

Precision, Personalization, and Progress: Traditional and Adaptive Assessment in Undergraduate Medical Education

Ritcha Saxena^{1*} Kevin Carnevale² Oleg Yakymovych³ Michael Salzle⁴ Kapil Sharma⁵ Ritwik Raj Saxena⁶

1*Department of Biomedical Sciences, University of Minnesota School of Medicine, Duluth, Minnesota, USA

2 Department of Pathology, Des Moines College of Osteopathic Medicine, Des Moines University, Iowa, USA

3 Department of Internal Medicine, Sound Physicians, Saint James Hospital, Butte, Montana, USA

4 Department of Internal Medicine, Kern Medical Center, Bakersfield, California, USA

5 Department of Information Technology, Delhi Technological University, New Delhi, India

6 Department of Computer Science and Department of Physics and Astronomy, University of Minnesota-Duluth, Duluth, Minnesota, USA.

* Address for correspondence: Ritcha Saxena

Department of Biomedical Sciences, University of Minnesota School of Medicine, 1035 University Dr, Duluth, MN 55812, United States. Email address: rsaxena@d.umn.edu

Received: 30 June 2023 / Revised: 5 August 2023 / Accepted: 23 August 2023 / Published: 11 September 2023

Abstract

Medical education is a continuously evolving field, shaped by centuries of innovation and transformation. This article explores the integration of adaptive and traditional assessments in medical education, highlighting their significance in fostering competent, adaptable, and resilient future healthcare professionals. The ongoing evolution of medical education requires adaptive, flexible methodologies capable of assessing a wide range of competencies, from clinical skills to ethical conduct and the ability to drive changes in healthcare delivery. Adaptive assessments are at the forefront of reshaping medical education. Adaptive assessments provide personalized evaluation, bridging the gap between theory and practice, enhancing effectiveness and empathy in medical education. They ensure precision in evaluation, individualized learning paths, and optimized learning efficiency. Real-time feedback, minimized bias, and data-driven insights further enrich the learning experience. This collaborative approach fosters an environment where students and educators work together toward academic excellence. By continuously refining assessment methods, medical education equips students with the adaptability needed in modern healthcare. As medical education advances, the integration of adaptive and traditional assessments remains at the vanguard, shaping the future of medical education and the quality of patient care. This comprehensive review serves as a valuable resource for educators and learners, sparking constructive dialogues and motivating individuals to enhance their learning processes, ultimately contributing to the delivery of high-quality healthcare services. It underlines the importance of embracing adaptive assessments and their pivotal role in the future of medical education.

Keywords: adaptive assessments, medical education, competency-based education, personalized evaluation, tailored learning, individualized learning paths, data-driven improvement **BACKGROUND**



Medical education constitutes a multifaceted undertaking that integrates a diverse array of teaching methods and assessment approaches. It is an ever-evolving discipline aimed at nurturing proficient and empathetic healthcare professionals. The evolution of medical education, spanning centuries, has witnessed numerous innovations and transformative shifts. This ongoing process has led to the development of an increasingly refined curriculum housed within intricate learning environments.¹⁻³ The evaluation of learning within this dynamic context necessitates comprehensive, adaptable, and flexible methodologies that can effectively assess knowledge acquisition, the development of clinical skills and competencies, ethical and professional conduct, as well as the ability to identify critical areas requiring change in healthcare delivery and the means to implement these changes ⁴⁻⁹

For students in medical school, encountering academic challenges can be an emotionally charged experience. These students have a history of exceptional academic achievements leading up to this point, and their struggles may be characterized by defensiveness, self-doubt, and a lack of insight regarding their capacity for improvement.^{10,11} It is imperative that these struggling learners receive institutional support to address their shortcomings. In the pursuit of excellence, educators can employ a range of assessment methods, including both traditional and adaptive approaches.

The landscape of medical education has entered a new era, marked by the integration of adaptive assessment methods. In contrast to traditional evaluations, adaptive assessments offer a tailored learning experience for each student, fundamentally transforming the way medical knowledge and skills are acquired and evaluated. This shift represents an alternative approach to educational innovation for medical schools aiming to cater to the unique learning needs of students with diverse abilities and educational backgrounds.^{12,13} At the core of adaptive assessment design lies the fundamental belief that students possess distinct learning styles and progress at varying rates, necessitating diverse forms of instructional support.¹⁴ Adaptive assessment serves the learning program in two pivotal ways: firstly, it empowers students to proactively navigate their learning journeys through continuous self-assessment and program-based evaluation; and secondly, it facilitates the coordination and deployment of educators, technological resources, and other learning aids.¹⁵ One of the primary advantages of adopting adaptive assessment is that it simultaneously addresses two critical aspects—identifying the areas where learners struggle and emphasizing metacognitive facets of the learning process—both of which are crucial for successful remediation.¹⁶ While the application of adaptive testing in medical education remains relatively sparse, a central objective of an adaptive curriculum linked with an assessment system is to prepare medical students to reach their fullest potential, fostering a lifelong journey of self-directed and informal learning. This results in the development of master adaptive learners who can discern their strengths and weaknesses and formulate real-time plans for improvement.¹⁷

To more actively incorporate adaptive assessment in medical education, educators must demonstrate a keen interest in contemporary measurement theories, such as item response theory and relevant technologies. Nurturing adaptive expertise demands meticulous approaches to instructional and assessment design that accentuate profound and effortful learning.¹⁸ These assessment strategies may be time-consuming, demanding, and challenging to implement in health professions education curricula. Nonetheless, the rewards become evident when the learners' progress is substantial. The successful



adoption of adaptive learning hinges on the cultivation of metacognitive skills, the ability to reflect on one's own thought processes.¹⁹

The efficacy of adaptive assessment in medical education as a tool for examining examinees' abilities remains uncertain. However, we should prepare for its future application in high-stakes examinations, including board examinations. This article delves into the significance of these assessment methodologies in medical education and explores how they are revolutionizing the evaluation of medical students.

The Essence of Adaptive Assessment

Adaptive assessment stands as a significant departure from conventional one-size-fits-all testing methods. Rooted in data analysis, adaptive assessment paves the way for personalized learning journeys. By dynamically adjusting question complexity based on individual responses, this approach delves deep into a student's comprehension. The result is a tailored experience that challenges students at their own level, fostering a holistic grasp of medical concepts.²⁰

Firstly, precision in evaluation stands out as a hallmark of adaptive assessment. It accurately measures each student's competence, offering pinpoint accuracy in identifying areas that need improvement. Secondly, adaptive assessment paves the way for individualized learning paths. In contrast to the traditional model, which often neglects the diverse learning speeds and styles of students, adaptive assessments break free from this mold. They cater to the unique strengths and weaknesses of each learner, cultivating a sense of ownership over their education. This personalization not only enhances engagement but also nurtures a profound understanding of medical intricacies.²¹ Adaptive assessments adapt to each student's strengths and weaknesses, enabling them to concentrate on areas in need of improvement while swiftly progressing through mastered topics. It addresses issues such as adapting to new situations, comprehending overarching themes, and setting and achieving goals. Furthermore, it assists learners in managing their priorities effectively during their academic journey.²²

Furthermore, adaptive assessment optimizes learning efficiency. With adaptive assessment, when students embark on personalized learning journeys, they are able to hone in on the areas where they require the most attention. This approach addresses issues such as low performance outcomes, challenges in operationalizing strategies, and effective self-assessment calibration. Furthermore, it enhances time efficiency, allowing students to progress at their own pace, thus reducing the time required to cover the curriculum while maintaining a deep understanding.²³ The real-time feedback offered by adaptive assessment strategy is another advantage. Adaptive assessments offer a remarkable advantage with their ability to pinpoint learning gaps in real-time.^{24,25} This capability enables educators to intervene promptly, providing targeted support. It not only guarantees academic success but also instills a habit of continuous learning, a cornerstone of a prosperous medical career. Real-time feedback plays a significant role in promoting continuous learning and minimizing misconceptions. It keeps students engaged and motivated to excel. Objective evaluation is another core attribute of adaptive assessments. These assessments minimize bias and subjectivity in evaluation, ensuring that each student's performance is objectively measured against predefined learning objectives. Objective evaluation results in minimizing potential bias during assessment.^{26,27}



Finally, adaptive assessments generate data-driven insights. The measurement of efficacy is a critical aspect of learning and development. Educators, too, reap the benefits of adaptive assessments, with the ability to evaluate the efficiency of the content consumed and make recommendations for improvement. Adaptive assessment platforms generate important data that educators can use to identify trends, assess teaching methods, and continually enhance the curriculum. Educators can analyze this extensive data to learn, adapt, and provide suitable recommendations for students and teachers alike.²⁸

Accessing reliable data is crucial for learners, instructors, and educational leadership to test assumptions, recalibrate, and make decisions aimed at implementing suitable actions. This data-driven strategy enhances the quality of teaching methods and curriculum design continually. Evaluating the effectiveness of content consumption from multiple angles can lead to content refinement based on various metrics such as user behavior, cognitive analysis, performance, sentiment analysis, and adaptive personalization analysis. The utilization of evaluation data aids in improving both learner and program performance and fosters a collaborative educational environment that encourages students and educators to work together to achieve academic excellence.²⁹⁻³¹

Key Components of Adaptive Assessment

Adaptive assessment incorporates several key components essential to its functionality. The foundation of adaptive assessments lies in adaptive algorithms. These algorithms serve as the core engines, driving the assessment process. They meticulously analyze a student's responses to prior questions, discerning areas of proficiency and deficiency. Subsequently, these algorithms select the next set of questions, ensuring the assessment aligns with the individual learner's strengths and weaknesses. By analyzing performance data and available content, these algorithms construct personalized study plans tailored to a student's specific requirements.^{32,33}

Item banks also play a pivotal role. Adaptive assessments rely on extensive item banks that encompass a wide array of topics and difficulty levels. The choice of questions is contingent on the student's performance and the intended learning outcomes, guaranteeing a customized assessment experience. Moreover, the element of feedback loops is crucial. Adaptive assessments offer immediate feedback to students after each question. This feedback provides valuable insights into their performance and highlights areas necessitating improvement. Progress tracking is also integral to adaptive assessments. Students and educators can seamlessly monitor progress over time. This feature empowers them to identify trends, recognizing areas of concern that require attention and excellence that deserves reinforcement. ³⁴⁻³⁶

Finally, customization is a most important aspect of adaptive assessment platforms. Educators can tailor assessments to align with specific learning objectives and program goals, further enhancing the adaptability and relevance of these assessments in diverse educational contexts.

Traditional assessments

Traditional assessments encompass written exams, practical evaluations, and clinical assessments, playing pivotal roles in evaluating students' competencies and ensuring the attainment of essential learning objectives. They serve a triad of fundamental purposes: firstly, as a means of conducting baseline competency evaluation, providing standardized measurements to verify students' proficiency in meeting crucial learning objectives. Secondly, they enable the evaluation of clinical skills, assessing a student's



capacity to apply their knowledge in real-world medical scenarios, thereby ensuring their readiness for patient care. Lastly, traditional assessments, often in the form of national and international licensing exams, create standardized testing criteria that establish common standards for medical professionals on a national and global scale.³⁷

Balancing traditional and adaptive assessments

In striving for a holistic approach to the evaluation of medical students, the integration of both adaptive and traditional assessments is imperative. By combining the strengths of both methodologies - customization and precision from adaptive assessments and the standardized benchmarks of traditional assessment, it allows for progressive learning. Adaptive assessments also adapt to students' evolving needs, complementing the essential role of traditional assessments in conducting end-of-term evaluations. This equilibrium between the two assessment methods bridges the gap between real-world readiness and continuous learning. Traditional clinical assessments confirm a student's preparedness for real-world patient care, while adaptive assessments stimulate ongoing learning and mastery, creating a comprehensive evaluation process for medical education.³⁸⁻⁴⁰

The implementation of adaptive assessments heralds a new era in medical education. It aligns perfectly with the demands of the modern healthcare landscape, where adaptability and personalized care are paramount. By equipping future healthcare professionals with not just knowledge but also the ability to apply it in diverse scenarios, adaptive assessments are shaping a generation of doctors who are prepared to navigate the complexities of 21st-century healthcare.⁴¹

Conclusion

In light of the rapid changes in healthcare, it has become imperative to adapt the training of medical students accordingly. This evolution is not merely a choice but a necessity, equipping students with the essential skills to acquire knowledge, acclimate to transformations, and excel in the ever-evolving healthcare landscape. The field of medical education is currently undergoing a significant transformation through the integration of both adaptive and traditional assessment methods. These innovative approaches offer a comprehensive and individualized evaluation of medical students, ensuring that they not only attain competency but also cultivate adaptability and resilience as future healthcare professionals.

This review article aims to provide valuable insights for both medical educators and students, enabling them to gain a deeper understanding of the role of adaptive assessments in the evolving landscape of medical education. As adaptive assessments are increasingly integrated into medical curricula, they bridge the divide between theoretical knowledge and practical application. By embracing this tailored approach to learning and evaluation, medical education becomes not only more effective but also more empathetic. Adaptive assessments are not merely tools; they serve as catalysts for a transformative educational experience, laying the groundwork for a generation of healthcare professionals who are not only academically proficient but also adaptable, compassionate, and poised to revolutionize the field of medicine.

Through the incorporation of both adaptive and traditional assessments, medical educators can better prepare future healthcare professionals to meet the multifaceted challenges of their careers. These assessments instill adaptability and resilience, enabling graduates to navigate the complexities of modern healthcare successfully. As medicine continues to advance, this blended assessment approach stands at the forefront of shaping the future of medical education and, by extension, the quality of care that



patients receive. The objective of this review is to serve as a valuable resource that informs and sparks constructive dialogues between educators and learners. These conversations should be directed toward identifying and overcoming learning challenges while motivating individuals to enhance their proficiency and influence in the learning process. Ultimately, this collaborative effort will contribute to the enhancement of the delivery of high-quality healthcare. Furthermore, we are confident that addressing these aspects will foster the development of a robust and cohesive research agenda, instrumental in guiding a more profound exploration of the dynamic interplay between clinicians, their capacity as learners, and the clinical environment where learning and practice converge.

References

- Irby DM, Cooke M, O'Brien BC. Calls for reform of medical education by the Carnegie Foundation for the Advancement of Teaching: 1910 and 2010. Acad Med. 2010;85(2):220-227. doi:10.1097/ACM.0b013e3181c88449.
- 2. Rose S. Medical Student Education in the Time of COVID-19. JAMA. 2020;323(21):2131-2132. doi:10.1001/jama.2020.5227.
- 3. Norman G. Medical education: past, present and future. Perspect Med Educ. 2012;1(1):6-14. doi:10.1007/s40037-012-0002-7.
- 4. Epstein RM. Assessment in medical education. N Engl J Med. 2007;356(4):387-396. doi:10.1056/NEJMra054784
- 5. Wisdom J, Creswell JW. Mixed methods: integrating quantitative and qualitative data collection and analysis while studying patient-centered medical home models. Rockville, MD: Agency for Healthcare Research and Quality. AHRQ Publication No. 13.
- 6. Epstein RM. Assessment in medical education. N Engl J Med. 2007;356(4):387-396. doi:10.1056/NEJMra054784
- 7. Hadi AA, Zain NM. Student's perception toward program outcomes: a systematic review. Int J Educ Res. 2016;4:3-257-264.
- 8. Ferris HA, O'Flynn D. Assessment in medical education: what are we trying to achieve. Int J Higher Educ. 2015;4(2):139-144. Doi:10.5430/ijhe.v4n2p139.
- 9. Wisdom JP, Cavaleri MA, Onwuegbuzie AJ, Green CA. Methodological reporting in qualitative, quantitative, and mixed methods health services research articles. Health Serv Res. 2012;47:721-745.
- 10. Picton A, Greenfield S, Parry J. Why do students struggle in their first year of medical school? A qualitative study of student voices. BMC Med Educ. 2022;22:100. doi:10.1186/s12909-022-03158-4.
- Weurlander M, Lönn A, Seeberger A, Hult H, Thornberg R, Wernerson A. Emotional challenges of medical students generate feelings of uncertainty. Med Educ. 2019;53(10):1037-1048. doi:10.1111/medu.13934.
- 12. Sharma N, Doherty I, Dong C. Adaptive Learning in Medical Education: The Final Piece of Technology Enhanced Learning?. Ulster Med J. 2017;86(3):198-200.
- 13. Mylopoulos M, Regehr G. How student models of expertise and innovation impact the development of adaptive expertise in medicine. Med Educ. 2009;43(2):127-132. doi:10.1111/j.1365-2923.2008.03254.x.



- 14. Hu J, Peng Y, Chen X, Yu H. Differentiating the learning styles of college students in different disciplines in a college English blended learning setting. PLoS One. 2021;16(5):e0251545. Published 2021 May 20. doi:10.1371/journal.pone.0251545.
- Tomlinson CA, Brighton C, Hertberg H, Callahan CM, Moon TR, Brimijoin K, Conover LA, Reynolds T. Differentiating Instruction in Response to Student Readiness, Interest, and Learning Profile in Academically Diverse Classrooms: A Review of Literature. J Educ Gift. 2003;27(2/3):119-145.
- U.S. Department of Education. Reimagining the Role of Technology in Education: 2017 National Education Technology Plan Update. January 2017. Available at: https://tech.ed.gov/files/2017/01/NETP17.pdf. Accessed June 5, 2023.
- 17. Cutrer WB, Miller B, Pusic MV, et al. Fostering the Development of Master Adaptive Learners: A Conceptual Model to Guide Skill Acquisition in Medical Education. Acad Med. 2017;92(1):70-75. doi:10.1097/ACM.00000000001323
- Lajoie SP, Gube M. Adaptive expertise in medical education: Accelerating learning trajectories by fostering self-regulated learning. Med Teach. 2018;40(8):809-812. doi:10.1080/0142159X.2018.1485886
- 19. Butler AC, Karpicke JD, Roediger HL. Correcting a metacognitive error: feedback increases retention of low-confidence correct responses. J Exp Psychol Learn Mem Cogn. 2008;34(4):918-928. doi:10.1037/0278-7393.34.4.918
- 20. Chauhan V. Adaptive Assessments and Artificial Intelligence: The Future. LinkedIn. Available at: https://www.linkedin.com/pulse/adaptive-assessments-artificial-intelligence-future-chauhan/. Accessed June 11, 2023
- 21. Yang ACM, Flanagan B, Ogata H. Adaptive formative assessment system based on computerized adaptive testing and the learning memory cycle for personalized learning. Computers and Education: Artificial Intelligence. 2022;3:100104. <u>https://doi.org/10.1016/j.caeai.2022.100104</u>)
- 22. Emara N, Ali N, Abu Khurma O. Adaptive Learning Framework (Alef) in UAE Public Schools from the Parents' Perspective. Social Sciences. 2023; 12(5):297. https://doi.org/10.3390/socsci12050297
- 23. Gruppen LD, White C, Fitzgerald TJ, Grum CM, Woolliscroft JOL. 2000. Medical students' selfassessments and their allocations of learning time. Acad Med. 75:374–379.
- 24. Schez-Sobrino S, Gmez-Portes C, Vallejo D, Glez-Morcillo C, Miguel AR. An Intelligent Tutoring System to Facilitate the Learning of Programming through the Usage of Dynamic Graphic Visualizations. Appl. Sci. 2020;10:1518.
- 25. Khan RA, Jawaid M. Technology Enhanced Assessment (TEA) in COVID 19 Pandemic. Pak J Med Sci. 2020;36(COVID19-S4):S108-S110. doi:10.12669/pjms.36.COVID19-S4.2795
- 26. Taylor DL, Yeung M, Bashet AZ. Personalized and Adaptive Learning. In: Ryoo J, Winkelmann K, eds. Innovative Learning Environments in STEM Higher Education. SpringerBriefs in Statistics. Springer; 2021:17-34. doi:10.1007/978-3-030-58948-6_2
- 27. Mayer RE. Applying the science of learning to medical education. Med Educ. 2010;44:543–549)
- Choi Y, McClenen C. Development of Adaptive Formative Assessment System Using Computerized Adaptive Testing and Dynamic Bayesian Networks. Applied Sciences. 2020; 10(22):8196. <u>https://doi.org/10.3390/app10228196</u>)



- 29. Cutrer WB, Atkinson HG, Friedman E, et al. Exploring the characteristics and context that allow Master Adaptive Learners to thrive. Med Teach. 2018;40(8):791-796. doi:10.1080/0142159X.2018.1484560
- 30. Betinol E, Murphy S, Regehr G. Exploring the development of adaptive expertise through the lens of threshold concepts. Med Educ. 2023;57(2):142-150. doi:10.1111/medu.14887
- 31. Cutrer WB, Spickard WA 3rd, Triola MM, et al. Exploiting the power of information in medical education. Med Teach. 2021;43(sup2):S17-S24. doi:10.1080/0142159X.2021.1925234
- 32. Carney PA, Mejicano GC, Bumsted T, Quirk M. Assessing learning in the adaptive curriculum. Med Teach. 2018;40(8):813-819. doi:10.1080/0142159X.2018.1484083
- 33. Grotzer TA, Forshaw T, Gonzalez E. Developing adaptive expertise for navigating new terrain: An essential element of success in learning and the workplace. The Next Level Lab at the Harvard Graduate School of Education. President and Fellows of Harvard College: Cambridge, MA; 2021.
- 34. Bazrafkan L, Ghassemi G, Nabeiei P. Feedback is good or bad? Medical residents' points of view on feedback in clinical education. J Adv Med Educ Prof. 2013;1(2):51-54.
- Green ML, Moeller JJ, Spak JM. Test-enhanced learning in health professions education: A systematic review: BEME Guide No. 48 [published correction appears in Med Teach. 2022 Jun;44(6):I]. Med Teach. 2018;40(4):337-350. doi:10.1080/0142159X.2018.1430354
- 36. Kellman PJ, Krasne S. Accelerating expertise: Perceptual and adaptive learning technology in medical learning. Med Teach. 2018;40(8):797-802. doi:10.1080/0142159X.2018.1484897
- Rafiq RB, Yount S, Jerousek S, et al. Feasibility of PROMIS using computerized adaptive testing during inpatient rehabilitation. J Patient Rep Outcomes. 2023;7:44. doi:10.1186/s41687-023-00567-x
- 38. Ten Cate O, Gruppen LD, Kogan JR, Lingard LA, Teunissen PW. Time-Variable Training in Medicine: Theoretical Considerations. Acad Med. 2018;93(3S Competency-Based, Time-Variable Education in the Health Professions):S6-S11. doi:10.1097/ACM.000000000002065
- Kellman P. Adaptive and Perceptual Learning Technologies in Medical Education and Training. Mil Med. 2013;178:98-106. doi:10.7205/MILMED-D-13-00218
- Giordano A, Testa S, Bassi M, et al. Applying multidimensional computerized adaptive testing to the MSQOL-54: a simulation study. Health Qual Life Outcomes. 2023;21(1):61. Published 2023 Jun 25. doi:10.1186/s12955-023-02152-8
- 41. Gonzalo JD, Haidet P, Papp KK, et al. Educating for the 21st-Century Health Care System: An Interdependent Framework of Basic, Clinical, and Systems Sciences. Acad Med. 2017;92(1):35-39. doi:10.1097/ACM.000000000000951