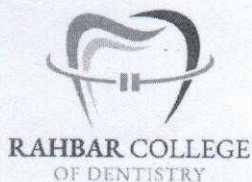


ASSESSMENT POLICY AND PLAN

REVISION 1 — Aligned with UHS Notifications dated 13-11-2025 & 17-11-2025

Supersedes/Amends: No.102/RCoD/219, Dated 09 SEP 2024




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Summary of Revisions

This revision updates RCoD's Assessment Policy and Plan (No.102/RCoD/219, dated 09 SEP 2024) to align with two UHS regulatory notifications issued after the original policy was signed: Notification No. UHS/REG-25/2351 (dated 13-11-2025) and Notification No. UHS/REG-25/2379 (dated 17-11-2025), as reflected in the BDS Integrated Curriculum 2K25 (Version 2.0). No other provision of the original policy is altered.

#	Clause	Old (09 Sep 2024)	New (Revision 1)	Basis
1	Internal vs. University Exam weightage	Internal Assessment = 10%; University Exam = 90%	Internal Assessment = 20% (10% Theory-side + 10% Practical-side); University Exam = 80%	UHS Reg. 9 & p.215 Internal Assessment table
2	Attendance scoring within internal assessment	Flat: 85% attendance = full 2%	Graduated: 75% attendance = 1%; >85% attendance = 2% (applied per Theory-side and Practical-side)	UHS Year-2 Internal Assessment table, p.215
3	Minimum attendance for exam eligibility	Flat 85% of all educational activities	Cumulative 75% overall, with 75% in each Block/Clinical Clerkship (RCoD may still require 85% as an internal target for full attendance marks but 75% is the exam-eligibility floor)	UHS Reg. 1(d)(ii); Notif. UHS/REG-25/2351
4	Theory paper format — Professional Examination	Major Theory Exam: 45 MCQs + 15 SEQs (90 marks); Minor Theory Exam: 21 MCQs + 8 SEQs (45 marks)	Professional Examination Theory paper: 120 MCQs ALONE. (College-conducted Send-up/Block exams may retain SEQs at RCoD's discretion — state this choice explicitly.)	UHS Reg. 2; Notif. UHS/REG-25/2379

Assessment Policy and Plan (Revised)

Aim: To provide a comprehensive and fair assessment system that accurately reflects student learning, development, and preparedness for professional practice in dentistry.

Objectives

- Ensure assessments are aligned with learning objectives and curricular outcomes.
- Utilize a variety of assessment methods to evaluate different competencies.
- Maintain high standards of fairness, consistency, and transparency in assessments.

1. Responsibility

All faculty and staff involved in administering and supervising examinations and assessments are responsible for:

- Ensuring adherence to assessment procedures.
- Conducting examinations and assessments under conditions that are consistent and fair to all students.

2. Principles

- Assessments in the BDS program at RCoD will be aligned with student learning objectives and course activities, including both formative and summative assessments.
- These assessments will follow the examination regulations of the University of Health Sciences (UHS).
- The university shall appoint an external examiner for the concerned exam.

- The institute will manage in-house assessments, while professional examinations will be conducted by UHS.
- Marks allocation to internal and external examiner shall be as per the university instructions of the concerned subject.
- Standardized procedures will be applied across all courses.

3. Scope

This policy applies to all undergraduate students registered in the BDS program at RCoD.

4. Assessment Policy

- Each student must appear in the yearly professional exam of all subjects specific for that particular year, to qualify for the successive year.
- There is continuous assessment throughout each year through (end of term) block exam, send-ups, and professional exam.
- Assessment procedures are as follows:

Types of Assessment Procedures

I. Formative Assessments:

- Formative assessments, conducted regularly throughout the term, provide feedback to students with the aim of enhancing their learning and improving their performance in summative evaluations.
- It is carried out informally and as required during and after lectures (e.g., 1-minute feedback, class test, problem-based questions, quizzes), tutorials (e.g., question and answer sessions), case-based discussions, written assignments, and class presentations.
- Log books contain rubrics for continuous self-assessment of the practical/clinical sessions, as well as formative assessments.
- Portfolio development is also promoted and assessed as part of the formative evaluation process.
- Reflection is a mandatory part of all laboratories, pre-clinical, and clinical exposures.
- Regular feedback sessions are held after each block/term examination to aid in improving student performance.

ii. Summative Assessments:

Conducted as end-of-term exam (Block Exam) and included within a total Internal Assessment weightage of **20% [REVISED]** (previously stated as 10%), split equally as **10% Theory-side and 10% Practical-side [REVISED]**. Each exam shall consist of theory and practical examination. The division of weightage shall be as follows:

- Written exam consists of MCQs & SEQs for Block/Send-up (internal college-level) examinations, carrying 50% weightage of the Block exam.
- Practical exam consists of OSPE/OSCE and structured viva, carrying 50% weightage of the Block exam.
- Marks of each exam (End term) are included in internal assessment.

Revised Internal Assessment structure (per UHS Year-2 Internal Assessment table): [REVISED]

- Theory-side (10% of total): Attendance — 75% attendance = 1%, >85% attendance = 2%; Block Exam (SEQs, LEQs, MCQs etc.) = 5%; Continuous assessment (SEQs, LEQs, MCQs etc., inclusive of Research component) = 3%.
- Practical-side (10% of total): Attendance — 75% attendance = 1%, >85% attendance = 2%; Block Exam = 5%; Portfolio/clinical logbooks (inclusive of Generic Competencies assessment) = 3%.
- The passing percentage for each exam is 50%.
- Candidates failing to gain passing scores in annual and supplementary exam shall be detained in the existing year.

iii. Islamic Studies/Civics and Pakistan Studies

- Islamic Studies/Civics and Pakistan Studies will be assessed in the first professional examination.

- The paper will carry 100 marks in total. Islamic Studies contains 60 marks and Pakistan Studies carries 40 marks.
- In Islamic Studies part, there will be three LEQs to be attempted out of five LEQs, carrying 20 marks each.
- In Pakistan Studies part, there will be two LEQs to be attempted out of four LEQs, carrying 20 marks each.

Note: Islamic Studies is for Muslims and Civics is for non-Muslims.

iv. Research Assessment Plan (Table 1)

- A research coordinator of each year shall submit a report in each block about the progress of each student of the given research project.
- Completion of each step in the respective year shall score for that respective year.
- Research coordinator of each year shall submit the report to Director, Research & Development Cell & Department of Dental Education.
- Department of Dental Education shall communicate the report to each internal examiner for inclusion in the respective internal assessment of each year.

Sr. No.	Status	Code	Year of Completion	Score
1	Group formation, Topic Selection, Synopsis writing	Code 1	1st Year	(0.33, 0.33, 0.33) = 1
2	Proposal submission & approval by ERC & TRC with certificates	Code 2	2nd Year	(0.33, 0.33, 0.33) = 1
3	Data Collection & Analysis	Code 3	3rd Year	(0.50, 0.50) = 1
4	Manuscript writing, Reviewing and Editing	Code 4	4th Year	(0.50, 0.50) = 1
5	Article submission & Publication	Code 5	House Job	(0.50, 0.50) = 1

v. Assessment of Generic Competencies (Table 2)

Total weightage in internal assessment = 2% (mapped within the Practical-side "Portfolio/clinical logbooks")

Competencies	Weightage Competencies Assessment (2%)	Components	Score
Professionalism	3	Communication skill / Time management / Ethics & integrity / Teamwork / Problem solving skills / Empathy in patient care	0.50 each
Critical thinker	2	Analysis / Inference	1 each
Creativity	1	Innovation	1
Leadership	1	Vision & Strategy / Decision making	0.5 each
Emotional intelligence	1	Self-regulation	1
Life-long learner	2	Curiosity / Self-directed learning	1 each

Rationalize the marks to 2% of 200 marks, which is 4. Marks obtained to be divided by 10 and multiplied by 4.

Table 3: Key for Assessment of Generic Competencies

(Unchanged from the original policy.)

Criteria	Unsatisfactory	Needs Improvement	Satisfactory	Exemplary
Communication Skills	Incoherent, unclear, or inappropriate communication	Communication is often unclear or lacks clarity	Communicates effectively and professionally	Communicates with exceptional clarity, persuasiveness, and adaptability

Time Management	Frequently misses deadlines, fails to prioritize tasks	Occasionally misses deadlines, struggles with prioritization	Meets deadlines consistently, manages time effectively	Excels at time management, consistently exceeds expectations
Ethics and Integrity	Demonstrates unethical behavior, lacks integrity	Occasionally exhibits questionable behavior, may compromise integrity	Adheres to ethical standards, maintains integrity	Exemplifies ethical behavior and integrity in all interactions
Teamwork	Reluctant to collaborate, works independently	Contributes to the team but may have difficulty working with others	Works effectively as part of a team, contributes positively	Leads and inspires the team, fosters a collaborative environment
Problem-Solving	Avoids challenges, unable to find solutions	Struggles to solve problems independently, needs guidance	Solves problems effectively with occasional guidance	Consistently identifies and solves complex problems creatively and efficiently
Patient Care	Neglects patient needs, provides substandard care	Provides adequate patient care but may lack empathy or compassion	Delivers high-quality patient care, demonstrates empathy	Excels at patient care, consistently goes above and beyond
Critical thinker: Analysis	Unable to identify key components or relationships	Identifies some components but struggles to analyze relationships	Analyzes information effectively, identifies key components and relationships	Excels at analysis, breaks down complex information into its constituent parts and evaluates their significance
Critical thinker: Inference	Makes unfounded or illogical conclusions	Draws some inferences but may lack supporting evidence	Draws logical inferences based on evidence	Excels at inference, draws insightful and well-supported conclusions
Creativity/Innovation	Lacks innovative ideas, relies on conventional approaches	Shows some innovation but may struggle to generate truly novel ideas	Demonstrates innovation, presents new and original approaches	Excels at innovation, generates groundbreaking and transformative ideas
Leadership: Vision and Strategy	Lacks clear vision and strategic direction	Has a basic vision but may struggle to articulate it	Develops a clear vision and strategic plan	Excels at vision and strategy, inspires and motivates others with a compelling vision
Leadership: Decision-Making	Makes poor decisions, lacks judgment	Makes reasonable decisions but may need guidance	Makes sound decisions, demonstrates good judgment	Excels at decision-making, consistently makes effective and strategic choices
Emotional intelligence: Self-Regulation	Unable to manage emotions effectively, reacts impulsively	Manages emotions but may struggle with stress or conflict	Effectively manages emotions, controls impulses	Excels at self-regulation, consistently demonstrates emotional maturity and resilience
Life-long learner: Curiosity	Lacks curiosity, shows little interest in learning	Shows some curiosity but may	Demonstrates curiosity, is eager	Excels at curiosity, is highly curious and motivated to seek out

		not be motivated to explore new things	to learn and explore new ideas	new knowledge and experiences
Life-long learners: Self-Directed Learning	Relies heavily on external guidance, struggles to learn independently	Takes some initiative in learning but may need guidance	Effectively learns independently, sets goals and takes responsibility for own learning	Excels at self-directed learning, is highly motivated and self-disciplined, able to learn effectively on their own

vi. Complete Assessment Criteria (Table 4)

Weightage figures below are updated to 20% Internal / 80% University Exam. [REVISED] All other content (frequency, methods/tools) is unchanged from the original policy.

Type of Assessment	Weightage	Frequency and Time	Methods/Tools for Assessment
Formative	—	Informally during and after the session	Class tests (MCQs, SEQs), Class presentations, Assignments, Tutorials, Case Based Discussions, Problem Based Learning, Portfolios
Summative — Internal Assessment [REVISED: 20%, was 10%]	20%	Block exam, Research, Send-up score, Attendance (Lecture & Clinical/Lab), Generic competencies — see Section 4(ii) for the Theory-side/Practical-side breakdown	MCQs (one best answer), SEQs, OSPE (non-clinical years), OSCE (clinical years), Simulated patients and Phantom head lab procedures, Viva Voce, Logbook and clinical quotas, Assessment of generic competencies through rubrics
Summative — University Exam [REVISED: 80%, was 90%]	80%	Once at the end of academic year	Theory paper: MCQs (one best answer) ALONE, effective Annual 2026 [REVISED — SEQs removed]. Practical/Oral: OSPE (non-clinical years), OSCE (clinical years), Logbooks and Clinical cases quotas, Viva Voce (unchanged)

vii. Assessment Format

Professional (University) Exam Theory Format: [REVISED]

Effective Annual 2026 Examinations, the Professional exam Theory paper consists of **MCQs ALONE** (no SEQs), per UHS Regulation 2 / Notification No. UHS/REG-25/2379. Total Theory marks are revised downward to align with the new Marks Distribution Major subjects Theory = 80 marks (all MCQs); Minor subjects Theory = 40 marks (all MCQs)..

a. MCQs Format (unchanged)

- MCQs in all exams will be single best type.
- There will be five options in each MCQ.
- There will be no negative marking.
- MCQs will be of C2 and C3 level.

Professional (University) Exam Oral/Practical/Clinical Format: [REVISED]

- Major Subjects: Oral and Practical Examination shall have 80 marks
- Minor Subjects: Oral and Practical Examination shall have 40 marks

Practical/Clinical assessment will be done with OSPE/OSCE stations with the weightage as mentioned above.

5. Assessment Planning

A: Planning Process

- Coordinator Responsibility: Year in-charge will develop consensus among subject heads for block exam and (send-up) at the session's start, with final approval by the Principal of RCoD, to be included in the Academic calendar.
- No Overlap: Ensure that no overlap of class tests occurs between different subjects.
- Learning Objectives: Each course will outline learning objectives and give details on how students' achievement of objectives will be assessed.
- Syllabus Assessment Plan: Each department will develop a plan according to the Table of Specification, including methods, timing, and contributions to the final mark of all assessments.
- Table of Specification: Each department will follow the ToS created by the university UHS.
- Discussion with Specialists: Discuss assessment planning documents with Subject Specialists to ensure appropriate curricular representation.

6. Examination Development and Administration

a. Development Process

- Question Pool: Course head, with teaching faculty, will develop a departmental assessment question pool.
- Pre-exam analysis: Subject head with their faculty will revise question items with dental education before submitting in a password-protected flash drive to the department of dental education. Department of dental education shall approve the formatting of reviewed questions two weeks prior to the assessment date.
- Question paper printing & Answer sheets: Course head will collect the printed papers with answer sheets in sealed envelopes from department of dental education on the day of examination.
- Conduct of exam: The seals of papers shall be opened in the examination halls in the presence of candidates and two invigilators. The whole activity shall be monitored.
- Post-Item Analysis: Post-item analysis of MCQs will be done at departmental level using a software. The report will be discussed in a meeting in the department and minuted. Based on the item analysis report and subject in-charge approval, the MCQs will be modified or eliminated from future exams. Also, re-scoring if a significant number of items are problematic.
- Results Notification: Results will be notified to the students within two weeks of the examination.
- Post-Examination Feedback: Feedback after each assessment will be provided.

7. Eligibility Criteria

A: Attendance

Minimum **75% cumulative attendance [REVISED]** of all educational activities, i.e., lectures, SGDs/tutorials, practical/ clinicals, official symposia, co-curricular/extra-curricular activities including sports day and community visits, with at least 75% attendance maintained in each Block/Clinical Clerkship (previously stated as a flat 85%).

- Leave is considered an absence unless supported by valid documentation.

B: Supplementary Students

- Supplementary students must attend classes of the new academic session for better subject orientation.
- Lecture attendance will be 80%, counted immediately after the supplementary theory exam.

C: Detained Students

- Must pass all end-of-term (block exams) and send-up tests and attend planned lectures.
- Detained hostel students' lecture policies may vary with the Principal's permission.

8. Assessment

- Pass mark is 50% of total test scores for each subject, applied independently and concomitantly to Written and Oral/Practical/Clinical components, and in aggregate.

- Send-ups must be passed.
- Academic evaluations will ensure consistent assessment and feedback processes.

9. Individual Assessment Criteria

- Faculty will review individual assessments regularly to determine student progression.
- The academic coordinator will offer remediation for underperforming students.
- Remediation should occur in the summer break after summative assessments.
- Parent-teacher meetings will be held for underperforming students at designated times, and after every Block/Clinical Clerkship examination, as required by UHS.

10. Feedback

Faculty will provide feedback after each block and at conclusion of an academic year.

- Formative feedback during each pre-clinical course/module.
- Mandatory feedback for major exams (like end-of-term block exams).
- Clinical test feedback at the end of each rotation.

Students should review assessments by contacting the course director.

11. Appeal Mechanism for Results

- Students can apply for rechecking of results (block exam) within two working days of the result declaration.
- The application will be submitted to the Department of Dental Education and will be approved by the Principal, RCoD.
- Applications received after that will not be entertained.
- No fees will be charged for rechecking.
- The answer sheet will only be shown to the student in the presence of subject head and HoD Dental Education.
- Response after the appeal of the result rechecking will be declared within one week.
- The rechecking of the professional exam will be according to UHS policy.

12. Quality Control

- Collaborating closely with the Student Affairs and Quality Assurance Cell can facilitate the resolution of any issues, contributing to successful outcomes.
- Data from assessments will be leveraged to improve the effectiveness of academic staff, the performance of students, the quality of courses, and the institution's overall operations.
- The Department of Dental Education will carry out frequent evaluations of academic activities and ensure the implementation of this policy by keeping comprehensive records of assessment data.