FACULTY OF MEDICINE
HANDBOOK

CALENDAR
1984

Volume 9
DEAN'S INTRODUCTION

Many of you have come to this Faculty because of its expressed interest in a new and exciting educational programme which attempts to put the things that you need to learn into perspective, in the light of real patient problems arising in the community that you might deal with. The Foundation Dean and initiator of this new Faculty was Professor David Maddison, who died suddenly in November 1981. It is a measure of his achievement that the staff whom he recruited had sufficient devotion to the job to maintain and renew their commitment to the ideas that we all worked out together. We call continue to support the primary objectives of the programme, and we look upon the achievement of the new style of medical education as the real memorial to him.

What is new and exciting about the educational programme? What has made the staff members enthusiastic about doing something new, and at contributing to a new type of medical education? What made your predecessors as students so enthusiastic about working hard, and what made them, in a recent enquiry, vote the Newcastle Faculty of Medicine as the most exciting Faculty in Australia to be a student in? Why are quite influential organizations overseas like the World Health Organization, the Rockefeller Foundation and so on, interested in what we are doing?

After all, we are a small medical faculty in a city which is not even a capital city, which is having to do a considerable amount of work to persuade the health authorities that certain types of health care, equipment and buildings are necessary for proper medical care of the local patients. Clearly it must be the human interactions which take place in the Faculty, and the structure of the course, which combine to engender the enthusiasm.

The course concentrates on certain aspects very much more than is customary in medical courses, not only in Australia but in other English speaking countries. In the first place, you have had a fairly complex admission process, to try to select those who are keen to take part in this new type of study. Not only that, we have tried to select people who will have a genuine interest in their patients and the patients’ problems when they graduate. We want people who are interested in other people, not only to be nice to them and talk to them, but also to be able to give them genuine, effective help with whatever their problems may be. We all admit, indeed we are very proud of the fact, that the medical facilities which trained us do produce many very excellent medical practitioners. However, during our own undergraduate studies there was insufficient emphasis on a number of the aspects which we have since found to be critically important in medical practice.

Our aim in this course is to give you the opportunity to learn all of the essentials which are encompassed in other medical courses; it would be breaking faith with patients if you did not have this competence as part of your background. However, there are other aspects dealing with management of people, communication with people, judgement of needs in the community, emphasis on prevention as well as on cure of established problems, which we look upon as extra components of the training of the proper undergraduate, fit at graduation to take his place at the next stage of his development. We warn you, if you have not already heard it, that graduation is merely the middle of the education process, so that you need another four or five years before you are capable of true independence in whatever type of practice you finally chose.

If there is therefore one single motto which I would accept as representing the major tenet of our Faculty, it would be not instead of, but in addition to. That is to say, we do not replace the excellent features of other medical faculties, nor do we concentrate on simple things to the exclusion of complex ones, but we expect you by virtue of the interest which we generate and the problems as we identify them, to be able to put in the extra work which is necessary to master extra skills and to form the appropriate attitudes.

What does this involve in terms of study? It involves you in acquiring a whole series of skills in communication and examination of patients, fairly early and continuing throughout the course. It involves you in what we call problem based learning, that is learning where the impetus is generated by your contact with real patient problems, either in writing or with real patients. Your learning is an integrated way, drawing on all aspects
of the basic sciences, clinical sciences, epidemiology, statistics and whatever else might be relevant, to solve the problem for which the patient has sought help. Much of your work is in small groups, rather than in formal lectures and large scale laboratory classes. This encourages you to learn to interact with other people, and also to become an independent, self motivated learner so that in later life you will be fully responsible for your own ongoing education.

After careful analysis of the process of clinical problem solving, you will realise that there is no fundamental difference between the mental processes required to do it properly and those necessary to plan and ultimately execute research, which is after all the basis of progress in medicine. We expect therefore that all of you will come to respect the value of research, to learn how to keep up with it, to evaluate the numerous publications which you will read. We hope that a number of you will take part in the excitement of research, in clinical or basic science, as part of your ongoing career. We see science as a methodology, and the scientific method as a way of tackling problems. We are very firmly convinced that basic sciences of all sorts are an essential component of the way of thought which you need to use to solve patients' problems. The background knowledge which you need to master includes many very complex concepts and we emphasise these aspects of the basic sciences rather than concentrating on simple factual information, which you learn to consult when you find you need it. In summary, we are in the business of training thinking individuals, sensitive to the needs and anxieties of the patients who come to consult them and able to draw on all available resources to help them.

Let me therefore welcome you all to the Faculty. The staff are ready to discuss any problems you bring to them, with the single proviso that we prefer you to have already done some thinking before you come to talk to us. That way, you will have been through the process of identifying your needs and so will be much more likely to benefit from the conversation. Furthermore we, as staff members, also recognise that if students have done some thinking first, they very frequently have thought about things which staff members haven't, so that we also get stimulation from your thoughts which enables us to do our own jobs just that much better. We welcome you really as younger partners in the business of building a vital medical faculty, one which can keep itself alive and innovative, meeting the challenges of tomorrow rather than answering the questions of last year.

GEOFFREY M. KELLERMAN,
Dean.
constitutions of the Faculty Board

The membership of the Vice-Chancellor and the full-time academic and teaching staff is provided for by the relevant by-laws and regulations. Additional members are provided for in the Faculty of Medicine as follows:

1. Members elected by the Senate from the academic staff of the University other than the Faculty of Medicine, in the ratio of one such member for each eight members of the full-time academic staff of the Faculty of Medicine immediately preceding the commencement of the term of office in each year, the result of such calculation to be adjusted up to the next whole number;

2. Members elected by and from the part-time academic staff of the Faculty in the ratio of one such representative for each four full-time members of the academic staff of the Faculty immediately preceding the commencement of the term of office in each year, the result of such calculation to be adjusted up to the next whole number; provided that medical and non-medical members of that part-time staff shall be represented as closely as possible in the proportion which their respective numbers bear to the total number of such staff;

3. The Librarian or his nominee;

4. The Regional Director for the Hunter Region of the Health Commission of New South Wales;

5. A member nominated by the Hunter Medical Association;

6. Two members nominated by the Board of Directors of The Royal Newcastle Hospital: provided that there shall be only one such nominee in 1977;

7. A member nominated by the Advisory Board of the Mater Misericordiae Hospital;

8. A member nominated by the Board of Directors of the Wallsend District Hospital: provided that no such nominee shall be appointed before 1st January, 1978;

9. Not more than three other persons, whether or not members of the University, elected by the members of the Faculty Board other than those prescribed in this paragraph;

10. One postgraduate student elected by and from the postgraduate students enrolled in the Faculty;

11. Two students from each year of the Bachelor of Medicine degree course offered within the Faculty, elected by and from the students enrolled in each year of that course.

12. One student elected by and from the candidates for the degree of Bachelor of Medical Science.

Hospitals and Other Clinical Facilities

The Royal Newcastle Hospital complex comprises a total of 870 beds distributed between four main sites. These include the main hospital (503 beds) and Belmont Hospital (108 beds), which provide a range of general and specialist services, William Lyne (90 beds), the centre of the hospital's geriatric rehabilitation programme, and Rankin Park, used for chest patients.

There are approximately 1,300,000 outpatient attendances annually, mainly for specialist clinics. The hospital also provides a domiciliary care service, involving approximately 36,000 home visits per year.

The Newcastle Mater Misericordiae Hospital has 302 beds, including 50 for paediatrics and 61 for obstetrics. Approximately 1900 births occur annually at this hospital.

Wallsend District Hospital has approximately 200 beds following completion of recent extensions and is expected to develop a significant role in geriatric and psychiatric care, and in community health and domiciliary care services.

Newcastle Psychiatric Centre has 151 beds and an admission rate of approximately 2000 per year. The admission pattern is similar to that in other State psychiatric hospitals.

Associated Hospitals

Gosford District Hospital
Manning River District Hospital
Gosford District Hospital

Private Practitioners

Many general practitioners and specialists in the Region make their practices available as learning resources.

Health Commission

The Health Commission of New South Wales has Community Care Centres throughout the Hunter Region. These provide a wide range of services including domiciliary care. There are, in addition, a number of specialist services, the Hunter Drug Advisory Service, Regional Mental Retardation Team, Regional Geriatric Team and Child Development Unit, which participate in the educational activities of the University.

Dress and Appearance

In all professional settings, the general appearance and dress of students should be appropriate. This is so that the image which students present to patients and relatives facilitates communication between them, so that students are easily recognised as members of the professions by health professionals and other staff, and so that students themselves develop a sense of professional identity.

In some clinical settings (e.g. wards, clinics, etc.) it will be appropriate to wear a short white coat of approved pattern. The Faculty will make available a supply of such coats for purchase by students, who will be responsible for laundering them. These should only be worn in hospital or other professional surroundings.

In some cases it may be more appropriate not to wear a white coat (e.g. private rooms, some surgeries). Advance consultation with the person in charge of the activity will establish whether or not a white coat should be worn.

For laboratory work, protective clothing (when required) will be provided by the Faculty, and should be worn.

Students will be expected to wear a name badge in the clinical setting, and on some other occasions which will again be identified by consultation with the person in charge. The badge will bear the student's given name and surname only, and will be provided by the Faculty. In some hospitals, further identification will be necessary; this should be worn or carried at all times, and may be useful identification outside the hospital.

For obvious reasons, a high standard of cleanliness will be required in all clinical settings. General tidiness and dress should be socially acceptable and appropriate to the occasion. Students will quickly learn by experience what standards are appropriate in different circumstances, not only, for example, on the wards or in private rooms, but also in 'off duty' professional settings, e.g. hospital dining rooms.

In general, men may wear shorts with long socks and shoes. Thongs will be inadvisable for safety reasons. No restriction will be placed on hair length, but hair should be clean and kept under control.

Supervisors will notify students whose dress and appearance is inappropriate, and such students may be refused access to the facilities for which their turnout is deemed inappropriate.
Costs
Apart from the compulsory charges common to all undergraduate courses, there will be some additional costs.

Clothing
The white coats mentioned in the section on Student Dress and Appearance should be purchased by students. Coats of the approved pattern will be available on campus for purchase by students during the first week of Term I. Each student should possess two coats, total cost approximately $25.00.

Instruments
The only instrument required by a student at the outset is a stethoscope.

Books
Students are recommended not to buy books until they have had the opportunity to assess the books provided on loan in the first year of the course. Additional information is available elsewhere in this Handbook.

The Auchmuty Library
At present, medical monographs and serials form part of the general collections. Medical non-print materials, however, and facilities for their use together with a small collection of special texts are housed in the Medical Reading Room within the Library.

Medical Reading Room
Monday to Thursday 8.30 a.m. to 8 p.m.
Friday 8.30 a.m. to 5 p.m.
Saturday and Sunday 1 p.m. to 5 p.m.

The Gardiner Library
Monday to Thursday 8.30 a.m. to 8 p.m.
Friday 8.30 a.m. to 5 p.m.
Sunday 1 p.m. to 5 p.m.

Requirements for the Degree of Bachelor of Medicine

Definition
1. In these Requirements, unless the context or subject matter otherwise indicates or requires, "the Faculty Board" means the Faculty Board of the Faculty of Medicine.

Grading of Degree
2. The degree of Bachelor of Medicine may be conferred as an ordinary degree or as a degree with honours.

Enrolment
3. A candidate shall enrol only as a full-time student.

Qualifications for Degree
4. To qualify for admission to the degree of Bachelor of Medicine a candidate shall in normally not less than five academic years complete to the satisfaction of the Faculty Board the programme of work set out in the Schedule of these Requirements and consisting of such seminars, tutorials and lectures, written and practical work, examinations and assessments as may be prescribed by the Faculty Board.

5. Except as otherwise provided in clauses 7 and 9 of these Requirements a candidate shall complete the programme of work in consecutive terms.

Progression
6. (1) A candidate shall attempt all the assessments prescribed as summative by the Faculty Board.
(2) Except in Phase 5, the results of candidates in summative assessments shall be classified as ungraded Pass or Fail. In Phase 5 results shall be classified as Honours, Pass or Fail.
(3) A candidate whose result in a summative assessment is classified as Fail will be required to attempt such additional assessment as the Faculty Board shall determine.

Withdrawal
7. (1) A candidate may withdraw from the course only by notifying the Secretary to the University in writing and the withdrawal shall take effect from the date of receipt of such notification.
(2) Such withdrawal shall be —
(a) without failure, if the candidate's performance is deemed by the Faculty Board to be satisfactory; or
(b) with failure, if the candidate's performance is deemed by the Faculty Board to be unsatisfactory.

8. A candidate who has been permitted to withdraw without failure and who subsequently wishes to resume his studies in the course:
(a) will be required to re-apply for admission to the course if the withdrawal occurred during his first year of study; or
(b) if the withdrawal occurred in a later year of study, will be permitted to re-enrol under such conditions and at such time as the Faculty Board may determine; which conditions may include success at re-assessment before re-enrolment.

Leave of Absence
9. At the completion of an academic year, a candidate whose performance is deemed by the Faculty Board to be satisfactory may be granted leave of absence under such conditions as the Faculty Board may determine. Such leave will not normally be granted for more than one year.

Relaxation Clause
10. The Senate on the recommendation of the Faculty Board may relax any provision of these Requirements in order to provide for exceptional circumstances arising in particular cases.
### THE SCHEDULE

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**Notes**

1. The programme of work in elective studies shall be proposed by the candidate and approved by the Faculty Board.
2. Years 3, 4 and 5 each comprise four Terms whose dates are not the same as those of the three University Terms.

### BACHELOR OF MEDICAL SCIENCE

A one year programme leading to the award of the degree of B.Med.Sc. is available to candidates for the degree of Bachelor of Medicine who have completed at least three years of their course. The degree provides for a period of supervised research in any of the disciplines represented in the Faculty of Medicine, or in another related to Medicine, subject to the availability of adequate supervision within the Faculty.

The programme is intended for medical students who wish to consider research as an option in their careers, rather than concentrate solely on the practice of clinical medicine, and provides a basic training in research methods.

### REQUIREMENTS FOR THE DEGREE OF BACHELOR OF MEDICAL SCIENCE

1. In these Requirements, unless the context or subject matter otherwise indicates or requires, "the Faculty Board" means the Faculty Board of the Faculty of Medicine.
2. (1) The degree of Bachelor of Medical Science shall be conferred as an honours degree only.
   (2) There shall be three classes of Honours, namely Class I, Class II and Class III. Class II shall have two divisions, namely Division (i) and Division (ii).
3. An application for admission to candidature for the degree shall be made on the prescribed form and lodged with the Secretary to the University by the prescribed date.
The University of Newcastle Calendar consists of the following volumes:

Volume 1 — Legislation:
  Part 1 — The University of Newcastle Act,
  Part 2 — By-laws and Regulations,
  Part 3 — Bodies Established by Resolution of Council,
  Part 4 — Scholarships, Prizes and Financial Assistance.

Volume 2 — University Bodies and Staff:
  Part 1 — Principal Officers, Council, Senate, Boards and Committees,
  Part 2 — The Professors and Staff.

Volume 3 — Handbook, Faculty of Architecture
Volume 4 — Handbook, Faculty of Arts
Volume 5 — Handbook, Faculty of Economics and Commerce
Volume 6 — Handbook, Faculty of Education
Volume 7 — Handbook, Faculty of Engineering
Volume 8 — Handbook, Faculty of Mathematics
Volume 9 — Handbook, Faculty of Medicine
Volume 10 — Handbook, Faculty of Science
Volume 11 — Annual Report

All volumes, except Volume 1 — Legislation, are published annually.

Volume 1 — Legislation is published irregularly the last issue being 1982.

All volumes except Volumes 2 Staff and 11 Annual Report are available on microfiche.

Other Publications
Undergraduate Prospectus
Postgraduate Prospectus
An ABC for New Students
University News
Gazette

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January
1 Sunday New Year’s Day
2 Monday Public Holiday
6 Friday Last day for return of Re-Enrolment Forms — Continuing Students
           Final Deferred Examinations
30 Monday Public Holiday
31 Tuesday Closing date for applications for residence in Edwards Hall

February
22 Wednesday New Medical students attend in person to enrol and pay charges
27 Monday First Term begins for 1st year Medical Students

April
20 Friday Good Friday — Easter Recess commences
25 Wednesday Public Holiday — Anzac Day
26 Thursday Classes resume

June
11 Monday Public Holiday — Queen’s Birthday
15 Friday Last day for return of Confirmation of Enrolment forms
30 Saturday Closing date for Applications for Admission to the Bachelor of Medicine course in 1985

August
6 Monday Last day for withdrawal without academic penalty from full year subjects
    (See also Dean’s discretion p vi)

October
1 Monday Public Holiday — Eight Hour Day
    Closing date for Applications for Admission 1985 (Undergraduate courses other than Medicine)

FACULTY OF MEDICINE TERM DATES, 1984

YEAR 1
Term 1: February 27 — May 5
2: May 28 — July 28
3: August 13 — November 17

YEAR 2
Term 4: February 27 — May 5
5: May 28 — July 28
6: August 13 — November 17

YEAR 3
Term 7: February 13 — April 14
8: April 26 — June 16
9: July 2 — October 6
10: October 8 — December 8

YEAR 4
Term 11: February 13 — April 19
12: April 26 — June 30
13: July 16 — September 22
14: September 24 — December 1

YEAR 5
Term 15: February 13 — April 7
16: April 9 — June 2
17: June 18 — August 11
18: August 13 — November 17
II GENERAL INFORMATION

Enrolment of New Students
Persons offered admission are required to attend in person at the Great Hall in late February to enrol and pay charges. Detailed instructions are given in the Offer of Admission.

Enrolment of Continuing Students
The University makes arrangements for continuing students to enrol by mail. There are two steps involved:

— Lodging the Enrolment form
— Completing enrolment by lodging the Authority to Complete Enrolment form with the cashier with charges payable.

1. Lodging Enrolment Forms
Re-enrolment materials will be mailed to all undergraduate students in mid-December. Those who wish to enrol in 1984 and who are eligible to do so (see Regulations Governing Unsatisfactory Progress) should complete the enrolment form as soon as possible after the release of the 1983 annual examination results, and forward it to the Secretary, University of Newcastle, N.S.W., 2308.

Enrolment forms from continuing students are due by 6 January 1984 except in the case of a student who is required to take a special or deferred examination in which case the enrolment form must be submitted within seven days of the release of those examination results.

Submission of enrolment forms after the due date will render the student liable to a late lodgement charge of $14.00.

Students who, for good reason, are unable to submit their enrolment forms by the due date, may apply for an extension of time. The request, with details of the reason for the extension must reach the Secretary by the due date if the late lodgement charge is to be avoided. The By-laws provide that no enrolment will be accepted after 31 March without the approval of the Secretary.

2. Completing Enrolment
When the proposed programme has been approved, an Authority to Complete Enrolment form will be mailed to the student showing charges payable. Students are required to complete enrolment by lodging the form with the Cashier with the charges payable. This can be done by mail or in person. The Cashier's office is open 10 am to 12 noon and 2 pm to 4 pm Monday to Friday. At least 14 days notice is allowed from the date of posting to the date by which charges must be paid if a late charge is to be avoided.

Student Cards
The Authority to Complete Enrolment form incorporates the student's identification card which is returned to him after payment of charges. It should be carried by students at the University. It serves as evidence that the student is enrolled and must be presented when applying for travel concessions, a parking permit or to confirm membership of the University Union.

If a student loses his Student Card he should pay the replacement charge of 50 cents to the Cashier and present the receipt at the Student Administration Office when seeking a replacement card.

A student who withdraws completely from studies should return the Student Card to the Student Administration Office.

Library Cards
Students should present their Student Card to the Library desk to be issued with their Library Borrower Number. This card, with its machine readable lettering, must be presented when borrowing books from the Library.

Re-admission after Absence
A person who has been enrolled previously in the Medical course, but not enrolled in 1983, is required to lodge an Application for Admission if further undergraduate enrolment is desired. Applications are available from the Student Administration Office and should be lodged by 30 June 1983.

Attendance Status
A candidate for any qualification other than a postgraduate qualification who is enrolled in three quarters or more of a normal full-time programme shall be deemed to be a full-time student whereas a candidate enrolled in either a part-time course or less than three-quarters of a full-time programme shall be deemed to be a part-time student.

A candidate for a postgraduate qualification shall enrol as either a full-time or a part-time student as determined by the Faculty Board.

Change of Address
Students are responsible for notifying the Student Administration Office in writing of any change in their address. A Change of Address form should be used and is available from the Student Administration Office.

Failure to notify changes could lead to important correspondence or course information not reaching the student. The University cannot accept responsibility if official communications fail to reach a student who has not notified the Student Administration Office of a change of address.

It should be noted that examination results, re-enrolment and all correspondence will be mailed to students in December and January. Students who will be away during the long vacation from the address given to the University for correspondence should make arrangements to have mail forwarded to them.

Change of Name
Students who change their name should advise the Student Administration Office. Marriage, deed poll or naturalisation etc. certificates should be presented for sighting in order that the change can be noted on University records.

Change of Programme
Approval must be sought for any changes to the programme for which a student has enrolled. This includes adding or withdrawing subjects, changing attendance status (for example from full-time to part-time) or transferring to a different degree or faculty.

All proposed changes should be entered on the Variation of Programme form available at the Student Administration Office. Reasons for changes and where appropriate documentary evidence in the form of medical or other appropriate certificates must be submitted.

Withdrawal
Application to withdraw from a subject should be made on a Variation of Programme form and lodged at the Student Administration Office or mailed to the Secretary.

Applications received by the appropriate date listed below will be approved for withdrawal without a failure being recorded against the subject or subjects in question.

<table>
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<th>Second Half-Year Subjects</th>
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<tr>
<td>Monday</td>
<td>6 August 1984</td>
<td>30 April 1984</td>
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<tr>
<td>Monday</td>
<td>24 September 1984</td>
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Withdrawal after the above dates will normally lead to a failure being recorded against the subject or subjects unless the Dean of the Faculty grants permission for the student to withdraw without a failure being recorded.
If a student believes that a failure should not be recorded because of the circumstances leading to his withdrawal, it is important that full details of these circumstances be provided with the application to withdraw.

**Confirmation of Enrolment**

In May each year the University mails to all students a Confirmation of Enrolment form which also serves as the application to sit for examinations. This form must be checked carefully, signed and returned by all students (including non-degree students and postgraduate students not taking formal subjects) to confirm that they are actively pursuing subjects for which they are enrolled and that the information on University records is correct and complete.

**Indebtedness**

The Council of the University has directed that students who are indebted to the University because of unpaid charges, library fines or parking fines may not —
- complete enrolment in a following year;
- receive a transcript of academic record; or
- graduate or be awarded a Diploma.

Students are requested to pay any debts incurred without delay.

**Leave of Absence**

A student who does not wish to re-enrol for any period up to three years should apply for leave of absence. Leave of absence is normally granted only to those students who are in good standing. Applications should be submitted before the end of first term in the first year for which leave of absence is sought. Leave of absence will not be granted for more than three years and will not be granted retrospectively.

Any student who does not enrol for a period of two years and does not obtain leave of absence must apply for re-admission to the University when he wishes to resume his studies.

**Attendance at Classes**

Where a student's attendance or progress has not been satisfactory, action may be taken under the Regulations Governing Unsatisfactory Progress. In the case of illness or absence for some other unavoidable cause, a student may be excused for non attendance at classes.

All applications for exemption from attendance at classes must be made in writing to the Head of the Department offering the subject. Where tests or term examinations have been missed, this fact should be noted in the application.

The granting of an exemption from attendance at classes does not carry with it any waiver of the General Services Charge.

**General Conduct**

In accepting membership of the University, students undertake to observe the by-laws and other requirements of the University.

Students are expected to conduct themselves at all times in a seemly fashion. Smoking is not permitted during lectures, in examination rooms or in the University Library. Gambling is forbidden.

Members of the academic staff of the University, senior administrative officers, and other persons authorised for the purpose have authority to report on disorderly or improper conduct occurring in the University.

**Notices**

Official University notices are displayed on the notice boards and students are expected to be acquainted with the contents of those announcements which concern them.

A notice board on the wall opposite the entrance to Lecture Theatre B01 is used for the specific purpose of displaying examination time-tables and other notices about examinations.

**Student Matters Generally**

The main notice board is the display point for notices concerning enrolment matters, scholarships, University rules and travel concessions, etc. This notice board is located on the path between the Union and the Library.

**III EXAMINATIONS**

Tests and assessments may be held in any subject from time to time. In the assessment of a student's progress in a university course, consideration will be given to laboratory work, tutorials and assignments and to any term or other tests conducted throughout the year.

The results of such assessments and class work may be incorporated with those of formal written examinations.

**Examination Periods**

Timetables showing the time and place at which individual examinations will be held will be posted on noticeboards in the Medical Sciences Building.

**Misreading of the Timetable will not under any circumstances be accepted as an excuse for failure to attend an examination.**

**Sitting for Examinations**

Formal examinations, where prescribed, are compulsory. Students should consult the final timetable in advance to find out the date, time and place of their examinations and should allow themselves plenty of time to get to the examination room so that they can take advantage of the 10 minutes reading time that is allowed before the examination commences. Formal examinations are usually held in the Great Hall area and (in November) the Auchmuty Sports Centre. The seat allocation list for each examination will be on a noticeboard outside the room.

Students can take into any examination any writing instrument, drawing instrument or calculating instrument. Logarithmic tables may not be taken in: they will be available from the supervisor if needed.

Calculators may be used, if permitted by the examiner in any examination. They must be hand held, battery operated and non-programmable* and students should note that no concession will be granted:
(a) to a student who is prevented from bringing into a room a programmable calculator;
(b) to a student who uses a calculator incorrectly; or
(c) because of battery failure.

**Rules for Formal Examinations**

Regulation 15 of the Examination Regulations sets down the rules for formal examinations, as follows:
(a) candidates shall comply with any instructions given by a supervisor relating to the conduct of the examination;
(b) before the examination begins candidates shall not read the examination paper until granted permission by the supervisor which shall be given ten minutes before the start of the examination;
(c) no candidate shall enter the examination room after thirty minutes from the time the examination has begun;

* A programmable calculator will be permitted provided the student is not using a calculator.
No results and who wishes to apply for special consideration should write to the Secretary explaining opportunities to satisfy the assessors, the final opportunity being provided in late January in circumstances such as illness or personal problems which may have seriously affected a student's work during the year or during the examinations. Any student who considers that his work has been affected in this way or who is unable to attend for any examination after the release of the annual examination results a student may apply to have a result reviewed. There is a charge of $8.00 per subject, which is refundable in the event of an error being discovered. Applications for review must be submitted on the appropriate form together with the prescribed review charge by 11 January 1985. However, it should be noted that examination results are released only after careful assessment of students' performances and that, amongst other things, marginal failures are reviewed before results are released.

Special Examinations
When considering the examination results Faculty Boards take into consideration any circumstances such as illness or personal problems which may have seriously affected a student's work during the year or during the examinations. Any student who considers that his work has been affected in this way or who is unable to attend for any examination and who wishes to apply for special consideration should write to the Secretary explaining the circumstances and, in the case of illness, enclosing a medical certificate (see Regulation 12 (2) of the Examination Regulations, Calendar Volume I). If a student is affected by illness during an examination, and wishes to ask for a Special Examination he must report to the supervisor in charge of the examination and then make written application to the Secretary as soon as possible after the examination (see Regulation 12 (3) of the Examination Regulations, Calendar Volume I).

Deferred Examinations
A student who has not been judged satisfactory in an examination has several further opportunities to satisfy the assessors, the final opportunity being provided in late January in the period set down for final deferred examinations.

IV UNSATISFACTORY PROGRESS
The University has adopted Regulations Governing Unsatisfactory Progress which are set out below. Students who become liable for action under the Regulations will be informed accordingly by mail after the release of the End of Year examination results and will be informed of the procedure to be followed if they wish to 'show cause'. Appeals against exclusion must be lodged together with re-enrolment forms by Friday 6 January 1984. The Faculty’s progress requirements are set out elsewhere in this volume.

Regulations Governing Unsatisfactory Progress
1. (1) These Regulations are made in accordance with the powers vested in the Council under By-law 5.1.2.
(2) These Regulations shall apply to all students of the University except those who are candidates for a degree of Master or Doctor.
(3) In these Regulations, unless the context or subject matter otherwise indicates or requires:
   “Admissions Committee” means the Admissions Committee of the Senate constituted under By-law 2.3.5;
   “Dean” means the Dean of a Faculty in which a student is enrolled.
   “Faculty Board” means the Faculty Board of a Faculty in which a student is enrolled.
2. (1) A student's enrolment in a subject may be terminated by the Head of the Department offering that subject if that student does not maintain a rate of progress considered satisfactory by the Head of the Department. In determining whether a student is failing to maintain satisfactory progress the Head of Department may take into consideration such factors as:
   (a) unsatisfactory attendance at lectures, tutorials, seminars, laboratory classes or field work;
   (b) failure to complete laboratory work;
   (c) failure to complete written work or other assignments; and
   (d) failure to complete field work.
(2) The enrolment of a student in a subject shall not be terminated pursuant to regulation 2 (1) of these Regulations unless he has been given prior written notice of the intention to consider the matter with brief particulars of the grounds for so doing and has also been given a reasonable opportunity to make representations either in person or in writing or both.
(3) A student whose enrolment in a subject is terminated under regulation 2 (1) of these regulations may appeal to the Faculty Board which shall determine the matter.
(4) A student whose enrolment in a subject is terminated under this Regulation shall be deemed to have failed the subject.
3. (1) A Faculty Board may review the academic performance of a student who does not maintain a rate of progress considered satisfactory by the Faculty Board and may determine:
   (a) that the student be permitted to continue the course;
   (b) that the student be permitted to continue the course subject to such conditions as the Faculty Board may decide;
   (c) that the student be excluded from further enrolment;
      (i) in the course; or
      (ii) in the course and any other course offered in the Faculty; or
      (iii) in the Faculty; or
7. Where there is an appeal against any decision of the Admissions Committee for the appeal to be heard by the Council. The Council may confirm the decision of the matter back to the Admissions Committee with a recommendation or shall arrange for the appeal to be heard by the Council. The Council may confirm the decision of the Admissions Committee or may substitute for it any other decision which the Admissions Committee is empowered to make pursuant to these Regulations.

8. (1) A student who has been excluded from further enrolment in a Faculty may enroll in a course in another Faculty only with the permission of the Faculty Board of that Faculty and on such conditions as it may determine after considering any advice from the Dean of the Faculty from which the student was excluded.

(d) if the Faculty Board considers its powers to deal with the case are inadequate, that the case be referred to the Admissions Committee together with a recommendation for such action as the Faculty Board considers appropriate.

V CHARGES

Enrolment is completed by lodging with the Cashier the approved Authority to Complete Enrolment form with a remittance to cover all charges due or written evidence that a sponsor will meet all charges.

New students are required to pay all charges when they attend to enrol. For re-enrolling students at least 14 days notice is allowed from the date of mailing the Authority to Complete Enrolment form to the date by which charges must be paid if late charges are to be avoided. The actual date, which will not be before mid February, will be printed on the form. A later date will be set if approval of the proposed programme has been delayed or if the student has taken Special or Deferred examinations.

1. General Services Charge
   (a) Students Proceeding to a Degree or Diploma
      Full-time students ........................................ $135 Per annum
      Part-time students ........................................ $130 Per annum
      Plus Students joining Newcastle University Union for the first time ........................................ $10
      (b) Non-Degree Students
          Newcastle University Union charge .......................... $61 Per annum
          The exact amount must be paid in full by the prescribed date.

2. Late Charges
   (a) Late Lodgement of Enrolment Form
      Where a continuing student does not lodge the Enrolment form by Friday, 6 January, 1984 .......................... $14
      where a candidate for a special or deferred examination in January does not lodge the Enrolment form by Monday, 13 February, 1984 .......................... $14
   (b) Late Lodgement of Authority to Complete Enrolment Form with Cashier
      Where the Authority to Complete Enrolment Form together with
      (i) General Services Charge payable; or
      (ii) evidence of sponsorship (e.g. scholarship voucher or letter from Sponsor); or

(xiii)
The refund will be based on the date of notification of withdrawal, as follows:

<table>
<thead>
<tr>
<th>Notification</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>On or before Monday, 27 February, 1984</td>
<td>100%</td>
</tr>
<tr>
<td>On or before Friday, 23 March, 1984</td>
<td>90%</td>
</tr>
<tr>
<td>On or before Friday, 29 June, 1984</td>
<td>50%</td>
</tr>
</tbody>
</table>

No refund will be made before 31 March 1984.

### Higher Degree Candidates

Higher degree candidates are required to pay the General Services charge and Union Entrance charge, if applicable. Where the enrolment is effective from First or Second Term, the General Services charge covers the period from the first day of the term to the Friday immediately preceding the first day of First Term in the following academic year. Where enrolment is on or after the first day of Third Term, the General Services charge paid will cover liability to the end of the long vacation following the next academic year.

**Tuition Fees**

The Commonwealth Government has announced its intention that tuition fees be payable in some circumstances. At the time of printing, the necessary legislation was still to be passed. If tuition fees are introduced a statement will be sent to those students who are affected.

### VI CAMPUS TRAFFIC AND PARKING

Persons wishing to bring motor vehicles (including motor cycles) on to the campus are required to obtain and display on the vehicle a valid permit to do so. Permits may be obtained from the Attendanb (Patrol) Office which is located off the foyer of the Great Hall. Permit holders must comply with the University's Traffic and Parking Regulations including parking in approved parking areas, complying with road signs and not exceeding 35 k.p.h. on the campus.

If the Vice-Principal, after affording the person a period of seven days in which to submit a written statement is satisfied that any person is in breach of Regulations, he may:

- (a) warn the person against committing any further breach;
- (b) impose a fine; or
- (c) refer the matter to the Vice-Chancellor.

The range of fines which may be imposed in respect of various categories of breach include:

<table>
<thead>
<tr>
<th>Category</th>
<th>Fine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parking in areas not set aside for parking</td>
<td>$4</td>
</tr>
<tr>
<td>Parking in special service areas, e.g. loading bays, by fire hydrants, etc.</td>
<td>$10</td>
</tr>
<tr>
<td>Driving offences — including speeding and dangerous driving...</td>
<td>up to $25</td>
</tr>
<tr>
<td>Failing to stop when signalled to do so by an Attendanb (Patrol)</td>
<td>up to $25</td>
</tr>
<tr>
<td>Refusing to give information to an Attendanb (Patrol)</td>
<td>up to $25</td>
</tr>
</tbody>
</table>

The Traffic and Parking Regulations are stated in full in the Calendar, Volume I.
4. An applicant for admission to candidature shall have completed to a level of performance satisfactory to the Faculty Board not less than three years of the course leading to the degree of Bachelor of Medicine in the University of Newcastle.

5. (1) Admission to candidature shall require the approval of the Faculty Board.

   (2) An applicant shall not be admitted to candidature unless the Faculty Board:

   (a) approves the programme of study proposed by the applicant; and

   (b) is satisfied that adequate supervision and facilities are available.

6. To qualify for admission to the degree a candidate shall in one year of full-time enrolment complete to the satisfaction of the Faculty Board the approved programme and also such work and examinations as may be prescribed by the Faculty Board.

7. In order to provide for exceptional circumstances arising in particular cases, the Senate on the recommendation of the Faculty Board, may relax any provision of these Requirements.

**Requirements for the Master of Medical Science Degree**

The degree of Master of Medical Science will be subject to the University Regulations governing Masters degrees and the Schedule thereto. The Schedule deals with those aspects of the degree that are not covered in the general regulations.

**Schedule — Master of Medical Science**

1. The Faculty of Medicine shall be responsible for the course leading to the degree of Master of Medical Science.

2. (i) To be eligible for admission to candidature an applicant shall:

   (a) have satisfied all the requirements for admission to the degree of Bachelor of Medicine of The University of Newcastle, or to a degree, approved for this purpose by the Faculty Board, of another university; or

   (b) have satisfied all requirements for admission to the degree of Bachelor of Medical Science of The University of Newcastle, or the equivalent degree of another university, with Honours Class I or Class II; or

   (c) have satisfied all requirements for admission to the degree of Bachelor of Science with Honours Class I or Class II of The University of Newcastle or to a degree, approved for this purpose by the Faculty Board, of another university; or

   (d) in exceptional cases, produce evidence of possessing such other qualifications as may be approved by the Faculty Board.

3. To qualify for admission to the Degree a candidate shall complete to the satisfaction of the Faculty Board a programme consisting of:

   (a) such work and examinations as may be prescribed by the Faculty Board; and

   (b) a thesis embodying the results of an original investigation.

4. The programme shall be completed:

   (a) in not less than two academic years except that, in the case of a candidate who has had previous research experience, the Faculty Board may reduce this period to not less than one academic year; and

   (b) except with the permission of the Faculty Board, not more than five years.
REQUIREMENTS FOR THE DEGREE OF
DOCTOR OF MEDICINE

SCHEDULE

1. The degree of Doctor of Medicine shall be awarded for an original contribution of distinguished merit adding to the knowledge or understanding of any subject with which the Faculty of Medicine is directly concerned.

2. An applicant for admission to candidacy for the degree shall:

(a) at least five years prior to application

(i) have been admitted to the degree of Bachelor of Medicine of the University of Newcastle; or

(ii) have been admitted to the degree of Bachelor of Medicine or other degree or other qualification of another university deemed by the Doctoral Degree Committee to be equivalent to the degree of Bachelor of Medicine of the University of Newcastle and since such admission, unless the Doctoral Degree Committee determines otherwise, have carried out advanced study in the University of Newcastle for a period of not less than three years; and

(b) during the period since being admitted to such degree or other qualification, have been substantially engaged in medical research and study or in scientific work which, in the opinion of the Doctoral Degree Committee, is relevant to the practice of medicine.

3. (a) A written application for admission to candidacy setting out full details of the applicant's academic qualifications shall be lodged with the Secretary to the University and shall include:

(i) a short discourse describing the nature of the research which it is proposed would form the basis of the work submitted for examination; and

(ii) written statements from three people as to the academic standing of the applicant.

(b) The application shall be considered by the Doctoral Degree Committee which in determining the acceptability of the candidacy may seek such other advice as it deems fit.

4. Eligibility for the degree shall be assessed on a thesis submitted by the candidate supported, if the candidate so desires, by published work, or on published work alone which the candidate wishes to have examined.

5. The candidate shall give to the Secretary to the University three months notice in writing of intention to submit the thesis or published work for examination and such notice shall be accompanied by any prescribed fee.

6. (1) The candidate shall submit four copies of the thesis, thesis supported by published work or published work alone, complying with the following provisions:

(a) The work submitted shall be a record of original research undertaken by the candidate who shall state the sources from which his information was derived, the extent to which he has availed himself of the work of others, and the portion of the work he claims as original.

(b) The work submitted shall include an abstract of approximately 300 words summarising its contents.

(c) If the work submitted records work carried out conjointly, the candidate shall state the extent to which he was responsible for the initiation, conduct and direction of such conjoint work.

(d) The work must be written in English or in a language approved by the Doctoral Degree Committee.

(e) If published work is submitted, either reprints or copies of such work shall be properly bound and shall include an introduction describing the theme of the published work submitted and stating how the various publications are related to one another and to the theme.

(f) A thesis submitted shall be typed and bound in a manner prescribed by the University.

(2) The work submitted shall not contain as its main content any work or material which has previously been submitted for a university degree or other similar qualification unless the Doctoral Degree Committee otherwise permits.

7. The University shall be entitled to retain the submitted copies of the thesis, accompanying documents and published work. The University shall be free to allow the thesis to be consulted or borrowed. Subject to the provisions of the Copyright Act, 1968, the University may issue the thesis in whole or in part in photostat or microfilm or other copying medium.

8. On the recommendation of the Doctoral Degree Committee the Senate shall appoint three examiners of whom at least two shall not be members of the staff of the University.

9. The candidate may be required to answer further oral or written questions concerning the submitted work.

Faculty Policy on Assessment and Withdrawal

The requirements for the Bachelor of Medicine degree and the University's Regulations Governing Unsatisfactory Progress constitute the formal framework within which student progress is governed. The following notes explain details of the Faculty's policy.

Assessment Procedure

Summative assessment is normally conducted for each part of the course identified on the enrolment form at the end of each year, except in fourth year.

A preliminary result of Satisfactory or Non-Satisfactory is recorded. If the assessors are unable to make a firm judgement, they may require the student to undergo supplementary assessment on those items where doubt exists.

A student judged unsatisfactory is offered counselling and remediation if this is considered appropriate. A deferred assessment will then be provided before the end of the year, and, if necessary, a further and final opportunity in January of the following year. Deferred assessment normally concentrates on the individual student's areas of deficiency, identified in previous assessment and defined by the major objectives of the relevant blocks of study.

If a student is unsatisfactory in final deferred assessment, a result of Fail will normally be determined.

Student Progression

Students have to obtain a judgement of Satisfactory in all strands of the course in order to obtain a Pass result for the year and qualify for automatic progression. A student who is determined as having failed in any strand in a year becomes subject to review of his progress under the University Regulations referred to above. These are set out in full in the General Information Section of the Handbook. In the Faculty of Medicine, the Student Progress Committee is charged with the responsibility for making determinations under these Regulations and the section of the University's Rules for Examinations dealing with Special Examinations (see General Information Section).
Withdrawal

University rules governing withdrawal are contained in the General Information Section. A student who is permitted to withdraw while repeating any part of the course will be required to undertake a special re-assessment in that part before being permitted to re-enrol.

Leave of Absence

Leave of absence for one academic year may be granted by the Dean to a student in good academic standing.

PROGRAMME FOR THE B.MED DEGREE

The basic programme in the Bachelor of Medicine degree course is as follows:

<table>
<thead>
<tr>
<th>Computer Number</th>
<th>Subject Name</th>
<th>Computer Number</th>
<th>Name of Components</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>First Year</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>851000</td>
<td>Phase 1 - INTRODUCTION TO PROBLEM SOLVING</td>
<td>851001</td>
<td>Intro. to Prob. Solv.</td>
</tr>
<tr>
<td>852000</td>
<td>Phase 2 - PROBLEMS IN THE ADULT</td>
<td>852000</td>
<td>Problems of Individuals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>852002</td>
<td>Problems in the Limbs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>852003</td>
<td>Gastrointestinal Problems</td>
</tr>
<tr>
<td></td>
<td></td>
<td>852004</td>
<td>Renal and Urinary Tract Problems</td>
</tr>
<tr>
<td></td>
<td></td>
<td>852009</td>
<td>Population Medicine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>852006</td>
<td>Scientific Method and Critical Thinking</td>
</tr>
<tr>
<td>851000</td>
<td>Professional Skills</td>
<td>851003</td>
<td></td>
</tr>
</tbody>
</table>

| **Second Year** |              |                 |                    |
| 852000          | Phase 2 - PROBLEMS IN THE ADULT | 852010 | Cardiovascular Problems |
|                 |              | 852011 | Respiratory Problems |
|                 |              | 852012 | Musculo-Skeletal Problems |
|                 |              | 852013 | Haematopoietic Problems |
|                 |              | 852014 | Problems of the Nervous System and the Mind |
|                 |              | 852015 | General Practice Attachment |
|                 |              | 852021 | Family Attachment |
|                 |              | 852017 | Professional Skills |
|                 |              | 852020 | Scientific Method and Critical Thinking |

| **Third Year**  |              |                 |                    |
| 853000          | Phase 3 - PROBLEMS IN THE ADULT | 853001 | Acute Emergencies |
|                 |              | 853002 | Problems of the Eye |
|                 |              | 853003 | Ear, Nose and Throat Problems |
|                 |              | 853004 | Dermatological Problems |
|                 |              | 853005 | Problems of Sexuality |
|                 |              | 853006 | Problems of Chronic Failure |
|                 |              | 853010 | Population Medicine |
|                 |              | 853008 | Professional Skills |
|                 |              | 853009 | Scientific Method and Critical Thinking |
| 853009          | Elective |                 |                    |

**Fourth Year**

<table>
<thead>
<tr>
<th>Computer Number</th>
<th>Subject Name</th>
<th>Computer Number</th>
<th>Name of Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>854000</td>
<td>Phase 4 - PROBLEMS OF GROWTH AND AGEING</td>
<td>854001</td>
<td>Problems of Reproduction</td>
</tr>
<tr>
<td></td>
<td></td>
<td>854002</td>
<td>Problems of Children</td>
</tr>
<tr>
<td></td>
<td></td>
<td>854003</td>
<td>Problems of Ageing and Oncology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>854006</td>
<td>Population Medicine</td>
</tr>
<tr>
<td>854099</td>
<td>Elective</td>
<td>854005</td>
<td>Professional Skills</td>
</tr>
</tbody>
</table>

**Fifth Year**

<table>
<thead>
<tr>
<th>Computer Number</th>
<th>Subject Name</th>
<th>Computer Number</th>
<th>Name of Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>855000</td>
<td>Phase 5 - INTEGRATED PRACTICE</td>
<td>855011</td>
<td>General Medicine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>855012</td>
<td>General Surgery</td>
</tr>
<tr>
<td></td>
<td></td>
<td>855013</td>
<td>Special Medicine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>855014</td>
<td>Trauma and Orthopaedics</td>
</tr>
<tr>
<td></td>
<td></td>
<td>855015</td>
<td>Psychosocial Medicine</td>
</tr>
<tr>
<td></td>
<td></td>
<td>855016</td>
<td>General Practice</td>
</tr>
<tr>
<td>855030</td>
<td>Professional Skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>855040</td>
<td>Scientific Method and Critical Thinking</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**General Description of Curriculum**

The five-year undergraduate curriculum leading to the degree of Bachelor of Medicine is divided into five Phases and two Electives. A table is included in the Degree Requirements illustrating this.

Phase I occupies the first term, and constitutes an introduction to problem solving, to the practice of medicine, and to University life. Phase II occupies the next five terms, and consists of a more detailed, systematic examination of problems which are typically present in the adult. Phase III extends this study by a further three terms.

During the Elective terms, students will be able to study, in greater depth, a topic of their choice, subject to Faculty approval.

Phase IV lasts three terms, and is concerned with problems in infants, children, adolescents, the aged and with cancer. In Phase V, students rotate through a number of clinical attachments. There is also a common sequence of weekly seminars.

**Objectives**

The overall objectives for the undergraduate curriculum are set out in the Faculty's Working Paper VI (Undergraduate Programme Objectives). More detailed objectives for each Phase and Block will be available.

**Learning Methods**

The major curricular emphasis will be on learning through considering and solving clinical problems. Students will be expected to acquire not only the factual knowledge and intellectual understanding which are essential for clinical decision-making, but also the skills of information gathering, decision making and implementation, not only in relation to problems of individual patients, but also in relation to problems of groups or communities.
Students will usually work in groups of eight with a tutor, but smaller groups will be used when appropriate. They will be encouraged to identify their own learning needs, and to find their own individual solutions to those needs, thus progressively becoming independent learners, capable of a life-time of continuing self-education and self-evaluation. Those who encounter learning difficulties, resulting either from poor study habits or from a different educational background (e.g. insufficient knowledge of physics) will be offered help to overcome those difficulties.

851002 Introduction to Problem-Solving
(Year 1 — Term 1 — 8 weeks)

Phase I includes a variety of activities selected to give a comprehensive introduction to the Newcastle course as a whole and to the philosophy that underpins the curriculum. The core of the Phase 1 programme is four clinical problems which are studied over eight weeks. These cover broad areas of medical practice and include acute and chronic illness in people of varying ages.

Students are introduced to the Hunter district, its social and medical structure and problems by a series of community, industrial and hospital visits and by tutorials and field work conducted within the population medicine strand. A more intimate introduction to the hospital, its staff and patients is achieved by ward attachments during which individual students act principally as observers of hospital routine but could also involve themselves in patient welfare.

Consulting and interpersonal skills are fostered by weekly tutorials. Some elementary practical medical manoeuvres (e.g. first aid measures, arterial blood pressure measurement) are introduced.

Time is set aside during the term for students to review their own progress through formative assessments based on their study of clinical problems. There is also a practical assessment of first aid skills, used only for the purpose of informing students about their level of skill.

852001 Acute Interruption of Function in Individuals and Communities
(Year 1 — Term 2 — 4 weeks)

The problems considered in this block are designed to introduce concepts such as normal functioning, the interaction of physical, psychological and social factors in illness and social malfunction, life crisis and the molecular basis of poisoning and the strategies for combating each form.

852002 Acute Interruption of Function in the Limbs
(Year 1 — Term 2 — 4 weeks)

Four clinical problems are studied which involve injuries to the limbs. Each problem is considered in relation to the tissues involved and the overall response of the body to the injury. The implications of each injury are considered from the individual's and society's viewpoint.

852003 Gastrointestinal Problems
(Year 1 — Term 3 — 4 weeks)

The aims of this block are to introduce students to the management of problems in the gastrointestinal system through the study of five common and/or serious illnesses relating to this system and, in particular, to introduce some of the important principles of homeostasis, fluid and electrolyte balance, hormones, diets, etc. Psychosomatic disorders and compliance. The problems are chosen to provide the basis of a broad but not detailed knowledge of the structure and function of the major parts of the gut, to concentrate on uncomplicated illness in adults and to emphasize the importance of nutritional concepts, the connection between the mind and the bowel. A beginning is made in the development of skills in differential diagnosis.

852004 Renal and Urinary Tract Problems
(Year 1 — Term 3 — 4 weeks)

The problems considered in this block are designed to introduce students to the structure and function of normal kidneys and the urinary system, and to abnormal structure and function in disease states. The working problems selected for study include a reduction in urine output, blood in the urine, painful micturition, fluid retention associated with swelling and renal pain.

852005 Population Medicine
(Year 1 — Full Year)

Learning activities concerned with health and disease in populations or groups are included throughout the curriculum. The strand addresses problems in clinical medicine, occupational medicine, preventive medicine and health care services and draws on the "basic" sciences of epidemiology, biostatistics, behavioural science and evaluation.

In the first year, students are introduced to the main concepts of population medicine through the study of a Newcastle community, usually a suburb. In the first term, each group of students examines existing data about the area and conducts some interviews with citizens and local community leaders. In second term, a particular medical or social problem is selected and analysed in depth. In the third term, each group may either plan and carry out a social intervention based on their previous analysis, or study in detail another type of group in the community.

851003 Professional Skills
(Year 1 — Full Year)

This strand runs throughout the curriculum and deals with the practical skills of physical examination, medical interviewing, case presentation, case recording and patient management. It also deals with medical ethics. In the first year, emphasis is placed on first aid as well as examination of the gastrointestinal system and renal and urinary tracts.

852006 Scientific Method and Critical Thinking
(Full Year)

The principal aim of this strand is to introduce students to critical appraisal of the published literature and the elements of scientific method and thought. This is approached through the examination of published papers on clinical problems associated with the systems under concurrent study during the year.

Students are assessed summatively on their ability to demonstrate a basic level of critical skills at the end of the year.

852010 Cardiovascular Problems
(Year 2 — Term 1 — 4 weeks)

This block is directed to the study of a number of common cardiovascular problems which will enable the student to evaluate and diagnose patients with cardiovascular disease. The problems are selected and designed so that students should achieve an understanding of (i) the structure, function and control of the cardiovascular system, and (ii) the pathophysiology, clinical signs, symptoms and management of failure of cardiovascular control and of abnormalities of heart function due to disturbed electrical activity, valvular defects or interruption of the coronary circulation.

852011 Respiratory Problems
(Year 2 — Term 1 — 4 weeks)

The principal objectives of this block are concerned with understanding of the pathophysiology of respiratory symptoms and signs and the scientific principles of diagnosis and management of patients with respiratory illness. Four clinical problems are considered and introduce students to the main topics of lung mechanics, gas exchange,
control of breathing, lung defense mechanisms, microbiology and immunology of lung disease and pharmacology of the drugs used in the treatment of lung disease.

852012 Musculo-skeletal Problems
(Year 2 — Term 2 or 3 — 4 weeks)
This block introduces problems of the bony skeleton, joints and muscle function. Emphasis is placed on the relationships between structure and function and the mechanisms whereby disease results in disordered function.

852013 Haematopoietic Problems
(Year 2 — Term 2 or 3 — 4 weeks)
This block is concerned with a number of important haematological conditions and also provides an introduction to endocrinology. The haematological problems include disorders of red blood cells, white blood cells, and haemostasis; basic principles of cellular biochemistry, neoplasia, and genetics are reviewed, and the clinical and laboratory features of these disorders are considered in terms of disturbed biochemical and physiological mechanisms. The endocrine problem introduces basic concepts of hormones and receptors, and of feedback controls in normal homeostasis.

852014 Problems of the Nervous System and the Mind
(Year 2 — Term 2 or 3 — 8 weeks)
In this block, students have their first formal clinical placement in neurology and psychiatry. The major aim is to present to the student in an integrated fashion a range of problems affecting the nervous system or involving significant emotional disturbance. The range of disorders considered includes problems affecting various levels of the nervous system, the neurological complications of chronic alcohol consumption, psychiatric disorders related to everyday life, and the more severe psychiatric syndromes such as schizophrenia.

Students have clinical placements at the Royal Newcastle and Newcastle Mater Misericordiae Hospitals for Neurology and at the Newcastle Psychiatric Centre and Morisset Hospital for Psychiatry.

852015 General Practice Attachment
(Year 2 — Term 2 — 8 weeks)
Each student attends the surgery of a selected general practitioner for a half-day per week. During this time, students observe interviewing, examination and treatment of patients presenting with undifferentiated problems.

An emphasis is placed on observation of the process of care rather than specific details of disease. Students are encouraged to observe house calls, hospital and nursing home visits and to play an active part in interviewing and examining patients whenever possible.

852016 Family Attachment
(Year 2 — Terms 5 and 6 — 16 weeks)
The development of an understanding of the role of family factors in illness is an important component of medical training. The family attachment experience which occurs during second year is designed to assist in this development. Each student is attached to a family, one member of which is suffering from a chronic illness. Over a number of visits students are expected to talk to family members and observe the way that the family operates both to gain a greater insight into family dynamics and an awareness of the impact of chronic illness on family functioning.

853001 Acute Emergencies
(Year 3 — Terms 1 and 2 — 16 weeks)
This block is undertaken in parallel with 853002, 853003, 853004 and 853005. The principal objectives relate to the study of simulated and actual patients who require emergency management of their presenting condition, e.g. drug overdose, burns, acute abdominal pain. Six cases are studied in Newcastle. Students also undertake a one term attachment at hospitals at Gosford, Tamworth or Taree, Maitland or Orange, where patients presenting with acute emergencies are studied.

This block introduces a new phase of learning in which learning about the different bodily systems undertaken in first and second year is reviewed and in addition, consideration is given to how these systems affect each other in an integrated way following acute damage or derangement of one or several systems at the same time.

853002 Problems of the Eye
(Year 3 — Term 1 or 2 — 8 weeks)
This block is run in parallel with 853001, 853003 and 853004.
Students are introduced to the science of ophthalmology through the study of six clinical problems. Emphasis is placed on the relevant basic sciences, pathology and/or chronological changes on the visual system. Students learn basic physical examination techniques and are attached to practitioners both in hospitals and private rooms to gain clinical experience.

853003 Ear, Nose and Throat Problems
(Year 3 — Term 1 or 2 — 8 weeks)
This block is run in parallel with 853001, 853002 and 853004.
The overall objectives are designed to enable students to examine the ear, nose, throat or oral cavity of a patient as appropriate, ascertain the probable cause of the problem, formulate a plan of management for the patient and undertake, under supervision, some or all aspects of that management plan.

A number of clinical problems are studied theoretically. Practical experience is obtained by a clinical attachment spent with an Ear, Nose and Throat Specialist, and regular meetings with a clinical tutor. Emphasis is placed on inter-relating disorders of each of the anatomical areas studied, together with application of the underlying basic sciences to the clinical management of such problems.
Dermatological Problems (Year 3 — Term 1 or 2 — 8 weeks)

This block is run in parallel with 853001, 853002 and 853003.

The emphasis of the block is on the development of skills in pattern recognition among the dermatological disorders. The problems selected for study also introduce concepts of the skin as an organ of thermo-regulation, drug absorption through the skin, psychological aspects of dermatological problems and mechanisms of skin pathology.

Problems of Sexuality (Year 3 — Term 1 or 2 — 8 weeks)

This block is run in parallel with 853001.

Two sets of objectives guide this block. The first is to provide a basic level of information about sexual problems in medical practice. Students are expected to become familiar with areas such as the control of conception, sexually transmitted diseases, the sexual problems of the disabled and the aged, and common sexual difficulties such as disorders of sexual responsiveness.

The second set of objectives concerns the development of comfort and confidence in discussing sexuality and sexual problems. The exchange of different viewpoints is encouraged. Role plays are used as a means of developing counselling skills.

Eight clinical problems are examined by tutorial groups. The problems include an unwanted pregnancy in a teenager, homosexuality and incest. There are also large group sessions held to view films, to discuss sexual and marital counselling, to talk to representatives of the Gay Liberation Movement, to clinicians who deal with sexual problems and to practice students own counselling skills.

Problems of Chronic Failure (Year 3 — Term 3 — 8 weeks)

This block deals with the effect of chronic failure of organ systems on the individual, the family and the community. Hypertension, chronic renal failure, pulmonary tuberculosis, congestive heart failure, alcoholic cirrhosis of the liver, systemic lupus erythematosus and diabetes melitis are used as specific models of chronic illness. Students are expected to apply concepts acquired during this block to problems and organ systems previously encountered. There is a particular emphasis on the development of independent learning, problem solving skills and clinical reasoning.

Population Medicine (Year 3 — All Year)

In Years 3 and 4, self-selected groups of students plan and carry out a research project. The project may involve a group of patients with a particular illness or symptom or may involve investigation or evaluation of a proposed health intervention.

Professional Skills (Year 3 — Terms 1, 2 and 3)

This is a continuation, at a more advanced level, of 852017.

Scientific Method and Critical Thinking (Year 3 — Terms 1, 2 and 3)

The aim of this strand is to reach a level of critical skill such that students are able to make judgements about the scientific quality of published papers with some confidence, and assessment of students will be directed towards this end. Papers selected for analysis are relevant to concurrent study of clinical problems.

Elective (Year 3 — Term 4)

Elective studies are provided to allow students to undertake study of a project of their own choice to develop skills of independent learning, to provide an opportunity to pursue excellence and to broaden their range of experience. The activity may be undertaken anywhere, subject to faculty approval.

Problems of Reproduction (Year 4 — Term 1, 2, 3 or 4 — 8 weeks)

The format of this term is similar to the Paediatrics term, and two components are common to both. In the Development Strand, students are introduced to reproduction beginning at spermatogenesis and oogenesis continuing through in stages to parturition and on into postnatal life. Many of these sessions are conducted and presented by small groups of students, supervised by staff from various disciplines. In the second, each student follows a pregnant woman and her family through the latter weeks of pregnancy, parturition and in the first few weeks postpartum, to enable students to become familiar with the difficulties normal pregnancy poses for a family.

Less emphasis is placed on problem-solving exercises than in earlier years but this is balanced by a greater clinical component to the term. However, to ensure that students become familiar with a number of important concepts, problem solving tutorials on common, preventable and treatable conditions are held. These are based on case presentations prepared by students. The topics chosen may include fertility, abortion, high risk pregnancy, premature labour, rhëus isoinnunation, abnormal menstrual bleeding, clisclastic, post-menopausal bleeding and other common gynaecological conditions. Through attachments to clinicians on an individual basis, and through outpatient and ward contact with patients in hospitals in Newcastle, Maitland and Gosford, students meet the common problems of reproduction. Students are encouraged to present these problems to their colleagues, and each week two to four problems are discussed.

Problems of Children (Year 4 — Term 1, 2, 3 or 4 — 8 weeks)

The general objectives for this block include the development of an understanding of normal and abnormal physical and social development and the implications of any departure from the normal for future life.

Students undertake clinical attachments in hospitals and community paediatric facilities including baby health centres, the Child Development Unit and the Special Education Department of the Newcastle College of Advanced Education.

Four weeks are spent in Newcastle and four in a country centre. Practical experience is provided in physical examination and interviewing relevant to mothers with babies, children and adolescents.

Problems of Ageing and Oncology (Year 4 — Term 1, 2, 3 or 4 — 9 weeks)

Problems of ageing and oncology are dealt with in two concurrent blocks.

The major objectives of the ageing block are to examine the ageing process and its effect on the individual in the community. Attention is also given to the impact of acute and chronic disease processes in the aged and the importance of accurate diagnosis for rational management. Learning strategies include problem solving, including simulated patients and computerized patient management problems, student presentation of seminars on aspects of ageing and hospital and community clinical attachments.

The major objectives of the oncology block are to increase awareness of neoplastic diseases and their importance in clinical practice. It builds on previous exposure to
neoplastic conditions and examines in depth all aspects of oncology, including tumour pathology, incidence of common neoplasms, the varied clinical manifestations, diagnosis and management. The prospects for early detection and prevention are emphasized.

854004 Population Medicine
(Year 4 — All Year)
This is a continuation of 853007.

854005 Professional Skills
(Year 4 — Any three terms — 27 weeks)
This is a continuation, at a more advanced level of 852017 — in the context of problems of reproduction, children, ageing and oncology.

854009 Elective
(Year 4 — Any term — 8 weeks)
The programme for this term is student initiated, as for 853009.

855000 Integrated Clinical Practice
(Year 5 — 4 terms — 32 weeks)
This phase is largely devoted to clinical problem solving within hospital, general practice and the community.

Students are attached as individuals or in pairs to clinical tutors and act as "junior medical officers" in their practices. Attachments rotate through general surgery (including urology and vascular surgery), general medicine, specialty medicine, trauma and orthopaedics (including intensive care), general practice (which includes attachment to community practitioners) and psycho-social medicine, a term used to denote liaison with community psychiatry rather than psychiatric illness as seen within psychiatric hospitals.

For one day of each week students meet to examine, through the medium of presented and reproduced, children, ageing and oncology.

For students with no recent background in medically related sciences the following books are considered useful:
- Guyton, A. C.
- Shanson, C. G.
- Craig, D. M.
- Walker, R. W.
- Moore, K. L.
- Ham, A. W.
- Cormack, D. H.
- Raitt, I. M.
- Walker, H. K. et al.
- Shires, D. B.
- Hennan, B. J.
- Hettel, B. S.
- Illich, I.
- Sax, S.
- Taylor, R.
- Vanders, A. J. et al.
- Keeton, W. T.
- Vander, A. J. et al.

BOOK LIST
The structure of the medical course is such that students study a wide range of disciplines simultaneously and therefore need access to a wide range of books.

In first year, groups of eight students are allocated a study room and a basic collection of medical books. Additional copies of these books are also available in the library. Students are recommended NOT to purchase books on a large scale until they have had an opportunity to evaluate those provided.

Background reading
The following books are concerned with various aspects of health care including organization of services, cost-effectiveness, the influence of technology, the case for community and preventive health services.
- Hetzel, B. S.
- Illich, I.
- Sax, S.
- Taylor, R.

For students with no recent background in medically related sciences the following are recommended as preliminary reading:
- Ucko, D. A.
- Keeton, W. T.
- Vander, A. J. et al.
- Living Chemistry (Academic Press 1977)
- Biological Science (Norton 3rd edn 1980)

The following are recommended texts in core disciplines:
- Blakiston's
- Guyton, A. C.
- Robbins, S. L. et al.
- Craig, C. R. & Stitzel, R. E.
- Ellis & Calne
- Shanson, D. C.
- Davidson, S.
- McGilvery, R. W.
- Moore, K. L.
- Ham, A. W. & Cormack, D. H.
- Roitt, I. M.
- Walker, H. K. et al.
- Shires, D. B.
- Hennan, B. J.

The following books are considered useful:

a) General:
- Wheater, P. R. et al.
- Petersdorf, R. G. et al.
- Stryer, L.
- Passmore, R. & Robson, J. S. (eds)
- Zilva, J. F. & Pannall, P. R.
- Mason, S. & Swash, M.
- Atkins, G. L.
- Goodman, L. S. & Gilman, A. G.
- Wright, H. J. & MacAdam, D. B.
- Fudenberg et al.

- Functional Histology: a Text and Colour Atlas
- Biochemistry 2nd edn (Freeman 1981)
- Clinical Chemistry in Diagnosis and Treatment 3rd edn (Lloyd-Luke 1979)
- Hutchinson's Clinical Methods 17th edn
- Goodman and Gilman's Pharmacological Basis of Therapeutics 6th edn (Macmillan 1980)
- Clinical Thinking and Practice (Churchill Livingstone 1979)
- Basic and Clinical Immunology 3rd edn (Lange 1982)
Smith, E. K. & Brain, E. Kapit et al.  
Fluids and Electrolytes: a Conceptual Approach  
(Churchill Livingstone 1980)  
Anatomy Colouring Book (Harper & Row)

b) Second Year:  
Julian, D. G.  
West, J. B.  
West, J. B.  
Nolte, J.  
Barr, M. L.  
Bowsher, D.  
Bowsher, D.  

Other books are recommended for later years and before the commencement of certain blocks.

Medical books are available through the University of Newcastle Medical Society and from the local branch of the University Co-operative Bookshop.

UNDERGRADUATE SCHOLARSHIPS AND PRIZES

<table>
<thead>
<tr>
<th>Prize or scholarship</th>
<th>Value</th>
<th>Qualifications</th>
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<tbody>
<tr>
<td>Australian Kidney Foundation</td>
<td>$500</td>
<td>Tenable in summer vacation for 6-8 weeks. Application by student to: Australian Kidney Foundation P.O. Box 62, Garran, ACT 2605.</td>
</tr>
<tr>
<td>A.M.A. Prize for Graduating Student in Medicine</td>
<td>$300</td>
<td>Graduate in Domains 4, 5, 6 in final year.</td>
</tr>
<tr>
<td>AMSA/Lilly Student Research Fellowships</td>
<td>$400 (minimum)</td>
<td>Research during long vacation/elective/B.Med.Sc.</td>
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<tr>
<td>Apex Foundation for Research into Mental Retardation</td>
<td>$200</td>
<td>Awarded to workers in any discipline concerned with the causes, diagnosis, prevention or treatment of mental retardation and allied conditions.</td>
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<tr>
<td>The Association of Commonwealth Universities - Medical Electives Bursary</td>
<td>$500 (U.K.)</td>
<td>Senior students for assistance in elective terms in other Commonwealth countries. 4-10 weeks in 3rd World Countries.</td>
</tr>
<tr>
<td>Australian National University Vacation Scholarships</td>
<td>Weekly allowance, rail fares to Canberra, accommodation &amp; meals.</td>
<td>Research work during summer vacation - minimum 8 weeks.</td>
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<tr>
<td>Hunter Valley Pharmacist Assoc. Undergraduate Prize</td>
<td>To be decided</td>
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<tr>
<td>Leslie Vacation Scholarships</td>
<td>Weekly Allowance 6 - 8 weeks.</td>
<td>Senior students. Investigations of cancer, cancer treatment, public education about cancer, social consequences of cancer in the community.</td>
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<tr>
<td>National Heart Foundation Vacation Scholarships</td>
<td>Weekly allowance 6 - 8 weeks.</td>
<td>Senior students. Related to aspects of cardiovascular function or disease.</td>
</tr>
<tr>
<td>National Health &amp; Medical Research Council Undergraduate Scholarship</td>
<td>$2,400</td>
<td>To each medical school Can be shared, however successful student(s) forfeit TEAS.</td>
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</table>
Rhodes Scholarship
Personal allowance & fees.
Tenable at the University of Oxford.
Medical students who will have completed at least 3 years of the course may be considered.

Student Initiatives in Community Health Employment Scheme
Weekly allowance
Summer vacation for 2-4 weeks.
A learning experience in community health.

Occupational Medicine Grants-in-Aid
$250 x 2 students
Elective study - located in Newcastle and related to a particular occupation/industry.
Information from Faculty Office.

Pharmacology Grants-in-Aid
$200
Elective study in basic and applied pharmacology. Information from Faculty Office.

Journal of Bone & Joint Surgery (British Volume)
Financial assistance toward expenses for an elective period spent in an orthopaedic dept. in UK or overseas.
Information from Faculty Office.