Welcome from the Director of Medical Student Education

It is a great pleasure to produce the 2nd Annual Teaching Report for St Vincent’s Clinical School. This serves to acknowledge the enormous effort and value that is placed on teaching across the St Vincent's campus, and the contribution of a huge number of senior and junior doctors as well as nursing and allied staff to the success of our program.

As a Clinical School, we strive to continually improve our program and our strategies for learning and teaching. We are in a challenging period, with the introduction of the New Medicine Program whilst still committed to providing excellence for the senior years of the ‘old curriculum’ until 2008. The opportunities for learning and teaching for both students and tutors are growing and we hope that we will continue to engage and foster contribution from all.

This year has seen a number of highlights, from the School office moving to deLacy 5, the very successful running of the Phase 1 trial exam, the extensive numbers of projects fielded for the Independent Learning Project, the running of an educational research project (RIME) and the appointment of a new Professor of Surgery.

We look forward to a very fruitful 2006- Seasons Greetings to you and your family!

- Eva Segelov

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Thank You
A special thank you to everyone who has contributed to this Annual Report. Your time and assistance is greatly appreciated.
Seasons Greetings

We wish you all the best for the Festive Season and look forward to working with you again in 2006.

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**Faculty & University Events**

- Professor Peter Smith commenced as Dean, Faculty of Medicine in September 2005. Professor Smith was previously Dean of the Faculty of Health Sciences at Auckland University.

- Professor Patrick McNeil completed his term as Associate Dean, Education, Faculty of Medicine, coinciding with his move to Liverpool Hospital (South West Sydney Clinical School). Conjoint Associate Professor Philip Jones from Prince of Wales Clinical School will take over from January 1.

- The Faculty has appointed a new Pharmacology Professor - Margaret Morris from University of Melbourne. She commenced her duties in October.

- This year has seen UNSW appoint a both a new Chancellor, David Gonski AO, and a new Vice Chancellor, Fred Hillmer. For more information, see http://www.unsw.edu.au/news/pad/articles/2005/oct/New_VC.html

- Margaret Harding, previously Professor of Chemistry at the University of Sydney, has been appointed UNSW’s first Dean of Postgraduate Research. Professor Harding will head the University’s new Graduate Research School, officially launched recently.

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**New Lecturer/Senior Lecturer in Surgery**

Interviews have been attended for the new Lecturer/Senior Lecturer in Surgery. Outcomes will be announced in the near future.

**UTAS Nursing**

In February 2006, the University of Tasmania’s (UTAS) School of Nursing and Midwifery, through a partnership with St Vincents & Mater Health, will offer its entire Bachelor of Nursing (BN) out of Sydney. The majority of clinical teaching will take place at the St Vincent’s campus. They will make use of many of the hospitals facilities, including the St Vincent’s Clinical School’s Clinical Teaching Areas (CTA). A combined function to welcome all students (nursing and medical) will be held on 23 February. All students and tutors are welcome.

**Farewell Jenny**

Mid 2005 we sadly said farewell to our Administrative Officer, Jenny Heeks. Although she is still a welcome face during exam times, we wish her all the best in her retirement and thank her for all her hard work.

**Rural Clinical School Students**

The 4 rural campuses for UNSW- Coffs Harbour, Port Macquarie, Wagga Wagga and Albury will no longer be known as the School of Rural Health from January 2006. The new title is the Rural Clinical School. Students from SVCS will continue to rotate in Year 5 and 6 for at least 1 term. In addition, as in 2005, approximately 10 of our Year 6 will come to SVCS having completed their entire year 4 at the RCS.

**Clinical Teaching Committee**

The teaching committee met three times during 2005, with good representation of those involved in medical student teaching across the campus. Dates for 2006 are advised below - all welcome. Please forward any issues you wish to have discussed to the Clinical School for inclusion in the agenda.

**2006 Meeting Dates:**

- 22 March 2006 8.30am – 9.30am
- 14 June 2006 8.30am – 9.30am
- 20 September 2006 8.30am – 9.30am
- 13 December 2006 8.30am – 9.30am

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St Vincent’s Clinical School, Level 5 deLacy Building, St Vincent’s Hospital, Darlinghurst
Head of School Report

My first and most important task is to congratulate the graduating year of 2005. It has been a great pleasure to watch this wonderful group of students integrate all the knowledge they have acquired during the long years of their course. They have worked hard; they have done very well in their exams, and they now look forward to enjoying what will be in many ways the most exciting few years of their careers, as they work as residents and registrars and make decisions about their longer-term futures. I wish them all the very best for this crucial period of their lives. I also advise them strongly to make sure that during these very busy years, they set aside time for themselves and their family and friends. It is all too easy when one is extremely busy and under pressure to forget about these aspects of life and to look back in 5 years time and wonder where the time has gone. A sense of perspective is enormously important in a busy and responsible profession such as Medicine.

There have been major changes in terms of staffing within both the wider Faculty of Medicine and the St Vincent's Clinical School during 2005. Firstly, of course we have a new Dean. Professor Peter Smith officially took over his duties in September. Professor Bruce Dowton departed for the United States early in 2005 and Professor Richard Henry ably filled the post of Acting Dean during the interim.

Professor Smith has already taken the opportunity of visiting the Clinical School on a couple of occasions and has met with the administrative, academic, and some of the conjoint staff. We welcome him on board and look forward to working with him.

More locally we have appointed a new Professor of Surgery. Professor Allan Spigelman will commence duties early in 2006. In addition to his position as Head of Academic Surgery at St Vincent’s Hospital he will also be the Director of Cancer Services for the St Vincent’s and Mater Health Services Campus. He will be busy indeed, and to help him with this work, we have approval from the Faculty to appoint a second senior lecturer in surgery to assist Tony Grabs with the huge volume of work he does for UNSW in terms of developing and delivering the undergraduate surgical curriculum. The new appointment will be made late in 2005 or early in 2006.

Dr Joanne Joseph who had been helping us one day a week with organising the independent learning project program has moved on and her position have been taken over by Dr Jacob Sevastos, staff nephrologist at St Vincent’s Hospital. I would like to thank Joanne for all her work and welcome Jacob on board.

There have also been changes amongst the administration staff in the Clinical School with Jenny Heeks moving on after several years of invaluable service and very hard work. She has been replaced by Naomi Esselbrugge. Thank you very much to Jenny who helped us out at a difficult time a couple of years ago and in fact interrupted her retirement plans to help with our needs. Welcome to Naomi who has already been with us for some time now and will be well known to the students and staff.

The new curriculum is rolling out with Phase 1 now fully in place and plans well advanced for the advent of Phase II next year. Plans are also firming up for the first year of the independent learning projects. These are an entirely novel aspect of the new curriculum and it will be very interesting to see how they work out. My heartfelt thanks once again to Dr Eva Segelov for the enormous amount of work she puts into this.

Finally can I take this opportunity to wish you all the very best for the coming festive season and for the New Year.

- Terry Campbell
Administration Report

This year has seen the relocation of the Clinical School Administration office from level 0, Cator Building to level 5 de Lacy building. The move went smoothly with Sesil and Naomi now settled into their new home. Being in closer proximity to the CTA rooms and the hospital in general has been beneficial for all staff.

The old Clinical School offices has been turned into two tutorial rooms, which have become valuable teaching facilities for the Phase 1 medical students tutorials.

In October the UNSW Risk Management Unit audited the School. The auditors found a few items for the School to fix up, but all in all, the audit went well.

- Melinda Gamulin
Clinical School Manager

New Professor of Surgery, Allan Spigelman

Allan will assume this post in 2006. He comes to us from the Chair at the University of Newcastle, where he was also Director of Clinical Governance and of Cancer Services and a member of the Area Executive of the Hunter New England Area Health Service.

An Australian surgical trainee, he spent 12 years in London, initially in research at St. Mark’s Hospital (where his research in the duodenum of polyposis patients has led to the adoption of an eponymous staging system) and then as a Senior Lecturer and Honorary Consultant Surgeon at St. Mary’s Hospital, where he was Assistant Director, Medical Education Unit, St. Mary’s Hospital Medical School.

He will continue his management role here as Director of Cancer Services for the St Vincent’s and Mater Health Service. Allan’s research and clinical interests are varied and include cancer prevention, early detection and patterns of care delivery, particularly colorectal cancer and familial cancer syndromes.

He has a major interest in patient safety and clinical quality, in the research, teaching and provision of care arenas. His publications span all of these areas of interest.

Experienced in problem based learning, Allan’s appointment will be followed by that of a Senior Lecturer in Surgery.

Allan’s office will be located near the Clinical School in the Surgical Professorial Unit on level 5 de Lacy.
2005 Events and Innovations

Tutor awards
Following the success of the inaugural awards in 2004, students were again asked to vote anonymously for the various categories to reward tutors who were seen as innovative and exciting. A decision was made that previous winners were not eligible for a period of 5 years. As well as a certificate, each award recipient received a Berkelow book voucher.

We congratulate these doctors and thank them for their efforts in teaching over the past year.

Student awards
This year the St Vincent’s Clinic Foundation again kindly sponsored prizes for student participation in teaching at St Vincent’s Private Hospital and St Vincent’s Clinic. The winning students received a certificate and a cheque which was presented to them by A/Professor Michael Neil at the Year 6 farewell dinner.

Teaching Certificates
The contribution of our tutors is enormous and varied. This year we are initiating the presentation of a “Certificate of Appreciation” to each tutor, listing their teaching activities for the Clinical School in 2005. This should not only be a source of pride, but provide documentation for CME/MOPS points for Colleges. Certificates will be delivered mid December. We have made every attempt to make sure that all information is correct, but as this is a complex area, we apologise for any errors (please let us know).

Intern Allocations
Following a presentation to Year 6 students by Dr Sam Milliken, more students were encouraged to nominate to return to St Vincent’s as an intern. However, the sentiment that it was ‘impossible’ to be allocated here appears to have persisted somewhat and influenced choices. Nevertheless, we are delighted that four students will return to St Vincent’s as interns in 2006.

e-Newsletter
The weekly e-newsletter continued to be a well read source of information to both students and staff. All past issues are filed on the web. A new feature in 2005 was the ‘Profile of the week’ which featured local
students, tutors, elective students and allied staff. The “Article of the week” continues to be a popular source for students to keep up with the latest reviews on clinical topics. Thanks to all those who sent suggestions for this throughout the year, and we encourage more feedback and contributions in the coming year.

New Look Website

2006 sees the unveiling of the new look St Vincent’s Clinical School Website. After a lot of hard work from both the Faculty and the Clinical School, the website will shortly go ‘live’. We hope the new look will be much more user friendly and an advantage to both staff and students. Check out the new look at http://stvcs.med.unsw.edu.au/ in the coming weeks!

Student Accommodation - The “Resi’s”

A refurbishment of the student’s accommodation block on West Street, Darlinghurst took place in January/February. Major interior work, which included new paint, carpet, blinds and a larger improved kitchen with new appliances were installed. Room 1 was made into two separate rooms, making a total of ten rooms available for students to rent.

Two computers networked to SVH were placed in the lounge room for students to access after library hours. An extra freezer was also given to the students.

Accommodation is available to all St Vincent’s Hospital students, but preference is given to the Year 6 students doing their Surgical term. Year 5 & 4 students may also apply if there are rooms available. Over the past year, demand has exceeded supply, so get in early!

Please email Sesil and Naomi at临床学校@stvincents.com.au if you are interested in accommodation.

...and after refurbishments (before the parties!)
Outline of the 2005 Undergraduate Program

PHASE 1
- Fortnightly Clinical Tutorials - small group bedside tutorials led by GP tutors.
- Procedural Skills – Manual handling; non-invasive blood pressure measurement; non-invasive measurement of temperature; Urinalysis.

General Practitioners Tutors: Dr Carolyn Block, Dr Emily Chong, Dr Peter Clyne, Dr Carol Fenton-Lee, Dr Naomi Jacobs, Dr Sherel Levy, Dr Sharon Marjenberg, Dr Katherine Smartt

YEAR 3
- Weekly Medicine tutorial
- Weekly Surgical tutorial
- Weekly Masterclass (session 1); Extra Medicine or Surgery tutorial (session 2)

Clinical Tutors: Dr Judy Alford, Dr Walid Barto, Prof Bruce Brew, Dr Venu Chalasani, Dr Neil Cooney, Dr Paul Crea, Dr Toby Corlette, Dr Fraser Drummond, Dr Don Frommer, Dr Steven Faux, Dr Ray Garrick, Dr Laila Girgis, Dr Peter Girardi, Dr Tony Grabs, A/P John Grygiel, Dr Richard Harvey, Dr Chris Hayward, Prof Ken Ho, Dr Joanne Joseph, Dr Samuel Kuo, Dr CW Lee, A/P Reg V Lord, Dr Ken Low, Dr Romesh Markus, Dr Caitlin Matthew, Dr Kerry-Lee Milner, Dr John Moore, Dr Gary Nicholls, Dr Michael Payne, Dr Dilini Pelpola, Dr Mark Perrin, Dr Tim Ramaciotti, Dr David Robinson, Dr David Segara, Dr Eva Segelov, Dr Steven Stylian, Dr Clive Sun, Dr Ian Sutton, Dr Clement Tsang, Dr Chris Weatherall

Masterclass Coordinators: Rheumatology - A/P Milton Cohen, Plastics - Dr Russell Aldred, Cardiology - Dr David Baron, Neurology - Prof Bruce Brew, Urology - Dr Phillip Brenner, Respiratory - A/P David Bryant, Endocrine - Dr Jacqueline Center, Orthopaedics - Dr Brett Courtenay, Gastroenterology - Dr Don Frommer, Vascular & Surgical Anatomy - Dr Tony Grabs, Hematology - Dr John Moore, Oncology - Dr Eva Segelov, Nephrology - Dr Jacob Sevastos

YEAR 4

Clinical Rotations
- Heart Lung Vascular: Cardiology, Thoracic Medicine, Cardiothoracic Surgery, Vascular Surgery and Vascular Medicine. Coordinator - Prof Peter Macdonald
- Oncology & Cell Biology: Medical Oncology, Radiation Oncology, Palliative Care, Surgical Oncology, Anaesthetics and Bioethics. Coordinator - Dr Sam Milliken
- Neurosciences and Plastic Surgery: Neurology, Neurosurgery, Plastic Surgery and Ophthalmology. Coordinator - Dr Paul Darveniza
- GI Medicine, GI Surgery, Nephrology, Urology. Coordinator - Dr Don Frommer
- Ambulatory Medicine and Orthopaedics: Endocrinology, Clinical Pharmacology, Rehabilitation Medicine, and Orthopaedics. Coordinator - A/P Milton Cohen
- Population Health (off SVCS campus)
**Scheduled Teaching:**

- **Procedural Skills:** Venepuncture; Sterile gown and glove; Basic Life Support; Measurement and interpretation of non-invasive blood pressure; Performance and interpretation of a 12 lead ECG; Ordering fluids; and the establishment and maintenance of an intravenous line; Use of the ophthalmoscope; Intramuscular + subcutaneous injection; Peak flow and spirometry; O2 therapy & interpretation of parameters; Placement and removal of a plaster cast; Application of sutures, including knot tying, and clips; Rectal examination

- **Surgical Bedside Tutorials:** run fortnightly in St Vincent’s Private Hospital. Tutors: Dr Peter Bentivoglio, Dr Michael Jensen, A/P Michael Neil, Dr Terrence O’Connor, Dr Stephen Quain, Dr John Rooney

- **Pathology, including Morgue visits:** Tutors: Dr Wade Barrett, Dr Anthony Dodds, Dr Andrew Field, A/P Jock Harkness, A/P Nick Hawkins, Dr Joanne Joseph, Dr Chris Jones, Dr Debbie Marriott, Dr Sam Milliken, Dr Adrienne Morey, Dr John Moore, A/P Bill Sewell

- **Lecture series in Ophthalmology:** Tutors: (attendance at Private Consulting Rooms and Theatre) Dr Jenny Danks, Dr Michael Delaney, Dr Ross Fitzsimons, Dr John Kennedy, Dr Dennis Lowe, Prof Peter McCluskey, Dr Brett O’Connell, Dr Justin Playfair, Dr Raj Shah

- **Common campus teaching:** 2005 was the final year that this program was mounted. Many SVCS were Day Coordinators or guest lectureres. The entire program was filmed and will be available for 2006 students on DVD.

**YEAR 6**

**Clinical Rotations**

- **Elective term**

- **Surgery** (based at St Vincent’s Private Hospital): Cardiothoracic and Vascular Surgery; Orthopaedics; Neurosurgery; Plastic Surgery; Urology; Upper & Lower Gastrointestinal Surgery; Surgical Oncology / ENT. Includes sessions in consultant rooms in St Vincent’s Clinic. Coordinator - A/P Michael Neil

- **Medicine:** Cardiology; Diabetes and Endocrinology; Gastroenterology; Geriatric Medicine; Haematology; HIV Medicine and Immunology; Medical Oncology; Nephrology; Neurology; Thoracic Medicine. Includes sessions in consultant rooms in St Vincent’s Clinic. Coordinator - Prof Terry Campbell

- **Critical Care:** ED, ICU including Sydney Hospital. Coordinator - A/P Gordian Fulde

- **Rural:** Bowral, Port Macquarie, Wagga Wagga, Albury,

- **Flexible:** Cardiothoracic Investigations; Diagnostic Methods; Drug & Alcohol; Infectious Diseases / STD / HIV / Microbiology; Palliative Care. Various Term Coordinators

**Scheduled teaching:**

- **Therapeutics sessions** - weekly

- **Interactive topic teaching**

- **Lecture series in Radiology**

- **Clinical Skills:** Advanced Life Support, Wound Care Management

- **Common campus teaching**

- **Bedside small group medicine and surgical tutorials** (alternating weekly). Tutors: Dr Sandy Beveridge, Prof James Biggs, Dr Ronald Bova, Dr Malcolm Bowman, Dr Jeon Cha, Prof Ric Day, Dr Douglas Fenton-Lee, Dr Emily Grainger, Dr Tony Grabs, Dr Andrew Jabbour, Dr Mark Nicholls, Dr Gareth Owens, Dr Marshall Plitt, Dr Vid Pinge, Dr John Raftos, Dr Eva Segelov, Dr Jacob Sevastos, Dr Alina Stoita
Year 6, 2005

Front Row (L to R): Charles Chan, James Toh, Ming-loon (Paul) Leong, Bjarte Sorensen, David Goh, Gavin Soo, Henry Soeharno, Wei-Han Tay

Second Row: Hester Lieng, Jia Jia Ye, Meisha Synnott, Vicky Lu, Jane Phelps, Benjamin McGrath, Danette Long, Jane Li

Third Row: Dr Eva Segelov, Professor Terry Campbell, Khuong Nguyen, James Yeates, Trine Gulholm, Clare Suttle, Ada Ng, Jessie Huang, Shirley Yu, Emma Rosenfeld, Chih-Hsien Kuo, Suyen Ho, Helena Martin, Charmaine Wong, Sheila Cheng, Kesley Pedler, Jennifer Kim, Dr Tony Grabs

Back Row: Edwina Menzies, James Wykes, David Skalicky, Phillip Lee, Carrie van der Weyden, Peter Yu, Felicity Bowen, Professor Ric Day

Absent: Anna McNaught, Madeleine Maguire, Cheuk Lee, Rajay Rampersad

Vicky Lu, Jane Phelps, Jessie Huang & Sheila Cheng

Charmaine Wong, Dr Andrew Jabbour & Bjarte Sorensen

Hester Lieng, Suyen Ho, Madeleine Maguire, Bjarte Sorensen, Dr Meagher & Dr Hayward

Gavin Soo, David Goh, James Wykes & Charles Chan
Year 6 Farewell Dinner

The Year 6 farewell dinner has always been one of the highlights on the social calendar, and 2005 was no different.

This year, the occasion took place at Alio, a trendy little restaurant, in a night of excellent food and fabulous company. Doctors and clinical school staff alike took the trek from Vinnies to East Redfern to celebrate the end of a hard year’s work, and to mark the beginning of our fledgling medical careers.

Dr Chris Hayward and Dr Alan Meagher scooped the best medical and surgical tutor awards respectively, the deciding factors being “non-punitive teaching” and “great bedside manner”.

Certainly this reflects their undisguised enthusiasm for both medicine and teaching, and hopefully their advice and dedication will continue to inspire us for many years to come.

Kesley Pedler received the Best Surgical Student award, while Carrie Van der Weyden well-deservedly won both the Best Surgical Presentation award and also Best Surgical Student award.

It was a great night, and what made it so were the people. The people who helped us organise events, the people who helped us from viva practise to tutoring to prep talks. We all know that 6th year is tough, and surely we wouldn’t have weathered it so well if it weren’t for the support and time of those around us.

The party and merriment continued down the street after dinner, and throughout the weeks to come as we enjoy the last long holiday for goodness knows how long…

- Vicky Lu
Year 6 Representative
Elective Clerkships Overview

St Vincent's Clinical School regularly hosts International/Australian undergraduate elective students under the UNSW Faculty of Medicine Clinical Clerkships Scheme. St Vincent's Clinical School offers an excellent learning opportunity in the heart of Sydney and close to the University of New South Wales. Places are highly sought after and must be applied for well in advance (at least 1 year) through the UNSW Faculty of Medicine.

This year we hosted 41 students from all around the world including the UK, USA, Austria, Japan, New Zealand and various states around Australia. On the whole they rated their experience at St Vincent’s as good to excellent, with comments like:

- **Sandeep Prabhu (Monash University, Melbourne Australia):** Very helpful Residents and Registrars. [There was an] openness for all staff to assist in learning, and an ease of taking advantage of opportunities as they arise.

- **Shahbaz Roshazamir (Guys, King’s & St Thomas, London UK):** Friendliness, great hospital, great weather, great city!

- **Christine Williams (The University of Edinburgh, UK):** One aspect I really valued on my placement was the feeling that I was working as part of a team. I was always informed of interesting cases and I really enjoyed my time spent off the ward in surgery and seeing cardiac function tests performed.

- **Ellen McKernan (Queens University, Belfast UK):** Excellent teaching school, and I am extremely grateful for having the opportunity to carry out part of my studies here.

The students undertook their Elective term in the following specialties: Anaesthetics, Cardiology, Cardiothoracic Surgery, Accident & Emergency, Endocrinology, ENT, Gastroenterology, Geriatrics, IBAC HIV, ICU, Neurology, Orthopaedic Surgery, Orthopaedics, Palliative Care, Plastic Surgery, Thoracic Medicine and Vascular Surgery.

A full list of the specialties available at St Vincent’s along with further information can be found at: [http://www.med.unsw.edu.au/medweb.nsf/page/Clerkships](http://www.med.unsw.edu.au/medweb.nsf/page/Clerkships).

For more information, staff and students should contact Mr. Peter Herring, Clerkships Coordinator for the Faculty of Medicine on telephone number (02) 9385 2452 or email p.herring@unsw.edu.au

**Please Note:** All students must apply formally, as it is mandatory to have criminal record checks etc. This takes time, so that applications need to be made at least one year in advance. Tutors, please do not accept students for UNSW placements outside these arrangements.
In July this year, after 2 years of clinical training at the Wagga Wagga campus of the School of Rural Health, I was given the opportunity to spend a 6 week rotation at St Vincent’s Hospital in Critical Care. It would be a metropolitan rotation to complement my rural training. My memories and highlights of St Vincent’s are numerous.

From my first day at St Vincent’s I was warmly welcomed by the staff at the Clinical School. I soon realised I would be spending a fantastic 6 weeks in Critical Care with a brilliant bunch of students and some very keen and helpful teaching staff.

The Critical Care term at St Vincent’s was a magnificent learning experience. The term was highly structured with a busy, but very organised array of focused tutorials and teaching sessions. I enjoyed a wonderful opportunity to enhance my practical skills while in the Emergency Department of St Vincent’s and Sydney Hospitals.

Sydney Hospital was a particularly enjoyable experience. Who’d believe there would exist a ‘rural-like’ hospital in the centre of bustling Macquarie Street? Quite a contrast, yet a good one. I was fortunate enough to run into a senior Ophthalmology registrar who showed me an excellent day in the Sydney Eye Hospital.

In addition to working with a bunch of new and different students and academic staff, I really appreciated the opportunity to be exposed to some of the pathology that a tertiary teaching hospital offers – especially in the fields of neurosurgery and cardiac surgery. Further, the demographics of St Vincent’s enabled me to be exposed to some different and interesting pathology – three cases of infective endocarditis in one week is pretty impressive!

My time spent as St Vincent’s was a pleasure. Many thanks goes out to the students, teaching staff and Clinical School staff for being so welcoming and providing me with a memorable clinical rotation. I look forward to returning to St Vincent’s Hospital in the future as a part of my post-graduate training.

- Ben Brabin
Year 6 Rotation Student from Wagga Wagga
The giving of constructive feedback to students in clinical placements has long been an issue, with students finding the end of term forms unsatisfactory. One problem is that students interact with multiple team members, and coordination of feedback is therefore difficult.

We were thrilled to receive a 2005 Learning and Teaching Award from UNSW for our research project “Evaluation of the “RIME” protocol as an assessment tool for students involved in multidisciplinary clinical teaching in the Faculty of Medicine, UNSW”, submitted by the following Investigators: Eva Segelov, Tony Grabs, Joanne Brien, Leah Bloomfield, Anne Fallon, Michael Neil and Liang Joo Leow. The research funding was used to employ a research coordinator, Dr Alix Magney, to facilitate the trial of the RIME protocol.

What is RIME?
The “RIME” scheme was developed in the USA. “RIME” refers to the observable elements of the student’s clinical performance: “Reporter” “Interpreter” “Manager” and “Educator” (adapted to Evaluator in our schema). There are two key elements to the scheme: the “RIME” assessment tool itself and the way it is used. The assessment tool provides a transparent, clinically meaningful framework for observers to make criterion referenced descriptions of a student’s development. The way it is used is that all those who have observed a student’s performance convene for a brief (15 minute) facilitated, round-table conference at which they use the RIME framework as part of a formal process for reporting their observations. Before the end of the meeting, they agree on a summary of specific aspects of performance which are commendable, satisfactory or for improvement. One member of the team is elected to give the group’s feedback to the student, in a constructive manner. It can be used formatively and summatively and is particularly helpful in detecting the borderline performer at a stage when remediation is possible.

The RIME Trial
After receiving Ethics clearance, we ran our first RIME trial with a group of Year 4 volunteers in the Neurology/Plastic Surgery rotation. There were a number of logistic problems encountered, not unexpectedly, in assembling participants for the round table conference. Nevertheless the Clinical staff who participated all felt that RIME was a potentially useful assessment tool. A number of modifications have been made to make the program more suitable. The initial experience has been reported on at a number of University Learning and Teaching workshops.

Comments from Student Feedback on RIME
Overall, the students enjoyed being part of the RIME trial. They found that the: feedback was useful. A number of students reported increased initiative to study more and spend more time on the wards. All the students wanted to participate again and were keen for more feedback, many even suggesting that they would like a mid-rotation round table conference.

RIME in 2006
RIME appears more suitable to Year 6 in the current programme, and eventually Phase 3 of the New Medicine Program. Next year, we will call for volunteers during the Surgery term at St Vincent’s Private Hospital, and some of the year 6 Medicine and Elective terms. A final report is due mid year to the UNSW Learning and Teaching Award committee.
Phase 1

Clinical teaching in the New Medicine Program begins in the first week of student teaching (Day 1 for some students!). In 2005, St Vincent’s hosted 15 groups of 7 students each, who attended once per fortnight for a 2 hour structured clinical session taken by GP sessional teachers. All the GP teachers had undergone training and participated in regular update and feedback sessions.

The clinical sessions alternated with complementary communications sessions on the Uni campus. Students rotated through courses based on the life cycle domains of the program:

- **Foundations (learning how to learn)** - Year 1 students
- **Ageings and Endings** (focus on neurological system)
- **Society and Health** (focus on musculoskeletal system and skin)
- **Beginnings, Growth and Development** (not taught at St Vincents Clinical School but taught by many of our tutors at Sydney Children’s Hospital)
- **Health Maintenance** (GI and focus on renal system)

An exciting and innovative aspect was the vertical integration of groups after the 1st course. The mix of Year 1 with Year 2 students worked well, as the material was new to all students, being the 2nd year (cycle B) of the Phase 1 program. Tutors reported excellent group dynamics and peer support within the mixed Year 1 and 2 groups.

In 2006, many of the GP tutors will continue to take groups, but will be complemented by some ‘old Year 3’ tutors. There will also be a need for SVCS to provide scenario group facilitators at the UNSW campus. Although this is a 2x2 hour commitment for 8 weeks, it is a very rewarding and exciting experience. We can even organise parking for you, so don’t hesitate to contact me if you would like to participate!

Once again, thank you to all involved in this highly successful program. Looking forward to hosting the Phase 1 barrier exam in May 06 and then having the first students move through into Phase 2!

- Dr Eva Segelov
  Phase 1 coordinator, St Vincent’s Clinical School
Phase 1 Trial Exam

In July 2005, St Vincent’s Clinical School ran the Phase 1 Clinical and Communications Skills Trial exam for the entire Faculty. This was a challenging and rewarding experience, with St Vincent’s staff involved in all aspects, from designing the exam, writing the scenarios and tasks, recruiting volunteers and patients, and of course examining the students.

Highlights included:
- New on-line booking system where students self-selected their exam time
- Combination of history taking, some aspect of physical examination, performance of a procedural skill (e.g., BP, peak flow) at each station
- Extensive use of surrogate (volunteer) patients trained for various scenarios
- Examiners included allied health professionals (e.g., midwives) and communication tutors, all who had been involved in teaching of the course
- New assessment form to assess communication and clinical competence

Extensive feedback was obtained from students, patients and examiners. Almost all comments were positive, and students appreciated the opportunity to have a ‘practice go’ as 2006 will be the first time this new format will be used as a barrier assessment in the New Medicine Program.

Sample of Volunteer comments:
- Impressed with the students “beside manners” - all very pleasant
- Very interesting insight into the training of medical students
- Enjoyed the experience (several comments)

Sample of student comments:
- I thought that the clinical exam was very well organised. The scenarios given were very relevant. Setting was excellent. What expected for us was just right. Overall it was a very interesting exam.
- The test helped me realise that I need to practice my clinical skills. It was a very good learning experience of one to one conversation with the patient.
- It was very good practice, good to know what the real exam will be like. It was hard but interesting.
- I think the trial examination was very helpful and enriching. I gained a good experience of the feel of a clinical exam, and what would be required of me. The simulations were very realistic and doctors were very helpful in guiding.
- Was a fabulous learning experience. A wake up call.
- I found this to be useful to determine what I did and didn’t know. It was very extensive. Definitely need revision of the motor system and neurological exam.
- It was all relevant but I simply forgot how to do certain things.

As a result of the Trial, a number of recommendations were made:
- A comprehensive student guide to clinical examination was published
- The Clinical and Communication Program Element was adapted to incorporate more peer examination and supervised patient examination, aided by the establishment of an on-campus centre commissioned for this purpose
- The structure for the barrier Phase 1 exam was set, to be held at St Vincent’s and POW Clinical Schools in May 2006.
- Sample scenarios and model answers were supplied to students

A full report can be found on: http://stvcs.med.unsw.edu.au/stvcs.nsf/website/newsevents.publications
**Year 4 2006**

The last cohort of students enrolled in the ‘old course’ (Medicine 3801) completed Year 3 in 2005 (hence, the last time that course will be run). These students will progress to a “hybrid” Year 4 in 2006, where students will rotate through 3 of the New Medicine Program courses:

- Ageings and Endings
- Health Maintenance
- Society and Health

As well as two of our traditional Year 4 terms:

- Medicine - Neurology/Neurosurgery/Plastics
- Surgery - Orthopaedics/Ambulatory Care/Pharmacology

Until May, the Year 4 students will rotate through the terms in groups of 7. After this time, Phase 2 will start and the Year 4 students will be mixed with Phase 2 students for the Ageings and Endings, Health Maintenance and Society and Health terms.

**Year 4/Phase 2 Courses 2006**

*Terms take place in any order*

<table>
<thead>
<tr>
<th>Year 4 (Medicine 3801)</th>
<th>Surgery (Orthopaedics &amp; Ambulatory Care)</th>
<th>Clinical School Mon-Fri</th>
<th>Phase 2 (Medicine 3802)</th>
<th>Society &amp; Health</th>
<th>UNSW Main Campus</th>
<th>Phase 1 Exams</th>
<th>2007</th>
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<tbody>
<tr>
<td>Summer Teach Period 16 Jan - 12 Mar 06</td>
<td>Teaching Period 1 13 Mar - 14 May 06</td>
<td>Teaching Period 2 15 May - 9 Jul 06</td>
<td>Teaching Period 3 24 Jul - 17 Sep 06</td>
<td>Teaching Period 4 3 Oct - 24 Nov 06</td>
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<td>Clinical School Mon-Wed &amp; Fri (Uni Campus on Thu)</td>
<td>Clinical School Tue - Fri (Uni Campus on Mon)</td>
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<td>Society &amp; Health</td>
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<td>Phase 1 Exams</td>
<td>2007</td>
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</table>

**Phase 2**

2006 sees the commencement of Phase 2 of the New Medical Program at St Vincent’s Clinical School. The domains of Health Maintenance (HM) and Ageing & Endings (AE) will be taught at the St Vincent’s campus, commencing on the 16th January 2006. The HM and AE courses are both eight weeks in length and will be offered five times a year aligned with university terms.

Year 4 students from the 3801 program will commence the year in mid January (Summer Teaching Period and Teaching Period 1) and they will then be joined by the new curriculum students (Medicine 3802 course) in Teaching Period 2.

Each week in both courses has a central theme with three days being spent at St Vincent’s Clinical School and the other two being spent at The University of New South Wales campus. The highlight of the week’s activities will be the case method tutorial. The teaching technique pioneered at the Harvard Business School allows students to deeply explore a prepared case centred in the weekly themes. The case will be available to the students at the beginning of the week to allow students to prepare for the group discussions.

St Vincent’s Hospital will be playing a major role in the trauma week in Health Maintenance, providing to all UNSW students a mini emergency management of severe trauma course at the St Vincent’s Patient Safety Simulation Centre. This will be under the direction of Professor Don Harrison and A/Professor Gordian Fulde.

We all look forward to your participation in the new medical course to enable St Vincent’s to maintain its high standard of medical student education.

- Dr Tony Grabs
The Independent Learning Project (ILP)

2006 promises to be an exciting year on many fronts, not the least because of the commencement in June of the first cohort of students undertaking their ILP. About 100 students within the Faculty of Medicine will commence their projects, following successful completion of Phase 1 (pass required at the barrier exams in mid May). The projects will run over 32 weeks, with 16 weeks full-time and 16 weeks part-time. During the latter, students will have to complete 12 units of credit in a Faculty outside Medicine. This can be in a field related to their project, eg statistics, ethics, etc.

In September 2005, supervisors were asked to submit an outline of projects they wished to offer. At St Vincent’s, this was preceded by a long campaign of publicity to involve as many supervisors/groups as possible, representing a broad spectrum of research, from basic science to clinical audit, epidemiology and ethics.

By January 2006, students will have “bid” for their preferred project from the selection available on the ILP website. Students can pick a project in any Campus or Clinical School or Department. The capacity to negotiate a unique project with a supervisor of choice is also available to students. All projects (submitted and negotiated) are subject to review by the ILP panel. Dr Joanne Joseph represented SVCS on this panel until October 2005, when I took over after Joanne accepted a full time clinical hematology position. The ILP committee was appropriately diligent in ensuring the projects were robust, as it is particularly important that both students and supervisors engage well in this program., so that all projects are satisfactorily conducted and completed fully.

SVCS has been able to offer a large and diverse number of projects, listed below, reflecting the commitment of our academic and conjoint staff. Feel free to also browse the stimulating collection of projects on the web. Thanks to all of those who submitted projects, and may I encourage those now inspired to start thinking of a project to submit for the 2007 ILP students.

- Eva Segelov

The following extracts of projects offered at St Vincent’s have been taken from the ILP website:

**Regulation of Herg K+ Channels**
A/Prof Jamie Vandenberg

Ion channel proteins are critical for regulation of the rhythm of the heart beat. We are using molecular, cellular, electrophysiology and mathematical modeling techniques to study how cardiac ion channels, in particular HERG K+ channels work. The aim is to investigate the molecular basis of the voltage-sensitivity of inactivation in these channels. The student will learn molecular techniques (making mutant channels) and characterise the mutant channels using two-electrode voltage clamp techniques.

**Clinical Utility of a Recently Introduced Diagnostic Algorithm for Exclusion of Pulmonary Embolism**
Dr Joanne Joseph

This study evaluates the clinical utility of a recently introduced diagnostic algorithm (measuring D-dimer combined with a clinical scoring system) for the exclusion of pulmonary embolism. This information will be vital for assessing the overall performance, effectiveness and validity of the algorithm.
**Accuracy of Self-Reprotoed Family History in the Assessment of Colorectal Cancer Risk**

**A/Prof Nick Hawkins**

The study will be based on 1000 patients who have undergone surgical resection of colorectal cancer and 60 individuals enrolled prospectively. Work will include the development of clinical skills in history taking with respect to familial cancer and in the accurate representation of family history through the use of pedigrees and related software, during clerkship within the Family Cancer Centre, St Vincent’s Hospital.

**Detection of Novel Surface Markers on Lymphomas and Leukaemias**

**A/Prof William Sewell**

This research has the potential to identify new markers that may be useful in the flow cytometric classification of lymphoproliferative disorders, as well as assessment of prognosis. The markers under study are growth factor receptors. It is therefore possible that inhibition of receptor function may be a therapeutic target in these leukaemias and lymphomas.

**Optimizing the Dosage of the Anti-Gout Drug Allopurinol**

**Prof Ric Day**

This study examines the ill defined pharmacokinetics of oxypurinol in patients with gout, to improve the recommended dosage schedules of allopurinol for long-term treatment. The student will assist in collection of blood and urine from patients and will assay plasma and urine samples for oxypurinol.

**Prevention of Pedestrian Injuries in Urban Populations**

**Dr Steven Faux**

The aim is to examine injury profile, morbidity and mortality of adult pedestrian injuries due to road transport accidents and relate this to motor vehicle, environmental and pedestrian factors. This project seeks to match patient data with Police data, details from the Bureau of Meteorology and other environmental information relating to the time of the injury, to assist in developing preventative strategies.

**Functional Outcome Following Total Joint Arthroplasty**

**Dr Brett Courtenay**

The aim is to determine the functional outcome of Total Joint Arthroplasty, in particular hip and knee replacements, using SF36 and WOMAC questionnaires. Joint replacements are increasing at over 7% per year and represent a significant cost to the community. For the majority they represent good value for the resources used, however some patients do not benefit as much. Our aim is to define these groups.

**Laboratory Diagnosis of Acute Pancreatitis**

**Dr Graham Jones**

The project studies biochemical markers of acute pancreatitis. It involves an audit of the laboratory results for serum amylase and lipase, correlation of biochemistry results with other clinical and imaging findings, and updating of clinical supporting information on these tests on the hospital intranet.
Patterns of Medication Use in Cancer Patients Receiving Palliative Care
A/Prof Richard Chye
The aim is for the student to learn appropriate prescribing in palliative care and to understand the quality improvement cycle, in particular drug use evaluation. Steps include an audit of medication usage in the palliative care hospice setting, analysis of concordance between the audit findings and best practice and identification of areas in which prescribing practice could be improved.

Quality Assurance Pre and Post Intervention Assessment of Current Medical Enrollees within St Vincent’s Institute for Minimally Invasive Surgery “MIST”
Dr Vince Lamaro
We utilise both inanimate fibreglass simulated patients and a computer simulated training device called the MIST system to train surgeons in laparoscopic surgical techniques. This project analyses the effectiveness of these training programs and involves running trainee simulation assessments and collecting performance target data, to produce an objective scoring system and identifiable benchmarks for safe clinical performance.

Injuries Sustained in Falls from Low Heights
Dr Judy Alford
Patients injured after falls from <3 metres height often have long bone fractures and intracranial trauma. The Trauma Database collects information on all patients admitted following trauma and all patients receiving a Trauma page notification. Students will be involved in data entry and analysis to look at patterns of injury related to age, specific mechanism, substance use and other variables.

Development of a Controlled Physical Exercise Programme for Patient Undergoing Adjuvant Chemotherapy for Bowel Cancer
Dr Eva Segelov
Exercise has been shown to improve wellbeing, physical and psychological state and even survival of cancer patients. This project will involve surveying patients undergoing adjuvant chemotherapy for bowel cancer with regards to their exercise tolerance/capacity and attitudes towards exercise during treatment, then piloting of an exercise program with evaluation of tolerability and acceptability with appropriate supervision in the Healthy Lifestyle Clinic at UNSW.

Major Orthopedic Trauma from Motor Vehicle Accidents - A Descriptive Study of Acute in Hospitalised Population
Dr Steven Faux
Aims:
1. To described patterns of fractures sustained in MVA presenting to the emergency department.
2. To identified the timing of diagnosis of all fractures through the trauma assessment period
3. To collect data on analgesic use for fractures in the management of trauma for MVA.
4. To describe services provided by Allied Health to such patients.

Validation and Use of a Method of Assessing Small Bowel Cleanliness
Dr Don Frommer
Capsule endoscopy involves the patient swallowing a miniaturised television camera which transmits pictures during an approximately 8-hour period. One problem with this technique is that the epithelium of the small
intestine is quite often not easily seen. The aim of this study is to validate a method which evaluates the degree of impairment of visibility of the small intestinal mucosa during capsule endoscopy.

**Alcohol related presentations & Amphetamine related presentations**  
**Dr Judy Alford & A/P Gordian Fulde**

The Emergency Department is setting up a TOXBASE programme to record data on those presenting with Drug and Alcohol related complaints. Students will be involved in data entry as well as clinical reviews of patients with registrars and specialists. They will look at how rates of attendance vary through the year; how various drugs affect the patients; psychosocial factors in drug use and presentation to hospital; legal aspects of drug testing and public perceptions of drug use.

**Antibiotics- ensuring the Quality Use of Medicines**  
**Prof Jo-anne Brien**

In 2004, St Vincent's Hospital adopted a new Antibiotic Policy, which guides prescribing of all antibiotics. This project involves an audit of prescribing of selected antibiotics through identification by Department of Microbiology and Pharmacy records and chart review, to ascertain clinical outcomes. This may lead to development of recommendations for ongoing policy implementation strategies.

**Decision making about patient treatment and care**  
**A/Prof Bernadette Tobin**

Research Question: Who makes decisions for the patient, based on what principled standard, with what oversight and review. Hypothesis: That the contemporary ideal of respecting patient autonomy is unrealistic when assessed against the complexity of actual decision-making in health care settings. The project involves interviews with patients, their families and staff.

**Outcome of patients undergoing a curative program of chemotherapy and surgery for oesophagogastric cancer**  
**Dr Eva Segelov**

Aim: To audit the current therapeutic strategy of treating patients with operable adenocarcinoma of the lower oesophagus and stomach with neoadjuvant chemotherapy then surgery then adjuvant chemotherapy, in order to assess efficacy, toxicity and outcome of patients undergoing this program.

**Simulation-based skills and teamwork training during Critical Care Rotations – can we produce more competent doctors?**  
**Dr Martin Duffy**

St Vincent’s Hospital has developed a state-of-the-art Simulation Centre. Simulation is developing a major role in skills training ranging from intravenous line placement to advanced airway techniques and life-saving procedures e.g. intercostal catheter placement. It also appears to have major advantages in teamwork training. This project will develop skills training and teamwork training modules for undergraduate and postgraduate students.

**Critical role of the medical department of a pharmaceutical company in achieving quality use of medicines (QUM)**  
**Prof Ric Day**

Medical departments in multinational pharmaceutical companies are responsible for the accuracy and balance in marketing and promotional activities. This project will test the hypothesis that quality use of the medicines of a pharmaceutical company is sensitive to the effectiveness of the medical department, using interviews
and focus groups to explore values, attitudes, understanding, skills and processes within pharmaceutical companies.

**Description and formulation of an optimal prescribing curriculum for Australian medical students**  
**Dr Eva Segelov**

Despite guidelines on what constitutes good prescribing, multiple prescribing errors persist in clinical practice. Much has been written about how prescribing could be better taught and learned, but an optimal curriculum is not defined for the Australian medical student. This project will foster understanding of the complexity of prescribing (use of evidence based medicine; Quality use of Medicine; insight into prescribing errors) by using innovative education and training techniques to design a curriculum.

**Understanding the motivation of persons who have participated in a clinical trials and Understanding the value of clinical trials: volunteer and patient perspectives**  
**A/Prof Ken Williams**

Only a small proportion of patients participate in clinical trials even for life-threatening or incurable conditions. The aim of these projects is to better understand the motivation of persons who have participated in clinical trials (3 groups: healthy volunteers, patients on a Phase III trial of osteoarthritis medication and participants in an acute intervention study) and study how their expectations coincide with their actual experience.

**Phase 3, New Medicine Program**

This year saw continuation of preparations for the Phase 3 component of the new medical curriculum of the University of New South Wales. Here at St. Vincent’s Clinical School, we have been organising the available resources and consulting with the appropriate consultants of the various subspecialties, so that the prospective students will have available to them terms that will cover a significant proportion of the spectrum of the syllabus.

Thus far we have been able to structure approximately 20 clinical modules at St. Vincent’s, and in the near future will be formulating an exemplary document outlining the prerequisite knowledge, specific clinical and procedural objectives, the graduate capabilities, a timetable and an assessment form, that will be distributed to each of these potential term supervisors for their appraisal and modification.

Prospectively, Phase 3 will be exciting for both student and tutor, and avails itself to the excellent teaching/learning ethos that is already solidly founded at St. Vincent’s. The one-to-one relationship of student to tutor will allow for flexible programming, innovation, close observation, and integration of all aspects of each clinical specialty, including its basic sciences.

Here’s hoping for a fruitful Clinical Year 2006.

– Dr Jacob Sevastos
Pro-Vice Chancellor Visit

St Vincent’s Clinical School hosted a visit from the Pro-Vice Chancellor (Education & Quality Improvement), Professor Adrian Lee, and Ms Michelle Scoufis (Director, Learning & Teaching Unit, UNSW) on 23 November 2005. The visit allowed for the discussion of the distinct and significant challenges of teaching in the Clinical Schools.

After meeting with the Clinical Academics and several conjoints, the Pro-Vice Chancellor and Ms Scoufis toured the Clinical School facilities, including the Clinical Teaching Areas, the Patient Safety Simulation Centre, Emergency Department and Private Consulting Rooms in St Vincent’s Clinic. Then it was back to the Clinical School where they met with Year 6 Students, for a full and frank perspective on learning and teaching within the hospital environment.

The visit was highly appreciated by SVCS staff, and Professor Lee and Ms Scoufis expressed their thanks for a very stimulating and interesting exposé of clinical teaching.

Congratulations to A/Professor Kay Wilhelm who was awarded the Founders’ Medal of the Australasian Society for Psychiatric Research (ASPR). The medal is awarded to persons who, over their entire career, have made a contribution of significance to psychiatric research.
In 2005, the Simulation Centre continued its collaboration with the Clinical School in providing sessions for medical undergraduates. Topics covered here:

- non-invasive measurement of blood pressure
- subcutaneous, intramuscular and intravenous injections of medications
- preparations for intravenous fluid administration
- skin suturing
- Basic Life Support (BLS)
- Introduction to Advanced Life Support (ALS)

With each topic, skill simulators were used to develop hands-on skills. Basic Life Support and introductory Advanced Life Support which integrate several skills, were facilitated by Marea Reading RN and Alex Pile RN. The Centre also participated in the end of year examinations by providing space as needed.

Extensive refurbishment of the Simulation Centre occurred in the second half of the year bringing it physically to a state in which advanced scenarios can be mounted in a manner similar to the well established centers in Australasia. During the refurbishment the Centre conducted its sessions in the Clinical Teaching Areas areas adjacent to the Centre. We are grateful to the Clinical School for assistance during this difficult period.

As the new undergraduate curriculum rolls out, there will be increasing need for the facilities of the Simulation Centre. The physical changes will facilitate self-directed learning experiences as well as allow small and large group involvement in simulation exercises.

- Professor GA (Don) Harrison

Patient Safety Simulation Centre Coordinator

Procedural Skills Training

Remember your first day as an intern when you were asked to put in cannulas, do lumbar punctures, ascitic taps etc and you had never done them before? I do- and the memory is still frightening for me (let alone the poor patients!). Simulated clinical skills training has changed all that. Improvements in technology have allowed development of very lifelike models for a whole variety of procedures, from venepuncture and cannulation through to suturing, urinary catheterization and PR examination, LP, joint aspiration etc.

At St Vincent’s, we are fortunate to have a close working relationship with the Patient Safety Simulation Centre and have bought a number of models and co-developed training sessions around these. On a Faculty level, a comprehensive formal procedural skills training program has been implemented throughout the old and new curriculum, with skills being both taught and assessed. A variety of teaching methods are used, including self access modules (good for background information and revision) and tutor led sessions, many of which involve and promote interdisciplinary learning and teamwork.

- Dr Eva Segelov
There are tremendous opportunities for post-graduate research at St Vincent’s Clinical School. The range of projects available covers a wide spectrum of medical research, from basic molecular biology through to clinical studies. Although most of the research students are located within Institutes and Centres, these organizations have strong links with St Vincent’s Hospital, so there are abundant opportunities for connecting new research discoveries to patient care. Projects are carried out in the Garvan Institute, the Victor Chang Cardiac Research Institute, the Centre for Immunology, the St Vincent’s Hospital Research Laboratories and the National Centre for HIV Epidemiology and Clinical Research. The projects cover a great variety of important medical problems. Areas of particular strength include cancer, immunology and HIV, cardiology, diabetes, neurology, osteoporosis and haematology.

In 2005, throughout the St Vincent’s campus, there were 76 research students actively studying for their degree. The majority of these students are science graduates studying for PhD degrees, but over one quarter are medical graduates, most of whom are studying for PhD or MD degrees. A small number of students are enrolled for Master of Science or Master of Surgery degrees. In 2005, 18 students have had their theses passed by mid-November, with 2 more expected to pass by the end of the year. Of the 18 students, 14 have been awarded a PhD, 3 an MSc and one an MD. The vast majority of supervisors are full-time researchers or St Vincent’s Hospital staff who have conjoint appointments to UNSW through St Vincent’s Clinical School.

The most important development in 2005 was the introduction by UNSW of a comprehensive Progress Report Form for research students. This will be completed by students, supervisors and review panels on an annual basis. The review panel is expected to include at least one senior researcher who is not involved in the student’s project. The extensive review process now required by UNSW is not new to St Vincent’s, where some of the research organizations, such as the Garvan Institute and the Centre for Immunology, established rigorous review procedures many years ago.

There is strong encouragement from UNSW for students to submit their PhD thesis within 4 years of enrolment, and regular assessment by a review committee is important to ensure students remain on track for a timely submission. Further support is provided by the Faculty of Medicine at Kensington, where orientation programs for research students in their first year are conducted.

For more information on Honours or Post-Graduate programs at the Faculty of Medicine at UNSW:
http://www.med.unsw.edu.au/medweb.nsf/page/Bachelor+of+Science+Honours+Program
http://www.med.unsw.edu.au/medweb.nsf/page/Postgraduate+Research+Programs

Some of the current Post-Graduate Students (Left to Right): Sue Liu, Mary Sisavan, Bennett Shurn, Carrie Fletcher, Steve Su, David Liuwantara, Eliana Marino, Hyun Lee & A/Professor William Sewell

Students awarded degrees in 2005:

- Jane Adcock MD
- Victoria Benson MSc
- Dana Blinc MSc
- Jennifer Clancy PhD
- Philip Conaghan PhD
- Lucette Cysique PhD
- Grahame Elder PhD
- Georgia Frangoudakis PhD
- Seng Gan PhD
- Gerry Greenfield PhD
- Jessica Harris PhD
- Tanya Kranenburg PhD
- Rhonda Kwong PhD
- Sue Liu PhD
- Vesna Nikolova MSc
- Ann Poynten PhD
- Rajesh Subbiah PhD
- Alan Taylor PhD

- A/Professor William Sewell
Post-Graduate Co-ordinator
STAFF LISTING 2005

Administration

Mrs Melinda Gamulin  Clinical School Manager
Mrs Jenny Heeks  Administration Officer (retired July 05)
Ms Sesil Almendrala  Administration Officer
Ms Naomi Esselbrugge  Administration Assistant (commenced July 05)

Academic

Professor Terry Campbell  Head of School & Clinical Associate Dean
Professor Allan Spigelman  Professor of Surgery (commences 31 Jan 2006)
Professor Ric Day  Professor of Clinical Pharmacology
Professor David Cooper  Scientia Professor of Medicine
Professor Richard Harvey  Professor of Medicine
Associate Professor Bill Sewell  Associate Professor of Clinical Immunology
Dr Don Frommer  Senior Lecturer in Medicine (0.5 FTE)
Dr Eva Segelov  Senior Lecturer in Medicine
Dr Anthony Grabs  Senior Lecturer in Surgery
Dr Joanne Joseph  Senior Lecturer in Medicine (0.2 FTE) (Resigned Oct 05)
Dr Jacob Sevastos  Senior Lecturer in Medicine (0.2 FTE)

Conjoint  Appointments

Professors

Samuel Breit  Paul Fagan  Ken Ho  Peter Schofield
Bruce Brew  Michael Feneley  David Ma  John Shine
Jo-anne Brien  Robert Graham  Peter Macdonald  Keith Stanley
Lesley Campbell  Gordon Harrison  Peter McCluskey  Robert Sutherland
Don Chisholm  Edward Kraegen  Michael O'Rourke (Emeritus)  Robyn Ward
John Eisman  Charles MacKay  Ronald Penny (Emeritus)

Associate Professors

Trevor Biden  Gregory Dore  James Kench  Leon Simons
David Bryant  Sally Dunwoodie  Anne Keogh  Phillip Stricker
Andrew Carr  Diane Fatkin  Reginald Lord Jr  Richard Thomas
David Champion  Gordian Fulde  Fabienne Mackay-Fisson  Bernadette Tobin
Richard Chye  Judith Freund  Andrea Mant  Jamie Vandenbergh
Milton Cohen  Allan Glavine  Adrienne Morey  Tuan Van Nguyen
W Bruce Conolly  John Grygiel  Elizabeth Musgrove  Kenneth Williams
Gregory Cooney  Nick Hawkins  Michael Neil  Steven Wilson
Peter Currie  Bernard Haylen  Christopher Ormandy
Roger Daly  Susan Henshall  Nicholas Pocock
Anthony Dodds  Herbert Herzog  Katherine Samaras
Conjoint Appointments Continued...

Senior Lecturers

Russell John Aldred
Asne Bauskin
Ian Blair
Philip Brenner
Michael Buckland
Neil Buckland
Alison Butt
Jacqueline Center
Brett Courtenay
Paul Darveniza
Michael Dawson
Martin Duffy
Peter Duval
Michael Exton
Steven Faux
Andrew Finck

Edith Gardiner
Raymond Garrick
Anthony Graham
Shane Grey
Thomas Grewal
Vanessa Hayes
Christopher Hayward
Graham Jones
Dennis Kuchar
Maija Kohonen-Corish
John Kwok
Vincent Lamaro
Ross Laybutt
Kin-Chuen Leung
Romesh Markus
Jane McKenzie
Samuel Milliken
Stephen Mistilis
Monique Malouf
John Moore
Phillippa O’Brien
Terence O’Connor
Gregory O’Sullivan
Sharon Oleskevich
Kurosh Parsi
Malcolm Pell
Sabine Piller
Marshall Plit
Thomas Preiss
Paul Preisz
Michael Rolph
Neville Sammel
Amanda Sainsbury-Salis
Elliott Savdie
Elizabeth Silverstone
Timothy Steel
Vasantha Stesin
Lun-Quan Sun
Ian Sutton
Edwin Szeto
Helen Tao
Bryce Vissel
Bruce Walker
Colin Watts
Stephanie Wilson
Alexander Wodak
Michael Wyer

Lecturers

Patricia Austin
Alexander Beveridge
Malcom Bowman
Damien Boyd
Kathryn Brooke
Gavin Chapman

Catherine Clarke
Kharen Doyle
Fraser Drummond
Suzanne Everitt
Gerald Fogarty
Mark Hicks
Christopher Jones
Michael King
Rhonda Kwong
Melanie Lovell
Philip Macaulay
Susan Marsden
Simon McErlane
Susan Parker
John Raftos
Tim Ramacciotti
Carsten Schmitz-Peiffer
David Williams

Becoming a Conjoint

If you were interested in becoming a Conjoint with UNSW for St Vincent’s Clinical School, please contact the Clinical School Staff on 8382 2023/4 or at clinicalschool@stvincents.com.au

Promotions in 2005

Congratulations to the following consultants on their promotion:

Dr Anthony Grabs
Peter Macdonald
Jamie Vandenberg
Reginald Lord Jr
Bernie Haylen

Senior Lecturer in Surgery
Conjoint Professor
Conjoint Associate Professor
Conjoint Associate Professor
Conjoint Associate Professor
## Orientation

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<tr>
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## Phase 1 (Year 1 & 2)

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## Phase 2 - Commences May 2006

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## Year 4 (Hybrid Program)

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<td>15 May – 9 July 2006 (Integrated with Phase 2)</td>
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<tr>
<td>Mid Year Break</td>
<td>10 July – 23 July 2006</td>
</tr>
<tr>
<td>Teaching Period 3</td>
<td>24 July – 17 September 2006</td>
</tr>
<tr>
<td>Recess</td>
<td>18 September – 2 October 2006</td>
</tr>
<tr>
<td>Teaching Period 4</td>
<td>3 October – 24 November 2006</td>
</tr>
</tbody>
</table>

## Year 6

<table>
<thead>
<tr>
<th>Event</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching Period 1</td>
<td>Elective – Variable dates</td>
</tr>
</tbody>
</table>
| Teaching Period 2               | Hospital Program 20 February – 2 April 2005!
|                                 | 3 April – 9 April 2006                 |
| Teaching Period 3               | Hospital Program 10 April – 21 May 2006!
| Recess                          |                                         |
| Teaching Period 4               | Hospital Program 22 May – 2 July 2006   |
| Campus Program                  | 3 July – 14 July 2006                  |
| Recess                          | 15 July – 23 July 2006                 |
| Teaching Period 5               | Hospital Program 24 July – 3 September 2006!
| Teaching Period 6               | Hospital Program 4 September – 13 October 2006! |