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Reform of Graduation Assessment Methods for Mongolian Medicine Majors Based on Industry Access Requirements

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Abstract: As an important component of traditional Chinese medicine, Mongolian medicine occupies an irreplaceable position in safeguarding people's health. With the continuous rise in social expectations for the quality of medical services, increasing attention has been paid to the quality of training for Mongolian medicine professionals. The Mongolian Medicine Physician Qualification Examination is a key standard for industry access; it is both an important indicator for measuring the quality of Mongolian medicine education and a core element in ensuring the quality and safety of medical services. At present, the graduation assessment for Mongolian medicine majors at our university is mainly based on the traditional thesis defense, which makes it difficult to evaluate students' clinical practice ability and overall quality comprehensively. As a result, graduates find it hard to adapt to actual needs after entering the medical industry, and the pass rate of the physician qualification examination is relatively low. Therefore, reforming the graduation assessment methods for Mongolian medicine majors based on industry access requirements is of great significance for improving the quality of Mongolian medicine education and cultivating qualified Mongolian medicine talents.

Keywords: Mongolian medicine education; Graduation assessment; Industry access; Objective Structured Clinical Examination; Physician qualification examination

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1. Introduction

As an important component of traditional Chinese medicine, Mongolian medicine carries the medical wisdom and cultural accumulation of the Chinese nation over thousands of years and occupies an irreplaceable position in safeguarding people's health, preventing and treating common and frequently occurring diseases, and transmitting ethnic medical culture [1]. With "three roots," "seven elements," and "three excreta" as its core theoretical system, Mongolian medicine integrates unique diagnostic methods, therapeutic principles, formulas, and therapeutic applications, forming distinctive characteristics that differ from traditional Chinese

medicine and Western medicine. It is an indispensable force in China's medical and health system. With the continuous deepening of China's medical system reform, society's requirements for the quality of medical services are rising, and the quality of training for Mongolian medicine professionals has become a core indicator for measuring the development level of Mongolian medicine education, directly bearing on the inheritance, innovation, and sustainable development of Mongolian medicine.

The degree conferral process is strictly implemented in accordance with the teaching plan and relevant regulations. Students must complete all required courses, reach the prescribed 198 credits, pass the graduation thesis, meet the physical health testing standards for college students stipulated by the Ministry of Education, and obtain the corresponding credits for the second classroom before they can be permitted to graduate. On this basis, in accordance with the Regulations on Academic Degrees of the People's Republic of China, the Implementation Rules for the Conferral of Bachelor's Degrees under the Credit System at Inner Mongolia Medical University, and other relevant regulations, those who meet the university's degree conferral standards are awarded a Bachelor of Science degree [2].

The National Medium- and Long-Term Educational Reform and Development Plan (2010–2020) clearly states that meeting social needs is an important criterion for measuring educational quality, and that improving quality is the core task of educational reform and development [3]. For Mongolian medicine majors, social needs and industry access requirements are the core orientation of talent training. As an important link in talent training, graduation assessment must be closely aligned with industry access requirements in order to cultivate high-quality Mongolian medicine talents who meet industry needs. This reform can not only effectively improve the quality of Mongolian medicine education and solve prominent problems in the current graduation assessment, but also cultivate high-quality Mongolian medicine talents who meet social needs, promote the inheritance and innovation of Mongolian medicine, and provide talent support for the implementation of the "Healthy China" strategy.

2. Current status and problems of assessment

At present, the graduation assessment for the Mongolian medicine major at our university centers on thesis defense, supplemented by graduation internship assessment. This assessment method has an obvious gap with the industry access requirements of the Mongolian Medicine Physician Qualification Examination and has exposed many drawbacks in teaching practice, seriously constraining the improvement of talent training quality. The specific problems are mainly in three aspects:

2.1. Lack of clinical practice ability assessment and serious disconnection between theory and practice

Mongolian medicine is a clinically applied specialty. Clinical practice ability is the core competitiveness of graduates entering the medical industry and is also the core focus of the Mongolian Medicine Physician Qualification Examination. The examination focuses on practical question types such as clinical skills operation and clinical case analysis, and its core purpose is to assess candidates' comprehensive ability to use Mongolian medicine theory to solve practical clinical problems and to apply distinctive Mongolian medicine diagnostic and therapeutic techniques in practice. However, the current graduation assessment at our university takes the graduation thesis as the core evaluation indicator and does not systematically assess students' clinical operation skills, clinical diagnostic and therapeutic thinking, or case management ability

[4]. From the perspective of teaching and training, the undergraduate curriculum has an excessively high proportion of theoretical courses and an insufficient proportion of practical courses, and existing practical courses are mostly simulated operations and observational learning, lacking hands-on training in real clinical settings. At the same time, graduation internship assessment is formalistic; some internship bases do not strictly implement the end-of-rotation examination system, and supervision of the entire internship process is absent, so students' clinical practical and case-handling abilities cannot be effectively tested and improved. This assessment orientation leads students to emphasize theoretical memorization and neglect practical training. After graduation, they cannot quickly transform theoretical knowledge into clinical diagnostic and therapeutic ability, find it difficult to pass the practical skills assessment of the physician qualification examination, and need a long period of adaptation after employment before they can competently perform clinical duties.

2.2. Lack of comprehensive quality assessment and difficulty meeting industry position requirements

The medical industry has extremely high requirements for practitioners' comprehensive qualities. In addition to solid professional theory and proficient clinical skills, Mongolian medicine practitioners also need good medical ethics, doctor-patient communication, teamwork, and emergency response capabilities, which are also important assessment contents of the Mongolian Medicine Physician Qualification Examination. However, the traditional graduation assessment for the Mongolian medicine major at our university focuses only on students' degree of theoretical mastery and thesis writing and research ability, and does not cover core comprehensive quality evaluation dimensions such as professional quality, communication and collaboration, and emergency response.

The traditional thesis defense format can only assess students' basic research and writing abilities, while assessment of professional quality, communication ability, and teamwork ability is basically absent. The dual absence of training and assessment leads some graduates to have weak medical ethics awareness, poor doctor-patient communication, and insufficient teamwork ability after employment, making them unable to adapt to the comprehensive work requirements of clinical positions. This affects not only individual career development but also the overall service quality and image of the Mongolian medicine industry [5]. At the same time, the lack of assessment standards leaves students without intrinsic motivation to improve comprehensive qualities, making it difficult to cultivate high-quality Mongolian medicine talents who possess both moral integrity and professional competence.

2.3. Disconnection from industry access requirements and low pass rate of the physician qualification examination

The Mongolian Medicine Physician Qualification Examination is the statutory access standard for Mongolian medicine clinical practice, and its assessment content, format, and standards have a rigid guiding effect on the training of Mongolian medicine professionals. The current graduation assessment system at our university is disconnected from industry access requirements in two ways. First, the assessment content is disconnected: graduation assessment focuses on thesis writing and research ability, while the physician qualification examination focuses on theoretical application, clinical practice, case analysis, and professional quality, with significant differences in core assessment priorities. Second, the assessment method is disconnected: graduation assessment is mainly a single thesis defense, while the physician qualification examination adopts

a diversified model of "written examination + practical skills assessment" to comprehensively evaluate students' professional ability.

The disconnection of the assessment system has led to prominent shortcomings in graduates' examination and practice abilities, including insufficient core abilities such as clinical practice, case analysis, and professional quality, and the pass rate of the physician qualification examination has long remained low. This situation not only reduces graduates' employment competitiveness and constrains personal development, but also highlights the insufficient compatibility between our university's Mongolian medicine talent training system and industry standards, hindering the inheritance and high-quality development of Mongolian medicine.

3. Impact of industry access requirements on the reform of graduation assessment methods for Mongolian medicine majors

The Mongolian Medicine Physician Qualification Examination is a statutory access examination that standardizes Mongolian medicine practice behavior, screens qualified practitioners, and ensures medical compliance and industry talent quality. It directly defines the training standards and development direction of Mongolian medicine talents and is the core guiding basis for the reform of graduation assessment for the Mongolian medicine major. Based on industry access requirements, the graduation assessment for Mongolian medicine majors needs to undergo systematic optimization and upgrading in three aspects: assessment content, assessment format, and assessment standards.

3.1. Improving assessment content based on actual clinical needs

The Mongolian Medicine Physician Qualification Examination is oriented toward the actual needs of clinical positions and is divided into two major modules: the practical skills examination and the comprehensive theory examination [6]. The practical skills examination covers core contents such as distinctive Mongolian medicine diagnosis, routine Western medicine examination, Mongolian medicine therapeutic operations, syndrome differentiation thinking, and formula selection. The comprehensive theory examination includes basic Mongolian medicine theory, clinical diagnostic and therapeutic knowledge, basic Western medicine diagnosis, and health regulations. The core goal of the examination is to cultivate students' solid Mongolian medicine theoretical foundation and proficient clinical practice ability, while taking modern medical knowledge reserves into account, achieving deep integration of theory and clinical practice, and building systematic clinical diagnostic and therapeutic competence.

On this basis, the graduation assessment for the Mongolian medicine major needs to comprehensively improve assessment content, consolidate the baseline of professional ability, and precisely align with industry access standards. Assessment content can be divided into three core dimensions: theoretical knowledge, practical skills, and comprehensive quality. Theoretical knowledge assessment covers basic theories of Mongolian medicine and Western medicine and knowledge of integrated Mongolian-Western medicine diagnosis and treatment, consolidating students' professional foundation for disease identification and safe practice and cultivating compound practical Mongolian medicine talents. Practical skills assessment includes Western medicine physical examination, distinctive Mongolian medicine diagnostic and therapeutic operations, and clinical syndrome differentiation and management, comprehensively testing students' clinical practice ability and diagnostic and therapeutic thinking. Comprehensive quality assessment focuses

on professional quality, humanistic quality, doctor-patient communication, and coordination ability, strengthening students' professional responsibility and comprehensive clinical management ability. An all-round assessment content system can take into account both students' professional ability and professional ethics training, ensuring that graduates meet industry access standards and clinical position requirements.

3.2. Diversifying assessment methods and emphasizing process-based assessment

The Mongolian Medicine Physician Qualification Examination adopts a diversified model combining written theoretical assessment and practical skills assessment, which are mutually complementary and comprehensively evaluate candidates' professional ability. This assessment model requires our university to break away from the traditional single thesis defense assessment system and build a diversified, whole-process graduation assessment mechanism that integrates a unified written examination, process-tracking assessment, and clinical skills-specific assessment, conducting comprehensive evaluation across the entire learning process and multiple ability dimensions to avoid the one-sided drawbacks of a single assessment model.

Process-based assessment is a core component of the diversified assessment system. It covers the entire process of students' course learning, graduation internship, and research practice, and can objectively and comprehensively reflect students' learning outcomes and ability growth process. During the internship stage, phased end-of-rotation examinations, comprehensive internship assessment, and online learning assessment are used to track and evaluate students' internship performance, practical ability, and case management level throughout the process. During the course learning stage, routine assignments, classroom performance, and periodic tests are used to implement normalized process assessment. The diversified assessment model can effectively make up for the shortcomings of traditional assessment and achieve precise and objective evaluation of students' comprehensive abilities.

3.3. Strict assessment standards to ensure fairness and impartiality

The Mongolian Medicine Physician Qualification Examination has a standardized and normalized assessment system, ensuring fairness, impartiality, and objective and accurate results through clear and unified assessment standards. This also requires the graduation assessment for the Mongolian medicine major to establish standardized and refined assessment standards, achieve standardization of assessment content, procedures, and scoring, and ensure that the assessment is fair and impartial and that results are authentic and valid.

The formulation of assessment standards needs to be closely combined with talent training objectives and clinical position requirements. First, standardize the assessment system by formulating unified scoring rules for the three major modules of theory, practice, and comprehensive quality in accordance with industry assessment standards, thereby reducing room for subjective judgment. Second, carry out homogeneous training for examiners to unify assessment and evaluation standards, and adopt the method of averaging scores from multiple raters to reduce individual subjective bias. Third, optimize the assessment mechanism by adding phased assessment links and replacing a single assessment verdict with multiple comprehensive evaluations to comprehensively and objectively judge students' ability levels. Fourth, improve the supervision system by publicizing assessment procedures, retaining assessment files, and establishing review channels to eliminate scoring based on personal connections and ensure that assessment results truly reflect students' comprehensive professional ability.

4. Reform directions

In light of the existing problems in the graduation assessment of the Mongolian medicine major at our university, benchmarked against the industry access standards of the Mongolian Medicine Physician Qualification Examination and drawing on advanced experience in medical professional assessment reform at home and abroad, this graduation assessment reform adheres to the core principles of "ability-oriented, industry-guided, process-evaluated, and diversified assessment." The reform focuses on three aspects: building a diversified assessment system, refining assessment standards, and building an examiner team, so as to achieve precise alignment between graduation assessment and industry access requirements and comprehensively improve talent training quality.

4.1. Building a diversified assessment system

Break away from the traditional single thesis defense assessment model and build a trinity diversified graduation assessment system of "unified written examination + process assessment + clinical skills assessment," with reasonable weights set (written examination 30%, process assessment 30%, clinical skills assessment 40%). Students' graduation scores are comprehensively calculated to ensure the comprehensiveness, objectivity, and scientificity of the assessment.

4.1.1. Written examination: Strengthening the combination of theory and practice and aligning with industry access requirements

The written examination core assesses students' professional theoretical reserves and ability to apply theory to clinical practice. Question types, content, and difficulty are fully benchmarked against the theoretical assessment standards of the Mongolian Medicine Physician Qualification Examination. The question structure is optimized by reducing purely memory-based questions and substantially increasing clinical case analysis and case application questions, with emphasis on assessing students' comprehensive ability to use Mongolian medicine theory to analyze and solve clinical problems.

The written examination content covers all main courses, including basic Mongolian medicine theory, Mongolian materia medica, Mongolian medicine diagnostics, Mongolian medicine internal medicine, surgery, gynecology, and pediatrics, and Mongolian traditional therapeutics, and adopts a combined-paper unified examination model. The test papers are generated through intelligent paper assembly based on past physician examination questions and the university's course question bank, ensuring the scientificity, pertinence, and rationality of the papers. After the examination, special paper quality analysis is carried out to identify students' knowledge weaknesses and reverse-optimize classroom teaching and practical course content, thereby implementing the reform goal of promoting teaching and learning through assessment.

4.1.2. Process assessment: Strengthening internship supervision and achieving whole-process tracking and evaluation

Process assessment covers the entire process of students' graduation internship, online learning, and research practice, focusing on assessing students' learning attitude, internship performance, clinical ability, and research literacy. It makes up for the shortcomings of traditional assessment, which emphasizes results and neglects process. Its core goal is to strengthen whole-process internship supervision, standardize internship assessment procedures, and ensure the effectiveness of internship training.

The internship stage strictly implements a tiered assessment system, clarifies the main responsibility of

each internship base for assessment, and requires all departments to standardize end-of-rotation examinations and end-of-term comprehensive internship assessments. End-of-rotation examinations are organized by departments, focusing on the department's internship content and assessing students' clinical operations, case writing, and case analysis abilities; only those who pass can enter the next department for internship. The comprehensive internship assessment is carried out jointly by the college and the internship base to comprehensively evaluate students' whole-process internship performance, clinical practice ability, and professional quality.

Online learning assessment is also incorporated. The college establishes a professional teacher assessment team, builds an online learning assessment section, and provides supporting online Mongolian medicine courseware and course exercises. Students are required to complete phased learning tasks and exercises on time during the internship, and online learning duration, exercise completion rate, and accuracy rate are used as the basis for process assessment. At the same time, the quality of completion of each stage of the graduation thesis is included in process assessment to comprehensively evaluate students' research attitude and research ability.

4.1.3. Clinical skills assessment: Adopting the OSCE model to examine clinical ability comprehensively

Clinical skills assessment is the core module of graduation assessment and directly determines the accuracy of assessing clinical practice ability. With reference to advanced assessment experience in domestic medical majors, the Objective Structured Clinical Examination (OSCE) model is introduced to comprehensively assess students' clinical ability through multi-station, full-scenario assessment [7–9].

Before the assessment, a special assessment team composed of college leaders, senior clinical teachers, and industry experts is established to be responsible for assessment plan formulation, station setup, examiner training, and full-process organization and implementation. In accordance with the needs of Mongolian medicine clinical positions and physician examination standards, 12–15 standardized stations are set up, covering more than 20 assessment items, including distinctive Mongolian medicine diagnostic examinations (tongue diagnosis, pulse diagnosis, urine diagnosis, pediatric inspection, etc.), history-taking and inquiry, clinical operations (acupuncture, massage, bone setting, cardiopulmonary resuscitation, etc.), syndrome differentiation and management of common disease cases, analysis of auxiliary examination results, emergency skills, and doctor-patient communication and professional quality assessment.

Each station is staffed with 1–2 senior clinical teaching teachers as examiners, with student assistants supervising the whole process to ensure fairness and impartiality. Each station formulates refined quantitative scoring standards, scoring students' operational standardization, proficiency, diagnostic and therapeutic thinking, communication ability, and professional quality item by item, and summarizes the scores from each station to form the final clinical skills assessment result. The OSCE assessment model can comprehensively and objectively assess students' clinical practice ability, thoroughly solve the problem of missing clinical skills assessment in traditional assessment, and ensure that students' clinical ability meets industry access standards [10].

4.2. Clarifying assessment content and scoring standards to align with industry access requirements

Benchmarked against the Mongolian Medicine Physician Qualification Examination syllabus, clinical position competency standards, and ideological and political education requirements, the graduation

assessment content and quantitative scoring standards are refined to achieve precise alignment between the assessment system and industry standards, clarify learning objectives for students, and stimulate learning initiative.

Assessment content comprehensively covers four dimensions: first, the theoretical written examination dimension, including core content such as basic theories of Mongolian and Western medicine, Mongolian medicine syndrome differentiation and treatment, and formula compatibility, precisely aligned with industry theoretical assessment standards; second, the process assessment dimension, covering daily internship performance, online learning outcomes, and phased research results, truly reflecting the effectiveness of the entire student training process; third, the clinical skills dimension, focusing on core position abilities such as distinctive Mongolian medicine diagnostic and therapeutic techniques, routine clinical examinations, case management, and doctor-patient communication; fourth, the quality and ideological-political dimension, including ideological and political quality, medical ethics, clinical thinking, and professional responsibility, comprehensively cultivating high-quality practicing talents.

Scoring standards center on quantitative scoring, with detailed scoring rules and passing thresholds formulated for each assessment module and each operational link, minimizing subjective judgment errors and ensuring the fairness, standardization, and precision of assessment scoring.

4.3. Enhancing the assessment ability of reviewers

The professional ability and evaluation level of the review team directly determine the quality and fairness of graduation assessment. Therefore, it is necessary to strictly select reviewers, carry out regular special training, and standardize assessment management to build a high-level, professional review team.

In personnel selection, priority is given to backbone teachers and clinicians with rich clinical experience, outstanding teaching ability, and excellent professional quality, ensuring that reviewers have the professional competence to accurately judge students' professional ability and clinical level. In ability training, reviewers are regularly organized to receive special training on assessment systems, scoring standards, assessment procedures, and new industry access regulations, unifying evaluation standards and assessment approaches. At the same time, a reviewer assessment and evaluation mechanism is established to regularly evaluate the quality of review work and consolidate the professional foundation of the review team.

In assessment management, the whole-process system of examination affairs arrangements, score management, and quality monitoring is improved. Examination affairs work is standardized by clarifying assessment time, venues, stations, and personnel division of labor to ensure orderly assessment. Score management is refined by establishing a closed-loop mechanism for score registration, summary, review, and feedback, promptly feeding back assessment results to teachers and students, and helping students fill gaps and teachers optimize teaching. Whole-process quality monitoring is implemented by establishing a special supervision team to identify assessment problems in real time and continuously improve the standardization and credibility of assessment work.

5. Implementation and effect evaluation of graduation assessment reform

The reform of graduation assessment for the Mongolian medicine major is a systematic project covering assessment content, assessment models, review standards, and management systems. It requires overall planning, step-by-step advancement, and dynamic optimization to ensure that the reform is implemented

effectively and operates sustainably.

5.1. Formulating a detailed reform plan and clarifying the reform path

A special leading group for reform composed of college leaders, discipline leaders, senior teachers, and industry experts is established to take overall responsibility for the investigation, demonstration, formulation, and implementation of the reform plan. In light of the actual conditions of the Mongolian Medicine major at our university, the reform objectives, core content, implementation steps, and time plan are clarified, and a clear reform promotion system is built. The core goal of this reform is to build a diversified graduation assessment system deeply aligned with the Mongolian Medicine Physician Qualification Examination, comprehensively improve students' clinical ability and overall quality, increase the pass rate of the professional examination, and cultivate high-quality Mongolian medicine talents who meet industry needs.

The reform is advanced steadily in three stages: the first stage is the preparation and investigation stage, in which advanced experience in medical professional assessment reform at home and abroad is drawn on, and a complete reform plan and implementation rules are formulated in light of the university's shortcomings and industry standards; the second stage is the pilot operation stage, in which some classes are selected for pilot assessment, pilot problems are promptly identified and solved, and the reform plan is iteratively optimized; the third stage is the comprehensive promotion stage, in which successful pilot experience is summarized, and the diversified assessment system is fully applied to all Mongolian medicine graduation assessment work, achieving full coverage of the reform.

5.2. Strengthening teacher training and providing faculty guarantees

Teachers are the core subjects in implementing the assessment reform, and their professional ability and assessment level directly determine the effectiveness of the reform. Regular faculty training is an important guarantee for advancing the reform.

Training content focuses on core contents such as updates to industry access standards, diversified assessment model procedures, standardization of scoring standards, industry development trends, and research and clinical guidance skills. Diversified training forms such as special lectures, observational learning, practical exercises, and exchange seminars are adopted, and industry experts and senior clinical teaching teachers are invited to provide special guidance, comprehensively improving teachers' assessment management and evaluation abilities. At the same time, regular clinical practice and industry exchange opportunities are provided for teachers to continuously enrich their clinical experience and improve the professionalism and precision of clinical skills assessment and evaluation.

5.3. Establishing a sound assessment management system to ensure reform implementation

A full-chain standardized assessment management system covering examination affairs management, score management, quality monitoring, and archive management is built to provide a solid institutional guarantee for reform implementation.

In examination affairs management, a special working group is established to clarify job responsibilities, standardize work processes, and coordinate the organization, coordination, and implementation of assessment. In score management, information technology is used to optimize the processes of score registration, summary, review, and feedback, ensuring that scores are accurate and complete and promptly providing teachers and students with a basis for improving learning and teaching. In quality monitoring, a

regular assessment and evaluation mechanism is established to supervise the assessment process throughout, dynamically rectify various problems, and continuously optimize the assessment system. In archive management, materials such as students' written examinations, practical operations, process assessment scores, graduation theses, and defense records are archived by category to provide data support for teaching evaluation and talent quality analysis.

5.4. Multi-dimensional effect evaluation to test reform effectiveness

A trinity multi-dimensional evaluation system involving students, industry, and the university is built to comprehensively test reform effectiveness, dynamically optimize the reform plan, and ensure that the reform provides long-term empowerment for talent training.

5.4.1. Student level

The improvement of students' comprehensive ability is the most intuitive manifestation of reform effectiveness, and it is mainly evaluated through three core indicators: student satisfaction, clinical comprehensive ability level, and physician qualification examination pass rate. Student satisfaction surveys can accurately capture students' recognition of assessment models, standards, and procedures and collect optimization suggestions; clinical ability assessment can intuitively reflect the improvement in students' diagnostic and therapeutic practice and professional quality; the professional examination pass rate is a core indicator for measuring the compatibility between talent training and industry standards and directly reflects the core effectiveness of the reform.

5.4.2. Industry level

Industry feedback is the core basis for testing the quality of talent training, with emphasis on evaluating the position adaptability and industry recognition of graduates after the reform. Through employer questionnaire surveys, field visits, and position evaluation feedback, core data such as graduates' employment destinations, clinical practice performance, doctor-patient communication ability, position adaptability, and dispute incidence are collected to accurately determine whether the talents cultivated by the reform meet industry access and position development needs.

5.4.3. University level

Relying on the university's teaching quality evaluation and talent training quality evaluation systems, the promoting role of the reform in professional teaching and talent training is assessed. By analyzing changes in curriculum setup, practical teaching, and teaching quality before and after the reform, the empowering effect of the reform on professional teaching reform is evaluated; against talent training objectives, the actual effectiveness of the reform in improving talent training quality and aligning with industry development needs is evaluated, providing a basis for the continuous deepening of Mongolian medicine professional education reform.

Through multi-dimensional regular evaluation, reform experience is continuously summarized, existing problems are rectified, and the assessment system is optimized, achieving steady improvement in talent training quality and supplying more high-quality Mongolian medicine professionals to the industry.

6. Conclusion

As an important link in talent training, the graduation assessment method for Mongolian medicine majors directly bears on the quality of talent training and the degree of alignment with industry access requirements. At present, the graduation assessment method for Mongolian medicine majors at our university has problems such as a lack of clinical practice ability assessment, a lack of comprehensive quality assessment, and disconnection from industry access requirements, resulting in graduates finding it difficult to adapt to clinical position needs, a relatively low pass rate of the Mongolian Medicine Physician Qualification Examination, and constraints on the inheritance and development of Mongolian medicine.

Based on the industry access requirements of the Mongolian Medicine Physician Qualification Examination, reforming the graduation assessment method for Mongolian medicine majors by building a trinity diversified assessment system of "written examination + process assessment + clinical skills assessment," clarifying assessment content and scoring standards, and strengthening examiner training and assessment management can effectively make up for the shortcomings of traditional assessment methods, comprehensively improve students' theoretical knowledge, clinical practice ability, and overall quality, increase the pass rate of the Mongolian Medicine Physician Qualification Examination, and cultivate high-quality Mongolian medicine talents who meet industry needs.

The reform of graduation assessment methods is a long-term and systematic task that requires continuous advancement and improvement. In the future, in light of new needs in the development of the Mongolian medicine industry, new changes in the Mongolian Medicine Physician Qualification Examination, and new trends in Mongolian medicine education reform, we will continuously optimize assessment content and evaluation standards, constantly innovate assessment methods and approaches, strengthen assessment management, and improve assessment quality, so that graduation assessment truly becomes an important lever for promoting the quality of talent training for Mongolian medicine majors, provide strong talent support for the inheritance, innovation, and sustainable development of Mongolian medicine, and contribute to the realization of the "Healthy China" strategy.

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Disclosure statement

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References

[1] Fu MH, Li HF, Laxinamujila, et al., 2021, Reflections on the Development of Mongolian Medicine and Talent Training from the Perspective of Forging a Strong Sense of Community for the Chinese Nation. Journal of Inner Mongolia Minzu University (Natural Sciences), 36(5): 437–442.

[2] Inner Mongolia Medical University, Undergraduate Professional Talent Training Program, 2021 Edition.

[3] Guiding Opinions on Accelerating the Innovative Development of Medical Education (Guobanfa [2020] No. 34), 2020, Gazette of the State Council of the People's Republic of China, (28): 27–31.

[4] Yu H, 2018, Brief Discussion on Reform Ideas for Clinical Practice Teaching Models in Mongolian Medicine. Modern Vocational Education, 2018(13): 62.

[5] Wu HY, Bao L, 2024, Cultivating Outstanding Mongolian Medicine Nursing Talents in the Spirit of "Inheriting the Essence and Upholding Innovation". Chinese Journal of Ethnic Medicine, 30(7): 50–52.

[6] Harden RM, Gleeson FA, 1979, Assessment of Clinical Competence Using an Objective Structured Clinical Examination (OSCE). Medical Education, 13(1): 41–54.

[7] Hastie MJ, Spellman JL, Pagano PP, et al., 2014, Designing and Implementing the Objective Structured Clinical Examination in Anesthesiology. Anesthesiology, 120(1): 196–203.

[8] Bao ZS, Zhao HL, Wurencaobudao, 2019, Exploration of the Construction of a Mongolian Medicine Clinical Skills Center Oriented by Multi-Station Assessment for Mongolian Medicine Clinical Undergraduates. Chinese Journal of Ethnic Medicine, 25(10): 45–47.

[9] Xin G, 2017, Application of OSCE in Clinical Skills Assessment for the Traditional Chinese Medicine Major. Guangming Journal of Chinese Medicine, 32(8): 1204–1205.

[10] National Health Commission of the People's Republic of China, Physician Qualification Examination Syllabus (Mongolian Medicine), 2025, China Press of Traditional Chinese Medicine, Beijing.

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