| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | | Does this grading system enhance or impede your learning? re rated on a sc s and 5 being er | | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|---|---|---|---|--|---|---|---|--|
| Albert Einstein COM | Pass/Fail | Exam scores ONLY | 5 | 5 | 5 | Pass/fail is the best way to encourage collaboration with peers! We know that we're not competing against each other, and everyone is extremely helpful. Before exams, we're always flooded with e-mails of review sheets, online quizzes, charts, lecture notes, etc. that our classmates have created or found elsewhere. It also removes some of the stress of studying. | I would not change it. | I love pass/fail! |
| Baylor College of Medicine | Pass/Fail | Exam scores ONLY | 4 | 4 | 4 | We recently changed to a pass/fail system from a honors/high pass/ pass and the students like the new format. | I would not change it. | Pass/fail allows for learning the material and the fundamental concepts behind the topics as opposed to the minute details required to honor vs. high pass. |
| Brody School of Medicine-ECU | A/B/C/D/E/F | Exam scores ONLY Exam scores AND | 4 | 4 | 3 | It is the same as calling it Honors/Pass/Fail. | I would not change it. | NA As I said above, we are switching to this system |
| Brown Medical School | Honors/Pass/Fail | Written/oral assignments (presentations, essays, etc.) | 3 | 3 | 4 | Brown is changing to P/F for both pre-clinical years which will likely improve the learning experiences students have as well as their satisfaction of the pre-clinical years. | Pass/Fail | diready our first year is P/F only) and it seems to decrease feelings of competitiveness between students and increase their enjoyment of the material they are learning. |
| Columbia | Pass/Fail | Exam scores ONLY | 5 | 5 | 4 | Pass fail seems to work well, all exams are multiple choice, and smaller classes occasionally have written exams. Clinical becomes Honors/HP/Pass/LP/Fail | I would not change it. | see above |
| Dartmouth Medical School | Pass/Fail Year 1, Honors/Pass/Fail Year 2 | Exam scores AND Written/oral assignments (presentations, essays, etc.) | 5 | 5 | 5 | Dartmouth went pass/fail for the first year two years ago and it has greatly improved collaboration and collegiality among the students - a spirit that is maintained even when the grading scale changes in year 2. Pass/Fail in the first year allows students to adjust to the new pace of medical school with less stress and allows students to comfortably try out different study techniques to optimize their own learning style. | | Pass/Fail first year is great for the reasons listed above, but it is nice to have a more stratified grading system come into place 2nd year as a motivator for boards preparation and preparing for the grading system that will be used in the clinical rotations. |
| Duke | Pass/Fail | Exam scores AND Written/oral assignments (presentations, essays, etc.) AND optional exercises such as honors papers or exams | 5 | 5 | 5 | Just switched to Pass/Fail from Honors/Pass/Fail this year. | I would not change it. | n/a |

| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | Are you satisfied with your pre- clinical grading system? | Does this grading system enhance or impede your learning? | Does this grading system enhance or impede collaboration with your peers? | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|---|---|---|--|--|--|--|---|---|
| | | | | re rated on a sc s and 5 being ei | | | | |
| | | | | 3 | | | | |
| | | | | | | The problem is not the structure of the grading-system itself. The problem is that the value of marks does not | | |
| | | | | | | transcend all courses. In other words, Honors in one | | |
| | | | | | | class is based on a normal curve, while Honors in | | |
| | | | | | | another class is based on a predetermined number out of 100. Thus, High Pass (or any of the others) does not | | |
| | | | | | | carry the same value in one class as it does in another. | | |
| | | | | | | Furthermore, this lack of consistency can be seen when | | |
| | | | | | | comparing scores between institutions. How does an | | |
| | | | | | | Honors at one institution compare to Pass at another? | | |
| | | | | | | More importantly, and with more difficulty, how can we develop a relative scale whose value is consistent both | | |
| | | | | | | within and between institutions? We cannot. And thus | | |
| | | | | | | we rely on board scores to do that. So what is the value | | |
| Eastern Virginia | Honors/High | | | | | of pre-clinical grades when it comes down to applying | Honors/Honors/Pass/Fai | |
| Medical School | Pass/Pass/Fail | Exam scores ONLY Exam scores AND | 2 | 4 | 4 | for residencies? A farce. | l | See above. |
| | | Written/oral | | | | | | |
| | High | assignments | | | | It makes people competitive. Grades during 1st/2nd | | |
| Eastern Virginia | Honors/Honors/Pass/Fa | | | | | year dont really matter for residency. Worry about | | |
| Medical School | il | etc.) | 1 | 2 | 1 | learning the minute facts and lose site of the big picture. | Pass/Fail | Increase collaboration. Decrease stress. |
| | | Exam scores AND | | | | | | |
| | | Written/oral assignments | | | | I haven't researched alternative methods of ensuring | | |
| | | (presentations, essays, | | | | competency that do not involve exams. Perhaps, a | | |
| | | etc.) AND optional | | | | Pass/Fail system would be more conducive to a less | | |
| | | exercises such as | | | | stress full academic experience. | | |
| Eastern Virginia | Honers/High | honors papers or | | | | | | I feel like it would de-emphasize the obsession with |
| Medical School | Pass/Pass/Fail | exams | 4 | 2 | 2 | | Honors/Pass/Fail | obtaining a certain "number score" on exams. |
| | | | | | | It took the edge off the stress of med school. Passing | | |
| | | | | | | the exams was challenging enough that we couldn't | | |
| | | | | | | slack off, but at the same time, we weren't overly | | |
| | | | | | | stressed about our grade. Perhaps most importantly, it | | Letill learned even thing, but I ween't as stressed as |
| | | | | | | made me feel free to do things like volunteer in a free clinic and do other things that enhanced my learning, | | I still learned everything, but I wasn't as stressed as I probably would have been if we had had more |
| Emory | Pass/Fail | Exam scores ONLY | 5 | 5 | 5 | but didn't necessarily apply to the test. | I would not change it. | intense grading. |
| . , | | Exam scores AND | - | - | - | 2000 7 111 7 10 10 10 10 | | I would not change it, but I would add to it much |
| | | Written/oral | | | | L | | more meaningful and substantive narrative |
| Coffon SCNA =+ | | assignments | | | | I love a true P/F, as a student it is the best environment. | | evaluations by faculty. Yes, it's difficult to do that, |
| Geffen SOM at UCLA | Pass/Fail | (presentations, essays, etc.) | 4 | 4 | 5 | However I can see how it makes it difficult for residencies to discern among students. | I would not change it. | but without grades we need to have some method of formal feedback. |
| OOLA | 1 433/1 all | 010./ | 7 | | J | restactions to discern among students. | i would not change it. | TOTTICAL TOCALDACK. |

| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | Are you satisfied with your pre- clinical grading system? | Does this grading system enhance or impede your learning? | Does this grading system enhance or impede collaboration with your peers? | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|--|---|--|--|--|---|--|---|---|
| | | | | re rated on a sc s and 5 being er | | | | |
| | | Exam scores AND Written/oral assignments (presentations, essays, | | s and 5 being er | mances | I think there needs to be some type of way to | | |
| Iowa | Pass/Fail | etc.) | 4 | 3 | 3 | distinguish between students. | I would not change it. | It works. |
| JHUSOM | Pass/Fail | Exam scores ONLY | 5 | 4 | 5 | I like not worrying about minutia and instead focusing on what matters for the wards. | I would not change it. | P/F is the best. |
| Loyola University Chicago Stritch School of Medicine | Honors/High | Exam scores ONLY | 3 | 4 | 4 | I think that while the grading system is different than what students are used to, it is still essentially the same grading scale as A/B/C/Fail, it just sounds different. If the preclinical grades are going to be Pass/Fail, they should be strictly Pass/Fail. | Pass/Fail | Would facilitate much more cooperation among students, would place less class placement emphasis on preclinical grades and more on the clinical grades, which are going to be much better predictors of performance in residency than preclinicals. I believe that options such as High Honors/Honors/Pass/Fail are the same as A/B/C/D/E/F and a simple Pass/Fail system does not encourage exceptional work. We are not an overly competitive school but a true GPA gives the students |
| Marshall University | A/B/C/D/E/F | Exam Scores AND TBL/Group Work | 4 | 4 | 4 | Similar to undergrad system and easy to understand point system based on exam scores and set value group assignments. | I would not change it. | something to gauge their work off of and gives them a way to measure their performance against the rest of their class. |
| | | | | | | Examinations force students to maintain a certain pace of learning. Although exams are stressful, exams are proven to reveal to students the areas that need improvement. There is always room for improvement on the types of questions asked on examinations. Medical students tend to overanalyse questions and read into the stem moreso than the questions writer | | Medical School is competitive enough. Students should not focus on the letter(ie a, b, c, d). Pass/Fail |
| Michigan State | | Exam Scores and Lab | | | | intends them to. It would help to add a student(not | | helps to make the environment just a little more |
| University New Jersey Medical School | Pass/Fail High Honors/Honors/Pass/Fa il | Quizzes Exam scores AND Written/oral assignments (presentations, essays, etc.) | 1 | 2 | 2 | taking the exams) to the question making panel. I believe a pass-fail system would promote more cooperation, instead of competition. | I would not change it. Pass/Fail | collaborative. Decreased competition. |

| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | | Does this grading system enhance or impede your learning? re rated on a so | | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|---|---|---|---------|--|---------|---|---|--|
| | | | impedes | s and 5 being ei | nhances | | | |
| New York University | | hypothetically, attendance at mandatory small group learning sessions counts for some portion of our grade, but realistically the grade is from exam scores only. attendance only seems to count if the grade is on the cusp of | | | | There is, in general, more camaraderie and less competition among the students since we are not competing for the top spot to get honors. Instead, a | | We have pass/fail and I think it is the grading system that most encourages learning for the sake of learning and takes the pressure off of getting a |
| School of Medicine | Pass/Fail | pass/fail | 4 | 4 | 4 | pass is a pass and that is all. | I would not change it. | perfect score. |
| OHSU | Honors/near | Primarily exam scores. Some classes give minimal component to small group attendance, P/F quizzes, etc. | 3 | 3 | 2 | See below. | Pass/fail based on core competencies | Education and evaluation ought to be driven by students meeting the core competencies of the MD program, not by any artificial need to stratify the class. Placing so much emphasis on test performance de-emphasizes other important components of physician education. |
| Rochester | Honors/Pass/Fail | Exam scores ONLY | 5 | 4 | 5 | It's nice to not pit everyone against each other, especially when people enter from a wide variety of undergraduate backgrounds | Pass/Fail | I think it would be even better if we had true pass/fail. There would be little reason for a cutthroat environment. I do see the value of having honors to better round out a class average than setting a mere benchmark, but I believe that the vast majority of medical students are driven and will work hard even in a true pass/fail system. |
| | | Exam scores AND | | | | • | | |
| Southern Illinois University School of Medicine | Pass/Fail | Written/oral assignments (presentations, essays, etc.) | 5 | 4 | 5 | The pass/fail system allows for greater collaboration with other students without competition breeding. | I would not change it. | Same as above. |
| Stanford | Pass/Fail | Exam scores ONLY | 5 | 5 | 5 | Pass/fail with no ranking and no reporting really reduces stress. | I would not change it. | Would not change. |
| Statistic | High Honors/Honors/Pass/Fa | | 3 | J | | our system is such that 68-84 is pass which earns you a 2.0, a 85-89 is high pass which is a 3.0, and a 90-100 is honors which is a 4.0. It is really frustrating when you get an 84 or an 83. Although this does not raise competition amongst my classmates because there is no curve, it puts an unfair stress on those seeking competitive residency. Especially when the difference between a high pass and a pass is one or two | THOMA HOL CHAINGE IL. | Pass/Fail system with a talk with those who "barely |
| SUNY Downstate | il | Exam scores ONLY | 3 | 4 | 5 | questions. | Pass/Fail | pass" |
| Texas A&M Health Science Center | A/B/C/D/E/F | Exam scores ONLY | 2 | 2 | | We are all training to be competent doctors - we have shown our competence/ability by getting into medical school, and performing well in medical school. Having letter grades removes the teamwork aspect, and adds a sense of competitiveness. | Pass/Fail | It simply makes more sense - it allows students to focus on material and teamwork, rather than competing with their classmates every three weeks on our exams. |

| | | | | | Does this | | | |
|---------------------|--------------------------|-------------------------|--|------------------|--|---|------------------------|--|
| | | | | | grading | | | |
| | | | Are you | Does this | system | | | |
| | | | satisfied with | grading | enhance or | | | |
| | What type of pre- | | | system | impede | | If you could change | |
| | | | your pre- | • | | | , | |
| Which Medical | clinical (years 1 and 2) | | clinical | enhance or | collaboration | | your pre-clinical | |
| School do you | grading system does | clinical grades | grading | impede your | with your | | grading system, how | |
| attend? | your school have? | determined? | system? | learning? | peers? | Why? | would you change it? | Why? |
| | | | Responses ar | re rated on a sc | ale of 1 being | | | |
| | | | | s and 5 being er | | | | |
| | | Exam scores, written | , | <u>,</u> | | I'm sure it varies from place to place, but the letter | | |
| | | assignments, and the | | | | grade system here does NOT generate a bunch of | | |
| | | occasional self- | | | | hyperintense gunners. Also suspect that quite a few of | | |
| | | assessment / quiz-type | | | | us enjoy having raw scores on exams that way, we | | Letter-based / raw scores allow us to see how we're |
| Texas A&M HSC | | assignment, depending | | | | know roughly where we sit relative to "average," and | | doing overall and improve what needs to be |
| College of Medicine | | on the block in | | | | can improve our performance from there. Says much | | improved from there and the system as is works |
| (Temple) | A/B/C/D/E/F | question. | 5 | 4 | 4 | more than "Pass" does. | I would not change it. | liust fine. |
| (Temple) | A/B/C/D/E/F | Exam scores AND | 5 | 4 | 4 | The only person you compete with is yourself. And you | i would not change it. | just line. |
| | | | | | | | | |
| | | Written/oral | | | 1 | get the exact grade you deserve. We get exact | | |
| | | assignments | | | | numerical grades which helps to determine our rank, but | | |
| Texas A&M HSC | | (presentations, essays, | | | | then overall shows up as just an A, B, C, etc for the | | |
| COM | A/B/C/D/E/F | etc.) | 5 | 5 | 5 | course. | I would not change it. | See above reason for being satisfied. |
| | | Exam scores AND | | | | | | |
| | | Written/oral | | | | | | |
| | | assignments | | | | | | |
| | | (presentations, essays, | | | | The range for Honors is 91-100; high pass is 87-91 and | | |
| | | etc.) AND optional | | | | pass is 75-87 so a lot of people are discouraged from | | |
| Texas Tech | HONORS/HIGH | exercises such as | | | | not being able to reach the high pass or honors marks | | |
| University HSC | PASS/PASS/MARGINA | | | | | and get stuck in the huge range. a lot of people would | | it would probably increase the amount of people |
| SOM | L PASS/FAIL | exams | 2 | 3 | 2 | | Pass/Fail | sharing material in our class. |
| Texas Tech | Honors/high | exams | | <u> </u> | | | High | Sharing material in our class. |
| | pass/pass/marginal | | | | | | Honors/Honors/Pass/Fai | |
| Medicine | pass/pass/marginal | Exam scores ONLY | 2 | 3 | 2 | | nonois/nonois/Pass/Fai | |
| Medicine | pass/raii | Exam scores ONLY | 2 | 3 | | student actually knows I feel it's unnecessarily stressful with the numberical | <u> </u> | seems more fair |
| | and a stant | 5 ONU.V | 1 | 2 | 2 | | D /E - 'I | Pass fail would put emphasis on 3rd year grades for |
| U of MS Med Center | numbericai | Exam scores ONLY | 1 | | | grading scale, competitive, and obselete. | Pass/Fail | AOA membership. |
| | | Exam scores AND | | | | Little Land of Color Land Color Land Color Land Color Land | | |
| | | Written/oral | | | | I think pass/fail reduces competition, but at the end of | | |
| | | assignments | | | | the day, most people want to learn more than the | | |
| | | (presentations, essays, | | | | required 70% so it doesn't truly change how much | | |
| UCSD | Pass/Fail | etc.) | 4 | 3 | 3 | stress or pressure we impose on ourselves. | I would not change it. | See above. |
| | | Exam scores AND | | | | | | |
| | | Written/oral | | | 1 | | | |
| | | assignments | | | 1 | It relieves the presurre of having to aim for the best | | I would not change it. I think pass/fail is the best way |
| | | (presentations, essays, | | | 1 | score. Rather the pass/fail system emphasizes | | to judge our proficiency in a subject given the |
| UCSD | Pass/Fail | etc.) | 5 | 5 | 4 | learning. | I would not change it. | amount of material we have to learn. |
| | | | | | | | <u> </u> | |
| | | | | | 1 | Helps increase class collaboration a great deal more. | | Pre-clinical learning is not the time to focus on |
| | | | | | 1 | When you bring a number of type A personalities | | grades but rather set the bar very high to pass the |
| | | | | | 1 | together it is nice to not focus on competition of grades | | test and it forces the class to work together to |
| UCSF | Pass/Fail | Exam scores ONLY | 5 | 5 | 5 | and focus on learning the material. | I would not change it. | understand the material. |
| 3301 | . 450/1 411 | Exam scores AND | | | - | and 10000 off fourthing the material. | Jaid Hot Gridingo It. | and ordered the material. |
| | | Written/oral | | | 1 | | | |
| | | | | | 1 | | | |
| | | assignments | | | 1 | The second of the form of the | | |
| | A 10 10 10 15 15 | (presentations, essays, | <u> </u> | | | There needs to be a measure to determine how you are | | <u> </u> |
| Univ of KY | A/B/C/D/E/F | etc.) | 5 | 3 | 3 | doing. | I would not change it. | See above |

| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | | Does this grading system enhance or impede your learning? re rated on a sc s and 5 being ea | | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|--|---|--|---|---|---|---|---|---|
| University of Central Florida | | Exam scores, written assignments, and lab attendance | 5 | 4 | 2 | As a new school, letter grades are important when applying to residency. If everyone in the class passes a course, there is no marker for who is at the top of the class unless there is an Honors category. In addition, when residencies look at grades in the preclinical years, a person with an A in anatomy from one school may be better distinguished from a person with a pass in anatomy (even though that person may have received an A, the residencies don't know - they could have received a C). | Honors/Pass/Fail | I think that Pass/Fail systems help students that are meeting all requirements but don't score A's all the time, while the Honors portion helps the students at the top of the class to be distinguished based on merit. This would decrease stress levels compared to the letter grade system, and foster more collaboration without overlooking the students at the top of the class. |
| University of Central Florida | | Exam scores AND Written/oral assignments (presentations, essays, etc.) | 5 | 5 | 4 | I think as a new school it is important to have A/B/C/F grading in order for the students and faculty to verify the curriculum structure and pedagogical techniques. | I would not change it. | I think as a new school it is important to have A/B/C/F grading in order for the students and faculty to verify the curriculum structure and pedagogical techniques. |
| University of Chicago | Pass/Fail | Exam scores ONLY | 5 | 5 | 5 | The pass fail system takes a lot of the pressure off and allows students to work together to learn the material really well. Everyone in my class works togetherthere have been times when people have sat down with me for hours to explain things to me they understand better based on their educational background. It's a pretty unique experience. | I would not change it. | see above |
| University of Chicago Pritzker School of Medicine | Pass/Fail | Exam scores ONLY | 5 | 4 | 5 | The pass/fail grading system encourages collaboration and learning while downplaying cutthroat competition. Students can bring their unique gifts to the table and thus enhance everyone's learning. | I would not change it. | See above. |
| University of Chicago, Pritzker School of Medicine | Pass/Fail | Exam scores ONLY | 5 | 5 | 5 | We all share study guides, study together, and are very close friends. I couldn't imagine it any other way. | I would not change it. | See above |
| University of Colorado | Honors/Pass/Fail | Exam scores ONLY | 4 | 3 | 4 | Exams are as objective as possible and have a quick turnaround so that we know how we did quickly My first year class is the first at UF COM to have the pass/fail grading system. We are satisfied with the | Pass/Fail | If grading were pass-fail instead of honors-pass-fail, we could focus more on integrating material across classes and studying for step 1 during second year. |
| University of Florida | Pass/Fail | Exam scores ONLY | 4 | 3 | 5 | experience as our class seems to have a much greater amount of peer collaboration and less stress than previous classes. Since we are the first class with pass/fail, we will not know how this grading system will affect our Board scores so we are as satisfied as quinea pigs can be. | I would not change it. | I would not change it because we just changed to this system, so we need to decide how this works for us before deciding whether or not we should change it. |

| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | Are you satisfied with your preclinical grading system? | Does this grading system enhance or impede your learning? | Does this grading system enhance or impede collaboration with your peers? | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|---|---|---|---|--|--|---|---|---|
| | | | impedes | s and 5 being e | nhances | | | |
| university of iowa | High Honors/Honors/Pass/Fa | Exam scores AND Written/oral assignments (presentations, essays, etc.) AND optional exercises such as honors papers or exams | 4 | 4 | 3 | Our administrators say that students always prefer the opposite grading scheme. With P/F, they wish there was some distinction. With Honors/Near Honors/P/F, students feel that there are arbitrary points trying to divide students. I think overall students feel that there should be some distinction between barely passing and doing really well. | Honors/Pass/Fail | Students seem to prefer less division. |
| university or lewa | | Exam scores AND | | - | Ŭ | doing rouny won. | 11011010/1 400/1 411 | Ctadente decin le profer 1666 division. |
| University of Kentucky | A/B/C/D/E/F | Written/oral assignments (presentations, essays, etc.) Exam scores AND | 4 | 4 | 4 | I think our grading system promotes exchange of information in the form of figures, online resources and student-made charts. | I would not change it. | The current grading system provides students with adequate feedback in their ongoing performance. |
| University of Louisville | Honors/Pass/Fail | Written/oral assignments (presentations, essays, etc.) AND optional exercises such as honors papers or exams | 4 | 4 | 3 | This system decreases anxiety in many students since it only shows a "P" on their transcript. However, for the students who want more than just a "P", there is the option to go for honors. Each class defines what honors means from the beginning and these standards vary. | I would not change it. | The system seems to work as it is now. |
| University of | D/F-:I | Firem seems ONII V | 5 | 5 | 5 | Pass fail grading helps increase collaberation amongst | Lucas del matalana ana it | Can about |
| Michigan University of Minnesota-Duluth | Pass/Fail High Honors/Honors/Pass/Fa il | Exam scores ONLY Exam scores AND Written/oral assignments (presentations, essays, etc.) | 3 | 3 | 3 | my class It allows those who really want to satisfaction of excelling to do so. We also have the motto of "S's make doctors" to realize that even if you don't get honors or high honors you will still succeed. | I would not change it. I would not change it. | See above I don't see anything wrong with the system we use. I have noticed as well that the classes we have that are Pass/fail are not taken as seriously perhaps due to that pattern of grading. |
| University of Mississippi | numerical values | Exams and participation in group meetings | 1 | 3 | 5 | Because we get numerical grades, they don't mean much to program directors for residency. I think we are one of the only med schools that still use it. It was helpful for me during clinical years because I got somewhat higher grades and got into AOA as a fourth year, so I can't complain too much. | High Honors/Honors/Pass/Fai I | I think it would just make more sense to be on the same grading system as the rest of the country. Grades really only matter for AOA and learning the material to ace the step from a residency admissions perspective. I only think a very few people actually care about class rank. That's just my opinion. |
| University of Missouri-Columbia | Honors/Pass/Fail | Exam scores ONLY | 5 | 5 | 5 | By having only pass/fail in the first year and honors/pass/fail in the second year, it fosters more a cooperative environment, as opposed to one that fosters competition. Since we are no longer competing with one another, people are more than willing to help out other students simply out of benevolence. It's really quite a beautiful thing to see the collaboration it nourishes. | | Same as above. I really enjoy the honors/pass/fail system since it seems to eliminate competition. I'm not really competing against other students. It encourages me to do my personal best and not worry about others. Additionally, people enter medical school from various and diverse backgrounds, the pass/fail system helps to alleviate those differences since a PhD in physiology and a French major can both pass (although the PhD may have a better gross score), despite having such different backgrounds. |

| | | | | | Does this | | | |
|-------------------------|--------------------------|-------------------------|----------------|------------------|----------------|--|-------------------------|---|
| | | | | | grading | | | |
| | | | Are you | Does this | system | | | |
| | | | satisfied with | grading | enhance or | | | |
| | What type of pre- | | your pre- | system | impede | | If you could change | |
| Which Medical | clinical (years 1 and 2) | How are your pre- | clinical | enhance or | collaboration | | your pre-clinical | |
| School do you | grading system does | clinical grades | grading | impede your | with your | | grading system, how | |
| attend? | your school have? | determined? | system? | learning? | peers? | Why? | would you change it? | Why? |
| | • | | Responses ar | re rated on a sc | ale of 1 being | • | , , | · |
| | | | • | s and 5 being ei | • | | | |
| | | | | <u>,</u> | | Our grading system is not on par with most of the nation | | |
| | | | | | | I believe and while someone may have and 89% in a | | |
| | | | | | | class they still end up with a B overall which looks a lot | | |
| | | | | | | different than the person who got a 90% and got the A | | |
| | | Exam scores AND | | | | in the class. the difference may be 1 or 2 questions | | |
| | | Written/oral | | | | through a semester but the person who received the | | This system is more representative of the class and |
| University of | | assignments | | | | 90% looks a lot better when it comes time to interview | | those who do extremely well should have it reflected |
| Nevada School of | | (presentations, essays, | | | | for residency. The pass fail system I believe is more | | while the rest of the class who passed did enough to |
| Medicine | A/B/C/D/E/F | etc.) | 1 | 4 | 2 | fair in the long run. | Honors/Pass/Fail | be lumped into the same category |
| | | | | | | Several people miss honors because they don't get the | | |
| | | | | | | points needed on our written case test. THis test is | | |
| | | | | | | subjectively graded and you are unable to argue for | | |
| University of North | | | | | | points back to get your receive honors. However, you | | I feel like there is a huge discrepency between those |
| Dakota School of | | | | | | are able to argue for points if you fail. Doesn't really | | who pass and just miss getting honors and those |
| Medicine and | Pass/Fail year 1, | | | | | seem fair for a test that is graded based on presence or | | who just squeeze by. A/B/C/D/F would better |
| Health Sciences | honors/pass/fail year 2 | Exam scores ONLY | 2 | 3 | 3 | absence of "key" words in the essay. | A/B/C/D/E/F | differentiate this. |
| | | | | | | | | |
| | | | | | | Most of the time our entire grade for the course comes | | |
| | | | | | | from one 3-hour exam at the end of the course. It's nice | | |
| University of | | | | | | to only have one test to worry about, but also there's no | | Although I like the Honors/Pass/Fail system, it might |
| Oklahoma College | | Exam scores and | | | | "wiggle room" as far as getting a sense of how the | Honors/Honors/Pass/Fai | be nice to give some recognition to students who |
| of Medicine | Honors/Pass/Fail | Quizzes | 3 | 4 | 4 | course directors approach exam questions, etc. | I | score between a 90 and a 95, or even 93-95. |
| | | | | | | I just think the honors grade is unnecessary and drives | | |
| | | Usually just exam | | | | a significant minority of people who really, really care | | |
| | | scores, but every so | | | | about honoring to do nothing but study (mind you only | | |
| | | often assignments, | | | | for the basic science classes, not for physical exam, | | |
| | | participation, or | | | | behavioral health, biostats, etc.). But who knows, | | |
| University of | | attendance taken into | _ | _ | _ | maybe they'd behave that way even if they couldn't | | |
| Pittsburgh | Honors/Pass/Fail | account | 2 | 3 | 3 | honor. | Pass/Fail | See above. |
| | | Exam scores AND | | | | | | |
| | | Written/oral | | | | | | |
| | | assignments | | | 1 | | | |
| University of South | A /D /O /D /E /E | (presentations, essays, | | - | | Fair system that rewards hard work. Not good though | Loos Ideal de la con 8 | Late and the second second second |
| Carolina | A/B/C/D/E/F | etc.) | 4 | 5 | 3 | for collaboration due to competition. | I would not change it. | I think it works well for our school. |
| | | | | | | I shiply we must be a series that is a his stirely be and | | I see few differences between "HH/H/P/F" and the |
| Linius seite and County | | | | | | I think we prefer scoring that is objectively based | | standard grading system, aside from an unnecessary |
| University of South | A /D /C /D /E /E | Firem seems ONLY | | 0 | | (multiple choice vs. essay or paper) but not based on a | Lucasidal mad abancas " | incentive for competitiveness to have a rare "top |
| Dakota | A/B/C/D/E/F | Exam scores ONLY | 4 | 3 | 3 | curve, allowing for a non-competitive atmosphere. | I would not change it. | spot". |

| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | • | Does this grading system enhance or impede your learning? re rated on a sc s and 5 being er | • | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|---|---|---|---|--|---|---|---|---|
| University of Tennessee College of Medicine | A/B/C/D/E/F | Exam scores AND Written/oral assignments (presentations, essays, etc.) | 2 | 3 | | I think Pass/Fail would make the first two years of med school less stressful and allow for more boards-focused and otherwise personalized studying instead of focusing on memorizing every detail of every lecture slide and then some. | Honors/Pass/Fail | Honors/pass/fail would allow for students to shine in a group rather than individually the first two years then letters from faculty can help individuals shine during the second half of med school. It's not like we are all applying to the same programs in the same places. I think if a student achieved Honors it doesn't hurt him/her if a third+ of the class also achieves this distinction. I think it means that they all worked very hard. I don't know how residency programs view this grading system though. |
| University of Tennessee Health Science Center | A/B/C/D/E/F | Exam scores AND Written/oral assignments (presentations, essays, etc.) | 2 | 2 | | A pass/fail system is consistently shown to reduce student stress, not significantly affect step 1 scores and not affect residency location. There seems to be no reason no to make the move. | Pass/Fail | University of Tennessee is looking at moving to a pass/fail system. We are currently in the process of implementing a new curriculum and will wait for this to happen before moving to the new grading rubric, but it will happen. A lot of faculty are resistant to the idea and others will only agree to changing the system if we add honors/high honors. This makes no sense to me as it is basically A/B/C or A/B/C/D/F just with a different name. Unfortunately, there is no evidence that moving to a pass/fail system is a bad idea, and it just seems faculty/doctors/people are fearful of change. |
| University of Texas Medical Branch in Galveston | High Honors/Honors/Pass/Fa il | Exam scores, written assignment, and PBL evaluation Depends on the | 4 | 4 | | The majority of students like the grading system, but I feel like there is still this hand full that would like to get A, B, C, D, etc. | Pass/Fail | While we like out current grading system, I wish all schools would go to a pass/fail method. I think it promotes camaraderie among peers by decreasing the level of competition. Med school is competitive enough as we compete against ourselves. And often times, the differentiating factors between someone that honored and someone that passed are the minute details that provide no clinical revelance to the practice of medicine. |
| University of Utah | Honors/Pass/Fail | course: usually just exam scores but occasionally including small group assignments, quizzes, labs and written assignments. | 4 | 4 | | Because Honors is at stake, I do feel like people push themselves to learn more than they might otherwise. It has not seemed to foster sabotage of any sort. It does, however, significantly increase stress in an already significantly stressful two years. | Pass/Fail | The stress levels would significantly decrease and hopefully make the first two years less painful. |

| Which Medical School do you attend? | What type of pre- clinical (years 1 and 2) grading system does your school have? | How are your pre- clinical grades determined? | Are you satisfied with your pre- clinical grading system? Responses ar | Does this grading system enhance or impede your learning? re rated on a sc | Does this grading system enhance or impede collaboration with your peers? | Why? | If you could change your pre-clinical grading system, how would you change it? | Why? |
|---|---|---|--|--|---|---|---|--|
| | | | impedes | and 5 being ei | nhances | _ | | , |
| University of Vermont | | Exam scores, written assignments and clinical skills exams (all required) | 5 | 5 | 5 | It allows us to follow our progress throughout the first two years. | I would not change it. | I think a pass/fail grading system would leave many of us without motivation to work harder than to achieve a passing grade. Incorporating the opportunity for "honors" in our preclinical courses allows us to challenges ourselves without competing with each other too much. |
| University of Wisconsin | | exam scores, quizzes, small group grades | 5 | 5 | 5 | Having pass/fail first year sets a non-competitive precedence that is followed pretty well into second year when grades are given. I think overall we like when classes have more components than just tests but in a curved class, they don't tend to affect one's grades. | I would not change it. | Having pass/fail first year sets a non-competitive precedence that is followed pretty well into second year when grades are given. |
| UT HSC SAN Antonio | A/B/C/D/E/F | Exam scores ONLY | 3 | 3 | 3 | Don't know. What else do you do, you know? HEaring from some residency directors, having a competetive ranking system is helpful to them, which becomes good for the competative students. Is it ok that everyone doesn't get to go into plastics? Maybe? | Undecided | See above |
| | 100055 | 5 000 | | | | The letter grading system did not promote a competative environment. There was healthy collaboration amongst our class. If anything, the letter grade earned was more an individual-based motivator to do better. Overall, having a pass/fail grading system would have eased the anxiety/stress a littleotherwise it wasn't problematic, just kinda old-fashion way of | | |
| UTHSCSA UWSOM | | Exam scores ONLY Exam scores ONLY | 3 | 5 3 | 5 2 | | Pass/Fail Pass/Fail | (see above) Enhances collaboration |
| | | | 3 | J | - | poss omadomi | , sold 1 M1 | Personally, I would not change the current grading system because it prompts students to work hard and master the material so that they can receive "Honors" and "High Pass" on their transcript. I think having a pass/fail system may decrease student motivation and cause students to not master the material as well because they will get a "Pass" on their transcript regardless of their numerical average in the course. However, at this time, our institution |
| Virginia Commonwealth | | Exam scores, small group participation, | | | | The grading system is fair and the grade students | | also is considering going to a "Pass/Fail" system for all courses. We are currently in the process of |
| | • | team-based learning | | | | receive generally is an accurate reflection of their | | collecting student opinions about this type of grading |
| Medicine | I | quizzes | 4 | 4 | 4 | knowledge base | I would not change it. | system. |
| Wash u | Year 1: pass/fail. Year 2: honors/high pass/pass/fail | Exam scores ONLY | 2 | 2 | 2 | I wish my entire grade did not depend on one exam. Also the second year grading style makes everyone really competitive and cutthroat. | Pass/Fail | Takes the pressure off. Med school is hard enough already without classmates trying to one-up each other all the time. |
| yale | Pass/Fail | Exam scores ONLY | 4 | 3 | 5 | I wish we had a little more evaluation and feedback. | Honors/Pass/Fail | provides a little more motivation, but have to recognize that this engenders competition. |
| Juic | 1 433/1 4II | EAGIII 300103 OINET | 7 | <u> </u> | , | The Yale System allows for students to learn at their | 11011013/1 a33/1 all | recognize that this originates competition. |
| Yale University | Pass/Fail | Exam scores ONLY | 5 | 4 | 5 | own pace in the way they learn best. | I would not change it. | same as above answer. |