; development of models of care delivery; programmatic innovations; and generation of clinical guidelines.
- **Teaching of Harvard learners** is defined in [Section 4.2.2](#) of the faculty handbook.

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