## **Tulane Faculty PSPP Annual Scholar Progress Report**

Please complete the following report and return it with your CV to Wendy Stark (wstark@tulane.edu) with cc to mawood@tulane.edu

	Name	Department/School	Basic or
			Clinical
			Research
Lead			
Secondary			
Tertiary			

Date began PPSP program:

Name: Title:

Department:

Research Focus:

Please indicate which activities you participated in since June of last year by placing "X" in the appropriate column:

Υ	N	Program and Institutional Activities					
		Responsible Conduct in Research Training and CITI Training					
		2. Training – Rigor, Reproducibility, Transparency					
		3. Mentor team meetings					
		4. IDP – Individual Development Plan—review and update					
		5. Career Development Club Sessions (held quarterly)					
		6. Tulane Health Sciences Research Days (held annually)					
		7. Departmental Grand Rounds/ Seminars					
		8. Mentored Research Project					
		9. Other (please specify):					

## III. Academic Productivity over the last 12 months

- List key research findings:
- Describe all interdisciplinary research collaborations:
- List any project generated resources, if applicable:
- List all professional Honors and Awards received:
- 5. Include a list of all **abstracts** presented: (Can paste from CV include title, authors, meeting name, date, and location)
  - a. How many were Regional

b	. How	many were	National							
C	. How	How many were International								
d	l. Plea	se specify t	hose with <i>transla</i>	ational res	search finding	js:				
6. Plea	se atta	ch a list of a	ll publications: (r	olease atta	ach the comp	olete refere	nces list with full citations)			
			peer previewe		•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			ny were translati			<u> </u>				
		Please s	•							
	i	i. How ma	ny were as First	Author						
	ii	i. How ma	ny were as Last	Author						
b		-	of peer reviewe		under review	<u> </u>				
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C		•	ese a result of int	teraiscipiii	nary co-autho	orsnip? YE	S NO			
	ıı ye	<b>s</b> , piease iis	st disciplines:							
7. Plea	se com	plete the fo	llowing table and	l include a	ıll grants sub	mitted:				
			J		J					
	Grant	Agency	Project Title	Project	Women's	Date	Outcome (funded,			
	type	(NIH,		Role	Health/ Sex Differences	submitted	not funded, /pending)			
		Industry, Other)		(PI or Co-I)	Relevance	or Funded	** Please note if a resubmission is planned with month/year			
Example	R01	NIH/NIAID	Novel Strategies	Co-I	The goals	July 2001	Not funded/resubmitted July			
•			in Identifying		of this		2011			
					project related to					
					women's					
					health are					
	1	TO LIS	T GRANTS GO	TO PA	•	SPREA	OSHEET			
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8. Plea	ase mai	cate any of	ner achievement	s irom the	e list below:					
П	Invited	presentation	ons							
		al board par								
	Peer re	eview activit	ies							

Promotions
Media coverage
If so, please describe:
Other (please describe):

A	В	С	D	F	G	н itcome (funded, not funded, /pending) **	
	Grant type	Agency (NIH, Industry, Other)	Project Title	Project Role (PI or Co-I)	Women's Health/ Sex Differences Relevance	Date submitted or Funded	Please note if a resubmission is planned wit month/year
Please complete the following table and include all grants submitted							
Example	R01	NIH/NIAID	Novel Strategies in Identifying	Co-I	The goals of this project related to women's health are	July 2001	Not funded/resubmitted July 2011

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