THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER

UT Health Science Center:		
COM129 - Provision of Formative Assessment and Feedback to Medical Students in the Pre-Clinical		
Phase - COM Medical Education		
Version 2	Publication Date: 06/26/2025	

No./Title: COM129/Provision of Formative Assessment and Feedback to Medical Students in the Pre-Clinical Phase	Resp. Office: Medical Education Approval Body: CUME	Effective Date: 6/20/22
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Contact: Michael Whitt, PhD Associate Dean, Medical Education	2 901-448-4634	mwhitt@uthsc.edu
Related Policy: N/A		

POLICY

It is the policy of the University of Tennessee Health Science Center (UTHSC) College of Medicine (COM) to provide medical students with formative assessment/feedback in every course in the pre-clinical curriculum. The text below defines formative feedback, lists the types of activities used in the pre-clinical curriculum to provide formative feedback, makes suggestions regarding acceptable amounts of formative feedback, and establishes guidelines for ensuring that students recognize these activities as such.

RATIONALE

The Liaison Committee on Medical Education (LCME) Element 9.7, Formative Assessment and Feedback, states: "The medical school's curricular governance committee ensures that each medical student is assessed and provided with formal formative feedback early enough during each required course or clerkship to allow sufficient time for remediation. Formal feedback occurs at least at the midpoint of the course or clerkship. A course or clerkship less than four weeks in length provides alternate means by which medical students can measure their progress in learning."

PROCEDURE

DEFINITION OF FORMATIVE FEEDBACK ACTIVITIES:

Formative feedback activities are typically ungraded or low-stakes opportunities to promote and measure student knowledge and skills. Formative feedback is ongoing and helps students to better understand the limits of their own knowledge and how to improve. It is specifically designed to help students recognize their strengths and weaknesses, and target areas that need work. Formative feedback activities also help faculty identify where students are struggling and address problems immediately, thereby impro ving the quality of instruction.

TYPES OF ACTIVITIES THAT PROVIDE FORMATIVE FEEDBACK IN THE PRE-CLINICAL PHASE:

- In-Class Poll Everywhere (or equivalent) Questions
- Quick Think Questions
- Think-Pair-Share Activities
- Flipped Classroom Sessions
- In-Class Practice Quizzes

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- eMedley Practice Quizzes
- USMLE ScholarRx Practice Quizzes
- Team Based Learning (TBL) Sessions
- Clinico-Basic Science Conference (CBC)
- Clinico-Pathologic Conferences (CPC)
- Case-Based Instruction/Case-Based Workshops
- Instructor-Led Small Group Discussions
- Practice Practical Exams
- Oral or Written Feedback During Basic Science/Clinical Skills Lab Sessions
- Formative OSCEs (Objective Structured Clinical Examinations)

QUALITY AND QUANTITY OF FORMATIVE FEEDBACK:

The quality of formative feedback is important. It must cover the breadth of knowledge required and adequately represent the difficulty level of items on the summative assessment used to evaluate student performance in the course.

Quantity of formative feedback is also important. At a minimum, each course or module should offer the following:

- Every in-class session should contain at least one active learning segment utilizing Poll Everywhere (or other polling platform) questions, quick think questions, think-pair-share activities, or case-based instruction. Instructors should model critical thinking skills and application of basic science knowledge.
- Formative practice quizzes provided before and after the midpoint of the course. Rationales for both correct and incorrect answers should be included to allow students to remediate gaps in their learning.
- At least one TBL, CBC, CPC, Case-Based workshop, laboratory, or clinical skills session per module/course.
- Courses with graded practical or clinical skills components should include at least one practice practical (may be tutor led) or formative OSCE.

TIMING OF FORMATIVE FEEDBACK:

Sufficient formative feedback must be offered by the mid-point of the course to allow students to identify areas of weakness in their learning and remediate knowledge gaps prior to final summative assessment.

REPORTING OF FORMATIVE FEEDBACK:

Course and module directors will report on the type and amount of formative feedback on annual course/module improvement forms and on 3-year course review forms. This will allow the Course and Module Director Curriculum Subcommittee (CMDCS) and CUME to monitor and document formative feedback across the pre-clinical curriculum, and report to LCME as required.

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Courses or modules that fail to meet minimum standards for formative feedback/assessment will be identified and course/module directors will be tasked by the Associate Dean for Medical Education with developing an improvement plan to remedy the deficit.

ENSURING THAT STUDENTS RECOGNIZE THESE ACTIVITIES AS FORMATIVE FEEDBACK:

It is equally important to make sure that students recognize formative feedback opportunities in the preclinical curriculum. Formative feedback activities should be clearly labeled as formative. This can be achieved by adhering to the following guidelines.

- Course/module directors should preview formative feedback opportunities that will be offered during that block during course/module orientation sessions.
- All slides containing Poll Everywhere questions, quick think questions, or think-pair-share questions should be labeled as FORMATIVE FEEDBACK. A text box containing the words "FORMATIVE FEEDBACK" somewhere on the slide will be sufficient.
- All practice quizzes (in class, eMedley, USMLE ScholarRx) should have the word FORMATIVE in their titles.
- All flipped classroom sessions, TBLs, CPCs, SDLs, Case-Based Discussions/Workshops, and Instructor-Led Small Groups Discussions should be marked as FORMATIVE in eMedley.
- Non-Summative OSCEs should be labeled FORMATIVE on eMedley and on the PCM Webpage.

APPROVAL HISTORY

Effective: 6/20/22 Revised: 6/19/25