



TEXAS TECH UNIVERSITY  
HEALTH SCIENCES CENTER<sup>™</sup>  
EL PASO

Paul L. Foster School of Medicine

**Annual**  
**Medical Education Program**  
**Evaluation Report**  
**2018-2019**

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Prepared by the  
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## Executive Summary

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### Background

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The purpose of this report is to provide the Curriculum and Education Policy Committee (CEPC) medical education program data results on evaluation and outcomes for the purposes identified in the medical education program policy for [Curriculum Review](#), as well as in the Annual Medical Education Program Evaluation [Report Policy](#). The medical program evaluation results and outcomes data provided in this report reflect the most recent academic year's results as well as historical data, when available or applicable.

The report is structured in 4 main sections:

First, an overview of the medical education curriculum organization and scheme, to include Program Goals and Objectives (PGO) mapped to the curriculum, including content and assessments.

Second, a section on CEPC common policy and LCME accreditation monitoring Items. These are items chosen by the CEPC to be tracked and monitored continually, either for LCME accreditation purposes, Medical Education PGO compliance, and/or medical education policy adherence. Items reported in this section may also appear in another section of the report.

Third, a section which provides all medical education program evaluation results by program phase:

- In-house program evaluation data results presented by education program phase, to include all Integrated Curricular Elements Program (ICE) requirements' outcomes, and Scholarly Activity and Research Program (SARP) outcomes.

And last, all medical education program benchmarks and outcomes results:

- Program outcomes data: Graduation rates, Graduate placement (Match data), and AAMC examination data, indicators, and benchmarks. This is followed by data results from the TTUHSC El Paso PLFSOM Program Director /Graduate Student Survey.

### Methodology

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In general, the report structure follows the medical education program curriculum organization in that pre-clerkship phase results are followed by clerkship phase results, independently of report section. Since the ICE Program contains requirements which intentionally span the pre-clerkship and clerkship phases, the results for ICE Program element that are reported here appear within the medical school year and phase where the element occurs (See figure 1 below). Every section and subsection of the report is preceded by an introductory overview of the data presented, to include methodology if appropriate, with links to more in-depth information related to that section, when available.

Figure 1: ICE Program Elements per curriculum phase

Element	M1	M2	M3	M4
ICE Elements embedded in coursework ▷ Advanced Cardiac Life Support (ACLS) ▷ Tankside Grand Rounds ▷ NBME Comprehensive Basic Science Exam		✓		
Comprehensive End of Year Exam	✓			
Longitudinal Survey	✓	✓	✓	✓
Integration Intersession			✓	
End of Year OSCE			✓	
STEP 1		✓		
NBME Comprehensive Clinical Sciences Exam			✓	
STEP 2 (CK & CS)				✓

entry AY 2019-20

## Medical Education Curriculum Overview

### Curriculum Schematics - Changes

During AY 2018-2019 the PLFSOM's CEPC reviewed the Clerkship phase and decided to implement further improvements to the curriculum beginning AY 2019-2020. It resolved to eliminate the PICE 7001 course which took place at the end of the MS2 year and place all key curricular elements of the course in other core courses in the MS 2 year. This change resulted in an overall increase of 1 hour to the degree plan; the Academic Council reviewed the proposed change in April 2019 and the THECB was appropriately notified. The following graphics show the curriculum schematics for AY 2018-2019, and changes as approved for AY 2019-2020:

Figure 2: AY 2018-2019 Curriculum Schematics for Pre-Clerkship Courses





Figure 3: AY 2018-2019 Curriculum Schematics for Clerkship Courses

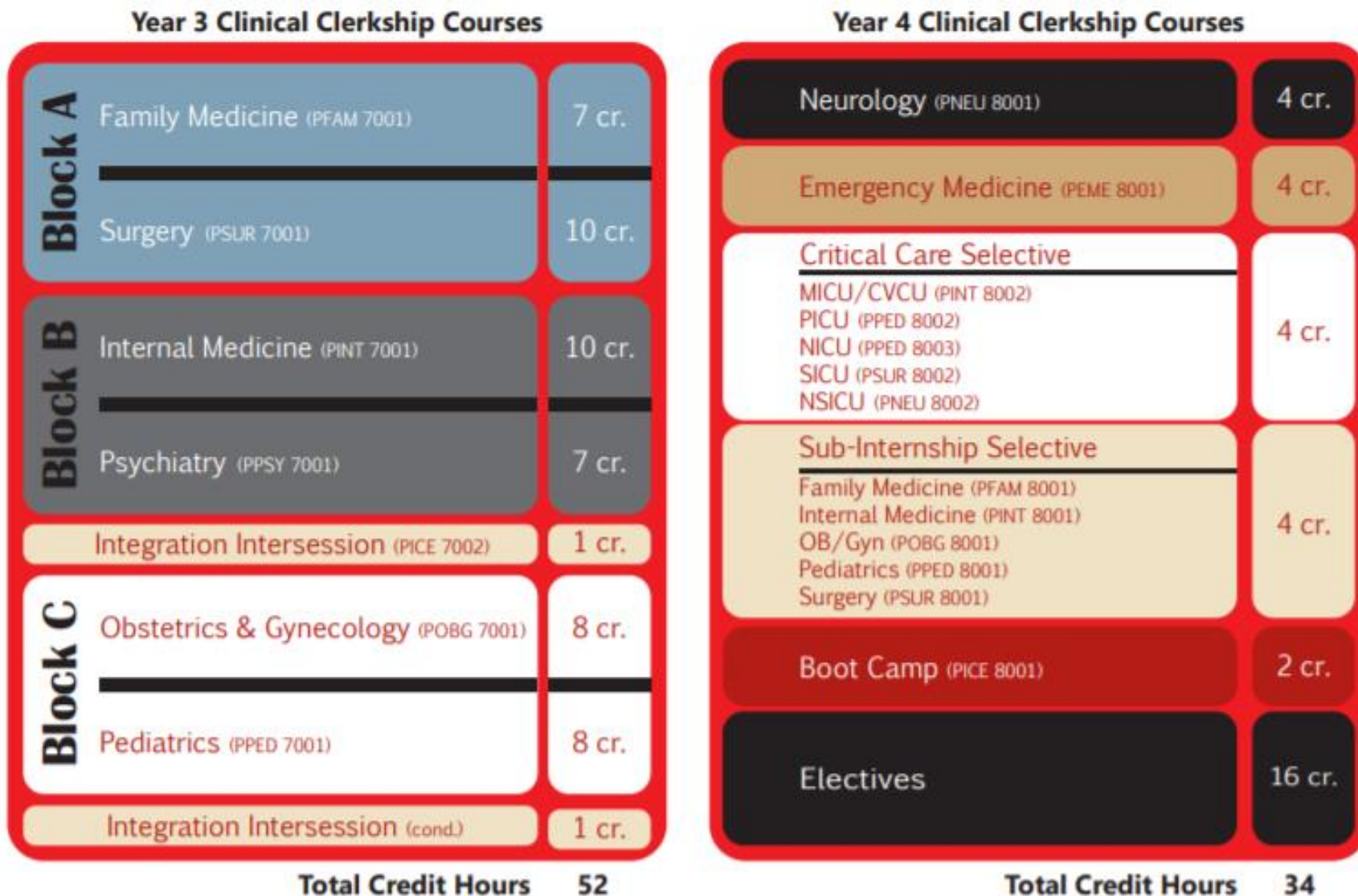
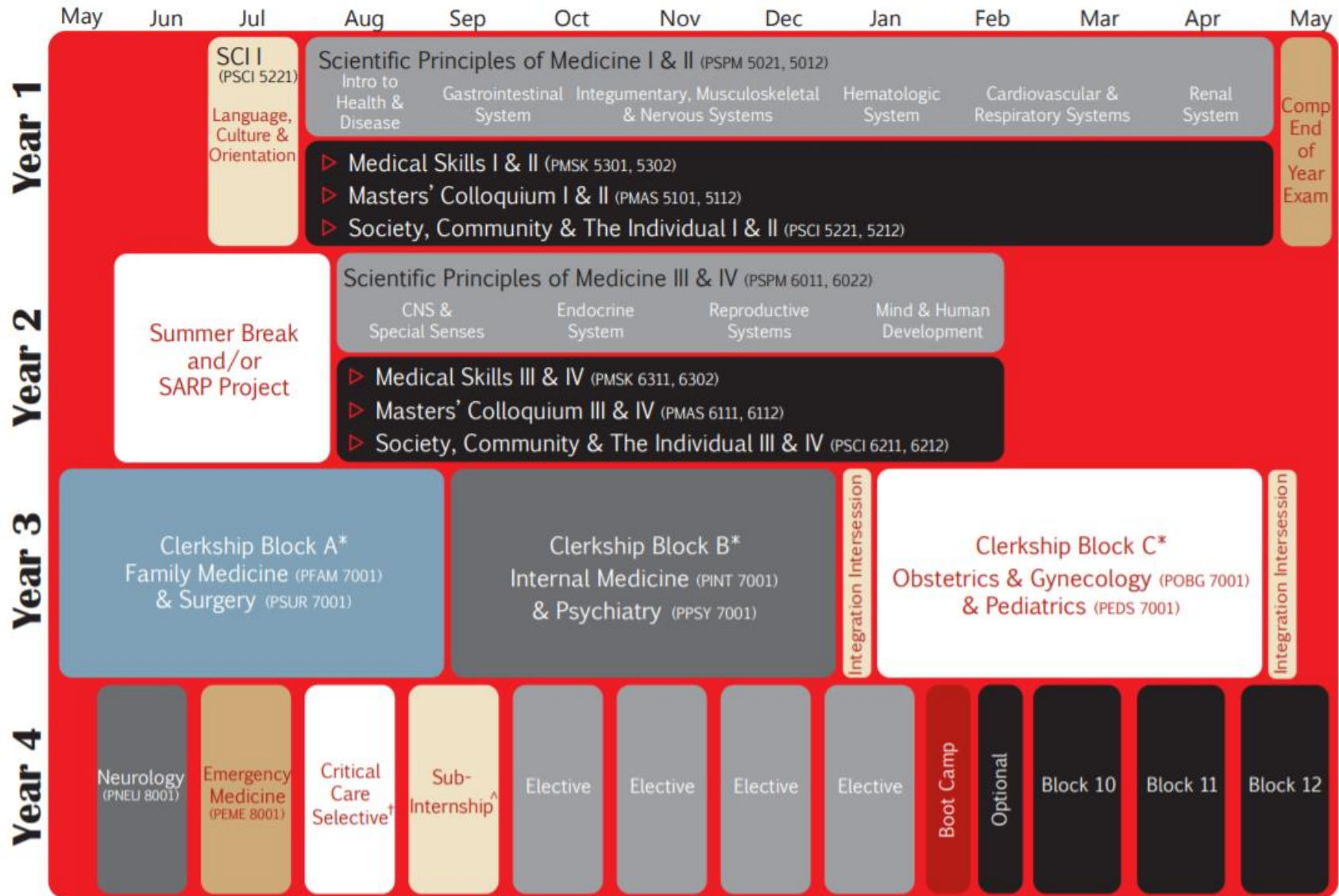


Figure 4: AY 2019-2020 Curriculum Schematics with approved change.



\* Order of Y3 Clerkship Blocks and Y4 Clerkship Courses vary by student

† Student choice: MICU/CVCU (PINT 8002), PICU (PPED 8002), NICU (PPED 8003), SICU (PSUR 8002) or NSICU (PNEU 8002)

^ Student choice: Family Medicine (PFAM 8001), Internal Medicine (PINT 8001), Ob-Gyn (POBG 8001), Pediatrics (PPED 8001) or Surgery (PSUR 8001)

entry AY 2019-20

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## Program Goals and Objectives Mapped to Curriculum

The Medical Education program goals and objectives are outcome-based statements that guide the instruction and assessment of medical students as they develop the knowledge and abilities expected of a physician. All elements of the PLFSOM curriculum are derived from and contribute to the fulfillment of one or more of the medical education program's goals and objectives.

The CEPC continuously reviews the individual components of the curriculum as well the curriculum as a whole and, as part of the process, it requires that each course/clerkship syllabus identify the PGOs it addresses.

The following tables provide mapping of the PGOs by course and assessments, as reflected in the curriculum syllabi. Assessment mapping is only provided for the Pre-Clerkship phase.

[\(Link to full CHAMP PGO Report for AY 18-19\)](#)

### Competency Domain: 1 Patient Care:

Overall Goal: Provide patient-centered care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

- 1.1 Gather essential information about patients and their conditions through history taking, physical examination, and the use of laboratory data, imaging studies, and other tests.
- 1.2 Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- 1.3 For a given clinical presentation, use data derived from the history, physical examination, imaging, and/or laboratory investigation to categorize the disease process and generate and prioritize a focused list of diagnostic considerations.
- 1.4 Organize and prioritize responsibilities in order to provide care that is safe, efficient, and effective.
- 1.5 Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.
- 1.6 Describe and propose treatments appropriate to the patient's condition and preferences.
- 1.7 Accurately document history, physical examination, assessment, investigatory steps and treatment plans in the medical record.
- 1.8 Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.
- 1.9 Provide preventative health care services and promote health in patients, families, and communities.
- 1.10 Demonstrates and applies understanding of key issues in performing procedures and mitigating complications, and demonstrates reliable mechanical skills in performing the general procedures of a physician.

Table 1: 2018-2019 Syllabi Mapping for PGO 1: Patient Care

Program Goal 1: Patient Care	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	1.10
Master's Colloquium	✓	✓		✓		✓		✓	✓	
Medical Skills	✓	✓	✓		✓	✓	✓	✓	✓	✓
Scientific Principles of Medicine	✓	✓	✓			✓				
Society, Community, and the Individual	✓	✓						✓	✓	
Clinical Preparation Course	✓	✓	✓		✓	✓				
Block A	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Family Medicine Clerkship	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Surgery Clerkship	✓	✓	✓	✓	✓	✓	✓	✓		✓
Block B	✓	✓	✓			✓				

Program Goal 1: Patient Care	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	1.10
Internal Medicine Clerkship	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Psychiatry Clerkship	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Block C	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Obstetrics/Gynecology Clerkship	✓	✓	✓	✓	✓	✓	✓		✓	✓
Pediatrics Clerkship	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Emergency Medicine Clerkship	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Neurology Clerkship	✓	✓	✓		✓	✓			✓	✓
CVICU	✓				✓	✓	✓	✓		
MICU		✓	✓	✓		✓	✓	✓		
PICU	✓		✓	✓	✓	✓	✓	✓	✓	✓
NICU	✓	✓	✓	✓	✓	✓	✓	✓		✓
NSICU		✓	✓	✓		✓	✓	✓		
SICU	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Family Medicine Sub-Internship	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Internal Medicine Sub-Internship	✓	✓	✓	✓	✓	✓	✓	✓	✓	
OB/Gynecology Sub-Internship	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Surgery Sub-Internship	✓	✓	✓	✓	✓	✓	✓	✓		✓
Pediatrics Sub-Internship	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Scholarly Activity and Research Project										

Table 2: Pre-Clerkship Assessment Mapping for PGO 1: Patient Care

Medical Program Objective	Outcome Measure(s) for Objective	Course
1.1: Gather essential information about patients and their conditions through history taking, physical examination, and the use of laboratory data, imaging studies, and other tests.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Narrative Assessment (SCI I-IV Small-group interviewing skills; community health experience)	SCI
	Exam – Institutionally Developed, Written/Computer-based (Weekly SPM formative exams; End-of-unit SPM summative exams)	SPM
	Clinical Performance Rating/Checklist (SP checklist criteria – learning encounter)	MSK

Medical Program Objective	Outcome Measure(s) for Objective	Course
	Multisource Assessment (Faculty debriefing following each encounter)	MSK
	Stimulated recall (SPERRSA video SOAP note review and discussion)	MSK
	Self-assessment (SPERRSA video SOAP note review and discussion)	MSK
	Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE; Open Lab practice sessions)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium I & II
1.2: Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.	Exam – Institutionally Developed, Written/Computer-based (Weekly SPM formative exams; End-of-unit SPM summative exams)	SPM
	Participation (Procedure skill building activities with feedback)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium I & II
1.3: For a given clinical presentation, use data derived from the history, physical examination, imaging, and/or laboratory investigation to categorize the disease process and generate and prioritize a focused list of diagnostic considerations.	Exam – Institutionally Developed, Written/Computer-based (Weekly SPM formative exams; End-of-unit SPM summative exams)	SPM
	Multisource Assessment (Weekly learning encounter debrief)	MSK
	Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Exam – Nationally Normed/Standardized, Subject (NBME CBSE)	PICE (Clerkship Prep)

Medical Program Objective	Outcome Measure(s) for Objective	Course
1.4: Organize and prioritize responsibilities in order to provide care that is safe, efficient, and effective.	Participation (Facilitated discussion)	Masters' Colloquium III & IV
1.5: Recognize a patient requiring urgent or emergent care, and initiate evaluation and management.	Clinical Performance Rating/Checklist (SP checklist criteria – learning encounter)	MSK
	Multisource Assessment (Faculty debriefing following each encounter)	MSK
	Stimulated recall (SPERRSA video SOAP note review and discussion)	MSK
	Self-assessment (SPERRSA video SOAP note review and discussion)	MSK
	Participation (manikin simulations activities with feedback)	MSK
	Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
1.6: Describe and propose treatments appropriate to the patient's condition and preferences.	Exam – Institutionally Developed, Written/Computer-based (Weekly SPM formative exams; End-of-unit SPM summative exams)	SPM
	Participation (Procedure skill building activities with feedback)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
1.7: Accurately document history, physical examination, assessment, investigatory steps and treatment plans in the medical record.	Clinical Documentation Review (Weekly learning encounter SOAP note; OSCE exam SOAP note; SPERRSA video SOAP note review and discussion)	MSK
	Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)	MSK

Medical Program Objective	Outcome Measure(s) for Objective	Course
1.8: Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.	Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter)	MSK
	Participation (Facilitated discussion)	Masters' Colloquium
	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
1.9: Provide preventative health care services and promote health in patients, families, and communities.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter)	MSK
	Participation (Facilitated discussion)	Masters' Colloquium I & II
	Clinical Documentation Review (Weekly learning encounter SOAP note; OSCE exam SOAP note; SPERRSA video SOAP note review and discussion)	MSK
1.10: Demonstrates and applies understanding of key issues in performing procedures and mitigating complications, and demonstrates reliable mechanical skills in performing the general procedures of a physician.	Participation (Procedure skill building activities with feedback)	MSK

### Competency Domain: 2 Knowledge for Practice

Overall Goal: Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care.

- 2.1 Compare and contrast normal variation and pathological states in the structure and function of the human body across the life span.
- 2.2 Apply established and emerging foundational/basic science principles to health care.
- 2.3 Apply evidenced-based principles of clinical sciences to diagnostic and therapeutic decision-making and clinical problem solving.
- 2.4 Apply principles of epidemiological sciences to the identification of health problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations.
- 2.5 Apply principles of social-behavioral sciences to patient care including assessment of the impact of psychosocial, cultural, and societal influences on health, disease, care seeking, adherence and barriers to care.

2.6 Demonstrate an understanding of and potential for engagement in the creation, dissemination, and application of new health care knowledge.

Table 3: 2018-2019 Syllabi Mapping for PGO 2: Knowledge for Practice

Program Goal :	2.1	2.2	2.3	2.4	2.5	2.6
Master's Colloquium			✓	✓	✓	✓
Medical Skills			✓		✓	
Scientific Principles of Medicine	✓	✓	✓			
Society, Community, and the Individual	✓	✓	✓	✓	✓	✓
Clinical Preparation Course	✓	✓	✓	✓	✓	
Block A	✓	✓	✓	✓	✓	
Family Medicine Clerkship	✓	✓	✓	✓	✓	✓
Surgery Clerkship	✓	✓	✓	✓		
Block B	✓	✓	✓		✓	
Internal Medicine Clerkship	✓	✓	✓	✓	✓	✓
Psychiatry Clerkship	✓	✓	✓	✓	✓	✓
Block C	✓	✓	✓	✓	✓	✓
Obstetrics/Gynecology Clerkship	✓	✓	✓	✓		✓
Pediatrics Clerkship	✓	✓	✓	✓	✓	✓
Emergency Medicine Clerkship		✓	✓	✓	✓	
Neurology Clerkship	✓	✓	✓	✓		
CVICU	✓	✓	✓	✓	✓	✓
MICU		✓	✓		✓	
PICU	✓	✓	✓	✓	✓	✓
NICU	✓	✓	✓		✓	✓
NSICU		✓	✓		✓	
SICU	✓	✓	✓	✓	✓	✓
Family Medicine Sub-Internship		✓	✓	✓		✓
Internal Medicine Sub-Internship		✓	✓	✓		✓
OB/Gynecology Sub-Internship		✓	✓	✓		✓
Surgery Sub-Internship	✓	✓	✓	✓	✓	✓
Pediatrics Sub-Internship		✓	✓	✓	✓	✓
Scholarly Activity and Research Project						✓

Table 4: Assessment Mapping for PGO 2: Knowledge for Practice

Medical Program Objective	Outcome Measure(s) for Objective	Course
2.1: Compare and contrast normal variation and	Exam – Institutionally Developed, Written/Computer-based (Weekly SPM	SPM



Medical Program Objective	Outcome Measure(s) for Objective	Course
pathological states in the structure and function of the human body across the life span.	formative exams; End-of-unit SPM summative exams)	
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Exam – Nationally Normed/Standardized, Subject (NBME CBSE)	PICE (Clerkship Prep)
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
2.2: Apply established and emerging foundational/basic science principles to health care.	Exam – Institutionally Developed, Written/Computer-based (Weekly SPM formative exams; End-of-unit SPM summative exams)	SPM
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Exam – Nationally Normed/Standardized, Subject (NBME CBSE)	PICE (Clerkship Prep)
2.3: Apply evidenced-based principles of clinical sciences to diagnostic and therapeutic decision-making and clinical problem solving.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; graded problem sets)	SCI
	Exam – Institutionally Developed, Written/Computer-based (Weekly SPM formative exams; End-of-unit SPM summative exams)	SPM
	Multisource Assessment (Weekly learning encounter debrief)	MSK
	Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Exam – Nationally Normed/Standardized, Subject (NBME CBSE)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
2.4: Apply principles of epidemiological sciences to the identification of health	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; graded problem sets)	SCI

Medical Program Objective	Outcome Measure(s) for Objective	Course
problems, risk factors, treatment strategies, resources, and disease prevention/health promotion efforts for patients and populations.	Exam – Nationally Normed/Standardized, Subject (NBME CBSE)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium III & IV
2.5: Apply principles of social-behavioral sciences to patient care including assessment of the impact of psychosocial, cultural, and societal influences on health, disease, care seeking, adherence and barriers to care.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter),	MSK
	Clinical Documentation Review (Dialysis Center Visit note)	MSK
	Exam – Nationally Normed/Standardized, Subject (NBME CBSE)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
2.6: Demonstrate an understanding of and potential for engagement in the creation, dissemination, and application of new health care knowledge.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; graded problem sets)	SCI
	Research or Project Assessment (SARP Project Plan B Evaluation Rubric, SARP Final Report Evaluation Rubric, SARP Poster Presentation Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Participation (Facilitated discussion)	Masters' Colloquium III & IV

### Competency Domain: 3 Practice-Based Learning & Improvement

Overall Goal: Demonstrate the ability to investigate and evaluate the care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning.

- 3.1 Identify and perform learning activities to address gaps in one's knowledge, skills, and/or attitudes.
- 3.2 Demonstrate a basic understanding of quality improvement principles and their application to analyzing and solving problems in patient and/or population-based care.
- 3.3 Accept and incorporate feedback into practice.
- 3.4 Locate, appraise, and assimilate evidence from scientific studies related to patients' health problems.

3.5 Obtain and utilize information about individual patients, populations, or communities to improve care.

Table 5: 2018-2019 Syllabi Mapping for PGO 3: Practice-Based Learning & Improvement

<b>Program Goal :</b>	<b>3.1</b>	<b>3.2</b>	<b>3.3</b>	<b>3.4</b>	<b>3.5</b>
Master's Colloquium	✓				✓
Medical Skills			✓		
Scientific Principles of Medicine					
Society, Community, and the Individual	✓	✓		✓	✓
Clinical Preparation Course	✓				
Block A		✓		✓	✓
Family Medicine Clerkship	✓	✓	✓	✓	✓
Surgery Clerkship	✓		✓	✓	
Block B					
Internal Medicine Clerkship	✓	✓	✓	✓	✓
Psychiatry Clerkship	✓	✓	✓	✓	✓
Block C	✓	✓	✓	✓	✓
Obstetrics/Gynecology Clerkship	✓	✓	✓	✓	✓
Pediatrics Clerkship	✓	✓	✓	✓	✓
Emergency Medicine Clerkship	✓		✓	✓	✓
Neurology Clerkship	✓	✓	✓	✓	✓
CVICU	✓	✓	✓	✓	✓
MICU	✓			✓	
PICU	✓	✓	✓	✓	✓
NICU	✓	✓		✓	✓
NSICU	✓				
SICU	✓	✓		✓	✓
Family Medicine Sub-Internship	✓		✓	✓	✓
Internal Medicine Sub-Internship	✓		✓	✓	✓
OB/Gynecology Sub-Internship	✓		✓	✓	✓
Surgery Sub-Internship	✓	✓	✓	✓	✓
Pediatrics Sub-Internship	✓		✓	✓	✓
Scholarly Activity and Research Project	✓		✓		

Table 6: Assessment Mapping for PGO 3: Practice Based Learning and Improvement

<b>Medical Program Objective</b>	<b>Outcome Measure(s) for Objective</b>	<b>Course</b>
3.1: Identify and perform learning activities to address	Research or Project Assessment (SARP Project Plan B Evaluation Rubric, SARP Final	SARP

Medical Program Objective	Outcome Measure(s) for Objective	Course
gaps in one’s knowledge, skills and/or attitudes.	Report Evaluation Rubric, SARP Poster Presentation Rubric)	
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Exam – Institutionally Developed, Written/Computer-based (SCI -Graded problem sets)	SCI
	Narrative Assessment (Self-Directed Learning Plan Rubric)	PICE (Clerkship Prep)
	Self-Assessment (Self-Directed Learning Plan Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment; Student Presentation Assessment Rubric)	Masters' Colloquium III & IV
3.2: Demonstrate a basic understanding of quality improvement principles and their application to analyzing and solving problems in patient and/or population-based care.	NA	NA
3.3: Accept and incorporate feedback into practice.	Participation (Mastery based assessment of physical examination skills; SP encounter debrief)	MSK
	Research or Project Assessment (SARP Project Plan B Evaluation Rubric, SARP Final Report Evaluation Rubric, SARP Poster Presentation Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
3.4: Locate, appraise and assimilate evidence from scientific studies related to patients’ health problems.	Stimulated recall (SPERRSA video review and discussion)	MSK
	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; graded problem sets)	SCI

Medical Program Objective	Outcome Measure(s) for Objective	Course
3.5: Obtain and utilize information about individual patients, populations, or communities to improve care.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Research or Project Assessment ('Community assessment' presentation)	SCI
	Participation (Facilitated discussion)	Masters' Colloquium III & IV

### Competency Domain: 4 Interpersonal and Communication Skills

Overall Goal: Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families and health professionals.

- 4.1 Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.
- 4.2 Communicate effectively with colleagues and other health care professionals.
- 4.3 Communicate with sensitivity, honesty, compassion, and empathy.
- 4.4 Maintain comprehensive and timely medical records.

Table 7: 2018-2019 Syllabi Mapping for PGO 4: Interpersonal and Communication Skills

Program Goal :	4.1	4.2	4.3	4.4
Master's Colloquium	✓	✓	✓	
Medical Skills	✓	✓	✓	✓
Scientific Principles of Medicine		✓		
Society, Community, and the Individual	✓	✓	✓	✓
Clinical Preparation Course	✓	✓	✓	✓
Block A	✓	✓	✓	✓
Family Medicine Clerkship	✓	✓	✓	✓
Surgery Clerkship	✓	✓	✓	✓
Block B				
Internal Medicine Clerkship	✓	✓	✓	✓
Psychiatry Clerkship	✓	✓	✓	✓
Block C	✓	✓	✓	✓
Obstetrics/Gynecology Clerkship	✓	✓	✓	✓
Pediatrics Clerkship	✓	✓	✓	✓
Emergency Medicine Clerkship	✓	✓	✓	
Neurology Clerkship	✓	✓	✓	✓
CVICU	✓	✓		
MICU	✓	✓		
PICU	✓	✓	✓	✓
NICU	✓	✓	✓	✓
NSICU	✓	✓		
SICU	✓	✓	✓	
Family Medicine Sub-Internship	✓	✓		

<b>Program Goal :</b>	<b>4.1</b>	<b>4.2</b>	<b>4.3</b>	<b>4.4</b>
<b>Internal Medicine Sub-Internship</b>	✓	✓	✓	
<b>OB/Gynecology Sub-Internship</b>	✓	✓		
<b>Surgery Sub-Internship</b>	✓	✓	✓	✓
<b>Pediatrics Sub-Internship</b>	✓	✓	✓	✓
<b>Scholarly Activity and Research Project</b>		✓		

Table 8: Assessment Mapping for PGO 4: Interpersonal and Communication Skills

<b>Medical Program Objective</b>	<b>Outcome Measure(s) for Objective</b>	<b>Course</b>
4.1: Communicate effectively with patients and families across a broad range of socio-economic and cultural backgrounds.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Research or Project Assessment ('Cultural intelligence' presentation)	SCI
	Narrative Assessment (Community health experience)	SCI
	Participation (Spanish language assessment)	SCI
	Exam – Institutionally Developed, Oral (Spanish comprehension quizzes, Spanish oral conversation evaluations, Spanish doctor/patient oral interview exam)	SCI
	Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter)	MSK
	Peer Assessment (Peer feedback – learning encounter)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
4.2: Communicate effectively with colleagues and other health care professionals	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Participation (TeamSTEPS and related IPE activities)	SCI
	Narrative Assessment (Small-group assessment rubric)	SPM

Medical Program Objective	Outcome Measure(s) for Objective	Course
	Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter)	MSK
	Peer Assessment (Peer feedback – learning encounter)	MSK
	Multisource Assessment (Weekly learning encounter debrief)	MSK
	Research or Project Assessment (SARP Project Plan B Evaluation Rubric, SARP Final Report Evaluation Rubric, SARP Poster Presentation Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
4.3: Communicate with sensitivity, honesty, compassion, and empathy.	Narrative Assessment (Community health experience; small-group discussion)	SCI
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
4.4: Maintain comprehensive and timely medical records.	Narrative Assessment (Community health experience)	SCI
	Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter)	MSK
	Peer Assessment (Peer feedback – learning encounter)	MSK
	Clinical Documentation Review (Weekly learning encounter SOAP note; OSCE exam SOAP note; SPERRSA video SOAP note review and discussion)	MSK

Medical Program Objective	Outcome Measure(s) for Objective	Course
	Exam – Institutionally Developed, Clinical Performance (End-of Unit OSCE)	MSK
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)

### Competency Domain: 5 Professionalism

Overall Goal: Demonstrate understanding of and behavior consistent with professional responsibilities and adherence to ethical principles.

- 5.1 Demonstrate sensitivity, compassion, integrity and respect for all people.
- 5.2 Demonstrate knowledge of and appropriately apply ethical principles pertaining to patient privacy, autonomy, and informed consent.
- 5.3 Demonstrate accountability to patients and fellow members of the health care team.
- 5.4 Demonstrate and apply knowledge of ethical principles pertaining to the provision or withholding of care.
- 5.5 Demonstrate and apply knowledge of ethical principles pertaining to health care related business practices and health care administration, including compliance with relevant laws, policies, regulations, and the avoidance of conflicts of interest.
- 5.6 Demonstrate honesty in all professional and academic interactions.
- 5.7 Meet professional and academic commitments and obligations.

Table 9: 2018-2019 Syllabi Mapping for PGO 5: Professionalism

Program Goal :	5.1	5.2	5.3	5.4	5.5	5.6	5.7
Master's Colloquium	✓	✓	✓	✓	✓	✓	✓
Medical Skills	✓	✓					
Scientific Principles of Medicine	✓		✓			✓	✓
Society, Community, and the Individual	✓						✓
Clinical Preparation Course	✓		✓			✓	✓
Block A	✓	✓				✓	✓
Family Medicine Clerkship	✓	✓	✓	✓	✓	✓	✓
Surgery Clerkship	✓	✓	✓	✓	✓	✓	✓
Block B							
Internal Medicine Clerkship	✓	✓	✓		✓	✓	✓
Psychiatry Clerkship	✓	✓	✓	✓	✓	✓	✓
Block C	✓	✓	✓	✓	✓	✓	✓
Obstetrics/Gynecology Clerkship	✓		✓			✓	✓
Pediatrics Clerkship	✓	✓	✓	✓	✓	✓	✓
Emergency Medicine Clerkship	✓	✓	✓			✓	✓
Neurology Clerkship	✓	✓	✓	✓	✓	✓	✓
CVICU	✓	✓	✓		✓		✓
MICU	✓	✓	✓	✓		✓	✓
PICU	✓	✓	✓	✓	✓	✓	✓
NICU	✓	✓	✓	✓		✓	✓
NSICU	✓		✓	✓			✓



Program Goal :	5.1	5.2	5.3	5.4	5.5	5.6	5.7
SICU	✓	✓	✓	✓			✓
Family Medicine Sub-Internship	✓	✓	✓		✓		✓
Internal Medicine Sub-Internship	✓	✓	✓	✓	✓	✓	✓
OB/Gynecology Sub-Internship	✓	✓	✓		✓		✓
Surgery Sub-Internship	✓	✓	✓			✓	✓
Pediatrics Sub-Internship	✓	✓	✓		✓		✓
Scholarly Activity and Research Project	✓	✓			✓	✓	✓

Table 10: Assessment Mapping for PGO 5: Professionalism

Medical Program Objective	Outcome Measure(s) for Objective	Course
5.1: Demonstrate sensitivity, compassion, integrity and respect for all people.	Narrative Assessment (Community health experience)	SCI
	Narrative Assessment (Small-group assessment rubric)	SPM
	Narrative Assessment (Professionalism Event Card)	SPM
	Clinical Performance Rating/Checklist (SP checklist criteria and verbal feedback – learning encounter)	MSK
	Research or Project Assessment (SARP Project Plan B Evaluation Rubric, SARP Final Report Evaluation Rubric, SARP Poster Presentation Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment; Professionalism assessment rubric)	Masters' Colloquium I & II
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment; Student presentation assessment rubric; Professionalism assessment rubric)	Masters' Colloquium III & IV
5.2: Demonstrate knowledge of and appropriately apply ethical principles pertaining to patient	Clinical Performance Rating/Checklist (SP checklist criteria – learning encounter; Professionalism criteria – learning encounter)	MSK

<b>Medical Program Objective</b>	<b>Outcome Measure(s) for Objective</b>	<b>Course</b>
privacy, autonomy and informed consent.	Exam – Nationally Normed/Standardized, Subject (CITI training certification exam)	SARP
	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment; Professionalism assessment rubric)	Masters' Colloquium
5.3: Demonstrate accountability to patients and fellow members of the health care team.	Narrative Assessment (Small-group assessment rubric)	SPM
	Narrative Assessment (Professionalism Event Card)	SPM
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Professionalism assessment rubric)	Masters' Colloquium
5.4: Demonstrate and apply knowledge of ethical principles pertaining to the provision or withholding of care.	Participation (Facilitated discussion)	Masters' Colloquium I & II
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment; Professionalism assessment rubric)	Masters' Colloquium
5.5: Demonstrate and apply knowledge of ethical principles pertaining to health care related business practices and health care administration, including compliance with relevant laws, policies, regulations and the avoidance of conflicts of interest.	Exam – Nationally Normed/Standardized, Subject (CITI training certification exam)	SARP
	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment; Professionalism assessment rubric)	Masters' Colloquium
5.6: Demonstrate honesty in all professional and academic interactions.	Narrative Assessment (Small-group assessment rubric)	SPM
	Narrative Assessment (Professionalism Event Card)	SPM
	Research or Project Assessment (SARP Professionalism Rubric)	SARP
	Narrative Assessment (Course)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium

Medical Program Objective	Outcome Measure(s) for Objective	Course
	Narrative Assessment (Professionalism assessment rubric)	Masters' Colloquium
5.7: Meet professional and academic commitments and obligations.	Narrative Assessment (Professionalism Event Card)	SPM
	Research or Project Assessment (SARP Professionalism Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Professionalism assessment rubric)	Masters' Colloquium I & II
	Narrative Assessment (Student presentation assessment rubric; Professionalism assessment rubric)	Masters' Colloquium

### Competency Domain: 6 Systems-Based Practice

Overall Goal: Demonstrate an awareness of and responsiveness to the larger context and system of health care as well as the ability to call on other resources in the system to provide optimal care.

- 6.1 Describe the health system and its components, how the system is funded and how it affects individual and community health.
- 6.2 Demonstrate the ability to identify patient access to public, private, commercial, and/or community-based resources relevant to patient health and care.
- 6.3 Incorporate considerations of benefits, risks, and costs in patient and/or population care.
- 6.4 Describe appropriate processes for referral of patients and for maintaining continuity of care throughout transitions between providers and settings.

Table 11: 2018-2019 Syllabi Mapping for PGO 6: Systems-based Practice

Program Goal :	6.1	6.2	6.3	6.4
<b>Master's Colloquium</b>	✓	✓	✓	
<b>Medical Skills</b>				
<b>Scientific Principles of Medicine</b>				
<b>Society, Community, and the Individual</b>	✓	✓	✓	✓
<b>Clinical Preparation Course</b>				
<b>Block A</b>	✓		✓	✓
<b>Family Medicine Clerkship</b>	✓	✓	✓	✓
<b>Surgery Clerkship</b>	✓	✓	✓	
<b>Block B</b>				
<b>Internal Medicine Clerkship</b>	✓	✓	✓	✓
<b>Psychiatry Clerkship</b>	✓	✓	✓	✓

<b>Program Goal :</b>	<b>6.1</b>	<b>6.2</b>	<b>6.3</b>	<b>6.4</b>
<b>Block C</b>	✓	✓	✓	✓
<b>Obstetrics/Gynecology Clerkship</b>	✓	✓		✓
<b>Pediatrics Clerkship</b>	✓	✓	✓	✓
<b>Emergency Medicine Clerkship</b>	✓	✓	✓	✓
<b>Neurology Clerkship</b>		✓	✓	✓
<b>CVICU</b>			✓	
<b>MICU</b>	✓	✓		✓
<b>PICU</b>	✓	✓		✓
<b>NICU</b>	✓	✓	✓	✓
<b>NSICU</b>	✓	✓		✓
<b>SICU</b>	✓	✓	✓	✓
<b>Family Medicine Sub-Internship</b>	✓		✓	✓
<b>Internal Medicine Sub-Internship</b>	✓	✓	✓	✓
<b>OB/Gynecology Sub-Internship</b>	✓		✓	✓
<b>Surgery Sub-Internship</b>	✓	✓	✓	✓
<b>Pediatrics Sub-Internship</b>	✓		✓	✓
<b>Scholarly Activity and Research Project</b>				

Table 12: Assessment Mapping for PGO 6: System-based Practice

<b>Medical Program Objective</b>	<b>Outcome Measure(s) for Objective</b>	<b>Course</b>
6.1: Describe the health system and its components, how the system is funded and how it affects individual and community health.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Participation (Facilitated discussion)	Masters' Colloquium
6.2: Demonstrate the ability to identify patient access to public, private, commercial, and/or community-based resources relevant to patient health and care.	Narrative Assessment (Community health experience)	SCI
	Participation (Facilitated discussion)	Masters' Colloquium
6.3: Incorporate considerations of benefits, risks and costs in patient and/or population care.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; graded problem sets)	SCI
	Participation (Facilitated discussion)	Masters' Colloquium
6.4: Describe appropriate processes for referral of patients and for maintaining continuity of care throughout transitions between providers and settings.	Narrative Assessment (Community health experience)	SCI

## Competency Domain: 7 Interprofessional Collaboration

Overall Goal: Demonstrate the ability to engage in an interprofessional team in a manner that optimizes safe, effective patient and population-centered care.

- 7.1 Describe the roles of health care professionals.
- 7.2 Use knowledge of one's own role and the roles of other health care professionals to work together in providing safe and effective care.
- 7.3 Function effectively both as a team leader and team member.
- 7.4 Recognize and respond appropriately to circumstances involving conflict with other health care professionals and team members.

Table 13: 2018-2019 Syllabi Mapping for PGO 7: Interprofessional Collaboration

Program Goal :	7.1	7.2	7.3	7.4
Master's Colloquium	✓	✓	✓	✓
Medical Skills	✓	✓	✓	✓
Scientific Principles of Medicine			✓	
Society, Community, and the Individual	✓	✓	✓	✓
Clinical Preparation Course	✓	✓	✓	✓
Block A	✓	✓	✓	
Family Medicine Clerkship	✓	✓	✓	✓
Surgery Clerkship	✓	✓	✓	✓
Block B				
Internal Medicine Clerkship	✓	✓	✓	✓
Psychiatry Clerkship	✓	✓	✓	✓
Block C	✓	✓	✓	✓
Obstetrics/Gynecology Clerkship	✓	✓	✓	✓
Pediatrics Clerkship	✓	✓	✓	✓
Emergency Medicine Clerkship	✓	✓	✓	
Neurology Clerkship		✓	✓	
CVICU	✓	✓	✓	
MICU	✓	✓	✓	✓
PICU		✓	✓	
NICU	✓	✓	✓	✓
NSICU			✓	✓
SICU	✓		✓	
Family Medicine Sub-Internship	✓	✓	✓	✓
Internal Medicine Sub-Internship	✓	✓	✓	✓
OB/Gynecology Sub-Internship	✓	✓	✓	✓
Surgery Sub-Internship	✓	✓	✓	✓
Pediatrics Sub-Internship	✓	✓	✓	✓
Scholarly Activity and Research Project			✓	✓

Table 14: Assessment Mapping for PGO 7: Interprofessional Collaboration

<b>Medical Program Objective</b>	<b>Outcome Measure(s) for Objective</b>	<b>Course</b>
7.1: Describe the roles of health care professionals.	Participation (TeamSTEPPS and related IPE activities)	SCI
	Narrative Assessment (Community health experience)	SCI
	Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)	MSK
	Participation (manikin simulation activities with feedback)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
7.2: Use knowledge of one's own role and the roles of other health care professionals to work together in providing safe and effective care.	Participation (TeamSTEPPS and related IPE activities)	SCI
	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Narrative Assessment (Community health experience)	SCI
	Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)	MSK
	Participation (manikin simulation activities with feedback)	MSK
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
Participation (Facilitated discussion)	Masters' Colloquium I & II	
7.3: Function effectively both as a team leader and team member.	Participation (TeamSTEPPS and related IPE activities)	SCI
	Narrative Assessment (Small-group assessment rubric)	SPM
	Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)	MSK

Medical Program Objective	Outcome Measure(s) for Objective	Course
	Participation (manikin simulation activities with feedback)	MSK
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium I & II
	Narrative Assessment (Student presentation assessment rubric)	Masters' Colloquium III & IV
7.4: Recognize and respond appropriately to circumstances involving conflict with other health care professionals and team members.	Participation (TeamSTEPPS and related IPE activities)	SCI
	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals)	SCI
	Participation (TeamSTEPPS IPE scenario sessions – debriefing and feedback)	MSK
	Participation (manikin simulation activities with feedback)	MSK
	Research or Project Assessment (SARP Professionalism Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium I & II
	Narrative Assessment (Student presentation assessment rubric)	Masters' Colloquium III & IV

### Competency Domain: 8 Personal and Professional Development

Overall Goal: Demonstrate the qualities required to sustain lifelong personal and professional growth.

- 8.1 Recognize when to take responsibility and when to seek assistance.
- 8.2 Demonstrate healthy coping mechanisms in response to stress and professional responsibilities.
- 8.3 Demonstrate flexibility in adjusting to change and difficult situations.

- 8.4 Utilize appropriate resources and coping mechanisms when confronted with uncertainty and ambiguous situations.
- 8.5 Demonstrate the ability to employ self-initiated learning strategies (problem definition, identification of learning resources and critical appraisal of information) when approaching new challenges, problems or unfamiliar situations.

Table 15: 2018-2019 Syllabi Mapping for PGO 8: Personal and Professional Development

<b>Program Goal :</b>	<b>8.1</b>	<b>8.2</b>	<b>8.3</b>	<b>8.4</b>	<b>8.5</b>
<b>Master's Colloquium</b>	✓	✓	✓	✓	✓
<b>Medical Skills</b>					
<b>Scientific Principles of Medicine</b>					
<b>Society, Community, and the Individual</b>				✓	
<b>Clinical Preparation Course</b>	✓				✓
<b>Block A</b>					
<b>Family Medicine Clerkship</b>	✓	✓	✓	✓	✓
<b>Surgery Clerkship</b>	✓		✓		✓
<b>Block B</b>					
<b>Internal Medicine Clerkship</b>	✓	✓	✓	✓	✓
<b>Psychiatry Clerkship</b>	✓	✓	✓	✓	✓
<b>Block C</b>	✓	✓	✓	✓	✓
<b>Obstetrics/Gynecology Clerkship</b>	✓	✓		✓	✓
<b>Pediatrics Clerkship)</b>	✓	✓	✓		✓
<b>Emergency Medicine Clerkship</b>	✓				✓
<b>Neurology Clerkship</b>	✓			✓	✓
<b>Critical Care Selective</b>					
<b>CVICU</b>	✓				✓
<b>MICU</b>	✓		✓	✓	✓
<b>PICU</b>	✓				✓
<b>NICU</b>	✓	✓	✓	✓	✓
<b>NSICU</b>	✓		✓		✓
<b>SICU</b>					
<b>Sub Internship Selective</b>					
<b>Family Medicine</b>	✓	✓	✓		✓
<b>Internal Medicine</b>	✓	✓	✓		✓
<b>OB/Gynecology</b>	✓	✓	✓		✓
<b>Surgery</b>	✓	✓	✓		
<b>Pediatrics</b>	✓	✓	✓		✓
<b>Scholarly Activity and Research Project</b>	✓				✓



Table 16: Assessment Mapping for PGO 8: Personal and Professional Development

<b>Medical Program Objective</b>	<b>Outcome Measure(s) for Objective</b>	<b>Course</b>
8.1: Recognize when to take responsibility and when to seek assistance.	Research or Project Assessment (SARP Professionalism Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Exam – Licensure, Clinical Performance (ACLS certification)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium
8.2: Demonstrate healthy coping mechanisms in response to stress and professional responsibilities.	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for critical reflection writing assignment)	Masters' Colloquium
8.3: Demonstrate flexibility in adjusting to change and difficult situations.	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for critical reflection writing assignment)	Masters' Colloquium
8.4: Utilize appropriate resources and coping mechanisms when confronted with uncertainty and ambiguous situations.	Exam – Institutionally Developed, Written/Computer-based (SCI Midterms and Finals; graded problem sets)	SCI
	Participation (Facilitated discussion)	Masters' Colloquium
	Narrative Assessment (Assessment rubric for critical reflection writing assignment)	Masters' Colloquium
8.5: Demonstrate the ability to employ self-initiated learning strategies (problem definition, identification of learning resources and critical appraisal of information) when approaching new challenges, problems or unfamiliar situations.	Research or Project Assessment (SARP Professionalism Rubric)	SARP
	Narrative Assessment (SARP Mentor Evaluation)	SARP
	Narrative Assessment (Tankside Grand Rounds Rubric)	PICE (Clerkship Prep)
	Narrative Assessment (Self-Directed Learning Plan Rubric)	PICE (Clerkship Prep)
	Self-Assessment (Self-Directed Learning Plan Rubric)	PICE (Clerkship Prep)
	Participation (Facilitated discussion)	Masters' Colloquium I & II

<b>Medical Program Objective</b>	<b>Outcome Measure(s) for Objective</b>	<b>Course</b>
	Narrative Assessment (Assessment rubric for ethical analysis writing assignment; Assessment rubric for critical reflection writing assignment)	Masters' Colloquium

## CEPC Common Policy Monitoring Items

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The CEPC is charged with systematically reviewing the curriculum and its evaluation activities to ensure the quality of all its components (policy [link](#)). Certain common policy and accreditation items are monitored for possible concerns or benchmarking applicability and, by committee's request, included separately in this section of the report. Items in this section may repeat in another section.

This item relates to LCME Standard 9.

### Test Item Quality

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The CEPC approved policy on test item quality for SPM units sets the following guidelines:

Test items that do not perform within the quality guidelines below will be removed from the test item pool, pending either improvement or replacement. Items that fall within the quality guidelines will be included in grade calculations.

- Difficulty
  - For any item with a difficulty of .2 or less, the item will be removed from the test and from the pool until improved (see below).
  - For any item with a difficulty of .9 or above, no changes to the test are required. The item is removed from the pool until it is made more difficult.
- Discrimination
  - Items with discrimination scores less than .1, item is removed from the pool until improved.
- Foil Quality
  - If 50% or more of the foils are not selected, the item is removed from the pool until improved.

Historical test statistic measures are organized by unit, including number of items out of compliance with test item performance policy. The Kruder-Richardson Formula 20 (KR20) is presented as a scaled value ranging from 0.00 to 1.00; as the scaled value increases, the exam form is considered more reliable and consistent. For course exams, a KR20 score higher than 0.60 to 0.65 is considered consistent and reliable, although maintaining scores higher than 0.70 is recommended. In the tables, all scores falling at or below the 0.60 score are marked in color.

Data collected prior to policy adoption is provided as benchmark. Graphics for each exam show distribution of items plotted by discrimination and difficulty.

This item relates to LCME Standard 8.3

### SPM Summative Exam Performance Metrics

Table 17: SPM Summative Exam Test Statistics Trend

Unit Name	Class	Test Statistics					Number of Items out of Compliance					
		Date of Summative Test	N Takers	Mean Difficulty	Mean Disc. Index	KR20	N Items	Difficulty		Disc. < 0.1	Selected foil	Items failing all 3 indicators
								< 0.2	≥ 0.9			
Introduction to Health and Disease	2019	9/4/15	107	0.78	0.19	0.89	150	1	52	40	16	13
	2020	9/29/16	108	0.78	0.21	0.87	149	0	42	40	18	13
	2021	8/31/17	110	0.77	0.23	0.89	140	0	29	20	10	6
	<b>2022</b>	<b>9/7/18</b>	<b>113</b>	<b>0.79</b>	<b>0.22</b>	<b>0.89</b>	<b>147</b>	<b>1</b>	<b>39</b>	<b>30</b>	<b>10</b>	<b>6</b>
Gastrointestinal System	2019	10/13/15	107	0.75	0.18	0.85	150	1	39	44	8	5
	2020	10/13/16	106	0.75	0.22	0.88	142	0	35	31	10	5
	2021	10/12/17	107	0.76	0.20	0.85	147	0	44	36	10	6
	<b>2022</b>	<b>10/19/18</b>	<b>110</b>	<b>0.77</b>	<b>0.23</b>	<b>0.90</b>	<b>147</b>	<b>1</b>	<b>41</b>	<b>19</b>	<b>4</b>	<b>1</b>
Integumentary, Musculoskeletal & Nervous Systems	2019	12/18/15	107	0.73	0.19	0.85	150	1	40	42	14	11
	2020	12/15/16	105	0.73	0.22	0.87	146	0	37	32	9	4
	2021	12/14/17	109	0.76	0.22	0.88	144	0	41	32	8	5
	<b>2022</b>	<b>12/21/18</b>	<b>113</b>	<b>0.77</b>	<b>0.22</b>	<b>0.89</b>	<b>149</b>	<b>0</b>	<b>36</b>	<b>33</b>	<b>6</b>	<b>4</b>
Hematologic System	2019	2/3/16	105	0.81	0.18	0.86	150	2	67	45	21	16
	2020	2/2/17	104	0.78	0.21	0.89	147	1	44	36	15	12
	2021	2/1/18	103	0.81	0.16	0.80	146	0	55	54	25	20
	<b>2022</b>	<b>2/8/19</b>	<b>106</b>	<b>0.84</b>	<b>0.17</b>	<b>0.88</b>	<b>148</b>	<b>0</b>	<b>78</b>	<b>56</b>	<b>23</b>	<b>19</b>
Cardiovascular & Respiratory Systems	2019	4/1/16	104	0.76	0.15	0.77	150	1	44	53	12	12
	2020	3/30/17	102	0.74	0.21	0.87	144	2	26	25	4	2
	2021	3/29/18	102	0.75	0.17	0.81	145	0	30	42	7	5
	<b>2022</b>	<b>4/5/19</b>	<b>106</b>	<b>0.76</b>	<b>0.23</b>	<b>0.90</b>	<b>147</b>	<b>0</b>	<b>35</b>	<b>26</b>	<b>5</b>	<b>3</b>
Renal System	2019	5/5/16	102	0.79	0.17	0.79	120	2	36	38	8	5
	2020	5/4/17	99	0.79	0.18	0.79	115	0	42	34	8	5
	2021	5/4/18	99	0.80	0.18	0.81	117	0	34	36	10	9
	<b>2022</b>	<b>5/10/19</b>	<b>100</b>	<b>0.80</b>	<b>0.20</b>	<b>0.84</b>	<b>117</b>	<b>0</b>	<b>42</b>	<b>30</b>	<b>8</b>	<b>7</b>
CNS and Special Senses	2018	9/25/15	100	0.79	0.16	0.82	150	0	53	59	20	18
	2019	9/23/16	106	0.76	0.18	0.83	150	0	47	44	18	14
	2020	9/22/17	99	0.76	0.20	0.87	138	0	45	40	12	8
	<b>2021</b>	<b>9/28/18</b>	<b>99</b>	<b>0.78</b>	<b>0.18</b>	<b>0.85</b>	<b>144</b>	<b>0</b>	<b>53</b>	<b>34</b>	<b>8</b>	<b>4</b>

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Unit Name	Class	Test Statistics					Number of Items out of Compliance					
		Date of Summative Test	N Takers	Mean Difficulty	Mean Disc. Index	KR20	N Items	Difficulty		Disc. < 0.1	Selected foil	Items failing all 3 indicators
								< 0.2	≥ 0.9			
Endocrine System	2018	12/17/15	100	0.80	0.14	0.74	140	0	54	61	20	18
	2019	10/28/16	106	0.80	0.15	0.81	144	0	61	55	19	17
	2020	11/10/17	98	0.77	0.20	0.87	141	0	36	34	11	8
	<b>2021</b>	<b>11/16/18</b>	<b>98</b>	<b>0.81</b>	<b>0.14</b>	<b>0.76</b>	<b>148</b>	<b>0</b>	<b>57</b>	<b>65</b>	<b>18</b>	<b>14</b>
Reproductive Systems	2018	2/12/16	100	0.78	0.15	0.76	150	1	51	59	24	18
	2019	12/16/16	107	0.80	0.16	0.82	150	0	52	47	20	16
	2020	12/14/17	97	0.80	0.15	0.69	98	1	39	33	19	13
	<b>2021</b>	<b>12/21/18</b>	<b>98</b>	<b>0.85</b>	<b>0.14</b>	<b>0.65</b>	<b>97</b>	<b>0</b>	<b>43</b>	<b>45</b>	<b>23</b>	<b>21</b>
Mind & Human Development	2018	3/31/16	99	0.79	0.15	0.78	150	0	50	55	16	14
	2019	2/17/17	104	0.77	0.16	0.80	145	0	44	52	20	14
	2020	2/16/18	95	0.76	0.18	0.81	147	0	38	47	21	14
	<b>2021</b>	<b>2/22/19</b>	<b>98</b>	<b>0.79</b>	<b>0.15</b>	<b>0.72</b>	<b>146</b>	<b>0</b>	<b>43</b>	<b>55</b>	<b>11</b>	<b>10</b>

### SPM Summative Exam Performance Graphs - AY 2018-2019

Figure 5: Test Item Discrimination by Difficulty for IHD Unit Comparison by Class

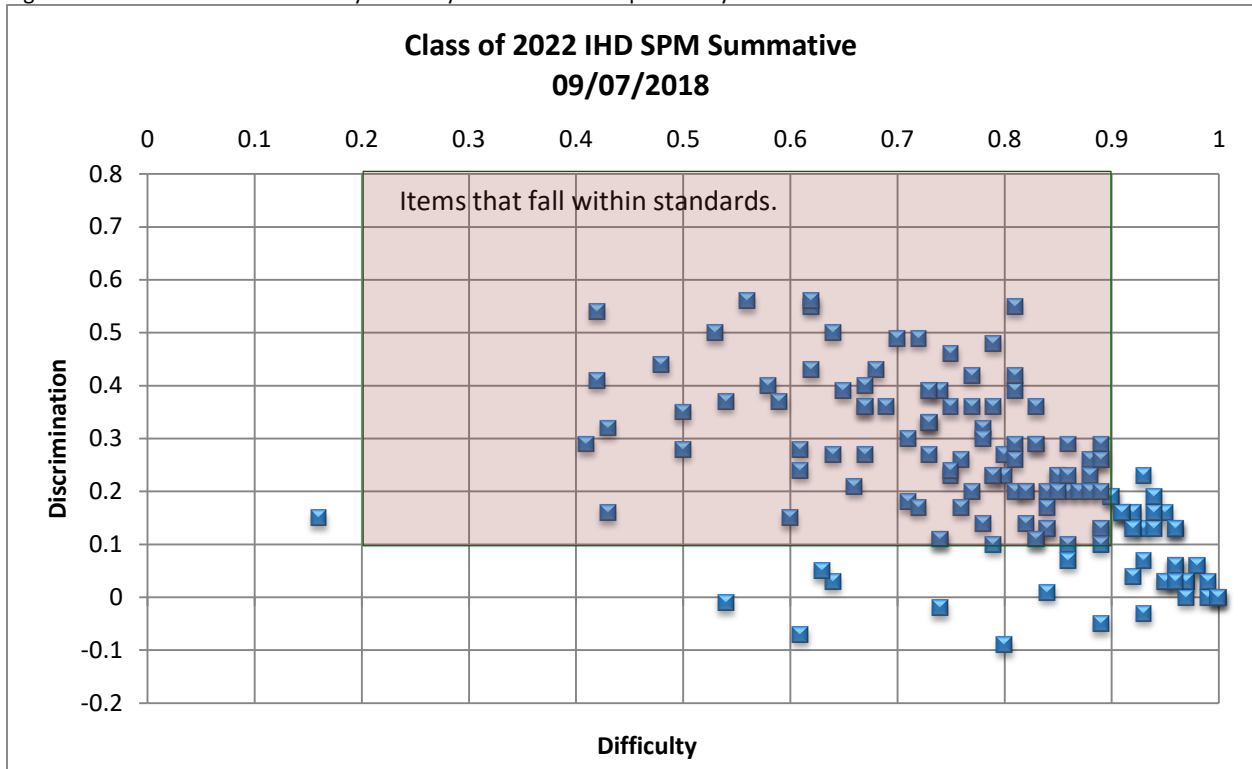


Figure 6: Test Item Discrimination by Difficulty for GIS Unit Comparison by Class

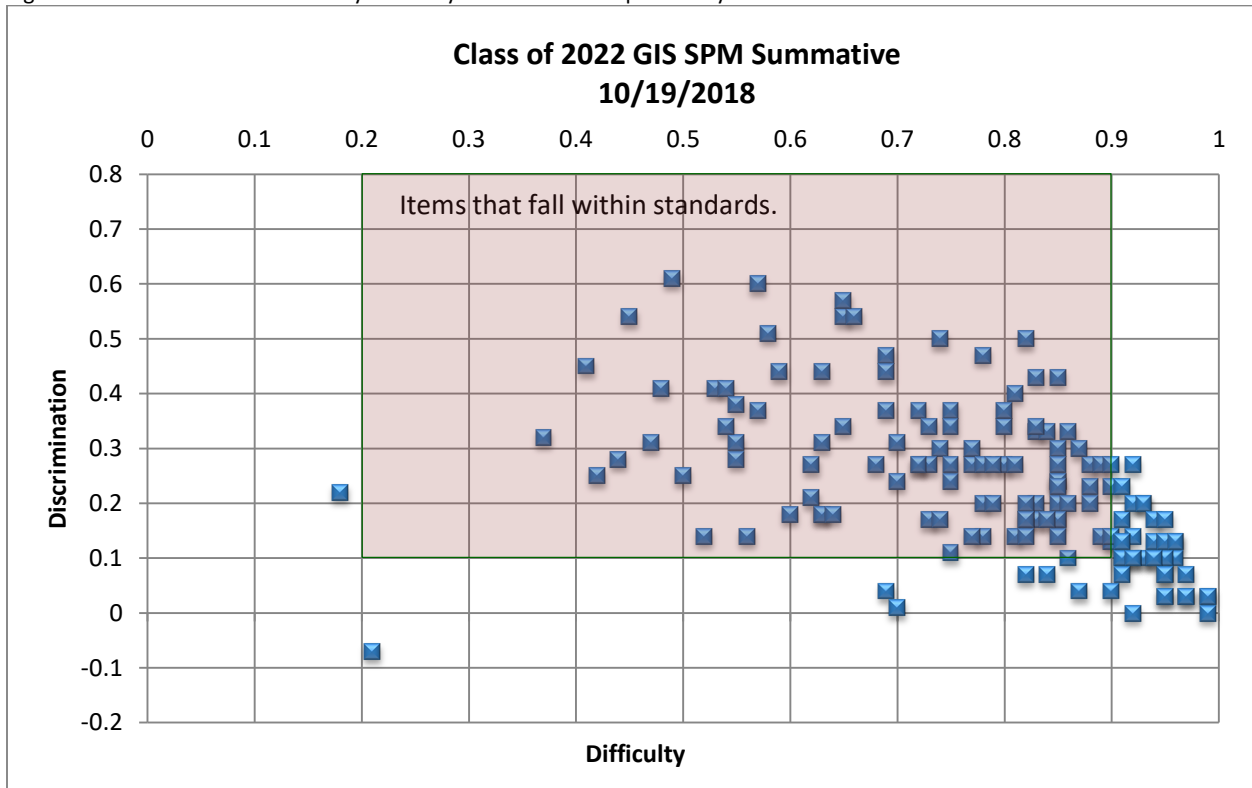


Figure 7: Test Item Discrimination by Difficulty for IMN Unit Comparison by Class

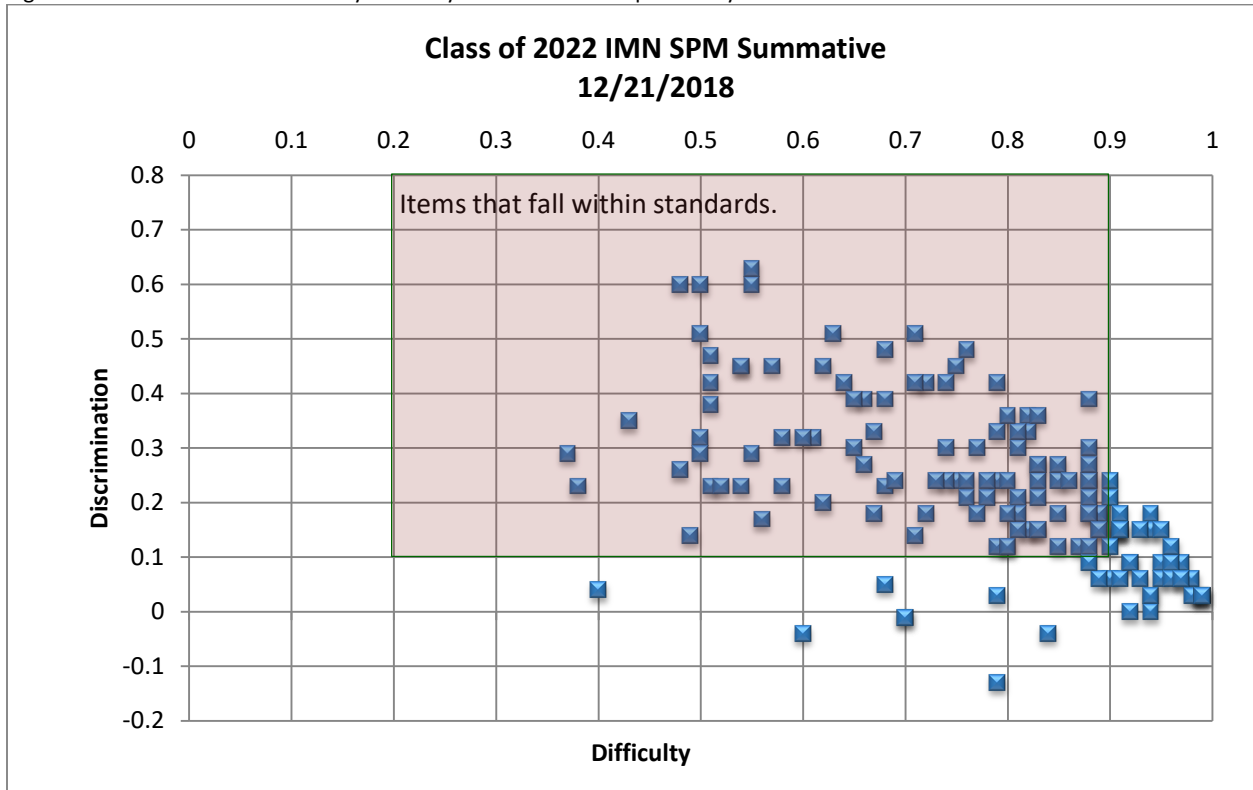


Figure 8: Test Item Discrimination by Difficulty for HEM Unit Comparison by Class

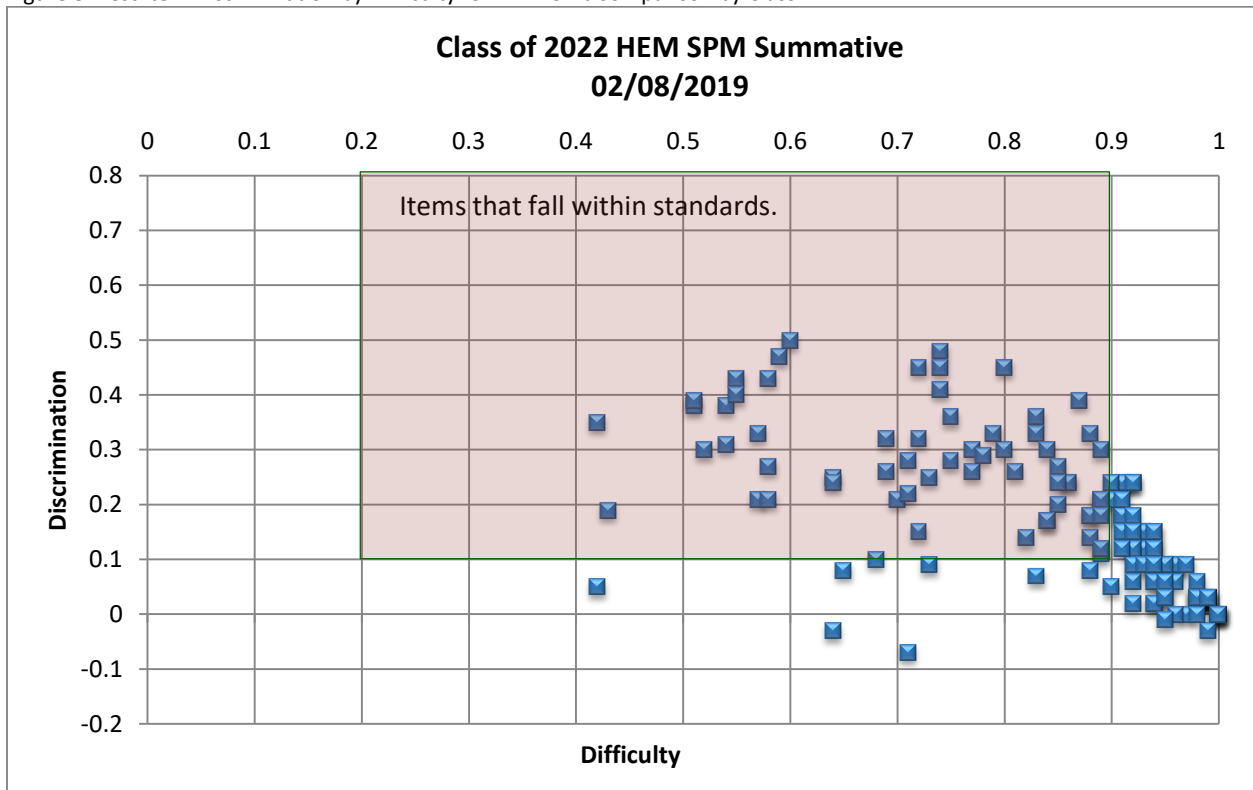


Figure 9: Test Item Discrimination by Difficulty for CVR Unit Comparison by Class

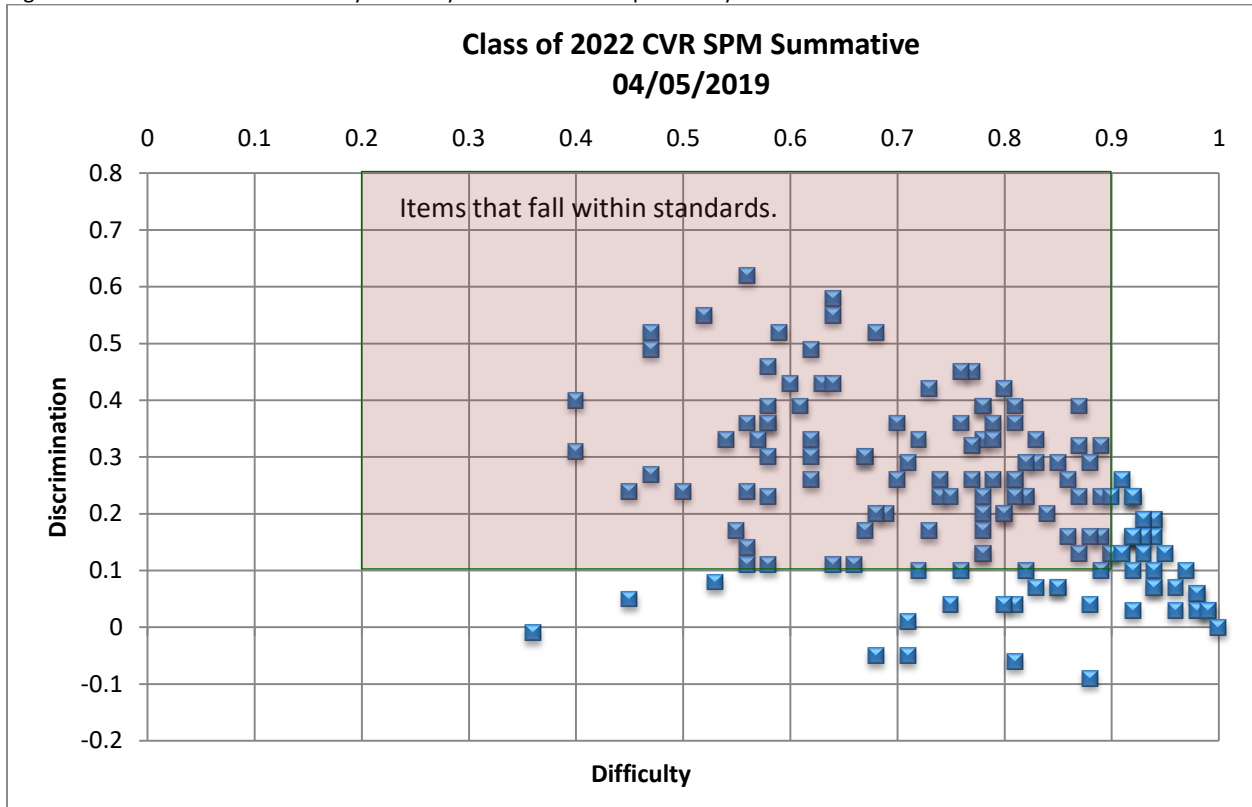


Figure 10: Test Item Discrimination by Difficulty for RNL Unit Comparison by Class

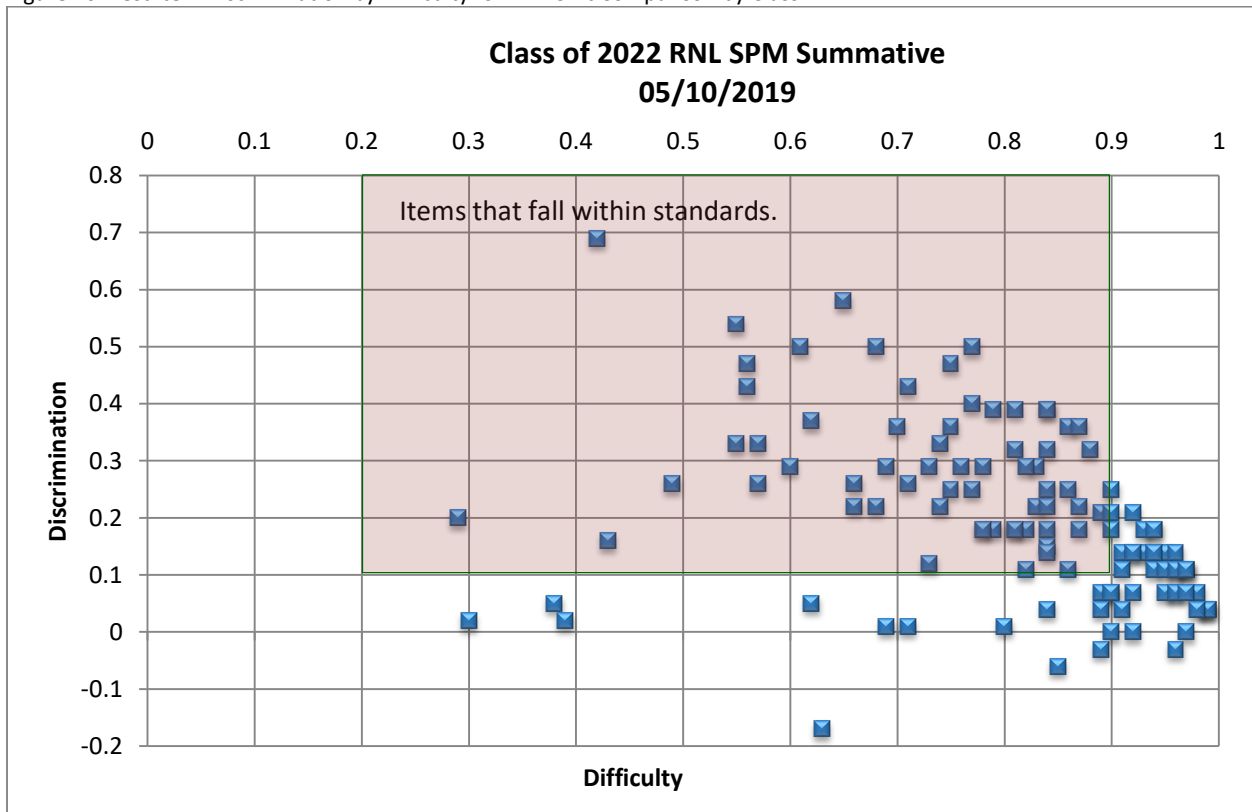




Figure 11: Test Item Discrimination by Difficulty for CNS Unit Comparison by Class

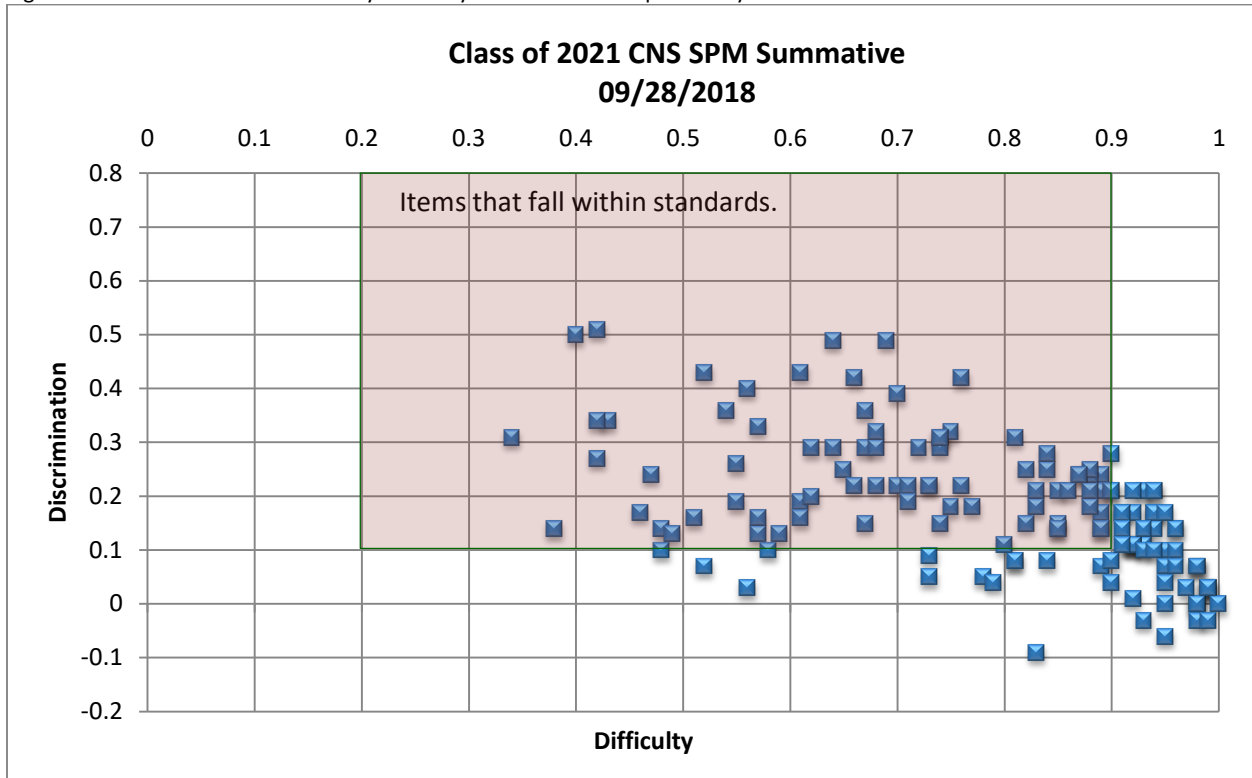


Figure 12: Test Item Discrimination by Difficulty for END Unit Comparison by Class

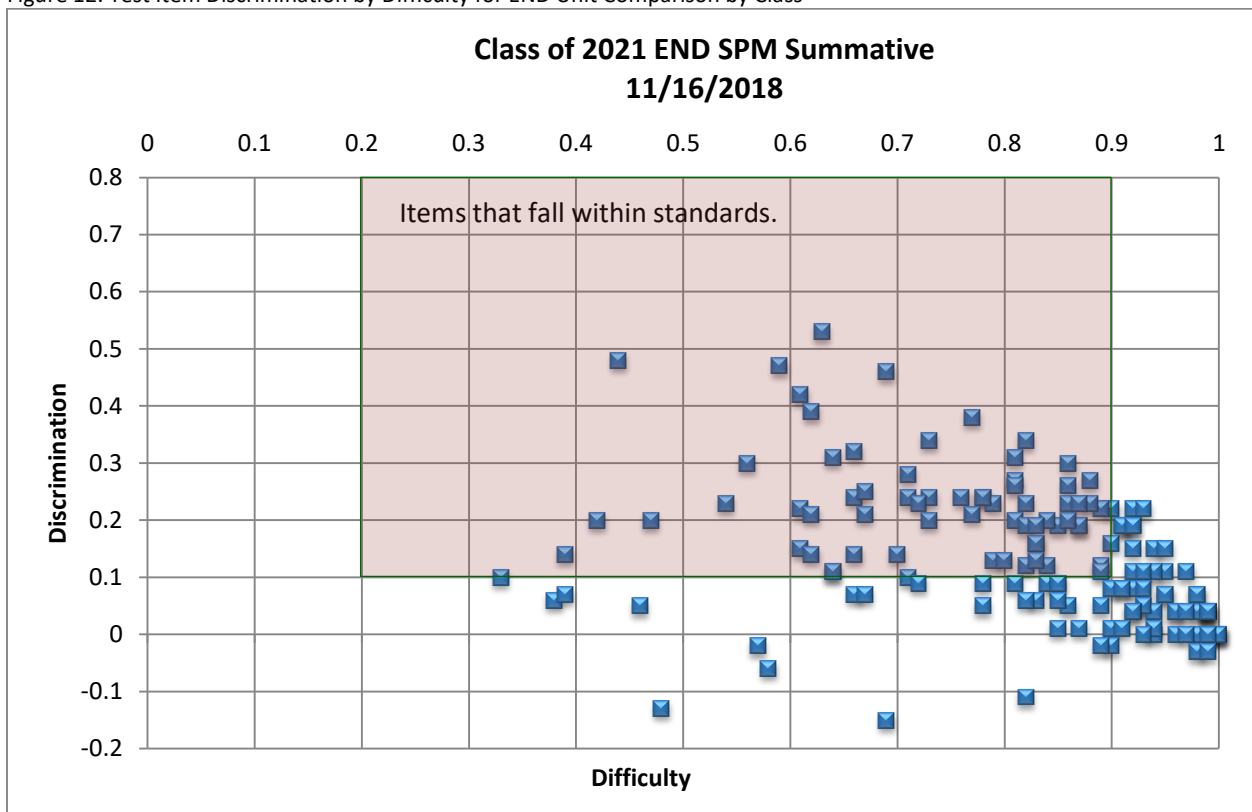


Figure 13: Test Item Discrimination by Difficulty for REP Unit Comparison by Class

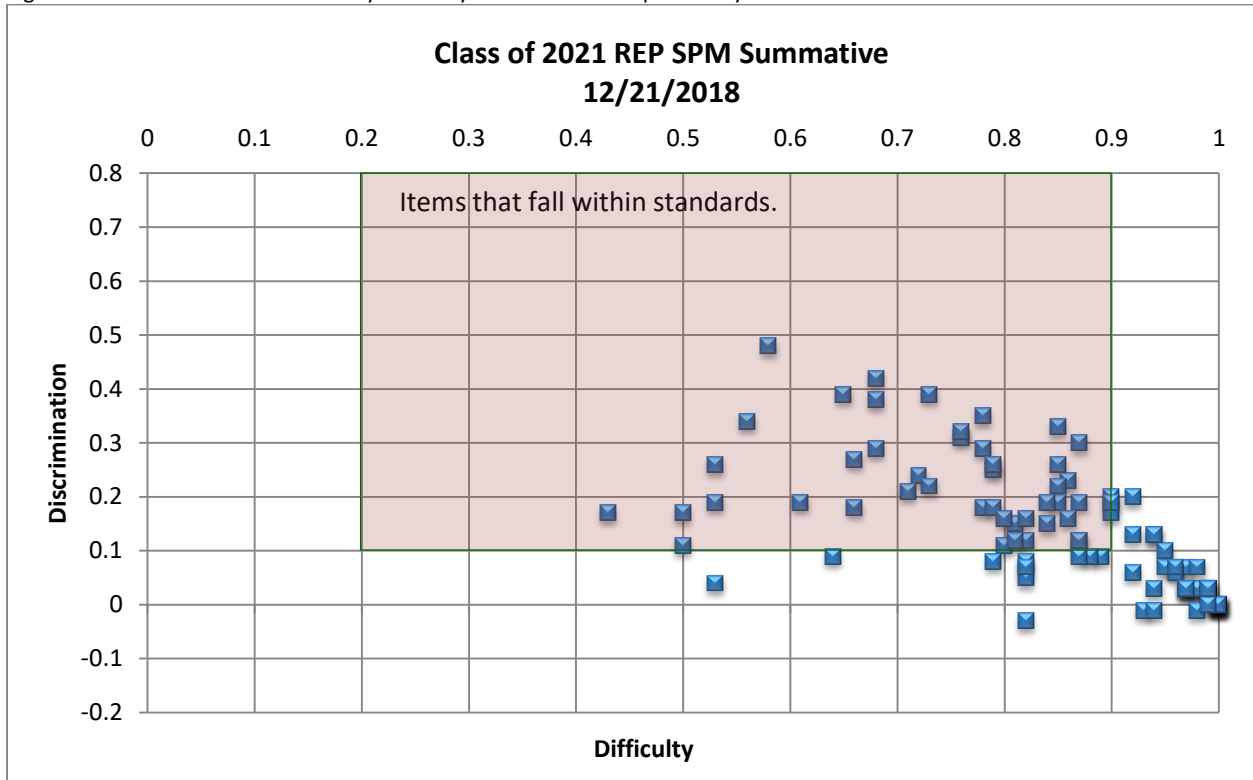
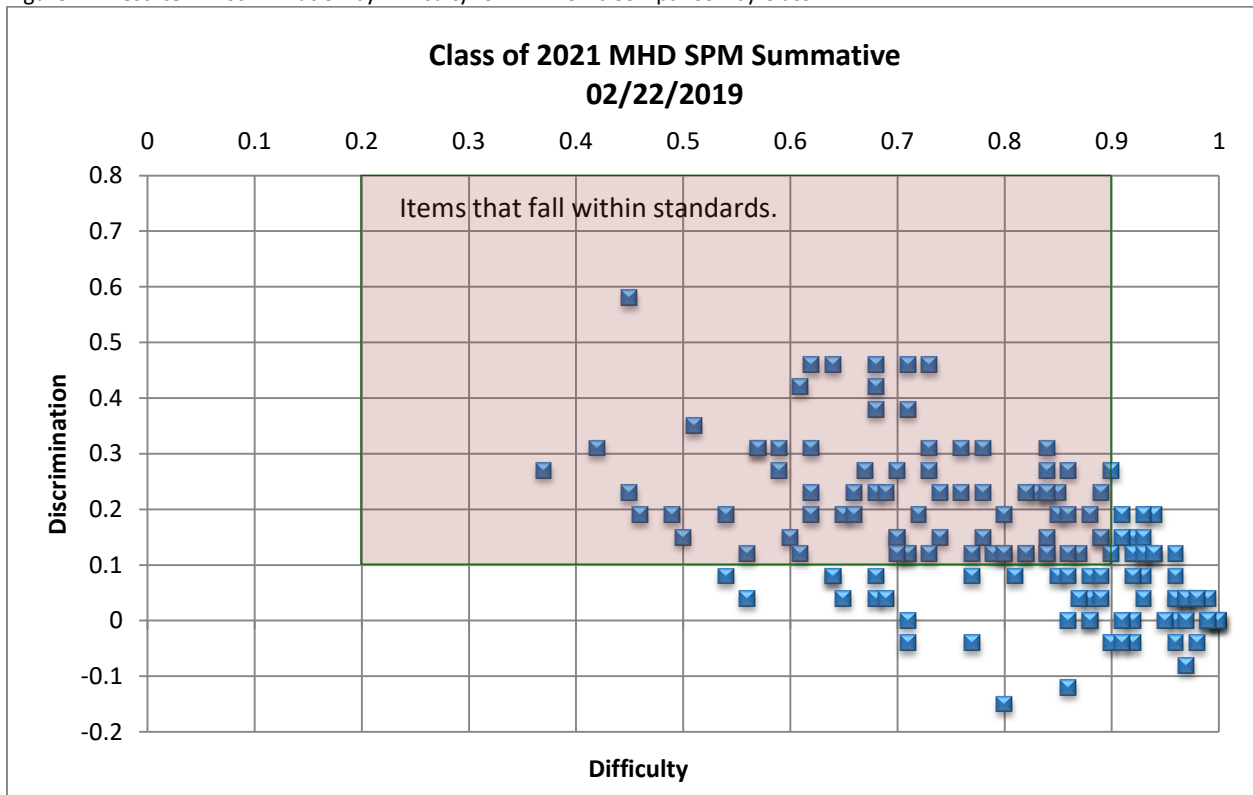


Figure 14: Test Item Discrimination by Difficulty for MHD Unit Comparison by Class



## Hard Pass Rate for SPM

In the spring of 2017, the CEPC voted to approve a hard pass rate of 65% on the Unit Summative remediation exams for the SPM course ([link](#) to syllabus, pg.16). Although the new practice was approved to be implemented starting academic year 2017 – 2018, the committee decided to backtrack implementation to the beginning of AY 2016-2017.

The table below provides the SPM Summative exam hard pass metrics, which include results for AY 2016-2017 as baseline. This item relates to LCME Standard 9.6.

### SPM Summative Exam Hard Pass Metrics

Table 18: SPM Summative Exam Statistics

Unit	AY	N takers	Number of fails under 65% hard pass rate	Mean%	Min %	Max %
Introduction to Health and Disease	2016-2017	108	8	78%	53%	95%
	2017-2018	112	10	77%	47%	93%
	2018-2019	113	8	79%	46%	94%
Gastrointestinal Systems	2016-2017	106	13	75%	49%	92%
	2017-2018	110	8	76%	50%	95%
	2018-2019	110	11	78%	48%	96%
Integumentary, Musculoskeletal & Nervous Systems	2016-2017	105	19	73%	51%	95%
	2017-2018	109	8	76%	41%	92%
	2018-2019	113	13	77%	54%	95%
Hematologic System	2016-2017	104	8	78%	59%	94%
	2017-2018	104	1	81%	62%	94%
	2018-2019	106	3	84%	57%	97%
Cardiovascular & Respiratory Systems	2016-2017	102	19	74%	49%	96%
	2017-2018	103	2	76%	45%	91%
	2018-2019	106	16	76%	40%	95%
Renal System	2016-2017	99	0	79%	66%	97%
	2017-2018	100	1	80%	47%	93%
	2018-2019	100	5	80%	59%	97%
CNS and Special Senses	2016-2017	100	13	76%	57%	92%
	2017-2018	99	4	76%	45%	93%
	2018-2019	99	5	78%	55%	94%
Endocrine System	2016-2017	106	2	80%	63%	94%

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Unit	AY	N takers	Number of fails under 65% hard pass rate	Mean%	Min %	Max %
	2017-2018	100	5	76%	0%	94%
	2018-2019	98	1	81%	57%	95%
Reproductive Systems	2016-2017	107	1	80%	61%	93%
	2017-2018	97	1	80%	61%	93%
	2018-2019	98	0	85%	70%	95%
Mind & Human Development	2016-2017	104	5	77%	59%	91%
	2017-2018	96	3	76%	62%	92%
	2018-2019	98	1	79%	64%	94%

## In House Exams Performance by Discipline

Students are provided with a summary of their individual performance by discipline as part of their ePortfolio reporting. The Table below summarizes the class performance by discipline across all in-house tests. Please note that items may be classified as more than one discipline and that the number of items (**N**) affects the sensitivity of the mean to single item changes.

This item relates to LCME Standard 9.7.

Table 19: Discipline Performance on Summative Exams by Class at the end of MS2 Year

M1 & M2 Summative Averages	c2018 - MS2		c2019 - MS2		C2020 - MS2		c2021 MS2		C2022 MS1 Interim Data	
	Avg.	N	Avg.	N	Avg.	N	Avg.	N	Avg.	N
Anatomy	77.1%	102	70.36%	122	70.72%	117	74.93%	121	77.71%	92
Behavior	74.77%	31	71.19%	33	74.51%	47	81.27%	45	**	**
Biochemistry	69.37%	102	70.4%	106	72.36%	97	72.67%	100	76.93%	58
Cell and Molecular Biology	65.11%	20	66.95%	15	73.95%	12	70.92%	11	77.04%	12
Embryology	78.2%	19	76.98%	26	67.30%	21	67.30%	23	67.32%	9
Histology	77.06%	39	79.55%	44	72.33%	38	75.16%	40	79.69%	27
Immunology	75.66%	95	78%	113	78.70%	120	81.50%	111	82.25%	86
Medical Genetics	76.63%	49	76.46%	54	73.00%	54	75.09%	60	73.84%	39
Microbiology	81.57%	108	79.28%	104	78.33%	103	80.48%	105	79.67%	89
Neuro-anatomy	78.24%	23	78.16%	22	78.06%	22	78.53%	18	**	**
Neuroscience / Special senses	71.67%	81	62.65%	22	72.19%	84	74.47%	74	72.65%	19
Pathology	80.45%	198	80.05%	227	79.42%	188	82.09%	194	82.16%	133
Pharmacology	78.21%	149	77.64%	147	78.78%	142	80.77%	154	82.55%	70
Physiology	81.16%	160	83.51%	202	81.63%	180	82.65%	181	82.44%	153

## Honors

The CEPC approved policy for honors calculation states a student's overall grade is based on the assessment in each of the 8 competencies described by the PLFSOM discipline performance rubric, NBME score, OSCE performance, and professionalism (policy [link](#), Pg. 6). A student may receive Honors if all of the following are true:

- Passes NBME exam, if applicable, at or above the clerkship designated score for honors on first attempt (For MS3 students). Passes NBME exam, if applicable, at the 60th percentile or above on first attempt (For MS4 students).
- Passes OSCE, if applicable, on first attempt
- Minimum of 4 of the 8 individual competencies rated as "Honors" on the final clerkship evaluation
- No individual competency rated as "needs improvement" on the final assessment.

This item relates to LCME Standards 9.9 & 10.3.

Table 20: Clerkship Designated Thresholds for Pass and Honors

Clerkship	PLFSOM Equated Percent Correct Score required for PASS (>designated score)	PLFSOM Equated Percent Correct Score required for HONORS (>designated score)
Family Medicine	61%	78%
Surgery	60%	79%
Psychiatry	65%	83%
Internal Medicine	59%	79%
Pediatrics	62%	82%
OB/GYN	64%	82%

Table 21: Percent of Class Receiving Honors by M3 Clerkship

Clerkship	Class of			
	2017	2018	2019	2020
Family Medicine	39%	46%	36%	24%
Surgery	33%	32%	24%	19%
Internal Medicine	35%	23%	31%	24%
Psychiatry	29%	48%	50%	39%
Obstetrics/Gynecology	40%	40%	25%	21%
Pediatrics	40%	31%	33%	19%
Neurology	44%	25%	21%	23%
Emergency Medicine	40%	32%	23%	23%

## Grade Release

The CEPC adopted the Timely Course, Clerkship, and Curriculum Requirement Grade Release policy in 2016. The policy establishes an expectation that grades will be completed in 4 weeks (28 days), with no grade release later than 6 weeks (42 days). (Policy [link](#)).

For the pre-clerkship phase grades are released to Banner, the institution's official system of record. For the clerkship phase, grades are released in 2 formats: official grades are released through the Banner system and grade sheets are posted into student ePortfolio through TTAS (Texas Tech Assessment System).

The following tables provide the data from Banner for the Pre-Clerkship phase, and TTAS for the Clerkship phase. For each required course and clerkship, the average and maximum number of days it took for students to receive grades during the listed academic years is provided.

This item relates to LCME Standard 9.8.

### Pre-clerkship Grade Posting to BANNER - AY 2018-2019

Table 22: M1&2 Course Banner Posting of Grades

Course	Average number of days to Banner Posting	Maximum number of days to Banner Posting
Scientific Principles of Medicine I	23	27
Scientific Principles of Medicine II	27	27
Scientific Principles of Medicine III	15	21
Scientific Principles of Medicine IV	27	27
Society, Community, & the Individual I	25	28
Society, Community, & the Individual II	26	26
Society, Community, & the Individual III	21	26
Society, Community, & the Individual IV	27	27
Medical Skills I	24	27
Medical Skills II*	27	27
Medical Skills III	15	20
Medical Skills IV*	26	26
Master's Colloquium I	22	26
Master's Colloquium II	41	41
Master's Colloquium III	15	21
Master's Colloquium IV	27	27
Clerkship Preparation Course	32	55

\*One PR grade entered 6/26

\*\*Most grades posted before exam week

**MS3 Clerkship Grade Posting to TTAS - Historical Data**

Table 23: Year 3 Required Clerkships Grade Completion in TTAS

Core Clerkship	AY 2015-16		AY 2016-17		AY 2017-2018		AY 2018-2019	
	Avg. # of Days	Max # of Days	Avg. # of Days	Max # of Days	Avg. # of Days	Max # of Days	Avg. # of Days	Max # of Days
Family Medicine Clerkship	32	32	16	28	14	25	20	35
Surgery Clerkship	28	29	12	21	12	21	16	28
Internal Medicine Clerkship	32	36	13	24	16	27	14	28
Psychiatry Clerkship	34	41	14	24	15	25	17	28
Ob/Gyn Clerkship	32	40	14	24	22	28	17	28
Pediatrics Clerkship	43	63	20	33	15	31	16	27

**MS4 Required Clerkship Grade Posting to TTAS - Historical Data**

Table 24: Days to Grade Posting to TTAS - Year 4 Required Clerkships

Core Clerkship	AY 2015-16		AY 2016-17		AY 2017-2018		AY 2018-2019	
	Avg. # of Days	Max# of Days	Avg. # of Days	Max# of Days	Avg. # of Days	Max# of Days	Avg. # of Days	Max# of Days
Clinical Neurosciences	3	23	4	22	5	20	<b>25</b>	<b>31</b>
Emergency Medicine	2	10	2	20	3	23	<b>5</b>	<b>7</b>



## Mid-Clerkship Feedback

Each clerkship is expected to provide the students with mid-clerkship feedback at least once. This is tied to LCME Standard 9.7. (Policy [link](#)). The following table provides percentage of completion rates for mid-clerkship feedback for all 8 clerkships, as reported through TTAS. The following items relate to LCME Standard 9.7

Table 25: Mid-Clerkship Feedback completion rate - ePortfolio Data

Clerkship	AY 2015-2016	AY 2016-2017		AY 2017-2018		AY 2018-2019	
	% Completed as scheduled	% Completed as scheduled		% Completed as Scheduled		% Completed as Scheduled	
Family Medicine	100%	100%		99%		99%	
Surgery	87%	100% UMC	100% WBAMC	100% UMC	54% WBAMC	100% UMC	100% WBAMC
Internal Medicine	100%	100%		100%		97%	
Psychiatry	100%	100%		100%		100%	
Obstetrics/Gynecology	100%	98%**		100%		100%	
Pediatrics	99%	97%		95%		100%	
Emergency Medicine	100%	100%*		100%		100%	
Neurology	97%	100%*		100%		100%	

\* For 2016-2017, Emergency Medicine and Neurology are reported for fall semester only.

\*\* 2 students in Block 3 of AY 2016-17 did not receive mid-clerkship feedback due to unexpected faculty personal medical emergency

## Quality of Mid-Clerkship Feedback

Student evaluation forms have included items on feedback for several years; these items have gone through reviewed and been adjusted to improve the quality of the resulting feedback. In past evaluations students had been asked about sufficiency of feedback, and starting AY 2016-2017 2 items were added to track student perception of the effectiveness of mid-clerkship feedback.

The table below reports the percent of students agreeing (an aggregate of slightly agree, agree, and strongly agree) to each of the items relating to the quality of feedback, including mid-clerkship feedback. The 3 items not related to mid-clerkship feedback are asked by rotation location and the reported value is an aggregate of all locations and block per clerkship.

Table 26: Indicators of M3 Clerkship Feedback Quality - Percent Agreement - In-house Evaluation System

Data Reported by Percent Agreement	Family Medicine	Surgery	Internal Medicine	Psychiatry	OB/Gyn	Pediatrics
Mid-clerkship feedback helped me identify my strengths	83%	85%	92%	89%	88%	94%
Mid-clerkship feedback helped me identify areas for improvement in my performance	84%	88%	91%	90%	87%	95%
I received sufficient oral feedback on my performance.	95%	93%	95%	91%	84%	95%
I received sufficient written feedback on my performance.	93%	94%	94%	90%	80%	91%
The feedback I received helped me improve my performance.	94%	94%	95%	93%	84%	94%

## Clerkship Metrics

Data reported in this section is pulled from the report that the Assistant Dean for Medical Education – Clinical Skills- provides to both the CEPC and the Year 3 & 4 committee at the end of the academic year. (Link to [MS3](#) and [MS4](#) full Reports)

This section of the report is tied to LCME Standard 8.6, 8.7 & 8.8. Data for Clerkships which provide student experiences in different sites is offered first in tables with site specific information. This is followed with information from the clerkships with no site specific data. Data is summarized for all Blocks.

### OpLog - AY 2018-2019

Data for the following tables is based on the number of weeks students spent in specific clinical experiences per clerkship, as follows:

Table 27: Number of Weeks per Clinical Rotations- EOY Report

	Surgery	Internal Medicine	Family Medicine	Obstetrics / Gynecology	Pediatrics	Psychiatry	Neurology	Emergency Medicine
<b>Number of Weeks</b>	3 (General Surgery Rotation Only)	6 (Inpatient Service Only)	5 (General Clinic Only)	8 (In & Out Patient)	7-8	3 (Inpatient Service Only)	4 (In & Out Patient)	4

### Patient Encounters

Table 28: Average Number of Patient Encounters per site - EOY Report

Average Pt. Encounters per Site	All Blocks Summary					
	UMC	WBAMC	THOP-Memorial	THOP-TM	San Angelo	Average Total
Surgery (30 Required)	68	63	On Hold	-	-	65
Internal Medicine (30 Required)	39	30	On Hold	42	144	35

Table 29: Average number of patient encounters -EOY Report

Pt. Encounters	All Blocks Summary					
	Family Medicine	Ob/Gyn	Pediatrics	Psychology	Neurology	Emergency Medicine
General Clerkship	64	83	90	42	35	59

Pt. Encounters	All Blocks Summary					
	Family Medicine	Ob/Gyn	Pediatrics	Psychology	Neurology	Emergency Medicine
Entries Required	40	41	29	30	20	30

**Level of Responsibility of Encounters**

**Student Level of Responsibility - Diagnoses**

Table 30: Average student level of responsibility -DIAGNOSIS - EOY Report

Diagnoses	All Blocks Summary					
	Surgery			Internal Medicine		
Location	%Mngd	%Assist	%Obsrvd	%Mngd	%Assist	%Obsrvd
UMC	21%	74%	5%	44%	54%	2%
WBAMC	22%	74%	4%	69%	31%	0%
THOP-Memorial	-	-	-	N/A	N/A	N/A
THOP-Transmountain	-	-	-	39%	60%	1%
San Angelo				49%	11%	39%
Average %	21%	74%	4%	48%	39%	41%

Table 31: Average student level of responsibility - DIAGNOSIS - EOY Report

Diagnoses	All Blocks Summary																	
	Family Medicine			Ob/Gyn			Pediatrics			Psychiatry			Neurology			Emergency Medicine		
	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv
General Clerkship	91%	8%	1%	29%	65%	6%	44%	47%	9%	20%	75%	5%	57%	42%	1%	68%	32%	0%

**Procedures**

Table 32: Average student level of responsibility - PROCEDURES - EOY Report

Procedures	All Blocks Summary					
	Surgery			Internal Medicine		
Location	%Performed	%Assisted	%Observed	%Performed	%Assisted	%Observed
UMC	60%	36%	4%	36%	38%	26%
WBAMC	75%	23%	2%	17%	33%	50%
THOP-Memorial	-	-	-	N/A	N/A	N/A
THOP-Transmountain	-	-	-	0%	88%	12%
San Angelo	-	-	-	N/A	N/A	N/A
Average Percent	67%	29%	3%	18%	53%	29%

Table 33: Average student level of responsibility - PROCEDURES - EOY Report

Procedures	All Blocks Summary																	
	Family Medicine			Ob/Gyn			Pediatrics			Psychiatry			Neurology			Emergency Medicine		
	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv	% Mngd	% Assist	% Obsrv
General Clerkship	66%	29%	5%	29%	51%	10%	43%	42%	15%	78%	22%	0%	41%	47%	12%	84%	16%	1%

**Alternate Experiences**

Table 34: Alternate Experiences offered to complete OpLog requirements - EOY Report

Alternate Experiences	All Blocks Summary					
	FM	Surgery	IM	Psych	Ob/Gyn	Peds
	0	0	0	0	0	63
Type of Experience	0	0	0	0	0	CLIPP Cases / Papers

**Duty Hours**

Table 35: Average Duty Hours per location across clerkship - EOY Report

Duty Hours	All Blocks Summary	
	Surgery	Internal Medicine
UMC	44	37
WBAMC	41	41
THOP-Memorial	-	N/A
THOP-Transmountain	-	37
Average Total for 6 Weeks	44	38

Table 36: Average Duty Hours across clerkship - EOY Report

Duty Hours	All Blocks Summary					
	Family Medicine	Ob/Gyn	Pediatrics	Psychology	Neurology	Emergency Medicine
Average Total for 6 Weeks	23	41	41	34	31	31

**NBME Equated Scores**

Table 37: Average NBME Equated Percent correct Scores per location - EOY Report

NBME Equated Scores	Percent Correct	
	Surgery	Internal Medicine
UMC	74%	73%
WBAMC	74%	77%
THOP-Memorial	-	N/A
THOP-Transmountain	-	76%
San Angelo	-	77%
Overall	74%	74%

Table 38: Average NBME Equated Percent correct Scores - EOY Report

NBME Equated Scores	Percent Correct					
	Family Medicine	Ob/Gyn	Pediatrics	Psychology	Neurology	Emergency Medicine
Overall	74%	77%	78%	82%	79%	71%

**Final Grade - Honors, Pass, Fail, or Incomplete**

Table 39: Average final grade of Honors, Pass, Fail, or Incomplete per location - EOY Report

Final Grade	All Blocks Summary					
	Surgery			Internal Medicine		
Location	% Honors	% Pass	% Incomplete	% Honors	% Pass	% Fail*
UMC	15%	73%	12%	18%	79%	4%
WBAMC	33%	67%	0%	31%	69%	0%
THOP-Memorial	-	-	-	N/A	N/A	N/A
THOP-Transmountain	-	-	-	50%	50%	0%
San Angelo	-	-	-	0%	100%	0%
OVERALL	19%	72%	9%	24%	70%	6%

\*NBME failure on 1st attempt

Table 40: Average final grade of Honors, Pass, Fail, or Incomplete - EOY Report

Final Grade	All Blocks Summary																	
	Family Medicine			Ob/Gyn			Pediatrics			Psychiatry			Neurology			Emergency Medicine**		
	% Honors	% Pass	% Incom	% Honors	% Pass	% Fail*	% Honors	% Pass	% Incom	% Honors	% Pass	% Fail	% Honors	% Pass	% Fail	% Honors	% Pass	% Fail
General Clerkship	24%	73%	3%	21%	74%	1%	19%	78%	3%	39%	61%	0%	23%	73%	4%	23%	73%	0%

\*\*4% of Emergency Medicine final grades "In-Progress" at time of this report

\*Incomplete = 4%

**Final Grade Posting**

Table 41: Average number of days to grade submission to TTAS after end of block - EOY Report

Clerkship	Days to Grade Submission to TTAS - All Blocks
Family Medicine	5 - 35
Surgery	4 - 28
Internal Medicine	-1 - 28
Psychiatry	5 - 28
OB/GYN	5 - 28
Pediatrics	5 - 27
Neurology	1 - 31
Emergency Medicine	3 - 7

## Medical Education Program Evaluation

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The Office of Medical Education's evaluation system administers all evaluations via the survey platform Qualtrics. Since the medical program requires student participation, data is not collected anonymously, but is always de-identified for reporting purposes.

As general office protocol, quantitative analyses are conducted for closed-ended survey items (Likert scale ratings, multiple choice items, etc.), and item-level and aggregate data is provided in tables and charts/graphs, including N's. Currently, sample narratives aren't included as part of this report. Data analysis is dependent upon evaluation purpose, need for data breakdowns, frequency and type of responses received. Where less than 5 individuals respond to any given item or evaluation, responses aren't included in reports for general distribution.

This section of the report of the medical education program evaluation contains quantitative trend data for the prior 4 academic years (as available). It should be noted that changes to evaluation instruments and items may have taken place during the 4 years of reported data, resulting in some items having blanks across tables during a cycle. All evaluation items from academic years previous to AY 2016-2017 used a 5-point Likert scale: 1) strongly disagree, 2) disagree, 3) neutral, 4) agree, and 5) strongly agree, with the exception of the learning environment questions, and response rates were reported in means. Starting AY 2016-2017 all evaluation items -except for the learning environment questions- use a 6-point Likert scale: 1) strongly disagree, 2) disagree, 3) somewhat disagree, 4) somewhat agree, 5) agree, and 6) strongly agree, and response rates are reported in percentage agreement. For the purpose of ease of comparison, previous years' data has been converted to percentage agreement in this report. For technical reasons beyond our control, raw data from the MyEvaluations system -AY 2015-2016- has been archived and isn't accessible for conversion from means to percentage agreement. (Course Evaluation & Reporting Policy link)

This report section relates to LCME Standard 8.

### Pre-clerkship Phase Evaluation Results

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Evaluation data is collected from MS1 and MS2 students a week after a unit ends, during exam week. For every unit, students evaluate the Scientific Principles of Medicine (SPM) and Medical Skills (MS) courses in addition to the Spanish component of the Society, Community, and the Individual (SCI) course. The Masters' Colloquium course and SCI course are evaluated on a semester basis. Pre-clerkship course evaluation results are reported to all course directors, the assistant deans for medical education, the associate dean for medical education, and the provost.

The following elements of the Integrated Curricular Elements Program (ICE) take place during the preclerkship phase, and so the results are reported at the end of this section:

- Clerkship Prep Course (PICE)
- Comprehensive End of Year Exam (CEYE)
- STEP 1
- PLFSOM Longitudinal Survey



## Scientific Principles of Medicine

### *Introduction to Health and Disease*

Table 42: Evaluation Results for IHD Unit

Academic Year	Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
This unit was well organized.	4.2	88%	91%	<b>81%</b>
The amount of material presented was reasonable.	4.1	88%	85%	<b>94%</b>
I know the clinical relevance of the material.	-	95%	96%	<b>97%</b>
The session learning objectives were useful.	-	95%	98%	<b>93%</b>
Sessions met the identified learning objectives.	-	92%	97%	<b>93%</b>
The schemes integrated the basic sciences.	-	97%	97%	<b>97%</b>
The summative exam was fair.		91%	92%	<b>94%</b>
The clinical presentation schemes contributed to my learning in this unit.	4.4	97%	94%	<b>94%</b>
The process work sheets contributed to my learning in this unit.	4.4	92%	93%	<b>88%</b>
Attending sessions helped me learn the material.	4.3	82%	81%	<b>73%</b>
The self-taught materials contained enough information to meet the learning objectives.	-	78%	86%	<b>83%</b>
Available self-tests helped me learn the material.	-	94%	97%	<b>98%</b>
The work case examples helped me learn the material.	4.4	94%	96%	<b>95%</b>
Time spent in the lab was helpful.	-	72%	82%	<b>78%</b>
Overall, I learned useful knowledge and/or skills during this unit/course.	4.6	97%	98%	<b>97%</b>
N	107	103	103	<b>107</b>
Class size at date	107	105	110	<b>113</b>
Response Rate	100%	95%	94%	<b>95%</b>

\*5-point scale

† Percent Agreement could not be calculated

***Gastrointestinal System***

Table 43: Evaluation Results for SPM GIS Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
This unit was well organized.	93%	95%	93%	<b>84%</b>
The amount of material presented was reasonable.	75%	80%	85%	<b>74%</b>
I know the clinical relevance of the material.	-	97%	97%	<b>97%</b>
The session learning objectives were useful.	-	86%	90%	<b>86%</b>
Sessions met the identified learning objectives.	-	85%	92%	<b>88%</b>
The schemes integrated the basic sciences.	-	95%	94%	<b>93%</b>
The summative exam was fair.	-	62%	86%	<b>74%</b>
The clinical presentation schemes contributed to my learning in this unit.	93%	90%	88%	<b>91%</b>
The process work sheets contributed to my learning in this unit.	94%	84%	83%	<b>84%</b>
Attending sessions helped me learn the material.	87%	82%	76%	<b>63%</b>
The self-taught materials contained enough information to meet the learning objectives.	-	89%	80%	<b>77%</b>
Available self-tests helped me learn the material.	-	93%	96%	<b>94%</b>
The work case examples helped me learn the material.	94%	96%	96%	<b>95%</b>
Time spent in the lab was helpful.	-	72%	74%	<b>54%</b>
Overall, I learned useful knowledge and/or skills during this unit/course.	99%	100%	97%	<b>94%</b>
N	106	103	98	<b>107</b>
Class size at date	107	108	110	<b>113</b>
Response Rate	99%	95%	89%	<b>95%</b>

\*5-point scale

**Neuromusculoskeletal and Integumentary Systems**

Table 44: Evaluation Results for SPM IMN Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
This unit was well organized.	81%	87%	92%	81%
The amount of material presented was reasonable.	61%	78%	84%	83%
I know the clinical relevance of the material.	93%	97%	99%	97%
The session learning objectives were useful.	83%	90%	90%	90%
Sessions met the identified learning objectives.	82%	93%	92%	92%
The schemes integrated the basic sciences.	89%	92%	92%	91%
The summative exam was fair.	69%	92%	85%	80%
The clinical presentation 'schemes' contributed to my learning in this unit.	84%	87%	86%	86%
The process worksheets contributed to my learning in this unit.	77%	83%	85%	84%
Attending sessions helped me learn the material.	85%	79%	75%	70%
The self-taught materials contained enough information to meet the learning objectives.	61%	84%	86%	82%
Available self-tests helped me learn the material.	82%	90%	96%	91%
The work case examples helped me learn the material.	88%	96%	96%	94%
Time spent in lab was helpful.	76%	83%	84%	66%
Overall, I learned useful knowledge and/or skills during this unit.	97%	100%	97%	96%
N	96	97	104	109
Class size at date	107	105	110	113
Response Rate	90%	92%	95%	96%

\*5-point scale

**Liver and Hematology System**

Table 45: Evaluation Results for SPM HEM Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
This unit was well organized.	90%	98%	94%	<b>95%</b>
The amount of material presented was reasonable.	96%	98%	97%	<b>94%</b>
I know the clinical relevance of the material.	79%	99%	98%	<b>98%</b>
The session learning objectives were useful.	85%	90%	94%	<b>92%</b>
Sessions met the identified learning objectives.	91%	95%	95%	<b>93%</b>
The schemes integrated the basic sciences.	65%	95%	96%	<b>94%</b>
The summative exam was fair.	85%	92%	93%	<b>92%</b>
The clinical presentation schemes contributed to my learning.	93%	91%	94%	<b>91%</b>
The process worksheets contributed to my learning.	68%	82%	86%	<b>83%</b>
Attending sessions helped me learn the material.	79%	81%	81%	<b>73%</b>
The self-taught materials contained enough information to meet the learning objectives.	58%	95%	92%	<b>80%</b>
Available self-tests helped me learn the material.	78%	92%	98%	<b>92%</b>
The Work Case Examples helped me learn the material.	93%	98%	98%	<b>97%</b>
Time spent in lab was helpful.	65%	86%	80%	<b>79%</b>
Overall, I learned useful knowledge and/or skills during this unit.	96%	98%	94%	<b>97%</b>
N	104	104	104	<b>108</b>
Class size at date	107	105	107	<b>108</b>
Response Rate	97%	99%	97%	<b>100%</b>

\*5-point scale

**Cardiovascular and Respiratory System**

Table 46: Evaluation Results for SPM CVR Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
This unit was well organized.	93%	79%	72%	<b>32%</b>
The amount of material presented was reasonable.	93%	79%	69%	<b>56%</b>
I know the clinical relevance of the material.	73%	94%	91%	<b>88%</b>
The session learning objectives were useful.	80%	73%	75%	<b>63%</b>
Sessions met the identified learning objectives.	91%	76%	83%	<b>71%</b>
The schemes integrated the basic sciences.	66%	89%	85%	<b>87%</b>
The summative exam was fair.	71%	64%	65%	<b>30%</b>
The clinical presentation schemes contributed to my learning in this unit.	86%	86%	85%	<b>83%</b>
The process work sheets contributed to my learning in this unit.	76%	81%	80%	<b>74%</b>
Attending sessions helped me learn the material.	66%	68%	68%	<b>60%</b>
The self-taught materials contained enough information to meet the learning objectives.	65%	82%	77%	<b>64%</b>
Available self-tests helped me learn the material.	92%	88%	87%	<b>84%</b>
The work case examples helped me learn the material.	91%	91%	88%	<b>87%</b>
Time spent in the lab was helpful.	60%	76%	66%	<b>49%</b>
Overall, I learned useful knowledge and/or skills during this unit/course.	95%	96%	90%	<b>81%</b>
N	103	99	97	<b>105</b>
Class size at date	107	102	107	<b>107</b>
Response Rate	96%	97%	91%	<b>98%</b>

\*5-point scale

### Renal System

In AY 2015-2016 the Renal Unit was offered 2 times due to a change in schedule, as explained in the "[Curriculum Scheme](#)" section. Data for both classes is reported below.

Table 47: Evaluation Results for SPM RNL Unit

Academic Year	Percent Agreement				
	2015-2016*	2016-2017	2017-2018	2018-2019	
The unit was well organized.	56%	78%	39%	72%	<b>84%</b>
The amount of material presented was reasonable.	96%	93%	79%	87%	<b>96%</b>
I know the clinical relevance of the material.	-	94%	88%	93%	<b>94%</b>
The session learning objectives were useful.	-	84%	71%	86%	<b>89%</b>
Sessions met the identified learning objectives.	-	85%	75%	84%	<b>90%</b>
The schemes integrated the basic sciences.	-	85%	68%	77%	<b>96%</b>
The summative exam was fair.	-	77%	70%	88%	<b>86%</b>
The clinical presentation 'schemes' contributed to my learning.	76%	90%	58%	77%	<b>92%</b>
The process worksheets contributed to my learning.	72%	76%	42%	66%	<b>84%</b>
Attending sessions helped me learn the material.	-	75%	48%	65%	<b>78%</b>
The self-taught materials contained enough information to meet the learning objectives.	-	85%	80%	88%	<b>86%</b>
Available self-tests helped me learn the material.	-	91%	90%	88%	<b>92%</b>
The Work Case Examples helped me learn the material.	91%	95%	89%	86%	<b>92%</b>
Time spent in lab was helpful.	-	67%	70%	73%	<b>81%</b>
Overall, I learned useful knowledge and/or skills during this unit.	96%	97%	88%	93%	<b>95%</b>
N	100	100	105	89	<b>97</b>
Class size at date	107	107	107	99	<b>106</b>
Response Rate	93%	93%	98%	90%	<b>92%</b>

\*5-point scale

***CNS and Special Senses***

Table 48: Evaluation Results for SPM CSS Unit

Academic Year	Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The unit was well organized.	4.4	82%	81%	<b>74%</b>
The amount of material presented was reasonable.	4.1	82%	86%	<b>80%</b>
I know the clinical relevance of the material.	-	97%	92%	<b>87%</b>
The session learning objectives were useful.	-	83%	83%	<b>71%</b>
Sessions met the identified learning objectives.	-	85%	82%	<b>83%</b>
The schemes integrated the basic sciences.	-	87%	82%	<b>84%</b>
The summative exam was fair.	-	69%	79%	<b>85%</b>
The clinical presentation schemes contributed to my learning.	4.2	84%	79%	<b>68%</b>
The process worksheets contributed to my learning.	4.1	85%	74%	<b>70%</b>
Attending sessions helped me learn the material.	4.4	66%	61%	<b>52%</b>
The self-taught materials contained enough information to meet the learning objectives.	-	88%	83%	<b>78%</b>
Available self-tests helped me learn the material.	-	86%	84%	<b>83%</b>
The work case examples helped me learn the material.	4.7	96%	92%	<b>93%</b>
Time spent in the lab was helpful.	-	80%	70%	<b>67%</b>
Overall, I learned useful knowledge and/or skills during this unit.	4.6	98%	94%	<b>93%</b>
N	100	103	92	<b>92</b>
Class size at date	107	106	99	<b>102</b>
Response Rate	93%	97%	93%	<b>90%</b>

\*5-point scale

† Percent Agreement could not be calculated

**Endocrine System**

Table 49: Evaluation Results for SPM END Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
The unit was well organized.	93%	95%	77%	<b>23%</b>
The amount of material presented was reasonable.	93%	96%	86%	<b>78%</b>
I know the clinical relevance of the material.	98%	97%	97%	<b>85%</b>
The session learning objectives were useful.	86%	90%	84%	<b>56%</b>
Sessions met the identified learning objectives.	88%	94%	88%	<b>48%</b>
The schemes integrated the basic sciences.	83%	95%	92%	<b>72%</b>
The summative exam was fair.	81%	89%	63%	<b>78%</b>
The clinical presentation schemes contributed to my learning in this unit.	79%	92%	80%	<b>64%</b>
The process worksheets contributed to my learning in this unit.	77%	96%	84%	<b>69%</b>
Attending sessions helped me learn the material.	74%	77%	60%	<b>35%</b>
The self-taught materials contained enough information to meet the learning objectives.	80%	82%	87%	<b>48%</b>
Available self-tests helped me learn the material.	-	87%	74%	<b>73%</b>
The work case examples helped me learn the material.	97%	98%	81%	<b>86%</b>
Time spent in lab was helpful.	70%	83%	70%	<b>33%</b>
Overall, I learned useful knowledge and/or skills during this unit.	99%	98%	97%	<b>74%</b>
N	100	107	90	<b>96</b>
Class size at date	107	107	99	<b>105</b>
Response Rate	93%	100%	91%	<b>91%</b>

\*5-point scale



**Reproductive System**

Table 50: Evaluation Results for SPM REP Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
The unit was well organized.	60%	39%	72%	<b>76%</b>
The amount of material presented was reasonable.	70%	79%	87%	<b>75%</b>
I know the clinical relevance of the material.	90%	88%	93%	<b>95%</b>
The session learning objectives were useful.	70%	71%	86%	<b>82%</b>
The sessions met the identified learning objectives.	71%	75%	84%	<b>87%</b>
The schemes integrated the basic sciences.	59%	68%	77%	<b>88%</b>
The summative exam was fair.	41%	70%	88%	<b>91%</b>
The clinical presentation 'schemes' contributed to my learning.	66%	58%	77%	<b>76%</b>
The process worksheets contributed to my learning.	45%	42%	66%	<b>64%</b>
Attending sessions helped me learn the material.	57%	48%	65%	<b>58%</b>
The self-taught materials contained enough information to meet the learning objectives.	76%	80%	88%	<b>83%</b>
Available self-tests helped me learn the material.	-	90%	88%	<b>84%</b>
The Work Case Examples helped me learn the material.	84%	89%	86%	<b>89%</b>
Time spent in lab was helpful	59%	70%	73%	<b>67%</b>
Overall, I learned useful knowledge and/or skills during this unit.	86%	88%	93%	<b>93%</b>
N	100	105	89	<b>91</b>
Class size at date	107	107	99	<b>105</b>
Response Rate	93%	98%	90%	<b>87%</b>

\*5-point scale

**Mind and Human Development**

Table 51: Evaluation Results for SPM MHD Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
The unit was well organized.	84%	93%	91%	<b>90%</b>
The amount of material presented was reasonable.	82%	96%	91%	<b>92%</b>
I know the clinical relevance of the material.	92%	98%	91%	<b>96%</b>
The session learning objectives were useful.	78%	91%	89%	<b>82%</b>
Session met the identified learning objectives.	88%	93%	89%	<b>89%</b>
The schemes integrated the basic sciences.	80%	95%	85%	<b>88%</b>
The summative exam was fair.	59%	86%	78%	<b>86%</b>
The clinical presentation 'schemes' contributed to my learning.	79%	97%	90%	<b>86%</b>
The process worksheets contributed to my learning.	79%	91%	77%	<b>77%</b>
Attending sessions helped me learn the material.	72%	86%	70%	<b>75%</b>
The self-taught materials contained enough information to meet the learning objectives.	78%	89%	85%	<b>85%</b>
Available self-tests helped me learn the material.	-	87%	82%	<b>80%</b>
The work case examples helped me learn the material.	83%	94%	89%	<b>93%</b>
Time spent in lab was helpful.	57%	79%	62%	<b>75%</b>
Overall, I learned useful knowledge and/or skills during this unit.	93%	98%	95%	<b>95%</b>
N	99	105	90	<b>90</b>
Class size at date	107	106	99	<b>103</b>
Response Rate	93%	99%	91%	<b>87%</b>

\*5-point scale

## Medical Skills

### *Introduction to Health and Disease*

Table 52: Evaluation Results for Medical Skills IHD Unit

Academic Year	Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	4.3	98%	98%	<b>99%</b>
The Medical Skills session objectives were clearly identified.	-	96%	98%	<b>97%</b>
Medical Skills met the identified learning objectives.	4.4	99%	98%	<b>100%</b>
Weekly sessions prepared me for the skills exam.	-	98%	91%	<b>97%</b>
The amount of material presented was reasonable.	4.3	99%	99%	<b>100%</b>
The Medical Skills preparation materials helped me learn the material.	4.4	99%	97%	<b>100%</b>
The group skill building activities helped me learn the material.	4.3	96%	96%	<b>99%</b>
The standardized patient encounters helped me learn the material.	4.6	100%	95%	<b>98%</b>
The standardized patient feedback I received helped me improve my performance.	-	100%	98%	<b>95%</b>
The standardized patient case discussions helped me improve my performance	-	96%	99%	<b>96%</b>
This course encourages me.	4.5	95%	94%	<b>96%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	4.7	100%	98%	<b>99%</b>
The equipment in the skills room was in good working order.	-	98%	97%	<b>98%</b>
The standardized patients were prepared for the session.	-	99%	99%	<b>99%</b>
The standardized patients provided useful feedback on my performance.	-	97%	98%	<b>96%</b>
I am familiar with the needle stick policy	-	81%	83%	<b>73%</b>
N	107	98	102	<b>105</b>
Class size at date	107	108	110	<b>113</b>
Response Rate	100%	91%	93%	<b>93%</b>

\*5-point scale

† Percent Agreement could not be calculated

**Gastrointestinal System**

Table 53: Evaluation Results for Medical Skills GIS Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	93%	100%	99%	<b>98%</b>
The Medical Skills session objectives were clearly identified.	-	98%	98%	<b>97%</b>
Medical Skills met the identified learning objectives.	94%	99%	98%	<b>97%</b>
Weekly sessions prepared me for the skills exam.	-	96%	97%	<b>90%</b>
The amount of material presented was reasonable.	83%	98%	99%	<b>99%</b>
The Medical Skills preparation materials helped me learn the material.	94%	98%	98%	<b>96%</b>
The group skill building activities helped me learn the material.	88%	97%	98%	<b>96%</b>
The standardized patient encounters helped me learn the material.	95%	98%	99%	<b>97%</b>
The standardized patient feedback I received helped me improve my performance.	-	96%	99%	<b>96%</b>
The standardized patient case discussions helped me improve my performance	-	96%	99%	<b>97%</b>
This course encourages me.	90%	97%	98%	<b>93%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	99%	99%	99%	<b>99%</b>
The equipment in the skills room was in good working order.	-	100%	100%	<b>100%</b>
The standardized patients were prepared for the session.	-	98%	97%	<b>96%</b>
The standardized patients provided useful feedback on my performance.	-	94%	96%	<b>96%</b>
I am familiar with the needle stick policy	-	92%	85%	<b>87%</b>
N	106	103	99	<b>99</b>
Class size at date	107	108	110	<b>110</b>
Response Rate	99%	95%	90%	<b>90%</b>

\*5-point scale

***Integumentary and Neuromusculoskeletal Systems***

Table 54: Evaluation Results for Medical Skills IMN Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	91%	96%	99%	<b>96%</b>
The Medical Skills session objectives were clearly identified.	92%	96%	99%	<b>97%</b>
Medical Skills met the identified learning objectives.	94%	97%	100%	<b>98%</b>
Weekly sessions prepared me for the skills exam.	90%	93%	99%	<b>95%</b>
The amount of material presented was reasonable.	96%	98%	99%	<b>98%</b>
The Medical Skills preparation materials helped me learn the material.	95%	100%	99%	<b>100%</b>
The group skill building activities helped me learn the material.	91%	97%	99%	<b>100%</b>
The standardized patient encounters helped me learn the material.	95%	98%	97%	<b>96%</b>
The standardized patient feedback I received helped me improve my performance.	85%	97%	94%	<b>94%</b>
The standardized patient case discussions helped me improve my performance.	91%	97%	98%	<b>95%</b>
This course encourages me.	94%	99%	98%	<b>95%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	96%	100%	99%	<b>98%</b>
The equipment in the skills room was in good working order.	98%	99%	100%	<b>99%</b>
The standardized patients were prepared for the session.	86%	98%	97%	<b>99%</b>
The standardized patients provided useful feedback on my performance.	85%	96%	96%	<b>93%</b>
I am familiar with the needle stick policy.	-	97%	96%	<b>95%</b>
N	103	97	104	<b>108</b>
Class size at date	107	105	110	<b>113</b>
Response Rate	96%	92%	95%	<b>96%</b>

\*5-point scale

**Liver and Hematology System**

Table 55: Evaluation Results for Medical Skills HEM Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	96%	98%	98%	<b>99%</b>
The Medical Skills session objectives were clearly identified.	93%	100%	98%	<b>99%</b>
Medical Skills met the identified learning objectives.	95%	99%	99%	<b>99%</b>
Weekly sessions prepared me for the skills exam.	85%	93%	98%	<b>97%</b>
The amount of material presented was reasonable.	96%	99%	99%	<b>99%</b>
The Medical Skills preparation materials helped me learn the material.	96%	99%	98%	<b>97%</b>
The group skill building activities helped me learn the material.	89%	97%	97%	<b>99%</b>
The standardized patient encounters helped me learn the material.	94%	97%	95%	<b>97%</b>
The standardized patient feedback I received helped me improve my performance.	91%	97%	96%	<b>97%</b>
The standardized patient case discussions helped me improve my performance.	89%	98%	95%	<b>98%</b>
This course encourages me.	93%	97%	97%	<b>98%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	97%	99%	97%	<b>99%</b>
The equipment in the skills room was in good working order.	95%	100%	99%	<b>98%</b>
The standardized patients were prepared for the session.	88%	100%	99%	<b>97%</b>
The standardized patients provided useful feedback on my performance.	92%	94%	96%	<b>96%</b>
I am familiar with the needle stick policy.	-	98%	99%	<b>99%</b>
N	103	104	103	<b>107</b>
Class size at date	107	105	107	<b>108</b>
Response Rate	96%	99%	96%	<b>99%</b>

\*5-point scale

**Cardiovascular and Respiratory System**

Table 56: Evaluation Results for Medical Skills CVR Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	98%	98%	98%	<b>97%</b>
The Medical Skills session objectives were clearly identified.	98%	98%	97%	<b>96%</b>
Medical Skills met the identified learning objectives.	98%	96%	97%	<b>99%</b>
Weekly sessions prepared me for the skills exam.	93%	95%	96%	<b>96%</b>
The amount of material presented was reasonable.	98%	98%	97%	<b>99%</b>
The Medical Skills preparation materials helped me learn the material.	98%	97%	97%	<b>98%</b>
The group skill building activities helped me learn the material.	99%	96%	97%	<b>98%</b>
The standardized patient encounters helped me learn the material.	95%	95%	94%	<b>96%</b>
The standardized patient feedback I received helped me improve my performance.	89%	93%	96%	<b>93%</b>
The standardized patient case discussions helped me improve my performance.	95%	96%	97%	<b>97%</b>
This course encourages me.	97%	97%	97%	<b>95%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	98%	98%	98%	<b>97%</b>
The equipment in the skills room was in good working order.	98%	99%	97%	<b>98%</b>
The standardized patients were prepared for the session.	93%	98%	96%	<b>96%</b>
The standardized patients provided useful feedback on my performance.	93%	92%	96%	<b>93%</b>
I am familiar with the needle stick policy.	-	96%	98%	<b>98%</b>
N	104	98	91	<b>103</b>
Class size at date	107	102	107	<b>107</b>
Response Rate	97%	96%	85%	<b>96%</b>

\*5-point scale

### Renal System

In AY 2015-2016 Renal was offered 2 times due to a change in curriculum scheduling. Both classes are reported below.

Table 57: Evaluation Results for Medical Skills RNL Unit

Academic Year	Percent Agreement				
	2015-2016*	2016-2017	2017-2018	2018-2019	
Medical Skills was well organized.	81%	96%	98%	99%	<b>98%</b>
The Medical Skills session objectives were clearly identified.	-	90%	95%	98%	<b>99%</b>
Medical Skills met the identified learning objectives.	86%	91%	97%	99%	<b>99%</b>
Weekly sessions prepared me for the skills exam.	-	85%	92%	97%	<b>97%</b>
The amount of material presented was reasonable.	96%	96%	98%	100%	<b>98%</b>
The Medical Skills preparation materials helped me learn the material.	79%	90%	94%	99%	<b>99%</b>
The group skill building activities helped me learn the material.	84%	93%	98%	99%	<b>100%</b>
The standardized patient encounters helped me learn the material.	83%	89%	88%	94%	<b>96%</b>
The standardized patient feedback I received helped me improve my performance.	-	86%	88%	91%	<b>94%</b>
The standardized patient case discussions helped me improve my performance.	-	88%	88%	95%	<b>97%</b>
This course encourages me.	80%	91%	96%	99%	<b>100%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	94%	96%	99%	99%	<b>100%</b>
The equipment in the skills room was in good working order.	-	95%	97%	100%	<b>99%</b>
The standardized patients were prepared for the session.	-	98%	98%	97%	<b>97%</b>
The standardized patients provided useful feedback on my performance.	-	91%	97%	95%	<b>94%</b>
I am familiar with the needle stick policy.	-	-	100%	99%	<b>99%</b>
N	100	100	92	103	<b>99</b>
Class size at date	107	107	101	106	<b>106</b>
Response Rate	93%	93%	91%	97%	<b>93%</b>

\*5-point scale



**CNS and Special Senses**

Table 58: Evaluation Results for Medical Skills CSS Unit

Academic Year	Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	4.5	100%	99%	<b>97%</b>
The Medical Skills session objectives were clearly identified.	-	99%	98%	<b>96%</b>
Medical Skills met the identified learning objectives.	4.5	99%	98%	<b>95%</b>
Weekly sessions prepared me for the skills exam.	-	100%	99%	<b>94%</b>
The amount of material presented was reasonable.	4.4	99%	98%	<b>98%</b>
The Medical Skills preparation materials helped me learn the material.	4.6	100%	98%	<b>93%</b>
The group skill building activities helped me learn the material.	4.5	97%	97%	<b>95%</b>
The standardized patient encounters helped me learn the material.	4.6	99%	98%	<b>93%</b>
The standardized patient feedback I received helped me improve my performance.	-	97%	95%	<b>96%</b>
The standardized patient case discussions helped me improve my performance.	-	97%	97%	<b>96%</b>
This course encourages me.	4.4	99%	98%	<b>93%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	4.6	100%	99%	<b>97%</b>
The equipment in the skills room was in good working order.	-	98%	99%	<b>100%</b>
The standardized patients were prepared for the session.	-	98%	96%	<b>97%</b>
The standardized patients provided useful feedback on my performance.	-	95%	94%	<b>96%</b>
I am familiar with the needle stick policy.	-	85%	94%	<b>99%</b>
N	100	107	93	<b>92</b>
Class size at date	107	107	99	<b>102</b>
Response Rate	93%	100%	94%	<b>90%</b>

\*5-point scale

† Percent Agreement could not be calculated

**Endocrine System**

Table 59: Evaluation Results for Medical Skills END Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	98%	98%	99%	<b>100%</b>
The Medical Skills session objectives were clearly identified.	98%	97%	98%	<b>100%</b>
Medical Skills met the identified learning objectives.	98%	99%	100%	<b>100%</b>
Weekly sessions prepared me for the skills exam.	99%	98%	100%	<b>97%</b>
The amount of material presented was reasonable.	100%	99%	99%	<b>98%</b>
The Medical Skills preparation materials helped me learn the material.	99%	98%	98%	<b>97%</b>
The group skill building activities helped me learn the material.	98%	98%	100%	<b>96%</b>
The standardized patient encounters helped me learn the material.	99%	96%	99%	<b>97%</b>
The standardized patient feedback I received helped me improve my performance.	87%	96%	98%	<b>96%</b>
The standardized patient case discussions helped me improve my performance.	98%	96%	99%	<b>97%</b>
This course encourages me.	98%	99%	97%	<b>96%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	100%	100%	100%	<b>100%</b>
The equipment in the skills room was in good working order.	96%	98%	98%	<b>99%</b>
The standardized patients were prepared for the session.	93%	96%	100%	<b>97%</b>
The standardized patients provided useful feedback on my performance.	87%	94%	99%	<b>95%</b>
I am familiar with the needle stick policy.	-	94%	97%	<b>99%</b>
N	102	105	91	<b>96</b>
Class size at date	107	107	99	<b>105</b>
Response Rate	95%	98%	92%	<b>91%</b>

\*5-point scale

**Reproductive System**

Table 60: Evaluation Results for Medical Skills REP Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	83%	85%	87%	<b>93%</b>
The Medical Skills session objectives were clearly identified.	83%	89%	89%	<b>94%</b>
Medical Skills met the identified learning objectives.	86%	90%	92%	<b>95%</b>
Weekly sessions prepared me for the skills exam.	87%	86%	90%	<b>92%</b>
The amount of material presented was reasonable.	90%	98%	92%	<b>98%</b>
The Medical Skills preparation materials helped me learn the material.	77%	86%	83%	<b>90%</b>
The group skill building activities helped me learn the material.	93%	89%	92%	<b>94%</b>
The standardized patient encounters helped me learn the material.	89%	91%	91%	<b>90%</b>
The standardized patient feedback I received helped me improve my performance.	85%	94%	92%	<b>90%</b>
The standardized patient case discussions helped me improve my performance	90%	87%	92%	<b>94%</b>
This course encourages me.	87%	91%	90%	<b>95%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	94%	93%	93%	<b>96%</b>
The equipment in the skills room was in good working order.	97%	99%	99%	<b>98%</b>
The standardized patients were prepared for the session.	92%	97%	100%	<b>94%</b>
The standardized patients provided useful feedback on my performance.	88%	94%	96%	<b>89%</b>
I am familiar with the needle stick policy	-	92%	98%	<b>100%</b>
N	100	106	91	<b>93</b>
Class size at date	107	107	99	<b>105</b>
Response Rate	93%	99%	92%	<b>89%</b>

\*5-point scale

**Mind and Human Development**

Table 61: Evaluation Results for Medical Skills MHD Unit

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Medical Skills was well organized.	95%	96%	96%	<b>95%</b>
The Medical Skills session objectives were clearly identified.	90%	96%	96%	<b>96%</b>
Medical Skills met the identified learning objectives.	93%	98%	98%	<b>96%</b>
Weekly sessions prepared me for the skills exam.	88%	95%	91%	<b>88%</b>
The amount of material presented was reasonable.	95%	96%	98%	<b>98%</b>
The Medical Skills preparation materials helped me learn the material.	88%	94%	95%	<b>97%</b>
The group skill building activities helped me learn the material.	95%	93%	88%	<b>91%</b>
The standardized patient encounters helped me learn the material.	94%	97%	99%	<b>97%</b>
The standardized patient feedback I received helped me improve my performance.	92%	96%	98%	<b>89%</b>
The standardized patient case discussions helped me improve my performance	93%	94%	97%	<b>96%</b>
This course encourages me.	95%	98%	96%	<b>96%</b>
Overall, I learned useful knowledge and/or skills during this unit of Medical Skills.	97%	99%	99%	<b>98%</b>
The equipment in the skills room was in good working order.	94%	100%	100%	<b>97%</b>
The standardized patients were prepared for the session.	93%	97%	100%	<b>95%</b>
The standardized patients provided useful feedback on my performance.	94%	97%	99%	<b>92%</b>
I am familiar with the needle stick policy	-	95%	98%	<b>96%</b>
N	99	101	89	<b>89</b>
Class size at date	107	107	98	<b>103</b>
Response Rate	93%	94%	91%	<b>86%</b>

\*5-point scale

## Master's Colloquium

### *Masters colloquium I*

Table 62: Evaluation Results for Masters' Colloquium I

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Masters' Colloquium was well organized.	90%	95%	100%	<b>93%</b>
Session objectives were clear.	82%	90%	97%	<b>92%</b>
The amount of material presented was reasonable.	98%	99%	98%	<b>96%</b>
I understand how the content of Colloquium is applicable to the practice of medicine.	95%	97%	98%	<b>92%</b>
I feel that Masters' Colloquium is valuable to me.	86%	90%	93%	<b>87%</b>
Masters' Colloquium broadens my perspectives.	87%	99%	95%	<b>90%</b>
Masters' Colloquium challenges my assumptions.	87%	94%	94%	<b>90%</b>
Masters' Colloquium helps me understand what is expected of me as a doctor.	90%	99%	95%	<b>89%</b>
My college masters gave me useful feedback	-	95%	99%	<b>89%</b>
Overall, I learned useful knowledge and/or skills during Masters' Colloquium.	85%	93%	96%	<b>88%</b>
N	103	97	103	<b>112</b>
Class size at date	107	105	110	<b>113</b>
Response Rate	96%	92%	94%	<b>99%</b>

\*5-point scale

***Masters colloquium II***

Table 63: Evaluation Results for Masters' Colloquium II- MS2

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Masters' Colloquium was well organized.	90%	97%	99%	<b>99%</b>
Session objectives were clear.	82%	96%	98%	<b>96%</b>
The amount of material presented was reasonable.	98%	98%	97%	<b>99%</b>
I understand how the content of Colloquium is applicable to the practice of medicine.	95%	97%	97%	<b>95%</b>
I feel that Masters' Colloquium is valuable to me.	86%	93%	85%	<b>90%</b>
Masters' Colloquium broadens my perspectives.	87%	93%	89%	<b>95%</b>
Masters' Colloquium challenges my assumptions.	87%	93%	91%	<b>96%</b>
Masters' Colloquium helps me understand what is expected of me as a doctor.	90%	95%	91%	<b>96%</b>
My college masters gave me useful feedback	85%	93%	93%	<b>100%</b>
Overall, I learned useful knowledge and/or skills during Masters' Colloquium.	90%	94%	92%	<b>94%</b>
N	103	105	91	<b>95</b>
Class size at date	107	107	99	<b>105</b>
Response Rate	96%	98%	91%	<b>90%</b>

\*5-point scale

***Masters colloquium III***

Table: Evaluation Results for Masters' Colloquium III

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Masters' Colloquium was well organized.	94%	97%	98%	<b>96%</b>
Session objectives were clear.	91%	96%	98%	<b>94%</b>
The amount of material presented was reasonable.	98%	99%	96%	<b>97%</b>
I understand how the content of Colloquium is applicable to the practice of medicine.	98%	98%	97%	<b>91%</b>
I feel that Masters' Colloquium is valuable to me.	87%	94%	85%	<b>84%</b>
Masters' Colloquium broadens my perspectives.	92%	94%	89%	<b>88%</b>
Masters' Colloquium challenges my assumptions.	88%	94%	91%	<b>88%</b>
Masters' Colloquium helps me understand what is expected of me as a doctor.	95%	96%	91%	<b>89%</b>
My college masters gave me useful feedback	-	94%	94%	<b>88%</b>
Overall, I learned useful knowledge and/or skills during Masters' Colloquium.	95%	95%	92%	<b>85%</b>
N	103	105	91	<b>98</b>
Class size at date	107	107	99	<b>106</b>
Response Rate	96%	98%	91%	<b>92%</b>

\*5-point scale

***Masters colloquium IV***

Table 64: Evaluation Results for Masters' Colloquium IV

Academic Year	Percent Agreement			
	2015-2016*	2016-2017	2017-2018	2018-2019
Masters' Colloquium was well organized.	94%	95%	99%	<b>99%</b>
Session objectives were clear.	90%	94%	97%	<b>98%</b>
The amount of material presented was reasonable.	93%	96%	98%	<b>98%</b>
I understand how the content of Colloquium is applicable to the practice of medicine.	92%	98%	98%	<b>96%</b>
I feel that Masters' Colloquium is valuable to me.	86%	93%	95%	<b>94%</b>
Masters' Colloquium broadens my perspectives.	86%	92%	96%	<b>97%</b>
Masters' Colloquium challenges my assumptions.	85%	93%	91%	<b>93%</b>
Masters' Colloquium helps me understand what is expected of me as a doctor.	92%	97%	95%	<b>96%</b>
My college masters gave me useful feedback	-	94%	98%	<b>98%</b>
Overall, I learned useful knowledge and/or skills during Masters' Colloquium.	92%	95%	96%	<b>96%</b>
N	84	82	90	<b>87</b>
Class size at date	107	106	99	<b>103</b>
Response Rate	79%	77%	91%	<b>84%</b>

\*5-point scale



## Society, Community, and the Individual

The Immersion and Spanish components of the SCI course are evaluated independently using metrics tailored specifically to them. Immersion is evaluated when it experience ends, and Spanish is evaluated at the end of every unit, except for the last unit of a semester; SCI as a whole is evaluated at that point.

This section reports SCI immersion results first, followed by the SCI course results collected at the end of each semester, and concludes with the Spanish component evaluation results.

### Immersion

Table 65: Evaluation Results for SCI Immersion

Academic Year	Percent Agreement			
	2015-2016‡	2016-2017	2017-2018	2018-2019
The SCI Immersion Block was well organized.	-	74%	66%	<b>76%</b>
The learning objectives were clearly identified.	-	71%	82%	<b>79%</b>
The SCI Immersion Block met the identified learning objectives.	-	91%	93%	<b>92%</b>
The small group learning activities helped me learn the material.	-	91%	96%	<b>93%</b>
The amount of material presented was reasonable.	-	88%	93%	<b>85%</b>
The lectures helped me learn the material.	-	99%	92%	<b>69%</b>
The interactive sessions helped me learn the material.	-	72%	77%	<b>91%</b>
The community assessment helped me learn the material.	-	89%	93%	<b>80%</b>
I improved my Spanish speaking skills.	-	87%	93%	<b>99%</b>
The community assessment gave me a good feel for the El Paso/New Mexico community.	-	9%	96%	<b>92%</b>
I understand how the SCI Immersion Block course content is applicable to the practice of medicine.	-	93%	98%	<b>85%</b>
Overall, I learned useful knowledge and/or skills during this unit/course.	-	95%	97%	<b>92%</b>
N	-	104	102	<b>102</b>
Class size at date	107	108	110	<b>113</b>
Response Rate	0%	96%	93%	<b>90%</b>

\*5-point scale

‡Data not available

***Society, Community and the Individual I***

Table 66: Evaluation Results for SCI I - MS1 group

<b>MS1 Fall Academic Year</b>	<b>Percent Agreement</b>			
	<b>2015-2016*</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>
SCI was well organized.	51%	85%	82%	<b>78%</b>
SCI session learning objectives were clearly identified.	57%	87%	87%	<b>85%</b>
The course met the identified learning objectives.	44%	93%	87%	<b>88%</b>
SCI broadens my perspectives.	55%	79%	83%	<b>79%</b>
The material covered is relevant to the practice of medicine.	66%	85%	87%	<b>82%</b>
The amount of material presented was reasonable.	74%	87%	95%	<b>91%</b>
Attending sessions helped me learn the material.	37%	69%	60%	<b>62%</b>
The community clinic experience is a worthwhile component of the curriculum.	73%	82%	81%	<b>84%</b>
My community preceptor understood the learning objectives.	65%	94%	87%	<b>87%</b>
My community preceptor ensured that the learning objectives were met.	63%	79%	86%	<b>92%</b>
Spanish is a worthwhile component of the curriculum.	83%	91%	83%	<b>91%</b>
I improved my Spanish speaking skills.	83%	87%	78%	<b>91%</b>
Overall, I learned useful knowledge and/or skills during SCI.	75%	90%	87%	<b>91%</b>
<b>N</b>	<b>107</b>	<b>97</b>	<b>102</b>	<b>108</b>
<b>Class size at date</b>	<b>107</b>	<b>105</b>	<b>110</b>	<b>113</b>
<b>Response Rate</b>	<b>100%</b>	<b>92%</b>	<b>93%</b>	<b>96%</b>

\*5-point scale

***Society, Community and the Individual II***

Table 67: Evaluation Results for SCI II - MS2 group

<b>MS2 Fall Academic Year</b>	<b>Percent Agreement</b>			
	<b>2015-2016*</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>
SCI was well organized.	94%	44%	47%	<b>76%</b>
SCI session learning objectives were clearly identified.	90%	37%	79%	<b>78%</b>
The course met the identified learning objectives.	98%	35%	63%	<b>79%</b>
SCI broadens my perspectives.	98%	63%	62%	<b>76%</b>
The material covered is relevant to the practice of medicine.	87%	63%	49%	<b>75%</b>
The amount of material presented was reasonable.	92%	78%	83%	<b>87%</b>
Attending sessions helped me learn the material.	88%	40%	84%	<b>61%</b>
The community clinic experience is a worthwhile component of the curriculum.	95%	80%	66%	<b>71%</b>
My community preceptor understood the learning objectives.	95%	77%	67%	<b>74%</b>
My community preceptor ensured that the learning objectives were met.	94%	79%	68%	<b>74%</b>
Spanish is a worthwhile component of the curriculum.	90%	90%	50%	<b>84%</b>
I improved my Spanish speaking skills.	98%	90%	73%	<b>72%</b>
Overall, I learned useful knowledge and/or skills during SCI.	98%	73%	68%	<b>80%</b>
<b>N</b>	<b>99</b>	<b>101</b>	<b>91</b>	<b>95</b>
<b>Class size at date</b>	<b>106</b>	<b>107</b>	<b>99</b>	<b>105</b>
<b>Response Rate</b>	<b>93%</b>	<b>94%</b>	<b>92%</b>	<b>90%</b>

\*5-point scale

***Society, Community and the Individual III***

Table 68: Evaluation Results for SCI III - MS1 group

<b>MS1 Spring Academic Year</b>	<b>Percent Agreement</b>			
	<b>2015-2016*</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>
SCI was well organized.	94%	44%	62%	<b>79%</b>
SCI session learning objectives were clearly identified.	90%	37%	50%	<b>83%</b>
The course met the identified learning objectives.	98%	35%	49%	<b>89%</b>
SCI broadens my perspectives.	98%	64%	68%	<b>80%</b>
The material covered is relevant to the practice of medicine.	87%	64%	68%	<b>78%</b>
The amount of material presented was reasonable.	92%	79%	73%	<b>77%</b>
Attending sessions helped me learn the material.	88%	40%	47%	<b>52%</b>
The community clinic experience is a worthwhile component of the curriculum.	95%	81%	63%	<b>86%</b>
My community preceptor understood the learning objectives.	95%	78%	67%	<b>89%</b>
My community preceptor ensured that the learning objectives were met.	94%	80%	66%	<b>91%</b>
Spanish is a worthwhile component of the curriculum.	90%	91%	84%	<b>91%</b>
I improved my Spanish speaking skills.	98%	91%	83%	<b>91%</b>
Overall, I learned useful knowledge and/or skills during SCI.	98%	74%	79%	<b>89%</b>
<b>N</b>	<b>99</b>	<b>101</b>	<b>91</b>	<b>101</b>
<b>Class size at date</b>	<b>106</b>	<b>107</b>	<b>99</b>	<b>106</b>
<b>Response Rate</b>	<b>93%</b>	<b>94%</b>	<b>92%</b>	<b>95%</b>

\*5-point scale

***Society, Community and the Individual IV***

Table 69: Evaluation Results for SCI IV - MS2 group

<b>MS2 Spring Academic Year</b>	<b>Percent Agreement</b>			
	<b>2015-2016*</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>
SCI was well organized.	44%	65%	75%	<b>77%</b>
SCI session learning objectives were clearly identified.	52%	61%	74%	<b>73%</b>
The course met the identified learning objectives.	31%	65%	75%	<b>76%</b>
SCI broadens my perspectives.	51%	75%	73%	<b>80%</b>
The material covered is relevant to the practice of medicine.	54%	79%	75%	<b>82%</b>
The amount of material presented was reasonable.	55%	86%	75%	<b>87%</b>
Attending sessions helped me learn the material.	18%	61%	53%	<b>61%</b>
The community clinic experience is a worthwhile component of the curriculum.	64%	80%	75%	<b>67%</b>
My community preceptor understood the learning objectives.	65%	77%	74%	<b>77%</b>
My community preceptor ensured that the learning objectives were met.	64%	78%	73%	<b>75%</b>
Spanish is a worthwhile component of the curriculum.	84%	90%	80%	<b>78%</b>
I improved my Spanish speaking skills.	81%	88%	72%	<b>73%</b>
Overall, I learned useful knowledge and/or skills during SCI.	74%	84%	73%	<b>82%</b>
<b>N</b>	<b>99</b>	<b>86</b>	<b>86</b>	<b>87</b>
<b>Class size at date</b>	<b>107</b>	<b>106</b>	<b>99</b>	<b>103</b>
<b>Response Rate</b>	<b>93%</b>	<b>81%</b>	<b>87%</b>	<b>84%</b>

\*5-point scale

## Spanish

Data reported in the 2 tables below reflect the average percentage agreement by level for the full academic year for each of the pre-clerkship years. Only 3 academic years' worth of data are reported for Spanish.

### *MS1 Unit Average Percentage Agreement per Spanish Level*

Table 70: MS1 Average Percent Agreement per Spanish Level

Academic Year	Average Percent Agreement								
	2016-2017			2017-2018			2018-2019		
	BASIC	INTERMED	ADVANCED	BASIC	INTERMED	ADVANCED	BASIC	INTERMED	ADVANCED
This unit/course was well organized.	97%	96%	97%	98%	96%	57%	98%	95%	85%
The learning objectives were clearly identified.	95%	92%	96%	97%	90%	55%	97%	92%	90%
The course met the identified learning objectives.	98%	96%	96%	99%	94%	56%	98%	94%	92%
The amount of material presented was reasonable.	98%	98%	97%	98%	99%	66%	98%	96%	97%
The homework provided practical reinforcement of material covered in class.	92%	96%	95%	98%	93%	56%	95%	94%	87%
The course handouts were practical.	98%	99%	99%	99%	93%	56%	96%	95%	93%
I understand how I am graded in Spanish.	95%	91%	95%	96%	92%	57%	97%	88%	91%
I improved my Spanish speaking skills.	97%	96%	90%	99%	85%	51%	94%	93%	88%
I can ask basic patient information in Spanish.	99%	98%	98%	97%	99%	75%	96%	96%	97%
My medical Spanish instructor/TA provided constructive feedback to improve my medical Spanish skills.	98%	98%	92%	100%	100%	60%	98%	95%	92%
My medical Spanish instructor/TA conducted practical in class activities that helped improve my medical Spanish skills.	100%	97%	92%	99%	95%	54%	96%	96%	87%
Overall, I learned useful knowledge and/or skills during this unit's Spanish sessions.	99%	99%	91%	98%	95%	52%	95%	96%	89%
N	38	33	30	47	23	29	62	31	21

**MS2 Unit Average Percentage Agreement per Spanish Level**

Table 71: MS2 Average Percent Agreement per Spanish Level

Academic Year	Average Percent Agreement								
	2016-2017			2017-2018			2018-2019		
	BASIC	INTERMED	ADVANCED	BASIC	INTERMED	ADVANCED	BASIC	INTERMED	ADVANCED
This unit/course was well organized.	92%	94%	98%	99%	99%	96%	97%	96%	93%
The learning objectives were clearly identified.	88%	87%	91%	98%	99%	91%	98%	92%	90%
The course met the identified learning objectives.	92%	91%	94%	100%	99%	97%	98%	94%	91%
The amount of material presented was reasonable.	94%	99%	98%	100%	97%	96%	99%	101%	97%
The homework provided practical reinforcement of material covered in class.	93%	91%	89%	95%	97%	95%	98%	88%	88%
The course handouts were practical.	91%	91%	95%	101%	97%	93%	98%	89%	86%
I understand how I am graded in Spanish.	96%	97%	89%	100%	99%	89%	98%	88%	93%
I improved my Spanish speaking skills.	96%	89%	89%	95%	97%	85%	98%	84%	90%
I can ask basic patient information in Spanish.	95%	100%	100%	100%	95%	100%	100%	98%	98%
My medical Spanish instructor/TA provided constructive feedback to improve my medical Spanish skills.	98%	92%	95%	97%	97%	96%	98%	96%	96%
My medical Spanish instructor/TA conducted practical in class activities that helped improve my medical Spanish skills.	97%	94%	95%	97%	95%	93%	98%	96%	94%
Overall, I learned useful knowledge and/or skills during this unit's Spanish sessions.	96%	97%	95%	98%	97%	91%	98%	84%	90%
N	43	32	22	34	28	27	45	21	28

## Integrated Curricular Elements Program

### *Clerkship Preparation Course (PICE)*

This is a credit based course designed to ensure students possess the essential knowledge and skills required for entry into the clerkship phase of their medical training. The major elements of the course include:

- Advanced Cardiovascular Life Support (ACLS) training
- Tankside Grand Rounds
- Objective Structured Clinical Examination (OSCE)
- Self-directed Learning Phase
- NBME Comprehensive Basic Science Exam (CBSE)

The Clerkship preparation course was offered for the first time during AY 2016-2017 and offered for the last time in AY 2018-2019.

Table 72: PICE course percent agreement

Academic Year	Percent Agreement		
	2016-2017	2017-2018	2018-2019
The course objectives were clear.	55%	83%	<b>81%</b>
The course met its objectives.	58%	84%	<b>86%</b>
The ACLS increased my sense of preparation for emergency situations.	96%	95%	<b>95%</b>
The M2 OSCE was a fair assessment.	97%	98%	<b>93%</b>
My Tank-side team had adequate guidance in preparing our presentation.	89%	89%	<b>72%</b>
All members of my Tank-side team contributed to the presentation.	96%	94%	<b>92%</b>
I understood what my self-directed learning plan was supposed to contain.	60%	75%	<b>90%</b>
I got adequate guidance in improving my plan.	83%	94%	<b>89%</b>
My self-directed learning plan helped me focus my STEP 1 studies.	36%	52%	<b>77%</b>
I had adequate time to implement my self-directed learning plan.	62%	75%	<b>74%</b>
Overall, this course helped me prepare for STEP 1.	36%	40%	<b>51%</b>
Overall, I feel prepared for the MS3 clerkships.	71%	66%	<b>72%</b>
N	82	83	<b>86</b>
Class size at date	103	97	<b>103</b>
Response Rate	80%	86%	<b>83%</b>



### ***Comprehensive End of Year Exam (CEYE)***

The CEYE is an In-house outcome prognostic Instrument assembled by PLFSOM faculty on the basis of the content areas taught in the M1 year. It is customized with items from a secure pool of NBME basic science subject questions. The exam is given to MS1 students through the NBME portal and the NBME provides us with score reports, item analysis reports and, for areas with 25 or more questions, a content area sub-score.

The original exam was designed for the class of 2013 and has been updated by the faculty annually. In AY 2015-2016 the Year 1 & 2 committee redesigned the test so that more than just 3 content areas received sub-scores. The test is composed of 150 multiple choice items divided into 2 sections.

The following tables report historical first attempt performance data for the combined sections first, and then current annual report year data per section.

### ***Historical Performance on First Attempt***

Table 73: Historical First Attempt Performance on the CEYE

<b>Class</b>	<b>High Score on First Take</b>	<b>Low Score on First Take</b>	<b>Median</b>	<b>Mean</b>	<b>Std Dev</b>
<b>2013</b>	88	57	70	71	7.8
<b>2014</b>	85	58	71	71	6.5
<b>2015</b>	89	58	72	72	6.8
<b>2016</b>	90	59	77	76	7.0
<b>2017</b>	88	58	75	74	6.4
<b>2018</b>	89	61	73	73	5.8
<b>2019</b>	92	60	73	73	5.9
<b>2020</b>	90	51	70	71	7.6
<b>2021</b>	89	45	73	72	8.2
<b>2022</b>	<b>86</b>	<b>47</b>	<b>71</b>	<b>70</b>	<b>7.3</b>

**AY 2018-2019 Content Area Performance on First Attempt - Sections 1 & 2**

For the following Table of area scoring, all scores are scaled for a mean of 70% and a standard deviation of 8. Scaled scores omit those who did not take the test under standard timing, were more than 3 SD below the mean, or omitted more than 10% of the items. Please note that items contribute to more than one area.

Table 74: Content area for Section 1 of the CEYE, AY 2018-2019

<b>Content Area CEYE Section 1 AY 2018-2019</b>	<b>N Items</b>	<b>SEM</b>	<b>Reliability</b>	<b>Mean</b>	<b>SD</b>	<b>Low</b>	<b>High</b>
General pathology	33	5	0.66	70	8	45	84
General principles	139	3	0.83	70	8	48	86
Society, community, and the individual	32	6	0.39	70	8	47	87
Biostatistics	14	7	0.22	70	8	51	85
Biochemistry	23	5	0.64	70	8	50	86
Cell biology	15	5	0.54	70	8	51	86
Epidemiology	10	7	0.12	70	8	49	81
Ethics	10	7	0.22	70	8	49	84
Genetics	17	6	0.37	70	8	55	88
Immunology	20	5	0.57	70	8	43	82
Interview, patient education, communication	14	7	0.23	70	8	45	80
Microbiology	22	5	0.58	70	8	46	82
Pharmacology	17	6	0.52	70	8	50	84
Physiology	17	6	0.42	70	8	53	85
Gastrointestinal	13	7	0.18	70	8	49	87
Hematopoietic/lymphoreticular	20	5	0.58	70	8	49	85
Respiratory	16	6	0.4	70	8	49	85

Table 75: Content area for Section 2 of the CEYE, AY 2018-2019

<b>Content Area CEYE Section 2 AY 2018-2019</b>	<b>N Items</b>	<b>SEM</b>	<b>Reliability</b>	<b>Mean</b>	<b>SD</b>	<b>Low</b>	<b>High</b>
Clinical diagnosis	66	4	0.77	70	8	48	82
Gross anatomy	26	5	0.68	70	8	50	84
Musculoskeletal	27	5	0.62	70	8	48	83
Physiology	26	6	0.44	70	8	50	85
System pathology	74	4	0.80	70	8	47	83
Biochemistry	10	7	0.36	70	8	47	82
Embryology	10	6	0.32	70	8	49	84
Histology	18	6	0.46	70	8	46	85
Immunology	14	5	0.55	70	8	41	80
Microbiology	17	5	0.56	70	8	46	83
Neuroscience	14	6	0.43	70	8	47	85
Physical examination	20	7	0.26	70	8	48	84
Pharmacology	16	6	0.44	70	8	53	86
Peripheral nervous system	16	6	0.46	70	8	47	85
Cardiovascular	23	5	0.54	70	8	46	84
Skin	14	7	0.36	70	8	45	85
Gastrointestinal	23	5	0.65	70	8	52	82
Hematopoietic/lymphoreticular	19	5	0.56	70	8	49	84
Nervous	20	6	0.46	70	8	47	88
Renal	20	5	0.59	70	8	42	82
Respiratory	22	6	0.38	70	8	48	85

**Step 1**

At the end of the second year, students take STEP 1; passing is required in order to continue into the M3 year. STEP1 scores are reported on the calendar year basis, not class year. Historical data below comes from annual reports from the NBME and are reported in the format required for our LCME accreditation documentation.

Table 76: Historical Step 1 Performance Over Time

Calendar Year	No. Examined	Percent Passing PLFSOM/National	PLFSOM		National Mean	
			Mean	SD	Mean	SD
2011	36	97% / 94%	224	19	224	22
2012	55	98% / 95%	230	17	227	22
2013	76	100% / 96%	226	18	228	21
2014	73	97% / 96%	235	16	229	20
2015	102	93% / 95%	220	20	229	20
2016	92	95% / 95%	223	17	228	21
2017	106	96% / 96%	223	19	229	20
2018	92	95%/96%	221	18	230	19
<b>Interim data for Calendar Year 2018</b>						
2019	NA	NA	NA	NA	-	-

**Step 1 Trends over Time**

Figure 15: PLFSOM Percent Pass First Time Comparison to National Percent Passing

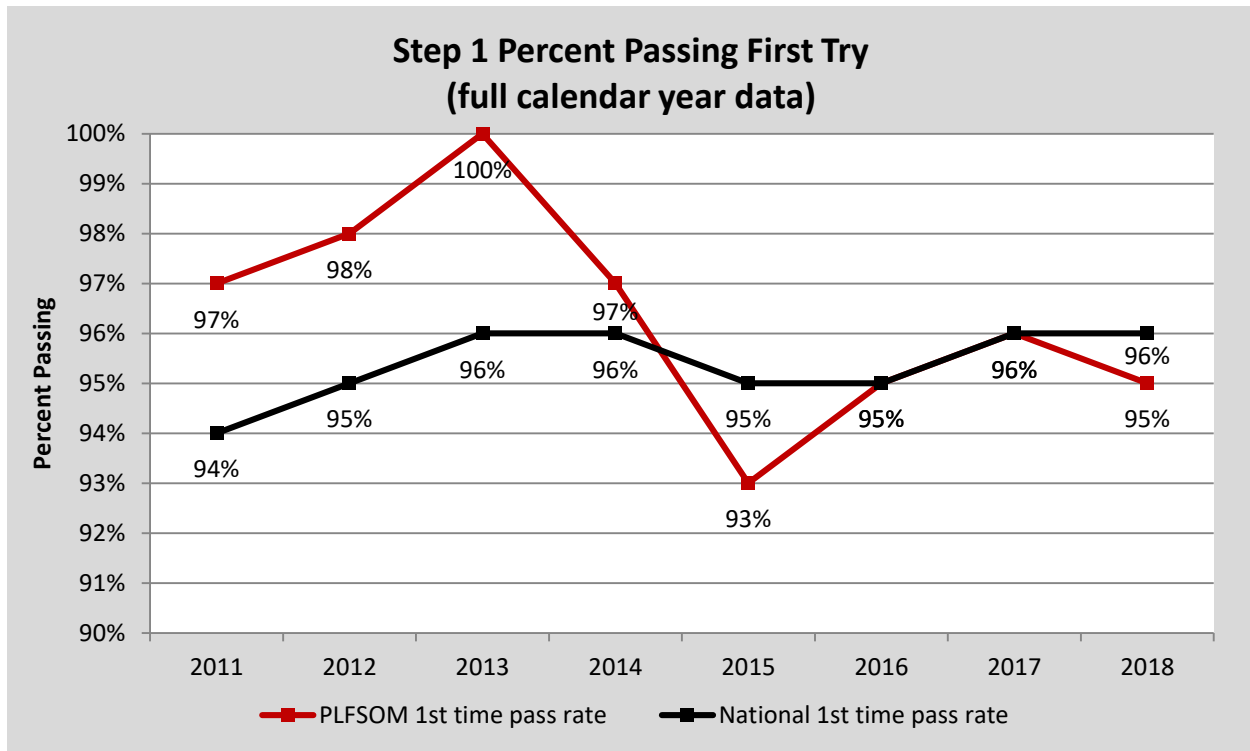
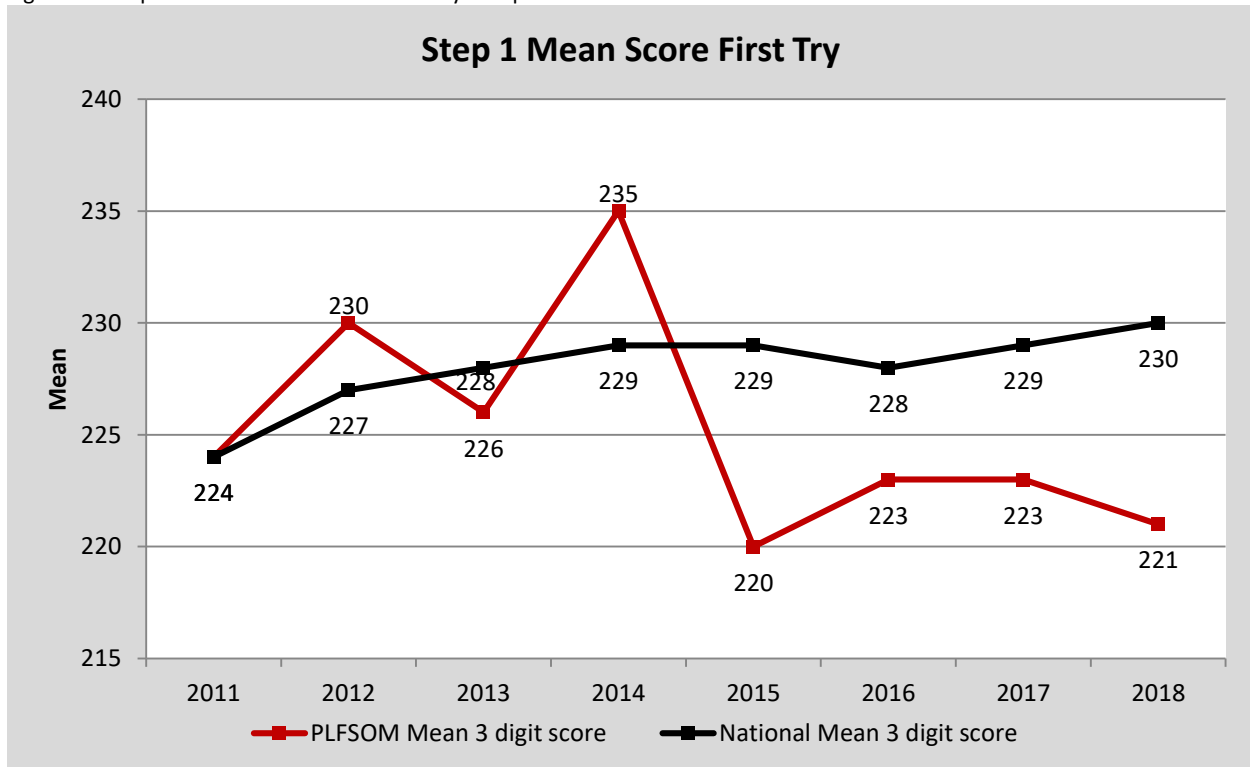


Figure 16: Step 1 PLFSOM Mean Score First Try Comparison to National Mean Score



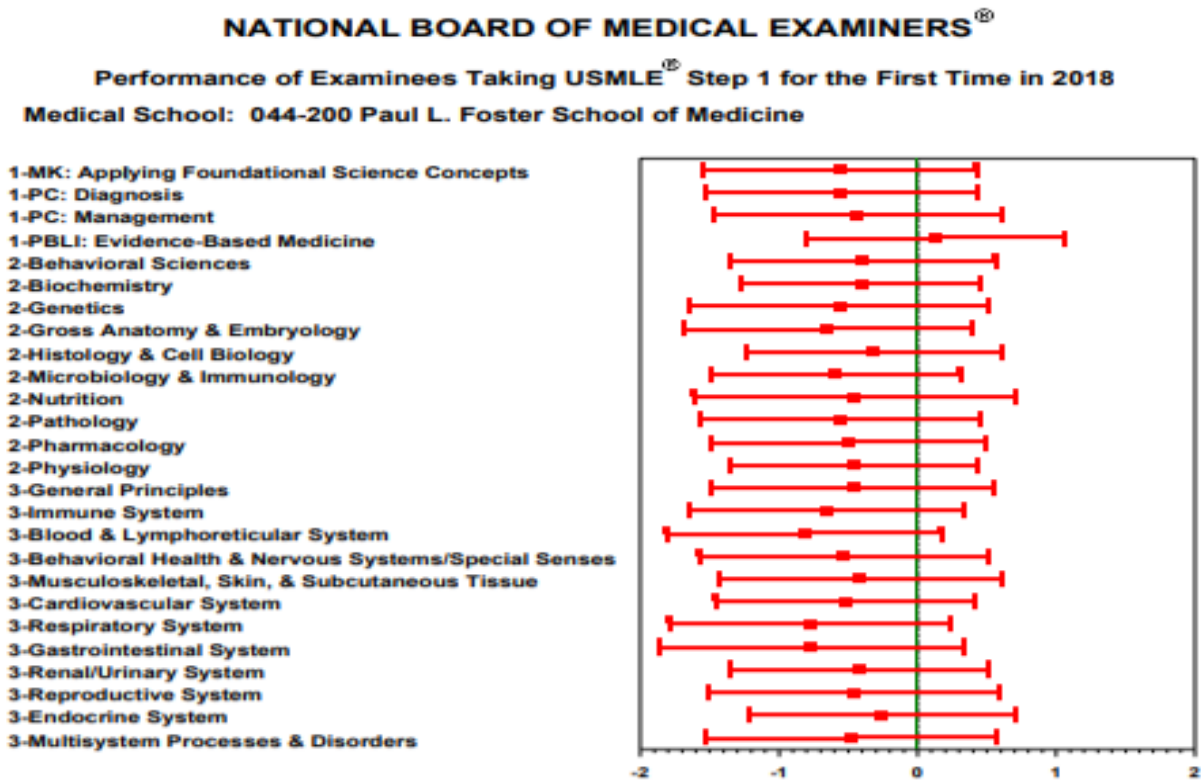
### Score Plots:

The following graphic is the annual score plot for STEP1 provided by the NBME for 2018. This allows a school to determine how they are doing in comparison to the national pool of test takers by discipline. Methodology as per the NBME:

"The graph provides information regarding the score distribution of first takers from your medical school relative to the distribution for all U.S./Canadian first takers in each discipline and organ system. All scores are scaled in standard score units based on the performance of U.S./Canadian first takers: the mean and standard deviation (SD) for this group are 0 and 1, respectively, for each discipline and organ system. To facilitate interpretation, the reliability of each score category has been used in adjusting the standard scores. This adjustment helps to make the differences in standard scores a better reflection of true differences in student performance. The mean performance of U.S./Canadian first takers is represented by the **vertical solid green line** at 0.0. Roughly 68% of U.S./Canadian first takers scored within one SD of the mean, between -1.0 and 1.0. The distribution of performance for first takers from your school is represented by the **red boxes and horizontal lines**. The red box depicts the mean performance of first takers from your school. The distance from the red box to one end of the red line indicates one SD for your school. The interval spanned by each red line represents your school mean plus/minus one SD; approximately 68% of your students scored in this interval.

By comparing the locations of the red boxes, you can determine the disciplines and organ systems in which the performance of your students was relatively strong or weak. Because many of the scores are based on a relatively small number of items, differences smaller than a few tenths of an SD are not likely to be meaningful. In addition, because Step 1 test items are deliberately designed to be integrative with many items contributing to the calculation of scores in more than one discipline, caution should be used in attributing mean differences in student performance to individual courses at your school."

Figure 17: 2018 NBME Step 1 Score Plot



### **PLFSOM Longitudinal Survey**

PLFSOM collects specific data on a longitudinal basis as a means of monitoring certain hidden curriculum elements. The Medical school’s Annual Longitudinal Survey is a compilation of 2 surveys:

- Jefferson Physician Empathy Scale – Student Version(JPES-S) survey
- Self-Directed Learning Readiness Scale (SDLRS) survey

All medical students take the survey 5 different times throughout the 4 years of Medical School (except for the SDLRS which is administered only 4 times). The first time occurs as incoming MS1’s, before they experience any part of the curriculum. The second, third, and fourth times the survey is administered at the beginning of each of the following academic years during their Orientation session. The 5<sup>th</sup> and last time the survey is administered occurs between February and graduation day during the spring semester of their MS4 year.

The data collection methodology has changed over the years. The first iteration -with the class of 2013- was conducted on bubble sheets and only summary reports kept. In subsequent years the survey was given in one of 3 different platforms. Data was collected electronically and then moved into an OAE data base. Beginning AY 2015-2016 the survey has been administered electronically through the Qualtrics survey platform. Data from one class was lost in transfer for 1-time point (C2015 for T4).

### **Jefferson Physician Empathy Scale – Student Version**

The Jefferson Physician Empathy SCALE (JPES-S) is a 20 item instrument designed to assess the 3 dimensions of empathy in medical students, in the context of patient care; the three dimensions of empathy being: 1 Perspective taking, 2 Compassionate care, and 3 Emotional detachment. The 20 items in the instrument are measured on a 7 point scale ranging from 1=Strongly Disagree, 2= Disagree, 3= Somewhat Disagree, 4=Neutral, 5= Somewhat Agree, 6= Agree, and 7=Strongly Agree. The higher the score, the higher the empathy level. The JSE-S requires that questions 1, 3, 6,7,8,11,12,14,18,19 be recoded before data analysis. The scale score consists of a summed score ranging from a minimum of 20 (low empathy) to 140 (high empathy).

The medical school monitors students’ general level of empathy as they cross the curriculum since empathy is considered to be a factor in professionalism, communication, and patient outcomes.

Table 77: Jefferson Empathy Mean Scores over Time by Graduating Class

Class	Mean Scores				
	T1	T2	T3	T4	T5
2019	116.2	113.3	113.3	110.7	113.6
2020	116.4	112.5	113.4	⌚	⌚
2021	117.8	114.9	⌚	⌚	⌚
2022	118.8	⌚	⌚	⌚	⌚

⌚Data not available yet

### **Self-Directed Learning Readiness Scale (SDLRS)**

The SDLRS is a 58 item instrument with responses on a 5 point scale ranging from “almost always true” to “almost never true”. It is intended to measure an individual's current level of readiness to manage his or her own learning. The possible range of scores is from 58 to 290. The average score in a general adult population has a mean of 214 with a standard deviation of 25.59.

The following table provides the available mean scores for each test for the class of 2019, 2020, 2021 and 2022. According to a study by Premkumar, et al[8] there is a significant drop ( $P < .001$ ) in SDLRS scores in all cohorts one year after admission. In general, scores continued to be lower than that at admission throughout training and at graduation.

Table 78 Medical Student Mean SDLRS Scores

<b>Class</b>	<b>T1</b>	<b>T2</b>	<b>T3</b>	<b>T4</b>
Class of 2019	237	231	236	233
Class of 2020	234	234	231	⌚
Class of 2021	239	235	⌚	⌚
Class of 2022	236	⌚	⌚	⌚

⌚ Not yet collected



## Clerkship Phase Evaluation Results

Data description and methodology is stated in the [introduction](#). In previous years' reports, clerkship data was reported by block -MS3 clerkships-, or semester -MS4 clerkships-. This report provides data in aggregate Block percent agreement for MS3 clerkships, and average, full year (both semesters), percent agreement for MS4 clerkships.

Clerkship evaluation data is collected from students in the week after a block. All Clerkship evaluations are tailored specifically to the components of each clerkship experienced. Starting AY 2017-2018 two Integration Intersessions were added at the end of MS3 Block 2 and Block 3 respectively, and evaluation data is included here. Clerkship evaluation results are reported to clerkship directors, department chairs, the assistant dean for medical education for clinical instruction, the associate dean for medical education, and the provost (Course Evaluation & Reporting Policy [link](#)).

### MS3

#### Block A – Family Medicine & Surgery

Table 79: Block A Evaluation Results

Academic Year	2015-2016*			2016-2017			2017-2018			2018-2019		
Block A	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3
This block was well organized.	83%	74%	89%	100%	100%	97%	93%	94%	94%	66%	83%	89%
The learning objectives were clearly identified.	62%	65%	79%	100%	96%	100%	93%	94%	96%	77%	87%	92%
The block met the identified learning objectives.	69%	65%	79%	100%	96%	100%	93%	95%	97%	81%	90%	97%
The amount of material presented during the block was reasonable.	72%	71%	82%	96%	96%	100%	96%	100%	100%	89%	90%	93%
Shared learning experiences between the two disciplines in this block contributed to my understanding of clinical medicine.	59%	65%	54%	92%	86%	97%	89%	91%	90%	77%	83%	100%
N	29	34	28	24	28	31	27	24	30	26	31	28

\*5-point scale

**Family Medicine**

Table 80: Family Medicine Evaluation Results

Family Medicine Clerkship Evaluation	Aggregate Block Percent Agreement			
	Academic Year	2015-2016*	2016-2017	2017-2018
I had enough patient management opportunities.	73%	99%	97%	<b>97%</b>
I was observed delivering patient care.	66%	95%	96%	<b>98%</b>
I had appropriate exposure to ambulatory patients.	69%	99%	99%	<b>100%</b>
Duty hour policies were adhered to strictly.	76%	99%	98%	<b>100%</b>
I received sufficient oral feedback on my performance.	64%	100%	98%	<b>95%</b>
I received sufficient written feedback on my performance.	64%	98%	95%	<b>92%</b>
The feedback I received helped me improve my performance.	71%	96%	96%	<b>93%</b>
Mid-clerkship feedback helped me identify my strengths.	-	93%	96%	<b>82%</b>
Mid-clerkship feedback helped me identify areas for improvement in my performance.	-	95%	96%	<b>84%</b>
I was given a sufficient amount of autonomy during my clinical interactions.	70%	96%	98%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	72%	99%	99%	<b>100%</b>
The clerkship provided appropriate preparation for the shelf exam.	48%	85%	88%	<b>81%</b>
The first two years of Medical School adequately prepared me for the clerkship.	-	94%	93%	<b>94%</b>
I used Spanish frequently in this rotation.	72%	99%	96%	<b>100%</b>
Spanish instruction in the first 2 years helped prepare me for this rotation.	48%	93%	92%	<b>87%</b>
Overall, I learned useful knowledge and/or skills.	78%	100%	100%	<b>97%</b>
N	89	81	95	<b>85</b>
Class size at date	96	84	106	<b>94</b>
Response Rate	93%	96%	89%	<b>94%</b>

\*5-point scale

**Surgery**

Table 81: Surgery Evaluation Results

<b>Surgery Clerkship Evaluation</b>	<b>Aggregate Block Percent Agreement</b>			
<b>Academic Year</b>	<b>2015-2016*</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>
I had enough patient management opportunities.	83%	96%	95%	<b>93%</b>
I was observed delivering patient care.	79%	91%	94%	<b>93%</b>
Duty hour policies were adhered to strictly.	80%	92%	98%	<b>96%</b>
I received sufficient oral feedback on my performance.	73%	87%	94%	<b>93%</b>
I received sufficient written feedback on my performance.	74%	90%	93%	<b>94%</b>
The feedback I received helped me improve my performance.	53%	90%	98%	<b>94%</b>
Mid-clerkship feedback helped me identify my strengths.	-	90%	92%	<b>86%</b>
Mid-clerkship feedback helped me identify areas for improvement in my performance.	-	92%	88%	<b>88%</b>
I was given a sufficient amount of autonomy during my clinical interactions.	78%	95%	95%	<b>96%</b>
I received sufficient supervision during my clinical interactions.	83%	97%	95%	<b>95%</b>
The clerkship provided appropriate preparation for the shelf exam.	61%	82%	78%	<b>77%</b>
The first two years of Medical School adequately prepared me for the clerkship.	-	80%	80%	<b>83%</b>
I used Spanish frequently in this rotation.	59%	91%	92%	<b>94%</b>
Spanish instruction in the first 2 years helped prepare me for this rotation.	54%	85%	85%	<b>86%</b>
Overall, I learned useful knowledge and/or skills.	89%	97%	99%	<b>96%</b>
N	90	83	81	<b>85</b>
Class size at date	96	84	106	<b>94</b>
Response Rate	94%	99%	76%	<b>90%</b>

\*5-point scale

**Block B – Internal Medicine & Psychiatry**

Table 82: Block B Evaluation Results

Academic Year	2015-2016*			2016-2017			2017-2018			2018-2019		
Block B	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3
This block was well organized.	81%	83%	97%	96%	89%	100%	87%	100%	100%	91%	91%	93%
The learning objectives were clearly identified.	81%	80%	94%	89%	96%	100%	85%	100%	100%	95%	95%	100%
The block met the identified learning objectives.	84%	80%	94%	93%	89%	100%	94%	100%	100%	95%	96%	100%
The amount of material presented during the block was reasonable.	81%	90%	77%	89%	86%	89%	94%	94%	98%	95%	96%	94%
Shared learning experiences between the two disciplines in this block contributed to my understanding of clinical medicine.	81%	67%	87%	78%	89%	89%	78%	97%	98%	95%	92%	89%
N	32	30	31	26	28	26	31	30	34	22	22	28

\*5-point scale

† Percent Agreement could not be calculated

**Internal Medicine**

Table 83: Internal Medicine Evaluation Results

Internal Medicine Clerkship Evaluation	Aggregate Block Percent Agreement				
	Academic Year	2015-2016*	2016-2017	2017-2018	2018-2019
I had enough patient management opportunities.		96%	96%	97%	<b>99%</b>
I was observed delivering patient care.		93%	91%	95%	<b>97%</b>
Duty hour policies were adhered to strictly.		85%	93%	95%	<b>99%</b>
I received sufficient oral feedback on my performance.		88%	91%	95%	<b>96%</b>
I received sufficient written feedback on my performance.		87%	88%	94%	<b>95%</b>
The feedback I received helped me improve my performance.		86%	89%	95%	<b>98%</b>
Mid-clerkship feedback helped me identify my strengths.		-	85%	94%	<b>92%</b>
Mid-clerkship feedback helped me identify areas for improvement in my performance.		-	85%	94%	<b>91%</b>
I was given a sufficient amount of autonomy during my clinical interactions.		96%	93%	98%	<b>100%</b>
I received sufficient supervision during my clinical interactions.		90%	92%	96%	<b>98%</b>
The clerkship provided appropriate preparation for the shelf exam.		77%	77%	86%	<b>88%</b>
The first two years of Medical School adequately prepared me for the clerkship.		-	86%	93%	<b>90%</b>
I used Spanish frequently in this rotation.		84%	92%	97%	<b>96%</b>
Spanish instruction in the first 2 years helped prepare me for this rotation.		67%	91%	90%	<b>89%</b>
Overall, I learned useful knowledge and/or skills.		96%	96%	100%	<b>100%</b>
N		92	80	95	<b>86</b>
Class size at date		96	88	106	<b>72</b>
Response Rate		96%	91%	90%	<b>84%</b>

\*5-point scale

**Psychiatry**

Table 84: Psychiatry Evaluation Results

Psychiatry Clerkship Evaluation	Aggregate Block Percent Agreement			
	Academic Year	2015-2016*	2016-2017	2017-2018
I had enough patient management opportunities.	87%	85%	84%	<b>84%</b>
I was observed delivering patient care.	68%	86%	94%	<b>96%</b>
I had appropriate exposure to ambulatory patients.	90%	89%	94%	<b>98%</b>
Duty hour policies were adhered to strictly.	90%	92%	96%	<b>99%</b>
I received sufficient oral feedback on my performance.	75%	87%	91%	<b>93%</b>
I received sufficient written feedback on my performance.	71%	83%	89%	<b>91%</b>
The feedback I received helped me improve my performance.	74%	85%	94%	<b>93%</b>
Mid-clerkship feedback helped me identify my strengths.	-	95%	95%	<b>90%</b>
Mid-clerkship feedback helped me identify areas for improvement in my performance.	-	93%	96%	<b>91%</b>
I was given a sufficient amount of autonomy during my clinical interactions.	85%	91%	85%	<b>89%</b>
I received sufficient supervision during my clinical interactions.	67%	88%	94%	<b>100%</b>
The clerkship provided appropriate preparation for the shelf exam.	76%	91%	95%	<b>97%</b>
The first two years of Medical School adequately prepared me for the clerkship.	-	95%	97%	<b>100%</b>
I used Spanish frequently in this rotation.	63%	74%	87%	<b>85%</b>
Spanish instruction in the first 2 years helped prepare me for this rotation.	55%	76%	85%	<b>78%</b>
Overall, I learned useful knowledge and/or skills.	89%	97%	97%	<b>99%</b>
N	82	80	92	<b>86</b>
Class size at date	96	88	103	<b>72</b>
Response Rate	85%	91%	89%	<b>84%</b>

\*5-point scale

**Block C – Obstetrics/Gynecology & Pediatrics**

Table 85: Block C Evaluation Results

Academic Year	2015-2016*			2016-2017			2017-2018			2018-2019		
Block C	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3	Block 1	Block 2	Block 3
This block was well organized.	67%	80%	51%	96%	97%	100%	91%	95%	92%	<b>97%</b>	<b>92%</b>	<b>100%</b>
The learning objectives were clearly identified.	77%	31%	64%	100%	100%	100%	94%	94%	97%	<b>93%</b>	<b>90%</b>	<b>100%</b>
The block met the identified learning objectives.	73%	90%	73%	100%	100%	97%	97%	94%	96%	<b>93%</b>	<b>97%</b>	<b>100%</b>
The amount of material presented during the block was reasonable.	83%	80%	73%	96%	91%	87%	100%	89%	73%	<b>86%</b>	<b>79%</b>	<b>93%</b>
Shared learning experiences between the two disciplines in this block contributed to my understanding of clinical medicine.	73%	83%	70%	100%	97%	97%	94%	89%	92%	<b>92%</b>	<b>89%</b>	<b>100%</b>
The mother/newborn continuity experience was a useful learning experience	64%	80%	0%	100%	88%	87%	87%	84%	92%	<b>90%</b>	<b>82%</b>	<b>90%</b>
<b>N</b>	30	30	33	24	32	29	32	36	26	<b>28</b>	<b>28</b>	<b>27</b>

\*5-point scale

† Percent Agreement could not be calculated

**Obstetrics/Gynecology**

Table 86: OB/Gyn Evaluation Results

<b>Ob/Gyn Clerkship Evaluation</b>	<b>Aggregate Block Percent Agreement</b>			
<b>Academic Year</b>	<b>2015-2016*</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>
I had enough patient management opportunities.	87%	84%	84%	<b>87%</b>
I was observed delivering patient care.	84%	85%	93%	<b>95%</b>
I had appropriate exposure to ambulatory patients.	95%	90%	93%	<b>100%</b>
Duty hour policies were adhered to strictly.	95%	79%	92%	<b>95%</b>
I received sufficient oral feedback on my performance.	82%	71%	78%	<b>83%</b>
I received sufficient written feedback on my performance.	76%	72%	75%	<b>80%</b>
The feedback I received helped me improve my performance.	80%	74%	85%	<b>85%</b>
Mid-clerkship feedback helped me identify my strengths.	-	80%	85%	<b>88%</b>
Mid-clerkship feedback helped me identify areas for improvement in my performance.	-	81%	85%	<b>87%</b>
I was given a sufficient amount of autonomy during my clinical interactions.	84%	82%	83%	<b>88%</b>
I received sufficient supervision during my clinical interactions.	89%	84%	92%	<b>93%</b>
The clerkship provided appropriate preparation for the shelf exam.	72%	83%	89%	<b>79%</b>
The first two years of Medical School adequately prepared me for the clerkship.	-	85%	88%	<b>78%</b>
I used Spanish frequently in this rotation.	84%	97%	98%	<b>97%</b>
Spanish instruction in the first 2 years helped prepare me for this rotation.	72%	90%	88%	<b>77%</b>
Overall, I learned useful knowledge and/or skills.	96%	95%	98%	<b>97%</b>
N	94	85	94	<b>89</b>
Class size at date	96	88	108	<b>83</b>
Response Rate	98%	97%	87%	<b>93%</b>

\*5-point scale

† Percent Agreement could not be calculated



**Pediatrics**

Table 87: Pediatric Evaluation Results

Pediatrics Clerkship Evaluation	Aggregate Block Percent Agreement			
	Academic Year	2015-2016*	2016-2017	2017-2018
I had enough patient management opportunities.	89%	99%	94%	<b>99%</b>
I was observed delivering patient care.	94%	99%	98%	<b>94%</b>
I had appropriate exposure to ambulatory patients.	95%	99%	99%	<b>100%</b>
Duty hour policies were adhered to strictly.	93%	96%	97%	<b>98%</b>
I received sufficient oral feedback on my performance.	89%	96%	89%	<b>95%</b>
I received sufficient written feedback on my performance.	83%	93%	90%	<b>92%</b>
The feedback I received helped me improve my performance.	84%	97%	92%	<b>94%</b>
Mid-clerkship feedback helped me identify my strengths.	-	98%	90%	<b>94%</b>
Mid-clerkship feedback helped me identify areas for improvement in my performance.	-	98%	90%	<b>95%</b>
I was given a sufficient amount of autonomy during my clinical interactions.	89%	96%	96%	<b>98%</b>
I received sufficient supervision during my clinical interactions.	94%	99%	97%	<b>97%</b>
The clerkship provided appropriate preparation for the shelf exam.	71%	87%	85%	<b>82%</b>
The first two years of Medical School adequately prepared me for the clerkship.	-	91%	93%	<b>87%</b>
I used Spanish frequently in this rotation.	88%	95%	98%	<b>94%</b>
Spanish instruction in the first 2 years helped prepare me for this rotation.	71%	91%	91%	<b>82%</b>
Overall, I learned useful knowledge and/or skills.	95%	100%	98%	<b>99%</b>
N	96	85	94	<b>89</b>
Class size at date	96	88	108	<b>83</b>
Response Rate	100%	97%	87%	<b>93%</b>

\*5-point scale

† Percent Agreement could not be calculated

**Integrated Curricular Elements Program**

For information on ICE program reporting, please see [link](#)

**Intersession**

The Integrative Intersession course is taught in two one-week sessions during the third year; one following Block 2 and the second following Block 3. Course content integrates the year 3 clinical rotation experience with concepts from the pre-clerkship coursework through experiences such as a procedure workshop, integrated case-based discussions, skills sessions, basic science sessions, and OSCE exams. Course material is distributed throughout the two weeks, making each one-week experience unique.

The tables below provide students' percent agreement evaluation results for both sessions.

Table 88: Integration Session Evaluation Results - Percent Agreement

Academic Year	AY 2017-2018	AY 2018-2019
Question	Intersession I % Agreement	Intersession I % Agreement
The week was well organized.	89%	88%
The session learning objectives were useful.	70%	83%
Sessions met the identified learning objectives.	88%	89%
The case discussions were a good learning experience.	88%	94%
The skills sessions were a good learning experience.	83%	91%
The oral case presentation session was a good learning experience.	75%	75%
The basic science sessions were a good learning experience.	65%	68%
The social determinants of health sessions were a good learning experience.	66%	81%
The Masters' colloquium sessions were helpful.	83%	71%
I received sufficient feedback.	79%	84%
The feedback I received was helpful.	74%	92%
Overall, I learned useful knowledge and / or skills during this week.	74%	77%
N	82	75
Class Size	107	94
Response Rate	77%	80%

Table 89: Integration Session II Evaluation Results - Percent Agreement

Academic Year	AY 2017-2018	AY 2018-2019
Question	Intersession II % Agreement	Intersession II % Agreement
The Masters' Colloquium session was useful	90%	90%
The Quality Improvement session was useful	71%	68%
The Law and Medicine session was useful	94%	82%
The Procedure Workshop was useful	99%	96%
N	78	87
Class Size	101	93
Response Rate	77%	94%

***NBME Comprehensive Clinical Science Examination (CCSE)***

There are multiple offerings of the CCSE exam in any given year. The table below reports aggregate data for all exams presented per year, going back 4 years. Click on the [link](#) for the Score Interpretation Guide

Table 90: CCSE Scores for Offerings with 10 or More Sitting for the Exam

Year	N	Mean Score	Standard Deviation	Low Score	High Score
2016	36	82.3	9.7	60	99
2017	91	73.4	11.6	05	99
2018	101	76.8	11.1	50	99
2019	90	75.7	10.2	55	99

**MS4**

***Emergency Medicine***

Table 91: Emergency Medicine Evaluation Results

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.5	99%	100%	<b>98%</b>
The learning objectives were clearly identified.	4.6	99%	100%	<b>99%</b>
The clerkship met the identified learning objectives.	4.6	99%	100%	<b>99%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.6	99%	99%	<b>98%</b>
I am familiar with the needle stick policy.	-	99%	98%	<b>98%</b>
The amount of material presented was reasonable.	4.6	99%	95%	<b>99%</b>
Duty hours were adhered to strictly.	4.5	99%	96%	<b>99%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.5	100%	96%	<b>98%</b>
I had enough patient management opportunities.	4.5	100%	97%	<b>99%</b>
I was observed delivering patient care.	4.4	98%	98%	<b>98%</b>
I received sufficient supervision during my clinical interactions.	4.5	100%	98%	<b>99%</b>
I received sufficient oral feedback on my performance.	4.5	97%	96%	<b>97%</b>
I received sufficient written feedback on my performance.	4.6	97%	98%	<b>98%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.6	100%	100%	<b>99%</b>
<b>N</b>	<b>71</b>	<b>73</b>	<b>67</b>	<b>81</b>
Class size at date	71	86	91	<b>106</b>
Response Rate	100%	85%	74%	<b>76%</b>

\*5-point scale

† Percent Agreement could not be calculated

**Neurology**

Table 92: Evaluation Results for Neurology Clerkship Table

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.0	82%	85%	<b>91%</b>
The learning objectives were clearly identified.	3.9	88%	91%	<b>97%</b>
The clerkship met the identified learning objectives.	4.0	91%	91%	<b>96%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.1	97%	98%	<b>92%</b>
I am familiar with the needle stick policy.	-	91%	99%	<b>99%</b>
The amount of material presented was reasonable.	4.4	96%	99%	<b>100%</b>
Duty hours were adhered to strictly.	4.4	99%	99%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	3.9	84%	85%	<b>96%</b>
I had enough patient management opportunities.	4.1	85%	90%	<b>98%</b>
I was observed delivering patient care.	4.3	89%	86%	<b>95%</b>
I received sufficient supervision during my clinical interactions.	4.4	90%	94%	<b>96%</b>
I received sufficient oral feedback on my performance.	3.9	83%	83%	<b>88%</b>
I received sufficient written feedback on my performance.	3.8	81%	80%	<b>84%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.1	89%	94%	<b>96%</b>
<b>N</b>	<b>71</b>	<b>70</b>	<b>80</b>	<b>87</b>
Class size at date	71	86	91	<b>106</b>
Response Rate	100%	81%	88%	<b>82%</b>

\*5-point scale

† Percent Agreement could not be calculated

**CVICU**

Table 93 Evaluation Results for CVICU

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.0	100%	100%	<b>100%</b>
The learning objectives were clearly identified.	4.2	86%	89%	<b>100%</b>
The clerkship met the identified learning objectives.	4.3	100%	89%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.3	100%	100%	<b>100%</b>
I am familiar with the needle stick policy.	-	100%	100%	<b>100%</b>
The amount of material presented was reasonable.	4.5	100%	100%	<b>100%</b>
Duty hours were adhered to strictly.	4.8	100%	100%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.5	100%	89%	<b>100%</b>
I had enough patient management opportunities.	4.9	100%	100%	<b>88%</b>
I was observed delivering patient care.	4.6	100%	99%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	4.8	100%	100%	<b>88%</b>
I received sufficient oral feedback on my performance.	4.8	100%	88%	<b>88%</b>
I received sufficient written feedback on my performance.	4.7	100%	99%	<b>88%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.7	100%	100%	<b>100%</b>
<b>N</b>	<b>8</b>	<b>7</b>	<b>9</b>	<b>9</b>

\*5-point scale

† Percent Agreement could not be calculated

**MICU**

Table 94 Evaluation Results for MICU

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.1	100%	90%	<b>93%</b>
The learning objectives were clearly identified.	3.8	100%	95%	<b>100%</b>
The clerkship met the identified learning objectives.	4.0	94%	95%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.2	95%	95%	<b>88%</b>
I am familiar with the needle stick policy	-	87%	100%	<b>100%</b>
The amount of material presented was reasonable.	4.6	100%	100%	<b>100%</b>
Duty hour policies were adhered to strictly.	4.5	100%	100%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.0	100%	100%	<b>100%</b>
I had enough patient management opportunities.	4.7	94%	94%	<b>98%</b>
I was observed delivering patient care.	4.4	100%	89%	<b>93%</b>
I received sufficient supervision during my clinical interactions.	4.5	100%	95%	<b>95%</b>
I received sufficient oral feedback on my performance.	4.6	94%	90%	<b>100%</b>
I received sufficient written feedback on my performance.	4.5	100%	95%	<b>100%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.6	100%	95%	<b>100%</b>
<b>N</b>	<b>17</b>	<b>16</b>	<b>18</b>	<b>30</b>

\*5-point scale

† Percent Agreement could not be calculated

**NICU**

Table 95 Evaluation Results for NICU

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	3.8	100%	100%	<b>100%</b>
The learning objectives were clearly identified.	3.9	99%	100%	<b>100%</b>
The clerkship met the identified learning objectives.	4.0	100%	100%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	3.5	76%	91%	<b>100%</b>
I am familiar with the needle stick policy.	-	100%	91%	<b>100%</b>
The amount of material presented was reasonable.	4.5	100%	100%	<b>100%</b>
Duty hours were adhered to strictly.	4.1	100%	91%	<b>88%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.2	100%	100%	<b>100%</b>
I had enough patient management opportunities.	4.4	100%	100%	<b>100%</b>
I was observed delivering patient care.	4.0	100%	91%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	4.2	100%	100%	<b>100%</b>
I received sufficient oral feedback on my performance.	4.2	84%	91%	<b>100%</b>
I received sufficient written feedback on my performance.	3.8	69%	73%	<b>100%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.6	100%	100%	<b>100%</b>
N	13	13	11	<b>7</b>

\*5-point scale

† Percent Agreement could not be calculated



**NSICU**

This Critical Care selective was offered for the first time during AY 2017-2018

Table 96 Evaluation Results for NSICU

Academic Year	Average Percent Agreement	
	2017-2018	2018-2019
The clerkship was well organized.	99%	<b>100%</b>
The learning objectives were clearly identified.	99%	<b>100%</b>
The clerkship met the identified learning objectives.	100%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	100%	<b>92%</b>
I am familiar with the needle stick policy.	99%	<b>100%</b>
The amount of material presented was reasonable.	100%	<b>100%</b>
Duty hours were adhered to strictly.	100%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	100%	<b>92%</b>
I had enough patient management opportunities.	83%	<b>100%</b>
I was observed delivering patient care.	83%	<b>92%</b>
I received sufficient supervision during my clinical interactions.	99%	<b>100%</b>
I received sufficient oral feedback on my performance.	99%	<b>92%</b>
I received sufficient written feedback on my performance.	67%	<b>92%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	83%	<b>100%</b>
N	6	<b>11</b>

**PICU**

Table 97: Evaluation Results for Pediatric Critical Care

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.5	100%	100%	<b>100%</b>
The learning objectives were clearly identified.	4.3	100%	100%	<b>100%</b>
The clerkship met the identified learning objectives.	4.5	100%	100%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.4	100%	100%	<b>100%</b>
I am familiar with the needle stick policy.	-	94%	100%	<b>100%</b>
The amount of material presented was reasonable.	4.6	100%	100%	<b>100%</b>
Duty hours were adhered to strictly.	4.6	95%	95%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.2	84%	100%	<b>100%</b>
I had enough patient management opportunities.	4.7	100%	100%	<b>100%</b>
I was observed delivering patient care.	4.4	94%	100%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	4.5	89%	100%	<b>100%</b>
I received sufficient oral feedback on my performance.	4.4	89%	100%	<b>100%</b>
I received sufficient written feedback on my performance.	4.4	83%	100%	<b>100%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.7	95%	100%	<b>100%</b>
<b>N</b>	<b>18</b>	<b>18</b>	<b>17</b>	<b>7</b>

\*5-point scale

† Percent Agreement could not be calculated

**SICU**

Table 98 Evaluation Results for Surgery Critical Care

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	3.7	100%	77%	100%
The learning objectives were clearly identified.	3.9	100%	92%	100%
The clerkship met the identified learning objectives.	3.7	94%	85%	100%
The first three years of medical school adequately prepared me for this clerkship.	3.5	88%	84%	100%
I am familiar with the needle stick policy.	-	100%	100%	100%
The amount of material presented was reasonable.	3.9	100%	92%	100%
Duty hours were adhered to strictly.	4.2	100%	100%	100%
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.0	100%	85%	100%
I had enough patient management opportunities.	4.0	94%	100%	100%
I was observed delivering patient care.	4.0	94%	92%	100%
I received sufficient supervision during my clinical interactions.	4.3	94%	92%	100%
I received sufficient oral feedback on my performance.	4.1	100%	92%	100%
I received sufficient written feedback on my performance.	4.3	100%	99%	100%
Overall, I learned useful knowledge and/or skills during the clerkship.	4.5	94%	92%	100%
N	15	16	13	9

\*5-point scale

† Percent Agreement could not be calculated

**FM Sub-Internship**

Table 99: Evaluation Results for Family Medicine Sub-Internship

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.7	100%	100%	<b>84%</b>
The learning objectives were clearly identified.	4.5	100%	100%	<b>75%</b>
The clerkship met the identified learning objectives.	4.5	100%	100%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.3	100%	100%	<b>92%</b>
I am familiar with the needle stick policy	4.5	100%	100%	<b>100%</b>
The amount of material presented was reasonable.	4.5	86%	100%	<b>100%</b>
Duty hour policies were adhered to strictly.	4.7	86%	100%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.7	100%	100%	<b>92%</b>
I had enough patient management opportunities.	4.5	100%	100%	<b>100%</b>
I had appropriate exposure to ambulatory patients.	4.3	71%	100%	<b>100%</b>
I was observed delivering patient care.	4.7	86%	100%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	4.5	86%	100%	<b>100%</b>
I received sufficient oral feedback on my performance.	4.5	99%	83%	<b>100%</b>
I received sufficient written feedback on my performance.	4.7	86%	83%	<b>84%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.7	100%	100%	<b>100%</b>
<b>N</b>	<b>6</b>	<b>7</b>	<b>6</b>	<b>9</b>

\*5-point scale

† Percent Agreement could not be calculated

***Surgery Sub-Internship***

Table 100: Evaluation Results for Surgery Sub-Internship

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.1	100%	100%	<b>100%</b>
The learning objectives were clearly identified.	4.0	100%	100%	<b>100%</b>
The clerkship met the identified learning objectives.	4.0	100%	100%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.1	100%	100%	<b>100%</b>
I am familiar with the needle stick policy	-	100%	100%	<b>100%</b>
The amount of material presented was reasonable.	4.0	100%	100%	<b>100%</b>
Duty hour policies were adhered to strictly.	4.4	100%	100%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.0	100%	100%	<b>100%</b>
I had enough patient management opportunities.	4.4	100%	88%	<b>100%</b>
I had appropriate exposure to ambulatory patients.	4.3	100%	88%	<b>100%</b>
I was observed delivering patient care.	4.4	100%	100%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	4.5	100%	100%	<b>100%</b>
I received sufficient oral feedback on my performance.	4.1	100%	100%	<b>100%</b>
I received sufficient written feedback on my performance.	4.5	100%	100%	<b>100%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.1	100%	100%	<b>100%</b>
<b>N</b>	8	6	8	<b>10</b>

\*5-point scale

† Percent Agreement could not be calculated

**IM Sub-Internship**

Table 101 Evaluation Results for Internal Medicine Sub-Internship

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.2	100%	100%	<b>98%</b>
The learning objectives were clearly identified.	4.1	100%	100%	<b>98%</b>
The clerkship met the identified learning objectives.	4.1	100%	100%	<b>99%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.4	100%	100%	<b>100%</b>
I am familiar with the needle stick policy	-	100%	100%	<b>98%</b>
The amount of material presented was reasonable.	4.2	100%	100%	<b>100%</b>
Duty hour policies were adhered to strictly.	4.1	100%	100%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.4	97%	97%	<b>94%</b>
I had enough patient management opportunities.	4.3	97%	100%	<b>99%</b>
I had appropriate exposure to ambulatory patients.	4.5	78%	93%	<b>90%</b>
I was observed delivering patient care.	4.5	94%	100%	<b>97%</b>
I received sufficient supervision during my clinical interactions.	4.3	100%	100%	<b>97%</b>
I received sufficient oral feedback on my performance.	4.2	100%	100%	<b>97%</b>
I received sufficient written feedback on my performance.	4.5	100%	100%	<b>95%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.2	100%	100%	<b>98%</b>
<b>N</b>	30	32	42	<b>56</b>

\*5-point scale

† Percent Agreement could not be calculated

***Pediatrics Sub-Internship***

Table 102: Evaluation Results for Pediatrics Sub-Internship

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	4.7	100%	100%	<b>100%</b>
The learning objectives were clearly identified.	4.8	100%	100%	<b>100%</b>
The clerkship met the identified learning objectives.	4.8	100%	100%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.7	100%	100%	<b>100%</b>
I am familiar with the needle stick policy	-	100%	100%	<b>100%</b>
The amount of material presented was reasonable.	4.8	100%	100%	<b>100%</b>
Duty hour policies were adhered to strictly.	4.6	90%	100%	<b>100%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.6	100%	100%	<b>100%</b>
I had enough patient management opportunities.	4.8	100%	100%	<b>100%</b>
I had appropriate exposure to ambulatory patients.	4.8	90%	100%	<b>67%</b>
I was observed delivering patient care.	4.8	90%	100%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	4.8	100%	100%	<b>100%</b>
I received sufficient oral feedback on my performance.	4.3	90%	100%	<b>100%</b>
I received sufficient written feedback on my performance.	4.8	90%	100%	<b>83%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	4.7	100%	100%	<b>100%</b>
<b>N</b>	12	10	11	<b>5</b>

\*5-point scale

† Percent Agreement could not be calculated

**Ob-Gyn Sub-Internship**

Table 103: Evaluation Results for Obstetrics/Gynecology Sub-Internship

Academic Year	Average Percent Agreement			
	2015-2016*†	2016-2017	2017-2018	2018-2019
The clerkship was well organized.	3.9	100%	78%	<b>100%</b>
The learning objectives were clearly identified.	4.3	100%	89%	<b>100%</b>
The clerkship met the identified learning objectives.	4.4	100%	89%	<b>100%</b>
The first three years of medical school adequately prepared me for this clerkship.	4.3	100%	100%	<b>100%</b>
I am familiar with the needle stick policy	-	100%	100%	<b>100%</b>
The amount of material presented was reasonable.	4.4	85%	100%	<b>100%</b>
Duty hour policies were adhered to strictly.	4.3	85%	100%	<b>88%</b>
The methods used to evaluate my performance provided fair measures of my effort and learning.	4.4	100%	89%	<b>100%</b>
I had enough patient management opportunities.	4.5	100%	88%	<b>100%</b>
I had appropriate exposure to ambulatory patients.	4.3	100%	77%	<b>100%</b>
I was observed delivering patient care.	4.3	85%	78%	<b>100%</b>
I received sufficient supervision during my clinical interactions.	4.4	85%	78%	<b>100%</b>
I received sufficient oral feedback on my performance.	4.4	99%	78%	<b>100%</b>
I received sufficient written feedback on my performance.	4.5	85%	77%	<b>100%</b>
Overall, I learned useful knowledge and/or skills during the clerkship.	3.9	100%	88%	<b>100%</b>
<b>N</b>	12	7	9	<b>6</b>

\*5-point scale

† Percent Agreement could not be calculated



**Elective Subscription and Evaluation Data**

MS4 students are required to take 4 Elective rotation experiences during the academic year. The table below reflects cumulative Elective subscription data in percent agreement for all electives offered by any particular department.

Table 104: Elective subscription and evaluation results

Question	Anesthesiology N=9	Medical Education N=66	Emergency Medicine N= 4	Family Medicine N= 8	Internal Medicine N= 50	Neurology N=3	OBGyn N=11	Ophthalmology N=7	Orthopedics N=13	Pathology N=9	Pediatrics N=29	Psychiatry N=19	Radiology N=42	Surgery N= 4
The clerkship was well organized.	100%	94%	100%	100%	98%	100%	100%	100%	92%	100%	100%	94%	99%	100%
The learning objectives were clearly identified.	100%	91%	100%	100%	98%	100%	100%	100%	100%	89%	96%	100%	100%	100%
The clerkship met the identified learning objectives.	100%	99%	100%	88%	98%	100%	100%	100%	101%	89%	100%	100%	99%	100%
The amount of material presented was reasonable.	100%	97%	100%	100%	98%	100%	91%	100%	100%	100%	100%	100%	100%	100%
In the clerkship, duty hour policies were adhered to strictly.	100%	92%	100%	76%	96%	100%	100%	100%	100%	100%	100%	100%	100%	100%
In the clerkship, I had enough patient management opportunities.	100%	54%	75%	76%	96%	100%	100%	100%	93%	33%	86%	100%	81%	100%
In the clerkship, I was observed delivering patient care.	100%	53%	75%	51%	96%	100%	100%	100%	100%	33%	86%	100%	78%	100%
In the clerkship, I had appropriate exposure to ambulatory patients.	100%	53%	75%	51%	94%	100%	100%	100%	100%	22%	82%	100%	80%	100%
I am familiar with the needle stick policy.	100%	96%	100%	100%	96%	100%	100%	100%	100%	100%	100%	100%	96%	100%
In the clerkship, I received sufficient supervision during my clinical interactions.	100%	60%	75%	76%	96%	100%	100%	100%	100%	56%	89%	100%	91%	100%
I received sufficient oral feedback on my performance.	100%	84%	100%	100%	96%	100%	100%	100%	100%	100%	96%	100%	95%	100%
I received sufficient written feedback on my performance.	100%	82%	50%	75%	92%	67%	100%	100%	92%	67%	99%	100%	88%	100%
In the clerkship, the methods used to evaluate my performance provided fair measures of my effort and learning.	100%	94%	75%	100%	98%	67%	100%	100%	100%	100%	100%	100%	98%	100%
The first three years of medical school adequately prepared me for this clerkship.	100%	98%	100%	88%	96%	100%	100%	100%	100%	77%	94%	95%	95%	100%
Overall, I learned useful knowledge and/or skills during the clerkship.	100%	100%	100%	100%	96%	100%	100%	100%	100%	100%	100%	100%	100%	100%

## Integrated Curricular Elements Program

For information on ICE program reporting, please see [link](#)

### **NBME STEP 2**

Step 2 of the USMLE assesses the ability of examinees to apply medical knowledge, skills, and understanding of clinical science essential for the provision of patient care under supervision, and includes emphasis on health promotion and disease prevention. Step 2 CK (Clinical Knowledge) ensures that due attention is devoted to the principles of clinical sciences and basic patient centered skills that provide the foundation for the safe and effective practice of medicine. Step 2 CS (Clinical Skills) uses standardized patients to test medical students and graduates on their ability to gather information from patients, perform physical examinations, and communicate their findings to patients and colleagues. Data results presented here for Step 2 CS are from the interim report. Full report not available until October.

### **NBME STEP 2 CK**

Table 105: Step 2 Clinical Knowledge Results - First Attempt

Academic Year	No. Examined	PLFSOM/National Percent Passing	PLFSOM		National Mean	
			Score and SD		Total Score and SD	
			Score	SD	Score	SD
July 2014 to June 2015	80	89/95	234	20	240	18
July 2015 to June 2016	70	99/96	246	16	242	17
July 2016 to June 2017	121	95/96	240	18	242	17
July 2017 to June 2018	134	99/97	240	16	243	17
July 2018 to June 2019	78	97/98	238	16	243	16

**Trend Lines over Time**

The following graph shows the trend line of the data as reported by the NBME for Clinical Knowledge percent passing and mean score first try.

Figure 18: NBME Step 2 CK Percent Passing on First Try Trends

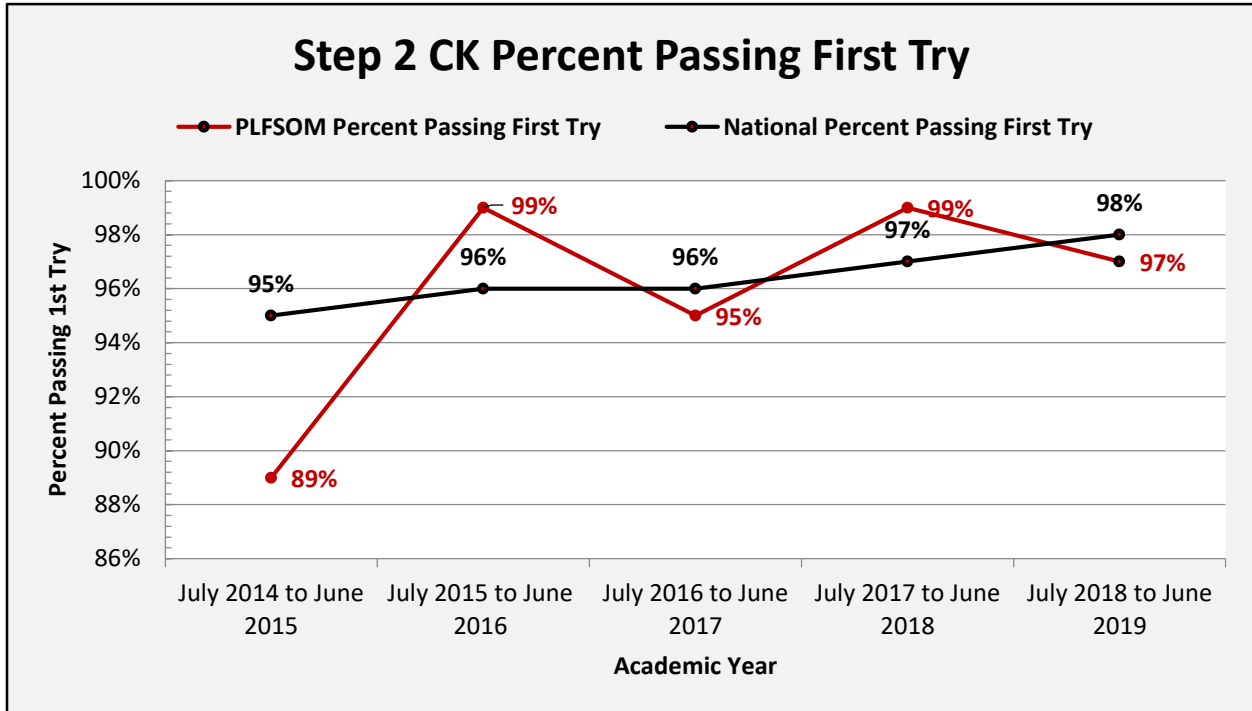
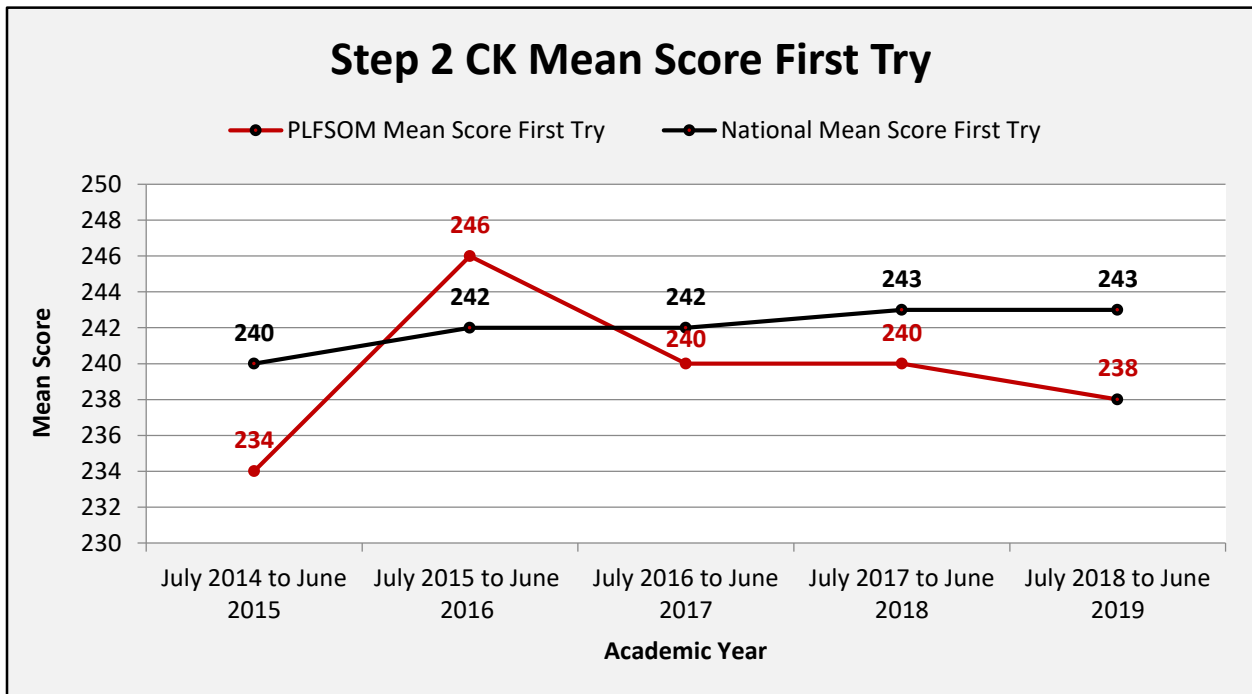


Figure 19: NBME Step 2 CK Score Trends First Try



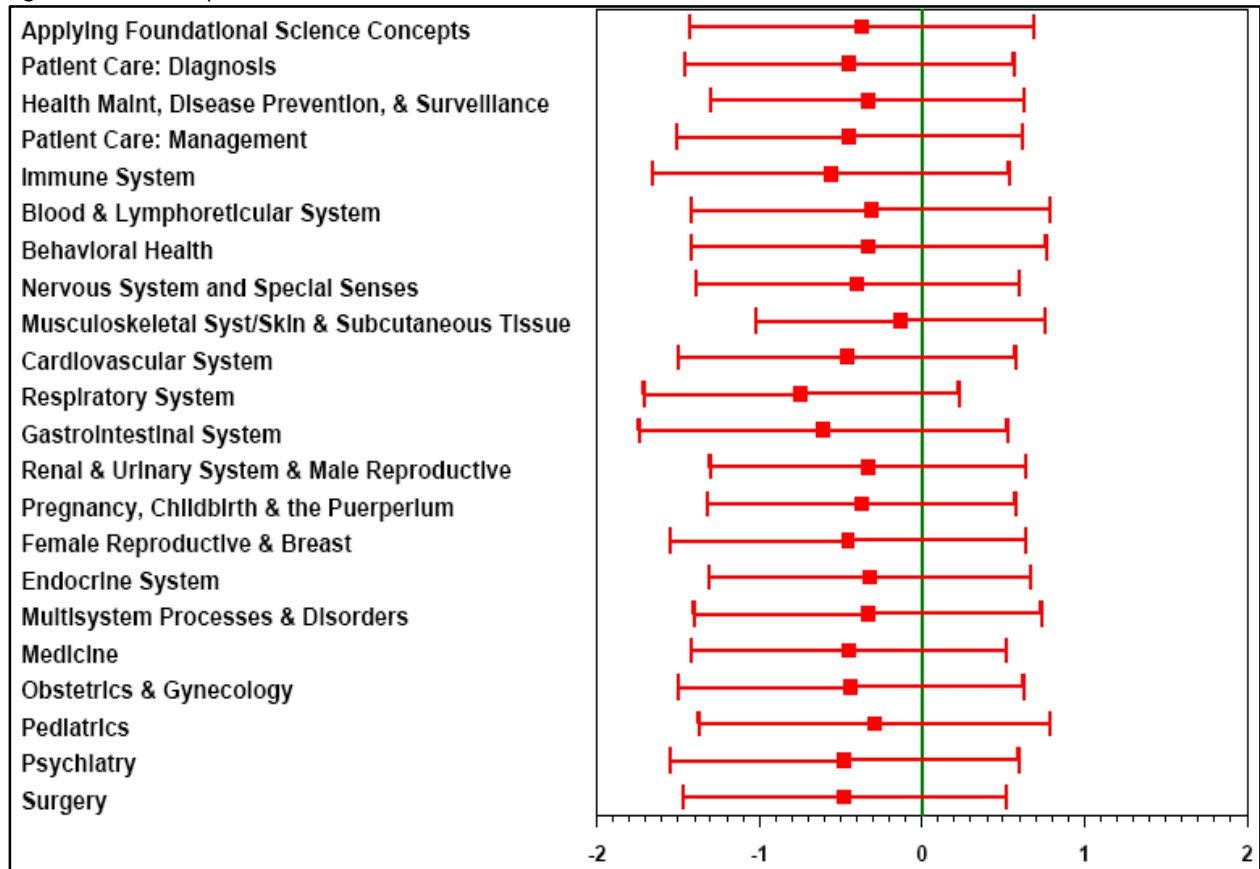
### NBME CK Score Plots

Excerpt from the NBME STEP 2 CK explanation for the Annual Score Plots:

"The mean performance of U.S./Canadian first takers is represented by the **vertical solid green line** at 0.0. The distribution of performance for first takers from your school is represented by the **red boxes and horizontal lines**. The red box depicts the mean performance of first takers from your school. The distance from the red box to one end of the red line indicates one SD for your school. The interval spanned by each red line represents your school mean plus/minus one SD; approximately 68% of your students scored in this interval.

Because many of the scores are based on a relatively small number of items, differences smaller than a few tenths of an SD are not likely to be meaningful. In addition, because Step 2 CK test material is deliberately designed to be integrative with many items contributing to calculation of more than one score category, caution should be used in attributing mean differences in student performance to individual clerkships at your school."

Figure 20: NBME Step 2 CK Score Plot 2018-2019



**NBME STEP 2 CS**

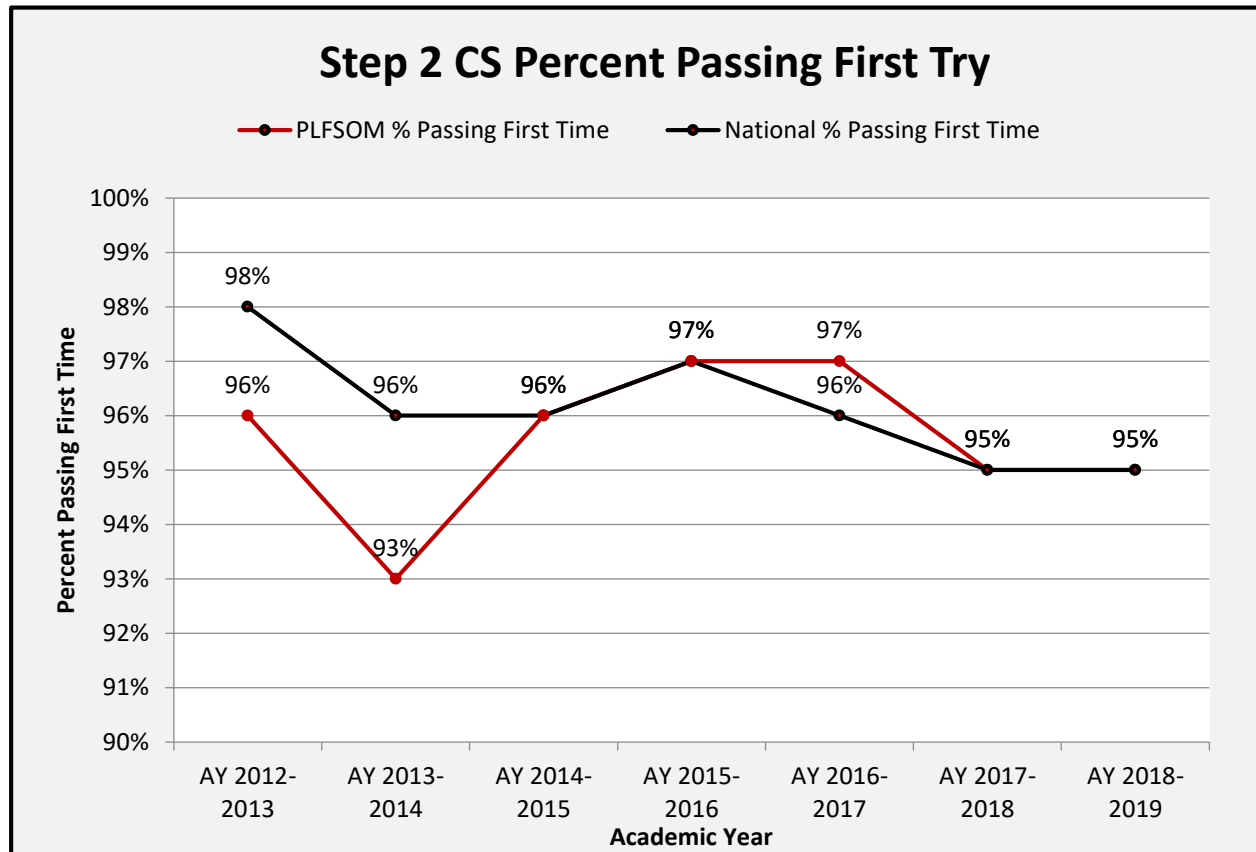
Table 106: Step 2 Clinical Skills Results

Academic Year	No. Examined	PLFSOM/National Percent Passing
AY 2014-2015	103	96%/96%
AY 2015-2016	65	97%/97%
AY 2016-2017	99	97%/96%
AY 2017-2018	121	95%/95%
AY 2018-2019	88	95%/95%

**NBME CS Trend Lines over Time**

The following graph shows trend line data as reported by the NBME for Step 2 Clinical Skills examination for performance on first attempt.

Figure 21: Step 2 Clinical Skills Trend Lines



## Scholarly Activity and Research Program (SARP)

SARP is a mentor guided, hands-on research experience consisting of 3 1-credit courses done while in medical school. It provides medical students with an opportunity to design and execute independent scholarship or research projects under the guidance of faculty mentors. The different research areas made available to students allows for a project to be tailored to a student’s background and interests ([Link](#) to syllabus). Because all SARP projects are due in spring of year 4 at the latest, data is reported in this section.

Research topics and areas available:

- **Group A)** Basic Sciences, Translational research, and Clinical Research.
- **Group B)** Epidemiology, Community-based, Behavioral, Public, and Environmental Health.
- **Group C)** Medical Humanities, Ethics, Health Policy, Medical Education. This

SARP I must be completed by the end of the MSI year; after that, students have 3 Completion Track options to finish the other 2 components:

- Track 1 – Completion of SARP II and SARP III in Fall of MS2 Year
- Track 2 – Completion in SARP II and SARP III in Fall of MS3 Year
- Track 3 – Completion in SARP II and SARP III in Spring of MS4 Year

SARP courses are Pass/Fail and grades are determined by the submission of assignments on time and satisfactory faculty review.

### *SARP Student Completion Percentages by Track*

Table 107: SARP Completion Rates

	<b>c2018</b>	<b>c2019</b>	<b>c2020</b>	<b>C20221</b>
<b>Track 1</b>	43%	34%	43%	PENDING
<b>Track 2</b>	26%	19%	19%	PENDING
<b>Track 3</b>	30%	47%	47%	PENDING
<b>N=</b>	92	100	92	PENDING

\*Beginning with the Class of 2021, tracks 2 and 3 will be combined

### *External (Non-PLFSOM) Mentored SARP Projects*

Table 108: External mentorship of projects

<b>Class</b>	<b>Total # Projects</b>	<b>External Mentor</b>	<b>Percent of Total</b>	<b>Internship Program*</b>
<b>2017</b>	92	20	22%	6
<b>2018</b>	93	17	18%	6
<b>2019</b>	100	17	17%	2
<b>2020</b>	93	14	15%	0

\*Competitive fellowships which may include a summer stipend

## Medical Education Program Benchmarks and Outcomes

This section reports on all benchmark and outcome items from In-house graduate class placement results from [AAMC](#) items. Program outcomes data: Graduation rates, Graduate placement (Match data), and AAMC examination data, indicators, and benchmarks; followed by data results from the TTUHSC El Paso PLFSOM Program Director /Graduate Student Survey.

### Graduation Rates and Residency Match Data

PLFSOM's curriculum is set up to allow a student to graduate with an MD degree as early as the end of their 4<sup>th</sup> year, in accordance with the Grading and Promotion Committee (GPC) policies and procedures (policy [link](#)): "Students will be expected to complete the medical school curriculum within four (4) years of the initial date of matriculation. The curriculum may be extended due to 1) a leave of absence, 2) academic difficulty requiring repetition of an academic year as per this policy. However, inability to complete Years One and Two of the curriculum in three years and/or the entire curriculum within six (6) years will result in dismissal." The following table presents historical graduation rates -both 4 year and 6 year 'on time'- for original cohorts. Data for students who have withdrawn, been dismissed, or otherwise became part of a later cohort is understandably not included.

#### Graduation Rates

Table 109: Class Graduation Rates

Enrollment Academic Period	Incoming class	Grad. Rate 100% (4 Year)			Grad. Rate 150% (6 Year)		
		N	%	Academic Year of Grad.	N	%	Academic Year of Grad.
Fall 2009 (AY 2009-10)	40	36	90%	2012-13	1	93%	2013-15
Fall 2010 (AY 2010-11)	59	50	85%	2013-14	5	93%	2014-16
Fall 2011 (AY 2011-12)	81	70	86%	2014-15	6	94%	2015-17
Fall 2012 (AY 2012-13)	78	66	85%	2015-16	6	92%	2016-18
Fall 2013 (AY 2013-14)	96	80	83%	2016-17	11	95%	2017-19
Fall 2014 (AY 2014-15)	104	82	79%	2017-18	12	90%	2018-20 <sup>a</sup>
Fall 2015 (AY 2015-16)	104	87	84%	2018-19	NA	-	2019-21 <sup>b</sup>
Fall 2016 (AY 2016-17)	103	NA	-	2019-20	NA	-	2020-22
Fall 2017 (AY 2017-18)	103	NA	-	2020-21	NA	-	2021-23
Fall 2018 (AY 2018-19)	100	NA	-	2021-22	NA	-	2022-24
Fall 2019 (AY 2019-20)	104	NA	-	2022-23	NA	-	2023-25

Source: Texas Higher Education Coordinating Board (THECB) CBM001 and CBM009 reports; Banner ODS

<sup>a</sup> Only includes academic year 2018-19 graduates.

<sup>b</sup> Academic year 2019-21 graduates not yet available.

## Graduate Placement - Summary Data

Table 110: Summary of Match Day Results

Match Results	Class of			
	2016	2017	2018	2019
Number of students successfully matching	71	86	91	<b>100</b>
% Students remaining in El Paso	1%	4%	6%	<b>17%</b>
% Students remaining in Texas	44%	61%	69%	<b>54%</b>
% Matching in primary care	39%	52%	53%	<b>43%</b>
% Matching in military hospital	3%	6%	3%	<b>3%</b>

## Match to Primary Care Specialties

Data in the following table adheres to the AAMC definition\* of primary care: Physicians are counted as primary care physicians if their self-designated primary specialty is one of the following: adolescent medicine, family medicine, general practice, geriatric medicine, internal medicine, internal medicine/pediatrics, or pediatrics.

Table 111: Summary Primary Care Match Results

Primary Care Specialty	Class of			
	2016	2017	2018	2019
Family Medicine	6	13	17	6
Internal Medicine	8	12	14	31
Pediatrics	14	20	16	7
<b>Total</b>	<b>28</b>	<b>45</b>	<b>47</b>	<b>43</b>

## Match to Primary Care Specialty in Texas

Table 112: Summary Primary Care Match - Texas

Primary Care Specialty Match in Texas	Class of			
	2016	2017	2018	2019
Family Medicine	3	6	11	4
Internal Medicine	4	6	11	20
Pediatrics	5	8	8	5
<b>Total</b>	<b>12</b>	<b>20</b>	<b>30</b>	<b>29</b>



**All Specialties Match**

Table 113: Summary of matches by specialty

Specialty Match	Class of			
	2016	2017	2018	2019
Anesthesiology	2.8%	1.2%	2.2%	3%
Dermatology	1.4%	-	2.2%	1%
Emergency Medicine	4.2%	9.6%	4.4%	12%
Family Medicine	8.4%	15.6%	18.7%	6%
Internal Medicine	11.2%	14.4%	15.4%	27%
Neurology	1.4%	1.2%	4.4%	1%
Obstetrics-Gynecology	14%	8.4%	3.3%	6%
Ophthalmology	4.2%	3.6%	2.2%	2%
Otolaryngology	-	-	1.1%	1%
Pathology	7%	-	3.3%	5%
Pediatrics	19.6%	24%	17.6%	7%
Physical Medicine & Rehab	-	-	-	4%
Preliminary Medicine	-	1.2%	-	1%
Psychiatry	2.8%	3.6%	5.5%	9%
Radiology	5.6%	6%	6.6%	4%
Surgery	16.8%	13.2%	13.2%	10%
Urology	-	1.2%	-	1%
N=	71	86	91	100

## AAMC Y2Q and GQ Questionnaires

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The AAMC administers two national questionnaires annually: the Medical School Year Two Questionnaire (Y2Q) and the Graduate Questionnaire (GQ).

The Y2Q is offered once a year to all active MS Yr. 2 students for their thoughts on a range of topics from learning environment and adjustment to medical school, to future career plans. The results are provided by the AAMC in two reports: An Individual School report to every school containing historical, school specific data, and an All Schools Summary Report which provides aggregate national data from all medical education programs accredited by the LCME.

The Graduate Questionnaire (GQ) is administered to students the year of their graduation, and is designed as a tool to help programs evaluate and improve the medical student experience. As with the Y2Q, results are provided by the AAMC in two reports: An Individual, school specific report, and an All Schools report which displays aggregate national data.

Additionally, the AAMC provides a Supplementary Benchmarking Report which differs from both the GQ All Schools Report and the GQ Individual School Report in that it analyzes GQ data at the school level, using percentiles, to facilitate school to school comparison. Data tables from the Benchmarking report are provided here with a modification to show the estimated percentile group PLFSOM falls in.

As a note: Official AAMC report tables reference our medical school (TTUHSC El Paso - PLFSOM) as Texas Tech-Foster, but due to a naming convention requirement from our Office of Institutional Advancement, we have changed 'Texas Tech-Foster' to "PLFSOM" on all GQ and Y2 tables. All other information and data is as originally reported by the AAMC.

### AAMC Y2Q

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#### *Methodology*

"The 2018 Y2Q All Schools Summary Report provides aggregate data from active second-year students at U.S. medical education programs accredited by the Liaison Committee on Medical Education (LCME). The 2018 Y2Q was open from October 1, 2018 to January 2, 2019. Initial participants were identified by the AAMC Student Records System (SRS). While the survey was open, medical schools could request changes to the list of eligible participants to reflect changes in second-year status.

The data in the 2018 Y2Q All Schools Summary Report reflect the responses of 13,912 individuals from the 147 medical schools with second-year students in the 2018-2019 academic year. This represents a 64.3% response rate of the 21,637 individuals identified by SRS as active second-year students at the time the survey closed. Survey data for participating individuals may not be comparable to data for nonparticipants.

The AAMC sent email invitations and reminders to students using email addresses on record in SRS. The response rates varied among the participating medical schools. There were 15 medical schools with a response rate of 90% or above; 16 medical schools with response rates between 80% and 89%; 30 medical schools with response rates between 70% and 79%; 38 medical schools with response rates between 60% and 69%; 24 medical schools with response rates between 50% and 59%; 8 schools with response rates between 40% and 49%; and 16 medical schools with response rates below 40%. The median response rate across participating schools was 66.7%.

The Y2Q included questions regarding the lifestyles, personal characteristics, and learning environments of second-year medical students. Established research scales were included to assess tolerance for ambiguity, empathy, quality of life, perceived stress, perceptions of the learning environment, and burnout. Descriptions of each scale and scoring conventions are provided within the report. Where applicable, a reliability estimate (Cronbach's alpha) is also provided as a measure of internal consistency. A reference list of articles describing these scales is provided at the end of this report.

Percentages displayed in the report may not sum to 100 due to rounding or to questions permitting more than one response. All percentages are rounded. As a result, a percentage of "0.0" does not necessarily indicate that no students responded to that survey option." ([Link](#) to full report)

#### *Selected Findings*

**Total MS2 Students from 147 Medical Schools: 21,637**

**N for this report: 13,912 / 64.3%**

- Second-Year Medical Students Report Satisfaction with Their Medical School Education.
- In-Person Class Attendance Continues to Decline as Virtual Class Attendance Rises.
- Student Awareness of Mistreatment Policies and Procedures Continues to Increase.
- Second-Year Medical Students are Observing Faculty Behaviors.

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- Second-Year Medical Students Have Plans for Patient Care and Work/Life Balance.
- Second-Year Medical Students Self-Report Their Marital Status, Sexual Orientation, and Gender Identity.

**Y2Q Overall****6 Please indicate the extent to which you agree with the following statement:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>Overall, I am satisfied with the quality of my medical education</b>							
All Medical Schools	2018	1.5	4.8	10.6	55.9	27.2	13,861
PLFSOM	2018	1.2	7.2	14.5	57.8	19.3	83
PLFSOM	2017	0.0	4.5	1.5	60.6	33.3	66
PLFSOM	2016	1.3	3.8	6.4	46.2	42.3	78
PLFSOM	2015	1.4	1.4	5.4	48.6	43.2	74

**School Course/Lecture Attendance****7 Please describe how often you attend:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Almost Never	Occasionally	Somewhat Often	Often	Most of the Time	
<b>In-person pre-clerkship courses/lectures at YOUR medical school</b>							
All Medical Schools	2018	26.3	18.7	11.3	11.8	31.9	13,709
PLFSOM	2018	39.8	9.6	10.8	12	27.7	83
PLFSOM	2017	32.3	9.2	7.7	20.0	30.8	65
PLFSOM	2016	16.9	10.4	7.8	18.2	46.8	77
PLFSOM	2015	12.2	6.8	6.8	14.9	59.5	74

	Year	Percentage of Respondents Selecting Each Rating					Count
		Almost Never	Occasionally	Somewhat Often	Often	Most of the Time	
<b>Virtual pre-clerkship courses/lectures (e.g., podcast or video) at YOUR medical school</b>							
All Medical Schools	2018	17.8	14.8	10.6	15.6	41.3	13,592
PLFSOM	2018	29.3	14.6	13.4	13.4	29.3	82
PLFSOM	2017	28.8	24.2	16.7	6.1	24.2	66
PLFSOM	2016	25.3	14.7	8.0	20.0	32.0	75
PLFSOM	2015	47.3	12.2	9.5	4.1	27.0	74

**Use of Online Resources****8 Please describe how often you utilize the following online resources:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Almost Never	Occasionally	Somewhat Often	Often	Most of the Time	
<b>Online medical education courses/lectures from OTHER medical schools</b>							
All Medical Schools	2018	46.8	26.1	11.1	8.3	7.6	13,704
PLFSOM	2018	57.3	22	3.7	7.3	9.8	82

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PLFSOM	2017	43.9	28.8	10.6	12.1	4.5	66
PLFSOM	2016	53.2	15.6	11.7	13.0	6.5	77
PLFSOM	2015	55.4	25.7	8.1	6.8	4.1	74

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**Percentage of Respondents Selecting Each Rating**


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	Year	Almost Never	Occasionally	Somewhat Often	Often	Most of the Time	Count
<b>Online videos for medical education information (e.g., YouTube)</b>							
All Medical Schools	2018	3.6	11.2	17.8	34.6	32.7	13,721
PLFSOM	2018	2.4	2.4	16.9	44.6	33.7	83
PLFSOM	2017	0.0	10.8	21.5	44.6	23.1	65
PLFSOM	2016	2.6	2.6	24.7	54.5	15.6	77
PLFSOM	2015	4.1	17.6	33.8	35.1	9.5	74

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**Percentage of Respondents Selecting Each Rating**


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	Year	Almost Never	Occasionally	Somewhat Often	Often	Most of the Time	Count
<b>Other online content for medical education information (e.g., Wikipedia)</b>							
All Medical Schools	2018	2.5	5.6	12.1	36.2	43.6	13,665
PLFSOM	2018	2.5	1.2	7.4	37	51.9	81
PLFSOM	2017	1.5	6.1	10.6	42.4	39.4	66
PLFSOM	2016	3.9	1.3	6.6	42.1	46.1	76
PLFSOM	2015	2.7	6.8	9.5	37.8	43.2	74

**Y2Q Learning Environment**

**Emotional Climate**

"The emotional climate subscale combines the responses of three items assessing a student's affective response to the learning environment. These questions ask to what extent [or, how often] the educational experience leads to a sense of achievement, valuing oneself, and confidence in one's academic abilities. The possible range of responses for the emotional climate subscale is 0 to 15. Higher scores are correlated with positive perceptions of the learning environment."

Emotional Climate		Reliability Estimate	Mean	Standard Deviation	Count
All Medical Schools	2018	0.9	9.1	3.2	13,077
PLFSOM	2018	0.9	9.9	3.0	78
PLFSOM	2017	0.9	10.9	2.9	62
PLFSOM	2016	0.9	10.1	3.2	70
PLFSOM	2015	1.0	10.3	3.4	65

**Student-Student Interaction**

"The student-student interaction subscale combines responses to four items assessing peer relations at the medical school. In addition to asking about perceived distance among students, these questions ask to what extent students get to know each other well, spend time assisting each other, and gather in informal activities. The possible range of responses for the student-student interaction subscale is 0 to 20, and higher scores are correlated with positive perceptions of the learning environment."

Student-Student Interaction		Reliability Estimate	Mean	Standard Deviation	Count
All Medical Schools	2018	0.8	14.6	3.2	13,132
PLFSOM	2018	0.8	15.0	3.1	78
PLFSOM	2017	0.6	15.6	2.2	58
PLFSOM	2016	0.9	15.0	3.3	71
PLFSOM	2015	0.8	15.2	3.1	67

**Student-Faculty Interaction**

"The student-faculty interaction subscale combines responses to four items assessing a student's perception of faculty supportiveness. In addition to asking about perceived distance between faculty and students, these questions ask to what extent students feel that faculty are helpful when providing academic advice, when providing non-academic advice, and when answering questions and providing criticism. The possible range of responses for the student-faculty interaction subscale is 0 to 20, and higher scores are correlated with positive perceptions of the learning environment."

Student-Faculty Interaction		Reliability Estimate	Mean	Standard Deviation	Count
All Medical Schools	2018	0.8	14.7	3.3	13,095
PLFSOM	2018	0.8	14.7	3.6	80
PLFSOM	2017	0.5	15.9	2.4	63
PLFSOM	2016	0.8	15.5	3.0	72
PLFSOM	2015	0.8	16.2	3.1	67

**Professional Behavior - Faculty**

14 There are disconnects between what I am taught about professional behaviors/attitudes and what I see being demonstrated by faculty

**Percentage of Respondents Selecting Each Rating**

	Year	Never	Almost never	Sometimes	Fairly often	Very often	Always	Count
All Medical Schools	2018	17.4	45.0	25.1	6.0	4.8	1.9	13,231
PLFSOM	2018	18.8	43.8	20.0	3.8	10.0	3.8	80
PLFSOM	2017	34.9	41.3	15.9	0.0	6.3	1.6	63
PLFSOM	2016	20.8	55.6	16.7	4.2	1.4	1.4	72
PLFSOM	2015	38.2	45.6	7.4	7.4	0.0	1.5	68

**15 Please rate how often the following professional behaviors/attitudes are demonstrated by your medical school's faculty.**

<b>Percentage of Respondents Selecting Each Rating</b>								
	Year	Never	Almost Never	Sometimes	Fairly often	Very often	Always	Count
<b>Respecting patient Confidentiality</b>								
All Medical Schools	2018	0.1	0.1	1.2	4.9	25.5	68.2	13,103
PLFSOM	2018	0.0	0.0	0.0	6.3	18.8	75.0	80
PLFSOM	2017	0.0	0	1.6	1.6	20.6	76.2	63
PLFSOM	2016	0.0	1.4	0	2.8	27.8	68.1	72
PLFSOM	2015	0.0	0.0	0.0	2.9	23.5	73.5	68
<b>Using Professional language / avoiding derogatory language</b>								
All Medical Schools	2018	1.0	1.3	2.5	8.3	36.9	50.1	13,107
PLFSOM	2018	1.3	1.3	1.3	10.0	30.0	56.3	80
PLFSOM	2017	0.0	0.0	0.0	3.2	28.6	68.3	63
PLFSOM	2016	1.4	0.0	6.9	6.9	34.7	50	72
PLFSOM	2015	1.5	1.5	0.0	8.8	36.8	51.5	68
<b>Dressing in a professional manner</b>								
All Medical Schools	2018	0.1	0.2	1.3	5.1	30.0	63.4	13,090
PLFSOM	2018	0.0	0.0	1.3	10.0	21.3	67.5	80
PLFSOM	2017	0.0	0.0	1.6	4.8	20.6	73	63
PLFSOM	2016	0.0	0.0	1.4	2.8	33.3	62.5	72
PLFSOM	2015	0.0	0.0	0.0	2.9	22.1	75	68
<b>Resolving conflicts in ways that respect the dignity of all involved</b>								
All Medical Schools	2018	0.3	0.8	5.0	11.3	37.2	45.3	13,043
PLFSOM	2018	0.0	0.0	6.3	15.0	30.0	48.8	80
PLFSOM	2017	0.0	0.0	1.6	3.2	33.3	61.9	63
PLFSOM	2016	0.0	0.0	5.7	14.3	27.1	52.9	70
PLFSOM	2015	0.0	0.0	4.4	10.3	29.4	55.9	68
<b>Being respectful of house staff and other physicians</b>								
All Medical Schools	2018	0.1	0.2	2.0	7.2	34.5	56.0	13,064
PLFSOM	2018	0.0	0.0	2.5	6.3	25.0	66.3	80
PLFSOM	2017	0	0.0	1.6	0.0	25.4	73	63
PLFSOM	2016	1.4	0.0	1.4	5.6	34.7	56.9	72
PLFSOM	2015	0.0	0.0	0.0	5.9	30.9	63.2	68
<b>Respecting diversity</b>								
All Medical Schools	2018	0.2	0.7	4.4	11.5	33.0	50.3	12,986
PLFSOM	2018	0.0	0.0	2.5	6.3	25.0	66.3	80

**15 Please rate how often the following professional behaviors/attitudes are demonstrated by your medical school's faculty.**

		Percentage of Respondents Selecting Each Rating						
	Year	Never	Almost Never	Sometimes	Fairly often	Very often	Always	Count
PLFSOM	2017	0.0	0.0	0.0	1.6	20.6	77.8	63
PLFSOM	2016	1.5	1.5	5.9	10.3	25	55.9	68
PLFSOM	2015	0.0	0.0	1.5	6.1	27.3	65.2	66
<b>Being respectful of other health professions</b>								
All Medical Schools	2018	0.1	0.3	2.7	8.9	35.3	52.6	13,090
PLFSOM	2018	0.0	0.0	3.8	6.3	22.5	67.5	80
PLFSOM	2017	0.0	0.0	1.6	3.2	25.4	69.8	63
PLFSOM	2016	0.0	1.4	1.4	6.9	29.2	61.1	72
PLFSOM	2015	0.0	0.0	1.5	5.9	35.3	57.4	68
<b>Being respectful of other specialties</b>								
All Medical Schools	2018	0.2	0.4	3.7	10.9	37.4	47.4	13,069
PLFSOM	2018	0.0	2.5	1.3	8.8	26.3	61.3	80
PLFSOM	2017	0.0	0.0	1.6	1.6	25.8	71	62
PLFSOM	2016	0.0	1.4	2.8	4.2	33.3	58.3	72
PLFSOM	2015	0.0	0.0	0.0	7.5	40.3	52.2	67
<b>Being on time and managing a schedule well</b>								
All Medical Schools	2018	0.4	1.2	7.8	18.0	39.6	32.9	13,071
PLFSOM	2018	0.0	2.5	5.0	16.3	33.8	42.5	80
PLFSOM	2017	0.0	0.0	6.3	15.9	34.9	42.9	63
PLFSOM	2016	0.0	0.0	6.9	12.5	44.4	36.1	72
PLFSOM	2015	1.5	0.0	4.4	11.8	42.6	39.7	68
<b>Providing direction and constructive feedback</b>								
All Medical Schools	2018	0.5	2.0	8.9	19.3	36.6	32.6	13,064
PLFSOM	2018	1.3	2.5	6.3	17.7	30.4	41.8	79
PLFSOM	2017	0.0	0.0	4.8	14.5	30.6	50	62
PLFSOM	2016	0.0	4.2	5.6	11.1	38.9	40.3	72
PLFSOM	2015	0.0	1.5	2.9	16.2	36.8	42.6	68
<b>Showing respectful interaction with students</b>								
All Medical Schools	2018	0.2	0.5	3.8	11.1	39.9	44.4	13,090
PLFSOM	2018	0.0	1.3	5.0	13.8	33.8	46.3	80
PLFSOM	2017	0.0	0.0	1.6	3.2	27	68.3	63
PLFSOM	2016	0.0	0.0	2.8	8.3	41.7	47.2	72
PLFSOM	2015	0.0	0.0	0.0	10.4	34.3	55.2	67

**Showing empathy and compassion**

All Medical Schools	2018	0.3	0.9	5.5	14.0	38.7	40.6	13,061
PLFSOM	2018	0.0	1.3	5.0	20.0	22.5	51.3	80
PLFSOM	2017	0.0	1.6	0.0	4.8	35.5	58.1	62
PLFSOM	2016	1.4	0.0	2.8	6.9	44.4	44.4	72
PLFSOM	2015	0.0	1.5	2.9	10.3	36.8	48.5	68

**Mistreatment Policy Awareness & Reporting****10 Are you aware that your school has policies regarding the mistreatment of medical students?**

	PLFSOM				All Schools 2018
	2015	2016	2017	2018	
Yes	89.0	97.4	93.8	89.2	91.6
No	11.0	2.6	6.2	10.8	8.4
Number of respondents	73	76	65	83	13,717

**11 Do you know the procedures at your school for reporting the**

	PLFSOM				All Schools 2018
	2015	2016	2017	2018	
Yes	69.9	76.3	84.8	69.9	71.9
No	30.1	23.7	15.2	30.1	28.1
Number of respondents	73	76	66	83	13,712

**Personal Experiences with Negative Behaviors****30 During medical school, how frequently have you:**

	Year	Percentage of Respondents Selecting Each Rating				Count
		Never	Once	Occasionally	Frequently	
<b>Been publicly embarrassed?</b>						
All Medical Schools	2018	76.6	14.5	8.4	0.4	12,694
PLFSOM	2018	74.7	15.2	10.1	0.0	79
PLFSOM	2017	88.5	6.6	4.9	0.0	61
PLFSOM	2016	82.9	10.0	7.1	0.0	70
PLFSOM	2015	66.7	24.2	9.1	0.0	66
<b>Been publicly humiliated?</b>						
All Medical Schools	2018	92.0	5.4	2.4	0.3	12,697
PLFSOM	2018	88.6	5.1	6.3	0.0	79
PLFSOM	2017	96.7	1.6	1.6	0.0	61
PLFSOM	2016	90.0	2.9	7.1	0.0	70
PLFSOM	2015	87.9	9.1	3.0	0.0	66
<b>Been threatened with physical harm?</b>						
All Medical Schools	2018	99.0	0.6	0.3	0.0	12,698
PLFSOM	2018	100.0	0.0	0.0	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	60
PLFSOM	2016	100.0	0.0	0.0	0.0	70
PLFSOM	2015	98.5	1.5	0.0	0.0	65



**30 During medical school, how frequently have you:**

	Year	Percentage of Respondents Selecting Each Rating				Count
		Never	Once	Occasionally	Frequently	
<b>Been physically harmed?</b>						
All Medical Schools	2018	99.1	0.6	0.3	0.0	12,700
PLFSOM	2018	98.7	1.3	0.0	0.0	78
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	100.0	0.0	0.0	0.0	69
PLFSOM	2015	100.0	0.0	0.0	0.0	66
<b>Been required to perform personal services?</b>						
All Medical Schools	2018	97.5	0.7	1.3	0.5	12,699
PLFSOM	2018	96.2	0.0	3.8	0.0	78
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	98.6	0.0	1.4	0.0	69
PLFSOM	2015	97.0	0.0	3.0	0.0	66
<b>Been subjected to unwanted sexual advances?</b>						
All Medical Schools	2018	96.7	1.9	1.2	0.1	12,703
PLFSOM	2018	96.2	1.3	2.5	0.0	79
PLFSOM	2017	96.7	1.6	1.6	0.0	61
PLFSOM	2016	94.2	2.9	2.9	0.0	69
PLFSOM	2015	98.5	0.0	1.5	0.0	66
<b>Been asked to exchange sexual favors for grades or other rewards?</b>						
All Medical Schools	2018	99.6	0.1	0.2	0.0	12,694
PLFSOM	2018	100.0	0.0	0.0	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	100.0	0.0	0.0	0.0	69
PLFSOM	2015	100.0	0.0	0.0	0.0	66
<b>Been denied opportunities for training or rewards based on gender?</b>						
All Medical Schools	2018	97.3	1.4	1.0	0.2	12,695
PLFSOM	2018	97.5	1.3	1.3	0.0	79
PLFSOM	2017	98.3	1.7	0.0	0.0	60
PLFSOM	2016	98.6	0.0	1.4	0.0	69
PLFSOM	2015	97.0	1.5	0.0	1.5	66
<b>Been subjected to offensive sexist remarks/names?</b>						
All Medical Schools	2018	88.7	5.9	5.1	0.4	12,654
PLFSOM	2018	91.1	3.8	5.1	0.0	79
PLFSOM	2017	95.0	1.7	3.3	0.0	60
PLFSOM	2016	87.0	4.3	7.2	1.4	69
PLFSOM	2015	95.5	0.0	4.5	0.0	66
<b>Received lower evaluations or grades solely because of gender rather than performance?</b>						
All Medical Schools	2018	98.0	1.2	0.6	0.1	12,698
PLFSOM	2018	94.9	3.8	1.3	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	95.7	2.9	1.4	0.0	69
PLFSOM	2015	98.5	0.0	1.5	0.0	66
<b>Been denied opportunities for training or rewards based on race or ethnicity?</b>						

**30 During medical school, how frequently have you:**

	Year	Percentage of Respondents Selecting Each Rating				Count
		Never	Once	Occasionally	Frequently	
All Medical Schools	2018	96.7	1.3	1.6	0.4	12,692
PLFSOM	2018	96.2	3.8	0.0	0.0	79
PLFSOM	2017	98.4	0.0	1.6	0.0	61
PLFSOM	2016	97.1	0.0	1.4	1.4	69
PLFSOM	2015	92.4	1.5	6.1	0.0	66
<b>Been subjected to racially or ethnically offensive remarks/names?</b>						
All Medical Schools	2018	93.7	3.3	2.7	0.3	12,682
PLFSOM	2018	92.4	5.1	2.5	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	60
PLFSOM	2016	86.8	5.9	7.4	0.0	68
PLFSOM	2015	95.5	1.5	3.0	0.0	66
<b>Received lower evaluations or grades solely because of race or ethnicity rather than performance?</b>						
All Medical Schools	2018	98.8	0.7	0.4	0.1	12,689
PLFSOM	2018	98.7	1.3	0.0	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	98.6	0.0	0.0	1.4	69
PLFSOM	2015	98.5	0.0	1.5	0.0	66
<b>Been denied opportunities for training or rewards based on sexual orientation?</b>						
All Medical Schools	2018	99.2	0.2	0.4	0.1	12,696
PLFSOM	2018	100.0	0.0	0.0	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	100.0	0.0	0.0	0.0	68
PLFSOM	2015	100.0	0.0	0.0	0.0	66
<b>Been subjected to offensive remarks/names related to sexual orientation?</b>						
All Medical Schools	2018	97.9	1.0	1.0	0.1	12,688
PLFSOM	2018	98.7	1.3	0.0	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	100.0	0.0	0.0	0.0	68
PLFSOM	2015	100.0	0.0	0.0	0.0	66
<b>Received lower evaluations or grades solely because of sexual orientation rather than performance?</b>						
All Medical Schools	2018	99.5	0.2	0.2	0.1	12,681
PLFSOM	2018	98.7	1.3	0.0	0.0	78
PLFSOM	2017	100.0	0.0	0.0	0.0	61
PLFSOM	2016	97.1	0.0	2.9	0.0	69
PLFSOM	2015	98.5	0.0	1.5	0.0	66
<b>Been subjected to negative or offensive behavior(s) based on your personal beliefs or personal characteristics other than your gender, race/ethnicity, or sexual orientation?</b>						
All Medical Schools	2018	95.8	1.6	2.2	0.5	12,635
PLFSOM	2018	91.1	3.8	5.1	0.0	79
PLFSOM	2017	100.0	0.0	0.0	0.0	60
PLFSOM	2016	100.0	0.0	0.0	0.0	69
PLFSOM	2015	100.0	0.0	0.0	0.0	66

## AAMC GQ

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### *Methodology*

"The data in the 2019 GQ All Schools Summary Report reflect the responses of 16,657 graduates of the 142 U.S. medical schools that graduated students in the 2018-2019 academic year. According to the AAMC Student Records System (SRS) as of July 8, 2019, these 16,657 respondents represent 83.6% of the 19,933 medical students who graduated from July 1, 2018 through June 30, 2019. Survey data for participating individuals may not be comparable to data for nonparticipants. The 2019 results include responses from the first graduating class at California Northstate University College of Medicine. The 2019 GQ was open for participation from February 14, 2019 through June 7, 2019. The initial participants were individuals with expected graduation dates between July 1, 2018 and June 30, 2019 as identified by SRS data and confirmed by medical school personnel in January 2019. While the survey was open, medical schools could request changes to the list of eligible participants to reflect changes in expected graduation status. Through a variety of measures, medical schools independently encouraged graduating students to participate. The AAMC also sent email invitations and monthly reminders to eligible students.

Percentages displayed in the reports may not sum to 100 due to rounding or to collection formats permitting more than one response. Where the reports appear to have missing columns, rows, or blank spaces within rows, these correspond to unavailable data for a particular survey item in a given year, usually due to changes in when the survey item was offered, or to alterations to the item affecting the comparability of the data. These are to be distinguished from data with a displayed percent of '0.0', which correspond to real survey response options that were selected by no, or very few, respondents."

[\(Link to full report\)](#)

### *Selected Findings*

**Total Graduate Students from 140 Medical Schools: 19,242**

**N for this report: 15,609 / 81.1%**

- Graduates Report Satisfaction with Their Medical School Education and Development as Physicians
- Percentage of Students Reporting Clinical Observation and Feedback Continues to Increase
- Students Increase Engagement in Research and Education Activities
- Graduates Report Higher Approval with Electives Advice
- More Graduates Agree that Student Diversity Enhances Training
- Medical Education Debt Rises, but fewer Graduates are Indebted
- Personal Interest Remains Top Influence on Medical Specialty Choice
- More Graduates Plan to Serve the Underserved
- Indicators of Mistreatment Experienced by Medical Students Fall Slightly
- Medical School Graduates Self-Report Their Marital Status, Gender, Sexual Orientation

**GQ Overall**

**7 Please indicate the extent to which you agree with the following statement:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>Overall, I am satisfied with the quality of my medical education</b>							
All Medical Schools	2019	1.4	3.2	6.2	49.4	39.8	16,020
PLFSOM	2019	3.4	9.2	6.9	55.2	25.3	87
PLFSOM	2018	0.0	3.7	4.9	59.3	32.1	81
PLFSOM	2017	0.0	1.3	2.6	64.1	32.1	78
PLFSOM	2016	0.0	4.4	1.5	60.3	33.8	68
PLFSOM	2015	0.0	3.2	6.5	46.8	43.5	62
PLFSOM	2014	2.1	0.0	4.2	54.2	39.6	48

**GQ Clinical Experience/Relevance**

**Based on your experiences, indicate whether you agree or disagree with the following statements**

**8 about medical school:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>Basic Science coursework had sufficient illustrations of clinical relevance</b>							
All Medical Schools	2019	1.5	9.2	14.5	51.7	23.1	16,477
PLFSOM	2019	2.3	5.7	10.2	55.7	26.1	88
PLFSOM	2018	1.3	1.3	1.3	52.5	43.8	80
PLFSOM	2017	0.0	1.3	5.1	52.6	41.0	78
PLFSOM	2016	0.0	2.9	5.9	51.5	39.7	68
PLFSOM	2015	1.6	1.6	4.8	48.4	43.5	62
PLFSOM	2014	2.1	2.1	2.1	52.1	41.7	48

**Based on your experiences, indicate whether you agree or disagree with the following statements about medical school:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>Required clinical experiences integrated basic science content.</b>							
All Medical Schools	2019	0.9	4.7	14.0	55.1	25.3	16,437
PLFSOM	2019	2.3	3.4	12.5	55.7	26.1	88
PLFSOM	2018	0.0	3.8	6.3	59.5	30.4	79
PLFSOM	2017	0.0	2.6	7.7	56.4	33.3	78
PLFSOM	2016	0.0	2.9	4.4	55.9	36.8	68
PLFSOM	2015	1.6	3.2	4.8	50.8	39.7	63
PLFSOM	2014	2.1	2.1	0.0	62.5	33.3	48

**Basic Science Preparation for Clerkship**

**How well did your study of the following sciences basic to medicine prepare you for clinical clerkships**

**9 and electives?**

## Medical Education Program Evaluation Report

Note: Respondents had the option to select "Not applicable"; these data are not included in the report calculations and counts.

	Year	Percentage of Respondents Selecting Each Rating				Count
		Poor	Fair	Good	Excellent	
<b>Biochemistry</b>						
All Medical Schools	2019	11.0	26.5	40.2	22.3	16,161
PLFSOM	2019	7.8	15.6	36.7	40.0	90
PLFSOM	2018	2.6	24.4	44.9	28.2	78
PLFSOM	2017	0.0	13.9	38.0	48.1	79
PLFSOM	2016	2.9	14.7	27.9	54.4	68
PLFSOM	2015	3.2	9.7	43.5	43.5	62
PLFSOM	2014	6.3	14.6	39.6	39.6	48
<b>Biostatistics and epidemiology</b>						
All Medical Schools	2019	7.9	23.9	42.2	26.0	16,284
PLFSOM	2019	9.9	8.8	36.3	45.1	91
PLFSOM	2018	6.3	16.3	41.3	36.3	80
PLFSOM	2017	1.3	25.6	50.0	23.1	78
PLFSOM	2016	16.4	38.8	37.3	7.5	67
PLFSOM	2015	7.9	27.0	39.7	25.4	63
PLFSOM	2014	18.8	18.8	37.5	25.0	48
<b>Genetics</b>						
All Medical Schools	2019	5.1	23.5	46.6	24.8	16,288
PLFSOM	2019	4.5	16.9	53.9	24.7	89
PLFSOM	2018	3.8	27.8	39.2	29.1	79
PLFSOM	2017	0.0	24.1	44.3	31.6	79
PLFSOM	2016	4.4	26.5	48.5	20.6	68
PLFSOM	2015	3.2	17.5	47.6	31.7	63
PLFSOM	2014	4.2	22.9	52.1	20.8	48
<b>Gross Anatomy</b>						
All Medical Schools	2019	3.1	10.3	34.4	52.2	16,402
PLFSOM	2019	17.8	30.0	37.8	14.4	90
PLFSOM	2018	33.8	30	22.5	13.8	80
PLFSOM	2017	21.5	35.4	25.3	17.7	79
PLFSOM	2016	38.2	27.9	23.5	10.3	68
PLFSOM	2015	20.6	33.3	27.0	19.0	63
PLFSOM	2014	25.0	31.3	31.3	12.5	48
<b>Immunology</b>						
All Medical Schools	2019	3.8	15.5	45.4	35.2	16,341
PLFSOM	2019	1.1	14.4	42.2	42.2	90
PLFSOM	2018	1.3	12.5	45	41.3	80
PLFSOM	2017	0.0	6.3	36.7	57.0	79
PLFSOM	2016	0.0	13.4	29.9	56.7	67
PLFSOM	2015	4.8	1.6	34.9	58.7	63
PLFSOM	2014	0.0	4.3	41.3	54.3	46
<b>Intro to Clinical Med/Intro to the Patient</b>						
All Medical Schools	2019	1.6	6.8	29.5	62.1	1,6178

## Medical Education Program Evaluation Report

PLFSOM	2019	2.2	10.1	25.8	61.8	89
PLFSOM	2018	1.3	2.6	20.8	75.3	77
PLFSOM	2017	0.0	2.6	32.1	65.4	78
PLFSOM	2016	0.0	4.5	23.9	71.6	67
PLFSOM	2015	0.0	3.3	19.7	77.0	61
PLFSOM	2014	0.0	0.0	22.2	77.8	45
<b>Microanatomy/Histology</b>						
All Medical Schools	2019	7.2	21.5	41.7	29.6	16,257
	2019	4.4	23.3	48.9	23.3	90
PLFSOM	2018	3.8	23.1	50	23.1	78
PLFSOM	2017	0.0	19.0	46.8	34.2	79
PLFSOM	2016	4.5	19.7	36.4	39.4	66
PLFSOM	2015	3.2	25.4	47.6	23.8	63
PLFSOM	2014	4.2	10.4	56.3	29.2	48
<b>Microbiology</b>						
All Medical Schools	2019	3.7	11.6	38.8	45.8	16,358
PLFSOM	2019	6.6	24.2	37.4	31.9	91
PLFSOM	2018	5.0	22.5	35	37.5	80
PLFSOM	2017	3.8	16.5	53.2	26.6	79
PLFSOM	2016	8.8	22.1	33.8	35.3	68
PLFSOM	2015	15.9	28.6	39.7	15.9	63
PLFSOM	2014	6.3	22.9	41.7	29.2	48
<b>Neuroscience</b>						
All Medical Schools	2019	4.3	12.6	38.4	44.7	16,359
PLFSOM	2019	11.0	25.3	48.4	15.4	91
PLFSOM	2018	2.5	8.8	51.3	37.5	80
PLFSOM	2017	0.0	8.9	38.0	53.2	79
PLFSOM	2016	1.5	10.3	35.3	52.9	68
PLFSOM	2015	6.3	19.0	44.4	30.2	63
PLFSOM	2014	6.4	12.8	51.1	29.8	47
<b>Pathology</b>						
All Medical Schools	2019	2.8	12.8	40.4	44.0	16,305
PLFSOM	2019	0.0	9.9	37.4	52.7	91
PLFSOM	2018	0.0	12.5	26.3	61.3	80
PLFSOM	2017	0.0	7.6	27.8	64.6	79
PLFSOM	2016	0.0	1.5	13.4	85.1	67
PLFSOM	2015	0.0	4.8	16.1	79.0	62
PLFSOM	2014	2.1	0.0	29.2	68.8	48
<b>Pharmacology</b>						
All Medical Schools	2019	6.0	15.4	37.9	40.7	16,364
PLFSOM	2019	15.4	25.3	46.2	13.2	91.0
PLFSOM	2018	5.0	36.3	33.8	25	80
PLFSOM	2017	7.6	24.1	35.4	32.9	79
PLFSOM	2016	4.4	17.6	47.1	30.9	68
PLFSOM	2015	15.9	23.8	41.3	19.0	63
PLFSOM	2014	27.1	22.9	33.3	16.7	48

<b>Physiology</b>						
All Medical Schools	2019	2.2	8	37.6	52.2	16,320
PLFSOM	2019	2.2	14.3	42.9	40.7	91
PLFSOM	2018	6.3	7.5	36.3	50	80
PLFSOM	2017	1.3	10.1	45.6	43.0	79
PLFSOM	2016	1.5	11.8	39.7	47.1	68
PLFSOM	2015	3.2	16.1	37.1	43.5	62
PLFSOM	2014	0.0	12.5	54.2	33.3	48
<b>Behavioral Science</b>						
All Medical Schools	2019	2.4	11.4	43.3	42.9	16,185
PLFSOM	2019	1.1	6.8	40.9	51.1	88
PLFSOM	2018	1.3	11.4	35.4	51.9	79
PLFSOM	2017	1.3	3.8	47.4	47.4	78
PLFSOM	2016	0.0	17.6	29.4	52.9	68
PLFSOM	2015	1.6	9.5	38.1	50.8	63
PLFSOM	2014	4.2	8.3	50.0	37.5	48
<b>Pathophysiology of Disease</b>						
All Medical Schools	2019	1.2	5.5	35.6	57.7	16,221
PLFSOM	2019	1.1	9.9	39.6	49.5	91
PLFSOM	2018	1.3	6.3	27.8	64.6	79
PLFSOM	2017	0.0	3.8	29.1	67.1	79
PLFSOM	2016	0.0	4.4	27.9	67.6	68
PLFSOM	2015	0.0	0.0	25.4	74.6	63
PLFSOM	2014	0.0	2.1	35.4	62.5	48

### **Clerkship Experience**

Rate the quality of your educational experiences in the following clerkships. If you participated in an integrated clerkship, please answer this question in terms of your educational experience in each discipline. If you had no clinical experiences in the discipline, select "Not applicable."

#### **10 All Clerkships**

	Year	Percentage of Respondents Selecting Each Rating				Count
		Poor	Fair	Good	Excellent	
<b>Emergency Medicine</b>						
All Medical Schools	2019	3.7	9.0	31.2	56.2	12,006
PLFSOM	2019	2.3	12.6	27.6	57.5	87
PLFSOM	2018	1.5	10.4	28.4	59.7	67
PLFSOM	2017	2.8	4.2	35.2	57.7	71
PLFSOM	2016	0.0	3.4	34.5	62.1	58
PLFSOM	2015	0.0	1.8	23.6	74.5	55
PLFSOM	2014	2.4	0.0	24.4	73.2	41
<b>Family Medicine</b>						
All Medical Schools	2019	4.0	12	31.4	52.6	15,816
PLFSOM	2019	3.3	9.9	46.2	40.7	91
PLFSOM	2018	1.3	11.3	37.5	50	80

**Rate the quality of your educational experiences in the following clerkships. If you participated in an integrated clerkship, please answer this question in terms of your educational experience in each discipline. If you had no clinical experiences in the discipline, select "Not applicable."**

## 10 All Clerkships

	Year	Percentage of Respondents Selecting Each Rating				Count
		Poor	Fair	Good	Excellent	
PLFSOM	2017	3.8	10.1	40.5	45.6	79
PLFSOM	2016	1.5	7.5	37.3	53.7	67
PLFSOM	2015	1.6	3.2	27.4	67.7	62
PLFSOM	2014	4.1	8.2	40.8	46.9	49
<b>Internal Medicine</b>						
All Medical Schools	2019	2.1	6.9	29	61.9	16,490
PLFSOM	2019	3.3	4.4	41.8	50.5	91
PLFSOM	2018	1.3	13.8	40	45	80
PLFSOM	2017	0.0	7.6	35.4	57.0	79
PLFSOM	2016	3.0	17.9	38.8	40.3	67
PLFSOM	2015	1.6	11.3	37.1	50.0	62
PLFSOM	2014	2.0	4.1	38.8	55.1	49
<b>Neurology</b>						
All Medical Schools	2019	5.8	16.1	35.9	42.1	14,805
PLFSOM	2019	6.4	16.7	43.6	33.3	78
PLFSOM	2018	13	27.5	33.3	26.1	69
PLFSOM	2017	8.6	11.4	40.0	40.0	70
PLFSOM	2016	6.9	20.7	36.2	36.2	58
PLFSOM	2015	0.0	3.8	43.4	52.8	53
PLFSOM	2014	2.4	7.3	39.0	51.2	41
<b>OBGyn/Women's Health</b>						
All Medical Schools	2019	7.1	14.0	33.0	46	16,484
PLFSOM	2019	16.5	24.2	44	15.4	91
PLFSOM	2018	17.5	23.8	38.8	20	80
PLFSOM	2017	0.0	12.7	49.4	38.0	79
PLFSOM	2016	1.5	7.5	29.9	61.2	67
PLFSOM	2015	1.6	9.7	37.1	51.6	62
PLFSOM	2014	6.1	10.2	32.7	51.0	49
<b>Pediatrics</b>						
All Medical Schools	2019	3.2	10.4	32.8	54	16,483
PLFSOM	2019	3.3	8.8	40.7	47.3	91
PLFSOM	2018	2.5	10	25	62.5	80
PLFSOM	2017	0.0	5.1	38.0	57.0	79
PLFSOM	2016	0.0	7.6	21.2	71.2	66
PLFSOM	2015	0.0	8.1	32.3	59.7	62
PLFSOM	2014	8.3	14.6	29.2	47.9	48
<b>Psychiatry</b>						
All Medical Schools	2019	2.6	9.7	32.5	55	16,479
PLFSOM	2019	1.1	15.6	46.7	36.7	90



**Rate the quality of your educational experiences in the following clerkships. If you participated in an integrated clerkship, please answer this question in terms of your educational experience in each discipline. If you had no clinical experiences in the discipline, select "Not applicable."**

## 10 All Clerkships

	Year	Percentage of Respondents Selecting Each Rating				Count
		Poor	Fair	Good	Excellent	
PLFSOM	2018	5.0	16.3	36.3	42.5	80
PLFSOM	2017	3.8	10.1	48.1	38.0	79
PLFSOM	2016	1.5	13.4	35.8	49.3	67
PLFSOM	2015	1.6	6.5	33.9	58.1	62
PLFSOM	2014	2.0	12.2	36.7	49.0	49
<b>Surgery</b>						
All Medical Schools	2019	2.6	9.7	32.5	55	16,479
PLFSOM	2019	1.1	15.6	46.7	36.7	90
PLFSOM	2018	5.1	13.9	35.4	45.6	79
PLFSOM	2017	5.1	10.1	46.8	38.0	79
PLFSOM	2016	10.4	25.4	29.9	34.3	67
PLFSOM	2015	16.1	17.7	25.8	40.3	62
PLFSOM	2014	8.2	14.3	38.8	38.8	49

## Data per Clerkship

### 11 FAMILY MEDICINE -PERCENT

	PLFSOM						All Schools 2019
	2014	2015	2016	2017	2018	2019	
<b>Were you observed taking the relevant portions of the patient history?</b>							
Yes	93.9	100	97.0	93.7	92.5	95.6	91.6
No	6.1	0.0	3.0	6.3	7.5	4.4	8.4
Number of respondents	49	62	67	79	80	91	15,758
<b>Were you observed performing the relevant portions of the physical or mental status exam?</b>							
Yes	89.8	98.4	95.5	92.4	96.3	94.4	92.9
No	10.2	1.6	4.5	7.6	3.8	5.6	7.1
Number of respondents	49	62	67	79	80	90	15,699
<b>Were you provided with mid-clerkship feedback?</b>							
Yes	98.0	100	100	100	98.7	100.0	95.6
No	2.0	0.0	0.0	0.0	1.3	0.0	4.4
Number of respondents	49	62	67	79	80	90	15,705

Percentage of Respondents Selecting Each Rating							
	Year	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Count
<b>Family Medicine: Faculty provided effective teaching during the clerkship</b>							
All Medical Schools	2019	2.1	4.0	9.3	35	50	15,721
PLFSOM	2019	1.1	2.2	8.9	38.9	48.9	90
PLFSOM	2018	1.3	1.3	2.5	40.5	54.4	79
PLFSOM	2017	1.3	5.1	9.0	42.3	42.3	78
PLFSOM	2016	0.0	3.0	7.5	31.3	58.2	67
PLFSOM	2015	1.6	1.6	3.3	31.1	62.3	61
PLFSOM	2014	4.1	2.0	2.0	44.9	46.9	49

**11 INTERNAL MEDICINE - PERCENT**

	PLFSOM						All Schools 2019
	2014	2015	2016	2017	2018	2019	
<b>Were you observed taking the relevant portions of the patient history?</b>							
Yes	95.9	98.4	92.5	94.9	95	90.1	94.3
No	4.1	1.6	7.5	5.1	5.0	9.9	5.7
Number of respondents	49	62	67	79	80	91	16,413
<b>Were you observed performing the relevant portions of the physical or mental status exam?</b>							
Yes	93.9	98.4	92.5	96.2	93.8	94.4	95.0
No	6.1	1.6	7.5	3.8	6.3	5.6	5.0
Number of respondents	49	62	67	79	80	89	16,348
<b>Were you provided with mid-clerkship feedback?</b>							
Yes	100	98.4	100	100	100.0	100.0	98.2
No	0.0	1.6	0.0	0.0	0.0	0.0	1.8
Number of respondents	49	62	67	79	78	89	16,360

<b>Percentage of Respondents Selecting Each Rating</b>							
	Year	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Count
<b>Internal Medicine: Faculty provided effective teaching during the clerkship</b>							
All Medical Schools	2019	1.0	2.0	4.9	29	63.1	16,387
PLFSOM	2019	0.0	1.1	3.3	32.2	63.3	90
PLFSOM	2018	0.0	1.3	7.6	32.9	58.2	79
PLFSOM	2017	1.3	0.0	3.8	39.7	55.1	78
PLFSOM	2016	0.0	4.5	10.4	46.3	38.8	67
PLFSOM	2015	0.0	0.0	8.2	42.6	49.2	61
PLFSOM	2014	2.0	4.1	0.0	30.6	63.3	49

**11 NEUROLOGY- PERCENT**

	PLFSOM						All Schools 2019
	2014	2015	2016	2017	2018	2019	
<b>Were you observed taking the relevant portions of the patient history?</b>							
Yes	87.8	90.6	74.6	87	68.6	84.6	85.9
No	12.2	9.4	25.4	13	31.4	15.4	14.1
Number of respondents	41	53	59	69	70	78	14,730
<b>Were you observed performing the relevant portions of the physical or mental status exam?</b>							
Yes	87.8	96.2	86.4	91.3	81.2	92.1	92.4
No	12.2	3.8	13.6	8.7	18.8	7.9	7.6
Number of respondents	41	53	59	69	69	76	14,672
<b>Were you provided with mid-clerkship feedback?</b>							
Yes	90.2	84.9	89.8	91.3	85.5	92.2	89.8
No	9.8	15.1	10.2	8.7	14.5	7.8	10.2
Number of respondents	41	53	59	69	69	77	14,672

<b>Percentage of Respondents Selecting Each Rating</b>							
	Year	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Count
<b>Neurology: Faculty provided effective teaching during the clerkship</b>							
All Medical Schools	2019	1.9	4.5	12.4	37.2	43.9	14,709
PLFSOM	2019	0.0	2.6	9.1	45.5	42.9	77
PLFSOM	2018	2.9	12.9	14	40	30	70
PLFSOM	2017	4.3	4.3	4.3	42.9	44.3	70
PLFSOM	2016	0.0	3.4	11.9	37.3	47.5	59
PLFSOM	2015	0.0	0.0	1.9	42.3	55.8	52
PLFSOM	2014	2.4	4.9	4.9	22.0	65.9	41

**11 OBSTETRICS-GYNECOLOGY/WOMEN'S HEALTH- PERCENT**

	PLFSOM - Percent						All Schools 2019
	2014	2015	2016	2017	2018	2019	
<b>Were you observed taking the relevant portions of the patient history?</b>							
Yes	85.7	90.3	85.1	86.1	77.5	81.1	85.9
No	14.3	9.7	14.9	13.9	22.5	18.9	14.1
Number of respondents	49	62	67	79	80	90	16,401
<b>Were you observed performing the relevant portions of the physical or mental status exam?</b>							
Yes	89.6	93.4	92.5	92.0	88.6	88.6	92.4
No	10.4	6.6	7.5	7.6	11.4	11.4	7.6
Number of respondents	48	61	67	79	79	88	16,340
<b>Were you provided with mid-clerkship feedback?</b>							
Yes	93.9	91.9	97.0	96.2	94.9	98.9	94.2
No	6.1	8.1	3.0	3.8	5.1	1.1	5.8
Number of respondents	49	62	67	79	79	89	16,354

<b>Percentage of Respondents Selecting Each Rating</b>							
	Year	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Count
<b>Obstetrics-Gynecology/Women's Health: Faculty provided effective teaching during the clerkship</b>							
All Medical Schools	2019	3.0	6.8	13.7	37.5	39.1	16,380
PLFSOM	2019	6.7	15.6	23.3	33.3	21.1	90
PLFSOM	2018	5.0	18.8	19.0	41.3	16.3	80
PLFSOM	2017	2.6	3.8	12.8	50.0	30.8	78
PLFSOM	2016	1.5	7.5	11.9	43.3	35.8	67
PLFSOM	2015	0.0	0.0	13.1	44.3	42.6	61
PLFSOM	2014	4.1	2.0	6.1	57.1	30.6	49

11 **PEDIATRICS - PERCENT**

	PLFSOM - Percent						All Schools 2019
	2014	2015	2016	2017	2018	2019	
<b>Were you observed taking the relevant portions of the patient history?</b>							
Yes	93.9	100	100	96.2	93.8	95.6	93.2
No	6.1	0.0	0.0	4.0	6.3	4.4	6.8
Number of respondents	49	62	67	79	80	91	16,400
<b>Were you observed performing the relevant portions of the physical or mental status exam?</b>							
Yes	91.8	96.8	97.0	96.2	93.8	95.6	94.6
No	8.2	3.2	3.0	3.8	6.3	4.4	5.4
Number of respondents	49	62	66	79	80	90	16,341
<b>Were you provided with mid-clerkship feedback?</b>							
Yes	98.0	100	100	100	98.7	100.0	96.8
No	2.0	0.0	0.0	0.0	1.3	0.0	3.2
Number of respondents	49	62	67	79	79	90	16,348

<b>Percentage of Respondents Selecting Each Rating</b>							
	Year	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Count
<b>Pediatrics: Faculty provided effective teaching during the clerkship</b>							
All Medical Schools	2019	1.4	2.8	7.4	34.7	53.7	16,380
PLFSOM	2019	2.2	4.4	5.6	33.3	54.4	90
PLFSOM	2018	0.0	2.5	6.0	30.0	61.3	80
PLFSOM	2017	1.3	0.0	5.1	38.5	55.1	78
PLFSOM	2016	0.0	0.0	4.5	31.3	64.2	67
PLFSOM	2015	0.0	0.0	11.5	36.1	52.5	61
PLFSOM	2014	4.1	2.0	2.0	49.0	42.9	49

**11 PSYCHIATRY - PERCENT**

	PLFSOM - Percent						All Schools 2019
	2014	2015	2016	2017	2018	2019	
<b>Were you observed taking the relevant portions of the patient history?</b>							
Yes	91.8	95.2	91.0	88.6	87.5	92.3	93.8
No	8.2	4.8	9.0	11.4	12.5	7.7	6.2
Number of respondents	49	62	67	79	80	91	16,405
<b>Were you observed performing the relevant portions of the physical or mental status exam?</b>							
Yes	91.8	93.5	94.0	86.1	87.5	94.4	92.6
No	8.2	6.5	6.0	13.9	12.5	5.6	7.4
Number of respondents	49	62	67	79	80	90	16,332
<b>Were you provided with mid-clerkship feedback?</b>							
Yes	98.0	100	100	100	98.7	100.0	95.0
No	2.0	0.0	0.0	0.0	1.3	0.0	5.0
Number of respondents	49	62	67	79	79	89	16,332

<b>Percentage of Respondents Selecting Each Rating</b>							
	Year	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Count
<b>Psychiatry: Faculty provided effective teaching during the clerkship</b>							
All Medical Schools	2019	1.4	3.5	9.0	35.9	50.1	16,373
PLFSOM	2019	1.1	1.1	10.0	40	47.8	90
PLFSOM	2018	2.5	3.8	10.0	40.5	43.0	79
PLFSOM	2017	1.3	2.6	9.0	52.6	34.6	78
PLFSOM	2016	0.0	6.0	11.9	34.3	47.8	67
PLFSOM	2015	0.0	1.6	11.5	41.0	45.9	61
PLFSOM	2014	2.1	6.3	4.2	39.6	47.9	48

**11 SURGERY**

	PLFSOM - Percent						All Schools 2019
	2014	2015	2016	2017	2018	2019	
<b>Were you observed taking the relevant portions of the patient history?</b>							
Yes	79.6	80.6	62.1	78.2	71.3	72.5	77.6
No	20.4	19.4	37.9	21.8	28.8	27.5	22.4
Number of respondents	49	62	66	78	80	91	16,384
<b>Were you observed performing the relevant portions of the physical or mental status exam?</b>							
Yes	81.6	85.5	67.2	83.5	77.5	77.5	82.8
No	18.4	14.5	32.8	16.5	22.5	22.5	17.2
Number of respondents	49	62	67	79	80	89	16,318
<b>Were you provided with mid-clerkship feedback?</b>							
Yes	98	93.5	98.5	98.7	96.2	97.8	92.5
No	2.0	6.5	1.5	1.3	3.8	2.2	7.5
Number of respondents	49	62	67	79	79	90	16,337

<b>Percentage of Respondents Selecting Each Rating</b>							
	Year	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Count
<b>Surgery: Faculty provided effective teaching during the clerkship</b>							
All Medical Schools	2019	3.5	7.5	15.1	37.0	36.9	16,361
PLFSOM	2019	4.4	7.8	14.4	43.3	30	90
PLFSOM	2018	2.5	7.5	11	45	33.8	80
PLFSOM	2017	1.3	7.7	15.4	47.4	28.2	78
PLFSOM	2016	9.0	20.9	17.9	29.9	22.4	67
PLFSOM	2015	6.6	14.8	21.3	31.1	26.2	61
PLFSOM	2014	4.1	8.2	26.5	38.8	22.4	49



**Residency Program Preparedness**

**12 Indicate whether you agree or disagree with the following statements about your preparedness for beginning a residency program:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>I am confident that I have acquired the clinical skills required to begin a residency program.</b>							
All Medical	2019	0.6	1.9	6.8	44.1	46.5	16,180
PLFSOM	2019	2.2	3.3	11.1	55.6	27.8	90
PLFSOM	2018	0.0	5.0	7.5	47.5	40.0	80
PLFSOM	2017	2.6	0.0	12.8	46.2	38.5	78
PLFSOM	2016	1.5	3.0	10.4	50.7	34.3	67
PLFSOM	2015	1.6	3.3	16.4	42.6	36.1	61
PLFSOM	2014	0.0	0.0	2.0	57.1	40.8	49
PLFSOM	2013	2.9	2.9	2.9	52.9	38.2	34
<b>I have the fundamental understanding of common conditions and their management encountered in the major clinical disciplines.</b>							
All Medical	2019	0.3	0.9	4.3	46.2	48.2	16,173
PLFSOM	2019	2.2	1.1	4.4	57.8	34.4	90
PLFSOM	2018	0.0	2.5	5.0	52.5	40.0	80
PLFSOM	2017	1.3	0.0	5.1	48.7	44.9	78
PLFSOM	2016	0.0	1.5	7.5	56.7	34.3	67
PLFSOM	2015	1.6	0.0	8.2	54.1	36.1	61
PLFSOM	2014	0.0	0.0	0.0	55.1	44.9	49
PLFSOM	2013	0.0	0.0	8.8	52.9	38.2	34
<b>I have the communication skills necessary to interact with patients and health professionals.</b>							
All Medical	2019	0.2	0.2	1.3	21.8	76.6	16,164
PLFSOM	2019	1.1	0.0	1.1	28.9	68.9	90
PLFSOM	2018	0.0	1.3	0.0	23.8	75.0	80
PLFSOM	2017	1.3	0.0	1.3	26.9	70.5	78
PLFSOM	2016	0.0	0.0	0.0	33.3	66.7	66
PLFSOM	2015	0.0	0.0	3.3	26.2	70.5	61
PLFSOM	2014	0.0	0.0	2.0	49.0	49.0	49
PLFSOM	2013	0.0	0.0	0.0	44.1	55.9	34
<b>I have basic skills in clinical decision making and the application of evidence based information to medical practice.</b>							
All Medical	2019	0.3	0.6	3.7	39.9	55.5	16,165
PLFSOM	2019	2.2	1.1	5.6	46.7	44.4	90
PLFSOM	2018	0.0	3.8	3.8	48.8	43.8	80
PLFSOM	2017	1.3	0.0	6.4	44.9	47.4	78
PLFSOM	2016	0.0	1.5	4.5	50.7	43.3	67
PLFSOM	2015	1.7	0.0	8.3	43.3	46.7	60
PLFSOM	2014	0.0	0.0	2.0	55.1	42.9	49
PLFSOM	2013	0.0	0.0	8.8	50.0	41.2	34

**Indicate whether you agree or disagree with the following statements about your preparedness for**  
**12 beginning a residency program:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>I have a fundamental understanding of the issues in social sciences of medicine (e.g., ethics, humanism, professionalism, organization, and structure of the health care system).</b>							
All Medical	2019	0.3	1.1	4.1	34.4	60.2	16,171
PLFSOM	2019	1.1	0.0	3.3	38.9	56.7	90
PLFSOM	2018	0.0	1.3	5.0	35.0	58.8	80
PLFSOM	2017	1.3	0.0	3.8	39.7	55.1	78
PLFSOM	2016	0.0	1.5	7.6	30.3	60.6	66
PLFSOM	2015	1.6	0.0	4.9	27.9	65.6	61
PLFSOM	2014	0.0	0.0	2.0	51.0	46.9	49
PLFSOM	2013	0.0	2.9	0.0	55.9	41.2	34
<b>I understand the ethical and professional values that are expected of the profession.</b>							
All Medical	2019	0.2	0.2	1.4	24.1	74.0	16,154
PLFSOM	2019	0.0	2.2	1.1	25.6	71.1	90
PLFSOM	2018	0.0	0.0	1.3	26.3	72.5	80
PLFSOM	2017	1.3	0.0	0.0	34.6	64.1	78
PLFSOM	2016	0.0	0.0	0.0	25.4	74.6	67
PLFSOM	2015	0.0	0.0	4.9	24.6	70.5	61
PLFSOM	2014	0.0	0.0	0.0	51.0	49.0	49
PLFSOM	2013	0.0	0.0	8.8	44.1	47.1	34
<b>I believe I am adequately prepared to care for patients from different backgrounds.</b>							
All Medical	2019	0.3	0.6	2.8	29.4	67.0	16137.0
PLFSOM	2019	0.0	2.2	3.3	33.3	61.1	90
PLFSOM	2018	0.0	0.0	1.3	27.8	70.9	79
PLFSOM	2017	1.3	0.0	5.1	30.8	62.8	78
PLFSOM	2016	0.0	0.0	0.0	35.8	64.2	67
PLFSOM	2015	0.0	0.0	6.6	37.7	55.7	61
PLFSOM	2014	0.0	2.0	0.0	51.0	46.9	49
PLFSOM	2013	2.9	0.0	5.9	50.0	41.2	34

**Elective Activities and Experiences**

**Indicate the activities you will have participated in during medical school on an elective (for credit) or volunteer (not required) basis:**

	PLFSOM						All Schools
	2014	2015	2016	2017	2018	2019	2019
Independent study project for credit	67.3	41	62.7	65.4	60.8	68.5	53.7
Research project with faculty member	89.8	88.5	88.1	89.7	96.2	96.6	80.9
Authorship (sole or joint) of a peer-reviewed paper submitted for publication	51	54.1	35.8	46.2	62.0	49.4	54.0
Authorship (sole or joint) of a peer-reviewed oral or poster presentation.	61.2	80.3	49.3	61.5	84.8	61.8	60.6
Global health experience	34.7	37.7	14.9	19.2	11.4	9.0	24.2
Educating elementary, high school or college students about careers in health professions or biological sciences	59.2	73.8	45	60.3	60.8	50.6	53.7
Providing health education (e.g., HIV/AIDS education, breast cancer awareness, smoking cessation, obesity)	73.5	73.8	64.2	75.6	65.8	60.7	64.5
Field experience in providing health education in the community (e.g., adult/child protective services, family violence program, rape crisis hotline)	53.1	68.9	44.8	60.3	50.6	44.9	35.5
Field experience in home care	53.1	65.6	46.3	71.8	70.9	52.8	31.3
Learned another language in order to improve communication with patients.	81.6	82	88.1	87.2	86.1	71.9	24.9
Learned the proper use of the interpreter when needed	79.6	70.5	76.1	78.2	87.3	80.9	84.3
Experience related to health disparities	83.7	78.7	83.6	91	88.6	83.1	79.0
Experience related to cultural awareness and cultural competence	79.6	77	86.6	89.7	89.9	87.6	74.9
Community-based research project	46.9	31.1	32.8	48.7	44.3	57.3	32.7
Field experience in nursing home care	26.5	65.6	40.3	50	45.6	38.2	29.0
Experience with a free clinic for the underserved population	77.6	77	89.6	89.7	93.7	89.9	74.1
Other	2	1.6	0	2.6	1.3	0.0	1.6
Number of respondents	49	61	67	78	79	89	16,126

**Guidance in Selecting Elective Experiences**

**15 Indicate whether you agree or disagree with the following statement:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>I received appropriate guidance in the selection of electives.</b>							
All Medical Schools	2019	3.2	8.5	16.5	43.8	28.0	15,972
PLFSOM	2019	4.6	8.0	8.0	43.7	35.6	87
PLFSOM	2018	1.3	3.8	10.3	44.9	39.7	78.0
PLFSOM	2017	0.0	5.3	18.7	50.7	25.3	75
PLFSOM	2016	0.0	4.5	11.9	53.7	29.9	67
PLFSOM	2015	0.0	0.0	18.3	43.3	38.3	60
PLFSOM	2014	2.0	10.2	26.5	32.7	28.6	49

**Diversity Experience**

**16 Based on your experiences, indicate whether you agree or disagree with the following statements:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Strongly disagree	Disagree	Neutral	Agree	Strongly agree	
<b>My knowledge or opinion was influenced or changed by becoming more aware of the perspectives of individuals from different backgrounds.</b>							
All Medical Schools	2019	0.6	1.7	7.9	43.2	46.6	16,025
PLFSOM	2019	2.2	3.4	5.6	40.4	48.3	89
PLFSOM	2018	0	2.5	13.9	41.8	41.8	79.0
PLFSOM	2017	1.3	1.3	9.0	46.2	42.3	78
PLFSOM	2016	0.0	0.0	7.5	46.3	46.3	67
PLFSOM	2015	1.6	1.6	13.1	45.9	37.7	61
PLFSOM	2014	2.1	4.2	4.2	62.5	27.1	48

**The diversity within my medical school class enhanced my training and skills to work with individuals from different backgrounds.**

All Medical Schools	2019	3.3	8.2	17.7	34.3	36.6	16,019
PLFSOM	2019	2.3	4.5	11.4	28.4	53.4	88
PLFSOM	2018	1.3	8.9	12.7	36.7	40.5	79.0
PLFSOM	2017	2.6	5.1	19.2	37.2	35.9	78
PLFSOM	2016	1.5	4.5	17.9	37.3	38.8	67
PLFSOM	2015	4.9	0.0	14.8	45.9	34.4	61
PLFSOM	2014	4.2	6.3	14.6	50.0	25.0	48

**GQ Learning Environment**

**Emotional Climate**

"The emotional climate subscale combines the responses of three items assessing a student's affective response to the learning environment. These questions ask to what extent [or, how often] the educational experience leads to a sense of achievement, valuing oneself, and confidence in one's academic abilities. The possible range of responses for the emotional climate subscale is 0 to 15. Higher scores are correlated with positive perceptions of the learning environment."

Emotional Climate		Reliability Estimate	Mean	Standard Deviation	Count
All Medical Schools	2019	0.9	9.6	3.3	15,875
PLFSOM	2019	1.0	9.8	3.5	89
PLFSOM	2018	1.0	10.6	3.0	78
PLFSOM	2017	1.0	10.5	2.9	75
PLFSOM	2016	0.9	10.9	2.8	66

**Student-Faculty Interaction**

"The emotional climate subscale combines the responses of three items assessing a student's affective response to the learning environment. These questions ask to what extent [or, how often] the educational experience leads to a sense of achievement, valuing oneself, and confidence in one's academic abilities. The possible range of responses for the emotional climate subscale is 0 to 15. Higher scores are correlated with positive perceptions of the learning environment."

Student-Faculty Interaction		Reliability Estimate	Mean	Standard Deviation	Count
All Medical Schools	2019	0.8	14.5	3.4	15,782
PLFSOM	2019	0.8	15.0	3.4	89
PLFSOM	2018	0.7	14.6	3	79
PLFSOM	2017	0.6	14.9	2.9	76
PLFSOM	2016	0.8	15.4	3.2	65

**Professional Behavior - Faculty**

**18** There are disconnects between what I am taught about professional behaviors/attitudes and what I see being demonstrated by faculty

	Year	Percentage of Respondents Selecting Each Rating						Count
		Never	Almost never	Sometimes	Fairly often	Very often	Always	
All Medical Schools	2019	7.6	35.6	35.0	9.7	8.3	3.8	15,923
PLFSOM	2019	11.2	32.6	31.5	7.9	12.4	4.5	89
PLFSOM	2018	8.9	38	32.9	7.6	10.1	2.5	79
PLFSOM	2017	14.7	33.3	20.0	10.7	13.3	8.0	75
PLFSOM	2016	7.6	39.4	31.8	10.6	6.1	4.5	66

**19 Please rate how often the following professional behaviors/attitudes are demonstrated by your medical school's faculty.**

	Year	Percentage of Respondents Selecting Each Rating						Count
		Never	Almost Never	Sometimes	Fairly often	Very often	Always	
<b>Respecting patient confidentiality</b>								
All Medical Schools	2019	0.1	0.1	1.7	6.8	36.6	54.7	15,869
PLFSOM	2019	0.0	1.1	4.5	4.5	28.1	61.8	89
PLFSOM	2018	0.0	0.0	2.5	6.3	29.1	62.0	79
PLFSOM	2017	0.0	0.0	0.0	10.4	36.4	53.2	77
PLFSOM	2016	0.0	0.0	0.0	9.1	42.4	48.5	66
<b>Using professional language/avoiding derogatory language</b>								
All Medical Schools	2019	0.6	1.6	3.8	12.8	47.3	33.9	15,872
PLFSOM	2019	1.1	2.2	4.5	12.4	47.2	32.6	89
PLFSOM	2018	1.3	2.5	5.1	20.3	38.0	32.9	79
PLFSOM	2017	0.0	0.0	3.9	11.7	46.8	37.7	77
PLFSOM	2016	0.0	1.5	9.1	19.7	40.9	28.8	66
<b>Being respectful of house staff and other physicians</b>								
All Medical Schools	2019	0.1	0.3	3.4	14.4	48.9	32.9	15,863
PLFSOM	2019	1.1	0.0	3.4	18.0	42.7	34.8	89
PLFSOM	2018	0.0	0.0	8.9	16.5	39.2	35.4	79
PLFSOM	2017	0.0	0.0	2.6	11.7	49.4	36.4	77
PLFSOM	2016	0.0	0.0	6.1	19.7	43.9	30.3	66
<b>Respecting diversity</b>								
All Medical Schools	2019	0.2	0.6	4.6	13.5	40.9	40.2	15,855
PLFSOM	2019	1.1	0.0	2.3	14.8	37.5	44.3	88
PLFSOM	2018	0.0	1.3	2.5	16.5	34.2	45.6	79
PLFSOM	2017	0.0	0.0	5.2	9.1	40.3	45.5	77
PLFSOM	2016	0.0	0.0	6.1	9.1	42.4	42.4	66
<b>Being respectful of other health professions</b>								
All Medical Schools	2019	0.1	0.4	4.9	16.7	45.7	32.3	15,828
PLFSOM	2019	0.0	0.0	6.7	15.7	39.3	38.2	89
PLFSOM	2018	1.3	1.3	6.4	12.8	42.3	35.9	78
PLFSOM	2017	0.0	0.0	3.9	16.9	41.6	37.7	77
PLFSOM	2016	0.0	0.0	9.1	13.6	39.4	37.9	66
<b>Being respectful of other specialties</b>								
All Medical Schools	2019	0.1	1.0	9.6	26.2	43.5	19.6	15,871
PLFSOM	2019	0.0	1.1	9.0	25.8	41.6	22.5	89
PLFSOM	2018	0.0	1.3	19.0	19.0	38.0	22.8	79
PLFSOM	2017	0.0	0.0	11.7	27.3	36.4	24.7	77
PLFSOM	2016	0.0	1.5	9.1	28.8	37.9	22.7	66
<b>Providing direction and constructive feedback</b>								
All Medical Schools	2019	0.2	1.5	11.6	24.8	41.5	20.4	15,860
PLFSOM	2019	1.1	1.1	10.2	15.9	47.7	23.9	88
PLFSOM	2018	0.0	0.0	13.9	25.3	40.5	20.3	79

**19 Please rate how often the following professional behaviors/attitudes are demonstrated by your medical school's faculty.**

	Year	Percentage of Respondents Selecting Each Rating						Count
		Never	Almost Never	Sometimes	Fairly often	Very often	Always	
PLFSOM	2017	0.0	1.3	3.9	22.1	44.2	28.6	77
PLFSOM	2016	0.0	3.0	9.1	15.2	47.0	25.8	66
<b>Showing respectful interaction with students</b>								
All Medical Schools	2019	0.1	0.4	6.0	19.3	49.8	24.4	15,859
PLFSOM	2019	1.1	0.0	5.6	22.5	49.4	21.3	89
PLFSOM	2018	0.0	0.0	8.9	10.1	57.0	24.1	79
PLFSOM	2017	0.0	0.0	3.9	15.6	45.5	35.1	77
PLFSOM	2016	0.0	0.0	4.6	15.4	50.8	29.2	65
<b>Showing empathy and compassion</b>								
All Medical Schools	2019	0.1	0.4	5.9	19.8	49.7	24.0	15,847
PLFSOM	2019	0.0	1.1	9.1	17.0	50.0	22.7	88
PLFSOM	2018	0.0	0.0	6.3	21.5	49.4	22.8	79
PLFSOM	2017	0.0	0.0	6.7	21.3	40.0	32.0	75
PLFSOM	2016	0.0	1.5	9.1	18.2	50.0	21.2	66
<b>Being respectful of patients' dignity and autonomy</b>								
All Medical Schools	2019	0.1	0.3	3.9	14.9	46.5	34.3	15,816
PLFSOM	2019	0.0	2.2	3.4	12.4	44.9	37.1	89
PLFSOM	2018	0.0	1.3	5.1	10.3	50.0	33.3	78
PLFSOM	2017	0.0	0.0	2.6	17.1	44.7	35.5	76
PLFSOM	2016	0.0	0.0	7.6	15.2	43.9	33.3	66
<b>Actively listened and showed interest in patients</b>								
All Medical Schools	2019	0.1	0.3	4.3	17.5	51.9	26.0	15,864
PLFSOM	2019	0.0	1.1	2.2	18.0	52.8	25.8	89
PLFSOM	2018	0.0	0.0	6.3	19.0	51.9	22.8	79
PLFSOM	2017	0.0	0.0	5.2	22.1	42.9	29.9	77
PLFSOM	2016	0.0	0.0	7.7	21.5	41.5	29.2	65
<b>Taking time and effort to explain information to patients</b>								
All Medical Schools	2019	0.1	0.7	6.9	21.5	47.9	22.9	15,861
PLFSOM	2019	0.0	2.3	9.1	19.3	51.1	18.2	88
PLFSOM	2018	0.0	0.0	11.4	31.6	35.4	21.5	79
PLFSOM	2017	0.0	1.3	13.0	13.0	44.2	28.6	77
PLFSOM	2016	0.0	0.0	12.1	22.7	47.0	18.2	66
<b>Advocating appropriately on behalf of his/her patients</b>								
All Medical Schools	2019	0.1	0.5	5.2	16.0	48.8	29.4	15,852
PLFSOM	2019	0.0	1.1	6.7	19.1	49.4	23.6	89
PLFSOM	2018	0.0	0.0	7.6	20.3	44.3	27.8	79
PLFSOM	2017	0.0	0.0	11.7	14.3	41.6	32.5	77
PLFSOM	2016	0.0	0.0	9.1	16.7	50.0	24.2	66
<b>Resolving conflicts in ways that respect the dignity of all involved</b>								
All Medical Schools	2019	0.1	0.4	5.0	16.8	49.7	28.0	15,827

**19 Please rate how often the following professional behaviors/attitudes are demonstrated by your medical school's faculty.**

	Year	Percentage of Respondents Selecting Each Rating						Count
		Never	Almost Never	Sometimes	Fairly often	Very often	Always	
PLFSOM	2019	0.0	0.0	7.9	16.9	48.3	27.0	89
PLFSOM	2018	0.0	0.0	5.1	20.3	45.6	29.1	79
PLFSOM	2017	0.0	1.3	5.2	19.5	41.6	32.5	77
PLFSOM	2016	0.0	0.0	4.5	19.7	53.0	22.7	66

**Mistreatment Policy Awareness & Reporting**

**39 Are you aware that your school has policies regarding the mistreatment of medical students?**

	PLFSOM						All Schools 2019
	2014	2015	2016	2017	2018	2019	
Yes	100	96.7	100	100	100	97.6	97.2
No	0.0	3.3	0.0	0.0	0.0	2.4	2.8
Number of respondents	48	60	63	77	76	85	15,658

**40 Do you know the procedures at your school for reporting the mistreatment of medical students?**

	PLFSOM						All Schools 2019
	2014	2015	2016	2017	2018	2019	
Yes	89.6	98.3	93.7	96.1	96.1	95.3	87.8
No	10.4	1.7	6.3	3.9	3.9	4.7	12.2
Number of respondents	48	60	63	76	76	85	15,648

**Personal Experiences with Negative Behaviors**

**39 During medical school, how frequently have you:**

	Year	Percentage of Respondents Selecting Each Rating				Count
		Never	Once	Occasionally	Frequently	
<b>Been publicly embarrassed?</b>						
All Medical Schools	2019	57.1	20.4	21.1	1.4	15,631
PLFSOM	2019	69.4	15.3	14.1	1.2	85
PLFSOM	2018	68.8	19.5	11.7	0.0	77
PLFSOM	2017	64.9	22.1	11.7	1.3	77
PLFSOM	2016	66.7	19.0	14.3	0.0	63
PLFSOM	2015	65.5	15.5	17.2	1.7	58
PLFSOM	2014	67.4	15.2	17.4	0.0	46
<b>Been publicly humiliated?</b>						
All Medical Schools	2019	77.3	13.1	8.8	0.8	15,623
PLFSOM	2019	81.2	10.6	7.1	1.2	85
PLFSOM	2018	78.9	13.2	7.9	0.0	76
PLFSOM	2017	81.8	15.6	2.6	0.0	77
PLFSOM	2016	84.1	11.1	4.8	0.0	63



**39 During medical school, how frequently have you:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Never	Once	Occasionally	Frequently		
PLFSOM	2015	81.0	8.6	8.6	1.7	58	
PLFSOM	2014	80.0	11.1	8.9	0.0	45	
<b>Been threatened with physical harm?</b>							
All Medical Schools	2019	98.7	1.0	0.3	0.1	15,623	
PLFSOM	2019	96.5	3.5	0.0	0.0	85	
PLFSOM	2018	100	0.0	0.0	0.0	75	
PLFSOM	2017	100	0.0	0.0	0.0	77	
PLFSOM	2016	100	0.0	0.0	0.0	63	
PLFSOM	2015	96.6	1.7	1.7	0.0	58	
PLFSOM	2014	97.9	2.1	0.0	0.0	47	
<b>Been physically harmed?</b>							
All Medical Schools	2019	98.2	1.5	0.2	0.1	15,616	
PLFSOM	2019	97.6	1.2	1.2	0.0	85	
PLFSOM	2018	98.7	1.3	0.0	0.0	77	
PLFSOM	2017	100	0.0	0.0	0.0	76	
PLFSOM	2016	100	0.0	0.0	0.0	63	
PLFSOM	2015	98.3	1.7	0.0	0.0	58	
PLFSOM	2014	100	0.0	0.0	0.0	47	
<b>Been required to perform personal services?</b>							
All Medical Schools	2019	95.0	3.5	1.4	0.1	15,627	
PLFSOM	2019	96.5	2.4	1.2	0.0	85	
PLFSOM	2018	92.2	6.5	0.0	1.3	77	
PLFSOM	2017	92.2	6.5	1.3	0.0	77	
PLFSOM	2016	92.1	4.8	1.6	1.6	63	
PLFSOM	2015	93.1	5.2	1.7	0.0	58	
PLFSOM	2014	93.6	6.4	0.0	0.0	47	
<b>Been subjected to unwanted sexual advances?</b>							
All Medical Schools	2019	95.2	2.8	1.8	0.2	15,624	
PLFSOM	2019	89.3	4.8	4.8	1.2	84	
PLFSOM	2018	97.4	2.6	0.0	0.0	77	
PLFSOM	2017	97.4	2.6	0.0	0.0	77	
PLFSOM	2016	98.4	1.6	0.0	0.0	63	
PLFSOM	2015	98.3	1.7	0.0	0.0	58	
PLFSOM	2014	91.5	8.5	0.0	0.0	47	
<b>Been asked to exchange sexual favors for grades or other rewards?</b>							
All Medical Schools	2019	99.7	0.2	0.1	0.1	15,626	
PLFSOM	2019	96.5	3.5	0.0	0.0	85	
PLFSOM	2018	100	0.0	0.0	0.0	77	
PLFSOM	2017	100	0.0	0.0	0.0	77	
PLFSOM	2016	100	0.0	0.0	0.0	63	
PLFSOM	2015	100	0.0	0.0	0.0	58	
PLFSOM	2014	100	0.0	0.0	0.0	46	
<b>Been denied opportunities for training or rewards based on gender?</b>							

**39 During medical school, how frequently have you:**

	Year	Percentage of Respondents Selecting Each Rating					Count
		Never	Once	Occasionally	Frequently		
All Medical Schools	2019	93.8	3.0	2.8	0.5	15,606	
PLFSOM	2019	91.7	4.8	2.4	1.2	84	
PLFSOM	2018	93.5	3.9	2.6	0.0	77	
PLFSOM	2017	94.8	3.9	1.3	0.0	77	
PLFSOM	2016	96.8	1.6	1.6	0.0	63	
PLFSOM	2015	93.1	1.7	5.2	0.0	58	
PLFSOM	2014	95.7	2.2	2.2	0.0	46	
<b>Been subjected to offensive sexist remarks/names?</b>							
All Medical Schools	2019	84.2	6.9	8.2	0.8	15,595	
PLFSOM	2019	85.9	8.2	4.7	1.2	85	
PLFSOM	2018	90.9	5.2	3.9	0.0	77	
PLFSOM	2017	87.0	6.5	5.2	1.3	77	
PLFSOM	2016	85.7	7.9	4.8	1.6	63	
PLFSOM	2015	93.1	3.4	3.4	0.0	58	
PLFSOM	2014	80.9	8.5	8.5	2.1	47	
<b>Received lower evaluations or grades solely because of gender rather than performance?</b>							
All Medical Schools	2019	92.9	4.5	2.2	0.4	15,606	
PLFSOM	2019	95.3	2.4	1.2	1.2	85	
PLFSOM	2018	97.4	2.6	0.0	0.0	77	
PLFSOM	2017	98.7	1.3	0.0	0.0	77	
PLFSOM	2016	95.2	4.8	0.0	0.0	63	
PLFSOM	2015	96.6	1.7	1.7	0.0	58	
PLFSOM	2014	93.6	2.1	4.3	0.0	47	
<b>Been denied opportunities for training or rewards based on race or ethnicity?</b>							
All Medical Schools	2019	96.3	1.5	1.5	0.6	15,614	
PLFSOM	2019	94.1	2.4	2.4	1.2	85	
PLFSOM	2018	98.7	0.0	0.0	1.3	77	
PLFSOM	2017	98.7	0.0	1.3	0.0	77	
PLFSOM	2016	100	0.0	0.0	0.0	63	
PLFSOM	2015	96.6	1.7	1.7	0.0	58	
PLFSOM	2014	100	0.0	0.0	0.0	47	
<b>Been subjected to racially or ethnically offensive remarks/names?</b>							
All Medical Schools	2019	91.5	4.1	3.9	0.5	15,610	
PLFSOM	2019	97.6	0.0	1.2	1.2	85	
PLFSOM	2018	90.9	7.8	0.0	1.3	77	
PLFSOM	2017	97.4	0.0	1.3	1.3	77	
PLFSOM	2016	95.2	0.0	3.2	1.6	63	
PLFSOM	2015	94.8	1.7	3.4	0.0	58	
PLFSOM	2014	87.2	2.1	10.6	0.0	47	
<b>Received lower evaluations or grades solely because of race or ethnicity rather than performance?</b>							
All Medical Schools	2019	96.5	1.7	1.3	0.4	15,604	
PLFSOM	2019	95.3	1.2	2.4	1.2	85	
PLFSOM	2018	96.1	2.6	1.3	0.0	77	

**39 During medical school, how frequently have you:**

	Year	Percentage of Respondents Selecting Each Rating				Count
		Never	Once	Occasionally	Frequently	
PLFSOM	2017	97.4	2.6	0.0	0.0	77
PLFSOM	2016	100	0.0	0.0	0.0	63
PLFSOM	2015	100	0.0	0.0	0.0	58
PLFSOM	2014	100	0.0	0.0	0.0	47
<b>Been denied opportunities for training or rewards based on sexual orientation?</b>						
All Medical Schools	2019	99.3	0.3	0.3	0.1	15,606
PLFSOM	2019	96.5	1.2	1.2	1.2	85
PLFSOM	2018	98.7	0.0	1.3	0.0	77
PLFSOM	2017	100	0.0	0.0	0.0	77
PLFSOM	2016	100	0.0	0.0	0.0	63
PLFSOM	2015	100	0.0	0.0	0.0	58
PLFSOM	2014	100	0.0	0.0	0.0	47
<b>Been subjected to offensive remarks/names related to sexual orientation?</b>						
All Medical Schools	2019	98.0	0.9	1.0	0.1	15,608
PLFSOM	2019	95.3	0.0	3.5	1.2	85
PLFSOM	2018	98.7	0.0	1.3	0.0	77
PLFSOM	2017	1.3	0.0	0.0	34.6	78
PLFSOM	2016	0.0	0.0	0.0	25.4	67
PLFSOM	2015	0.0	0.0	4.9	24.6	61
PLFSOM	2014	0.0	0.0	0.0	51.0	49
<b>Received lower evaluations or grades solely because of sexual orientation rather than performance?</b>						
All Medical Schools	2019	99.4	0.3	0.2	0.1	15,605
PLFSOM	2019	97.6	0.0	1.2	1.2	85
PLFSOM	2018	98.7	0.0	1.3	0.0	77
PLFSOM	2017	1.3	0.0	5.1	30.8	78
PLFSOM	2016	0.0	0.0	0.0	35.8	67
PLFSOM	2015	0.0	0.0	6.6	37.7	61
PLFSOM	2014	0.0	2.0	0.0	51.0	49
<b>Been subjected to negative or offensive behavior(s) based on your personal beliefs or personal characteristics other than your gender, race/ethnicity, or sexual orientation?</b>						
All Medical Schools	2019	92.4	3.6	3.4	0.6	15,597
PLFSOM	2019	92.9	2.4	3.5	1.2	85
PLFSOM	2018	90.9	6.5	2.6	0.0	77
PLFSOM	2017	90.9	5.2	3.9	0.0	77
PLFSOM	2016	96.8	0.0	1.6	1.6	63

**Source of Negative Behaviors**

Please indicate below which person(s) engaged in the behavior that was directed at you. Check all that apply.

	PLFSOM					All Schools
	2015	2016	2017	2018	2019	2019
Preclerkship Faculty	1.7	0.0	0.0	1.3	3.5	2.6
Clerkship Faculty (class)	1.7	6.3	2.6	1.3	2.4	2.5
Clerkship Faculty (Clinical)	8.6	6.3	14.3	16.9	15.3	20.4
Resident/Inter	15.5	14.3	15.6	14.3	12.9	14.2
Nurse	1.7	1.6	2.6	3.9	4.7	4.5
Administrator	1.7	0.0	0.0	1.3	4.7	1.6
Other Institution Employee	3.4	1.6	1.3	1.3	2.4	4.8
Student	5.2	3.2	5.2	3.9	4.7	5.9
TOTAL	58	63	77	77	85	15,638

## Graduated Student Surveys

The surveys of graduates and their program directors are based on the 13 entrustable activities that “all entering residents should be expected to perform on day 1 of residency without direct supervision, regardless of specialty.”[10] The thirteen core EPAs are:

- EPA 1: Gather a history and perform a physical examination
- EPA 2: Prioritize a differential diagnosis following a clinical encounter
- EPA 3: Recommend and interpret common diagnostic and screening tests
- EPA 4: Enter and discuss orders and prescriptions
- EPA 5: Document a clinical encounter in the patient record
- EPA 6: Provide an oral presentation of a clinical encounter
- EPA 7: Form clinical questions and retrieve evidence to advance patient care
- EPA 8: Give or receive a patient handover to transition care responsibility
- EPA 9: Collaborate as a member of an interprofessional team
- EPA 10: Recognize a patient requiring urgent or emergent care and initiate evaluation and Management
- EPA 11: Obtain informed consent for tests and/or procedures
- EPA 12: Perform general procedures of a physician
- EPA 13: Identify system failures and contribute to a culture of safety and improvement

In addition, graduates are asked about their satisfaction with the school and program directors are asked about the MSPE. The AAMC has mapped the EPAs to the eight competency domains as:

Table 114: AAMC Mapping of EPAs to PGOs

AAMC Mapping of EPAs by Program Goals	Patient Care	Knowledge for Practice	Practice Based Learning & Improvement	Interpersonal and Communication Skills	Professionalism	Systems Based Practice	Interprofessional Collaboration	Personal & Professional Development
EPA 1:	✓	✓		✓	✓			
EPA 2:	✓	✓	✓	✓				✓
EPA 3:	✓	✓	✓			✓		
EPA 4:	✓	✓	✓	✓		✓		
EPA 5:	✓			✓	✓	✓		
EPA 6:	✓		✓	✓	✓			✓
EPA 7:		✓	✓					
EPA 8:	✓		✓	✓	✓			
EPA 9:				✓	✓	✓	✓	
EPA 10:	✓			✓				
EPA 11:	✓			✓	✓	✓		✓
EPA 12:	✓			✓	✓	✓		✓
EPA 13:		✓	✓	✓	✓	✓		

## **TTUHSC El Paso - PLFSOM Graduate - Director Surveys**

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### *Data Instrument*

The data is collected using surveys delivered via Qualtrics survey platform. Survey items focus on the core entrustable activities expected of an incoming intern with an additional overall measure of performance/preparation. Both sets of respondents had the opportunity to provide narrative feedback as well.

### *Data collection*

Methodology has been modified slightly from the first data collection in an effort to increase response rates.

For the class of 2014, data collection began in May and the survey was left open one month. An email was sent from the Associate Dean for Medical Education informing the recipients that the survey was being sent out and that we greatly appreciate individuals taking the time to complete the survey.

For the class of 2015, data collection began in February and the survey was left open 'till June. The notification process began with an initial email being sent directly from Qualtrics, with a follow-up email from the Director of Assessment & Evaluation and the Associate Dean for Medical Education.

For the class of 2016, a modified Dillman approach was adopted [11]. One month before survey launch, a letter was sent to the program directors informing them that the survey was coming and requesting confirmation of the email address at which the survey would be received. On the day of the survey launch, letters with the survey printed on the back were sent out to all residency program directors informing them they would also receive an emailed link to the survey, in case this was more convenient to them. Enclosed with each letter was a gourmet tea and coffee sample as a thank you for their time and feedback. The survey was left open for the same duration as 2015. This resulted in an increase in the response rate, with many directors emailing or mailing scans of the hardcopy survey.

### *Graduated Student Survey Results*

Polling of graduates and their program directors began with the 1<sup>st</sup> graduating class of TTUHSC El Paso - PLFSOM's. In the 1<sup>st</sup> year, the response rate was too low to make the results meaningful. Beginning with the class of 2014 the survey was redesigned to reflect the entrustable activities for entering interns.

## Residency Program Director Survey Results

Table 115: Results of Survey of Program Directors

EPA	Question	Answer	Percent of Respondents			
			C2015 (N=16)	C2016 (N= 46)	C2017 (N=49)	C2018 (N=37)
NA	This resident's standing in the program compared to others in his/her cohort?	Superior	15.8%	30.4%	30.6%	32.4%
		About the same	79.0%	56.5%	55.1%	64.9%
		Worse	5.3%	13.0%	14.3%	2.7%
1	Gather a history and perform a physical examination.	Superior	5.3%	32.6%	20.4%	32.4%
		About the same	84.2%	58.7%	63.3%	64.9%
		Worse	10.5%	8.7%	16.3%	2.7%
2	Prioritize a differential diagnosis following a clinical encounter.	Superior	10.5%	26.1%	20.4%	27.0%
		About the same	79.0%	56.5%	65.3%	59.5%
		Worse	10.5%	17.4%	14.3%	13.5%
3	Recommend and interpret common diagnostic and screening tests.	Superior	5.3%	19.6%	24.5%	21.6%
		About the same	89.5%	73.9%	63.3%	73.0%
		Worse	5.3%	6.5%	12.2%	5.4%
4	Enter and discuss orders and prescriptions.	Superior	5.3%	21.7%	20.4%	27.0%
		About the same	89.5%	73.9%	71.4%	70.3%
		Worse	5.3%	4.3%	8.2%	2.7%
5	Document a clinical encounter in the patient record.	Superior	5.3%	28.3%	30.6%	32.4%
		About the same	84.2%	60.9%	57.1%	64.9%
		Worse	10.5%	10.9%	12.2%	2.7%
6	Provide an oral presentation of a clinical encounter.	Superior	15.8%	28.3%	18.4%	29.7%
		About the same	68.4%	60.9%	67.3%	62.2%
		Worse	15.8%	10.9%	14.3%	8.1%
7	Form clinical questions and retrieve evidence to advance patient care.	Superior	5.3%	21.7%	14.3%	24.3%
		About the same	89.5%	67.4%	75.5%	70.3%
		Worse	5.3%	10.9%	10.2%	5.4%
8	Give or receive a patient handover to transition care responsibility.	Superior	5.3%	26.1%	36.7%	21.6%
		About the same	89.5%	67.4%	53.1%	75.7%
		Worse	5.3%	6.5%	10.2%	2.7%
9	Collaborate as a member of an interprofessional team.	Superior	36.8%	41.3%	14.3%	43.2%
		About the same	52.6%	56.5%	75.5%	54.1%
		Worse	10.5%	2.2%	10.2%	2.7%
10	Recognize a patient requiring urgent or emergent care and initiate evaluation and management.	Superior	15.8%	23.9%	12.2%	29.7%
		About the same	79.0%	67.4%	83.7%	62.2%
		Worse	5.3%	8.7%	4.1%	8.1%
11	Obtain informed consent for tests and/or procedures.	Superior	5.3%	21.7%	10.2%	18.9%
		About the same	0.0%	73.9%	85.7%	78.4%
		Worse	94.7%	4.3%	4.1%	2.7%

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EPA	Question	Answer	Percent of Respondents			
			C2015 (N=16)	C2016 (N= 46)	C2017 (N=49)	C2018 (N=37)
12	Perform general procedures of a physician.	Superior	0.0%	23.9%	10.2%	21.6%
		About the same	100.0%	76.1%	83.7%	75.7%
		Worse	0.0%	0.0%	6.1%	2.7%
13	Identify system failures and contribute to a culture of safety and improvement.	Superior	5.3%	17.4%	34.7%	18.9%
		About the same	94.7%	80.4%	53.1%	75.7%
		Worse	0.0%	2.2%	12.2%	5.4%
NA	The MSPE accurately reflected this resident's abilities.	Strongly Agree	5.3%	23.9%	14.3%	29.7%
		Agree	73.7%	54.3%	63.3%	59.5%
		Disagree	0.0%	8.7%	6.1%	0.0%
		Strongly disagree	10.5%	0.0%	4.1%	0.0%
		Not Sure	10.5%	13.0%	12.2%	10.8%



## Graduate Survey Results

Table 116: Survey of Graduates Results

EPA Association	Question	Answer	Percent Responding			
			C2015 (N=22)	C2016 (N=24)	C2017 (N=35)	C2018 (N=53)
1	Gather a history and perform a physical examination	Strongly Agree	46.0%	58.3%	68.6%	64.2%
		Agree	50.0%	33.3%	28.6%	24.5%
		Slightly Agree	5.0%	8.3%	2.9%	7.5%
		Slightly Disagree	0.0%	0.0%	0.0%	0.0%
		Disagree	0.0%	0.0%	0.0%	3.8%
		Strongly Disagree	0.0%	0.0%	0.0%	0.0%
2	Prioritize a differential diagnosis following a clinical encounter	Strongly Agree	23.0%	37.5%	34.3%	28.3%
		Agree	36.0%	54.2%	51.4%	49.1%
		Slightly Agree	27.0%	8.3%	11.4%	17.0%
		Slightly Disagree	9.0%	0.0%	2.9%	3.8%
		Disagree	5.0%	0.0%	0.0%	1.9%
		Strongly Disagree	0.0%	0.0%	0.0%	0.0%
3	Recommend and interpret common diagnostic and screening tests	Strongly Agree	18.0%	37.5%	28.6%	28.3%
		Agree	46.0%	45.8%	60.0%	50.9%
		Slightly Agree	23.0%	16.7%	11.4%	13.2%
		Slightly Disagree	9.0%	0.0%	0.0%	5.7%
		Disagree	5.0%	0.0%	0.0%	1.9%
		Strongly Disagree	0.0%	0.0%	0.0%	0.0%
4	Enter and discuss orders and prescriptions	Strongly Agree	5.0%	20.8%	11.4%	15.1%
		Agree	18.0%	16.7%	14.3%	18.9%
		Slightly Agree	36.0%	29.2%	34.3%	30.2%
		Slightly Disagree	9.0%	16.7%	8.6%	15.1%
		Disagree	18.0%	8.3%	20.0%	7.5%
		Strongly Disagree	14.0%	8.3%	11.4%	13.2%
5	Document a clinical encounter in the patient record	Strongly Agree	50.0%	33.3%	25.7%	35.8%
		Agree	32.0%	25.0%	28.6%	34.0%
		Slightly Agree	14.0%	16.7%	31.4%	9.4%

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EPA Association	Question	Answer	Percent Responding			
			C2015 (N=22)	C2016 (N=24)	C2017 (N=35)	C2018 (N=53)
		Slightly Disagree	0.0%	8.3%	2.9%	11.3%
		Disagree	5.0%	8.3%	5.7%	1.9%
		Strongly Disagree	0.0%	8.3%	5.7%	7.5%
6	Provide an oral presentation of a clinical encounter	Strongly Agree	46.0%	45.8%	45.7%	47.2%
		Agree	32.0%	41.7%	37.1%	35.8%
		Slightly Agree	14.0%	4.2%	17.1%	15.1%
		Slightly Disagree	9.0%	0.0%	0.0%	1.9%
		Disagree	0.0%	8.3%	0.0%	0.0%
		Strongly Disagree	0.0%	0.0%	0.0%	0.0%
7	Form clinical questions and retrieve evidence to advance patient care.	Strongly Agree	14.0%	37.5%	34.3%	39.6%
		Agree	46.0%	50.0%	45.7%	39.6%
		Slightly Agree	32.0%	8.3%	14.3%	11.3%
		Slightly Disagree	5.0%	4.2%	2.9%	7.5%
		Disagree	0.0%	0.0%	2.9%	1.9%
		Strongly Disagree	5.0%	0.0%	0.0%	0.0%
8	Give or receive a patient handover to transition care responsibility.	Strongly Agree	9.0%	16.7%	28.6%	22.6%
		Agree	18.0%	45.8%	25.7%	30.2%
		Slightly Agree	23.0%	12.5%	22.9%	24.5%
		Slightly Disagree	23.0%	16.7%	11.4%	3.8%
		Disagree	9.0%	4.2%	11.4%	11.3%
		Strongly Disagree	18.0%	4.2%	0.0%	7.5%
9	Collaborate as a member of an interprofessional team.	Strongly Agree	41.0%	50.0%	62.9%	50.9%
		Agree	27.0%	37.5%	31.4%	39.6%
		Slightly Agree	23.0%	4.2%	0.0%	3.8%
		Slightly Disagree	0.0%	4.2%	0.0%	1.9%
		Disagree	9.0%	4.2%	5.7%	3.8%
		Strongly Disagree	0.0%	0.0%	0.0%	0.0%
10	Recognize a patient requiring urgent or	Strongly Agree	23.0%	45.8%	48.6%	32.1%
		Agree	50.0%	37.5%	42.9%	47.2%

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EPA Association	Question	Answer	Percent Responding			
			C2015 (N=22)	C2016 (N=24)	C2017 (N=35)	C2018 (N=53)
	emergent care and initiate evaluation and management.	Slightly Agree	27.0%	8.3%	8.6%	13.2%
		Slightly Disagree	0.0%	0.0%	0.0%	1.9%
		Disagree	0.0%	8.3%	0.0%	5.7%
		Strongly Disagree	0.0%	0.0%	0.0%	0.0%
11	Obtain informed consent for tests and/or procedures.	Strongly Agree	5.0%	8.3%	34.3%	18.9%
		Agree	46.0%	33.3%	25.7%	37.7%
		Slightly Agree	27.0%	33.3%	25.7%	18.9%
		Slightly Disagree	5.0%	12.5%	5.7%	13.2%
		Disagree	14.0%	0.0%	8.6%	7.5%
		Strongly Disagree	5.0%	12.5%	0.0%	3.8%
12	Perform general procedures of a physician.	Strongly Agree	14.0%	12.5%	31.4%	18.9%
		Agree	59.0%	50.0%	45.7%	35.8%
		Slightly Agree	18.0%	20.8%	17.1%	28.3%
		Slightly Disagree	5.0%	12.5%	2.9%	9.4%
		Disagree	0.0%	0.0%	2.9%	5.7%
		Strongly Disagree	5.0%	4.2%	0.0%	1.9%
13	Identify system failures and contribute to a culture of safety and improvement.	Strongly Agree	23.0%	16.7%	40.0%	22.6%
		Agree	46.0%	66.7%	40.0%	50.9%
		Slightly Agree	18.0%	12.5%	17.1%	20.8%
		Slightly Disagree	5.0%	0.0%	2.9%	1.9%
		Disagree	9.0%	4.2%	0.0%	1.9%
		Strongly Disagree	0.0%	0.0%	0.0%	1.9%
NA	Overall, I was prepared to assume the roles and responsibilities of a first year resident in my specialty.	Strongly Agree	24.0%	29.2%	34.3%	39.6%
		Agree	38.0%	45.8%	54.3%	35.8%
		Slightly Agree	14.0%	8.3%	8.6%	15.1%
		Slightly Disagree	10.0%	0.0%	2.9%	3.8%
		Disagree	10.0%	12.5%	0.0%	5.7%
		Strongly Disagree	5.0%	4.2%	0.0%	0.0%
NA		Strongly Agree	52.0%	58.3%	40.0%	49.1%

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EPA Association	Question	Answer	Percent Responding			
			C2015 (N=22)	C2016 (N=24)	C2017 (N=35)	C2018 (N=53)
	If I had it to do over again, I would attend PLFSOM for my medical school training.	Agree	29.0%	25.0%	57.1%	35.8%
		Slightly Agree	10.0%	12.5%	2.9%	11.3%
		Slightly Disagree	10.0%	0.0%	0.0%	1.9%
		Disagree	0.0%	0.0%	0.0%	0.0%
		Strongly Disagree	0.0%	4.2%	0.0%	1.9%
		Strongly Agree	52.0%	58.3%	62.9%	43.4%
NA	I am happy with the career choice I made.	Agree	33.0%	25.0%	34.3%	41.5%
		Slightly Agree	10.0%	4.2%	2.9%	11.3%
		Slightly Disagree	5.0%	0.0%	0.0%	3.8%
		Disagree	0.0%	12.5%	0.0%	0.0%
		Strongly Disagree	0.0%	0.0%	0.0%	0.0%
		Strongly Agree	52.0%	58.3%	62.9%	43.4%

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