

This approved CV Template for the School of Medicine is REQUIRED by the Advisory Board of the Medical Faculty (ABMF) and Board of Trustees for all candidates seeking promotion or new appointment. **All** categories must be included in your CV, whether you have information for that section or not (respond 'NONE' where appropriate).

[Click here](#) to download the **current required CV Format Instructions**, which align with this Template, to help guide your preparation of the CV.

CURRICULUM VITAE
The Johns Hopkins University School of Medicine

(Signature) _____
(Typed Name)

(Date of this version)

DEMOGRAPHIC AND PERSONAL INFORMATION

Current Appointments *(in chronological order, earliest first by start date under each subcategory)*

University
Hospital
Other

Personal Data

Business Address
Tel
Fax (optional)
E-mail

Education and Training *(in chronological order, earliest first by start date under each subcategory)*

Year Degree/Certificate, Discipline, Institution/City, Notes
Undergraduate
Doctoral/graduate
Postdoctoral (Internship, residency, fellowship, etc.). *Indicate primary mentors for scholarly activities where applicable*

Professional Experience *(in chronological order, earliest first)*

Date Position, Institution/City

PUBLICATIONS: *(in chronological order, earliest first, under each subcategory) Include only those published or in press; do **not** include submitted, in preparation, or planned.*

Please show all authors for all articles, chapters, etc.

*Please **bold your name** as an author in each reference*

Please indicate mentees by underlining their names

Please number all articles consecutively, starting from 1[one] under each subcategory

Please use standard reference citation format: Author F/MI, Second author F/MI, Third author F/MI, (etc.). Title. Journal. Year; Volume (Number): page-page. [Delete extra periods or commas between initials.]

*Ex: 1. Jones BB, *Smith JB, Friend LM. Title of article. J Am Soc. 2015;14(1):16-42; *corresponding author; [SI/QI].*

Please specify with a note after the publication your role(s) in clinical trial articles of 10 authors or more, if not first or senior author, such as data analysis, manuscript writing, obtaining funding, steering committee etc.

Please specify with a note after the publication joint authorship or corresponding authorship, if not obvious first or senior author

Please specify with [SI/QI] after the entry if the article can also be considered a system innovation/quality improvement publication

The following was updated on 8/16/22 to align with current CV Format Instructions:

Original Research [OR] *[including Research Letters and Brief Reports; multi-authored clinical trials, experimental studies (including in vivo, in vitro, in silico studies), educational research, systematic reviews (e.g. Cochrane, IOM), meta-analyses]. Please indicate your role in multi-authored articles, if not first or senior author.*

- Only **PEER-REVIEWED, PUBMED-INDEXED RESEARCH** publications are permitted in this section.
- Place other publication types in their appropriate sections, such as Case Reports, Review Articles, Editorials, etc.
- Since the committee may review each of the publications in PubMed, it is very important to ensure the accuracy of this section and of your CV, overall.

Review Articles [RA]

Case Reports [CR]

Book Chapters, Monographs [BC]

Books, Textbooks [BK]

Editorials [ED]

Guidelines/Protocols, Consensus Statement, Expert Opinion, Consortium Articles [GL]

Letters, Correspondence [LT]

Other Publications: Suggested Additional Subcategory Titles: *May adjust as necessary for your specialty*

Clinical Stories or Memoirs [CS]

Creative Writing [CW]

Methods and Techniques, “How I Do It” articles [MT]

Opinions, Perspectives, Political Commentary, Advocacy, Essays [OP]

Original Research, other (not peer reviewed and/or not indexed) [RO] [Note: For instance, a research contribution that is solicited by an open access journal that does not send the manuscript out to experts in the field for adjudication]

Proceedings Reports [PR]

Published Curricula, Learner Assessment Tools, Educational Evaluations, Assessment/Evaluation Instruments [PC]

White Papers [WP]

Media Releases or Interviews [MR] (*show by: Date Details*)

Other Media [OM] (Videos, Websites, Blogs, Social Media, etc.) (*show by: Date Details*)

FUNDING (*in chronological order, earliest first by start date under each subcategory*)

For each grant or contract please provide the following information in this format:

Date	Title
	Identification number
	Sponsor
	Total direct cost
	Principal Investigator [<i>if not you</i>]
	Your role, your percent effort; Notes

EXTRAMURAL Funding (*Show as current, pending, previous under each subcategory and follow format above.*)

Research Extramural Funding - Grants or contracts obtained to support a research initiative

Educational Extramural Funding – Grants or contracts obtained to support an educational initiative, incl. training grants

Clinical Extramural Funding - Grants or contracts obtained to support a clinical initiative

System Innovation or Quality Improvement Extramural Funding - Grants or contracts obtained to support an initiative

Other Extramural Funding, including philanthropy

INTRAMURAL Funding (*Show as current, pending, previous under each subcategory and follow format above.*)

Research Intramural Funding

Educational Intramural Funding

Clinical Intramural Funding

System Innovation or Quality Improvement Intramural Funding

Other Intramural Funding

CLINICAL ACTIVITIES

Clinical Focus (*Provide up to 100 word narrative, bulleted accomplishments, or key words that express your clinical focus. This would be particularly helpful for a “clinician of distinction”*)

Certification

Medical, other state/government licensure

Date State info, identification #, any explanatory notes

Boards, other specialty certification

Date Specialty name, identification #, any explanatory notes

Clinical (Service) Responsibilities

Date Role/time commitment, specialty

Clinical Productivity *(such as the annual number of patients evaluated or treated, procedures performed, tertiary referrals, wRVUs, etc.)*

Clinical Draw from outside local/regional area *(reflecting national/international reputation)*

Date X of Y patients came from out-of-state: list states or countries

Membership in or examiner for specialty board

Date Role; name of specialty board

Clinical Program Building / Leadership

Date Role; name of clinical program; impact of program outside of JHMI/Region

Clinical Demonstration Activities to external audience, on or off campus

Date Clinical technique/procedure/program, observing party, venue

Development of nationally/internationally recognized clinical standard of care *(may not be published in peer-reviewed journals)*

Date

EDUCATIONAL ACTIVITIES *(in chronological order, earliest first by start date under each subcategory)*

Educational Focus *(Provide up to 100 word narrative, bulleted accomplishments, or key words that express your educational focus)*

Teaching *(Include date, role, learner level, course title, venue; please separate JHMI/Regional from National and International activities)*

Classroom instruction

Date Role, learner level, course title, venue; any explanatory notes

JHMI/Regional

National

International

Clinical instruction

Date Role, learner level, course title, venue; any explanatory notes

JHMI/Regional

National

International

CME instruction

Date Role, learner level, course title, venue; any explanatory notes

JHMI/Regional

National

International

Workshops /seminars

Date Role, learner level, course title, venue; notes

JHMI/Regional

National

International

Mentoring *(Please list only mentees who have received substantive and sustained mentoring in clinical, research, and/or educational activities.)*

Pre-doctoral Advisees /Mentees

Date Mentee name, degree, present position; awards/grants/degrees received under your direction, indicate shared publications with mentees (adhere to the current CV Format Instructions)

Post-doctoral Advisees /Mentees

Date Mentee name, degree, present position; awards/grants/ degrees received under your direction, indicate shared publications with mentees (adhere to the current CV Format Instructions)

Thesis committees

Date Mentee name, thesis title (if available), your role, any explanatory notes

Educational Program Building / Leadership

Date Role, name of educational program or curriculum, any explanatory notes

Educational Demonstration Activities to external audiences, on or off campus

Date Educational technique or program, observing party, venue

RESEARCH ACTIVITIES *(in chronological order, earliest first by start date under each subcategory)*

Research Focus *(Provide up to 100 word narrative, bulleted accomplishments, or key words that express your research focus; or include NIH Biosketch section A here)*

Research Program Building / Leadership

Date Role, name of research / basic science program, notes

Research Demonstration Activities to external audience, on or off campus

Date Research technique, observing party, venue

Inventions, Patents, Copyrights (note pending or date awarded)

Date Filed Role, title, any explanatory notes, date awarded

Technology Transfer Activities (e.g. Company Start-ups)

Date Role, title, notes

SYSTEM INNOVATION AND QUALITY IMPROVEMENT ACTIVITIES *(in chronological order, earliest first by start date under each subcategory. Indicate None or Not Applicable if no information is available for this section and delete the subcategories. Do not duplicate activities already shown above.)*

System Innovation Focus *(Provide up to 100 word narrative, bulleted accomplishments, or key words that express your SI/QI focus)*

System Innovation and Quality Improvement efforts within JHMI:

Date Role, name of site intervention, venue (s), and results (e.g., clinical outcomes, process measures, financial)

System Innovation and Quality Improvement efforts outside of JHMI:

Date Role, name of site intervention, venue(s) and results (e.g., clinical outcomes, process measures, financial)

System Innovation and Quality Improvement Program Building/Leadership:

Date Role, name of Innovation and QI program

ORGANIZATIONAL ACTIVITIES *(in chronological order, earliest first by start date under each subcategory)*

Institutional Administrative Appointments

Date Role, Committees, any explanatory notes

Editorial Activities

Editorial Board appointments

Date Role, Editorial Board name

Journal peer review activities

Date *(peer review activity began)* Journal full name *(do not abbreviate here)*

Other peer review activities [non medico-legal]

Date Role, sponsor/group

Advisory Committees, Review Groups/Study Sections

Date Role, sponsor/organization/group

Professional Societies *(when you include additional duties for the society, move "Member" to its own line; see examples)*

Date Society

Date Role, committee

Conference Organizer *(separate into JHMI/Regional - National - International activities)*

Date Sponsor/organization/group

JHMI/Regional

National

International

Session Chair *(separate into JHMI/Regional – National - International activities)*

Date Sponsor/organization/group

JHMI/Regional

National

International

Consultantships

Date Organization/agency, notes

RECOGNITION *(in chronological order, earliest first by start date under each subcategory)*

Awards, Honors

Date Title, description, sponsor, any explanatory notes

Invited Talks (such as grand rounds, keynote addresses, visiting professorships. If you have several visiting professorships, feel free to separate them into their own subcategory. *Do not duplicate entries already shown above. It is suggested that an invited talk sponsored by Johns Hopkins, regardless of the location, be shown under the JHMI/Regional heading*)

Date Title, sponsor, venue, any explanatory notes

JHMI/Regional

National

International

Visiting Professorships

OTHER PROFESSIONAL ACCOMPLISHMENTS *(Optional)*

Posters (optional) (date, title sponsor, location, notes)

Oral/Podium Presentations (optional) [abstracts that were both presented orally and published] (date, title, sponsor, location, publication notes; who gave the presentation if not you)

Military Service (optional)

Community Services (optional)

Humanitarian Activities (optional)

Philanthropic Activities (optional)

Other (optional)