



# 2016 NBME<sup>®</sup> Clinical Clerkship Subject Examination Survey: Summary of Results



## Table of Contents

Survey Methodology.....	2
Description of Survey Methodology .....	2
Survey Sample .....	4
Schools’ Use of the NBME Clinical Subject and Advanced Clinical Examinations (ACE) .....	5
Response Rate .....	7
Clerkship Rotations .....	8
Summary of Findings: Clerkship Rotation Characteristics .....	8
Table 1 - Type of Clerkship .....	9
Table 2 - Clerkship Lengths .....	10
Table 3 - Number of Scheduled Rotations.....	11
Table 4 - Start Months for First Rotation .....	12
Table 5 - Typical Rotation Year .....	13
Table 6 - Rotation Required.....	14
Use for Assessment .....	15
Summary of Findings: NBME Subject Examination Program.....	15
Table 7 - NBME Subject Examination Usage.....	17
Table 8 - Breakdown of NBME Clinical and Advanced Clinical Examination (ACE) Usage .....	18
Table 9 - Academic Purposes for Using the NBME Subject Examinations .....	19
Table 10 - Clerkships Requiring Students to Pass NBME Subject Examinations.....	20
Table 11 - Methods for Determining Passing Score .....	21
Table 12 - Range of Minimum Passing Scores or Percentile Ranks during the 2015-2016 Academic Year.....	22
Table 13 - Weight Given to the Subject Examination Score for Final Course/Clerkship Grade.....	23
Table 14 - Clerkships Using NBME Subject Exam to Determine Honors.....	24
Table 15 - Methods for Determining Honors Score.....	25
Table 16 – Range of Minimum Honors Score or Percentile Rank during the 2015-2016 Academic Year.....	26

## Survey Methodology

### Description of Survey Methodology

The National Board of Medical Examiners (NBME®) offers standardized, objective, discipline-based and comprehensive (inter-disciplinary) basic and clinical science examinations for use in assessment throughout the medical school curriculum. These subject examinations are developed and reviewed by nationally representative content experts following the same rigorous protocol used to build Step 1 and Step 2 Clinical Knowledge (CK) of the United States Medical Licensing Examination (USMLE®). Subject examinations are designed to provide institutions with effective evaluation tools and useful examinee performance data that can be compared with nationally representative groups of students at the same stage of training.

In the spring and summer of 2016, the NBME emailed Executive Chief Proctors at 278 medical schools and satellite campuses and asked them to invite the clinical clerkship directors at their institutions to complete an on-line survey. These schools were selected because they either have administered subject examinations (e.g. in academic years 2014-15; 2015-16) or are approved to do so in the future. Each school has a designated Executive Chief Proctor (ECP). These schools include a mix of U.S. allopathic medical schools accredited by the Liaison Committee on Medical Education (LCME®) and their satellite campuses (64.7%), osteopathic medical schools and their satellite campuses (10.4%), international medical schools (20.1%), and Canadian medical schools (4.3%). ([Table A](#)).

In the email, the NBME asked that Executive Chief Proctors contact directors of the following clinical clerkships: Ambulatory Medicine, Clinical Neurology, Emergency Medicine, Family Medicine, Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry and Surgery. In addition, the NBME also asked that the clerkship directors of the following advanced clinical rotations be contacted: Advanced Emergency Medicine, Advanced Internal Medicine, Advanced Pediatric Medicine and Advanced Surgical Medicine.

The purpose of the survey was to gather descriptive information about the characteristics of various clerkships as well as information about schools' use of the NBME Subject Examination Program. The survey included questions about the format and length of clerkship rotations, rotation timing, and whether or not rotations are required. In addition, survey questions also focused on such areas as the purpose for using subject examinations, the procedures used to determine minimum passing scores, the actual minimum passing scores, the scores required to achieve Honors, and the weight given to the subject examination for final course or clerkship grades.

The extent of schools' usage of the NBME clinical and advanced clinical subject examinations for the academic years 2014-15 and 2015-16 for all medical schools is shown in [Table B](#). [Chart 1](#) shows the extent of subject examination use for U.S. LCME-accredited medical schools and satellite campuses for the academic years 2014-15 and 2015-16.

[Table C](#) shows the type of schools using the NBME clinical and advanced clinical subject examinations during the 2015-16 academic year. The NBME Subject Examination Program provides clinical and advanced clinical subject examinations to 172 U.S. LCME-accredited medical schools and satellite campuses, 11 Canadian LCME-

accredited medical schools, 15 osteopathic medical schools, 35 international medical schools, and 1 other type of institution.

Overall, clerkships representing 156 schools and satellite campuses completed the survey for a response rate of 67% across the disciplines (Table D). Individual response rates for the clinical clerkships ranged from 36% for Psychiatry to 48% for Family Medicine. Response rates for the advanced clinical rotations ranged from 13% for Advanced Surgical Medicine rotations to 55% for Advanced Pediatric Medicine clerkships.

This survey and future related NBME research endeavors will help to facilitate the continuous improvement of the NBME Subject Examination Program.

*Note: 1) The tables (table 1-16) in the report are conditionally formatted based on their value. The darker color (blue) associates with the higher value. 2) Valid percent is used in all tables that excluded missing data from the calculation. 3) For 13 clerkship rotations, the results will be presented in the following tables as long as there is at least one survey respondent.*

## Survey Sample

**Table A** shows the types of medical schools and satellite campuses included in the survey sample (N=278).

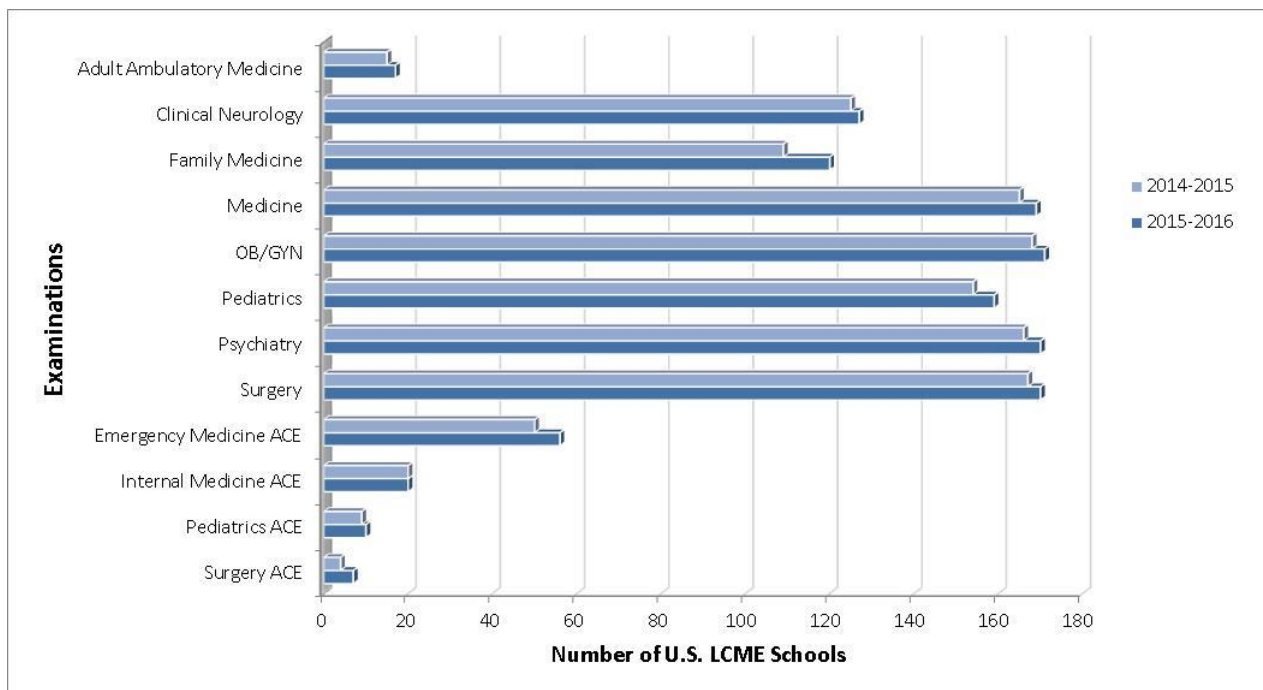
	Medical Schools & Satellite Campuses Surveyed (Type)				
	Domestic (allopathic)	Canadian	International	Osteopathic	Other Organizations
LCME Accredited	178	12	0	0	0
Non-LCME Accredited	2	0	56	29	1
Total N	180	12	56	29	1
Valid Percent	64.7%	4.3%	20.1%	10.4%	0.4%

## Schools' Use of the NBME Clinical Subject and Advanced Clinical Examinations (ACE)

**Table B** provides information about schools' use of the NBME clinical subject and advanced clinical examinations for the 2014-15 and 2015-16 academic years.

	Years 2014-2015		Years 2015-2016	
	All Schools & Satellite Campuses	U.S. LCME Schools & Satellite Campuses	All Schools & Satellite Campuses	U.S. LCME Schools & Satellite Campuses
Adult Ambulatory Medicine	15	15	18	17
Clinical Neurology	134	125	137	127
Family Medicine	134	109	156	120
Medicine	214	165	223	169
Obstetrics and Gynecology	217	168	225	171
Pediatrics	201	154	209	159
Psychiatry	211	166	222	170
Surgery	215	167	223	170
Emergency Medicine ACE	53	50	59	56
Internal Medicine ACE	22	20	22	20
Pediatrics ACE	10	9	11	10
Surgery ACE	5	4	8	7

**Chart 1** provides information about **U.S. LCME** medical schools and satellite campuses' use of the NBME clinical subject and advanced clinical examinations for the 2014-15 and 2015-16 academic years.



**Table C** shows the types of medical schools and satellite campuses using the NBME clinical and advanced clinical subject examinations for the academic year 2015-16 (N=234).

	Medical Schools & Satellite Campuses				
	Using the NBME Clinical and Advanced Clinical Examinations for Academic Year 2015-2016				
	Domestic (allopathic)	Canadian	International	Osteopathic	Other Organizations
LCME Accredited	172	11	0	0	0
Non-LCME Accredited	0	0	35	15	1
Total N	172	11	35	15	1
Valid Percent	73.5%	4.7%	15.0%	6.4%	0.4%

## Response Rate

**Table D** provides the survey response rates by clinical rotation/clerkship.

Clinical Rotation/Clerkship	# of Schools & Satellite Campuses with Survey Responses	# of Schools & Satellite Campuses with Administrations During 2015-16 Academic Year	Response Rate
Adult Ambulatory Medicine	7	18	39%
Clinical Neurology	61	137	45%
Family Medicine	75	156	48%
Medicine	94	223	42%
Obstetrics and Gynecology	86	225	38%
Pediatrics	98	209	47%
Psychiatry	79	222	36%
Surgery	85	223	38%
Emergency Medicine	28	59	53%
Advanced Emergency Medicine	3		
Advanced Internal Medicine	9	22	41%
Advanced Pediatric Medicine	6	11	55%
Advanced Surgical Medicine	1	8	13%
<b>Total # of unique schools</b>	<b>156</b>	<b>234</b>	<b>67%</b>



## Clerkship Rotations

### Summary of Findings: Clerkship Rotation Characteristics

The majority of clerkships within each discipline follow a traditional curriculum ([Table 1](#)). Specifically, Emergency Medicine, Advanced Emergency Medicine, and Advanced Internal Medicine clerkships were most likely to have a traditional curriculum (100%). Ambulatory Medicine was least likely to have a traditional curriculum (50%). Longitudinal integrated rotations lasting more than six months were used in 5% of Family Medicine clerkships and 4% of Clinical Neurology clerkships, while 2% of Medicine, Obstetrics Gynecology and Pediatrics clerkships have this type of curriculum. No other clerkships used this type of curriculum. Of the clerkships that used a combined integrated curriculum lasting less than six months, Ambulatory Medicine rotations used this type of curriculum the most (38%), and Pediatrics rotations used it the least (4%). A Problem Based Learning (PBL) curriculum was used by 4% of Surgery rotations, 2% of Family Medicine, Medicine, and Obstetrics and Gynecology rotations and 1% of Pediatrics rotations. Other types of curriculums (e.g., traditional curriculum with a three month longitudinal integrated curriculum) accounted for 13% of Ambulatory Medicine and Advanced Pediatric Medicine clerkships.

The lengths of the clerkships varied greatly ([Table 2](#)). All Advanced Emergency Medicine rotations reported clerkship lengths of 2 and 4 weeks. All Advanced Surgical Medicine rotations reported clerkship lengths of 11 weeks. While most rotations were between 4 and 8 weeks in length, there were some exceptions. Twenty-five percent of Ambulatory Medicine clerkships reported a clerkship length of 16 weeks, and 23% of Medicine clerkships reported a length of 12 weeks. Four clerkships reported rotations that are more than 20 weeks in length: Family Medicine (5%), Clinical Neurology (3%), Medicine (2%) and Obstetrics and Gynecology (1%). The disciplines which had shorter clerkship lengths were likely to have more scheduled rotations in a given year compared with disciplines with longer clerkships ([Table 3](#)).

The majority of all clerkships began the first rotation of the academic year in July 2015 ([Table 4](#)). June 2015 and May 2015 were the next most common months for beginning rotations. Some exceptions included Advanced Surgical Medicine clerkships all of which began in January 2015. The start of rotations for Ambulatory Medicine also varied with 25% beginning in January, 25% in March 2015, and 13% beginning in each of the following months in 2015: April, May, July and August. About a third of Advanced Emergency Medicine rotations started in March (33%), June (33%) or July (33%). Although 50% of Advanced Pediatric Medicine rotations began in July 2015, 25% percent began in March 2015.

The typical rotation start year ([Table 5](#)) for the all of the clinical clerkships (Ambulatory Medicine, Clinical Neurology, Family Medicine, Medicine, Obstetrics and Gynecology, Pediatrics, Psychiatry and Surgery) is the 3rd year. The vast majority of advanced clinical rotations began in the 4th year. The exception is Advanced Surgical Medicine which began in the third year.

Across all disciplines, the majority of clerkship rotations are required as part of the curriculum ([Table 6](#)). An exception was Advanced Pediatric Medicine which is not required by 38% of clerkships.

Table 1 - Type of Clerkship

Type	Clerkship (percent of clerkships)											
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine
Traditional	50	88	88	87	89	90	90	86	100	100	100	88
Longitudinal Integrated lasting more than 6 months	0	4	5	2	2	2	0		0	0	0	0
Combined/integrated clerkships lasting less than 6 months	38	8	5	8	6	4	8	9	0	0	0	0
Problem-based Learning	0	0	2	2	2	1	0	4	0	0	0	0
Other, please specify	13	0	1	2	2	3	2	0	0	0	0	13

Table 2 - Clerkship Lengths

Lengths	Clerkship (percent of clerkships)												
	Adult									Advanced	Advanced	Advanced	Advanced
	Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Emergency Medicine	Internal Medicine	Pediatric Medicine	Surgical Medicine
1 weeks	0	0	0	0	0	1	0	0	0	0	0	0	0
2 weeks	0	7	1	0	0	0	0	0	9	33	0	0	0
3 weeks	0	12	5	1	0	0	3	1	3	0	0	0	0
4 weeks	50	72	22	3	4	5	32	4	84	67	67	75	0
5 weeks	13	1	2	1	7	6	5	4	0	0	0	13	0
6 weeks	0	4	43	3	65	47	51	11	3	0	0	0	0
7 weeks	0	0	0	0	1	2	0	1	0	0	0	13	0
8 weeks	13	0	17	50	20	35	6	63	0	0	0	0	0
9 weeks	0	0	0	1	0	2	0	2	0	0	0	0	0
10 weeks	0	0	0	11	0	0	0	5	0	0	11	0	0
11 weeks	0	0	0	1	0	0	0	0	0	0	0	0	100
12 weeks	0	1	2	23	0	2	0	7	0	0	11	0	0
13 weeks	0	0	0	0	0	0	0	0	0	0	0	0	0
14 weeks	0	0	0	0	0	0	0	0	0	0	0	0	0
15 weeks	0	0	0	2	1	0	0	0	0	0	0	0	0
16 weeks	25	0	2	1	0	1	3	1	0	0	11	0	0
17 weeks	0	0	0	0	0	0	0	0	0	0	0	0	0
18 weeks	0	0	0	0	0	0	0	0	0	0	0	0	0
19 weeks	0	0	0	0	0	0	0	0	0	0	0	0	0
20 weeks	0	0	1	0	1	0	0	0	0	0	0	0	0
20+ weeks	0	3	5	2	1	0	0	0	0	0	0	0	0

**Table 3 - Number of Scheduled Rotations**

Number of Rotations	Clerkship (percent of clerkships)												
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine	Advanced Surgical Medicine
Less than 2	0	4	10	7	1	4	2	3	9	0	0	25	0
2	13	4	5	11	3	3	3	12	3	33	0	0	0
3	25	0	1	9	5	2	6	8	0	0	0	0	0
4	0	5	3	21	3	4	2	15	0	0	22	0	100
5	13	1	0	3	7	4	0	4	0	0	0	0	0
6	0	15	27	36	23	32	15	41	0	0	0	0	0
7	13	4	7	3	4	6	5	3	3	0	11	13	0
8	13	4	25	3	44	32	32	9	16	0	11	38	0
9	13	3	2	1	6	2	4	0	13	0	22	0	0
10 or More	13	60	19	6	6	10	31	4	56	67	33	25	0

Table 4 - Start Months for First Rotation

Month	Clerkship (percent of clerkships)												
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine	Advanced Surgical Medicine
January	25	4	7	7	5	5	9	4	0	0	0	0	100
February	0	0	0	1	0	1	0	3	3	0	0	0	0
March	25	9	5	3	2	5	3	3	0	33	0	25	0
April	13	3	3	3	5	1	2	7	0	0	11	0	0
May	13	19	16	18	17	15	21	19	28	0	0	13	0
June	0	15	19	20	16	18	18	14	13	33	33	0	0
July	13	41	43	41	44	45	38	41	53	33	44	50	0
August	13	5	5	7	8	7	7	5	0	0	0	13	0
September	0	0	2	1	2	2	0	2	3	0	11	0	0
October	0	4	0	0	1	2	1	1	0	0	0	0	0
November	0	0	0	0	0	0	0	0	0	0	0	0	0
December	0	0	0	0	0	0	0	0	0	0	0	0	0

Table 5 - Typical Rotation Year

Year	Clerkship (percent of clerkships)												
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine	Advanced Surgical Medicine
1st Year	0	0	0	1	1	1	0	0	0	0	0	0	0
2nd Year	30	5	3	3	6	5	6	4	0	25	0	0	0
3rd year	70	76	91	93	78	84	82	90	20	25	10	25	100
4th Year	0	19	5	4	12	6	10	4	80	50	90	75	0
Other	0	1	0	2	3	5	3	2	0	0	0	0	0

Table 6 - Rotation Required

As Part of Curriculum	Clerkship (percent of clerkships)												
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine	Advanced Surgical Medicine
Yes	100	99	100	97	100	99	99	100	81	67	100	63	100
No	0	1	0	3	0	1	1	0	19	33	0	38	0

**Use for Assessment****Summary of Findings: NBME Subject Examination Program**

For all disciplines, the majority of clerkships used a subject examination. With the exception of Advanced Pediatric and Surgical Medicine clerkships, the range of clerkships using a subject examination was between 56% for Advanced Internal Medicine and 100% for both Psychiatry and Surgery ([Table 7](#)). Advanced Pediatric Medicine rotations did not use subject examinations very often (only 29% used a subject examination) and none of the Advanced Surgical Medicine rotations used a subject examination.

The majority of clerkships use the corresponding subject examination (e.g., 100% of Psychiatry rotations use the NBME Psychiatry Subject Examination) ([Table 8](#)). Within Family Medicine, 49% of clerkships use the Family Medicine Core + Chronic + Musculoskeletal examination and 40% use the Family Medicine Core examination. While most clerkships use the examination associated with the content of the clerkship, some variation in examination usage still exists. For example, Ambulatory Medicine rotations most commonly use the Adult Ambulatory Medicine examination (71%), but 14% of Ambulatory Medicine rotations use the Medicine examination and 14% use the Family Medicine Core + Chronic examination. Also, 50% of Advanced Emergency Medicine clerkships use the Adult Ambulatory Medicine examination.

The most common academic reason for using subject examinations across clerkships is for course or clerkship assessment ([Table 9](#)). The range across disciplines is 25% for Advanced Pediatric Medicine to 100% for Advanced Emergency Medicine. Other common reasons include evaluation of mastery or minimal competence (11-21%), promotion requirement (5-14%), practice for the USMLE (5-12%), identifying students at risk (5-25%) and student self-assessment (3-25%).

The overwhelming majority of clerkships require their students to pass the NBME Subject Examination, with a range of 83% of Emergency Medicine clerkships to 100% of Adult Ambulatory Medicine and Advanced Internal Medicine clerkships ([Table 10](#)). However, 50% of Advanced Emergency Medicine and Advanced Pediatric Medicine clerkships did not require the examination and 50% were unsure whether or not it was required.

For five clerkships (Clinical Neurology, Family Medicine, OB/GYN, Psychiatry, and Surgery), the most common method for determining passing scores was the use of grading guidelines. Norms based on percentile rank were the most often used method for determining passing scores for four clerkships (Adult Ambulatory Medicine, Medicine, Pediatrics, and Emergency Medicine). Advanced Internal Medicine used norms based on mean scores most often. [Table 11](#) provides detailed results of variation in the methods for determining passing scores by discipline.

The 2015-16 minimum passing scores or percentile ranks used by the clerkships varied both within disciplines and across disciplines ([Table 12](#)). For example, for Family Medicine clerkships minimum passing scores ranged from 34 to 70 and for Obstetrics and Gynecology they ranges from 50 to 76. Percentile ranks ranged from 3 to 10 in Clinical Neurology to 5 to 60 for Adult Ambulatory Medicine.



Table 13 shows that most clerkships weight the subject examination between 11% and 50% of the final course or clerkship grade. The majority of Clinical Neurology, Family Medicine, Medicine, OB/GYN, Pediatrics, Psychiatry, Surgery, and Emergency Medicine clerkships weight the subject examination between 21% and 30% of the final course or clerkship grade. The majority of Adult Ambulatory Medicine clerkships weight the subject examination between 11% and 20% and Advanced Internal Medicine clerkships weight the subject examination between 41% and 50% of the final course or clerkship grade.

Use of the subject examination scores for determining honors-level performance ranged from a low of 57% for Clinical Neurology Clerkships to a high of 100% for Advanced Internal Medicine clerkships (Table 14).

For five clerkships (Adult Ambulatory Medicine, Family Medicine, Medicine, Pediatrics and Emergency Medicine), the most common method for determining honors scores was the use of norms based on annual academic year percentile rank. Grading guidelines were the most often used method for determining honors scores for two clerkships (Clinical Neurology and Surgery). For OB/GYN and Psychiatry, both annual academic year percentile rank and grading guidelines were the most common method for determining honors scores. Advanced Internal Medicine clerkships used norms based on mean scores most often. Table 15 provides detailed results of variation in the methods for determining honors scores by discipline.

The 2015-16 minimum honor scores or percentile ranks used by the clerkships varied both within disciplines and across disciplines (Table 16). For example, for Pediatrics clerkships minimum honor scores ranged from 35 to 90 and for Surgery they range from 71 to 90. Percentile ranks ranged from 3 to 90 in Clinical Neurology to 50 to 95 for Family Medicine.

Table 7 - NBME Subject Examination Usage

Use a NBME Subject Exam	Clerkship (percent of clerkships)												
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine	Advanced Surgical Medicine
Yes	88	95	91	95	97	95	100	100	72	67	56	29	0
No	13	5	9	5	3	5	0	0	28	33	44	71	100

**Table 8 - Breakdown of NBME Clinical and Advanced Clinical Examination (ACE) Usage**

Exam	Clerkship (percent of clerkships)												
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine	Advanced Surgical Medicine
Adult Ambulatory Medicine	71	0	1	0	0	0	0	1	0	50	0	0	0
Clinical Neurology	0	100	0	0	0	0	0	0	0	0	0	0	0
Family Medicine Core	0	0	40	0	0	0	0	0	0	0	0	0	0
Family Medicine Core + Chronic	14	0	8	0	0	0	0	0	0	0	0	0	0
Family Medicine Core + Chronic + Musculoskeletal	0	0	49	0	0	0	0	0	0	0	0	0	0
Medicine	14	0	1	99	0	0	0	0	0	0	0	0	0
Ob/Gyn	0	0	0	0	100	0	0	0	0	0	0	0	0
Pediatrics	0	0	0	0	0	100	0	0	0	0	0	0	0
Psychiatry	0	0	0	0	0	0	100	1	0	0	0	0	0
Surgery	0	0	0	0	0	0	0	98	0	0	0	0	0
Emergency Medicine ACE	0	0	0	0	0	0	0	0	100	50	0	0	0
Internal Medicine ACE	0	0	0	1	0	0	0	0	0	0	100	0	0
Pediatrics ACE	0	0	0	0	0	0	0	0	0	0	0	100	0
Surgery ACE	0	0	0	0	0	0	0	0	0	0	0	0	0

Table 9 - Academic Purposes for Using the NBME Subject Examinations

Purpose	Clerkship (percent of clerkships)											
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine
Advanced placement	0	0	1	1	1	1	0	1	0	0	0	0
Course /clerkship assessment	43	40	42	36	40	38	42	37	56	100	36	25
End-of-year assessment	0	3	2	3	4	3	2	3	3	0	7	0
Identifying at-risk students	14	9	7	8	7	9	6	8	5	0	14	25
Make-up/remediation	0	5	4	6	7	5	5	7	0	0	14	0
Mastery/minimal competency	21	15	12	15	11	13	16	14	13	0	14	13
Part of review course	0	1	1	0	1	0	1	1	0	0	0	13
Promotion requirement	0	7	12	11	9	13	13	10	5	0	14	0
Practice for USMLE	7	12	12	12	11	11	11	11	5	0	0	0
Student self-assessment	14	6	6	5	8	6	3	7	13	0	0	25
Other, please specify	0	1	1	2	0	1	0	1	0	0	0	0

Table 10 - Clerkships Requiring Students to Pass NBME Subject Examinations

Require to Pass the Exam	Clerkship (percent of clerkships)											
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Emergency Medicine	Advanced Internal Medicine	Advanced Pediatric Medicine
Yes	100	96	93	94	91	94	88	89	83	0	100	0
No	0	4	7	4	8	6	9	9	9	50	0	50
Unsure	0	0	0	2	1	0	3	2	9	50	0	50

Table 11 - Methods for Determining Passing Score

Method	Clerkship (percent of clerkships)									
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Internal Medicine
Grading Guidelines	22	49	32	26	46	28	37	40	24	17
Norms (based on academic year or ref. group), using a specific score	11	10	10	13	10	16	15	14	28	33
Norms (based on academic year or ref. group), using percentile rank	44	16	25	35	26	31	29	21	44	17
Quarterly Norms using a specific score based on means	11	1	3	8	2	7	1	4	0	0
Quarterly Norms, using percentile rank	0	17	27	14	10	12	15	14	0	17
Other, please specify	11	7	4	4	5	6	3	6	4	17

Table 12 - Range of Minimum Passing Scores or Percentile Ranks during the 2015-2016 Academic Year

Passing	Clerkship									
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Internal Medicine
Specific Score	57-65	54-65	34-70	45-70	50-76	50-65	50-70	50-75	55-65	56-58
Percentile Rank	5-60	3-10	4-12	3-15	5-22	3-12	5-12	3-15	5-10	5-10

Table 13 - Weight Given to the Subject Examination Score for Final Course/Clerkship Grade

Weight	Clerkship (percent of clerkships)									
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Internal Medicine
1 - 10%	0	2	11	8	5	7	5	4	5	20
11 - 20%	57	24	14	20	19	20	15	17	26	0
21 - 30%	29	29	44	41	29	44	39	33	47	0
31 - 40%	14	29	14	21	24	18	20	22	16	20
41 - 50%	0	11	13	10	16	8	12	20	0	40
51 - 60%	0	0	2	0	3	2	1	0	5	20
61 - 70%	0	2	0	0	0	0	0	0	0	0
71% or more	0	5	3	1	3	2	8	5	0	0



Table 14 - Clerkships Using NBME Subject Exam to Determine Honors

Determine Honors	Clerkship (percent of clerkships)									
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Internal Medicine
Yes	71	57	63	64	69	61	71	67	63	100
No	29	36	34	34	30	34	22	29	37	0
Unsure	0	7	3	2	1	6	8	5	0	0

**Table 15 - Methods for Determining Honors Score**

Method	Clerkship (percent of clerkships)									
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Internal Medicine
Grading Guidelines	0	30	15	14	31	24	22	38	29	17
Norms (based on academic year or ref. group), using a specific score	17	14	9	17	14	15	16	9	21	33
Norms (based on academic year or ref. group), using percentile rank	50	21	33	36	31	32	22	19	43	17
Quarterly Norms using a specific score based on means	0	2	2	8	6	5	3	5	0	0
Quarterly Norms, using percentile rank	33	16	28	12	3	13	19	17	0	17
Other, please specify		16	13	13	15	11	17	12	7	17

Table 16 – Range of Minimum Honors Score or Percentile Rank during the 2015-2016 Academic Year

Honors	Clerkship									
	Adult Ambulatory Medicine	Clinical Neurology	Family Medicine	Medicine	Ob/Gyn	Pediatrics	Psychiatry	Surgery	Emergency Medicine	Advanced Internal Medicine
Specific Score	67-75	55-86	50-88	64-85	60-87	35-90	57-90	71-90	72-86	80
Percentile Rank	50	3-90	50-95	50-85	50-94	50-90	21-90	50-90	60-90	75-82