

Implementing **PREview**® Scores in 2026 Medical School Admissions



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AAMC
Washington, D.C.

The AAMC (Association of American Medical Colleges) is a nonprofit association dedicated to improving the health of people everywhere through medical education, health care, biomedical research, and community collaborations. Its members are all 160 U.S. medical schools accredited by the [Liaison Committee on Medical Education](#); 12 accredited Canadian medical schools; nearly 500 academic health systems and teaching hospitals, including Department of Veterans Affairs medical centers; and more than 70 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools, academic health systems and teaching hospitals, and the millions of individuals across academic medicine, including more than 210,000 full-time faculty members, 99,000 medical students, 162,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences. Through the Alliance of Academic Health Centers International, AAMC membership reaches more than 60 international academic health centers throughout five regional offices across the globe. Learn more at aamc.org. ↗

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Evaluate the PREview Exam for Your Admissions Process

For more than a decade, the AAMC has collaborated with medical school leaders and administrators to develop the AAMC PREview® Professional Readiness Exam to measure the professional readiness of medical school applicants. The resources listed below are available for all admissions professionals who want to learn more about the PREview exam and how to incorporate PREview scores into their admissions process.

Have questions or ideas for how we can enrich these PREview resources? Please email preview@aamc.org. ↗

Understand the Basics | PREview Fact Sheet

Download the convenient PREview fact sheet to educate admissions staff and committees about PREview design, administration, and implementation. aamc.org/preview-fact-sheet ↗

Learn From Your Peers | Community Stories

Learn from your peers at three medical schools who use the PREview exam in their admissions process in different ways and for different reasons. This presentation was originally given at Learn Serve Lead: The AAMC Annual Meeting in 2024. aamc.org/preview-video ↗

Stay Up to Date | PREview Newsletter for Admissions

The AAMC sends bimonthly email updates about the PREview exam to all schools. Newsletters contain information about testing calendars, policies for schools, and resources for admissions teams. Email preview@aamc.org ↗ to sign up.

Join the Conversation | PREview Community Calls

The AAMC hosts community calls to facilitate conversations about the PREview exam among admissions professionals. Conversations typically have a thematic focus and are held to enable you to learn from and connect with your peers. Invitations are sent via email. The PREview team welcomes you to email topic suggestions to preview@aamc.org. ↗

We're Here to Help | Schedule a Presentation

The PREview team is here to support you and your colleagues as you consider the PREview exam. Virtual presentations for admissions teams or committees typically contain a summary of the purpose, design, and use of the PREview exam considered in the context of your school's admissions goals and your current admissions process.

We hope to hear from you soon! Email preview@aamc.org ↗ to learn more.

Our resources can be found on the PREview Resources for Admissions Hub at aamc.org/previewadmissions. ↗



The PREview Exam Measures Behaviors That Matter



The PREview exam identifies applicants who are professionally ready for medical school.

Professional readiness is increasingly important in ever-changing medical school environments.



Aspiring physicians must be able to demonstrate accountability, respect, honesty, and integrity.



Research shows that deficiencies in professional readiness are more difficult to remedy than academic challenges.



Yet quality measures of professional readiness are frequently missing from medical school admissions.



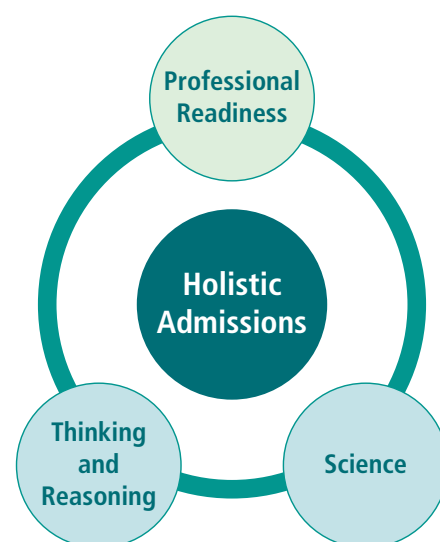
The PREview exam allows medical schools to efficiently include professional readiness criteria in the admissions process.

The PREview Exam Is a Reliable and Valid Measure of Professional Readiness

The PREview exam is a situational judgment test designed to assess key professional skills that are critical for success in medical school, other health professional schools, and beyond.¹

The PREview exam strengthens holistic admissions by providing a reliable and valid assessment of nonacademic skills essential for success in medical school, residency training, and physician practice. As a key pillar of readiness assessment, it ensures applicants are professionally prepared, complementing the MCAT exam's focus on academic readiness. The AAMC regularly partners with medical educators and medical students to comprehensively define professional readiness for medical school. This definition informs the premedical competencies that the PREview exam measures based on examinee responses to real-world scenarios faced by medical students.

PREview scores provide admissions committees with a practical lens to evaluate how applicants might respond to the professional challenges they will encounter in medical training and practice. By assessing examinees' judgement in real-life scenarios, the exam enables a meaningful and accurate understanding of an applicant's readiness and potential for success in medical school.



Defining and Measuring Professional Readiness

The PREview exam measures two broad skill areas that have been identified by experts across the medical education community — including medical school educators and prehealth advisors — as key to the professional readiness that is critical to success in medical school and preparing for a career in medicine.^{2,3}

Relational Skills

This skill area includes the ability to work effectively on teams, build relationships, and engage compassionately with patients and colleagues. Examples of relational skills include communication, collaboration, empathy, and compassion.

Personal Accountability

This skill area encompasses ethical responsibility, reliability, resilience, adaptability, and continuous self-improvement — qualities that help medical students manage challenges, remain accountable, and grow through reflection and feedback.

For background on the premedical professional competency framework that underlies the PREview exam's assessment of professional readiness:

aamc.org/previewcompetencies. ↗

Professionalism is key to success in medical school, residency training, and physician practice.

The PREview exam identifies applicants who are professionally ready.

Professional Readiness for All Health Professions

Empathy and compassion are among the relational skills crucial to health practitioners, including the doctors, nurses, physician assistants, dentists, public health officials, veterinarians, and other care professionals who keep our communities healthy.

Similarly, reliability, resilience, and a commitment to learning and growth are personal accountability skills expected of these and other health care professionals in all practice settings.

The PREview exam assesses these competencies and more, providing reliable information on postgraduate applicants' readiness to further develop their professional health training.

If your program is interested in receiving PREview scores to assess your applicants' professional readiness, visit aamc.org/preview-all-health ↗ to get started.

The PREview Exam Is Developed in Partnership With Medical Educators and Students

All PREview exam design, development, and administration decisions are made to ensure medical schools and their applicants receive a valid and meaningful measurement of professional readiness. Representatives from more than 100 medical schools (including both MD and DO) and from the AAMC's prehealth advising network confirmed that personal accountability and relational skills are critical to success in medical school.³

Community-Driven Content Development

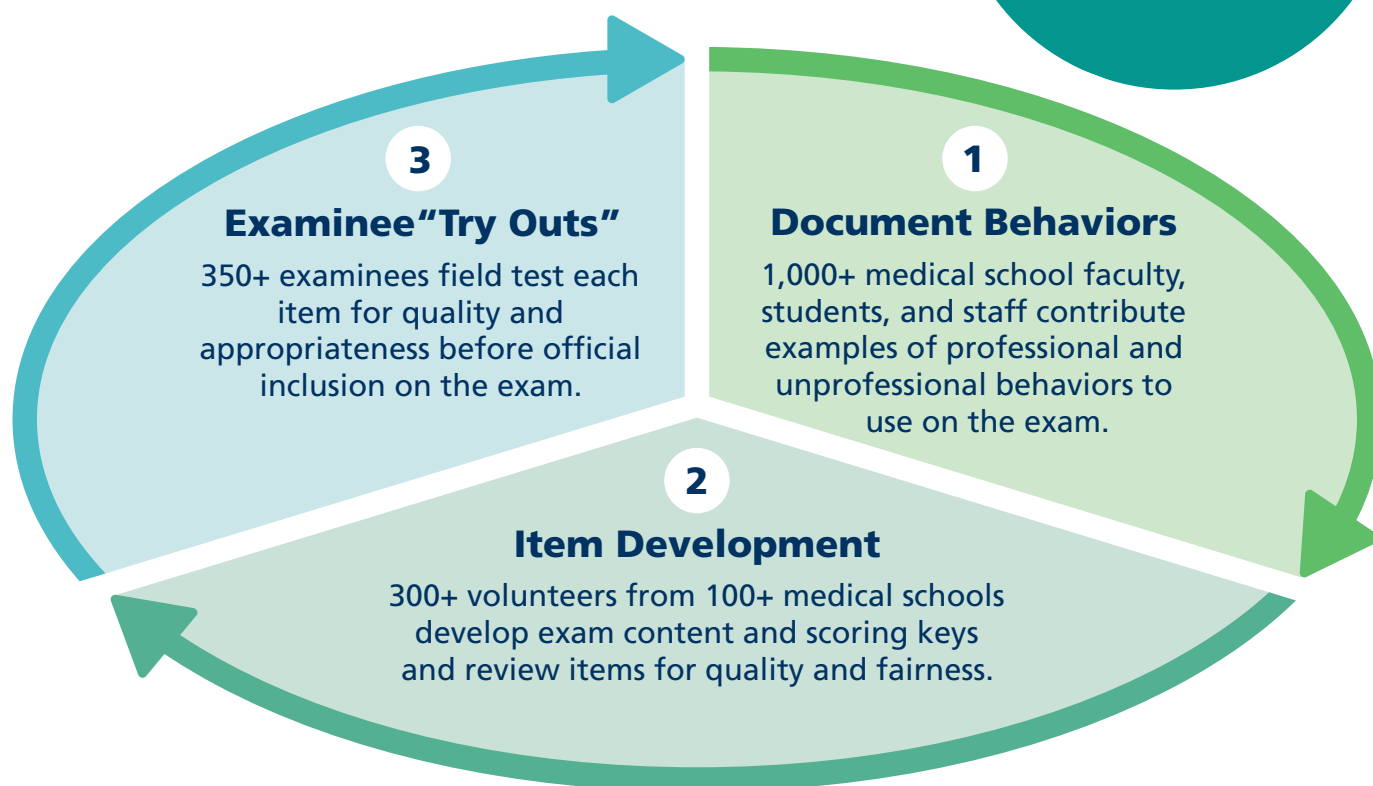
PREview exam content is developed by medical school faculty, admissions officers, and other experts in medical education, including professionals in student affairs. The AAMC's medical education partners work alongside assessment experts to ensure the PREview exam consistently reflects real-world situations experienced by medical students.

Rigorous Review

Each test question is reviewed by more than 10 trained medical school faculty and staff from institutions across the country who are experienced in observing and evaluating medical student behaviors as part of their everyday work. Each test question is evaluated for potential bias, sensitivity concerns, and unintended disadvantages for any group of examinees. Only scenarios and questions that the reviewers strongly agree reflect widely shared standards for professional readiness are included on the PREview exam.

ROBUST REVIEW PROCESS

10+ medical school reviewers evaluate and approve each question for inclusion.



Quality and Appropriateness Testing

More than 350 examinees “try out” every potential PREview question, providing the AAMC with insights into the quality and appropriateness of items before they can be included on a scored exam.

Research-Based Design and Scoring

Grounded in decades of research on situational judgment tests (SJTs), the PREview exam is a nationally standardized and objective measurement of each examinee’s professional readiness skills. The competency-based blueprint, scenario structure, and rating format ensure a consistent measurement of professional readiness, standardization across a large-scale test administration, and that all examinees are assessed in the same way.

The PREview design and scoring approach has been extensively researched and validated by leading experts in SJTs and psychometric testing, U.S. medical schools, and other global institutions using the same or similar formats for medical school applicant selection.^{4,5,6,7,8}

During the AAMC’s consultation with these different groups, the scenario-based focus and “rate-the-effectiveness” format was consistently identified as one that would most reliably and accurately assess professional readiness, meet the needs of medical schools, and minimize the test burden on examinees.

Transparency in Development, Scoring, and Use

The PREview exam development process has been documented in peer-reviewed scholarly publications from its early stages.^{1,5,6,9} Medical educators from a broad range of institutions and backgrounds have guided each phase — from defining the premedical professional competencies that the PREview exam measures to creating realistic scenarios to establishing consensus-based scoring.

The scoring framework is publicly available, helping both institutions and applicants understand how professional readiness is evaluated. Annual data releases and ongoing validity studies provide evidence of the PREview exam’s effectiveness in measuring professional readiness. This transparency supports medical schools in making informed decisions about the value of the PREview exam and how it can facilitate holistic admissions at their institutions.

Fairness and Integrity in Testing

The PREview exam provides a fair and equitable assessment of professional readiness by providing ample testing time, enforcing reading level standards to provide accessibility for English language learners, and careful vetting by medical educators from across the United States. Further, the exam is administered securely and uniformly, supporting fairness and integrity in the admissions process.

MEASURING BEHAVIORS THAT MATTER

1,000+ educators and
students contribute examples
of professional and
unprofessional
behaviors.



PREview Testing Is Accessible for All Applicants

Preparing for the PREview Exam

- Test dates are available April through October.
- Free PREview exam preparation, including two full-length practice tests, is available at aamc.org/previewprep. ↗
- Testing accommodations are available to ensure the exam is accessible to all test takers.
- Current pricing for the PREview exam is available at aamc.org/preview. ↗
- The AAMC Fee Assistance Program includes benefits for the PREview exam. Learn more at aamc.org/feeassistance. ↗

Test Day

- Proctored, online exam that can be taken from home or school.
- 75-minute maximum exam time.
- Individuals can retest twice per year, four times in their lifetime.

After Taking the PREview Exam

- PREview scores are released approximately 30 days after testing.
- Examinees may release scores to an unlimited number of schools.
- Examinees, medical schools, and prehealth advisors receive the same PREview score report, ensuring everyone in the application process has full access to the professional readiness assessment information.

More information, including pricing and a registration link, is available at aamc.org/preview. ↗

At no additional cost to applicants, PREview scores remain valid across multiple years and are available for release to unlimited schools.

This means that the more than 12,000 aspiring medical students who reapply to medical school each year can choose not to retake the PREview exam when reapplying and will not incur any fees for additional score releases.

PREview Preparation Resources

All PREview preparation resources are developed with input from medical educators, allowing applicants to engage with the exam format during preparation, using resources created to the same standards as the PREview exam.

View free PREview preparation materials at aamc.org/previewprep. ↗

PREview Questions Present Real-World Situations

The PREview exam presents examinees with a series of scenarios sets, each of which includes:

- A brief **scenario** based on a real-world situation students may experience in medical school.
- **Four to eight items (or “responses”)** that reflect a range of possible actions someone might take in response to the scenario.

Each scenario set presents a hypothetical dilemma that calls upon examinees’ understanding of one or more premedical professional competencies. Examinees are instructed to read each scenario and then rate the effectiveness of each response using a four-point scale ranging from “Very Ineffective” to “Very Effective.” As illustrated below, each rating scale point includes its own definition to provide examinees with a common framework for how ratings are defined.

The PREview exam includes 186 total items.

Each scenario set is composed of a **short scenario**

and a list of **possible behavioral responses** to each scenario.

Examinees **rate the effectiveness** of each response using a four-point scale ranging from Very Ineffective to Very Effective. The scoring key is developed by the medical education community.

Scenario 1

Your faculty instructor has assigned you the role of group leader for a discussion. Your course syllabus specifies that each student will receive a participation grade based on these discussions. During the discussion, you notice one student is starting to dominate the conversation. Other students seem to be frustrated that they cannot contribute.

RESPONSES

1. Impose a time limit on how long a person can talk at a given time.
2. Ask the student to allow others the opportunity to talk.
3. After the discussion, ask the student to limit their participation in future discussions.
4. Let the student know you appreciate their contributions but would like to hear from others as well.
5. Ask your faculty instructor to intervene the next time the student speaks up.

Very Ineffective (1)	Ineffective (2)	Effective (3)	Very Effective (4)
The response will cause additional problems or make the situation worse.	The response will not improve the situation or may cause a problem.	The response could help but will not significantly improve the situation.	The response will significantly improve the situation.

The PREview Exam Is Scored Against Consensus Ratings

The AAMC collaborates with subject matter experts to develop the scoring key for the PREview exam (i.e., the consensus effectiveness rating for each response). The group of subject matter experts includes admissions officers, faculty, student affairs representatives, and others who work in medical education and understand the expectations and responsibilities of medical students.

The PREview score is based on the extent to which the examinee's effectiveness rating for each response (item) aligns with medical educators' consensus ratings. Full credit is awarded for an item if the examinee's rating matches the medical educators' consensus rating. Half credit is awarded if the examinee's rating is one rating away from the medical educators' consensus rating but still on the same side of the scale (i.e., Effective/Very Effective responses or Ineffective/Very Ineffective responses).

For example, if an item is keyed "Effective" and the examinee rates it "Very Effective," they receive half credit. If the examinee rates the same item "Ineffective," they do not receive any credit as the item key is on the opposite side of the scale.

Higher scores suggest that the examinee's ratings align more closely with medical educators' consensus ratings, whereas lower scores suggest the examinee's ratings align less closely with medical educators' consensus ratings.

The examinee's PREview score information is presented on a score report similar to the one shown below.

Exam Date	1 Total Score	2 Confidence Band	3 Percentile Rank of Score
May 1, 2024	7	6-8	87%

- 1 The **total score** is reported on a scale from 1 to 9.
- 2 The **confidence band** around PREview scores helps account for the margin of error in score accuracy and marks the range in which the examinee's true score probably lies. PREview total scores are reported with a confidence band of plus or minus 1 point. The closer two applicants' scores are, the more their confidence bands overlap, and the more likely their scores are to be truly the same. The farther apart two scores are, the less their confidence bands overlap, and the more likely they are to truly be different.
- 3 The **percentile rank of score** for PREview scores shows how an individual examinee's score compares with the scores of other examinees. Specifically, it shows the percentage of exam scores that were the same or lower. For example, if the PREview score of 7 has percentile rank of 87%, this means 87% of PREview scores were equal to or less than 7. See current PREview percentile ranks in [Appendix A](#).

PREview Examinees at a Glance


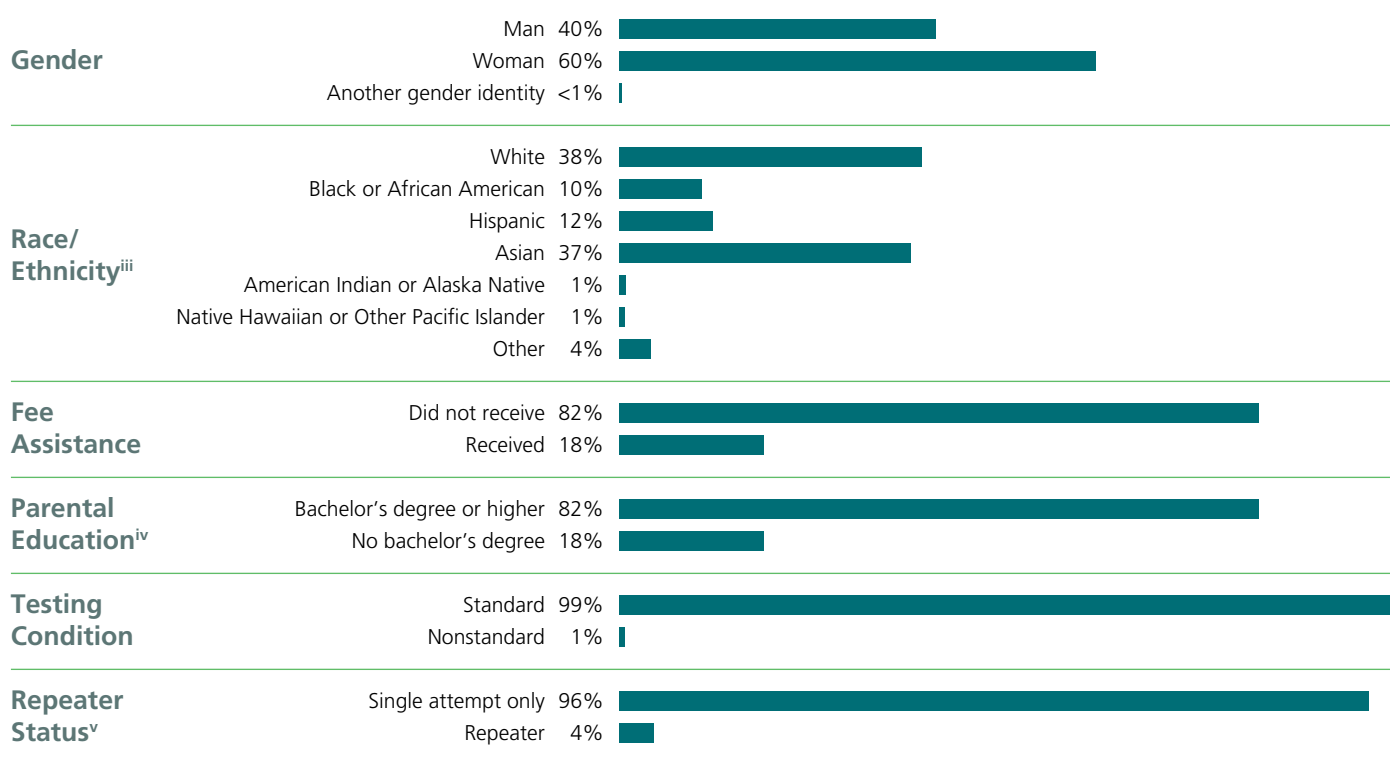
A total of 49,966 examinees with a wide range of demographic characteristics, backgrounds, and experiences took the PREview exam from 2022 to 2024. Notably, 18% of examinees received benefits from the AAMC Fee Assistance Program, which assists those who, without financial assistance, would be unable to take the PREview exam or apply to medical school. For more information about current Fee Assistance Program eligibility guidelines, please go to aamc.org/feeassistance. 

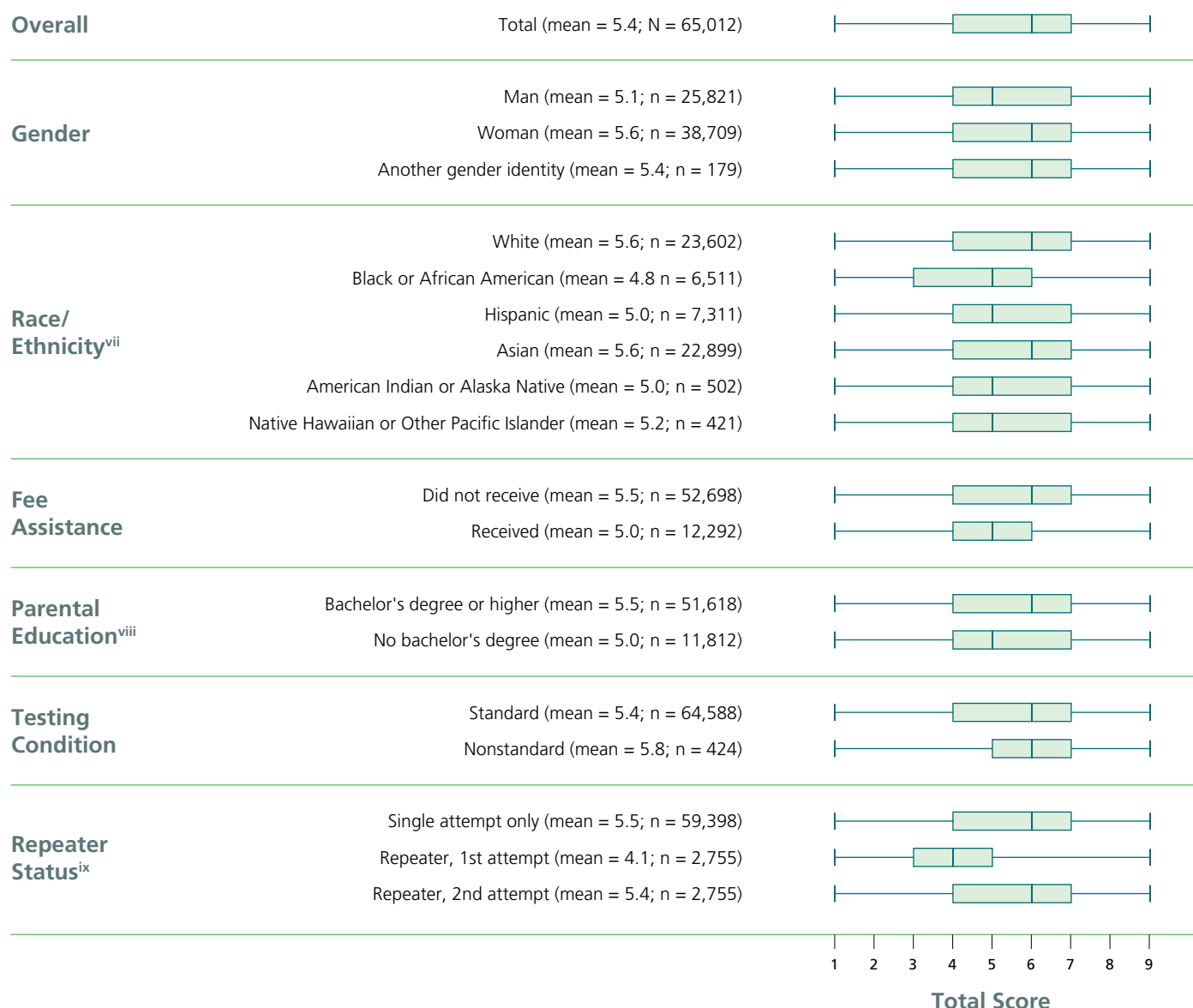
FIGURE 1. PREview examinees from 2022 to 2024, by demographic characteristics, backgrounds, and experiences (N = 49,966)^{i,ii}



The mean PREview score was 5.4 (SD = 2.0) for all 65,012 exams administered in 2022, 2023, and 2024, including all exams from examinees who tested more than once. The distribution of PREview scores for exams in this time period is available in [Appendix B](#).

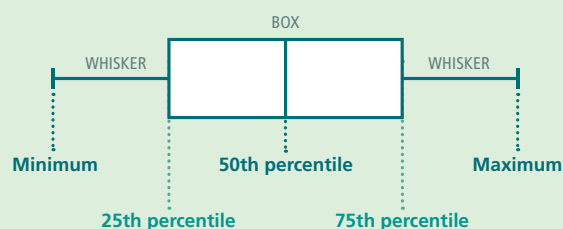
There is some variability in the median PREview total scores for examinees from different backgrounds. However, there is a great deal of overlap in the scores of different groups. The similarities and differences in these data are similar to those reported in the literature for situational judgment tests and smaller than what is shown for other admission tests.¹⁰

FIGURE 2. PREview scores for all exams administered from 2022 to 2024, overall and by demographic characteristics, backgrounds, and experiences (N = 65,012).^{vi}



READING A BOX-AND-WHISKER PLOT

Box-and-whisker plots show the median score (the 50th-percentile score) along with the minimum, 25th-percentile, 75th-percentile, and maximum scores.



Higher PREview Scores Correlate With Higher Acceptance and Progression Rates

Table 1 shows that nationally, applicants with PREview scores are more likely to be accepted to medical school than those without PREview scores.

TABLE 1. Applicants in 2022, 2023, and 2024 Who Were Accepted by at Least One Medical School^x

PREview Total	MCAT Total			All
	472-494	495-504	505-528	
7-9	6% 19/327	31% 682/2,212	65% 9,130/14,006	59% 9,831/16,545
4-6	6% 116/1,821	29% 1,861/6,403	60% 12,962/21,528	50% 14,939/29,752
1-3	5% 107/1,992	27% 929/3,401	54% 3,296/6,131	38% 4,332/11,524
With PREview Score	6% 242/4,140	29% 3,472/12,016	61% 25,388/41,665	50% 29,102/57,821
Without PREview Score	3% 408/14,951	24% 6,318/26,779	60% 34,060/57,090	41% 40,786/98,820
All Scores	3% 650/19,091	25% 9,790/38,795	60% 59,448/98,755	45% 69,888/156,641

Among applicants with PREview scores, those in higher score groups had higher acceptance rates.

The overall acceptance rate for applicants with PREview scores is almost 10% higher than those without PREview scores.

Table 2 shows national data for medical schools that were early adopters of the PREview exam (i.e., schools that required or recommended the PREview exam in the first two years). The sample size is small, but the results provide early evidence of the validity of the PREview exam in predicting student success in medical school. The AAMC will continue to update these analyses as more data become available.

TABLE 2. On-Time Progression to Year Three at Early-Adopter Medical Schools: 2021 and 2022 Matriculants^{xi}

PREview Total	MCAT Total			All
	472-494	495-504	505-528	
7-9	100% 2/2	90% 27/30	97% 227/235	96% 256/267
4-6	70% 7/10	92% 94/102	95% 374/394	94% 475/506
1-3	71% 5/7	91% 50/55	94% 104/111	92% 159/173
With PREview Score	74% 14/19	91% 171/187	95% 705/740	94% 890/946
Without PREview Score	69% 18/26	80% 240/299	94% 844/898	90% 1,102/1,223
All Scores	71% 32/45	85% 411/486	95% 1,549/1,638	92% 1,992/2,169

Among students accepted with PREview scores, those in higher score groups progressed at higher rates.

The overall progression rate for students accepted with PREview scores is almost 5% higher than those without PREview scores.

The PREview Exam Is Backed by Research

The AAMC conducts ongoing research and evaluation of the PREview exam, including on its validity, psychometrics, fairness, and reactions from examinees and medical schools. These data are used to provide medical schools with empirical evidence to support the use of PREview scores in the admissions process. The *Academic Medicine* articles described below have been published as a result of this research.

Evaluating a Situational Judgment Test for Use in Medical School Admissions: Two Years of AAMC PREview Exam Administration Data

This 2023 article evaluates the relationship between PREview scores from the first two years of administration and other admissions data, group differences in mean PREview scores, and whether adding a new assessment tool affected the volume and composition of applicant pools.



Designing a Situational Judgment Test for Use in Medical School Admissions

This 2023 article highlights the development, evaluation, and launch of the AAMC situational judgment test (SJT) for use in medical school admissions. The authors evaluate the evidence for the need for SJTs in medical school admissions, summarize existing research on SJTs, and discuss goals that were the foundation for developing the PREview exam.



Predicting Medical Student Performance With a Situational Judgment Test in Admissions

This 2023 article examines how scores from a prototype version of the PREview exam and other admissions data predict performance during their first and second year of medical school. These studies provide initial evidence that SJT scores may add value to the medical school admissions process because scores were related to faculty ratings of professional behaviors and provided unique information relative to MCAT scores and UGPAs.



Implement the PREview Exam to Best Fit Your Admissions Process

Medical schools have complete flexibility in how they incorporate PREview scores into their admissions process. Each admissions team can tailor their approach to institutional priorities and evaluation frameworks.

There are many ways PREview scores can add value throughout the medical school admissions process. The AAMC has learned that schools most frequently use PREview scores in the following ways.

Early Identification of Strong Candidates

During the initial screening process, PREview scores can be used in conjunction with academic metrics to ensure the pool of applicants under serious consideration are both academically and professionally ready. This approach can also help determine which applicants receive secondary applications or interview invitations. Schools that use PREview scores to assess applicants during the initial screening process strengthen holistic admissions for their largest pool of applicants.

Additional Depth to Existing Applicant Data

Medical schools can use PREview scores to identify applicants who meet academic criteria but might not stand out among the competitive applicant pool based solely on GPA or MCAT scores. Higher PREview scores can spotlight academically prepared candidates with exceptional professional readiness who might otherwise be overlooked — including those who show potential to succeed with the right support. By integrating PREview scores with academic information, schools gain a more complete understanding of applicants and can more easily identify those who merit further consideration in the review process.



Schools can decide how and when to use PREview scores in the way that delivers the greatest benefit to their admissions process.

Volunteer to Help Develop the PREview Exam

We rely on the partnership of medical school faculty and staff to continue with the ongoing development and evaluation of the PREview exam. Volunteering ensures that the PREview exam measures the critical skills needed for medical student success and reflects shared standards for professional readiness.

Learn more and sign up at aamc.org/services/volunteer-aamc-preview-exam-reviewer. ↗

“Plus Factor” for Comparable Applicants

Many medical schools integrate PREview scores within their admissions process as evidence of applicants’ professional readiness, but do not implement strict cutoffs or requirements. This approach allows schools to recognize and reward applicants who demonstrate professional readiness through other indicators such as volunteer experience and letters of recommendation alongside low or mid-range PREview scores.

As a plus factor, PREview scores strengthen an application, providing admissions committees with valuable information to help identify applicants who have the professional readiness that is critical to success in medical school. With this approach, PREview scores do not function as a binary qualifier or disqualifier and are assessed in the context of the applicant’s complete academic and non-academic information. When PREview scores are used in this way, a strong PREview score can strengthen an application and a lower PREview score will not be a barrier to medical school acceptance.

Distinguishing Metric During Final Selection

In the final stage of applicant review, PREview scores can support decision-making as a distinguishing metric between otherwise comparable applicants. In this context, most schools do not use PREview as a “last factor” in the review. Instead, admissions teams can integrate PREview scores in the final stage of holistic admissions in several ways:

1. Consider as one component of a weighted evaluation matrix or rubric.
2. Use to confirm impressions from interviews, multiple-mini-interviews, or other data about professional readiness.
3. Reference as a supplementary data point when assessing applicants near established selection thresholds.

The AAMC Is Here to Support Your Decision-Making Process

Each medical school determines how the PREview exam will be incorporated into their holistic admissions process based upon institutional priorities and other important deciding factors. The AAMC and the PREview team are here to support medical schools as they determine how best to use PREview scores to strengthen their admissions process.



For helpful tips from three participating medical schools, watch *Using the AAMC PREview Exam in Medical School Admissions*.

Adopting the PREview Exam

All medical schools that adopt the PREview exam will receive scores for their applicants as they are released throughout the admissions cycle, regardless of whether the school requires, recommends, accepts to fulfill a SJT requirement, or is exploring for future use. It is each school's responsibility to work with its IT administrator to configure how and when scores appear to reviewers during your selection process, per stated usage policies.

Step 1: Select How the PREview Exam Will Be Added to Your Admissions Process

Before adding the PREview exam to an admissions process, each medical school will need to determine what type of adoption is the best fit for achieving their holistic admissions and institutional goals. Medical schools can integrate the PREview exam into their admissions processes in four ways:

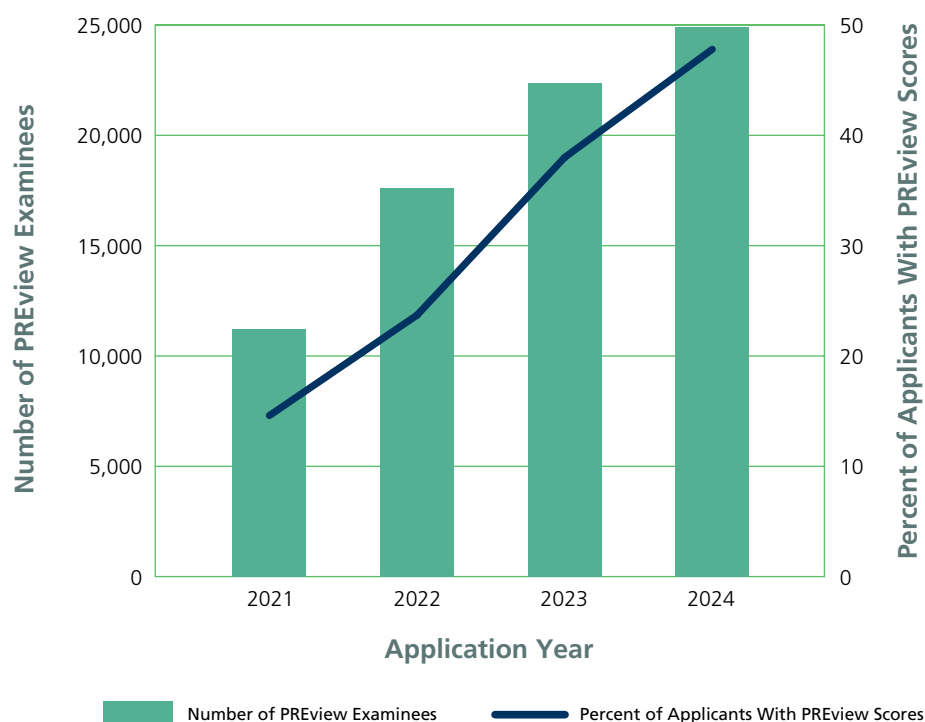
1. **Require PREview scores:** Your medical school will require all applicants complete the PREview exam to be considered for admission. An application that does not include a PREview score will be considered incomplete. PREview scores will be factored into evaluation of applicants for admission. The average rate of applicant completion of the PREview exam when a school makes it a required part of their admissions process is 86%.
2. **Recommend PREview scores:** Your medical school does not require a PREview score for an application to be considered complete and eligible for review; however, your school values inclusion of the PREview scores in the admissions process. Although applications will be considered complete without a PREview score, completion of the exam could strengthen an application — even if the applicant does not receive a high score — because it can demonstrate the applicant's commitment to showcasing all their strengths during the admissions process. The average rate of applicant completion of the PREview exam when a school makes it a recommended part of their admissions process is 62%.
3. **Accept PREview scores to fulfill a SJT requirement:** Your medical school requires a situational judgement test (SJT) as part of the admissions process, and the PREview exam is an acceptable option to satisfy the requirement. If your school accepts other SJTs in addition to the PREview exam, each applicant will choose which SJT to complete. The average rate of applicant completion of the PREview exam when a school includes it as an acceptable option to fulfill a SJT requirement is 68%.
4. **Exploring PREview for Future Use:** Your medical school is evaluating the PREview exam for potential future inclusion in admissions but is not requiring or recommending that applicants take the exam as part of the application process. During this phase, your medical school will be gathering data to determine how the PREview scores might be implemented into admissions in the future. The average rate of applicant completion of the PREview exam when a school is exploring PREview for future use is 53%.

Each year, as more medical schools begin to require or recommend the PREview exam, the number of applicants taking the exam is steadily increasing, with examinees more than doubling between 2021 and 2024. Nearly 50% of all medical school applicants now take the PREview exam, even when applying to schools not requiring it. Early 2025 data show further increases and it is likely that many of your current applicants already have PREview scores, making it easier to incorporate this assessment into your admissions criteria.

Adoption Method Impacts PREview Completion Rate

Adoption Method	Avg Completion Rate
Require	86%
Recommend	62%
Accept to Fulfill SJT Requirement	68%
Exploring for Future Use	53%

FIGURE 3. Total number of PREview examinees and percentage of all medical school applicants who had PREview scores, 2021-2024^{xii}



Step 2: Notify the AAMC of Your Decision to Use the PREview Exam

Please note that schools should finalize their decisions about requiring, recommending, or accepting PREview scores for their SJT requirement prior to the start of each admissions cycle. However, the AAMC recommends making this decision as early as possible to allow applicants sufficient time to prepare and register for PREview exam dates, which typically begin in April of each year. There is no deadline to sign up to explore the PREview exam for future use.

Once you have decided how you will incorporate PREview scores into your admissions process, go to the American Medical College Application Service® (AMCAS®) AMCAS for Schools platform (amcas.aamc.org/admissions) to configure your PREview adoption method by posted AMCAS deadlines. These changes will automatically update in the Medical School Admission Requirements™ (MSAR®) system, but all schools are encouraged to verify their MSAR information at aamc.org/msar.

If your school does not use the AMCAS system, notify the AAMC of your decision to adopt the PREview exam by emailing preview@aamc.org. The PREview team will send you a data agreement to sign, as well as instructions for accessing the Testing Services Score Reporting System. Schools not participating in AMCAS will also need to update their MSAR status manually at aamc.org/msar.

Beginning on Feb. 1 of each year, the AAMC PREview team will also begin posting your school's name on our AAMC PREview webpage that lists all schools that have adopted the PREview exam along with the adoption method — require, recommend, accept for fulfillment of SJT requirement, or exploring for future use.

Step 3: Communicate How You Use the PREview Exam With Students and Advisors

The AAMC conducts significant outreach to educate students about the PREview exam, but hearing about the exam and your policies directly from your school is a powerful communication tool.

Update your admissions websites and applicant resources. Encouraging applicant awareness of when you want applicants to submit PREview scores and how your school will use them during the admissions process can increase the likelihood of your applicants completing the exam. Communicating with students as early as possible is especially important. There are several important ways to ensure your school's applicants have the necessary information about the PREview exam and how it fits within your admissions process.

Please consider including the following in your admissions information for applicants:

1. Provide a clear explanation of your use of PREview scores high on your requirements list to increase applicant awareness and thus registration and completion rates. Sample language for describing PREview participation is available on the AAMC website at aamc.org/previewadmissions. ↗
2. Link to the AAMC PREview website (aamc.org/preview ↗), so students can easily access the testing calendar, registration instructions, preparation resources, and other important information.
3. Share a list of published research articles supporting the importance of professional readiness, so applicants understand why PREview is part of your admissions process (see [page 17](#)). This can increase the likelihood that they complete the exam.

Leverage social media channels. Your school's social media account(s) offer invaluable opportunities to engage with applicants and reinforce information you've shared about the PREview exam on your admissions site. The AAMC has created sample social media posts related to use of PREview scores within admissions at aamc.org/previewadmissions. ↗

Notify your community of prehealth advisors. It is important to notify prehealth advisors at the undergraduate institutions from which you frequently receive applications about your decision to use the PREview exam in your admissions process. The AAMC provides resources specifically to support prehealth advisors, including live webinars for their students upon request and testing and preparation resources at aamc.org/advisors. ↗

PREview Exam Adoption Checklist

- **Read** this guide to understand the PREview exam.
- **Email** preview@aamc.org ↗ with questions or for a virtual presentation to your admissions team or committee.
- **Choose** your adoption method (see [page 20](#)).
- **Configure** your status in AMCAS for Schools by the annual admission cycle deadline. Non-AMCAS schools email preview@aamc.org. ↗
- **Verify** that your MSAR profile is accurate.
- **Update** your admissions website with PREview links and information about your planned use of scores.
- **Include** PREview information in your social media outreach to future applicants.
- **Inform** your prehealth advisor network about your use of the PREview exam.
- **Educate** your staff and committee about the PREview exam.
- **Access** PREview scores through AMCAS application transmissions (AMCAS schools) or through the Testing Service Score Reporting System (non-AMCAS schools).

Step 4: Educate Your Admissions Staff and Committee About the PREview Exam

The AAMC recommends that you educate everyone on your staff, admissions committee, and leadership team about how the PREview exam works and your intended use of PREview scores. Sharing this guide with your team is a good starting point, as is accessing the additional resources outlined on page 3. Some schools recommend that committee members, as part of their training process, review a free PREview practice test, available on the AAMC website at aamc.org/previewprep. ↗

The PREview team is also available to meet with your staff or committee at any time to answer questions about use of the PREview exam in admissions. To schedule a presentation, please email preview@aamc.org. ↗

Step 5: Access PREview Scores

For Participating Schools Using AMCAS. Once you have communicated to the AAMC your decision to use the PREview exam at any level (require, recommend, accept as SJT requirement, explore for future use) and your status is confirmed in the AMCAS system, PREview scores will automatically transmit as they are released along with other student application data from AMCAS to your application management system. It is each school's responsibility to work with its IT administrator to configure how and when scores appear to reviewers during your selection process, per stated usage policies.

For Participating Schools Not Using AMCAS. Once you have communicated to the AAMC your decision to use the PREview exam at any level (require, recommend, accept as SJT requirement, explore for future use) and have signed the AAMC data agreement, you will have access to PREview scores through the Testing Services Score Reporting System (testingservices.aamc.org/ts-examinee ↗). This system allows you to download batches of score reports with custom date ranges or search individual examinee score reports. It also allows students to release score reports to your school at any time. Detailed instructions for this score reporting system are available on the PREview Resource Hub for Admissions (aamc.org/previewadmissions ↗).



PREview Exam Information for Advisors

The AAMC provides information about the PREview exam tailored especially for advisors, including recorded webinars, the *2025 AAMC PREview® Essentials* guide, accommodations application instructions, FAQs for students, and more. Additionally, the PREview team participates in national, regional, and local advisor conferences to provide information and updates about the exam, gather feedback from the advisor community, and provide support for using AAMC and PREview resources as they advise their students. Learn more at aamc.org/advisors. ↗

Appendices



Appendix A. PREview Exam Percentile Ranks: May 1, 2025-April 30, 2026

“Frequency” provides the number of PREview exams that were scored at each score point during the 2022 to 2024 testing years combined (N = 65,012). “Percentage” provides the percentage of all exams that were scored at each score point. “Cumulative Frequency” provides the total number of exams scored at the given score point and all scores below it. “Percentile Rank” provides the percentage of scores equal to or less than each score point based on all PREview exam results from the 2023 to 2024 testing years combined. Updates to the percentile ranks will be made on May 1 each year and are based on exams administered in the three most recent test administration years. For example, 13,059 PREview exams were scored as a 6 from 2022 to 2024, and exams at this score point comprised 20.09% of all exams administered. In addition, 67% of PREview total scores were equal to or less than 6 across all exams administered from 2022 to 2024.

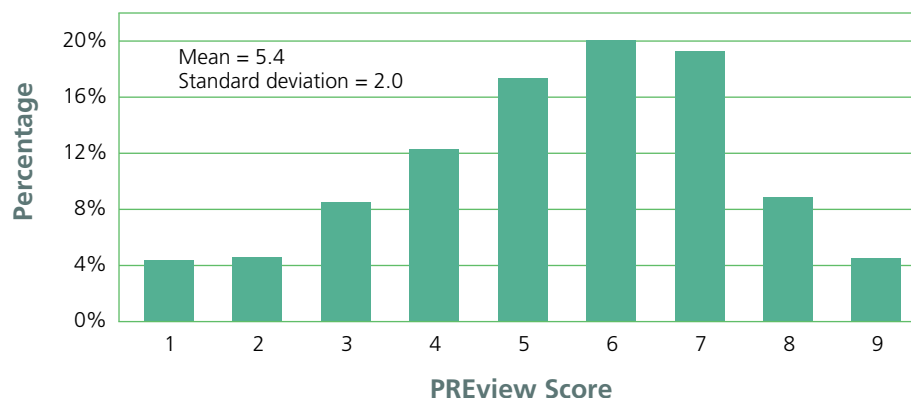
PREview Score Percentile Rank and Frequency: May 1, 2025-April 30, 2026

Total Score	Frequency	Percentage	Cumulative Frequency	Percentile Rank
1	2,879	4.43%	2,879	4
2	2,981	4.59%	5,860	9
3	5,541	8.52%	11,401	18
4	8,008	12.32%	19,409	30
5	11,314	17.40%	30,723	47
6	13,059	20.09%	43,782	67
7	12,540	19.29%	56,322	87
8	5,794	8.91%	62,116	96
9	2,896	4.45%	65,012	100

Appendix B. Distribution of PREview Scores: 2022-2024

The PREview score distribution for all 65,012 exams administered in the period 2022 to 2024 is presented in the bar chart. The mean PREview score was 5.4 (SD 2.0) and the median score was 6.

Distribution of PREview Scores: 2022-2024



Appendix C. PREview Judgment Maps

This illustration shows how examinees with different scores on the PREview exam tend to rate the same behaviors in a situation. It includes two scenarios and responses from the relational skill area and two from the personal accountability skill area. It also includes an example from each effectiveness rating (i.e., very ineffective, ineffective, effective, and very effective).

Higher-scoring examinees are more likely to recognize which behaviors are truly helpful or harmful. They tend to rate the best responses as very effective and the worst ones as very ineffective. In contrast, lower-scoring examinees are less likely to recognize which behaviors are helpful or harmful (i.e., they may not clearly distinguish what works and what does not).

By including examples with real scenarios and responses, this illustration helps show the kinds of judgment and insight that higher scorers demonstrate. The tables display the percentage of examinees who matched the consensus effectiveness rating across different PREview score points. For example, in Scenario 1, 70% of examinees with a PREview scale score of 8 rated the response as “Very Effective,” thus matching the consensus effectiveness rating, compared to 45% of those with a score of 2.

PREview judgment maps illustrate how higher PREview scores align with better recognition of effective and ineffective professional behaviors.

Scenario 1. Competency: Reliability and Dependability

Your medical school hosts an annual charity event. Students are expected to volunteer in shifts to assist with the event; however, volunteering is not required. You and some of your medical school friends sign up to cover a shift together. The day before the event, your friends tell you they are going to call in sick to the event to attend a professional development seminar instead. The seminar is optional but other students have said it is really interesting and you should not miss it.

Response	Expert Consensus Rating
Encourage your friends to uphold their volunteer commitment.	Very Effective

Scale Score	% Matching Consensus Rating
2	45%
5	58%
8	70%

Rationale: This response is rated **Very Effective** because it promotes a course of action that is likely to significantly improve the situation. By encouraging their friends to uphold their commitment, the student demonstrates respect and accountability for their commitment and models professional behavior for their classmates.

Scenario 2. Competency: Empathy and Compassion

You notice that one of your talkative classmates appears to be unusually quiet. You approach them after class and learn they are worried about their family who lives in a country that is currently experiencing conflict. As a result, they are having trouble concentrating on their studies.

Response	Expert Consensus Rating
Express your sympathies for your classmate's situation.	Effective

Scale Score	% Matching Consensus Rating
2	56%
5	72%
8	85%

Rationale: This response is rated **Effective** because it acknowledges the classmate's distress and provides emotional support, which could help the classmate feel seen. Although the response could help improve the situation, it is not rated Very Effective because it does not go beyond sympathy to offer additional support to the classmate.

Scenario 3. Competency: Ethical Responsibility to Self and Others

You are observing a student who is completing a medical history on a patient whose family is also in the room. As you both leave the patient's room, the student makes a joke about the patient's appearance. You suspect the patient's family members overheard the comment, but you are not certain.

Response	Expert Consensus Rating
Make note of the event and take action if the student makes another inappropriate joke.	Ineffective

Scale Score	% Matching Consensus Rating
2	28%
5	52%
8	75%

Rationale: This response is rated **Ineffective** because it fails to address the potential harm caused by the student's inappropriate comment. Although the student demonstrates awareness of their classmate's unprofessional behavior and intends to act if it happens again, this response allows a breach of professionalism to go unaddressed and misses an opportunity to address the student directly.

Scenario 4. Competency: Teamwork and Collaboration

Your anatomy lab requires each medical student to join a lab team with another student to perform dissections. Each week, a different lab team instructs the rest of the class on how to perform a dissection on a designated area of the human body and receives a grade for their performance. During your team's instruction, your partner is very nervous and forgets the material you rehearsed together earlier in the week.

Response	Expert Consensus Rating
Tell your partner that you will finish giving the instruction by yourself.	Very Ineffective

Scale Score	% Matching Consensus Rating
2	24%
5	48%
8	71%

Rationale: This response is rated **Very Ineffective** because it dismisses the partner rather than supporting them. This is likely to heighten the partner's stress and potentially cause embarrassment. Further, the response creates additional problems by failing to allow the partner an opportunity to continue performing the dissection, which reflects poor teamwork and collaboration skills.

Figure Notes

Figure 1. PREview examinees from 2022 to 2024, by demographic characteristics, backgrounds, and experiences (N = 49,966)

- i. For those who took the exam more than once, the information from their most recent administration was used in these analyses.
- ii. PREview examinee data for gender, race/ethnicity, fee assistance, and parental education are sourced from AMCAS data and the MCAT registration system. Data for testing condition and repeater status are sourced from the PREview registration system.
- iii. Percentages do not add up to 100% because some examinees reported multiple races/ethnicities.
- iv. Examinees report the highest level of education for up to four parents. These results are for the highest level of parental education.
- v. For repeater status, “Single attempt only” includes examinees who took the PREview exam for the first time in 2022, 2023, or 2024 and did not test again. “Repeater” includes examinees who tested from 2022 to 2024 and who took the PREview exam more than once in their testing history.

Figure 2. PREview scores for all exams administered from 2022 to 2024, overall and by demographic characteristics, backgrounds, and experiences (N = 65,012).

- vi. PREview examinee data for gender, race/ethnicity, fee assistance, and parental education are sourced from AMCAS data and the MCAT registration system. Data for testing condition and repeater status are sourced from the PREview registration system.
- vii. Data for examinees who reported their race/ethnicity as “other” are not shown.
- viii. Examinees report the highest level of education for up to four parents. These results are for the highest level of parental education for examinees who took the PREview exam from 2022 to 2024.

- ix. For repeater status, “Single attempt only” includes the scores from the examinees who took the PREview exam for the first time in 2022, 2023, or 2024 and did not test again. “Repeater” data include scores from the examinees who took the PREview exam for the first time in 2022, 2023, or 2024 and then tested at least one more time during this same time period. The “1st attempt” box plot shows these repeaters’ scores from their very first attempt, and the “2nd attempt” box plot shows these same examinees’ scores from their second attempt.

Table 1. Applicants in 2022, 2023, and 2024 Who Were Accepted by at Least One Medical School

- x. For students who took the MCAT or PREview exam multiple times, the most recent MCAT and PREview scores were used in this analysis.

Table 2. On-Time Progression to Year Three at Early-Adopter Medical Schools: 2021 and 2022 Matriculants

- xi. For students who took the MCAT or PREview exam multiple times, the most recent MCAT and PREview scores were used in this analysis. Students who entered medical school with advanced standing from medical, graduate, or other programs; were enrolled in joint programs (e.g., MD-PhD) at the time of matriculation or graduation; participated in special research/nonresearch studies; or are deceased are not included in this table.

Figure 3. Total number of PREview examinees and percentage of all medical school applicants who had PREview scores, 2021-2024

- xii. Number of examinees and applicant percentages are counted by year. If a student applies to medical school or takes the PREview exam in multiple years, they are counted each time.

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**Association of
American Medical Colleges**
655 K Street, NW, Suite 100, Washington, DC 20001-2399
T 202 828 0400
aamc.org