DDx BY SKETCHY

How to score your best on a clinical reasoning case

A quick guide to clinical reasoning assessment for learners

READ THIS FIRST

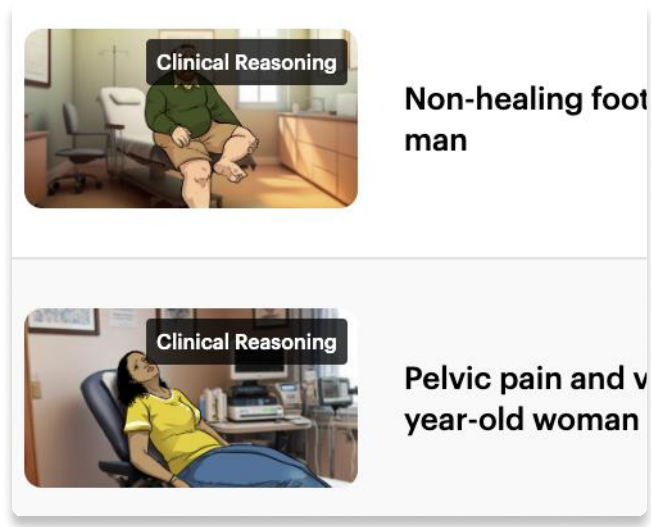
Finding all the key findings won't get you a top score.

These cases look at **how and why** you gathered information, not just whether you found the right things.

What's actually being scored

These cases typically follow the flow of a standard patient encounter (history, physical, orders, management), with an updated differential required between each step. The rubric looks at whether your approach is hypothesis-driven and prioritized across the whole encounter. Are your questions, your exam, your orders, and your plan flowing from a working differential? Being thorough alone doesn't earn a top score. **Being focused and intentional does.**

How to know it is a clinical reasoning case? When you open the case, look above the Start Case button for the note that reads, "This case will use the Clinical Reasoning Assessment to provide feedback on your performance."



How scores work

Each criterion is scored 1, 2, or 3. DDx calculates your score based on your average performance across each rubric criterion (1-3). For example, an average rubric score of 2 lands you at an 80%. Scores fall into one of three performance bands: Preliminary, Progressing, Proficient.

PRELIMINARY	PROGRESSING	PROFICIENT
below 70%	**70% - 89%**	**90% +**
EXAMPLE · INITIAL DIFFERENTIAL	EXAMPLE · INITIAL DIFFERENTIAL	EXAMPLE · INITIAL DIFFERENTIAL
Few or implausible diagnoses. Misses key "can't-miss" conditions.	Some likely and "can't-miss" diagnoses. Breadth or accuracy still limited.	Broad, plausible list. Includes multiple likely and "can't-miss" diagnoses.

Proficient scores are hard to reach on purpose. Check with your faculty for the target they want you to hit.

Five things that will help you do well

Show your thinking from the start
Your differential gets evaluated the whole way through, not just at the differential module. Your first history questions should already reflect the diagnoses you're considering.

Ask targeted questions
Before you type, ask yourself which diagnosis you're trying to rule in or out. Ten focused questions beat thirty scattered ones.

Don't skip the can't-miss diagnoses
Include serious conditions in your differential even when you think they're less likely. Leaving them out costs you points.

Order with intent
Order what your differential actually needs. Avoid ordering everything just in case.

Reflect honestly at the end
The self-reflection criterion rewards real insight. Name what you were unsure about, what you might have missed, and what you'd do differently next time.

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