Assessment Policy

for

Undergraduate Medical Students in Nishtar Medical University

Department of Medical Education

Nishtar Medical UniversityMultan

No. 16620/NMU — dt 18-9-2025 **Dated: 16/9/25**

Assessment Policy for Undergraduate Medical Students in Nishtar Medical University

Purpose

The purpose of this Undergraduate Medical Education Student Assessment Policy is to establish student assessment practices within the undergraduate medical education program of Nishtar Medical University. The policy has been developed by the Department of Medical Education (DME), tasked to *"establish, monitor, and update an internal assessment system throughout the entire undergraduate medical curriculum for MBBS."*

This document is intended to complement the assessment policy of Khyber Medical University, which is responsible for conducting annual summative assessments and certification of the MBBS degree.

1) Roles of Different Departments in Internal Assessments

- The structure of internal assessment in NMU will be **formative**, including both written and practical assessment (OSPE / OSCE) following the programmatic assessment policy of NMU.
- Assessment of clinical training also includes **short cases, long cases, and viva**.
- Work-place based assessment techniques like **Mini-CeX** and **Case-based discussions** will be gradually introduced in these years.
- The **DME** will have oversight of the whole process of assessment.
- **Module directors** will be responsible for developing, organizing, and reviewing the assessment items including MCQs and OSPE preparation in consultation with respective departments and faculty.
- **Question bank development, written paper checking, results declaration, item analysis, and communication** will be the responsibility of DME / Examination Department.

- The schedules of assessments are developed by the **College Curriculum Committee (CCC)** at the start of academic years.

2) Assessment Plan

- Internal assessment schedules are provided in study guides and published on the college website.
- Frequency of assessments follows the modules and blocks of each year.
- At least **3 internal assessments** will be arranged per academic calendar for each year (Years 1–5).
- Years 1 and 2: assessments held in the same week after each block/module to ensure faculty and venue availability.
- Years 3 and 4: follow the same pattern.
- Year 5: written assessments in college; practical assessments in hospital.
- Written assessments: **MCQs / SAQs**.
- Practical assessments: **OSPE / OSCE** (short cases, long cases).
- During clinical rotations, each unit/ward will conduct its own clinical examination/TOACS at the end of rotation. History copies and logbooks will be checked and marked. Feedback and marks records will be sent to DME.

Paper preparation process:

- Questions collected by module directors.
- Reviewed by Department of Medical Education with relevant faculty.
- Finalized papers forwarded to IT personnel of Examination Department for printing.

Weightage:

- Cumulative **20% marks** of internal assessments (10% written, 10% practical) are included in summative assessments by KMU.
- Communicated to KMU by DME before end-of-year assessment.

3) Standard Setting Procedure

- A defensible cut score of **50%** is pre-determined for both written and practical assessments, in accordance with KMU.

4) Item Analysis

- Item analysis of all written questions is conducted by the Examination Department at the end of each exam.
- Results are shared with the respective module director.

Questions having low reliability and validity (less than 0.5) will be discarded and appropriate changes will be done in the results of each student.

5) Question / Item Bank

- All MCQs and OSPE / OSCE stations will be stored in an item bank.
- The item bank will be developed and managed secretly by IT personnel of the examination section.
- These items will be used in future internal assessments and also shared with KMU for inclusion in summative examinations.
- In case of leakage of items, they will either be modified or discarded.

6) Examination Day

- Students with **less than 50% attendance** in the respective module/block will not be allowed to appear in internal examinations.
- Results of students with **50–70% attendance** will not be displayed until attendance crosses 70% in the next block/module.
- Attendance records will be provided by respective departments to the examination section.
- **No cellular phones** are allowed in examination venues.
- Students attempting to steal the confidentiality of questions will be debarred from the current examination, and their names will be presented to the disciplinary committee for further action.

7) Remediation Examinations

- Remedial examinations will only be arranged for **latecomers of Year 1** due to multiple reasons.
- These examinations will only be conducted in **Block A (foundation and blood module).**

8) Assessment of Clinical Rotations

- Logbooks and history books used during clinical rotations will be used for internal assessment.
- **10% additional marks** will be allotted during internal assessment of the last examination in academic years 3–5.
- These documents will be presented to the DME for awarding marks.
- Similarly, logbooks and history copies will earn extra marks in end-of-year practical assessments.
- A **TOACS station** dedicated to reviewing logbooks and history copies will be included in Year-5 practical examinations.

9) Appeal Mechanism by Students about Results

- In case of discrepancy or any other problem related to results of internal assessments, students must write an application addressed to the Director Medical Education (DME).
- The application should highlight issues such as grace marks, wrong results, rechecking, and re-totalling of paper marks.
- The DME will make relevant decisions in consultation with the chairperson of the concerned department or course coordinator.
- **No grace marks** will be allocated in MCQs.
- Up to **5 marks** can be awarded during results compilation.
- The **fee for appeal** will be decided by the Dean.

10) Students' Feedback on Assessment

- Feedback should be a regular occurrence.
- It will be collected both informally and formally.
- Formal feedback is part of routine evaluation surveys conducted each year at the end of sessions.

11) Oversight

- The College Assessment Committee will have oversight of internal assessments.
- The DME will provide training opportunities for:
    - Module directors

- Course coordinators
- Members of the Assessment Committee
- Any other interested faculty members

- These training opportunities aim to help faculty develop skills and expertise in:
  - Developing questions
  - Conducting assessments
  - Evaluating internal assessments

Signatories

- Dr. _____, Director Medical Education, NMU
- Prof_____, Chairman Department of _____, NMU
- Prof. _____, Dean, NMU

- This document was prepared by the **Director Medical Education (DME)** for the academic year **2025–26**.
- It was reviewed by the **College Assessment Committee** and the **Dean of NMU**.
- The document needs to be **regularly updated**.

Contact Information (for queries)

- **Dr.**_____Director Medical Education, NMU Phone: +92 9221384-157, +92 9221384-123 Email: _____@gmail.com

VICE CHANCELLOR
NISHTAR MEDICAL UNIVERSITY
MULTAN.