

Diagnosis Justification: SCCX Class of 2013
Southern Illinois University School of Medicine

Instructions for Rater:

- Read and grade each student response using the performance quality anchors of **Excellent**, **Competent**, **Borderline**, or **Poor**. Provide additional comments as desired. Your comments will be provided to the student.
- Complete the *additional* checklist for items 3 and 4 for students rated *Borderline* or *Poor*.

DXJ Grading Recommendations (Approved by Committee March 7, 2011)

- Two faculty raters will be used for each set of patient notes
- Three items: Differential Diagnosis, Recognition/Use of Findings, Thought Processes/Knowledge Utilization
- All 3 items to have equal point values. Total possible: 9 pts.
- DXJ to count for 20% of case grade.

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Student Number: Click here to enter text.

Case:

Evaluator: Click here to enter text.

Date: Click here to enter text.

1. **Differential:** Based on the diagnostic possibilities discussed did the student consider an appropriate range of diagnostic possibilities given the findings of the case?

0 Poor 1 Borderline 2 Competent 3 Excellent

2. **Recognition and use of key findings (Pertinent positives and negatives alike) in building an argument for the final diagnosis**

0 Poor 1 Borderline 2 Competent 3 Excellent

To be completed only for students rated poor or borderline in this section

- Some key findings not noted.
- Student reported findings that were not present in this patient.
- Failed to drill down sufficiently while collecting data to understand the patient's problem
- Student failed to recognize significance and/or meaning of some key findings.
- Some key findings were misinterpreted.

3. **Thought Processes and Clinical Knowledge Utilization**

0 Poor 1 Borderline 2 Competent 3 Excellent

To be completed only for students rated poor or borderline in this section

- No response or a response that just re-asserted the diagnosis without providing supporting evidence.
- Organization reflects **routine unfocused data collection** rather than an active effort to link diagnostic models of disease and patient findings (functioned as a reporter rather than interpreter of findings)
- Student was overly focused on defending a single diagnosis. Student failed to actively consider alternative explanations.
- Response reflects a superficial analysis and/or an oversimplified understanding of the patient's medical problems (Examples: Student used one or two pieces of information to support the diagnosis. Student failed to explicitly address disconfirming evidence. Student failed to explicitly address pertinent negatives).
- Response reflects erroneous understanding of the constellation of findings associated with one or more diagnoses considered.
- Failed to organize and summarize findings in a productive way
- Conclusions that could be supported by data were not drawn
- Available data contradict the student's conclusions

Comments: