



MASSACHUSETTS
GENERAL HOSPITAL

HARVARD
MEDICAL SCHOOL



Department of Anesthesia and Critical Care

55 Fruit Street, Gray Bigelow 444
Boston, Massachusetts, 02114
Tel: 617-726-3030, Fax: 617-726-3032
E-mail: jwiener-kronish@partners.org

Jeanine P. Wiener-Kronish, M. D.

*Anesthetist-in-Chief
Massachusetts General Hospital
Henry Isaiah Dorr Professor of Anaesthetics and Anaesthesia
Harvard Medical School*

DATE XXXXXX

George Q. Daley, M.D., Ph.D.
Dean of the Faculty of Medicine
Harvard Medical School
25 Shattuck Street
Boston, Massachusetts 02115

Dear Dean Daley:

We respectfully write to propose the promotion of XXX XXXXX, M.D, Ph.D, to Assistant Professor of Anaesthesia at Harvard Medical School (full time). Dr. XXXX's area of excellence is clinical expertise and innovation. His significant supporting activity is investigation.

Dr. XXXX was trained in emergency medicine, anesthesia, and critical care at Uppsala University Hospital in Sweden. There, he also pursued research training in cardiopulmonary and cerebral resuscitation leading to a PhD in 2000. He was then appointed Assistant Professor in the Department of Anesthesia and Critical Care at Uppsala University, where he primarily served within neurosurgical anesthesia and critical care. Later, he joined Dr. Peter Safar of the University of Pittsburgh, by many considered the father of modern cardiopulmonary resuscitation, to work on "suspended animation", an innovative model of resuscitating victims of severe hemorrhage who die of cardiac arrest. In 2003, Dr. XXXX undertook an internship in the Department of Medicine at MGH, followed by a second anesthesia residency at MGH. After completing his clinical training in 2007, Dr. XXXX joined the faculty of the Department of Anesthesia, Critical Care and Pain Medicine at MGH as Instructor in Anaesthesia.

Area of Excellence (Clinical Expertise and Innovation)

Dr. XXXX is an active clinician with specific interest and expertise in trauma care and neurosurgical anesthesia, reflecting the topics of his research. He was appointed to the neurosurgical anesthesia team and soon recognized for his expertise in providing care during the most challenging neurovascular procedures and severely compromised patients with head injuries. His off-site anesthetic practice at the MGH includes interventional radiology and endoscopy. In addition, he serves as a consulting anesthesiologist at the Shriner's Burns Hospital, providing anesthesia and critical care to severely ill children with thermal injuries. His clinical work thus encompasses a range of severely ill patients in a variety of settings, presenting

challenges not simply from their pathology but also from the need to deliver care of the highest standard to these severely compromised patients in different environments.

Dr. XXXX works daily to develop and implement interdisciplinary clinical services for patients requiring interventional procedures and anesthesia. These include: craniotomy for tumor, cerebral aneurysm surgery, surgery of intracranial vascular malformations, Chiari malformation, carotid artery disease and endarterectomies and interventional neuroradiology. He utilizes and disseminates the use of novel anesthetic and perioperative techniques for neurosurgical anesthesia, including therapeutic hypothermia, permissive hypercapnea and hyperosmotic treatment. As an active member of the Quality Assurance Committee, he also participates in developing guidelines and evaluating programs in clinical anesthesia and implementing practice guidelines to prevent medical errors.

Dr XXXX is an internationally recognized clinician-scientist within the field of cardiopulmonary and cerebral resuscitation, and has been awarded a number of prizes, including the Society for Critical Care Medicine's Anesthesiology Award in 2000 and the Olof Norlander Prize from the Karolinska Institute in Stockholm. For his outstanding contributions to the field of emergency medicine, he was selected as the recipient of the first Nancy Caroline Fellowship in Emergency Medicine at the University of Pittsburgh in 2003. He has published eighteen peer-reviewed articles and several book chapters and review papers, and serves as a reviewer for many scientific journals, including Anesthesiology, Resuscitation, Intensive Care Medicine and Stroke. His innovative work on total body preservation during delayed resuscitation introduced a paradigm shift in the resuscitation of victims of severe hemorrhage leading to cardiac arrest, whose survival is virtually impossible with current resuscitation techniques. Furthermore, his work on intra-arrest hypothermia has established the importance of early therapeutic intervention during cardiac arrest, which is now being considered for inclusion in the American Heart Association's Advanced Cardiac Life Support algorithm. His recent work on microembolic cerebral ischemia has identified a potential pathophysiologic link between migraine, transient ischemic attacks and stroke and was recently published in the Annals of Neurology, a leading scientific journal. Dr. XXXX has also coauthored a review paper on this subject, which was published in Lancet Neurology, one of the world's most prominent journals with the highest impact factor in clinical neuroscience.

Teaching Contributions

Along with his clinical teaching of anesthesia residents and fellows at the Massachusetts General Hospital, Dr. XXXX participates in the didactic lectures and clinical teaching of medical students that rotate through the MGH anesthesia department. He participates in the weekly neurosurgical anesthesia lectures and delivers annual lectures in neurosurgical trauma and resuscitation to the critical care residents and fellows. He has assumed direct responsibility for the introduction and training of our residents during a two-week tutorial, designed to give new residents tailored intraoperative teaching. He is currently the clinical preceptor for 4 residents, working closely in their day-to-day training and supervising their clinical and academic development throughout residency. Dr. XXXX is a highly regarded teacher in all evaluated teaching components, including clinical supervision, time spent with residents, quality of teaching, quantity of teaching, suitability as a role model, and encouragement of thinking. Representative unedited

anonymous comments include: "...a fantastic teacher, clinician and mentor. He has a natural style of teaching in the operating room that is highly effective, and an unflappable calm that created a very comfortable learning environment for me.", "...one of the best attendings in the department. Patient, knowledgeable, and with a genuine interest in teaching.", "...every time he worked with me he taught me something, brought in journal articles and went over board questions. That kind of teaching is rare at MGH.", "...excellent anesthesiologist, great human being, awesome teacher, a real role model.", and "...the best teacher...".

Significant Supporting Activity (Investigation)

Dr. XXXX's significant supporting activities are in the area of investigation. He has published eighteen peer reviewed papers, eight as the first author. He is currently principal investigator or co-investigator in several experimental and clinical research projects at MGH, and in collaboration with the Resuscitation Research groups of the University of Pittsburgh and Uppsala University. He is *ad hoc* reviewer for scientific journals and has received a number of awards for his innovative research. He serves on the Subcommittee on Research Animal Care with monthly review of research proposals and regular inspection of MGH research facilities.

Review of Solicited Letters

The enclosed letters from nationally recognized figures uniformly support Dr. XXXX's promotion to Assistant Professor of Anaesthesia at Harvard Medical School:

SUMMARY EXCERPTS OF LETTERS OF SUPPORT WILL BE INSERTED HERE

Thus, all letters solicited and received are unreservedly supportive of the promotion.

In summary, Dr. XXXX is an outstanding clinician who has influenced the care of severely compromised patients, as well as patients with intracranial bleeding and stroke. His studies on cerebral microembolization have led to new insights into the pathophysiology of migraine aura and may ultimately provide new targets for perioperative brain protection.

Dr. XXXX has earned the respect of his colleagues and peers, both nationally and internationally, as a result of his clinical contributions and innovative investigation. The proposal to forward Dr. XXXX to Harvard Medical School for promotion to Assistant Professor of Anaesthesia was approved unanimously and with great enthusiasm by the MGH DACCPM Appointments and Promotions Committee on ____DATE____ and the Harvard Anaesthesia Executive Committee on ____DATE____. We look forward to your review and favorable response.

Sincerely yours,