

# Creating MCQs in Canvas LMS

This document is intended to explain how to create an MCQ test bank in Canvas LMS starting from an original Excel document.

Open the Excel file which contains the original MCQs

Question writer	Subspecialty	Flipped Classroom Topic	Question	Answer options	Answer	Answer rationale	Quality of Question
Dr. Tracy Makuvire	Cardiology	Valvular Heart disease	A 78-year-old man was brought to the emergency department because of a 3-week history of a productive cough, swelling of the legs and feet, and fatigue. He has had progressive dyspnea on exertion for the past 2 months. Twelve years ago, he received a porcine valve replacement for severe mitral valve regurgitation. He has coronary artery disease, type 2 diabetes mellitus, and hypertension. He has smoked one pack of cigarettes daily for 60 years and drinks one beer daily. Current medications include aspirin, simvastatin, ramipril, metoprolol, metformin, and hydrochlorothiazide. He appears pale. He is 179 cm (5 ft 9 in) tall and weighs 127 kg (279.9 lb); BMI is 41.3 kg/m <sup>2</sup> . His temperature is 37.1°C (98.9°F), respirations are 22/min, pulse is 96/min, and blood pressure is 146/94 mm Hg. Bilateral basilar rales are heard on auscultation of the lungs. Cardiac examination shows a laterally displaced apical heartbeat. A grade 3/6, decrescendo-crescendo diastolic murmur is heard over the apex. There is bilateral pitting edema of the feet and ankles. The remainder of the examination shows no abnormalities. Which of the following is the most likely cause of this patient's symptoms?	A) Pneumonia *B) Valve degenerative degeneration C) Infective Endocarditis D) Chronic obstructive pulmonary disease E) Pulmonary embolism	B: Valve degeneration	Answer: B: Valve degeneration The patient underwent a porcine valve replacement.	Ready to use
Dr. Tracy Makuvire	Cardiology	Valvular Heart disease	A 60-year-old man comes to the physician because of progressive fatigue and shortness of breath for 2 months. The dyspnea occurs on moderate exertion and during the night; he sometimes wakes up coughing and "gaspings for air." He has also had several episodes of heart pounding. He has type 2 diabetes mellitus and peripheral arterial disease. He has never smoked. He drinks one to two beers occasionally. He has a history of intravenous illicit drugs use but has not used in over 25 years. Current medications include aspirin, atorvastatin, and metformin. Vital signs are within normal limits. Examination shows bilateral basilar rales. Cardiac auscultation is notable for a holosystolic blowing murmur that radiates into	A) Pericarditis B) Tricuspid valve regurgitation *C) Mitral valve regurgitation D) Aortic valve regurgitation E) Pulmonary valve stenosis Mitral valve stenosis Aortic valve stenosis	C: Mitral Valve regurgitation	Answer: C Mitral valve regurgitation This patient's auscultatory findings indicate	Ready to use

Select and copy the questions you want to add to the test bank in Canvas

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## Paste the copied content into a text file (In Windows Notepad)

\*Untitled - Notepad  
File Edit Format View Help

A 78-year-old man was brought to the emergency department because of a 3-week history of a productive cough, swelling of the legs and feet, and fatigue. He has had progressive dyspnea on exertion for the past 2 months. Twelve years ago, he received a porcine valve replacement for severe mitral valve regurgitation. He has coronary artery disease, type 2 diabetes mellitus, and hypertension. He has smoked one pack of cigarettes daily for 60 years and drinks one beer daily. Current medications include aspirin, simvastatin, ramipril, metoprolol, metformin, and hydrochlorothiazide. He appears pale. He is 179 cm (5 ft 9 in) tall and weighs 127 kg (279.9 lb); BMI is 41.3 kg/m<sup>2</sup>. His temperature is 37.1°C (98.9°F), respirations are 22/min, pulse is 96/min, and blood pressure is 146/94 mm Hg. Bilateral basilar rales are heard on auscultation of the lungs. Cardiac examination shows a laterally displaced apical heartbeat. A grade 3/6, decrescendo-crescendo diastolic murmur is heard over the apex. There is bilateral pitting edema of the feet and ankles. The remainder of the examination shows no abnormalities. Which of the following is the most likely cause of this patient's symptoms? "A) Pneumonia  
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B) Tricuspid valve regurgitation  
\*C) Mitral valve regurgitation  
D) Aortic valve regurgitation  
E) Pulmonary valve stenosis  
Mitral valve stenosis  
Aortic valve stenosis"

You will need to edit the text file in the following ways:

- 1.) Make sure EACH question starts with 1.
- 2.) Delete all parentheses
- 3.) Make sure all answers are listed below the question
- 4.) Delete stray responses below the listed answers

\*Untitled - Notepad  
File Edit Format View Help

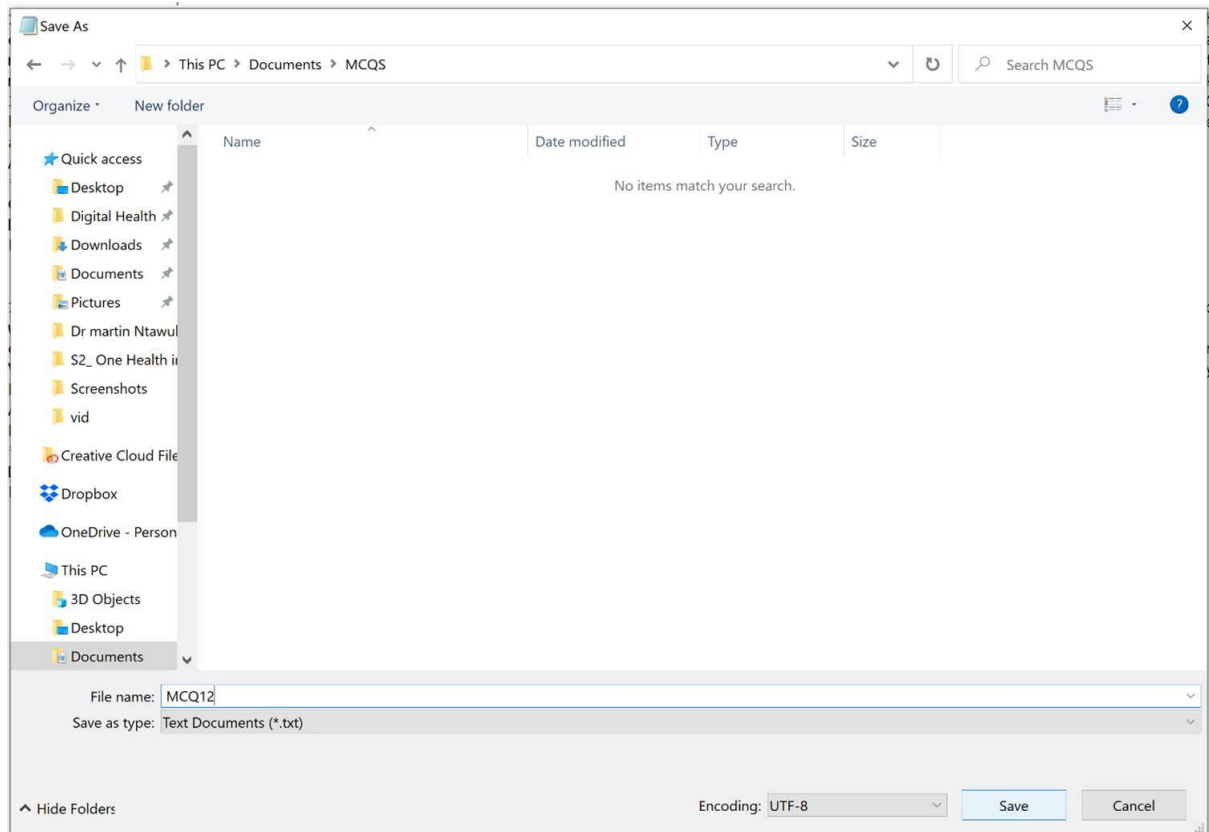
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Save the text file in a location you can find.



Visit the website: <http://ec2-34-207-154-191.compute-1.amazonaws.com/>

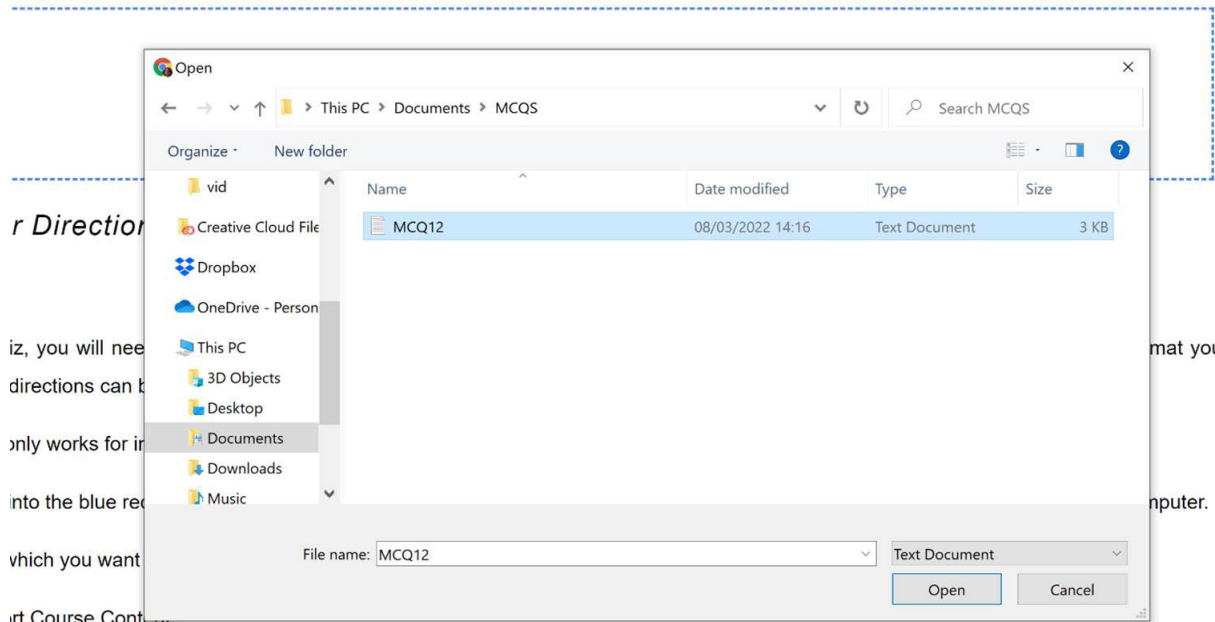


### Canvas Quiz Converter Directions

Hello There!

In order to generate a Canvas quiz, you will need a properly formatted text file to drop into the converter tool. A quick guide to creating questions. A more thorough set of directions can be found in [this extended document](#)

Select Drop files here or Click to Upload, select the text file you just saved and select Open.



The text file will then be converted into a .ZIP file



## Canvas Quiz Converter Directions

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The zip file generated by this tool only works for import into Canvas. Don't open the

1. Drop your plain text quiz file into the blue rectangle to convert it to a Canvas C



Visit the course where you want to add the questions in Canvas and select Settings.

The screenshot shows a web browser window with the URL `learnmed.stanford.edu/courses/1161`. The browser's address bar and tabs are visible at the top. Below the browser, the Canvas LMS interface is shown. On the left, a vertical sidebar menu contains various course management options: Grades, People, Pages, Files, Syllabus, Outcomes, Rubrics, Quizzes, Modules, BigBlueButton, Collaborations, Adaptive Lessons, Content Library, New Analytics, Attendance, LockDown Browser, UGHE Library, and Settings. A red arrow points to the 'Settings' option. In the main content area, there is a large grey graphic with the text 'Create a new Module' and buttons for 'View Progress', '+ Module', and a menu icon.

Once in the Settings area, select Import Course Content.

UGHE TBT001 > Settings

Course Details Sections Navigation Apps Feature Options Integrations

### Course Details

Image:

Name:

Course Code:

Blueprint Course:  Enable course as a Blueprint Course

Course Template:  Enable course as a Course Template

Time Zone:

SIS ID:

Subaccount:

Course Status:

- Share to Commons
- Course Statistics
- Course Calendar
- Conclude this Course
- Delete this Course
- Copy this Course
- Import Course Content**
- Export Course Content
- Reset Course Content
- Validate Links in Content

Current Users

Once on the Import Content page select QTI .zip file from the dropdown menu.

UGHE TBT001

### Import Content

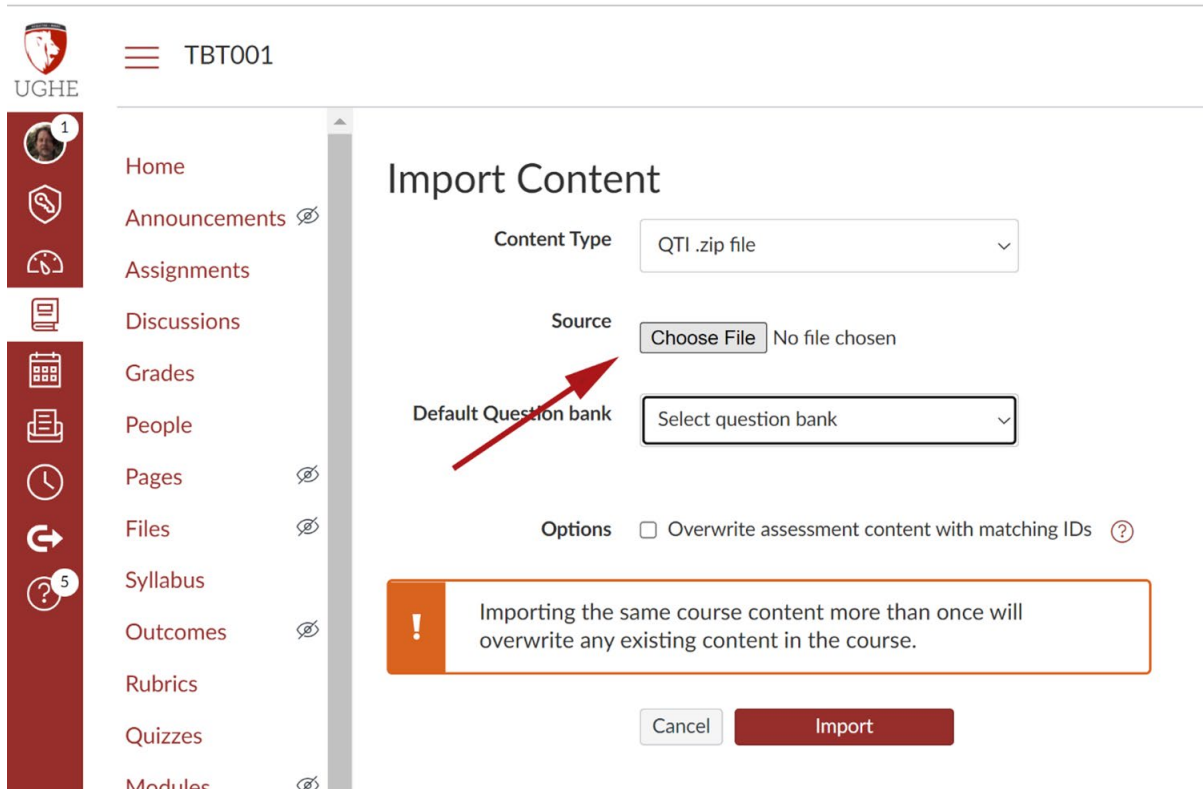
Content Type:

- Select One
- Copy a Canvas Course
- Canvas Course Export Package
- Unzip .zip file into folder
- Angel export .zip format
- Blackboard 6/7/8/9 export .zip file
- Blackboard Vista/CE, WebCT 6+ Course
- Common Cartridge 1.x Package
- D2L export .zip format
- Moodle 1.9/2.x
- QTI .zip file**

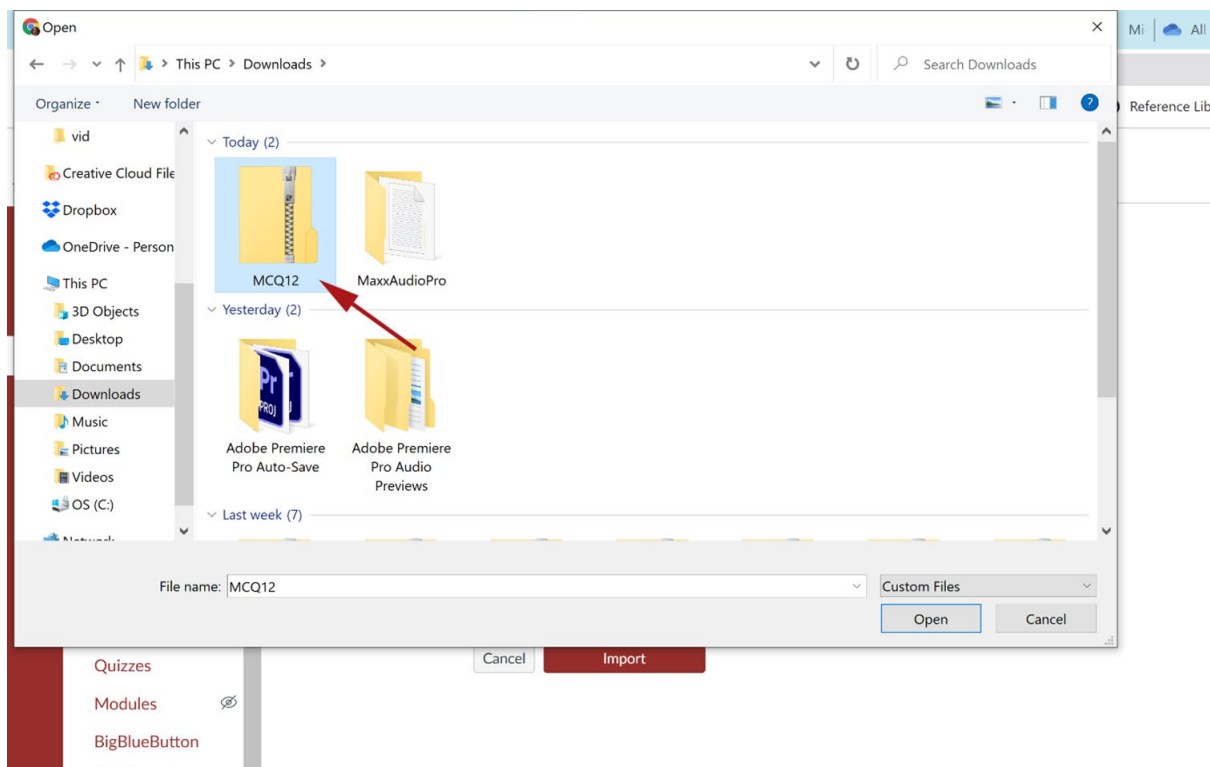
### Current Jobs

QTI	clinicaltest2.zip
QTI	clinical5.zip
QTI	mcqtest.zip

Select Choose File.



Navigate to the ZIP file that was created from the text file. The ZIP is automatically downloaded to your Downloads folder.



Select and question bank and select Import.

learnmed.stanford.edu/courses/1161/content\_migrations

UGHE TBT001

### Import Content

Content Type: QTI .zip file

Source: Choose File MCQ12.zip

Default Question bank: Select question bank  
-- Create new question bank --  
Clinical Five

Options:  Overwrite assessment content with matching IDs

! Importing the same course content more than once will overwrite any existing content in the course.

Cancel Import

The imported file will then show up under Current Jobs.

UGHE TBT001

### Import Content

Content Type: Select One

### Current Jobs

Content Type	File Name	Time	Status
QTI	MCQ12.zip	Mar 8 at 2:44pm	Completed

Content import files cannot be downloaded after 500 days.

Select Quizzes > The Quiz that was just loaded> Edit, to see the questions that were just loaded.





- Home
- Announcements
- Assignments
- Discussions
- Grades
- People
- Pages
- Files
- Syllabus
- Outcomes
- Rubrics
- Quizzes
- Modules
- BigBlueButton
- Collaborations
- Adaptive Lessons
- Content Library
- New Analytics
- Attendance

Details **Questions**

Show Question Details

**Question** 1 pts

A 78-year-old man was brought to the emergency department because of a 3-week history of a productive cough, swelling of the legs and feet, and fatigue. He has had progressive dyspnea on exertion for the past 2 months. Twelve years ago, he received a porcine valve replacement for severe mitral valve regurgitation. He has coronary artery disease, type 2 diabetes mellitus, and hypertension. He has smoked one pack of cigarettes daily for 60 years and drinks one beer daily. Current medications include aspirin, simvastatin, ramipril, metoprolol, metformin, and hydrochlorothiazide. He appears pale. He is 179 cm (5 ft 9 in) tall and weighs 127 kg (279.9 lb); BMI is 41.3 kg/m<sup>2</sup>. His temperature is 37.1°C (98.9°F), respirations are 22/min, pulse is 96/min, and blood pressure is 146/94 mm Hg. Bilateral basilar rales are heard on auscultation of the lungs. Cardiac examination shows a laterally displaced apical heartbeat. A grade 3/6, decrescendo-crescendo diastolic murmur is heard over the apex. There is bilateral pitting edema of the feet and ankles. The remainder of the examination shows no abnormalities. Which of the following is the most likely cause of this patient's symptoms?

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