I. POLICY
Clerkship Phase Assessment and Grading

II. PURPOSE
This policy outlines the elements of domain-based grading used in the Clerkship Phase of medical education. It also details the criteria in each domain for each grade, for promotion out of a clerkship, and remediation for a failed clerkship.

III. RESPONSIBLE PARTY AND REVIEW CYCLE
The Curriculum Policy Subcommittee will review and update annually with input from the Clerkship Education Committee. Any changes to grading structure and associated assessments must be reviewed by the Assessment, Learning Outcomes, and Evaluation (ALOE) team and Clinical Education leadership. Final approval will be obtained from the Medical Education Committee annually before the academic year starts.

IV. ACCREDITATION REFERENCES
- LCME 9.5 Narrative Assessment
- LCME 9.6 Setting Standards
- LCME 9.7 Formative Feedback
- LCME 9.8 Fair and Timely Summative Assessment
- SACSCOC 12.3 Student Rights
- SACSCOC 12.4 Student Complaints

V. DESCRIPTION
Clerkship Grading System
The four domains of the Clerkship Phase grading system include the following:

Medical Knowledge is comprised of one summative, multiple-choice NBME subject exam. This component of the grading system is intended to both assess student’s basic knowledge and to prepare them for the United States Medical Licensing Examination (USMLE) Step 2CK examination.

Clinical Evaluation is comprised of clinical evaluations by faculty and residents.

- Clinical evaluations should only be completed by individuals who have a faculty or resident appointment (PG-Y2 or higher) with expertise relevant to the clerkship assigned.
  - Visiting interns and visiting residents may not complete scored clinical evaluations but may provide written comments for the student.
- The number of evaluations a student receives may vary based on a variety of factors. At least one graded evaluation is required to calculate the clinical evaluation grade. However, more evaluations are preferred.
- Clinical evaluations (individual preceptor or committee) must be based on at least three (3) days of working with the student to contribute to the grade.
• Evaluators who worked with students for fewer than three (3) days may provide written comments using a different form.

**Applied Learning** is determined by each clerkship.

- It is assessed based on competency.
- Each clerkship will have at least one assignment in this domain, but more than one is preferred.
- Clerkships will have no more than five assignments in this domain.
- The student is required to achieve minimum competency (69.5%) on each assignment in the Applied Learning domain to pass.
- If a student receives a score that is below passing for an assignment, they are required to repeat the assignment or comparable alternative as determined by the clerkship director.
  - If the repeated assignment is successful, the student’s grade for that assignment is changed to 69.5%, as the student has now shown proficiency. The student will receive a “pass” for this domain.
  - If the repeated assignment is unsuccessful, the student will receive the most recent earned score for the assignment and a “fail” for this domain.
- Pass/Fail assignments should make up no more than 15% of this domain.

**Professionalism** is graded pass/fail and follows the Professionalism and Expectations for Students’ Professional Behaviors Policy.

**Formative** required completion-based formative activities may be administered in a clerkship or course and are considered part of professionalism. Students are expected to attend all required sessions for this domain (or required makeup sessions) and complete all required assignments.

Each clerkship director will provide formative mid-clerkship feedback to the student that documents student performance and enumerates any improvements necessary to achieve satisfactory performance by the end of the clerkship.

Preceptors and residents are not required to provide comments in clinical evaluations unless the student received less than a “pass” for a specific criterion or based on the overall score. As a result, students are expected to proactively seek feedback during the clerkship. If the clerkship concludes and the student would like written feedback to enhance their development, they may complete an academic appeal form within 14 days of receiving their evaluation. If the evaluator provides comments, they will be shared with the student and added to the summative comments section of the evaluation. The clerkship director will determine if comments will be included in the final Medical Student Performance Evaluation.

**Makeup and Missed Assignments**
For approved leave known in advance leave, every effort should be made by the student to complete assignments prior to taking the leave. If a required assignment is not completed by the communicated deadline, the student will be reported for a professionalism lapse and will be assigned a new deadline. If the assignment required for a grade is not completed by the new
communicated deadline, the student will again be reported for a professionalism lapse and will fail the clerkship or course. Students with an unexcused absence will be submitted as a professionalism lapse (see Professionalism and Expectations for Professional Behaviors Policy for more details) and are required to makeup required academic activities missed to avoid a clerkship or course failure.

If a student turns in a late or missing assignment by the communicated deadline, they are eligible to earn full credit in the Applied Learning domain; however, point(s) will be deducted in the Professionalism domain (for more information, see the Professionalism and Expectations for Students’ Professional Behaviors Policy). If a student has not turned in the assignment by the newly communicated deadline, their grade for the assignment will be “0.” MSPE comments may note multiple professionalism lapses or an egregious professionalism concern.

For more details about excused absences, unexcused absences, and any makeup, see the Attendance of Academic Responsibilities Policy. For more information regarding late/missing assignments, see the Professionalism and Expectations for Students’ Professional Behaviors Policy.

**Clerkship Grading Scale**

Final clerkship grades will be determined by the below criteria. A four-tiered grading system is used (i.e., Honors, High Pass, Pass, and Fail). The final clerkship grade is composed of the following domains:

- **Honors**
  - Medical Knowledge ≥ 78.0%
  - Clinical Evaluation ≥ 85.5%
  - Applied Learning ≥ 85.5%
  - Professionalism (pass/fail only) 2 of 3 points

- **High Pass**
  - Medical Knowledge 70.0% - 77.0%
  - Clinical Evaluation 79.5% - 85.4%
  - Applied Learning 79.5% - 85.4%
  - Professionalism (pass/fail only) 2 of 3 points

- **Pass**
  - Medical Knowledge 60.0% - 69.0%
  - Clinical Evaluation 69.5% - 79.4
  - Applied Learning 69.5% - 79.4%
  - Professionalism (pass/fail only) 1 of 3 points

- **Fail**
  - Medical Knowledge ≤ 59.0%
  - Clinical Evaluation ≤ 69.4%
  - Applied Learning ≤ 69.4%
  - Professionalism (pass/fail only) ≤ 0 points
Reporting of Assignments, Exams, and Final Grade
Final grades must be posted within six weeks of the final day of the Clerkship Phase rotation. In the instance of clerkship failures, clerkship directors are responsible for notifying (1) students who fail the clerkship, (2) the Assistant Vice Dean for Clinical Education, and (3) the Assistant Vice Dean for Student Affairs.

Student Promotions through the Clerkship Phase
In order to promote out of a clerkship, students must demonstrate minimum proficiency of each of the components of the grading system by achievement of the following:

- Medical Knowledge ≥ 60.0%
- Clinical Evaluation ≥ 69.5%
- Applied Learning ≥ 69.5% for each assignment
- Professionalism 1 of 3 points

Clerkship Exam Retest Policy
If a student scores < 60% on an NBME subject exam, they will be required to retest unless they have exceeded the number of permitted retests as outlined below. If a passing score (≥ 60%) is obtained on the retest, the student’s grade for that exam is changed to 60% as the student has now shown proficiency. If a student does not pass the retest, they will receive a Fail. Students may only take one retest per clerkship and may not retest more than two clerkship exams during the entirety of the clerkship phase. To continue in the clerkship phase, students cannot carry more than one retest during the clerkship year will be referred to the Student Review and Advisory Committee.

Clerkship Remediation Policy
In the event a student fails a clerkship, Clinical Education leadership shall recommend to both the student and the Student Progress Committee (SPC) an appropriate remediation program. The remediation program may include taking an examination and/or repeating all or a portion of the clerkship. The recommendation is reviewed by the SPC, which makes the final decision regarding the student’s academic progress. The SPC uses guidelines outlined in the Standards for Advancement and Graduation Policy and Student Progress Committee Structure and Function Policy regarding promotion of students through the education program at the medical school. For more details on the reporting of final grades, see the General Assessment and Evaluation Principles Policy.

VI. RELATED DOCUMENTS
Appeal and Complaint Procedures Policy
Attendance of Academic Responsibilities Policy
Formative Feedback Policy
General Assessment and Evaluation Principles Policy
Narrative Feedback Policy
Professionalism and Expectations for Students’ Professional Behaviors Policy
Standards for Advancement and Graduation Policy
Student Progress Committee Structure and Function Policy

VII. HISTORY OF APPROVALS AND UPDATES
The following list documents policy approvals and updates by oversight authority, date, and summary of changes. This policy is housed on the MD Student Handbook webpage.

- On June 17, 2020, the Medical Education Committee approved the update to separate the policy from the MD Student Handbook, to expand Clinical Evaluation domain, and to include procedures related to feedback, missed and makeup assignments, and “Bad Day” testing policy.
- On December 3, 2020, the Medical Education Committee approved an update to clarify the timeline and procedures for posting final grades.
- On May 27, 2021, the Medical Education Committee approved an update to include that minimum competency must be reached for each assignment in the Applied Learning domain and are given an opportunity to repeat the assignment to reach competency, to limit pass/fail assignments in the Applied Learning domain to no more than 15%, and to define late vs missing assignments and the policy around grading.
- On May 27, 2022, the Medical Education Committee approved an update clarify retesting in the clerkship phase.
- On April 12, 2023, the Medical Education Committee approved the removal of M3 to align with the curriculum redesign, updated language around late/missing assignments, clarified language about retest requirements, changed individual responsible for remediation plan to Clinical Education Leadership, and removed content that is found in the General Assessment and Evaluation Principles Policy.
- On March 13, 2024, the Medical Education Committee approved the updates for clinical evaluations to be completed by individuals with expertise relevant to the clerkship, for students to either repeat applied learning assignments or comparable alternate assignments if they do not reach a passing score on the first attempt, for professionalism to be graded as pass/fail only and for other minor updates to language or directing to other policies for further details.