[First Name] [Last Name], [Degrees]

Date Prepared: __/_/___

Work address City, State, ZIP code Work phone number (desk) Work phone number (cell) Work email: email@address.com

Home address City, State, ZIP code Preferred home phone number Secondary email: <u>email@address.com</u>

Guidelines for filling out the template:

- Please delete any section or parts of sections that do not apply to your experience.
- Please input information related to your experience in **one section only**. Do not duplicate entries. If you have any questions about where to input your experience or accomplishments, please contact the Office of Faculty Affairs.
- Delete all instructions in the final version of your CV. Retain only the category headers.
- All entries should be in chronological order, beginning with the oldest experience in the category.
- Each section has an introduction explaining the types of experience requested within that section.
- The examples given under some headings are provided in italics to illustrate formatting as well as the types of experience or information requested of you in that section; your own experience may vary from the specific examples given.
- Experiences in domestic locations (United States) only require city and state. For international experiences, please list city and country.
 - Please use the following format for author or developer references:
 - o Hoose JL
 - o Aabat RH, Boone JS, Rafael CR

Current Position(s)

Please share information about all your current positions. Position title, Institution/Organization, City, State/Country

Education and Training

Please list in chronological order all degree-granting institutions (associate degree or its equivalent and higher) attended for one year or more. We are interested in seeing a complete educational record including institutions attended where a degree was not granted (for example, transferring from one program to another). Please include the year the degree was earned or, in the case of transfer or incompletion, the last year of attendance.

Degrees Awarded

BS/BA, Major (include honors), Institution, City, State/County	Year (issued)
MA/MS/MPH, Institution, Program or School, City, State/County	Year
MD, Institution, Program or School, City, State/Country	Year
PhD, (field), Institution, Program or School, City, State/Country	Year
Thesis title:	
Advisor:	

Other Coursework

Type of coursework or field, Institution, College/School/Department, City, State/County

Years

Years



Postdoctoral Training

List internship, residency, and fellowship in the following order: Internship, Institution, City, State/Country Residency, Institution, City, State/Country Fellowship, Institution, City, State/Country Postdoctoral fellow/scholar, Department, University/Institution, City, State/Country Supervisor:	Years Years Years Years
Certificates Name of certification/certificate, Institution/Organization, City, State/Country Year	(issued)
Academic Activities: Appointments and Educational Roles Please list in chronological order. Indicate if the position was tenured.	
Academic Appointments If relevant, list your current position in this section. Title, Department, Institution, City, State/Country	Years
Example: Assistant Professor Department, Institution, City, State/Country	Years
Example: Professor, John Jay Professor of Biomedical Science, tenured Department, Institution, City, State/Country	Years
Academic Committee Service Please list in chronological order academic committee appointments. Role, Committee Name, Institution/Organization, City, State/Country Optional: One-sentence description of activities if not apparent based on the information above.	Years
Other Academic Service Experience Please list in chronological order academic service not covered above such as Admissions File Reviewer. Role, Type of service, Institution/Organization, City, State/Country Optional: One-sentence description of activities if not apparent based on the information above.	Years
Academic Leadership and Administration Please list in chronological order academic leadership activities or administrative roles (e.g., serving as ar academic director or dean, managing an academic event, or directing a course). Role/Title, Institution/Organization, City, State/Country Years	١
Example: Director, Program, Institution, City, State/Country Example: Speaker Series Organizer, Name of Event, City, State/Country	Years Years
Teaching in Programs and Courses Please list in chronological order all courses taught. Role, Course Name, Session Title (if applicable), Institution/Organization, City, State/Country Approximate number of student contact hours, approximate number of students Optional: One-sentence description of activities if not apparent based on the information above.	Years
Clinical Teaching and Supervision Please list in chronological order. Role, Name of Practice, Hours per Year City, State/Country Optional: One-sentence description of activities if not apparent based on the information above.	Years



Advising and Mentoring

Please list in chronological order within each section. USC Clinic Rotation – Clinic Supervisor example

Students Name, Institution/Organization (where mentored), Your Role Mentee's Current Position	Years
Optional: Any additional information such as awards or other accomplishments.	
Residents Name, Institution/Organization (where mentored), Your Role	Years
Mentee's Current Position Optional: Any additional information such as awards or other accomplishments.	
Postdoctoral Trainees Name, Institution/Organization (where mentored), Your Role Mentee's Current Position Optional: Any additional information such as awards or other accomplishments.	Years
Faculty Name, Institution/Organization (where mentored), Your Role Mentee's Current Position Optional: Any additional information such as awards or other accomplishments.	Years
Teaching of Peers (e.g., CME and other continuing education courses) Role, Name of Course or Activity, Institution/Organization, City, State/Country Optional: Description of activities	Years
Other Educational Activities Please list in chronological order any workshops, demonstrations, or other relevant educational activities of captured above. Please do not include invited single presentations or visiting professorships, which will be captured in the sections below. Role, Course/Activity, Institution/Organization, City, State/Country	ot Years
Optional: One-sentence description of activities if not apparent based on the information above.	
Clinical Activities In chronological order, please provide details about your certifications, licenses, clinical practice, clinical leadership, and clinical committee work. Clinical activities related to teaching should be listed in the Acader Educational Activities section.	nic
Licensure and Board Certification State Medical Licenses (both active and inactive; do not include #s) Specialty Certification, Specialty Board Subspecialty Certification, Subspecialty Board	Year Year Year
Clinical Practice	

Please do not include clinical teaching captured above; may repeat current position listed above if clinical. Name of practice, City, State/Country Type of Activity and Frequency

. . •• ~

Clinical Committee Service Role, Committee Name, Institution/Organization, City, State/Country Optional: One-sentence description of activities if not apparent based on the information above.	Years
Clinical Leadership and Administration Role/Title, Activity/Initiative (if applicable), Institution/Organization, City, State/Country Optional: One-sentence description of activities if not apparent based on information above.	Years
Other Work Experience Please list in chronological order significant paid work experience after obtaining your bachelor's de Position Title, Institution/Organization, City, State/Country Example: Coordinator, Public Program Office, Museum of Science, Boston, MA	e <mark>gree.</mark> Years 1996-1999
Professional Development Activities Please list in chronological order any formal activities, courses, workshops, programming, or training your professional development, such as teaching, research, workplace wellness, professional skills, training. Do not include clinical CME programs. Program/Course, Institution/Organization, City, State/Country	
Professional Honors and Awards Please list in chronological order. Name of Honor or Award, Organization Example: Fellow, American College of Obstetrics Optional: One sentence description of honor or award if not apparent based on the information abo	Year 2020 ove
Community Activities Please list in chronological order all activities related to health education, health service, and health dissemination intended for or completed in public and community settings (e.g., volunteer medical a clinic work, membership in community health task forces or committees, school visits, mentorship or members, public or community talks, and participation in or organization of community wellness even	activities or f community
Volunteer Healthcare Provision Please include healthcare that you provided on a volunteer basis. Organization, City, State/Country Responsibilities	Years
Community-Based Presentations Please list in chronological order health, healthcare, and scientific presentations invited by and/or in community audiences. Presenter(s). Event. Title of Talk. Intended audience. City, State/Country (Date) Example: Reis KT, Ogawe B. San Bernardino Family Health Fair. Affordable ways to eat healthy for Intended audience: San Bernardino Glossway and Bawly Clinic patients and their families. San Bern (October 12, 2019).	r heart health.
Community-Based Mentorship Please list in chronological order health, healthcare, and scientific mentorship activities.	Veere

Organization, Number of Mentees, City, State/Country

Type and description of mentorship activities

Community Leadership and Administration

Please list in chronological order any community leadership activities, such as serving on boards, organizing community health-related or science events, and leading health initiatives in community settings. Role/Title, Organization, City, State/Country Optional: One-sentence description of activities if not apparent based on the information above

Years

Years



Community Health Committee Services Please list in chronological order work completed as part of a community health committee such as work or local health initiative task force or local public health initiatives.	na
Role, Committee, Institution, City, State/Country Optional: One-sentence description of activities if not apparent based on the information above.	Years
Community Recognition Please list in chronological order any forms of recognition, e.g., awards, received from community/local ground Recognition for Medical, Science, or Health Contributions Award or Recognition, Organization Optional: One-sentence description of activities if not apparent based on the information above.	<mark>ups.</mark> Year
Other Community Recognition Award or Recognition, Organization Optional: One-sentence description of activities if not apparent based on the information above.	Year
Other Community Activities Please list in chronological order additional non-medical or scientific community activities, including volunted (e.g., directing a school play), that you would like to add.	
Role, Organization, City, State/Country Optional: One-sentence description of activities if not apparent based on the information above.	Years
Grant Activities	
Grant Funding Please list in chronological order within each section.	
Current Agency, Grant Number, Principal Investigator Name (if other than you) Title Description (one sentence) Total Direct Costs Role % effort	Years
Completed Agency, Grant Number, Principal Investigator Name (if other than you) Title Description (one sentence) Total Direct Costs Role % effort	Years
Pending Agency, Grant Number, Principal Investigator Name (if other than you) Title Description (one sentence) Total Direct Costs Role: % effort	Years

SCHOOL OF MEDICINE **Training Grants/Mentored Trainee Grants** Please list in chronological order. Name of grant, Role Years **Current Unfunded Projects** Please list any current projects that have not received funding. Working Title Brief description of the project Years **Grant Review Activities** Please list in chronological order. Review activity, Organization Years **Academic Presentations** Please list in chronological order (most recent last) any presentations you gave in which you were invited to speak. If you were an author but not the speaker, include in "Other Academic Presentations" below. Please number each entry as shown and bold your name. **Invited Presentations** Local 1. Author(s), Institution or Meeting, City, State/Country, Title of presentation Date Regional 1. Author(s), Institution or Meeting, City, State/Country, Title of presentation Date National 1. Author(s), Institution or Meeting, City, State/Country, Title of presentation Date

International

KAISER PERMANENTE BERNARD J. TYSON

1. Author(s), Institution or Meeting, City, State/Country, Title of presentation

Other Academic Presentations, Posters, and Abstracts

Please list in chronological order. Include presentations of your work for which you were co-author but did not deliver the talk, poster, etc. Please organize presentations and posters by local, regional, national, or international conference or meeting as shown. (Examples shown in the "Posters" section below.)

Please number each entry and bold your name. Identify the geographic scope and use the following citation formats. If a published work, use format 1; if not a published work, use format 2.

Local

- 1. Format for published work: Author(s). Institution or Meeting, City, State/Country, Title [Abstract Number, if relevant]. Journal Title. Year; Volume(issue): page number(s). [Please note if presenter.]
- Format for non-published work Author(s). Institution or Meeting, City, State/Country. Paper or poster presented at: Name of conference: number of conference (if applicable); year; location. [Please note if presenter.]

Regional

- 1. Format for published work: Author(s). Institution or Meeting, City, State/Country, Title [Abstract Number, if relevant]. Journal Title. Year; Volume(issue): page number(s). [Please note if presenter.]
- Format for non-published work Author(s). Institution or Meeting, City, State/Country. Paper or poster presented at: Name of conference: number of conference (if applicable); year; location. [Please note if presenter.]

National

Date

- 1. Format for published work: Author(s). Institution or Meeting, City, State/Country, Title [Abstract Number, if relevant]. Journal Title. Year; Volume(issue): page number(s). [Please note if presenter.]
- Format for non-published work Author(s). Institution or Meeting, City, State/Country. Paper or poster presented at: Name of conference: number of conference (if applicable); year; location. [Please note if presenter.]

International

- 1. Format for published work: Author(s). Institution or Meeting, City, State/Country, Title [Abstract Number, if relevant]. Journal Title. Year; Volume(issue): page number(s). [Please note if presenter.]
- Format for non-published work Author(s). Institution or Meeting, City, State/Country. Paper or poster presented at: Name of conference: number of conference (if applicable); year; location. [Please note if presenter.]

Please use the following citation formats:

Presentations

Katz LT. Comparing two modes of information delivery in clinical settings. Paper presented at: Learn Serve Lead 2019: The AAMC Annual Meeting; 2019 Nov 8-12; Phoenix, AZ. [Presenter]

Posters

Kwan K, **Oster**, **NE**, Owo, Z. Advances in understanding the brain-gut axis in psychopharmaceutical intervention effectiveness in the treatment of Parkinson's disease. Poster session presented at: Understanding the Role of the Gut in Degenerative Neurological Disease: 16th Annual Conference of the American Academy of Clinical Neuropsychology; 2017 Jun 4-17; Chicago, IL. [Presenter, Poster]

Abstracts

Huger I, **Adopolis GE**. Teaching active listening in clinical practice. [ARVO abstract 2090]. Journal of Medical Education 2011:3(89):56. [Presenter, Abstract]

Abstracts published in journals that have abstract sections

DA, Oster DF. Skin graft viability from stem cells grown in comparative culture media. Dermatology. 2005:1(77):22.

Professional Association Activities

Please list in chronological order within each section.

Professional Memberships

Society Name, Role Years
Professional Association Leadership Positions or Committee Service Society Name, Committee (appointed, elected), Role Years
Editorial Responsibilities
Editorial Board Service
Journal or Monograph Name, Role
Single Issue or Series
Journal Review Activities
Journal Name, number of articles reviewed Years

Scholarship and Research: Peer Reviewed

Please list in chronological order within each section listed below. Forthcoming research should be included in this section with an indication that the article is forthcoming. Please number each entry.



Published and Forthcoming Articles – Print Journals

Please bold your name and only include published or forthcoming articles in journals that publish print versions of their titles.

Electronic publications ahead of print should be included here and indicated by [e-publication ahead of print] with a hyperlink to electronic version; once the article is published, please remove and add the print citation.

We welcome the addition of an optional sentence sharing the impact your work has had or how your work speaks to integrating approaches/fields/methods/areas in medicine or how your work contributes to innovation.

- Author(s). Title. Journal title. Year Month; volume(issue): pp-pp. [Type of article e.g., cover article, editorial, about article, book review, recognition] Optional statement of impact
- 2. Author(s). Title. Journal title. Year Month; volume(issue): pp-pp. [Forthcoming] Optional statement of impact
- 3. Author(s). Title. Journal title. Year Link to article [e-publication ahead of print] Optional statement of impact
- 4. Author(s). Title. Journal title. Year Link to article [Book review] Optional statement of impact

Examples:

Scholarship and Research Articles

Lee QX, Haahn DR. Large intestinal biome composition as a predictor for depression. Gut. 2019 Sept;45(3): 234-255

Contributed to new research inquiries seeking to more precisely understand the efficacy of using targeted probiotic strains in treating depressive symptoms.

Book Reviews

Akosy B. Just in time. Science. 2007 Sept;40(2): 120-121 p. [Book review]

Published and Forthcoming Articles – Online Journals

Please bold your name and only include published or forthcoming titles that will only appear in an online format.

- 1. Author(s). Title. Journal title. Year Month; volume(issue): pp-pp (if applicable) Link to article Optional statement of impact
- 2. Author(s). Title. Journal title. Year Month; volume(issue). [Forthcoming] Optional statement of impact
- 3. Author(s). Title. Journal title. Year Link to article [Forthcoming book review] Optional statement of impact

Scholarship and Research - Other

Print (including books, book chapters, if peer reviewed)

Please list in chronological order any peer reviewed print publications not captured in the above sections. The examples below are not meant to be comprehensive and are provided as examples. Please bold your name and only include published or forthcoming articles in journals that publish print versions of their titles.

Please bold your name and only include published or forthcoming titles.

We welcome the addition of an optional sentence sharing the impact your work has had or how your work speaks to integrating approaches/fields/methods/areas in medicine or how your work contributes to innovation.

- 1. Author(s). Title. Location: Press (if applicable); Year. [Book] Optional statement of impact
- 2. Author(s), editor(s). Title. Location: Press (if applicable); Year. [Book editor]

Optional statement of impact

3. Author(s). Book title. Chapter Title. Location: Press (if applicable); Year: page range. [Book chapter] Optional statement of impact

Online (including books, book chapters, if peer reviewed)

Please bold your name and only include published or forthcoming titles for publications that will only appear online.

- 1. Author(s). Title. Location: Press (if applicable); Year. Link to title [Book] [Optional statement of impact]
- 2. Author(s), editor(s). Title. Location: Press (if applicable); Year. Link to title [Book editor] [Optional statement of impact]
- Author(s). Book title. Location: Press (if applicable); Year. Chapter Title. Link to chapter (or book title if not able to link directly to chapter) [Book chapter] [Optional statement of impact]

Examples:

Books

Author(s). Title. Location: Press; Year. [Book]

Example:

Signh PF, Ambrose K. An introduction to radiology. New York: Oxford University Press; 2017. [Book]

Books edited

Author(s), editor(s). Title. Location: Press; Year. Number of pages. [Book editor]

Example:

Ricardo GJ, editor. Fighting infectious disease in the lab. Chicago: University of Chicago Press; 2012. [Book]

Book chapters

Author(s). Book title. Location: Press; Year. Chapter Title; pp-pp. [Book chapter] Example:

Riolo ME. Simulation in medical education. 2nd ed. Amsterdam (Netherlands): Elsevier Academic Press; 2019. Chapter 8, Virtual anatomy, teaching the body using virtual reality technology; 120-155 p. [Book chapter]

Scholarship and Research – Non-Peer-Reviewed

Published and Forthcoming Articles – Print Journals

Please bold your name and only include published or forthcoming titles.

- 1. Author(s). Title. Journal title. Year Month; volume(issue): pp-pp. Optional statement of impact
- 2. Author(s). Title. Journal title. Year Month; volume(issue): pp-pp. [Forthcoming] Optional statement of impact
- 3. Author(s). Title. Journal title. Year Link to article [e-publication ahead of print] Optional statement of impact
- 4. Author(s). Title. Journal title. Year Link to article [Book review]

Examples:

Scholarship and Research Articles

Lee QX, Haahn DR. Large intestinal biome composition as a predictor for depression. Gut. 2019 Sept;45(3): 234-255

Book Reviews

Akosy B. Just in time. Science. 2007 Sept;40(2): 120-121 p. [Book review]

Published and Forthcoming Articles – Online Journals

Please bold your name and only include published or forthcoming titles.

1. Author(s). Title. Journal title. Year Month; volume(issue): pp-pp (if applicable) Link to article

Research and Scholarly Publications - Other

Print (including books, book chapters)

Please bold your name and only include published or forthcoming titles.

- 1. Author(s). Title. Location: Press (if applicable); Year. Number of pages. [Book] Optional statement of impact
- 2. Author(s), editor(s). Title. Location: Press (if applicable); Year. [Book editor] Optional statement of impact
- 3. Author(s). Book title. Location: Press (if applicable); Year. Chapter Title. [Book chapter] Optional statement of impact

Online (including books, book chapters)

Please bold your name and only include published or forthcoming titles.

- 1. Author(s). Title. Location: Press (if applicable); Year. Number of pages. Link to title [Book] Optional statement of impact
- 2. Author(s), editor(s). Title. Location: Press (if applicable); Year. Link to title [Book editor] Optional statement of impact
- Author(s). Book title. Location: Press (if applicable); Year. Chapter Title. Link to chapter (or book title if not able to link directly to chapter) [Book chapter] Optional statement of impact

Scholarship and Research Articles Under Review

Peer Reviewed – Print Journals

Please bold your name and only include research submitted for review in journals that publish in print. <u>Please</u> remove once accepted.

1. Author(s). Title. Journal Title. Month Year submitted [Type of article e.g., book review, cover article]

Peer Reviewed – Online Journals

Please bold your name and only include research submitted for review in journals that exclusively publish online. <u>Please remove once accepted.</u>

1. Author(s). Title. Journal Title. Month Year submitted [Type of article e.g., book review, cover article]

Non-Peer-Reviewed – Print Journals

Please bold your name and only include articles submitted for review in journals that publish in print. <u>Please</u> remove once accepted.

1. Author(s). Title. Journal Title. Month Year submitted [Type of article e.g., book review, cover article]

Non-Peer-Reviewed – Online Journals

Please bold your name and only include articles submitted for review. Please remove once accepted.

1. Author(s). Title. Journal Title. Month Year submitted [Type of article e.g., book review, cover article]

Scholarship – Educational/Technological Development and Innovations

Curricula and Educational Materials

Please list in chronological order any educational materials you have developed including course modules, cases, instructor manuals, simulations, test banks, and audiovisual materials. Please bold your name.

 Author(s)/Developer(s). Type (e.g., video, syllabus) Institution/Organization, City, State/Country Please add a one-sentence description – may wish to share who adopted

Pedagogical Innovations

Please list in chronological order any pedagogical innovations related but not limited to teaching approaches/methods, educational technology development, educational policy, application of technology in classroom content, educational app development, content delivery, educational assessment, or instructor preparation and training. Please bold your name.

 1. Innovator(s). Type (e.g., Educational App, Teacher Training, Simulation Model)
 Years

 Name of app or training (if applicable), Organization/Institution, City, State/Country
 Please add a one-sentence description.

Example:

 Borgen KR, Sanchez GJ. Educational App, Groupie 2017 Tufts University School of Medicine, Boston, MA Application for use inside or outside the classroom to provide structured guidance and accountability for groupwork assignments.

Community Educational Resource Development and Innovations

Please list in chronological order any medical educational materials developed for community audiences (such as pamphlets, website content, community-based educational programming, instructional or educational video) and community technological educational innovations such as public health apps, new health UX/user interfaces, community health tracking). Please bold your name.

 1. Author(s)/Developer(s). Type of Material (e.g., video, syllabus). Title
 Years

 Institution/Organization, City, State/Country
 Hyperlink/URL (if applicable)

 Please add a one-sentence description.
 Please add a one-sentence description.

Example:

 Patel R. Pamphlet. "Get Moving!" Los Angeles Unified School District, Los Angeles, CA Youth exercise brochure created for health division to be distributed to students in LAUSD schools

Technological Development, Patents, and Innovations

Please list in chronological order any technologies you have developed. Please bold your name.

Clinical Innovations

 Innovator(s). Type. Name (if applicable) Institution/Organization, City, State/Country Hyperlink/URL (if applicable) Please add a one-sentence description

Patents

 Developer(s). Patent name. Patent or application number, Status Institution/Organization, City, State/Country Hyperlink/URL (if applicable) Please add a one-sentence description Years

2017

Years

Years



Devices/Software Applications

 Developer(s). Name of device/app Institution/Organization, City, State/Country Hyperlink/URL (if applicable) Please add a one-sentence description

Scholarship – Public Impact and Media in Medicine, Science, or Health

Testimony

Please provide details, in chronological order, regarding when you served as an expert witness or provided specialized knowledge in public or governmental hearings.

1. Testimony. (Date), Legislation number, Legislation title, Government body One sentence explanation

Example:

Testimony. (March 8, 2010), AB 3452, An act establishing access to mental health care for Los Angeles' homeless population, California Assembly Homeless Taskforce

Letters to the Editor and Opinion Pieces (Non-Academic Publications)

In chronological order, please list any opinion pieces or letters to the editor printed in non-academic outlets. If only published in an online source, please include link if available. Please bold your name.

 Author(s), Title of opinion piece or Letter to the Editor. Media outlet name, such as newspaper or magazine title. Year/Month/Day; Section (column), page number(s) Hyperlink/URL (if applicable)

Example:

Kirt JS. Letter to the Editor. Access to clean water is a public health crisis in the United States. New York Times. 2002 Sept 22; A2 (col. 2), p.16

Non-Editorial Contributions Intended for a Popular Audience

Please list any non-academic publications (books, magazine articles, online health information sources that are not blogs) intended for a popular audience. Please bold your name.

- 1. Author(s). Title. Location: Press (if applicable); Year. Number of pages. [Book]
- 2. Author(s). Title. Magazine title. Year Month; volume(issue): pp-pp [Magazine]

Example:

Ito K, Barnaby IE. Move Every Day. New York, NY: Pantheon; 2015. 120 p.

Blog Activities

Please list your contributions to writing medical-based, health-based, or science blog content. Blogs may be intended for academic or popular audiences. A blog may be included as long as the primary content addresses medical-based, health-based, or science topics, such as health and wellness, public health, practicing medicine, medical education, research (clinical, social scientific, specialty-specific, scientific, educational, evaluation, quality control), healthcare provision, and policy.

Blogs – Primary Authorship



If applicable, please list your relevant blogs in this section. Primary authorship is defined as blogs in which you are the blog creator and/or primary content producer. If you are the creator or primary content producer of more than one blog, please list them in chronological order from date of first post.

Author(s) Blog title Dates active (Month Year-Month Year) Summary of primary topics covered (one sentence or short list of primary topics) Total number of posts **you** authored (all time) Total number of posts **you** authored in the last 12 months Current number of subscribers Number of unique blog visits per day (most recent number) Average number of blog visits over the previous 3 months URL: web address of main landing page of the blog

Example:

Craceu SE Caring for Yourself Through Nutrition, June 2018-present Content: High-nutrition recipes; evidence-based science behind food, nutrition, and health outcomes 48 posts (all time) 20 posts (previous 12 months) 2,875 subscribers (as of February 2020) 8,000 unique visits per day URL: http://caringthroughnutrition.com/blog/category/harrietjaron//

Blogs – Co-Authorship

If applicable, please list your co-authored relevant blog(s) in this section. Co-authorship is defined as blogs in which multiple authors create a relatively equal amount of content and share the blog responsibilities equitably. If you are the co-author of more than one blog, please list them in chronological order from date of first post. For author format please use last name, first initial, middle initial, without periods (e.g., Bugle GE).

Authors Blog title Dates active (Month Year-Month Year) Content: Summary of primary topics covered (one sentence or list of topics) Total number of posts **you** authored (all time) Total number of posts **you** authored in the last 12 months Current number of subscribers Number of unique blog visits per day (most recent number) Average number of blog visits over the previous 3 months URL: web address for main landing page of the blog

Example:

Pandian GE, Sakai JA, Rizzo N, Iweo KM Frontiers in Reproductive Public Health (January 2011-present) Content: Internationally focused, highlights notable high-impact reproductive public health policy initiatives, policy adaptations, and evidenced-based outcomes. 423 posts (all time) 50 posts (previous 12 months) 6,210 subscribers (as of February 2020) 15,000 unique visits per day URL: http://frontiersphealth.com/blog//

Blogs – Guest Posts

Guest blog posts are defined as content you contribute to a blog as a single post or multiple posts, but in which you do not create a majority of the blog content. If the post has more than one author, please bold your name.



Please list blog contributions in chronological order by posting date. Please list the date of the post as specifically as possible.

Author(s). Title of the post. (date of post, as specific as possible.) Blog title Blog primary author(s): Last Name, First Name URL: web address of specific post

Example:

Lopez JE. "Fighting Ebola Between Epidemics." (October 24, 2018) Guest blog post in: Infectious Disease on the Ground. Blog creator/author: Herzog, David URL: <u>http://infectiousontheground.com/2018/fightingebola//</u>

Podcast Activities

Please provide details of health-, medical-, and science-related podcast activities. The intended audience may be academic or popular. Hosting or being a guest on a podcast may be included if topics focus on areas such as health and wellness, public health, practicing medicine, medical education, research (clinical, social scientific, specialty-specific, scientific, educational, evaluation, quality control), healthcare provision, and policy.

Podcast Host

Please include activities in which you held sole responsibility for hosting or producing a topic-relevant podcast.

Podcast name (dates active) Content: Summary of primary topics covered (one sentence or list of topics) Format: Average episode length: Total number of podcasts (all time): Total number of podcasts (previous 12 months): Average listeners per episode last 12 months (if known): URL:

Example:

Ethical Medicine (September 2017-present) Content: Each episode is dedicated to an ethical issue medical practitioners face, how the field of philosophy may inform ethical decision making. Guests engage in informed debates about ethical decision-making. Format: Interview guests, guest(s) host discussion/debate Average episode length: 60 minutes Total number of podcasts (all time): 25 Total number of podcasts (previous 12 months): 8 Average audience numbers per episode last 12 months: 1,624 URL: http://stitcher.com/podcast/ethical-medicine

Podcast Co-Host

Please include activities in which you shared responsibility for hosting/producing a podcast.

Names of hosts: Podcast name: (dates active) Content: Summary of primary topics covered (one sentence or list of topics) Format: Average episode length: Total number of podcasts (all time): Number of podcasts (previous 12 months): Average listeners per episode previous 3 months (if known): URL:



Example:

Podcast: One Foot in Front of the Other (October 2016-present) Jeunet JF, Achebe I, Quong LH, Neba KE Roles: Podcast host and recording technician Content: Each episode covers a discussion (amongst the hosts) of current research, breakthroughs, and technological advances in treating and diagnosing foot pain. Format: Co-host discussion (occasional invited guest) Average episode length: 45 minutes Total number of podcasts aired all time: 24 Number of podcasts aired in the last 12 months: 6 Total number of podcasts you hosted or co-hosted in the last 12 months: 6 URL: http://stitcher.com/podcast/onefoot

Podcast Guest

In chronological order, please include activities in which you served as a guest on podcasts that focus on relevant topic areas including health and wellness, public health, practicing medicine, medical education, research (clinical, social scientific, specialty-specific, scientific, educational, evaluation, quality control), healthcare provision, and policy.

Podcast name: Host(s): Episode title: Episode number: Original broadcast date: Content of episode: (one to two sentences) URL:

Example:

Podcast name: The Rounds: Medical Education Innovations Episode title: "Using Simulation Technology in the Classroom to Teach Anatomy - Pros and Cons" Host: Hardy SE Episode number: 30 Original broadcast date: September 5, 2017 Content: Answered questions about the use of various virtual reality technologies and their effectiveness to achieving learner outcomes. URL: https://podbean.com/podcast/rounds-medical-education

Other Social Media Activities

Please include any relevant social media activities related to engaging the public or peers in topics related to health/medicine/science/medical education.

Social Media Type (Twitter, etc.), handle/username (Month/Years active) Medical, science, health topics covered Name of Facebook group (if managing a group page) Number of Facebook group members For the previous 3 months: Number of posts (platform), average number of likes, average number of comments, average number of shares, average number of clicks, number of followers (month year)

Example:

Twitter, @MDMedEd (June 2009-present) Topics: Combating burnout and increasing wellness in medical education (students and educational professionals)

For the previous 3 months: 85 tweets, 100 likes, 15 comments, 75 shares, 200 clicks, 5,213 followers (as of February 2020)



Other Media – Interviews as Interviewee

Platform: Television, Radio, Magazine, Newspaper, Other (Date of interview) Name of outlet: Topic:

Please remove the last page if blank.