Policy Name: Pre-Clerkship Assessment Policy

Policy Replaces a Previous Policy [Yes/No] (this includes change in policy name): No
If so, list name of previous policy (include policy number if different):

Policy Number: MSEC-0622-29

Originator Name and/or Committee (if a committee, include name of chair): Ivy Click, EdD/ MSEC

Committees, Departments, or Individuals Responsible for Implementation: Pre-Clerkship Course Directors

Original Approval Date and Who Approved by: 06/7/2022 / MSEC

Revision Date(s) (include a brief description) and Who Approved by: 11/8/2022 - Added exam question credit section / MSEC; 7/27/2023 - Added specific passing requirements for courses / MSEC

Effective Date(s): 7/18/2022; 2023-24 AY

Revision(s) (briefly describe) by Administrative Staff and Date (these revisions do not require voting/approval by a committee and/or individual):

Exemption(s) to Policy (date, by what committee or individual, and brief description):

LCME Required Policy [Yes/No]: No
LCME Element(s) Affiliated with Policy (include Element number/name/statement):

All policies will be reviewed every three years unless an earlier review is identified.

(A.) Policy Statement:

The assessment approach in the pre-clerkship phase of the curriculum is one of a philosophy of assessment for learning. Assessment activities contribute significantly to student learning by giving each student ongoing feedback about their performance. The model is based on continuous, progressive, low-stakes assessments leading up to a final assessment with somewhat higher stakes. All courses in the pre-clerkship phase are graded as Pass/Fail.

(B.) Purpose of Policy:

To provide consistency in the development of grading structures among pre-clerkship courses.

(C.) Scope of Policy (applies to):

All students in the pre-clerkship courses.

(D.) Policy Activities:

Foundational Science/Organ System Blocks

Pre-clerkship foundational science courses provide foundational medical knowledge via team-based learning (TBL), problem-based learning (PBL) and other active learning formats in a classroom or lab setting or via independent learning. Course grades comprise the following elements:
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1. **In-class assessments**: Students will complete in-class assessments from active learning activities (e.g. TBL individual readiness assurance tests (IRAT) and group readiness assurance tests (GRAT), peer instruction questions, audience response questions, in-lab assessments, etc.). In-class assessments comprise 30-35% of the final course grade.

2. **Weekly Checkpoints**: Students are required to complete multiple-choice questions (MCQs) and open-ended questions (OEQs) designed to confirm if students have achieved the expected level of competency with the material for the week. Weekly Checkpoints include content relevant to current and prior weeks, including content from PBL sessions, to promote retention of knowledge over time and will comprise 30-40% of the final course grade.

3. **Small group evaluations**: Each course includes assessments by small group leaders of students’ performance in PBL. Faculty facilitators assess each student using a performance rubric and a narrative description of the student’s performance. (See Narrative Assessment policy.)

4. **Summative assessments**: Summative assessments of medical knowledge occur at the end of each pre-clerkship course and in some cases at mid-point in a course. These summative assessments of medical knowledge may consist of MCQs and OEQs. Faculty should refer to the Pre-Clerkship Summative Assessment Guidelines for recommendations for exam construction and review.
   a. Courses 6 weeks or less will have one final exam, a cumulative NBME Customized Assessment Services (CAS) exam. The final exam will comprise 25-30% of the final course grade.
   b. Courses longer than 6 weeks should have two summative assessments: one mid-term and one cumulative final exam. Mid-term exams may be institutionally developed (ExamSoft) or use NBME CAS. Final exams will use NBME CAS and will include a cumulative component of at least 20%. Together, the mid-term and final exams will total 25-35% of the final course grade.
   c. Faculty should refer to the Pre-Clerkship Summative Assessment Guidelines for additional details.

5. **Professionalism**: Professional behavior is expected of all students in all interactions throughout the medical education program. Points may be deducted from students’ overall course grade (5-10%) for inappropriate/unprofessional behaviors as defined in the course syllabus.

**Passing Requirements**

1. Students scoring above 70% on the final exam and who have a cumulative final course score at or above 70%, pass the course.

2. If a student scores below 70% on the final exam and has obtained a cumulative final course numeric score of at least 70%, the student will receive an Incomplete grade and will be reported to the Student Success Committee.
   - The student will be required to meet with an academic support counselor and create a learning plan based on their individual exam results.
   - After the learning plan is completed, the student will be required to retake the exam to demonstrate improvement.
   - Successful completion of the learning plan and exam performance will be determined by the academic support counselor and course director.

3. Students with a cumulative final course numeric score below 70% will be assigned a grade of “F” and will be referred to the Student Promotions Committee.

**Doctoring Courses**

Pre-clerkship doctoring courses teach students clinical skills, including communication with patients and performance of the physical examination, and introduce students to various health system science, professional, ethical, and community topics that are relevant to medicine. Students participate in small group activities, simulation, standardized patient encounters, integrated grand rounds, and preceptorships. Doctoring grades are based on the following:
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- Participation
- Completion of all assignments
- Medical knowledge assessments
- Satisfactory progress in clinical skills development as assessed by Doctoring faculty including:
  - Oral case presentations
  - Written history & physical notes
  - OSCEs
- Evaluations by community preceptors in the clinical setting.

Passing Requirements

1. Students with a cumulative final course score at or above 70%, pass the course.
2. Students who do not have a cumulative passing score are eligible to address deficiencies as determined by the course director.
   - Students who satisfactorily address the deficiencies pass the course.
   - Students who fail to satisfactorily address the deficiencies will be assigned a grade of “F” and will be referred to Student Promotions Committee.

Modification of Exam Question Credit

For ExamSoft or similar in-house developed exams, decisions on whether to modify exam question credit will be made using question statistics (% correct, point biserial, etc.) and student feedback submitted during the exam using the ExamSoft feedback/notes function. For NBME CAS exams, for which it is not possible to solicit student feedback during the exam, decisions regarding modification of question/exam credit will be made based upon question/exam statistics alone. Student comments regarding exam questions that is submitted after the exam is over will be used to improve questions and identify additional opportunities for student learning, but not for decisions regarding exam question credit. Question challenges for the purpose of changing individual student grades is prohibited.

Course directors can petition Academic Affairs for a modification of this policy if specific circumstances lead a course director to conclude it is educationally appropriate.

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### Faculty Advisory Council

### Administrative Council

### M1/M2 Course Directors

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### Student Groups/Organizations *(describe):*

### Other *(describe):*

### Notifications of New or Revised Policy *(if applicable)*

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