

## Program-Level Assessment: Annual Report

Program Name (no acronyms): Doctor of Medicine

Department: Curricular Affairs

Degree or Certificate Level: MD

College/School:

Date (Month/Year): January 11, 2024

Assessment Contact: Dr. Neal Weber

In what year was the data upon which this report is based collected? cTc /TT4.9 (t4 640e)-5.Y(D)5-4.329 (t)1 (c)1.1 (t:)Jf06f0 Tc  
Which of the program's student learning outcomes were assessed in TJ0.003 Tw 8.424 0 Td(ry)6.3 ( an)2.2 (d)2.3 ( p)2.3 (t)2 (r)  
or c) at any other off-campus location.

All courses are offered only at Saint Louis University School of Medicine.

By clinical, and basic sciences. Family Medicine, Internal Medicine, Board of Medical Examiners (NBME), Pediatrics,

- Below 5th percentile = Fail on the 2nd attempt at the NBME

All clerkships include student performance evaluations based on observations by faculty and residents. Additional assessments vary by clerkship, based on the specifics of the discipline. For example, the "required clinical experiences" are lists of patient types and/or conditions specific to the discipline that each student will experience during that clerkship. Grades of Honors (40%), Near Honors (30%), Pass (40%), Fail are calculated for each rotation of the clerkship. Grades and distributions are assigned by the clerkship directors and monitored by the assistant dean for program evaluation and assessment.

The table below lists the clinical assessments used by each clerkship director to determine the final clinical grade for each student.

Clerkship	Clinical Assessments
Surgery (S-301)	Student performance evaluations- faculty and residents Required clinical experiences Professionalism Operative notes History & physical Small group presentation Objective structured clinical examination (OSCE)

### 3. Assessment Methods: Evaluation Process

What process was used to evaluate the artifacts of student learning, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and **include them in/with this report document** (please do not just refer to the assessment plan).

Our clerkship directors are physicians and the subject matter experts in their courses. They identify new instructional methods and assessments, review their utility and make decisions about the use of new methodologies in their courses.

Student course evaluations provide feedback to the course directors and the curriculum deans. uT7. dtg1 (u)-0.0.7 rSt/TT0 1 TF0

What have you learned from these results? What does the data tell you? Address both a) learning gaps and possible curricular or pedagogical remedies, and b) strengths of curriculum and pedagogy.

The data support our contention that the skills involved in being successful on multiple-choice examinations and those required for success in the clinic require separate assessments, different teaching and learning modalities, and different remediation plans for students who demonstrate difficulties in either area.

**6. Closing the Loop: Dissemination and Use of Current Assessment Findings**

**A.** When and how did

residents. He was the co-director of the emergency medicine clerkship and director of a number of student electives. Among his graduate medical education roles, he was the Director of Resident Performance Improvement and Oral Board P(n)2.3 (t)-3 ( P)5.2 st Pirec

**IMPORTANT:** Please submit any assessment tools (e.g., artifact prompts, rubrics) with this report as separate attachments or copied and pasted/appende into this Word document. Please do not just refer to the assessment plan; the report should serve as a stand-alone document. Thank you.