Clinical Rotations and Student Assessment

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First of all -

- Thank-you for helping us train and educate our medical students!!!
Medical Students: 3rd Year

- Third year = an uneasy transition from the concepts and methods learned in labs/classrooms - to the real world of medicine.

- Our clinical rotations are normally 4 weeks long, and prepare the student for a well-rounded basic introduction to medicine.

- “Specialization” is usually not encouraged until the fourth year.
Medical Students: 3\textsuperscript{rd} Year

- All student grading or assessment is based on expectations.

- Expectations of how students behave, and what they should do and know – must be based on what the Curriculum Committee and Clinical Departments at COMP have developed, which is linked to national standards.
Scoring and Assessment

• We should explain our expectations to you - the preceptor,
• You should use those expectations in your assessment of our students,
• Your expectations, if they differ from ours, should be forwarded to the Clinical Education Department so we can evaluate them and use them if appropriate (alignment with COCA accreditation standards).
Our Imperfect Model = RIME

- **RIME**: our learning assessment model and the foundation of our student clinical rotation scoring is called RIME,
- It was developed by Dr. Louis Pangaro (of the Uniformed Services University of Health Sciences),
- RIME is based on student growth over time,
- *There is reason in RIME.*
The “RIME” Model

• **R = Reporter:** the clinician can report on the clinical information they obtained, and can judge correctly what is meaningful and what is not, third year students should be good at this,

• **I = Interpreters** of medical information who are able to develop a differential diagnosis independently, and who make the case for the diagnosis. This is what much of third year rotations is about.

• **M = Manager:** the clinician can develop a diagnosis and a management/therapeutic plan for the patient. The manager can factor in cost/benefit/risk, this is what much of fourth year rotations are about.

• **E = Educator:** the clinician is at a level where they can see patterns and develop insights, they can educate others. Internship/residents.
RIME model for a 3rd year student:

- **History taking** = proficient,
- **Physical exam** = proficient,
- **SOAP notes, charting** = still learning, needs practice,
- **Oral case presentations** = still learning, needs practice,
- **Develops differential diagnosis** = still learning, needs practice,
- **Develops treatment plans** = still learning, needs practice,
- **Performs routine medical procedures** = still learning, needs practice.
New Innovations Website Grading:

- The grading rubric is a balance between detail and brevity,
- Please use caution when going through it and grading a student, especially focus on:
  - third year student expectations for reference,
  - the last page the grading software asks you for an **OVERALL** student performance score – please know this is an important score for the student,
- The last scoring question asks you to reveal any reservations you might have about the student becoming a physician. If you have reservations about the student, please answer “YES” – and add specific comments about why you are concerned.
- Alignment = if you scored the student highly – please make sure that scoring aligns with your final score and comments.
Other expectations:

• We are trying to prepare physicians who will be caring, compassionate and competent,

• We expect our students to be:
  • Polite and professional,
  • Prompt and on-time,
  • Curious and self-directed.
Some sources:


