



Re: Spine Faculty Application

Dear Colleague:

Thank you for your interest in becoming an AOSpine North America faculty member. Please be assured that your application will be given prompt and careful consideration.

The AOSpine North America Education Committee (AOSNAEC) reviews completed applications regularly. Members of AOSNAEC are AOSpine North America surgeons and, as a group, are responsible for acting upon these applications assuring a fair and peer review process. This process was designed in order to insure the long tradition of excellence in teaching associated with AOSpine North America.

The Committee meets two times per year to review and approve faculty applications. Applications must be complete before being considered by the Committee, and we ask that applicants pay attention to all the criteria and application details listed below. It is the privilege and responsibility of AOSNAEC alone, as the approving body for AOSpine North America faculty, to grant faculty status to an applicant.

Recently, the Committee has reviewed and enhanced the application criteria. Therefore below please find the new criteria necessary to be considered for AOSpine faculty:

- Membership in AOSpine North America (www.aospine.org) [please provide documentation];
- Attendance at an AOSpine North America Advanced Concepts in the Management of Spinal Disorders Course;
- Completion of a Spine Fellowship or more than 75% of practice devoted to spine surgery;
- Two (2) years independent clinical practice (i.e., post residency/fellowship);
- Two (2) letters of recommendation from AOSpine North America faculty. These should be current and within the last year of completion of the application;
- Demonstrated commitment to education (locally, regionally, nationally, and/or internationally). Examples include: teaching at an ORP; presentations to professional society or medical staff; participated in a clinical or basic research study; published in peer review journal;
- Submitted a Curriculum Vitae (CV);
- Completed AOSpine Faculty Application form.

If you have any questions about the application process, please do not hesitate to call Sally Peters-Gaffney at 610.993.5120 in the AO North America Office. Once again, thank you for your interest in AOSpine North America education. I look forward to receiving your application.

Again, thank you for interest. If you have any questions, please do not hesitate to contact us.

Sincerely,

A handwritten signature in black ink that reads "Laurence D. Rhines".

Laurence D. Rhines, MD
Chair

cc: Terry Cooke



AOSPINE FACULTY APPLICATION

NAME & OFFICE ADDRESS INFORMATION

Last		First		Middle Initial
Street			Suite Number	
City		State	Zip	
Telephone		Fax		
Email		SS# (last 4 numbers)		

For documentation purposes only

SPECIALTY

Ortho Neuro

DEGREE(S) – Check appropriate box(es)

MD DO PhD FACS FRCSC FRCS Other(s) _____

HOME ADDRESS INFORMATION

Street		Apt. Number	
City		State	Zip
Telephone		Fax	
Email			
Date of Birth		Citizenship	

ACADEMIC INFORMATION

Title	University
Title	University



AOSPINE FACULTY APPLICATION

HOSPITAL AFFILIATIONS

1.
2.

EDUCATION INFORMATION

<u>EDUCATION</u>	<u>SCHOOL</u>	<u>DEGREE</u>	<u>DATE GRADUATED</u>
Fellowship Training			
Residency Training			
Internship			
Medical School			
Graduate			
Undergraduate			

FELLOWSHIPS COMPLETED – (Please indicate dates, locations and Fellowship Director)

<u>AOSpine Fellowship</u>		<u>Spine Fellowship</u>	
Fellowship Director		Fellowship Director	
Date		Date	
Location		Location	

AO COURSES ATTENDED

<u>Course Type</u>	<u>Date</u>	<u>Location</u>
Advanced Concepts in the Management of Spinal Disorders		
Other		
Other		

AOSPINE FACULTY APPLICATION

PRACTICE PROFILE

The total percentage should equal 100%

Degenerative Spine	
Deformity	
Pediatrics	
Trauma	
Tumor	
Other	

100%

Approximate number of spine fracture cases per month

LECTURING LANGUAGES

Please check appropriate box(es)

	Fluent – Oral	Fluent – Written
English		
French		
Spanish		
German		
Italian		
Other		

TEACHING EXPERIENCE/COMMITMENT TO EDUCATION



AOSPINE FACULTY APPLICATION

PLEASE RELATE ANY SPECIAL QUALIFICATIONS OR INTERESTS

This Education Committee has established the following criteria for **Spine** applicants:

- Membership in AOSpine North America (www.aospine.org) [please provide documentation]'
- Attendance at an AOSpine North America Advanced Concepts in the Management of Spinal Disorders Course;
- Completion of a Spine Fellowship **or** more than 75% of practice devoted to spine surgery;
- Two (2) years independent clinical practice (i.e., post residency/fellowship);
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- Submitted a Curriculum Vitae (CV);
- Completed AOSpine Faculty Application form.

Your letter(s) of recommendation should be addressed to:

Laurence Rhines, MD
Chair, North America Spine Education Committee

Please mail your letters and all other correspondence to:

AO North America
Continuing Medical Education
1700 Russell Road
Paoli, PA 19301-0800
800.769.1391 x5120

If you have any questions regarding the application process, please contact either Sally Peters-Gaffney (peters-gaffney.sally@aona.org) or Terry Cooke (cooke.terry@aona.org).

Applications may also be found on our website www.aona.org.