

Grading

Clerkship Grade

Grades for student performance on the Pediatric Clerkship are assigned using the following paradigm:

1. Clinical Performance: 55%
2. Written Examinations: 40%
3. Professionalism: 5%

Total: 100%

Clinical Performance (55%)

The [Medical Student Clinical Performance Evaluation](#) outlines the standards by which students will be graded on their clinical performance. During each phase of their rotation, students will receive evaluations from their preceptors and supervisors based upon this performance standard. The average score from all these subjective evaluations forms the basis for the clinical performance grade.

Subjective (Clinical) 55%:

% of Final Grade (Total 55%)	Six Week Sites % of Subjective	Sites	Component
		Albany	
27.5	50		Inpatient (Tolliver)
27.5	50		Outpatient
		Albany-Gauthier	
18	33		Inpatient (Tolliver)
37	67		Outpatient (Gauthier)
		Columbus	
13.75	25		NICU
13.75	25		Inpatient
13.75	25		Clinic
13.75	25		Dr. Zanga
		Rome, Tifton, Savannah	
55	100		Head Evaluator
20% of Final Grade	Two Week Inpatient % of Subjective	Sites	Component
20	100	General, Hospitalist, Subspecialty, and Cardiology	All evals count equally, including Resident
% of Final Grade (Total 35%)	Four Week Sites % of Subjective	Sites	Component
		MCG	
10	25		Nursery
25	75		Clinic (feedback cards)
35	100	Aiken, Community sites	All evals count equally

Students who score less than an average of 70% for their final clinical performance grade will be required to remediate some or all of the clerkship. Grading scale for Clinical Performance is as follows:

90-100%	Outstanding performance in all areas. Under normal circumstances no more than 20% of students will perform at this level.
80-89.9%	Meeting expectations: Clinical skills are solid, and appropriate for his/her level of training. The majority of students will perform at this level.
70-79.9%	Compared with peers, this student demonstrates clinical skills that are below expectations for his/her level of training.
<70%	This student has significant clinical performance deficiencies, and should not pass the rotation.

Comments: Written comments are provided by faculty and residents. The spirit of all comments will be included. The clerkship director may edit comments for clarity or to prevent excessive redundancy, but underlying meaning will be preserved. There is an area on the final evaluation form for feedback to the student not to be included in the Dean's Letter unless similar comments occur in multiple clerkships. Students should take this feedback seriously. The commenter felt strongly enough that the student should be aware of a behavior, but not strongly enough to have it included in the Dean's Letter unless there was a consistent pattern of such behavior. The way a student is perceived is not always the way the student intended to be perceived, and those discrepancies should be closely analyzed by the student and perhaps reviewed with a faculty advisor in order to improve future performance.

Written Examinations (40%)

Two written examinations are given during the Pediatric Clerkship.

The Departmental exam is given by computer (Vista) at each clinical teaching site on Friday morning during the 4th week of the rotation. The questions are based on assigned CLIPP cases and content from the student curriculum guide. The examination consists of 32 multiple choice questions from validated standardized CLIPP Final Exam Questions (FEQs), 2 essay questions derived from the Clinical Cases provided at the end of the Student Curriculum Guide, a prescription, an IV fluid order, and a Growth Chart. This test is scored on a percent scale (0-100%) and contributes 15% toward the student's final grade.

Departmental Exam (15%):

Points	Time	Activity	Components
64	32 min.	32 CLIPP FEQ's	2 points each
10	30 min.	Clinical Case Essay #1	Hx, PE, Diff Dx, Management, Advice to family
10	30 min.	Clinical Case Essay #2	Hx, PE, Diff Dx, Management, Advice to family
5	4 min	Rx	conc, dosage, route, duration, disp
5	4 min	IVF Orders	fluid type – 2 points, rate – 3 points
6	4 min.	Growth Chart	ht, wt, and hc or BMI plotted appropriately; correct interpretation – 3 points
100	105 min.		

The National Board of Medical Examiners (NBME) Pediatric Subject Examination (25%) is given on the final day of the clerkship. The NBME Subject Test Score achieved on this exam is converted to a percent scale (0-100%). The NBME Subject Exam score contributes 25% toward the student's final grade.

Student Performance on the NBME Pediatric Subject Exam is converted to a percentage score based on the scale below. These standards for MCG students are based on opinions provided by a national group of pediatric clerkship directors. Their recommendations for scoring the NBME exam and the MCG Standard for scoring are in the table below:

	National Consensus	MCG Standard
Minimum Passing	61	59
Minimum Honors	84	83

- Scoring Honors on the Pediatric NBME exam is **not** required for an "A" in the clerkship.
- Students who score < 59 (70%) of the Pediatric NBME exam must remediate the clerkship.
- Students who pass the NBME Pediatric Subject Exam but fail to achieve a combined score of 70% for both written examinations will receive a grade no higher than a "C" for the clerkship.

PED 5000 Grading Scale for NBME Pediatric Subject Examination			
NBME Subject Test Score	MCG Converted Score (%)	NBME Subject Test Score	MCG Converted Score (%)
50	62.3	71	80.3
51	63.1	72	81.1
52	64.0	73	82.0
53	64.9	74	82.9
54	65.7	75	83.7
55	66.6	76	84.6
56	67.4	77	85.4
57	68.3	78	86.3
58	69.1	79	87.1
59	70.0	80	88.0
60	70.9	81	88.9
61	71.7	82	89.7
62	72.6	83	90.6
63	73.4	84	91.4
64	74.3	85	92.3
65	75.1	86	93.1
66	76.0	87	94.0
67	76.9	88	94.9
68	77.7	89	95.7
69	78.6	90	96.6
70	79.4	91	97.4
		92	98.3
		93	99.1
		94	100.0

Professionalism (5%)

Students are expected to demonstrate professional behaviors at all times. The chart below outlines specific components that will be graded, but the clerkship director has the prerogative to deduct professionalism points for other unprofessional behaviors if indicated.

Students with a Professionalism Component score < 70% will not pass the rotation and will require remediation of some or all of the clerkship.

Professionalism 5%:

Points	Component
25	Complete all assigned CLIPP Cases (2 points each + 1 point if all done)
30	Mid-Rotation Feedback
30	SPEL (15 pts. Mid-rotation + 15 pts. End)
5	On-time for Exams (2.5 points deducted for each exam if >5 min. late)
10	Communication (e-mails from community sites, e-mails when absent, etc.)
100	Total

CLIPP Cases: Twelve CLIPP cases will be assigned during the rotation. Students should complete approximately 3 cases per week. The Departmental Exam will include questions based on the assigned cases. Please refer to your Orientation E-mail for assigned cases. Students will earn 2 points for each assigned case complete and one extra point for completing all assigned cases.

Mid-Rotation Feedback: Students should receive mid-rotation feedback. Students at six-week community sites should have it completed by the end of the 3rd week. Students who do inpatient at MCG should have it completed by the end of their first week on inpatient. Students working four weeks at a community site may wish to have their preceptors complete the form by the end of their second week of outpatient. There is a link to the Mid-Rotation Feedback form on the PED 5000 Home Page.

SPEL: Students are expected to log patients in the Student Patient Encounter Log in One45 on a regular basis. The Clerkship Director will check the logs mid-rotation, during the last week, and at the completion of the rotation. Points will be deducted if patients are not logged. CLIPP Cases will be assigned during the last week to fulfill any required diagnoses that have not been seen.

Timeliness: Students are expected to be on time for Orientation, Conferences, Clinical Experiences, and Exams. Points will be deducted if students are more than 5 minutes late to an exam. Points will also be deducted if the Clerkship Director is informed of consistent tardiness to rounds, lectures, clinics, or conferences.

Communication: Students are expected to e-mail the Clerkship Director by the end of their first week at a community site and during the last half of their community rotations. This is to ensure the student arrived safely and to apprise the Clerkship Director of any problems at the site. If students have to be absent, they are expected to communicate with the Student Education Office as well as with their supervising resident and attending. Failure to communicate will result in up to 10 points being deducted from the student's Professionalism grade.

Grade Appeals

Final clerkship grades should be posted within six weeks of completing the rotation. Students who wish to contest their clerkship grade may do so in the following manner:

- Contact the Clerkship Director. It is inappropriate for the student to directly approach his/her clinical preceptor about a clerkship grade. If a student approaches a preceptor directly about an evaluation, the student will forfeit their right to appeal their grade.
- The student should submit written evidence to support his/her case.
- The Pediatric Grade Appeals Council will discuss any appeal that involves more than having a preceptor reconsider a clinical evaluation.
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- The Clerkship Director will contact the appropriate clinical preceptor(s) and solicit his/her evaluation in light of the new information from the student.
- The Clerkship Director will inform the student of the results of the appeal as soon as information is available.
- In accordance with policies from the Curriculum Office, documentation of the student's appeal will be made in the student's final clerkship evaluation, regardless of the outcome.