Dartmouth
GEISEL SCHOOL OF MEDICINE

Geisel MD Grading Policy

Summary of Purpose

This policy was written to establish the plan for grading within each phase of the Geisel MD curriculum to ensure alignment with the Principles of Assessment and clear communication to students on how grading throughout each phase will occur. Students are expected to master an approved set of learning objectives, specific to each course or clerkship, that align with applicable, overarching program objectives within Geisel competencies, as defined and reviewed by the Medical Education Committee (MEC), in accordance with accreditation requirements.

Scope and Applicability

This policy applies to all Geisel medical students and course and clerkship directors.

Definitions

Benchmark Assessment: These assessments may include exams, projects, or other assignments with weight distribution determined by the course leader prior to the start of the course. Benchmarks serve a diagnostic purpose. They are designed to determine how a student is progressing and whether the student needs additional support.

Clinical Elective: A non-required course taken for credit in Phase 2 or Phase 3 that has at least 50% of course time dedicated to active clinical care and is not a Sub-Internship. See Sub-Internship Policy.

Problem Based Learning (PBL) Course: A course whose content is a collection of concise, detailed, clinical cases that are meant for students to use their cognitive integration of medical science knowledge to work through each case.

Course Assignments: Learning tasks on a specific topic(s) and related to an established set of objectives that are assigned by the course or clerkship director to provide greater insight into a student's abilities and understanding. Students must successfully complete all assignments within a course or clerkship.

Established Rotations: Pre-approved courses offered by Geisel. They are available for request on Online Access to Student Information and Scheduling (OASIS).

Final Summative Assessment: These exams provide an opportunity for students to demonstrate that they have fulfilled the objectives of the course or clerkship.

Grade: The official mark indicating the degree of accomplishment in a course that is noted on the transcript as described in the Student Education Records Policy.

Longitudinal Course: A course that spans a defined time period (i.e. more than one curricular block) and incorporates a longitudinal assessment plan. Current examples include On Doctoring, Population

Health, and Medical Learning Science.

Mulligan: When a student is permitted to retest a final summative exam after a course or clerkship failure, with the opportunity—if the retest is passed—to avoid any subsequent notation on the transcript indicating the original failure.

National Board of Medical Examiners (NBME) Subject Exam: Also known as the 'Shelf' exam, these are high quality, web-based, clinical science examinations designed to assess educational achievement at the end of specific clerkships. These exams factor in as part of the calculation for the final clerkship grade. Many clerkships choose to use the NBME Subject Exam as a tool to determine students' medical knowledge at the end of the clerkship.

Objective Structured Clinical Exam (OSCE): Exam that evaluates a student's ability to obtain a focused history, perform a focused physical exam, communicate clearly with patients, and document a reasoned assessment and diagnostic plan.

Professionalism/Engagement: Behaviors that students are expected to exhibit in their courses and clerkships such as being on time for obligations, submitting assignments on time, and being respectful of patients, faculty, peers, and staff.

Re-exam: See Remediation exam

Remediation: The action taken to address the Failure of a course. Remediation options include, but are not limited to, remediation exams, partial repeat of a course, or full repeat of a course.

Remediation exam: The exam taken that, if passed, will allow a Failure of a course to be changed to a passing grade with a transcript notation.

Retest: The exam taken that, if passed, will allow an Incomplete in a course to be changed to a passing grade without a transcript notation.

Score: Numerical calculation of an exam or course that conveys a student's performance.

Student Performance Evaluation (SPE): A competency based summative evaluation tool which is used to assess a student's clinical performance with both Likert scale questions and narrative comments. Each clerkship will manage how and who will provide feedback to students based on the clinical dynamic.

Policy Statement

- Clear documentation of the individual course or clerkship grading policy will be available to students within the learning management system by the first day of the course or clerkship.
- Changes to grading policy and practices that occur during an academic year shall only occur in exceptional circumstances. If a change within an academic year is necessary, it must be approved by the MEC, and all impacted students must be notified.
- This policy only references Honors, High Pass, Pass and Fail grades. For a full description of grades and transcript notifications, please see the Student Education Records Policy.

Phase 1 Grading Policy

Students will be assigned a final grade of Pass or Fail for each Phase 1 course.

Students must pass each Phase 1 course in order to proceed to Phase 2.

Foundational and Organ Systems-based Courses

The standard for passing a **foundational and organ systems-based** course requires meeting BOTH the minimum cutoffs for the final summative exam AND the course score as outlined below. Course leaders may adjust the minimum cutoffs at their discretion with approval from the Geisel Assessment Oversight Committee (GAOC).

Cutoffs and grade weighting are described below:

- **Benchmark Assessments**
    - No minimum cutoff for passing.
- **Final Summative Assessment**
    - Minimum cutoff for passing the final summative assessment is 65%, unless otherwise determined by the course leader in consultation with the Evaluation and Assessment Team. All such changes must be made official no less than 30 days before a course begins. All such changes will be reported to the GAOC and the MEC. Changes to the cut-off can only be made to lower the cut-off, not to raise it.
- **Phase 1 Course Score**
    - Minimum cutoff for passing a course is 70%, unless otherwise determined by the course leader in consultation with the Evaluation and Assessment Team. All such changes must be made official no less than 30 days before a course begins. All such changes will be reported to the GAOC and the MEC. Changes to the cut-off can only be made to lower the cut-off, not to raise it.
    - Weighting of assessments for calculating the overall course score is as follows:
        - 30-40% of the overall score comes from performance on benchmark assessments.
        - 60-70% of the overall score comes from performance on the final summative assessment.
    - Graded projects, which fall under the category of benchmark assessments in foundational and organ systems-based courses, should contribute no more than 10% to the total course score.
    - After a course has ended, consideration of a change to lower the cut-off for the course or the final exam may be initiated by either the course leaders, the Associate Dean of Pre-Clerkship Education (ADPE), or the Associate Dean of Assessment, Quality and Accreditation (ADAQA). In such cases, the course leaders will work with the ADAQA to determine if a change is warranted and, if so, what the new pass-fail cut-off should be. If that group is unable to come to a consensus, the matter will be brought to the GAOC faculty voting members for a vote.

Option to Retest
In up to two foundational or organ systems-based courses, a student who does not earn the minimum required scores for either the course, the final, or both, is granted a Mulligan and is eligible to retest,

as outlined below:

- A grade of Incomplete (INC) will be assigned for up to two courses in Phase 1 to indicate eligibility for retesting. Upon successful retesting, the INC will be changed to a passing grade (PAS) with no further notation on the grade summary or transcript.
    - **Beginning with students matriculating in the Geisel MD program in the Fall of 2025,** after the student's first Mulligan, the Academic Progress Committee (APC) will be notified. After the student's second Mulligan, the student will be invited to meet with the APC.
    - **Beginning with students matriculating in the Geisel MD program in the Fall of 2026,** in addition to APC involvement, the two Mulligans will only be allowed in Phase 1 – Year 1.

- If a student fails to meet the academic standard for a third foundational or organ systems-based course, a failing grade will be submitted and noted on the transcript, and the student is no longer eligible to retest for any grades of INC. Any retesting in progress should be paused, and the Pre-Clerkship Committee for Academic Advancement and Growth (PCAAG) will refer the student to the APC for a remediation plan and consideration of a decreased academic load/individualized academic plan.
    - **Beginning with students matriculating in the Geisel MD program in the Fall of 2026:** If a student fails to meet the academic standard for a foundational or organ systems-based course in Phase 1 – Year 2, a failing grade will be submitted and noted on the transcript. The PCAAG will refer the student to the APC for a remediation plan.

- Retesting involves taking an institutionally-developed or NBME-customized assessment multiple-choice exam for each course that the student received a grade of INC. Students must achieve a 70% or better on this exam to achieve a passing score in the course. If the minimum cut-off for the course is lower than 70%, the course leaders will consult with the Office of Evaluation and Assessment and the ADPE to determine if it would be appropriate to lower the cut-off for the retest. That decision should be made prior to the start of the course. If the minimum cut-off for the course is changed after the course has ended, the cut-off for the retest will automatically be lowered to match the cut-off for the course.

- A student will be granted no less than 2 weeks of study time to prepare for each retest.

- Retesting for M1 students must occur during winter break or summer break. Retesting for M2 students must occur during winter break or the dedicated study period.

- Students will be expected to seek advice from the course leader, the ADPE, and the Office of Academic Advising & Accessibility to establish a supportive structure for retesting and determine the period in which retesting occurs.

- Retesting dates, established by the Office of Assessment and Evaluation in collaboration with the Office of Pre-Clerkship Education, will be provided to students at the beginning of each academic year, so that students may be aware of the options as they finalize their retesting plans.

- If retesting is not successful, a failing grade will be submitted and noted on the

transcript, and the student will be referred to the APC by the PCAAG for a remediation plan. Any other retesting in progress should be paused. A student may initiate a grade appeal following the procedure in the Grade Appeal Policy.

Longitudinal and PBL Courses

The standard for passing is described below:

- A passing grade will be determined by the course leaders based on satisfactory achievement of all course objectives as related to Geisel program objectives/competencies, reviewed by the GAOC, and approved by the MEC.
- A grade of Pass or Fail will be given at the end of each year for longitudinal courses.
- Students may be provided the option to retest individual assessments of longitudinal courses (e.g., OSCE, end-of-module exam) prior to assignment of the final grade.
- If a student fails a longitudinal or PBL course, they will be referred to the APC by the PCAAG.

Curricular Threads

- Assessment of curricular threads occurs within Foundational, Organ Systems-Based, and Longitudinal courses.

Phase 2 and Phase 3 Grading Policy

Students must pass each Phase 2 and Phase 3 clerkship, Sub-Internship, and elective to be considered for graduation.

Students not meeting clinical requirements may be referred to the APC by the Clinical Committee for Academic Advancement and Growth (CCAAG).

Phase 2 and Phase 3 Core Clerkships

For required clerkships in Phase 2 and Phase 3, students will be assigned a grade of Honors, Pass, or Fail based on cumulative performance across all methods of assessment.

All clerkships in Phase 2 must be passed in order to continue progression through Phase 3.

The standard for passing Phase 2 and Phase 3 clerkships will require that students:

- Meet clerkship specific passing criteria as outlined in the specific clerkship grading rubrics.
- Score above the 5th percentile on the end-of-clerkship NBME Subject exam or an applicable cutoff on an alternative final summative assessment as approved by the GAOC.
- Successfully complete all course assignments and assessment activities.
- Meet professionalism and engagement expectations as indicated on clerkship-specific grading rubrics.

Due to the varying nature of each clerkship, the weight distribution of each assessment category towards the final grade is determined before the beginning of each academic year, at the clerkship leaders' discretion, with oversight by the Assistant Dean for the Core Clinical Curriculum.

NBME Subject Exam Grading

When determining the percentile score for subject exam results, clerkships should take the two-digit equated percent correct (EPC) score and use the most recent table that was available at the start of the academic year provided by the NBME to determine the percentile score among all students who took the exam last year, and also in the same quarter of the last year. The higher of the two percentile scores should be used as the student score.

For students who are off-cycle, the quarter used will correspond to where the student is in their progression through Phase 2. As above, the higher of the two percentile scores should be used as the student score.

If the student has achieved the 6th percentile or above, clerkships will then use the EPC to determine the component of the grade that takes into account NBME performance. Individual clerkships will determine how they assign this component.

NBME subject exam scores at the 5th percentile or lower represent non-achievement of the medical knowledge competency and therefore a potential clerkship failure.

Clinical Education Intersessions

The Clinical Education Intersessions course (CEI) will be assigned a grade of Pass or Fail.

The student must pass the CEI course, and the OSCEs associated with it, to continue to progression through Phase 3.

The standard for <u>passing CEI</u> will require that students:

- Successfully complete all course assignments
- Attend all required sessions
- Pass the year end OSCEs

<u>Phase 2 and Phase 3 Sub-Internships and Electives</u>

- All established electives and Sub-Internships will utilize a student performance evaluation derived from the Geisel program objectives as well as a narrative assessment to determine if a student meets expectations and learning objectives.
- For established Sub-Internships, students will be assigned a grade of Honors, High Pass, Pass, or Fail based on their clinical performance as assessed by their supervisors and rotation director. Sub-Internships may utilize a final exam in addition to student performance evaluations to determine the final grade.
- For established clinical electives of 2 weeks duration or less, students will be assigned a grade of Pass or Fail based on their clinical performance as assessed by their supervisors and rotation director.
- For established clinical electives greater than 2 weeks, students will be assigned a grade of Honors, High Pass, Pass or Fail based on their clinical performance as assessed by their supervisors and rotation director.

- If established clinical elective rotation directors want to request an exception to the policy as outlined above, they must seek an exception from the Assistant Dean of Phase 3. Approved exceptions will be effective at the start of an academic year and cannot be made during the academic year.

Transition to Residency and Scholarly Project in Medicine Courses

The Transition to Residency and Scholarly Project in Medicine courses will utilize a variety of assessment methods unique to the courses' learning opportunities and objectives. Based on fulfillment of course objectives and requirements, students will be assigned a final grade of Pass or Fail.

Guidelines for Retests and Remediations

All Remediation plans must be approved by the APC or Chair of the APC, acting on behalf of the APC.

All applicable levels of grades are permissible for students repeating entire courses or clerkships. Only the grade of Pass is available to students remediating by re-exam and/or partial repeat of a course or clerkship.

If a failing grade is successfully remediated by re-exam or other approved remediation method that is NOT a partial or full repeat of the course, the failing grade will be replaced with the remediated grade on the transcript, and the notation "(F grade raised by re-exam)" or "(F grade raised by [approved remediation method])" will appear under the course.

If a failing grade is successfully remediated by a partial or full repeat of the course, the failing grade remains on the transcript even after remediation. The repeat course and remediated grade will show on the transcript with an asterisk next to the grade, indicating it is a repeat course. If the course is a partial repeat, that will also be noted.

Phase 1: Pre-Clerkship

Students will be given a minimum of 2 weeks to prepare for a remediation exam. Students who fail ONE Pre-Clerkship course within a given academic year will remediate the failed course during the summer break between Years 1 and 2. If the course failure occurred in Block 1, students also have the option to remediate after the winter break at the beginning of Block 3. Students must successfully pass the remediation exam using the 70% threshold.

Failure of a remediation exam will result in a failure of the course remaining on the student's transcript and a referral to the APC.

Phase 1 remediation exams will be multiple-choice format using either NBME customized exams or homegrown tools.

Phase 2 and Phase 3: Clinical

Students will be given a minimum of 2 weeks to prepare for a remediation exam.

For students who do not pass the subject exam on their first attempt, but do pass on their second attempt, clerkships will use the minimum passing EPC score that equates with the 6th percentile for grade calculations.

Incomplete or failed clerkships will be completed or remediated at the earliest time possible (such as during an elective block or at the start of Phase 3), before a student's first Phase 3 rotation, and as advised by the CCAAG. Students with more than one incomplete or failed clerkship will be required to complete or remediate those clerkships before moving onto their next clinical rotation. The CCAAG may allow students to progress through Phase 3 courses without having successfully completed all Phase 2 requirements on a case-by-case basis when special circumstances arise.

A student will be allowed one initial subject exam failure and one retest of that subject exam without notation in the grade summary or transcript across the required clerkships in Phase 2 and Phase 3. A grade of Incomplete (INC) will be assigned to indicate eligibility for retesting. Upon successful retesting, the INC will be changed to a passing grade with no further notation on the grade summary or transcript. If the retest is not successfully passed, a failing grade will be submitted, and the student will be referred to the APC by the CCAAG for a remediation plan. In the event of a failure on a subject exam in a subsequent required clerkship in Phase 2 or Phase 3, a failing grade will be submitted, and the CCAAG will refer the student to the APC for a remediation plan.

Procedure

None.

LCME Standard

Standard 8.7 – Comparability of Education/Assessment

A medical school ensures that the medical curriculum includes comparable educational experiences and equivalent methods of assessment across all locations within a given course and clerkship to ensure that all medical students achieve the same medical education program objectives.

Standard 9.4 – Assessment System

A medical school ensures that, throughout its medical education program, there is a centralized system in place that employs a variety of measures (including direct observation) for the assessment of student achievement, including students' acquisition of the knowledge, core clinical skills (e.g., medical history-taking, physical examination), behaviors, and attitudes specified in medical education program objectives, and that ensures that all medical students achieve the same medical education program objectives.

Standard 9.6 – Setting Standards of Achievement

A medical school ensures that faculty members with appropriate knowledge and expertise set standards of achievement in each required learning experience in the medical education program.

Standard 10.3 – Regarding Student Selection/Progress and Their Dissemination

The faculty of a medical school establish criteria for student selection and develop and implement effective policies and procedures regarding, and make decisions about, medical student application, selection, admission, assessment, promotion, graduation, and any disciplinary action. The medical school makes available to all interested parties its criteria, standards, policies, and procedures regarding these matters.

Related Information: Documents, Policies, Links, Etc.

GSM Grade Appeal Policy
GSM Grade Submission Policy
GSM Narrative Assessment Policy
GSM Principles of Assessment Policy
GSM Student Education Records Policy
GSM Geisel Medical Student Academic Advancement and Promotion Policy
GSM Sub-Internship Policy

Policy Administration

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Reviewed By	Medical Education Committee – Subcommittees and Office of Evaluation & Assessment	**Effective Date:**	August 2, 2021
Approved By	Medical Education Committee	**Last Date Approved:**	November 12, 2025

Contact Information

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History

Date	History
November 2020	Policy brought forth to the Medical Education Committee and approved.
May 2021	The Phase 2 Grading Policy modifications reflect changes due to reduced COVID impacts were approved by the Medical Education Committee. The approved revisions will take effect on the first day of the Phase 2 academic year.
July 2021	The Geisel Assessment Oversight Committee's proposed revisions to the Phase 1 Grading Policy were approved by the Medical Education Committee. A major revision to the policy was the allowance for a student who does not earn the minimum required scores for either the course, the final, or both to take 1 institutionally-developed or NBME-customized

	assessment multiple-choice remediation exam for each failure, without notation in the grade summary or transcript. The approved Phase 1 revisions will take effect on the first day of the Phase 1, Year 1 academic year.
June 2022	The policy was revised and approved by the MEC.
July 2022	Revisions were made to the Phase 1 Grading Policy section of the policy, including the minimum cutoff for passing a Foundational and Organ System-based Courses and the minimum cutoff for passing the final summative exam. Revisions were also made to the remediation process which include the option to retest and a pause in any other retesting if a retesting exam is not successfully passed.
December 2022	Policy revised to change Committee on Student Performance and Conduct (CSPC) references to Academic Progress Committee (APC).
March 2023	The Phase 2 section of the policy was revised and approved by the MEC.
June 2023	The Phase 1 section of the policy was revised to outline a specific process for modifying grade cut-offs.
December 2024	The Phase 3 section of the policy was revised to provide additional guidance to grading clinical electives: established clinical electives of 2 weeks or less will use a P/F grading system, established clinical electives more than 2 weeks will use an H/HP/P/F grading system.
January 2025	The policy was updated to reflect the new grading system for Phase 2 core clerkships (H/P/F). Minor process revisions to Phase 1 & Phase 2 sections of the policy.
November 12, 2025	Incorporated text from NBME Subject Exam Grading Policy and Policy for Course Failures so two policies could be retired. Incorporated statement from Student Education Records Policy. Replaced reference to Capstone course with Transition to Residency and Scholarly Project in Medicine courses.

Background

None.